POSTER #1

Alignment of Regulatory Examinations and Public Health Priorities: Exploring the representation of Cancer in the MCCQE-1

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Background: Medical education should be coordinated with patient and health care system needs. Cancer is a relevant health priority. Unfortunately, oncology education has long been perceived by learners, educators, and physicians as inadequate. The Medical Council of Canada (MCC) is Canada's national standard of assessment of medical graduates. This study aimed to view oncology education with a focus on assessment, by determining the representation of health priorities, including cancer, in the Medical Council of Canada Qualifying Examination – Part 1 (MCCQE 1).

Methods: The MCCQE 1 lists CanMEDS roles for medical graduate competency. The focus of this study was the Medical Expert role and associated clinical objectives. These objectives were categorized for oncologic, cardiovascular, cerebrovascular, and chronic lower respiratory disease. Two coders analyzed data to increase objectivity and reduce bias.

Results: The MCCQE 1 objectives list 190 topics in the Medical Expert role. Oncology content was found in 57 (30%), cardiovascular diseases in 56 (29.5%), cerebrovascular diseases in 21 (11%) and chronic lower respiratory diseases in 7 (3.7%). Within the objectives containing oncology content, frequently mentioned cancers were gastrointestinal (16, 23%), nonspecific indicators of cancer (7, 12%) and genitourinary/musculoskeletal cancers (6, 10.5%). All disease coding had interrater agreement greater than 99%, with Kappa values from 0.73 – 1.00, indicating substantial agreement.

Conclusions: Oncology was highly represented in the MCCQE 1. To understand the mismatch between curricular representation and assessments with perceptions of preparedness for practice, future work should investigate components of medical education beyond knowledge expertise and assessment.