

study resources

find support

Revised  
March  
2008

oral exam.

be prepared



**The  
American  
Board of  
Endodontics**

**Helpful  
Hints**



written examination

**case history portfolio**

get **organized**



**follow instructions**

know the literature

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*I have always believed that the burden of carrying a dream over a lifetime is a greater effort than that of accomplishing the goal! This dream was no exception to the rule. – Dr. Randolph Todd*

Eager to share their success and excitement, every new group of Diplomates offers their tips and insights to help those who have yet to get through the difficult, yet rewarding Board Certification process. New Diplomates routinely referred to the various examinations as “fair” and “rewarding.” Their specific observations and helpful hints are below.

*I believe that it is my duty and obligation to share my knowledge.....It is also my duty to encourage other endodontists to pursue Board Certification – Dr. Bobby Caruso*

### **Reading Materials New Diplomates Recommended**

- *Inflammation: A Review of the Process* by Henry O. Trowbridge and Robert C. Emling
- *Pathways of the Pulp* by Stephen Cohen and Kenneth M. Hargreaves
- *Seltzer and Bender's Dental Pulp* by Kenneth M. Hargreaves, Harold E. Goodis and Samuel Seltzer
- *Dental Management of the Medically Compromised Patient* by Donald A. Falace and James W. Little
- *Journal of Endodontics*, especially the last two to three years
- *Medically Compromised Patient* by J.O. and F.M. Andreasen
- *Essentials of the Traumatic Injuries to the Teeth* by J.O. and F.M. Andreasen
- *Endodontic Topics* at <http://www.blackwell-synergy.com/loi/etp>
- ABE web site
- College of Diplomates web site, particularly the abstracts
- AAE web site

### **Suggested Study Methods**

- Flashcards
- In a quiet and secluded study location
- Review courses
- Utilize a mentor and/or study partner
- Set aside time for study and reflection on a regular basis
- Listen to CD-ROM's of CE courses while commuting

### **Suggested Study Resources**

- ABE web site
- Abstracts published on the College of Diplomates web site
- PubMed search
- ABE Boardwalk held annually at the AAE's annual session
- Local study groups – organize or join one

### **Mentors**

- **A common thread among the Candidates is the importance of having at least one mentor.**
- *I encourage all Candidates to seek out mentors, a most valuable tool that is available to you. If you do not know anyone that can help you, place a quick call to the College of Diplomates.- Dr. Bobby Caruso*
- *I cannot emphasize enough how much help it was to study with another person. – Dr. Stephen Tsoucaris*
- *It is strongly advised to seek out one or more mentors for each phase of the process. Different opinions will develop insight into topics and expose areas needing more investigation. – Dr. Marc Levitan*

- *It was extremely beneficial for me to utilize that experiences of current Diplomates to guide, suggest and motivate. They served as role models, sounding boards and examples through the process. – Dr. James Jostes*
- *Seek out mentors throughout the process. I found all of the Diplomates that I approached to be extremely helpful with advice and guidance throughout the entire process. - Captain Stuart O. Miller*

### **Review Courses**

- **The value of attending review courses throughout the Board Certification process is mentioned over and over.**
- *Take all the endodontic review programs that you can. – Dr. Joseph Morelli*
- *The Board review courses are great for the Written and Oral Examination. – Dr. Jaime Silberman*
- *A Board review course is indispensable in helping to put it all together. – Dr. Timothy Kirkpatrick*

### **Residency Program**

- *Remember that preparation for the Board Certification process starts in your residency program. Make the most of you literature review and case analysis sessions. – Dr. Nooshin Katebzadeh*
- *Take the Written Exam while in your residency program or shortly afterward while the biological principles are still fresh in your mind. This test is a natural extension of material learned in residency. – Dr. John P. Smith IV.*
- *Start early during your residency to gather all the cases that fit each one of the categories in your Portfolio. – Dr. Francisco Banchs*
- *Keep all the notes from your residency, they will be very useful. – Dr. Francisco Banchs*
- *There will never be a better time to take the exam. You have spent the last two – three years reading, discussing and practicing endodontics, you have all the information you need. – Dr. Randolph Todd*
- *Begin preparation at the start of your program; prepare and maintain records in the Case Portfolio format; look for potential cases throughout your program. – Dr. Khalid Al Fouzan*
- *“JUST DO IT!” Your endodontic residency has prepared you for this. Begin preparing for all three parts of the examination while you are in your residency. Become familiar with the steps that are necessary for each step of the process. Attend the Boardwalk Sessions for helpful information. - Dr. Kweli K. Carson*

