



Part III

Patient Encounters and Performance Skills (PEPS[®])

Candidate Guide

Released August 2023

Final version expected to be released February 2024

OVERVIEW OF TERMS

- **Cycle:** The *time* the candidate spends within a specific patient encounter or skills station.
- **Device:** NBEO-provided laptop that candidates will be using for the Part III PEPS examination.
- **Evaluation Form:** A checklist that an examiner or standardized patient (SP) uses to evaluate the candidate.
- **Exam Application/Platform:** The application (software) interface the candidate will use on an NBEO-provided device.
- **Finished:** Condition when a candidate has completed their performance and will no longer be scored on exam items.
- **Item:** A numbered procedural element within each skill or scenario evaluation.
- **NBEO®:** National Board of Examiners in Optometry®
- **NCCTO®:** National Center of Clinical Testing in Optometry®
- **Observation Time:** Three minutes before the patient encounter or skill station cycle starts. Candidates may use this time to familiarize themselves with the current station. During patient encounter stations, the candidate will receive patient encounter overview information.
- **Patient Encounter Overview:** Information provided during the observation time for patient encounter stations. The patient encounter overview is limited to patient demographics, the chief complaint, the review of systems (ROS), and a current medication list.
- **Patient Encounter Station:** A station in which the standardized patient (SP) portrays a clinical case scenario; the candidate will interview the SP based on the chief complaint, synthesize and analyze clinical data, and generate a patient encounter note.
- **Repeat:** Condition where a candidate wishes to repeat a skill or item.
- **ROS:** Review of Systems
- **Exam cycle:** Time interval between the start and finish of an individual station (skill or patient encounter).
- **Session:** A complete 12-station exam; any scheduled testing day may have one or more sessions.
- **Skill Station:** Station in which clinical skills will be performed on a standardized patient (SP).
- **Skill:** An action/skill the candidate performs on a standardized patient (SP).
- **Station:** Room where the candidate performs a skill or engages in a patient encounter.
- **Stop:** When a candidate's performance is stopped for either safety purposes or because they have used all available attempts to complete a skill.

ROLES

- **Candidate:** An individual taking the exam.
- **Encounter Examiner:** An individual trained to score the candidate's patient encounter note.
- **NCCTO Staff:** NBEO employees who are responsible for administering the exam.
- **Proctor:** NCCTO staff member who can confirm views in the Posterior Segment Skills Station.
- **Skills Examiner (SE):** The individual trained to score the candidate's skills station performance. On-site SEs may confirm views and ensure SP safety.
- **Standardized Patient (SP):** The individual trained to serve as a patient and interact with the candidate during the examination process.

For further information regarding the blueprint and scoring development for this exam, please see the Part III PEPS Model and Blueprint available on the NBEO website.

Candidates are expected to thoroughly review this guide in preparation for the NBEO Part III PEPS examination.

In addition to reviewing this Candidate Guide, the following information should be reviewed by candidates in preparation for their examination.

EVALUATION FORMS

The following evaluation forms contain the items examiners and SPs use to assess candidate performance. Candidates are scored based on whether the candidate performed the item in its entirety (yes-no) and/or **how** the candidate performed the item (performance quality). The evaluation forms (located on the NBEO Part III PEPS webpage) and listed below display the items/categories upon which candidates will be scored.

- Anterior Skills Evaluation Form
- Posterior Skills Evaluation Form
- Candidate Evaluation Form
- Patient Encounter Evaluation Form

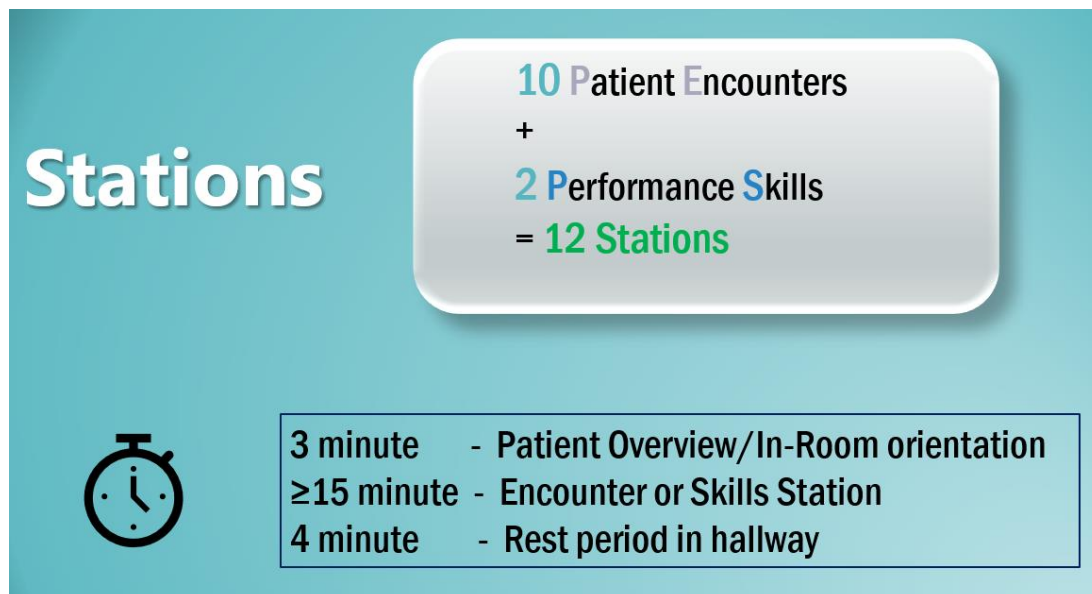
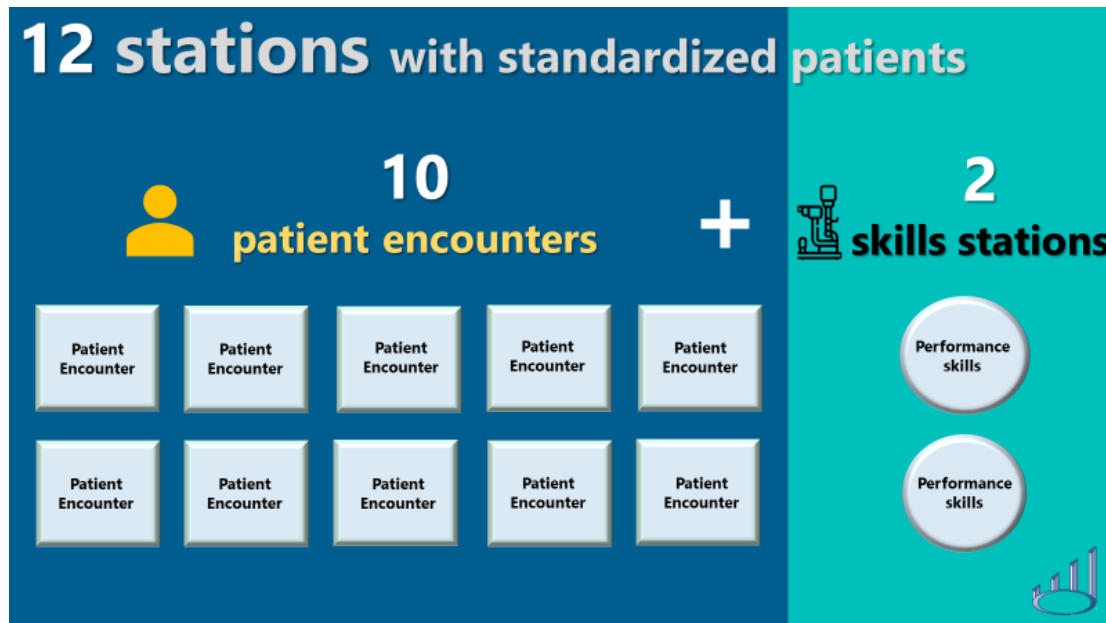
ADDITIONAL HELPFUL INFORMATION TO REVIEW

