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How are Medical Students Actually Thinking During OSCE?

<u>Choi I.</u>¹, Kim S. ¹, Yoon B.Y. ², Kim S.H. ², Lee J.T. ² ¹The University of Georgia, USA ²Inje University College of Medicine, Korea

Introduction: The OSCE (Objective Structured Clinical Examination) remains a widely-used method for assessing medical students' clinical performance. The OSCE has been found to have benefits and limitations, but little attention has been given to the types of thinking that the OSCE can afford. The purpose of this study was to investigate what students were actually thinking during the OSCE.

Method: The study involved four 4th year medical students (two female and two male) who had been videotaped taking a preparatory OSCE organized by a regional consortium of OSCE examiners in Korea. A qualitative case study was designed for each student. Data was collected through one-on-one stimulated recall interviews where students were shown the video clip of themselves performing the OSCE and asked to elaborate what they were thinking every 30 seconds of the 10-minute exam. Students' clinical reasoning processes and patterns were identified and analyzed qualitatively and quantitatively.

Findings: The study revealed that students engage in both clinical and non-clinical reasoning during the OSCE. Students used the clinical reasoning process as they had been trained to: diagnosis, physical examinations, and communication with the patient. However, non-clinical reasoning was observed in the form of test-oriented reasoning, which involved decision-making that was dictated by checklist-fulfillment tendencies and adherence to a strict time limit as opposed to naturalistic problem-solving processes. The observed test-oriented reasoning may explain performance behaviors that were either deliberately off-protocol (e.g. skipping an otherwise important clinical procedural step) or unnecessary (e.g. adding or engaging in an otherwise unimportant step).

Conclusion: Performance on the OSCE is considered to be a predictor of real-world clinical performance. Yet, this study has shown that students engage in both clinical and nonclinical reasoning to problem-solve during the OSCE. Further research will need to explore ways to increase the OSCE's validity by minimizing non-clinical reasoning during the examination.