### **General Suggestions**

- **READ!**
  - **The most common suggestion? Read all major texts and current literature – recommendations ranged from 2-5 years of recent articles.**
- **Establish Milestones**
  - *Develop and adhere to a timeline that includes progress ‘milestones’ for all three parts of the exam. Your planning should be tailored to allow for ‘retakes,’ if needed, to avoid starting all over again. – Dr. Robert A. Caruso*
  - *Consider each examination as a mountain to climb. It is not impossible, but you must work very hard to get over the mountain. Hard core preparation is key. - Dr. James D. Isett*
  - *Make the decision that you are going to do it and just take it step by step. – Dr. Joslyn Ann Jenkins*
- **Manage Your Time**
  - *Organization/time management is the most difficult part of the process. – Dr. Derik P. DeConinck*

- *The entire process can, and ideally should, be completed within five years of graduation. 'Older' endodontists can start and complete the entire process in one year, thus only studying once for the Boards. – Dr. Lester J. Quan*
- *As in everything that we do, preparation is the key to success. – Dr. David Rosenbaum*
- *Make sure that you review and understand your deadline set by the ABE for each section. Your planning should be tailored to allow for “retakes” if needed, to avoid starting all over again. For any part of the exam, do not, repeat do not wait until the last minute to prepare. – Dr. Bobby Caruso*
- *Complete the Certification process as quickly as possible. The longer you wait, the more difficult it is. Read the instructions that the ABE has provided for each part of the process and follow them exactly. Dr. Thomas F. Gerrets, Jr.*
- **Get Organized**
  - *Organize all your academic materials beginning while in residency. Keep good, organized files of all endodontically related articles and update constantly. – Dr. Joseph M. Morelli*
  - *Organize clinical cases according to ABE's categories for case presentations. – Dr. Joseph M. Morelli*
- **Stay Focused**
  - *Try to stay focused on the specific tasks. It is easy to look at all three parts of the exam and become overwhelmed. – Dr. Mickey Zuroff*
  - *The best suggestion I received was to maintain my composure. Mental preparation was important for me. A methodical study plan and strict discipline to that plan was crucial for me in my preparation. - Dr. Troy L. McGrew*
  - *To become Board Certified was stressed from day one during my endodontic residency. Listen to your mentor and develop an “evidence-based” notebook that you will add and subtract to as you become more educated in the field of endodontics. The process starting with the Written Exam and culminating with the Oral Exam is extremely fair and worthwhile. - Dr. Craig Torres*
  - *It is so easy to get side tracked after completing the residency and put off the pursuit of Boards. Remember that it is your own personal goal and that you must bring it forward, be proactive and focus on its completion. - Dr. Carol Diener Weber*
- **Find Support**
  - *Don't travel the road alone. Any or all of the following – significant other, mentor, fellow candidate – will help move you along. – Dr. David M. Kenee*
- **Utilize the Helpful Hints**
  - *I read and tried to remember all the hints from prior examinees. The best one “Have a conscientious, explicit and judicious reasoning for everything you do clinically.” – Dr. Lester Quan*
  - *Repeatedly read the entire ‘Helpful Hints.’ – Dr. Qiang Zhu*

## Written Examination

- **DO IT ASAP!**
  - **The most universal piece of advice was to take the exam as soon as possible.**
  - *Basic science is very easy to forget in private practice!* – Dr. Jaime Silberman
  - *Twenty years after my residency, I felt like I was starting from the very beginning of dental school.* – Dr. Lester J. Quan
  
- **Know Your Literature**
  - *If possible, allow enough time to go back to the basics and integrate with classic and current literature.* – Dr. Claudia I. Holt
  - *Review of the major endodontic text books proved to be very helpful in my preparation for the Written Exam. An orderly review of classic and current literature cannot be neglected.* - Dr. Troy L. McGrew