(Available on the NBEO website)

- Part III PEPS Site Information & Equipment List
- Part III PEPS FAQ's
- Part III PEPS Software Interactive Tutorial (coming February 2024)
- Part III PEPS Orientation Video (coming February 2024)
- Part III PEPS Model and Blueprint

PART III PEPS OVERVIEW

The Part III Patient Encounters and Performance Skills (PEPS) exam is a 12-station performance-based exam designed to assess clinical decision-making and performance of essential optometric skills. The 12 stations comprise ten patient encounter stations and two clinical skills stations. Stations are completed over a 4.5-hour session involving standardized patients.



Candidates will rotate through 12 stations. Exam stations, including patient encounters and skills stations, are further described later in this document. Candidates may start in a skills station or a patient encounter station. Starting exam stations will be determined based on random assignment. Candidates are not allowed to select their starting point.

Additionally, every exam station cycle will be fully recorded (audio and video).

Ten Patient Encounter Stations ≥15-Minute Examination Time

1. Obtain a case history from the SP.
2. Analyze provided clinical data.
3. Request ancillary tests.
4. Educate SP about the diagnosis.
5. Complete patient encounter note.

Anterior Segment Skills Station ≥15-Minute Examination Time

Biomicroscopy
Goldmann Applanation Tonometry
Gonioscopy

Posterior Segment Skills Station ≥15-Minute Examination Time

Binocular Indirect Ophthalmoscopy
Dilated Biomicroscopy & Non-Contact Fundus Lens Evaluation

PART III PEPS ADMINISTRATION

EQUIPMENT

The NCCTO will provide all necessary equipment used during the exam. Please review the Part III PEPS Site Information and Equipment List for information.

ATTIRE

- Candidates are expected to wear *professional attire*.
 - NBEO interprets professional attire as attire that **EXCLUDES** jeans, shorts, athletic pants, T-shirts, scrubs, garments that are immodest (e.g., tank tops, sheer clothing), tennis shoes, sneakers, or flip flops.
 - Collared short-sleeved shirts are acceptable.
- **Candidates must bring and wear white lab coats throughout the exam.**
- The NCCTO staff will address candidates reporting to the test center in attire deemed inappropriate, **and they may not be permitted to take the exam.**
- Please use the provided restrooms to change clothing if needed.

NBEO ACCOUNT INFORMATION

Candidates must know their OE TRACKER® number and NBEO password, which will be used to sign into the exam device. The NBEO password is the same password the candidate created and used to register for the NBEO exam or view scores on the NBEO website.

ARRIVAL TO TEST CENTER

REPORTING LOCATION

The reporting location is:

200 South College Street
Suite 2020
Charlotte, NC 28202
(20th floor)

REPORTING TIME

Candidates must report to the test center on the date and time they registered online.

- The check-in process begins at the time reflected in the candidate's email regarding registration. A candidate can review their registration here: https://www.nbeo.org/check_registration.cfm.
- Candidates should anticipate being on-site for approximately six hours for the exam. This time includes check-in, orientation, examination, and check-out.
 - Candidates should arrive **no earlier** than 10 minutes prior to their listed registration time. If a candidate comes to the building early, the 3rd floor contains an indoor mall with restaurants, shops, and cafes. Candidates are welcome to spend time on the 3rd floor while waiting for their check-in time.
 - Candidates who arrive late for check-in may be disqualified from the examination session.
 - Space and time constraints prevent candidates from being rescheduled to a later session on the same day.
 - In the event of a late check-in, the candidate forfeits their right to being tested (and the exam fee) for that date's administration.

PHOTO IDENTIFICATION

To be admitted to the test center, the candidate must present **one** acceptable form of identification that includes **an embedded photograph and signature**.

The only acceptable forms of identification are:

- A valid driver's license or an official photo identification card (ID) issued by the state or provincial government where the candidate resides.
- A valid passport.
- A valid student identification card from an accredited school/college of optometry provided this identification card includes **both a photograph and signature embedded in the card**.

To be considered valid, the ID must:

- Match the name listed on the NBE0 profile (<https://www.nbeo.org/profile/>)
- A candidate may be denied access to the test center if the name does not match.
 - To submit a name change, please complete and submit the form found [here](#) at least one week before the candidate's exam date. The candidate's online profile will be updated once the NBE0 records are updated internally.

AND

- Be current and not expired.

- If the ID is expired, a candidate may be denied access to the test center.

