WHAT IS THE ANESTHESIA ORAL BOARD EXAM FORMAT?
What is the Exam?

The American Board of Anesthesiology Part 2 Examination, or Oral Board Exam, is a verbal examination of a physician anesthesiologist's cognitive ability to perform at the level of a Perioperative Consultant. The test consists of a series of carefully structured case scenarios presented in two 35-minute sessions. Grading is based on a candidate's ability to demonstrate the 4 Essential Consultant attributes:

1. **Knowledge**  
2. **Judgment**  
3. **Adaptability**  
4. **Communication**

In theory, the medical knowledge is the same as that needed for actual practice – and your responses should reflect what you would do in everyday patient care.
**Before the Test**

The Oral Board exam is unlike any other test you have taken. It is interactive, dynamic, performance-based, and for many, anxiety provoking. Successful performance requires a skill set and approach to preparation different from the one used for the Written Board.

A few weeks before the exam, you will receive emailed instructions from the ABA informing you of your test date and time, registration site, and the option to stay at the registration site.

**Where to Stay**

The ABA registration site is the Hilton North Raleigh/Midtown, a 4 star hotel. You do not have to stay there, but many people appreciate the convenience of doing so, at least the night before. The ABA group rate is $175/night.

**Hilton Place North Raleigh-Midtown**
3415 Wake Forest Dr, Raleigh, NC 27609
(919) 872-2323

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**Helpful Hint #1: Alternate Hotels**

If you are on a budget and don’t mind a short walk, there are several other hotels nearby. The closest is the Hyatt Place North Raleigh-Midtown, also a 4 star hotel, located 0.3 miles away (5 min walk). Depending on the time of year, the rate can be as little as $100-$125/night.

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3415 Wake Forest Rd
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Day of Your Exam

Wherever you stay, plan to arrive at the Hilton hotel lobby at your designated time. When you arrive, present your official ID at the registration desk in the main lobby. The ABA representatives are usually friendly and helpful. You will then sign a confidentiality form, stating you understand that the contents of the exam are copyright protected and should not be reproduced in any way. You will then receive a bracelet containing your name, locker number, and 2 exam room numbers. There are usually 12 candidates per examination group, and after everyone has registered, you will be taken to the ABA Assessment Center by shuttle.

The entire exam process, from the time leave the Hilton to the time you are return, is approximately 3 hours. Here is breakdown of some of the times:

- Shuttle to Center: 5 min
- Orientation: 30 min
- Two tests: 90 min
- Shuttle to Hilton: 5 min

Helpful Hint #2: Exam Day Logistics

If you are taking the first exam (return by 7:30-10:30 AM), you will have time to return to your room before checkout time (usually noon). If your test is later and you wanted access your room after the exam, you can try asking for a late checkout (but everyone asks, so it may not be possible). Alternately, you may store your luggage on the ABA shuttle or at the hotel desk. The shuttle usually leaves for the airport immediately after dropping people back at the hotel, so if you stored your luggage on the shuttle, you could go home right after the test.
At the Center, the ABA representative will escort you to an elevator that will bring you to the actual Center. Once there, you will be asked to place all your possessions, pens and pencils included, into your assigned locker. Next, you will take your assigned seat in the Orientation Room. Each seat has a number, corresponding to the Examination Room to which you have been assigned.

Once seated, you will be greeted by a Senior Member of the ABA, who will provide some introductory comments, followed by an orientation video (the same one posted on the ABA website). After the video, the test begins.

Sample Additional Topic questions for Session 1:

Temperature: A 48-year-old man is undergoing a radical prostatectomy during general anesthesia. Two hours into the operation, his esophageal temperature is 34.5°C. Would you treat? Why/Why not? If so, how?

Thirty minutes later it has decreased to 33.5°C. Your management? Surgeon attributes a problem with bleeding to the hypothermia. Agree? Why/Why not? What might be the mechanism? Explain. How will decreased temperature influence your plans for extubation? Describe.
Session 1

You will be given the long stem on pink paper attached to a clipboard and a pen. After at least 10 minutes to dissect the case, you will be directed to your room. Bring your clipboard, pink paper, and pen. The Junior Examiner will greet you at the door to your Examination Room. The room is modest in size, but is clean, modern, and functional.

You will be seated at a table across from the Examiners. A screen can be found on the wall to your right, where images (eg, CXRs, ECGs, etc) may be displayed. You are allowed to make notes on your pink sheet, if necessary. The Examiners will mark your grades on iPads placed on stands on the table.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Time</th>
<th>Examiner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intraoperative Management</td>
<td>10 min</td>
<td>Senior Examiner</td>
</tr>
<tr>
<td>Postoperative Care</td>
<td>15 min</td>
<td>Junior Examiner</td>
</tr>
<tr>
<td>Additional Topics</td>
<td>10 min</td>
<td>Senior Examiner</td>
</tr>
</tbody>
</table>

If you did not hear a question, you can say, “I'm sorry, could you repeat the question?” Or state your understanding of the question as part of the answer. If you don't know an answer, you can say, “I'm sorry, I don't know,” or something to that effect. Do not make things up. If they keep asking about the same topic, you can say, “I'm sorry, I'm not familiar with that topic. Is it possible to move on?” But whatever you say, be polite.

