

On Exam v2.0 Writing Guidelines

For all sections which you are editing and not writing from scratch, please “Track Changes” under the Tools tab on Microsoft Word. Either using this function or highlighting all your edits in Red must be done for OnExam v2.0. This is essential to transpose these changes to computer code for the app.

1.0 Sectioning and Section Formatting

The following sections will highlight how each of the systems groups and special tests are to be sectioned. Note that each chapter including history, physical, and special tests are all in one document. Thus, an author doing the Respiratory System would compile History, Physical Exam, Egophony, Whispered Pectoriloquy, OSCE etc in one document.

1.1 Top Level

Each of the major systems will be further subdivided into:

- History
- Physical
- Special Tests
- Objectively Structured Clinical Exam (OSCE)

1.2 The History (Hx) Section

The History Section should include the following headers (note that some systems--such as Pediatrics or OB/GYN--may feature more sections as required to help organize specific information):

1. Identifying Information (ID)
2. Chief Complaint (CC)
3. History of Presenting Illness (HPI)
 - This should begin with a link to the generic HPI (OPQRST/OLDCARTS), stored elsewhere in the application
 - It should then touch on specific history points which are particular to that system and the different presentations for the pathologies of that system. For example, you could group abdominal examination questions as those to investigate vomiting and nausea, jaundice, abdominal pain, etc. The respiratory exam could be sectioned into questions about cough, dyspnea, etc.
4. Past Medical History (PMHx)
5. Family History (FmHx)
6. Social History (SocHx)
7. Substance Use
8. Medications

9. Allergies
10. Immunizations (+/-)
11. General Inquiry of ROS

The headings should not be numbered although they are presented here in suitable order.

At the bottom of the section, you should include a list of references, formatted as per the X.X References section of this document.

1.2 The Physical Examination (PhysEx) Section

The Physical Examination Section will be more flexible in its use of headers but that a general organizational approach should be used that acknowledges the following:

1. Inspection
2. Auscultation
3. Percussion
4. Palpation

The headings should not be numbered although they are presented here in suitable order.

Special tests--for example Rovsing's or Weber's test--should NOT be described in the PhysEx section but in a separate document and linked to where necessary. See further in this document how to insert a link for editing purposes.

At the bottom of the section, you should include a list of references, formatted as per the 5.0 References section of this document.

1.3 Special Tests

Each special test should be written and formatted to include:

1. An opening, small paragraph that describes what the test is used for and when
2. One or two paragraphs that outlines how to perform the test and what the findings mean
3. A paragraph that describes
4. A paragraph outlining basic evidence available for/against the test - this might be the place to also include a section on sensitivity/specificity if chapter authors are able to find this info
5. If possible, one sentence stating after who or what the test was named

New to OnExam v2.0, at the end of every special tests, you will list (if possible) 2-3 key search words that pertain to your Special Test. This is to allow users to search generically for specific tests. Therefore, if they don't know the specific name of the special test, they can search keywords to find it.

Examples:

Anterior Drawer Test Keywords: Knee, ACL, Cruciate Ligament

Rinne Test Keywords: Ear, Hearing Loss

At the bottom of the section, you should include a list of references, formatted as per the 5.0 References section of this document.

1.4 OSCE

New to OnExam v2.0, therefore this section must be newly written. The idea of this section is to re-create the system specific checklist for physical exams that students have to complete for their OSCE. This list will allow students to have a handheld checkable list of their specific OSCE station with a timer on the app for studying purposes.

The general headings of the OSCE can be flexible, however a general organizational approach should be used that acknowledges the following:

1. Introduction
2. Inspection
3. Auscultation
4. Percussion
5. Palpation
6. Special Tests

Keep this short and to the point! There are not to meant to be a study guide in learning the specifics of each physical exam, just a checklist. Here is a quick example of the Abdominal Physical OSCE:

Introduction:

- Wash Hands
- Introduction to patient
- Explain procedure
- Obtain Consent
- Positioning and Draping
- Ask if any tender areas and examine this area last

Inspection:

Abdominal:

- SEADS (Swelling, Erythema, Atrophy, Deformities, Skin Changes)
- Abdomen (Contour, symmetry, peristalsis, pulsations, distension)
- Umbilicus (hernia)

Extra-Abdominal

- Signs of Liver Failure (Jaundice, scleral icterus, palmar erythema, clubbing)

Auscultation:

- Bowel sounds (4 quadrants)
- Bruits (Aorta, Renals, Iliacs, Femorals)

Friction Rubs

- Liver
- Spleen

Percussion:

- Abdomen for Tenderness
- Liver Span
- Spleen
- Kidneys (CVA tenderness)

Palpation:

- Light (guarding, rebound, and tenderness)
- Deep (masses)
- Liver
- Spleen
- Kidneys
- Aorta

Special Tests:

Appendicitis

- McBurney's Point
- Rovsing's Sign
- Psoas Sign
- Obturator Sign

Ascites

- Fluid Wave Test
- Shifting Dullness

Cholecystitis

- Murphy's Sign
- DRE
- Pelvic Exam (Female)

In this above example, every bullet would be a checkmark on the list. Depending on your chapter, you may have multiple OSCE lists to create. For example Neurologic may have Upper Extremity, Lower Extremity, Cerebellum, Cranial Nerves etc. I understand that there is no official list to the OSCE, but you may consult other resources such as the 1) OSCE Notes attached in this email 2) OSCE and Clinical Skills Handbook, 2e by Katrina F. Hurley.