ON-SITE EXAM DAY CHECK-IN

ARM BANDS / CANDIDATE IDENTIFICATION

- All candidates will be provided with two armbands. These arm bands must be constantly worn during the exam.
- The candidate ID number is displayed on the side of the arm.
- The front of the armbands contains the candidate's ID number and the candidate's exam cycle, which is randomly assigned.
- The back of the **right** arm badge contains the candidate's name and OE TRACKER number. These are provided for verification purposes. Examiners, SPs, or staff may ask a candidate for their OE TRACKER number throughout the exam.

PHOTOGRAPH

- A staff member will take a picture of each candidate during check-in to ensure the correct candidate is being evaluated.
- For identification purposes, the candidate should appear in the photo as they will during the exam. For example, if the candidate plans to wear glasses during the exam, they should wear them in the photo; if they plan to have their hair pulled up in a ponytail, they should do so in the photo.

PERSONAL ITEMS AND LOCKER USE

- **Candidates cannot enter the NCCTO with any item considered luggage. Please plan accordingly.**
 - Luggage items are considered: suitcases, roller bags (larger than backpack size), and any item not able to fit in the lockers.
 - **Candidates will be turned away if luggage is brought to the NCCTO, which could impact the amount of time a candidate has for orientation.**
 - **NO FIREARMS OR OTHER WEAPONS OF ANY KIND ARE ALLOWED IN THE NCCTO. CANDIDATES FOUND TO BE IN POSSESSION OF ANY SUCH ITEM WILL NOT BE ALLOWED ADMITTANCE INTO THE NCCTO AND/OR WILL BE ESCORTED FROM THE PREMISES BY NCCTO SECURITY.**
- Lockers will be provided for candidates to store small personal items not allowed in the testing area. NCCTO considers cell phones, watches, wallets, purses, backpacks, etc., personal items.
 - Locker dimensions: 13 ½ inches deep, 11 7/8 inches wide, and 31 ½ inches tall. The opening is 9 inches wide. All personal items must fit securely inside the locker space.

ORIENTATION

Following check-in, the candidates will be seated in the orientation room, where they will have time to familiarize themselves with the equipment and supplies in the exam stations.

- Exam materials, including the orientation video, will be available in the orientation room. **NBEO strongly encourages candidates to watch this presentation prior to arriving at the test center.** Viewing the presentation on exam day will be optional. The Part III PEPS orientation video will be made available in February 2024.

EQUIPMENT OVERVIEW IN ORIENTATION ROOM

- Candidates are requested to treat the equipment with care.
- If there are any issues with the equipment or supplies, please inform a staff member immediately.
- Candidates should take time to become familiar with the candidate device (laptop), BIO headset, and slit lamp.

During *orientation*, the following information will be available to the candidate on the candidate's device. It is optional for candidates to review this information on exam day.

- Candidate Guide
- Site Information & Equipment List
- Candidate Orientation Video
- Part III PEPS Software Interactive Tutorial
- Evaluation Forms

This information will be available on the device during orientation until 10 minutes before the start of the exam cycle.

Information regarding specific equipment and supplies should be reviewed online in the Part III PEPS Site Information & Equipment List.

PERSONAL NOTES, HARD COPY AND ELECTRONIC FILES

- Upon arrival, candidates must place all electronics, study materials, and outside materials in their assigned locker. If a candidate has a question about any item, please ask staff.
- **No notes or other written materials may be taken into the orientation room or testing area at any time.**
- Notes/written materials discovered during the exam will be subject to confiscation and may be considered Improper Conduct (as defined in the Candidate Agreement).
- **Violating these policies may result in disqualification, dismissal, or failure of the examination.**
- **Please see the Candidate Exam Conduct and Exam Security Agreement (available on the NBEO website).**

DURING THE EXAMINATION

REASONABLE ITEMS

- Candidates are allowed to have "reasonable" items during the examination.
- All items must be provided to staff for inspection and approval.
- Examples of reasonable items are:
 - Tissues
 - Cough drops, mints, gum
 - Lip balm, hair ties, hair clips, sanitary items, etc.
 - Eye patch
- Bottles of water/soda, etc., and individually wrapped snack items must all remain outside the exam room. (Labels must be removed, and bottles must contain a lid.)

EXAM CYCLE

- The candidate will be assigned a specific station order and rotate as appropriate through the stations.
 - Depending on random assignment, candidates may start in a skills or patient encounter station.
- Below are three examples of a starting station and rotation order a candidate may be given.

Example Starting Station and Rotation Order



BREAK

There will be a scheduled break after the eighth cycle. Candidates may have a snack, use the restroom, and rest during this time.

FLAGGING

Candidates may flag any issues encountered in a previous station before entering their next station. Flags may be referenced during incident reporting time.

CANDIDATE IDENTIFICATION & INTRODUCTION

During the exam, candidates should refer to themselves by their OE TRACKER Number (or at least the last three digits of the OE TRACKER number). For example, suppose a candidate's OE TRACKER number is 700000. In that case, they may introduce themselves by saying, "I am Candidate 700000" or "I am Dr. 000."

CLOCK AND TIMEKEEPING

- Candidates are responsible for monitoring their time.

- No watches are allowed in the exam rooms; watches must be placed in the candidate's locker at check-in time.
- There is a synchronized wall clock in each exam room.
- Additionally, a countdown clock is available in the platform application on the candidate device. It displays the official time.
- Examiners, proctors, or SPs will not remind candidates of the remaining time.
- If time expires before a candidate completes the station, the items not performed cannot be scored.

ANNOUNCEMENTS

Following orientation and equipment review, candidates will be escorted to the exam hallway and stand outside their first assigned station. The following announcements will be played for each station:

- **"Candidates, please enter the exam room."** - signals candidates to enter their station and begin their 3-minute observation time while the door remains open.
 - An announcement will indicate 30 seconds remaining in the observation time.
 - Skill station SPs will be in the room during observation and the entire ≥ 15 -minute cycle.
- **"The exam cycle has begun."** - signals the official start of the ≥ 15 -minute cycle.
 - Patient Encounter SPs and Skills Examiners/Proctors will enter the room.
- **"The exam cycle has ended. Please proceed to your next exam room."** - signals the end of the cycle, at which point the candidate will exit the room, rotate to their next assigned exam room, and wait for the announcement to enter.

