

# Letter to the Editor [Letter]

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## Dear editor

We read with great interest the expert opinion by Blamoun et al<sup>1</sup> on twenty tips and pointers for medical students and residents to prepare for an Objective Structured Clinical Examination (OSCE).

The paper illuminates the importance of understanding (not “understating” as published) and applying strategies to succeed in an OSCE. While the paper offers practical and actionable approaches to implement during an OSCE, we wish to reinforce two dimensions of the article.

First, we strongly support Blamoun et al affirming that standardized patients (SPs) should be considered as real patients. Learners can benefit from mnemonic devices to understand and remember the essential steps to consider while interacting with a patient. Nevertheless, learners should not forget that the SP is a real person and that the relationship between them and the SP is authentic. Although the OSCE situation is staged, no mnemonic device can replace the genuine connection between two people. SPs and OSCE raters are aware of the difference between a contrived and a genuine connection.

Second, the authors suggest that static/“question” stations, although contradicting the purpose of an OSCE, should be approached as a multiple choice question. In that regard, we wish to emphasize that Boursicot et al<sup>2</sup> state that an OSCE is an inappropriate and inefficient way of administering knowledge questions such as oral discussions, multiple choice questions, or short answer questions. Downing and Haladyna<sup>3</sup> affirm that an OSCE should test clinical skills such as history taking, physical examination, communication skills, technical skills, and clinical reasoning. The combination with non-clinical skill activities threatens the validity of the OSCE.

We commend Blamoun et al for providing crucial insight on how medical students and residents can prepare for an OSCE. In this letter, we insist on authenticity when communicating with SPs and urge OSCE organizers to abandon knowledge stations.

## Disclosure

The author reports no conflicts of interest in this communication.

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