## Case History Examination

- **FOLLOW DIRECTIONS!**
  - **The key suggestion for this examination was to follow instructions very carefully.**
  - *Details, Details, Details – Life and the success of your case submissions is all in the details.* – Dr. Randolph Todd
  - *Keep an eye on your write-ups; they are as important as the quality of the cases.* – Dr. Francisco Banchs
  - *The instructions are very specific and should be closely followed.* – Dr. Steven Card
  - *Take advantage of the ABE's detailed information about each case. Follow their instructions.* – Dr. Leandro Britto
  - *Follow the directions given to a "T".* – Dr. Bart Rizzuto
  - *Follow the guidelines, be brief and do anything you can do make it easier for the Directors to read the cases quickly!* – Dr. Jay Jacobson
  - *Consider every case that you treat in residency and private practice as a potential Board case. It is very important that you follow the Board instructions for case criteria, radiographs and notes. Make it easy for the Board to follow your notes and radiographs. Have other Diplomates and colleagues critique your cases and notes.* - Dr. Thomas F. Gerrets, Jr.
  - *Treat every case as a Board patient. Know the guidelines and directions. This part is an exercise in following the rules. Make sure to develop a system to organize potential Board patients so that it is easy to gather them when you start the write-up process. Also, stay up with the recalls for the potential Board patients.* Dr. James D. Isett
- **Search for Potential Cases**
  - *Amass 25+ cases and then wean.* – Dr. David M. Kenée
  - *Look for cases that are not easy to come by first.* – Dr. Helmut Walsch
  - *It is important as you go through your day-to-day practice that you treat each patient as though they could be a part of your Portfolio.* – Dr. David Rosenbaum
  - *Start to identify cases in residency and create a "follow-up" log complete with all the necessary contact data for the patient (including the contact information for a relative of the patient who might be able to help you locate your patient at a future time).* – Dr. Bobby Caruso
  - *Keep a log on a notebook or computer file of potential Board cases. Anytime you come across a potential Board case, write the patient's name, tooth number and reason why you feel it is a Board case.* – Dr. Ariel Diaz
  - *Try to accumulate about two – three as many cases as needed per category and pick the best for submission.* – Dr. Mark Dinkins
  - *Keep track of which categories you already have a sufficient number of cases for submission, so that your energy is spent towards finding those that are more difficult to complete (diagnosis, medically compromised patient and the molar surgery).* – Dr. Francisco Banchs
  - *Treat every case as a potential Board case with appropriate documentation and quality radiographs.* – Dr. Timothy Kirkpatrick
  - *Begin preparing your cases as soon as possible. Keep a list on your desk of the categories that are required, and whenever you come across a case that meets the requirements, make note of it. Tell potential Board case patients at the time of treatment that their case may be a 'Board case'. This may make it easier to recall them one year later. Also, ask a mentor to review your cases.* Dr. Kweli K. Carson
  - *Try to accumulate as many cases as possible for each category with backups in case a patient is lost to recall. Give yourself plenty of time to*

*write up each case and review it thoroughly to make sure it meets the proper guidelines. - Dr. Luis A. Chamorro*

- *Prepare nice cases during your residency; they may be potential Board cases. Keep copies of records, letters, biopsy reports, etc. Focus on the 'medically compromised patient', for me it was the most difficult case to get. Look for 30 good cases and then select 15. The one-year follow-up recall is sometimes problematic, so monitor your patient for the next 12 months. - Dr. Danni Sayman*

- **Radiographs**

- *Take all the intra-oral radiographs and pictures you can. I don't know how many successful cases I examined, when preparing for this portion of the Board, only to find that I didn't have the adequate radiographic representation. – Dr. Timothy Bodey*
- *During a patient treatment, if you ever ask yourself the question, Should I expose an x-ray? -you should! That radiograph will be the one that you need to support your case. – Dr. Colleen Shull*
- *Take at least two (preferably three) pre-op and post-op films. Take working films even if you don't routinely do so, it strengthens your cases. – Dr. Ariel A. Diaz*
- *Always take high quality radiographs from multiple angles; you never know if that case may be needed as part of your Portfolio. – Dr. Manish Garala*

- **Get an Early Start**

- *Start early, it's easier on the family relationships. – Dr. David Koelliker*
- *Be systematic. It takes time to organize all the information. – Dr. Jaime J. Silberman*
- *When you have cases that qualify, start writing them up because they take more time than you think to write and edit them. – Dr. Katherine Kuntz Jakuc*
- *Start case selection early. Every patient is a possible Board case. – Dr. Geoffrey Okada*
- *Keep a folder on your PC desktop that keeps reminding you everyday to enter interesting cases to follow-up on! – Dr. Jay Jacobson*
- *This portion of the Certification process takes a lot of time, maybe more than you can imagine. Set aside time to write up your cases, scan your images, etc. – Dr. Anne Williamson*
- *Prepare early with foresight! Understand what is required ahead of time – do your recalls early. – Dr. Paul Anstey*
- *Start looking for cases at the start of your residency. I had 12 cases completed with the one year follow-up when my residency was finished. The other three I just needed the follow-up at one year. Dr. Rolf M.W. Wuerch*