OBSERVATION/OVERVIEW TIME

- Candidates are provided with three (3) minutes of observation time in the station before the exam cycle begins.
- Information for the specific station will be displayed on the candidate's device for candidates to review.
- For the skills stations, candidates are encouraged to focus the slit lamp, wash their hands, and disinfect the slit lamp **during** observation time to save time during the cycle. The SP may request the candidate to wash their hands during the cycle if it was not done during observation time. Additionally, anytime the candidate contaminates their hands during observation time or the exam, the SP, proctor, or examiner may request the candidate to wash their hands before touching items in the room.
- Any scoreable items performed before the exam begins will not be scored and must be repeated once the exam begins.

During the observation time, candidates are encouraged to:

- Become familiar with the layout of the exam room.
- Review the skills station's Repeat Policy (posted on the back of the exam room door).
- Practice with equipment
 - Try on the BIO headset and adjust the pantoscopic tilt and oculars.
 - Become familiar with slit lamp operation.
- Focus the slit lamp.
- Wash hands.
- Disinfect the slit lamp.
- Set out supplies that will be used (do not open packages).
- Practice adjusting the lighting.

During the observation time, candidates cannot:

- Perform any action on an SP (this includes asking the SP to move into the slit lamp)
- Open any sealed packages.

CANDIDATE COMPLETION OF A STATION / END OF SCORING STATION

- The cycle ends with the last announcement or the candidate stating they are *finished*, whichever occurs first. In the Patient Encounter stations, if a candidate has not already submitted their patient encounter note, it will be automatically saved at the end of the cycle.
- Candidates who finish the station before the ending announcement plays and wish to end the scoring portion of the station may make the following statement to the SP: "**I am finished with this station.**" Consequently, the candidate **will not be scored on additional skills/items**, and the SP will start preparing the room for the next candidate. It is up to the candidate to decide whether to make this statement.
- If the candidate makes a confusing statement or begins any causal conversation, the SP or proctor will remind the candidate that it is the candidate's responsibility to let them know if they are finished with the station.

EXAM CYCLE

- Candidates are expected to remain in the exam room until the exam cycle ending announcement plays.
- Once the cycle ends, candidates should proceed to their next exam room.
 - An arrow on the back of the door indicates the next station's direction.
- Candidates will wait outside their next station until the announcement plays. Once the announcement plays, candidates may open the door, enter, and will again have observation time to familiarize themselves with the station equipment, supplies, and patient overview.

END OF EXAM

- At the conclusion of the final station, the candidate will exit the room and sit at the computer desk to the left of the exam room. Here, the candidate will complete an Incident Report and optional survey.
- Candidates should remain seated at the computer desk until dismissed by staff.

PERFORMANCE OF SKILLS / ITEMS

- Items are sequenced in the order in which they should be optimally conducted.
- Candidates may alter the sequencing of certain items performed within a skill **as long as the candidate's sequence makes logical sense.**

OBSERVERS

Occasionally, NBEO-approved personnel may be on-site observing the exam. Approved individuals may observe any aspect of the exam and be present in the exam room during the stations. Observers will not impact a candidate's score and should be ignored by the candidate. Observers have been instructed not to converse with candidates, examiners, or SPs in the examination rooms.

CANDIDATE QUESTIONS DURING THE EXAM

- Outside of regular exam questions (e.g., case history questions, inquiring about camera views, etc.) during the exam, SPs will only answer "where" questions, such as where the room lighting control is or where supplies/clinical materials are located.
- Candidates may ask "where" questions during observation and exam times.
- Questions on **how** to do things, **how** to use optometric equipment, or other instructional questions are not appropriate and will not be answered.
- **No additional examination time will be provided for any time used to ask and answer candidate questions.**

STAFF INTERACTIONS

Neutrality

- Examiners, SPs, and staff are trained to be neutral or show little emotion during the exam. Candidates should not regard this as a personal dislike or an indication of performance quality.
- All NBEO staff undergo diversity training from time to time.

Staff Interaction During Exam

- During the exam, examiners and SPs are permitted to say little other than what has been scripted.
- If a candidate asks a question that cannot be answered, examiners, SPs, or staff may respond with "I do not have that information," "I cannot answer that," or "It is up to you." These comments are not indicators of a candidate's performance or decisions but simply an answer for a situation where the examiners/SP/staff cannot provide guidance.
- If asked, examiners and SPs will not provide guidance on how or what to perform. Candidates must use their best judgment in these situations.

SP Titles

- Candidates may refer to the SP as "Mr. or Ms. Lee." Lee is the fictitious family name assigned to all SPs.

SP Personal Space

- Please be mindful of the SP's personal space, especially when using the slit lamp and the phoropter. In addition, be careful where patients are touched (e.g., do not touch the SP below the shoulder). Handshakes are permitted.

CASUAL CONVERSATION

- Beyond a cordial hello, SPs will not initiate any casual conversation with candidates.
- Casual conversation may occur **ONLY if the candidate initiates the conversation.**
- Candidates may not discuss specific topics like:
 - Information regarding NBEO/NCCTO
 - Information regarding Part III PEPS or any NBEO exam
 - SP's position (how long employed, experience with NBEO exams, etc.)
 - Candidate's performance
 - Optometry school, the candidate attends/attended.
 - Other information about the candidate or their performance

CANDIDATE WOUNDS / INJURIES / MEDICAL EMERGENCIES

- Any open wounds on a candidate's finger or hand must be covered.
- If a candidate has questions or concerns about whether a wound needs to be covered, please show the wound to staff during check-in.
- A bandage and gloves will be provided if a candidate becomes injured during the exam.
- Candidates who believe they have injured themselves must immediately notify an NCCTO staff member.
- When a candidate experiences an injury in which the potential for blood-borne pathogen exposure is possible, candidates must use Universal Precautions. The CDC recommends Universal Precautions for the care of all patients, regardless of their diagnosis or presumed infection status.
- Out of concern for safety and to prevent contamination of exam equipment, **any bleeding must be reported and stopped before continuing the exam.**
- No additional time will be given during the exam for injuries due to a candidate error.
- In the event a medical emergency occurs during the exam, candidates should remain calm, and a staff member will be there to assist and assess the situation.

