

Miscellanea

Medical Examinations : The Student's Point of View

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Once a medical student asked a law student as to why was it that the medical examinations are so difficult to pass while the law examination so easy. The law student answered; because if the lawyer commits an error of judgement there is still a judge who can intervene before a culprit goes to gallows, while an error on the part of a medical man send the patient to heaven by the easiest route. In essence this statement is true and it also emphasises why no half baked doctors can be let loose on the public. The wonder to the medical student, however, is that if he has gained admission to the medical college after a proper competition and a through selection then why should he be faced with more chances of failing rather than passing in his medical examinations. This question has been often asked, and often replied, but the student has never been satisfied either by answer or by the remedies. To the student it would appear that either the curriculum is defective, or teaching, for otherwise why should he be turned dullard overnight from the brilliant body that he had been.

The crux of the problem is that unwieldy medical curriculum. A medical student has become over-worked universally. Whether one is educated in the rigid system of the English universities or in the more liberal school of America, there is no escaping the truth that the modern medical student has to learn more and more factual knowledge within a conventionally fixed time. For efficiency the medical curriculum should be pruned every few years- a task Herculean in character and which led a frustrated dean to remark "it is easier to change a cemetery than to change a medical curriculum." The only way in which a student can cope is by cutting down on his leisure time. This should and does lead to a certain amount of belly aching, and after all the toad beneath the harrow may be forgiven an occasional croak. For even R. L. Stevenson exclaimed on seeing a lesser worked young man pining under the load of three Rs. "Oh this bloodless substitute for life." Even Sir William Osler the hard task master

cautioned his students "Beware, for you may find too late that there is no place in your habit stricken souls for those gentler influences that make the life worth living."

The whole curriculum can seldom be covered by the teachers and every student has the experience of being told that the examinations need not be confined to the subject matter discussed in the classroom. The medical student only pities himself when he discovers that he cannot cover the whole of the medical course himself and near the close of examinations goes in a state of panic. And after all the student has his own limitations. Only if the students could be taught how to select relevant from the irrelevant and assimilate the principles and discard the rubbish. This has to be emphasised on the medical students that the education upon which they are engaged is not a college course, not a medical course but a life course for which the work of a few years under teachers is but a preparation.

Equal if not more frustration to the student arises from a lack of coordination in teaching. I know an institution where on annual check up it was found that one batch had received six clinical demonstrations on mitral stenosis. Apparently the repetition is done at the cost of other topics which could be covered in the same period of time. The students thus not feeling sure if they will be able to discuss all clinical cases fall more and more on to their books and do not derive the full benefit of the clinical material.

And then the examinations: many examiners seem to derive pleasure in ragging the students and would make a mince meat of them if they could. Their angry exclamations, negative head nodding and facial question marks are too evident to be missed by the tense students. Then the examiner very casually asks "Oh look at this patient's heart." Now the word 'look' in Chamber's English dictionary means 'to see or to inspect.' The student with all simplicity inspects the region of the heart and then waits. Then the examiner returns like a dandy and asks "Yes, what are your findings in the cardiovascular

system.” The candidate is stunned by a sudden metamorphosis in the question. And what happens to the student everybody would know. The student would perhaps inwardly wish that every examiner should be taught how to examine candidates.

Many examiners perhaps due to their temperaments add anxiety to an already nervous student. They would magnify the errors committed by a candidate. Here is an example. The student was describing his case of pleurisy. All was going on well. Suddenly the examiner interjected, “What is Grocco’s triangle”. The student described it. “Where does the base of the triangle lie?” The student answered “Along the vertebral column”. And suddenly the examiner becomes angry “Wrong, absolutely wrong, what have you been doing all the year round if you do not know this”. Thus discouraged the student cannot answer any further questions. Actually Gracco’s triangle comes in those category of signs which have no diagnostic value and have become obsolete in the current diagnostic methods. Unfortunately a student cannot say so to the examiner asking such a question.

Well meaning examiner may create an entirely different situation, sometimes embarrassing both to himself and the candidate. One such situation is well described by Dr. Gordon in his book “Doctor in the house”. The examiner was showing a specimen of vertebral column on which a depression had been caused by the pressure of an aortic aneurysm.

“What do you think caused this depression?”

The student started thinking.

“Very easy, very easy” The examiner intervened.

This led the students mind roving from medical intricacies to his more casual experiences. But he was still quiet.

The examiner became more sympathetic. He removed his spectacles from his nose and pointing to the slight depression on the nose left by the nose piece of the spectacle he asked “What do you think has caused this mark on my nose.”

And suddenly the student became alive. The picture on the first page of the clinical methods sprang before the mind’s eye and he shouted,

“Sir, the mark on your nose; it is due to congenital syphilis.”

What became of the student is anybody’s guess.

All agree that the examinations are a necessary evil. In all examinations there has to be a certain degree of chance, yet one feels that there is a greater element of luck in the medical examinations than elsewhere. Though every examiner could justify the selection of the examination patients, yet every student who fails in an examination could also give reasons why his particular case should not have been kept in the examination. Either the case was obscure, or the case was mentally deficient to give a proper history, or that the time allotted for that case was insufficient, or that the examiner was in a hurry and did not discuss the case well.

Here is an example of a short case. Examination required: Cardiovascular system. A female patient of sixty, pulse of 82/min., slight increased pressure in the neck veins, and a soft systolic murmur at the apex of the heart. Candidate wanted to take the blood pressure. The examiner said “Oh it is 170/90”. Student diagnosed at “Arteriosclerosis”.

The examiner shouted “Wrong, Thyrotoxicosis”.

Examiner’s view point: that the student did not palpate the thyroid, the student’s view point; he was not allowed to take the blood pressure, for while taking the blood pressure he would have more calmly thought of all causes of increased pulse pressure, including thyrotoxicosis.

Very often the examiner having asked a question goes into a reverie or in a mental sleep, and then suddenly comes out of his sleep when the student has already half finished the answer. The answer which the student gave when the examiner is asleep is to the discredit of the candidate, yet there is no way of detecting whether the examiner is concentrating on the answer or is having a nap, perhaps because of a tiring train journey or a late heavy dinner.

Perhaps one could recite many tortures of the medical examinations. These are only some of the lighter gurdles of examinations through which a medical student has to pass. No wonder it is so difficult to pass through the fire of these examinations unscathed. Fortunate are those who cross the hurdles of the examinations and the examiners and then they really merit the good name about Mr. Pickwick said to Sam Weller “Medical students: Oh they are fine fellows; very fine fellows with judgement matured by observation and reflection and taste refined by reading and study.”

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