- **Contact Patients**

- *I found the majority of my patients could be found for follow-up and were quite receptive. – Dr. Bobby. Caruso*
- *Keep track of potential Board cases in each category and recall as soon as possible. – Dr. Claudia I. Holt*
- *Make certain your office staff realizes the importance of the Boards and works hard with you in getting patients back into the office for necessary recalls. – Dr. David Rosenbaum*
- *I found that if I explained to my patients what I was trying to achieve and made them a part of the process, they were more than happy to help me by following through with permanent restorations and coming back for recall appointments. – Dr. Samuel Mesaros*

- **Get a Second Opinion**
  - *Have colleagues and a mentor help review your cases.* – Dr. Joseph M. Morelli
  - *Have a mentor review your cases for complexity and content.* – Dr. Geoffrey Okada
  - *Having other review my Portfolio was an extremely valuable experience. Their suggestions and advice were priceless.* – Dr. Anne Williamson
  - *Utilize mentors early as you write up your cases to build momentum, identify areas for improvement and reduce redundant deficiencies.* - Captain Stuart O. Miller
  - *Absolutely essential that a Diplomate review this prior to your submission. Cases need to fit the criteria outlined so read carefully the criteria. It is all spelled out. Have back-ups available if your mentor throws out a case that may not be strong enough.* Dr. Carol Diener Weber
  - *The more critical they are - the better.* - Dr. Rolf M.W. Wuerch
- **Be Careful**
  - *The ABE template does not have grammar and spell check, so you must type and do all editing in Word, correct, then past into the ABE template. I learned this the hard way!* – Dr. Lester J. Quan
  - *The worst is a beautiful case with insufficient documentation.* – Dr. Helmut Walsch
  - *Make certain that all radiographs are of excellent quality and can be archived.* – Dr. David Rosenbaum
  - *When preparing your cases, it's important to be obsessive about checking dates; spelling, and your write-up for organization. Your goal is for the cases to be black and white. Don't leave any question marks.* – Dr. Lauren Mitchell
- **Proof Read**
  - *Have dental, but also non-dental proofreaders.* – Dr. Margot Kusienski
  - *Evaluate and grade each case yourself by following the scoring criteria used by the Directors.* – Dr. Tarathorn Sundharagiati
  - *Proofread your cases. Have your mentor proofread your cases. Proofread your cases again.* – Dr. Ariel Diaz

## Oral Examination

- **RELAX!**
  - **Despite initial fears, Candidates found the Oral Examination to be a fair and relaxed conversation with peers.**
  - *I found this to be the most rewarding part of the exam.* – Dr. Bobby Caruso
  - *Stay calm, feel relaxed and be confident of yourself at the time of examination.* – Dr. Ijaz Shahid
  - *There is no substitute for a good night's sleep.* – Dr. David Rosenbaum
  - *There were no trick questions or unanticipated strategies.* – Dr. Lester J. Quan
  - *Examiners are very fair (and comprehensive) in their questioning.* – Dr. Derik DeConinck.
  - *The examiners are very fair and helpful. Relax and be confident (though it is hard to do).* - Dr. Qiang Zhu
- **Be Prepared**
  - *During the week, while I was treating patients, I would cite the literature that supports what and why I am doing a particular treatment procedure.* Dr. Bobby Caruso
  - *Keep updated with current literature throughout.* – Dr. Helmut Walsch
  - *Know all you can about medically compromised patients.* – Dr. Claudia I. Holt
  - *Start organizing early – at least six months before the examination. Whether you study alone, with a partner or through a mentor, create a schedule that gradually increases as you near the exam. Starting three months out, I got up an hour early to study.* – Dr. David Kenee
  - *The Oral Exam is a clinical exam and as such it requires evidence-based knowledge to support every procedure you do when you treat a patient. While treating patients in your practice review every single one of the steps you are taking and support them with literature.* – Dr. Francisco Banchs
  - *Pay attention to the 10 areas in which you are tested. Know the literature and justify your clinical decisions with the literature. When you are seeing patients review in your mind what you are doing and why.* – Dr. Ariel Diaz
  - *Follow the instructions/tips given at the review courses, diagnosis, and prognosis. Know the literature to substantiate your answers.* Dr. Kimberly Kochis
  - *During a workday, in private practice, use each patient case as if it were a Board case. Do this from early diagnosis to final recall. This will be a great experience in tying together your clinical knowledge and literature reference. Demonstrate evidence-based treatment.* – Dr. Joseph Quevedo
  - *We all know where each of our weaknesses and strengths are. Define your weaknesses early and challenge them before you sit for the Oral Exam.* – Dr. Shahrokh Shabahang
  - *When preparing for the Oral Examination, remember that the exam can and will encompass more than clinical endodontics. Special patient management should be as important in your preparation as is endodontic literature.* – Dr. Jay K. Taylor
  - *First, get a grasp of exactly what is expected of you. Second, plan your approach and strategy for studying and timelines. Use study techniques that work for you. Consider recording on iPod critical data. Use the College of Diplomates guidelines and study guides.* – Dr. Paul Anstey
  - *There is so much information to review for the Oral Exam that it seems overwhelming at times. It is important to figure out how you will organize*