RESTROOM / DRINKING FOUNTAIN USE

Candidates should use the restroom before the examination begins. **No time allowance** is given for restroom use during the examination session. If a candidate needs to use the restroom during the exam, they should inform the SP, who will escort them to the restroom. The same principles for restroom use apply to using the water fountain.

POST-EXAM INFORMATION

CANDIDATE INCIDENT REPORTS & SURVEYS

- At the conclusion of the final station, all candidates will exit their exam room and sit at the labeled workstation to the left of their exam room.
- Candidates should review their flagged stations to assist them in completing their incident reports. Candidate flags are not incidents and will not be reviewed by staff in lieu of incident reports. Staff will only see the incident report once it is submitted.
- Candidates can submit their incident report(s) up to 20 minutes after the conclusion of the exam.
- Misspellings or grammar will not impact the actions taken based on the submitted incident report.
- If staff have questions about the intent or meaning of a report, they will speak with the candidate directly.
- All candidates must select/indicate whether they have an incident to report. Candidates can submit an incident report for any station or multiple stations.
- Candidates are encouraged to think through their exam and use this opportunity to document any irregularity that may have occurred, which a candidate feels may have negatively impacted their performance. Incident reports **will not be accepted** from candidates once they have left the exam hallway.
- Candidates can document concerns involving the equipment, examiners, SPs, proctors, or the candidate's performance.
- An optional survey is automatically generated after the candidate submits the incident report.

Once all incident reports have been submitted, staff will review them. **Staff may review videos or interview the SP, proctor, or examiner for more information regarding the incident report.** Additionally, staff will inspect any reported equipment malfunction.

- Staff will only discuss incidents with candidates if clarification or further information is needed. If staff discuss an incident report with a candidate in the exam room; the candidate should assume the discussion is being recorded.
- All incident reports will be reviewed. If action is being taken, staff will communicate appropriately before candidates are dismissed.
- Candidates should remain at the workstation until dismissed by staff. Once all incident reports have been reviewed and it is determined that there are no administrative issues or that all issues have been resolved, staff will dismiss candidates from the exam hallway.

RETEST POLICY

NBEO retest policy dictates that repeat tests are provided only due to administrative irregularities (e.g., equipment failure, loss of electrical power, or an unacceptable patient), negatively affecting the candidate's performance. Retests are limited to the skill or station impacted by the irregularity.

ADDITIONAL EXAM INFORMATION

CANDIDATE-TO-CANDIDATE INTERACTION

- Candidates may only engage in conversation with each other during the check-in and orientation process. **Once candidates are escorted to the exam hallway, no communication may occur among candidates at any time during the examination or post-examination process.**
 - "Communication" includes conversation, verbal statements, non-verbal cues/expressions (e.g., thumbs up/down, shaking head, high-fives), and passing notes.
 - **Violation of this policy will not be tolerated and may be cause for disqualification from, dismissal from, or failure of the examination in accordance with the Candidate Agreement.**
 - Candidates are responsible for maintaining control of their laptops, and any trading/exchanging may be considered Improper Conduct (as defined in the Candidate Agreement).

CODE OF CONDUCT

All exams performed at the NCCTO are recorded (audio and video). Candidates will be scored in part based on what is seen and heard on the recording. Action may be taken by NBEO if there is any reason to believe that improper conduct has occurred. All candidates sign and agree to the Candidate Agreement and Ethics Policy when registering for the Part III PEPS examination. Copies of the agreement/policy are available on the NBEO website.

SCORING PRACTICES

NBEO uses quantitative and qualitative data analysis to evaluate examination uniformity and fairness. Candidates who achieve scores above the overall cut-off requirement receive a passing score. A Part III PEPS score below the cut-off requirement will result in a failing score.

PATIENT ENCOUNTER STATIONS

(10 stations)

The ten patient encounters have been classified into one of the following nine clinical presentation categories:

- Anterior Segment Disease
- Binocular Vision
- Contact Lenses
- Glaucoma
- Neuro-Ophthalmic Disease
- Pediatrics
- Posterior Segment Disease
- Refraction
- Systemic Disease

OBSERVATION/OVERVIEW TIME

The screenshot shows the NBEEO interface during the 'Overview' phase of an encounter. At the top, there is a progress bar with three stages: 'Break' (completed), 'Overview' (current), and 'Encounter' (pending). The 'Overview' section displays patient demographic information and the chief complaint. The demographic information includes: Age: 10 months, Sex: Female, Race: American Indian, Race name: extra, and Ethnicity: Hispanic or Latino. The chief complaint is listed as 'test chief complaint TEST'. The interface also shows the NBEEO logo, a timer at 00:31, and the candidate name 'Candidate One'.

- After an announcement to enter the exam room, candidates will have three minutes to review the overview information regarding the patient encounter. The overview information will include patient demographics, chief complaint, review of symptoms (ROS), and a current medication list.
- Candidates can assume that the patient accurately filled out the ROS using non-medical terminology while in the waiting room.
- Overview information will remain on the device until the exam cycle ends or the candidate submits their patient encounter note.

Exam room doors should remain open during observation time. If a candidate has a question, they may ask the hallway monitor. SPs will not be in the patient encounter station examination room during this time.

Please note that if the patient presented in the patient encounter is a child, the candidate may be speaking with the parent/guardian of the patient. The SP will tell the candidate if they represent a parent or guardian.

When the exam cycle begins, the SP will enter the room, and the candidate will be allowed to start asking the SP questions.