A video camera is in the room directed towards the Examiner, eliminating the need for a proctor. The cameras are usually pointed at the Examiners, not you.

A chime will sound after 35 minutes, indicating the end of Session 1. Leave the pink sheet with the examiners, take your clipboard, and return to the Orientation Room.
Session 2

After at least 10 minutes to dissect the case, you will be directed to your room. Bring your clipboard, pink paper, and pen.

- **Preoperative Evaluation**: 10 min  
  Senior Examiner
- **Intraoperative Management**: 15 min  
  Junior Examiner
- **Additional Topics**: 10 min  
  Senior Examiner

After the chime, the exam is over. Leave the blue sheet with the examiners, take the clipboard, return it to the ABA representative outside the door, and take the elevator to the shuttle. Congratulations! You’re done!

Sample stem question for Session 2:

A 38-year-old, 50 Kg woman is scheduled for excision of an occipital glioma while in the sitting position. You are first to note a late systolic murmur, loudest at left sternal border. She has mild controlled hypertension. Medications include hydrochlorothiazide for 5 years and dexamethasone for 5 days. P 74, BP 135/80, R 16, Temp 37°C, Hgb 13 gm/dl, Na 140 mEq/l, K+ 2.9 mEq/l.
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What If I Know My Examiner?

If you feel you know your Examiner and believe it could affect your evaluation, immediately inform the Examiners before the test begins. Usually, meeting an Examiner at a conference, asking a question, or having a brief conversation does not represent sufficient familiarity to impair the evaluation process.

Types of Questions to Expect

The ABA Exam is a test of your ability to perform at the level of a Perioperative Consultant. Thus, in addition to questions about factual information, you will be asked to apply that information to analyze problems and make decisions about patient care. Sample questions:

- What do you think about the patient’s airway?
- What would you do about the patient’s airway?
- How would you induce anesthesia?
- Why did you pick that induction technique?
- Why didn’t you consider regional anesthesia instead?
- What if you couldn’t see the vocal cords with laryngoscopy?
- What if the patient turned blue?
- A colleague recommends using an LMA. Do you agree?
- How would you explain the death of a loved one to the family?

As seen above, Board questions presented the candidate with diagnostic challenges, therapeutic dilemmas, and critical events. You will be asked to explain your thinking, justify your actions, respond to rapidly changing scenarios, and defend your position. All of this must be communicated in a manner so clear and organized, even a medical student would understand.
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Examiner Demeanor

Board Examiners are explicitly instructed not to fraternize with the candidates in order to avoid appearances of bias, favoritism, or impropriety. They are also told not to show emotion or provide feedback during the exam, either in tone of voice or positive/negative social cues. While the reasons for such behavior are obvious, it can be disconcerting to candidates, who are accustomed to having at least some emotional interaction.

In addition, Examiners may seem curt, cutting you off mid-sentence and asking questions in rapid-fire succession. While this may seem rude and unnecessarily interrogative to some candidates, it is usually merely the Examiner’s attempt to obtain as much information as possible in short period of time.

Helpful Hint #3: Maintaining Your Composure

When a complication occurs during patient care, we must continue with the case, even though the complication was of our doing. In the same way, when we get something wrong on the Boards, we must go on, even though we may have known better. To put your emotions aside seems like asking too much. We are, after all, only human. But humans can adapt. We can cope. And with practice, you will learn to cope, adapt, and keep going, even though you may have gotten something wrong. The good news is with knowledge, you will get less wrong.
After the test, it may take 2-3 weeks before the results become available. This allows time for statistical analysis, which is needed to take question difficulty and examiner severity into account. The results will be emailed to you as soon as they are available. A written letter with your results will also be mailed, and should arrive within 3-4 business days. An anesthesiologist’s certification status is also available for public view on the ABA website. If your name is not included in the list of certified physicians after the release date of your exam, it can be concluded that you did not pass.

The entire candidate experience is summarized on the ABA website.
The anesthesia board exams can be intimidating. The best thing you can do is thoroughly prepare. At Anesthesiology Consultants, we offer a variety of courses that allow you to study in the manner that best suits you. Take online classes from home, attend live events, or study with a partner.

Benefits to you:

- Understand the purpose of the Oral Boards and what Examiners are looking for in a passing response
- Acquire the knowledge base necessary for the exam and modern anesthesia practice
- Master the techniques and intricacies of case dissection
- Learn vital communication skills essential for perioperative consultation
- Know how to avoid the trick and traps of the exam on a case-by-case basis
- Gain confidence in speaking to colleagues, patients, and Oral Board Examiners
- Learn contemporary perioperative medicine at the level of a Perioperative Consultant