

Quick Reference Guide for Writing & Editing ABPath CertLink® Items

Critique:

Every Critique should have at least one parent item, and each parent item should have at least one clone. Supporting justification in the Critique should provide clear and comprehensive explanations as to why the correct answer is correct **and** why each of the distractors are incorrect.

- Check for typos, misspelled words, punctuation, and grammar.
- Italicize gene and bacteria names.

Clones:

The purpose of clones is to have items to present later if the original is answered incorrectly the first time, or correctly but with low confidence. They are used to determine if the knowledge gained from reading the Critique is retained. Clones of the original items (ie, parent items) will be delivered periodically during the longitudinal assessment. Clones can be created by modifying one or more aspects of the parent item without changing the original purpose or Key Learning Objective. It is recommended that only one manipulation is made at a time to create a clone of a parent item because each manipulation could generate a new clone.

We suggest creating clones from parent items by changing aspects of the parent item in the following ways:

1. Manipulations within a single diagnosis:
 - A. Varying the patient presentation (the Stem)
 - For example, a second presenting situation with the same diagnosis as the parent item can be created to assess interpretation based on factors such as patient age, gender, or race (“same diagnosis, different presentation”).
 - B. Assessing different diagnostic/interpretive tasks
 - Differences in initial evaluation based on factors such as gender, race, age, comorbidities, past medical history, travel or occupational history, place of residence, etc.
 - Different images for the same presentation or diagnosis
 - Additional studies for evaluation to support or confirm a diagnosis (eg, IHC, flow cytometry, molecular studies, etc.)
 - Different distractors
2. Manipulations across a different condition in a single subspecialty or area
 - For example, a different condition (from a differential diagnosis) with the same presentation as the base item, but with different images or interpretation (“same presentation, different diagnosis”).

Relationship Between Item Clones and Critiques

A clone may have the same critique as the parent item if care is taken to ensure that the critique is equally applicable to the clone as it is to the parent item. Depending on the nature of the changes between two items, a clone may need to have a modified critique from the parent item.

Stem:

- Provide age, gender, and a brief clinical history.
- If there is an age, format with hyphens as “XX-year-old male/female.”
- Use male and female (not man, woman, boy, girl, etc.).
- Review for grammar & tense (should be past tense).
- Be sure that the lead-in asks a question. It should read, “What is the most likely diagnosis?” rather than, “The most likely diagnosis is:” Lead-ins must clearly define the task so that you could answer the question in the lead-in before viewing the response options.
- If there is a list of laboratory results, put into a table.
- If there is a table, be sure the lead-in (eg, “What is the most likely diagnosis?”) *follows* the table.
- Check for typos, misspelled words, punctuation, and grammar.
- Italicize gene and bacteria names.
- Read stem and distractors for sentence sense.

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- Multiple T/F items are NOT acceptable (eg, “Which of the following statements is correct about ‘X’?”).

Response Options:

- Alphabetize if necessary (be sure the correct answer is marked in the new order) unless listed in order of benign to malignant (NILM, LSIL, HSIL, SCC) or some other logic. PLEASE INDICATE “DO NOT ALPHA” IN COMMENTS BOX.
- Options are homogenous, testing a single dimension (eg, all IHC, all diagnoses, all clinical associations, all genes, etc.)
- A lower-case letter begins each Response Option unless it is a name or a complete sentence.
- Include a period at the end of each Response Option.

Key Learning Objective and Feedback/Diagnosis:

- Check for typos, misspelled words, punctuation, and grammar.
- Italicize gene and bacteria names.

References:

- References may be DOI, PubMed (PMID), NLM, or ISBN numbers.

Item Type

- If the item is asking recall of facts, it is a WRITTEN item.
- If the item has data to interpret (eg, lab results), it is a PRACTICAL item.
- If the item is associated with an image(s), it is a PRACTICAL W/ IMAGE item.

Practice Area:

- Be sure this is selected.
- You may assign up to 4 Practice Areas to one item so that it may be multipurposed.
- The Practice Area you were assigned must be the Primary one assigned to the item.

NOTES:

No “Which of the following...”.

Immunoreactive “to” not “for.”

This lesion *from* the ___ *of* a 53-year-old male/female . . .

What is the most likely diagnosis *for* this ___ lesion *from* a 36-year-old male/female . . .

What is the most likely diagnosis for this leg lesion (not lesion from the leg).

A patient with AIDS – not an AIDS patient.

Pregnant patient (not female).

2 cm, not 2cm

No need to say male/female when stem refers to prostate/testicle/ovary/uterus

Black/white when referring to race; not capitalized.

AMA doesn’t use trademark symbol because of capitalization of name.

Don’t use a/an or a(n) in the stem, put “a” or “an” in the Response Options.

Items test application of knowledge based on cases/scenarios encountered in practice.

Items have longer Stems and shorter Response Options.

No technical flaws or clues befitting test-wise diplomates.

Items that require interpretation and application are preferred.