CASE HISTORY (SUBJECTIVE)

- The candidate is expected to conduct an appropriate Subjective Interview, engaging the patient with questions directly, informed by the chief complaint and preliminary information given, at a level sufficient to inform the course of the remainder of the patient encounter.
- The SP will portray a patient presenting in an office. Candidates should inquire about the patient's HPIs, medical/ocular history, medication use, allergies, surgical history, family medical/ocular history, and social history.
- Candidates should be prepared to respond to the patient being **portrayed** rather than the SP's actual personal characteristics. **For example, the SP may be a Caucasian female in her mid-40s not wearing glasses, portraying an elderly Asian male who wears glasses.**
- If a candidate asks a question during the Case History for which the answer is not provided to the SP on their script, the SP will respond, "I do not know," or give a similar response.
- Candidates will not need to enter subjective information into a patient encounter note. The scoring of the subjective information is based on what is verbalized by the candidate for this section.
- Candidates may ask the SP questions at any time throughout the exam station.
- Candidates will not be penalized for referring to information on the device during the encounter station. When a candidate needs to review information on their device for an extended amount of time (i.e., reviewing clinical data, ordering and reviewing ancillary tests, completing the assessment and plan), candidates may state, "Please give me a moment to review some information on my device." This statement is not required but may ease transitions. The SPs are trained to expect that there may be extended pauses while candidates review information or type.

CLINICAL DATA

Clinical data will be available on the candidate's device once the overhead announcement is made: "The exam cycle has begun." Clinical data will remain on the device until the exam cycle ends or the candidate submits their patient encounter note.

The clinical data presented is dependent on the specific patient encounter. The following information will be in the clinical data if associated with the patient encounter:

- Pretest information
- Refractive information
- Anterior segment evaluation
- Posterior segment evaluation
- Additional testing included by the Scenario Development Committee and the Part III PEPS Council

After receiving the clinical data on the device, candidates may choose to review data, order ancillary tests, ask the SP questions, or fill out the patient encounter note in any order they wish.

ANCILLARY TESTS (OBJECTIVE)

After reviewing the clinical data, the candidate can select ancillary tests. Candidates must type out ALL tests to be ordered and provide indications for why each test is ordered. Ancillary tests should be ordered as *specifically* as required in a clinical setting.

Candidates may request commonly grouped tests such as a CBC or a metabolic blood panel. Candidates should not order unnecessary tests. Some patient encounters may not require ancillary testing, so

selecting "No ancillary tests to submit" along with "No further testing indicated" would be appropriate in those patient encounters. Candidates should approach ordering ancillary tests as if this were an actual patient in their care.

Example Candidate ancillary test entry:

Test name: Westergren ESR

Indication: Rule out Giant Cell Arteritis

The screenshot shows a web-based interface for entering ancillary tests. It features a top navigation bar with three tabs: 'Clinical data', 'Ancillary tests' (which is highlighted in blue), and 'Assessment & Plan'. On the left side, there is a sidebar with a blue circle icon and the text 'Ancillary tests'. The main content area is titled 'Ancillary tests' and contains the following text: 'What ancillary tests would you order for this patient? Please document the specific test name and a concise indication or reason for ordering said test. You may add a next test by clicking the "+" sign at the bottom of the page. You may also choose not to document any ancillary tests by clicking the "No ancillary tests" button below.' Below this text are two input fields: 'Test name' and 'Indication'. At the bottom left of the input area is a '+ Add another test' button. At the bottom right are two buttons: 'No ancillary tests to submit' and 'Submit ancillary tests'.

After submitting their ordered ancillary tests, the candidate will receive the ancillary tests associated with the patient encounter. The ancillary test results given to the candidate may or may not correspond with what the candidate ordered. Some test results may be normal, and it is the candidate's responsibility to recognize abnormalities.

These ancillary test results will remain on the device until either (1) the exam cycle ends or (2) the candidate submits their patient encounter note.

PATIENT EDUCATION

The candidate should educate the SP about their condition by explaining the diagnosis, its etiology (pathophysiology), and any jargon associated with the diagnosis. Except for the actual diagnosis, candidates should avoid jargon when communicating with the SP. Explanations should be in a language and manner that the average patient can understand.

After Patient Education, if the candidate no longer wishes the SP to remain in the room (preferring to complete the patient encounter note alone), the candidate may state to the SP, "Thank you, Mr. or Ms. Lee; you may check out." or something similar. Note that once the SP leaves the room, they are not allowed to reenter; therefore, candidates must be confident that they have completed all questions and patient education before dismissing the SP. It is the candidate's choice to dismiss the SP. If the candidate does not dismiss the SP, the SP will remain in the room with the candidate until the exam cycle ends.

Skill station SPs will remain in the room for the entire exam cycle.

PATIENT ENCOUNTER NOTE (ASSESSMENT AND PLAN)

Please note that the Subjective and Objective portions of the patient encounter will not need to be recorded by the candidate: The information is being collected through the interaction with the SP and the

submission of ancillary tests.

The screenshot shows a web-based form titled 'Assessment & Plan'. At the top, there are three tabs: 'Clinical data', 'Ancillary tests', and 'Assessment & Plan'. The 'Assessment & Plan' tab is selected and highlighted in blue. Below the tabs, the form is divided into sections. The first section is 'Diagnosis', which has a dropdown menu. The second section is 'Eye', which has four radio buttons labeled 'OD', 'OS', 'OU', and 'N/A'. The third section is 'Plan', which is a large, empty text area. At the bottom right of the form, there is a blue 'Submit' button.

ASSESSMENT

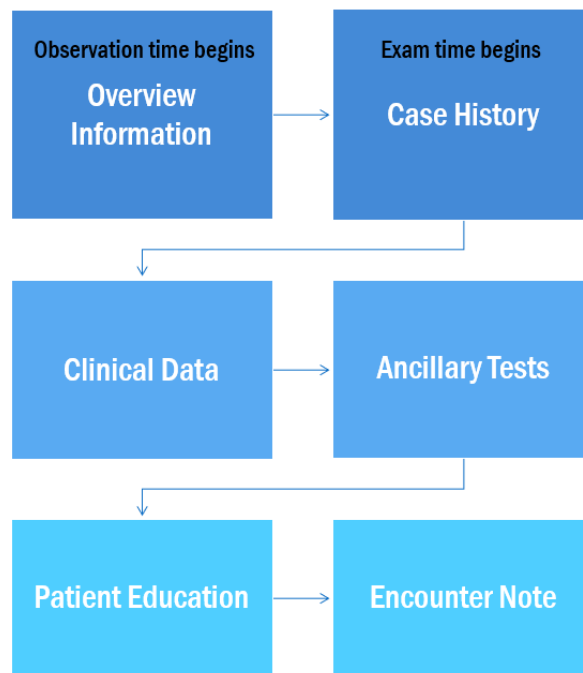
- Primary or top-level diagnosis (first element of a differential diagnosis).
 - Candidate must select the location, if applicable.
 - Candidate must list the most specific diagnosis based on the ICD-10.

