Cardiologists in training: be prepared for exams!

The only good is knowledge, the only evil is ignorance (Socrates)

E.E. van der Wall

On Thursday 14 October, 50 cardiology fellows-in-training took a national examination in the Jaarsbeurs (Utrecht). The exam was organised by our National Institute for Continuing Cardiovascular Education (Cardiovasculair Onderwijs Instituut, CVOI). This national examination was held for the first time in history and on this occasion only fellows-in-training in their fourth cardiology year participated. The initiative for this exam was taken by the Concilium of the Netherlands Society of Cardiology (NVVC). The national exam consisted of 120 multiple choice questions of which 11 questions were based on video images (5 choices for each question). The entire exam lasted three hours. The material was provided by the EBSC (European Board for the Specialty of Cardiology) of the European Society of Cardiology (ESC). The EBSC/ESC lends its support in setting up national exams. The main interest of the EBSC/ESC is to promote national exams within Europe and to offer the exams to the national societies of the ESC. The uniformity of the exams is directly linked to the Union Européenne des Médecins Spécialistes (UEMS).

The EBSC produces the multiple choice questions which are anchored in the European knowledge base and can be used for knowledge-based assessment (KBA). The questions are made available to those national societies that intend to organise a national exam. The EBSC/ESC also offers assistance in organising a national exam and to be present on the day. At the beginning of this year, the British Cardiac Society (BCS) was the first ESC national society to hold a (pilot) exam for their first 100 residents.

This initiative of the NVVC/CVOI should be embraced and further encouraged. The pilot exam will be only the start of a more direct evaluation of knowledge, thereby confronting young cardiologists *in spe* with their knowledge levels and also with their shortcomings. However, it should be realised that exams are primarily meant to improve the knowledge level rather than to point to knowledge gaps. It is hoped that these national cardiology exams will be extended to each of the four years of dedicated cardiology training and that they will become mandatory. Finally, also the mature cardiologist should be subjected to national exams at regular intervals. The mere thought of doing exams at an older age may provoke ventricular premature beats but this is far less serious than experiencing a sudden death caused by an individual who has not renewed his/her drivers license. ■

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