

Summary of suggestions from Krista Johansen, MD

## **STUDY TECHNIQUES:**

### 1. Knowledge accountability

Practice holding yourself accountable for the material by setting aside the text and testing yourself as to what you know about the material. If you are not able to recall the material, try again.

If still having trouble figure out if:

- A. You need a break
- B. This is material that you need to concentrate on at a later time
- C. This is material that is not feasible for you to learn in time for the exam. You are allowed to select a few morsels of information and let them go - you may learn them at another time such as in your residency or for Step 3 (AKA the vaccine schedule - though I still haven't learned it). If you are afraid to let material go - pick one aspect of it to remember. For example, know when to give Hep B vaccine.

### 2. Tables

Consider making a table of information that normally you would highlight in multiple colors.

If you are feeling too detail-oriented and are afraid the table will be too all-encompassing consider not using this tool at this time (you may find it very helpful in the future).

If you do make a table, make sure you spend some time studying it rather than just making it so that you own the material.

Tips on studying tables (your own or ones in textbooks):

Cover up one column or row and try to "fill in the blanks".

Analyze the table for things that are similar or different between diseases. For example when looking at nephrolithiasis ("kidney stones") notice that all but uric acid stones are radiopaque.

## **TEST TAKING TECHNIQUES**

### 1. Practice highlighting the question first.

Having an idea of what you are looking for keeps you on task and allows you not to be surprised by what you are asked to do (example - remember the patient with difficulty breathing especially with exercise or in the cold - you spend your time diagnosing asthma but the question reads: how would you treat this patient's asthma?). It is very helpful to have the question do some of the work for you.

### 2. Highlighting in general.

Highlighting can be a very effective tool. Sometimes people highlight everything to help them read. Try to highlight the key features of the presentation. If you are having trouble coming up with an answer, review your highlights. If you are still having trouble, review what you DIDN'T highlight - you may have missed a fact

3. The “A-B Dilemma” (this is my term, I want to trademark it but I don’t know how to)

The “A-B Dilemma” is when you have narrowed it down to 2 or 3 options but can’t seem to narrow it down any further.

*The answer is always in the question.* Try to not spend too much time staring at the answers and attempt to figure out which one is correct by trying to recall everything you know about them. Go back to the vignette and see if there is anything you missed or misread. For example, you have narrowed it down to TTP and HUS because the patient has renal compromise, low platelets and schistocytes but you can’t figure out which diagnosis the patient has. Go back to the question and see what’s there. You may find that you missed something, such as neuro signs, that would allow you to make the correct diagnosis (TTP).

If this doesn’t work, then spend a limited amount of time trying to recall information about the answers.

If you are spending too much time when you have narrowed it down, take your best guess, mark the question and move on.

4. Marking

Types of questions to mark:

A. Questions you feel that if you had more time you could get it right (pick an answer, mark it and then move on). This allows you to answer all the questions that you can get relatively quickly and then, time permitting, try to answer the ones you need more time on.

B. Questions you have narrowed down to 2 or 3 but can’t figure out in that moment (this gives yourself a break so that you can return to it with “fresh eyes”).

C. Practice marking a limited amount of questions. You want to be able to move at a reasonable pace through the exams but have enough time at the end to review perhaps 6-8 questions (maybe more or less, you need to see what works for you).

5. Every patient (question) deserves a chance.

No matter how difficult, stressful or anxious the previous question was, go to the next question with all your attention. This is something you need to practice.

If you have trouble doing this you run the risk of getting wrong a relatively straightforward question because you were caught up on the previous question.

Think of it as when you are seeing patients. No matter how heart-wrenching or irritating a previous patient may be, you enter the next exam room leaving everything else at the door so you can focus on the new patient.

6. Success on the exam means correctly answering as many questions as you can.

Do not spend too much time on questions you can’t answer. If you do this and you can’t get to the end of the block, you may have missed the opportunity to answer questions that would have been easier for you.

This is VERY different from working as a clinician. You cannot say “this patient is too complicated” and move on to the next one. In multiple-choice medicine, this is exactly what you do. There will be questions you can’t answer and that’s ok.

### 7. Seduction.

Do not be “seduced” into choosing the answer just because it is something you’ve never heard of and you are afraid it might be true.

There are two conditions in which you can choose the answer you have never heard of:

- A. You have ruled out all the other answers
- B. The patient presentation is something you’ve never heard of so maybe the answer is something you’ve never heard of (remember Rolandic epilepsy).

### 8. Changing your answer

There are three appropriate situations in which you can change your answer:

- A. You misread the question
- B. You recalled something you had previously forgotten
- C. Upon reading the vignette you identify a new piece of information that lets you answer the question correctly.

Do NOT change your answer just because your gut is now telling you that the answer is B rather than C. Your gut only works once per question. Otherwise it’s diarrhea.

## **REDUCING ANXIETY**

1. Continue to stay in contact with resources that are helping you with this issue
2. Look into the Mindfulness Program. I hope this is helpful for you.
3. Try to stay task-oriented (remember Dr. J’s copious rules)