PLAN

With regards to the primary diagnosis, the plan should include:

- Treatment
 - Medical therapy: e.g., pharmaceutical prescriptions (with instructions on use)
 - Non-medical therapy: e.g., refractive prescriptions (with instructions on use)
 - Referrals (if any) and reason for referral; this should also include to whom and why.
 - For example, it is unacceptable to indicate "refer to ophthalmology." The referral must be specific and state, for example, "Refer to retina specialist for the repair of retinal detachment."
 - Further testing requirements and indications (rule-ins or rule-outs), if appropriate
- Patient Education:
 - Home care instructions.
- Return to the clinic or follow-up date.

The information typed by the candidate is saved continually. The system will submit what was typed for scoring if time runs out before the candidate clicks submit.



REPEATING ITEMS

Submission of ancillary test(s) and the patient encounter note are final. Candidates cannot return to these elements and revise following submission.

- After candidates submit ancillary test(s) with or without the inclusion of an indication, they cannot go back and resubmit.
- After candidates submit their encounter notes, they cannot go back, edit, and resubmit.

SKILLS STATIONS

(2 stations)

There are two stations in which the candidate will perform optometric skills on the SP. Please note that the patient encounter station's case history is also considered a skill and will be scored as such. See the "**Case History (Subjective)**" section for more information. Candidates must state structures when viewing and state findings verbally in the same manner as they would enter them into a patient record.

ANTERIOR SEGMENT

Anterior segment instructions

All items will be performed on one eye of the SP. The patient will instruct you which eye to perform each skill. You must state your findings verbally in the same manner as you would enter them into a patient record. The findings must be accurate for credit.

Biomicroscopy

Perform a comprehensive slit lamp examination

- ✓ You may use a cotton-tipped applicator to assist in the eversion of the upper eyelid

Goldmann applanation tonometry

Perform Goldmann Applanation Tonometry

- ✓ You should use maximum illumination for camera purposes

Gonioscopy

Obtain and maintain a clear gonioscopic view and perform a systematic examination of all four anterior chamber angle quadrants

The candidate should ask which eye (OD or OS) to perform the skill for each skill tested. If at any point a candidate does not remember, they may ask for clarification.

BIOMICROSCOPY

Candidates are to perform a slit lamp examination to include each item listed in the evaluation form on **one eye** of the SP, as indicated by the SP. Candidates must verbally state their findings while examining the structures to the examiner in the same manner as would be entered into a patient record.

- The surfaces of the slit lamp biomicroscope that come into contact with the patient's face should be cleaned before use by wiping with an alcohol wipe.
- Cleaning the slit lamp can be done during observation time.
- Candidates should assume the tonometer probe and gonioscopy lens are already cleaned and ready for use.
- Candidates should assume the SP has less than three diopters of cylinder.

GOLDMANN APPLANATION TONOMETRY

Candidates are to perform Goldmann Applanation Tonometry on **one eye** of the SP, as indicated by the SP. Anesthetic must be used in the tested eye only. The candidate must verbally state their findings to the examiner in the same manner as would be entered into a patient record.

GONIOSCOPY

Candidates are to perform gonioscopy on **one eye** as indicated by the SP. To promote patient comfort during gonioscopy, Celluvisc™ must be used. During the skill, the candidate is expected to obtain and maintain a clear gonioscopic view of the anterior chamber angle and perform a systematic examination of all four quadrants, **centering the view** of the angle using the appropriate mirror. The candidate must identify the correct quadrant. The candidate must verbally state the findings to the examiner in the same manner as would be entered into a patient record.

SAFETY

Please note that the candidate touching their hair or face after washing their hands breaks hygiene protocol, and they may be asked to wash their hands before touching the patient or contact side of the equipment.

Four attempts are allowed to complete each skill. Upon unsuccessfully performing the fourth attempt, the candidate will be stopped by the examiner and instructed to move on to the next skill. The candidate may be stopped before the fourth attempt if the examiner or SP believes the candidate is placing the SP at harm. In this case, the last intentional performance of an item will be scored.

POSTERIOR SEGMENT

Posterior segment instructions

All items will be performed on one eye of the SP. The patient will instruct you which eye to perform each skill. You must state your findings verbally in the same manner as you would enter them into a patient record. The findings must be accurate for credit.

Binocular indirect ophthalmoscopy

Perform BIO with the patient may be seated or reclined (pending consent)

Dilated Biomicroscopy & non-contact fundus lens evaluation

ⓘ You must state structures while viewing them.

Properly examine the following structures without the non-contact fundus lens:

- ✓ Crystalline lens (with direct and retroillumination)
- ✓ Retrolental area/anterior vitreous

Properly examine the following structures with the non-contact fundus lens:

The candidate should ask which eye (OD or OS) to perform the skill. If a candidate does not remember which eye they were to perform a skill, they may ask for clarification.

- Surfaces of the slit lamp biomicroscope that come into contact with the patient's face should be cleaned before use by wiping with an alcohol swab; this can be done during observation time.
- Candidates should efficiently perform the dilated skills and be mindful of not shining the light in the same area of a patient's eye for an extended time. SPs may ask for a break as needed.

BINOCULAR INDIRECT OPHTHALMOSCOPY

Candidates are to perform binocular indirect ophthalmoscopy (BIO) on one eye of the SP as indicated by the SP. Candidates can perform BIO with the SP seated or reclined (pending consent).

Candidates must state their findings verbally in the same manner as they would enter them into a patient record. The findings must be accurate for the candidate to receive credit.

- The SP will set the light for BIO at the appropriate mark, and candidates should not adjust the

BIO rheostat.

- The optimal working distance is between 18-25 inches, and the camera will record the image the candidate views through either ocular.
- Candidates can perform BIO with the SP seated or reclined; however, the SP may request a seated, as opposed to reclined, exam for medical reasons.