Note: It may be possible that an OSCE physical exam does not pertain to your specific chapter.

2.0 Fonts and Formatting

The following sections will highlight the proper fonts and formats to be used throughout the document. Some of these may change during the on-iPhone/iPad/iPod Touch review phase.

2.1 Fonts

The font for all headers and text is currently shortlisted to be in Calibri.

2.2 Headers

The format for headers is likely to change to optimize appearance on an iPhone/iPad screen. For the sake of the editing process, we'll ask all authors to follow a set hierarchy of headings. There are three different levels of headers and subheaders:

2.2.1 Article Title

Should be presented in **16-point bold underline**.

2.2.2 Section Header

Should be presented in **14-point bold underline**.

2.2.3 Section Sub-header

Should be presented in **12-point bold**.

2.3 Lists

Numbered lists will be reserved for steps that must be conducted in a fixed order or for lists where some members are more prominent/common/important than others and thus deserve a rank. All other lists will be bulleted.

Bulleted lists will be modeled after the following formatting hierarchy:

- First layer of unnumbered list
- Solid bullet
 - Second layer of unnumbered list
 - Hollow bullet
 - Third layer of unnumbered list
 - Plain hyphen
 - > Fourth layer of unnumbered list
 - > Arrow (greater-than sign)

In the case of numbered lists that require further ordered sub-lists, the following hierarchy will be used:

1. First layer of numbered list
2. Plain numbers, indented with a period
 - a. Second layer of numbered list

- b. Plain letters, indented with a period
 - i. Third layer of numbered list
 - ii. Plain, lower-case Roman numbers, indented with a period

3.0 Media, Graphs, and Tables

The following sections will outline media which can be used, general quality guidelines, as well as how to work them into the text of a given entry.

3.1 Photos, Illustrations, Graphics

The images that you would like to include in your chapter must be obtained from a non-copyrighted source. This means that scanning images from textbooks (e.g., Bates) is not an option. You can either generate your own image or use another image from a non-copyrighted source (e.g. some Wikipedia content).

A lot of the content at Wikipedia, specifically, should be available since we are not profiting from this app. Some of these images may have even been released into the public domain. If authors have a graphic they're wondering about, look into under the "images" section of Wikipedia where they list the exact protection scheme. If you are including an image, please have it in both your word document and a separate saved file.

3.2 Video and Audio

Video and audio files should be in MPEG and MP3 format, respectively, when submitted. If you are unable to convert the files or obtain them in these formats, ask your Section Editor or Editor in Chiefs for assistance converting. In your document, use blue font and underline for the text you want to be hyperlinked to your video/audio file. Also put the file name with file extension (i.e. ".mpeg" or ".mp3") in brackets after your hyperlinked text. Your video and audio files will have to be non-copyrighted. This means either creating the file yourself or using a non-copyrighted source.

3.3 Tables

We encourage you to create and use tables to deliver your information concisely. Keep in mind that the table will have to be viewed on a small handheld screen. The formatting of the table has not yet been agreed upon for the final app so use whatever format works well for you at this point (who knows, it may inspire the type of formatting we use in the end).

3.4 Graphs

Treat graphs the same way as you would an image/graphic. Use a non-copyrighted source or generate your own (e.g., using Excel). If Excel is used, also submit your Excel file with the graph to your Section Editor.

4.0 Internal Links

In the final product, references to special tests (*e.g.*, Fluid Wave Test when discussing ascites) will be hyperlinked. Please underline and make blue font the words you would like to have hyperlinked and put in brackets afterwards to which special test you would like the text to be linked to.

For example:

In the physical examination section of GI, one could evaluate a protuberant abdomen for ascites by conducting the [Fluid Wave Test \(Special Test: Fluid Wave Test\)](#) and by checking for [Shifting Dullness \(Special Test: Shifting Dullness\)](#).

Note: In this example, the name of the special test and the hyperlinked text are exactly the same so the content inside the brackets is a duplicate. This may not always be the case so please use the brackets system.

5.0 References

References will be listed at the bottom of each entry--be it a history, physical exam, special test, or other--under a References title. The sources will be numbered and will be organized as per the text Using the AMA Format (also used by JAMA). This is a free resource available at:

<http://library.tamu.edu/help/help-yourself/citing-sources/files/Using-the-AMA-Style.pdf>

There will be no in-text citations.

6.0 Section Editors

Section Editors positions were designed to be an extra reviewer for 2-3 chapters. Your specific responsibilities include:

- 1) Accept or reject any of the changes made to the chapters.
- 2) Ensure that your editors have a complete chapter consisting of: History, Physical, Special Tests, OSCE, and appropriate references.
- 3) Ensure that your editors have followed proper writing guidelines.
- 4) Send the final drafts of the chapter to eic@onexam.ca by Dec 22, 2013.

Final Note: These chapters were written by medical students just like yourself. Therefore, if there are new and more current guidelines, evidence, or word usage issues, please feel free to make changes. Please do your best to have reliable references along with your information/edits. Your chapters will be reviewed by sections editors, editors-in-chief, and physician faculty advisors. Most importantly, keep all info short and to the point, this app is meant to be a reference guide.