- and study the material. The study aids on the College of Diplomates website ([www.collegeofdiplomates.org](http://www.collegeofdiplomates.org)) are helpful. – Dr. Kweli K. Carson*
- *Study for 3 - 4 months before the exam. It is difficult to retain the information for a longer period. Use the summary of information the Board provides as a guideline. - Dr. Thomas F. Gerrets, Jr.*
  - *Bottom line: Be able to quote the literature and discuss medically complex patients. Dr. James D. Isett*
  - *First, I would suggest reading textbooks, such as *The Dental Pulp and Pathways of the Pulp*. It is a good beginning as far as getting your thoughts organized and developing references. - Dr. Joslyn A. Jenkins*
  - *Relax. Take a review course to focus on current topics and review classic literature as your foundation. Dr. Joseph F. Palermo*
  - *STUDY! Study everything and you will still feel unprepared! Take out a few hours each night to study. I tried to do this six months in advance. Think of each step you perform clinically and justify it with literature. A mock Oral Exam is important or at least try to practice speaking out loud as you study. .I did attend the Board review courses (at Michigan and at Baltimore) and the ABE Boardwalks (held at the AAE annual session) which I found helpful in preparing for the Case History and Oral Exams. - Dr. Carol Diener Weber*
  - *Start studying early! Have study partners that will ask you questions that you need to answer orally. This will help you get used to articulating your answers. - Dr. Rolf M.W. Wuerch*
  - *Know dental management of medically compromised patients, and review oral pathology and oral radiology! - Dr. Qiang Zhu*
- **Practice**
    - *Have a study partner...hold mock exams...be both examiner and examinee. – Dr. Helmut Walsch*
    - *My mentor gave me mock orals. This was probably the most helpful single thing in preparing for the Orals. – Dr. Joseph M. Morelli*
    - *Having a mentor provided different opinions and developed insight into topics and exposed areas needing more investigation. – Dr. Marc Levitan*
    - *Practice orally with a recent Diplomate. Knowing this info is one thing.....putting it to words is another. Like anything else in life, PRACTICE!! – Dr. Jason Bergman*
    - *Have conscientious, explicit and judicious reasoning for everything you perform in your practice, and provide the research(s) to support those principles. Practice, practice, practice. Verbalizing your thoughts is paramount to succeeding, and mock boards are the best way to do that. Dr. Anita Aminoshariae*
    - *Have a colleague or mentors quiz you, this forces you to verbalize your answers and allows for feedback. Lt. Col. Brian Bergeron*
    - *Not only is studying important, but you also need to be able to eloquently verbalize that knowledge. Utilize your mentor to do the mock Oral Exams through the preparation process. – Dr. Margot Kusinski*
    - *The Orals require that you organize your thoughts and responses rapidly in front of some very big names. Practice with someone who makes you feel slightly intimidated. You will get flustered; the trick is to recover rapidly and move on to the next question. – Dr. Vincent R. Jones*
    - *You have to be 200% familiar with the literature because you do not have much time to organize your thoughts during the examination. Basically, make the literature pop into your head like a reflex. – Dr. Ming-LI Emily Kuo*
    - *As you treat your patients throughout your day ask yourself and write down questions such as, why do I use this material, procedure or what options exist? What evidence is there to support or dispute certain*