DILATED BIOMICROSCOPY AND NON-CONTACT FUNDUS LENS EVALUATION

Candidates will examine the posterior vitreous, optic nerve, **four** arcades, and macula using the biomicroscope **with** a non-contact fundus lens. All items will be performed on **one of the SPs eyes**. Candidates must state structures when viewing and state their findings verbally in the same manner as they would enter them into a patient record.

For the slit lamp, the view is through the left ocular. When examining any ocular structure, the view cannot be a "fleeting" view. **If repeating a skill, the last intentional performance of an item will be scored.**

STATING FINDINGS

- Candidates are strongly encouraged to talk throughout their exam.
- Candidates are encouraged to speak **clearly** and **audibly**.
- Candidates must state their findings in the same manner as they would be entered into a patient's medical record.
- Candidates must identify and describe what is being examined as they view it.
 - Appropriate **clinical terminology** (structures being identified/assessed) should be used when evaluating ocular health in the skills stations.
- Candidates should avoid stating their ocular health findings using terminology such as "OK," "fine," "WNL," or "not bad."

EXAMINERS / PROCTORS

- Examiners/proctors are present in the Anterior and Posterior Segment Skills Stations.
- Only the SP will be in Patient Encounter Stations.
- The examiner/proctor may talk to the candidate during the exam or provide instructions. Do not be alarmed; this is part of the exam.
- Examiners/proctors will confirm the presence of a view if asked.

SKILL STATION VIEWS

- As part of the exam process, the slit lamp and BIO headset are equipped with cameras that obtain live images as viewed by the candidate.
- When examining any ocular structure, the views cannot be "**fleeting**."
- Additionally, when the item requires viewing an entire structure, it means 360 degrees.

Location of Cameras

- For the slit lamps, the camera is mounted on the **left** ocular. Candidates should ensure that the image they are viewing is completely seen through the left ocular **only**.
- Candidates are scored based on what the camera captures through the left ocular.
- The camera is mounted centrally for the BIO headsets, with images recorded through each ocular.
- Extensive time has been spent ensuring all the cameras, monitors, video feeds, and recording systems are calibrated to the best of the NCCTO's ability. As a result, if the view is not obstructed, the recorded image will be exactly as viewed.

Obtaining and Confirming Views

- Candidates are responsible for ensuring the examiners or proctors have a view on the monitor.
- Candidates may ask at any point if there is a view, and they will be given a response of either "I have a view" or "I do not have a view."
- Examiners and proctors will only comment on the views while they are being performed. If a candidate asks at the end of a skill if the examiner or proctor had views during the skill, they will be told, "I can only comment on a view while it is being performed."
- If an examiner or proctor confirms the presence of a view, it only means that something is visible on the monitor.
- Confirmation of a view does not indicate:
 - Quality of a view.
 - Whether the view meets the minimum criteria.
 - Whether the view is of the correct angle/structure.
 - Whether the view is a "good view."
- If an examiner/proctor says they do not have a view, candidates are encouraged to troubleshoot and ensure nothing obstructs the view through the left ocular of the slit lamp or the central camera for the BIO headset.
- Candidates are not allowed to view the monitors at any time. Monitors are calibrated and positioned in a certain manner for optimal views by examiners/proctors trained to view the monitors.
- If it is determined that a candidate is attempting to view the monitor, this action may result in disqualification, dismissal, or failure of the exam.

Candidate Concerns

- Candidates who are amblyopic or monocular are advised to use the better eye for observing through the left ocular of the slit lamp. This may involve candidates altering their position at the slit lamp so that they can look through the left ocular using their right eye or wearing a patch on their right eye.
- Candidates who believe their amblyopic or monocular status warrants special accommodations other than what is described above should submit a written request to NBEO as described in the Test Accommodations Policy. https://optometry.org/policies/test_accommodations
- **Additionally, candidates who may require special accommodations should not schedule their Part III PEPS exam until a decision is made on their request.**

STAFF INTERVENTION DURING THE EXAM

In the event that a candidate has a problem with equipment, technology, or otherwise needs assistance, the candidate should inform the SP. The SP will summon staff to come evaluate the issue. Staff will resolve the problem and will instruct the candidate on how to proceed, including giving additional time if appropriate. If additional time is given, it will be clearly displayed on the candidate's device in the top left corner.

If a candidate is given additional time in a station, the non-affected candidates will not be notified during the cycle and their exam cycle will proceed as scheduled. At the end of the cycle for non-affected candidates, they will be notified on their device that the exam has been paused. This pause will allow all candidates to proceed to the next portion of the exam at the same time.

SAFETY AND PROCEDURE ATTEMPTS

Handwashing

- Candidates are expected to follow the CDC's guidelines for hand washing. Handwashing can occur during observation time, but if hands become contaminated, the candidates may be asked to wash their hands again.

Intervenes/Corrective Actions

- If there is an intervention, corrective action is expected on the part of the candidate. The candidate may then proceed with the rest of the skill.

Safety and STOPS

- After four attempts at an item, a candidate will be stopped. If a candidate endangers the SP, the candidate will be stopped immediately.
- If a candidate is stopped, they will be scored "no" on any remaining items for that skill and are not allowed to repeat the skill.
- If the SP is concerned about their safety, they can stop a candidate from continuing with a skill.

REPEATING ITEMS / SKILLS

Repeat information is posted in the skills rooms.

Repeating Items

- Candidates can repeat item(s) as long as they are within the same skill.

Repeating Skills

- Candidates **must announce** their intention to repeat before repeating the skill.
- Once the candidate makes the repeat statement, all scores recorded by the examiner are erased, and the candidate proceeds and is evaluated as if performing the skill for the first time.
- A stopped procedure or skill cannot be repeated.

Repeating Cautions

- While repeating can be a positive option, candidates are strongly cautioned to consider the remaining time limitation and whether they can repeat all the items within the skill in the time left. It has been noted that candidates who have not monitored their time sufficiently and try to repeat an entire skill for one missed item often run out of time.
- Additionally, it has often been noted that candidates repeating a skill tend to focus so much on the missed items that they overlook other items, resulting in a lower score than initially obtained.

NBEO would like to extend its collective best wishes for your success.

A final version of this document for the August 2024-May 2025 administrative year will be available in February 2024.