- options or alternatives? Why is this patient on this or that drug? What could go wrong and how would I handle it? – Dr. Patrick W. White*
- *The Oral is a case-based question and answer period. The cases are meant to reflect clinical practice. They have some amount of complexity but are not impossible. After a day at the office, write down the medical history or case complications encountered. Review that topic; make note cards, list cures (medications) and complications. Repetition of disease processes, case types will develop. Repeated review will prepare you and over time, a breadth of information will be reviewed. – Dr. James Stich*
  - *Having a study partner is helpful as well. Dr. Ronald Taylor and I would get together on the weekends to go over the material and test one another. In addition, one of my mentors, Dr. Lynne Baldassari-Cruz, administered a mock Oral Examination which was extremely helpful. I cannot stress how important it is to verbally articulate your answers when preparing for the Oral Exam. You may feel that you have a good understanding of the information, but knowing the information, and being able to explain the information are two totally different things. Also, practice responding to potential questions in the mirror – I wish I had done more of this myself. – Dr. Kweli K. Carson*
  - *Having a mentor with a working knowledge of current literature was invaluable, as was a formal mock oral which attempted to replicate the real thing as close as possible. - Dr. Tracy M. Clark*
  - *A month or two before the exam find someone to study with. I had a partner and we would practice scenarios with each other. Forcing yourself to say an answer with references, to someone who knows the answer, turned out to be extremely helpful. It really boosted our confidence. Dr. Joslyn A. Jenkins*
  - *Verbally express what you are studying to familiarize yourself with references and information. The ability to coherently relay the information is as important as learning it. - Dr. Troy L. McGrew*

### **Strategies for Taking the Exam**

- *When taking the exam it is important to have an organized way to gather all initial information when the test starts. It should be practiced in a way to consistently not leave out any critical information, i.e. medial history, blood pressure, etc. Do not forget to ask for more information from the examiners as necessary, whether it is a radiograph(s), or even a clinical picture, if indicated. Try to get the first part of the exam off to as smooth a start as possible. This will help you to stay calm and recall information as the exam progresses. Try to find a study partner and or ask someone qualified to conduct a mock exam. The right strategy in taking the Oral Exam is as important as what you know. Dr. John M. Lies*
- *Try not to get flustered if you don't know every answer – you are not supposed to! They are trying to quickly determine the depth and breadth of your knowledge, so they keep asking questions until you run out of answers. – Dr. Lester J. Quan*
- *My suggestions are: 1) Think through the questions before answering, 2) Answer only the information asked in the questions, 3) Be succinct but thorough when answering, 4) Cite literature to correlate with responses whenever possible, 5) Candidates will not be able to answer every question. Don't linger or focus on questions you cannot answer. Instead, pass on the question and concentrate on answering the next one! - Dr. Marc Levitan*
- *The approach I had taken for the Oral Exam was to know and justify everything I do clinically. Be able to support your statements with the literature. Quiz yourself with a mentor. You don't want to be flustered*

*under stress. You need to know things inside and out. – Dr. Lauren Mitchell*

- *Use literature citations to answer every question. – Dr. Rory Mortman*
- *Find a quiet location where you can study undisturbed. Try to study at least one hour each night. As you get closer to the date of the examination, try to review topics orally with a mentor/spouse/study partner. – Dr. Luis A. Chamorro*
- *The most difficult process in preparing for the Oral Examination was getting organized and getting back into a study routine. My goal was to begin 6 months prior to the exam as I could only set aside a small amount of time each day to prepare. Once I started and built momentum, the preparation process became routine and even my staff got involved in quizzing me from the study guides I created. I found audio tapes of my study guides to be very useful while commuting to work (if you don't mind listening to the sound of your own voice over and over again). There were many days that my commute was the only time I had available to prepare. - Captain Stuart O. Miller*
- *While the exam is a total of only 1 1/2 hours long, the Board does an excellent job of covering all aspects of treatment in each of the three 30 minute sessions. There is enough time to answer all of the questions but be succinct with your answers. The Board members want you to pass and they try to make you as comfortable as possible. - Dr. Thomas F. Gerrets, Jr.*