TIPS FOR TAKING THE ACVS EXAMINATIONS

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General Study Advice

- All individuals learn differently, choose the tips that work the best for your learning skills.
- Be sure to read the entire Examination Information Pamphlet. Information pamphlets are available in early September for the following year’s examinations.
  - Phase I: https://www.acvs.org/residents/phase-i-exam
  - Phase II: https://www.acvs.org/residents/phase-ii-exam
- Cramming usually does not work well for passing an examination because materials learned within 24 hours are difficult for most of us to recall. A final review should be a last effort to organize and brush up on previously studied materials, but is not suitable for remembering new information. Educational psychologists suggest that the most effective technique for long-term memory is to use a series of study periods over a predetermined schedule broken by regular intervals.
- Read suggested texts to reinforce your understanding of topics where you have less experience or showed weakness on a previous examination attempt.
- Review/work with residents or other candidates, if possible.
- Make a study calendar by day or week. Schedule the last few weeks for review and catch-up time.
- Remember to include breaks based on your personal needs.
- Take mock exams to practice.
- Time management is important – keep track of your progress.
- Visit a practice that does a lot of cases in your weak areas.
- Continue attending rounds during study time.
- Eliminate distractions while you are studying; allow for uninterrupted time.
- If you must work during examination preparation, schedule your studying to start several months before the examination. Try to arrange 2-3 months for concentrated, focused study right before the examination.
- Many find it helpful to organize their studies according to systems.
- Focus on current literature (the last 5 years).
- When studying, stop and reflect (summarize) on what you learned/read every few minutes.
- Take notes for later review.
- Prepare a list of questions/topics for review.
- Read every topic and allow extra time for difficult topics.

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• Do not just glance over topics you think you already know; study them.
• Do not rely on the knowledge you have gained in a professional capacity alone, as this may not always be technically correct.
• Pay attention to fundamental terms, concepts, and key definitions.
• The goal of your study should be for you to understand and digest the material: do not just read and memorize.
• Try mental exercises such as knowing the most common techniques and imagining scenarios.

Taking the Phase I Surgical Knowledge Examination

• Don't assume that multiple choice questions (MCQs) are easier than essay exams because the correct answer will be one of the choices. You must know exact details and specific points to answer MCQs. In simple terms, the MCQs aim to test a range of abilities including basic memory recall, understanding of the principles, and application of reasoning to principles and facts. It is therefore important to remember, understand, and to be able to apply the knowledge to practical situations.
• If you are uncomfortable with the format, consider taking a Kaplan type course (i.e., multiple choice test taking/success).
• Answer the question as written. There are no “trick” questions.
• First complete the answers for the questions you know well, and then go back to the difficult questions.
• Read the questions, including ALL the answer choices, carefully before answering.
• Do not make assumptions regarding the order of questions. Questions are randomized—do not assume that one question follows on from the previous one.
• Questions are not designed to mislead candidates. Good distracters often appear to be correct but in fact they are wrong. Distractors are designed to discriminate between those who really know the correct answer and those who do not.
• If you cannot eliminate all distractors, make an educated guess. There is no penalty for guessing.
• Make sure you answer all the questions and double-check your answers.
Taking the Phase II Surgical Competency Examination—Case-based and Practical Sections

- Read the entire legend accompanying each page and each question.
- Read the entire page carefully before answering. This may help you manage your time for the page.
- There are no “trick” questions. Questions are referenced to a specific textbook page or journal article.
- The following statement is from the information pamphlet: "If a question asks for a specific number of responses, you will be graded on only the requested number of answers. Additional responses beyond the number requested will not be graded. For instance, if we ask you for one diagnosis and you give us two, we will grade only the first answer." You will not lose points for extra answers. They simply are not graded, so be sure to list your top choice first.
- Do not leave blanks. If you must leave questions blank, be sure you answer questions you absolutely know first.
- Don’t look for “zebras” on the practical or case-based examinations. Pay attention to the “Explanation of Common Questions on the Practical or Case-based Sections” of the information pamphlet.
- When asked to “interpret data,” explain why values are increased or decreased from normal/expected values.
- Don’t dwell excessively on questions for which you are uncertain of the answer. Remember that each question and page of the examination is scored independently.
- Don’t carry doubt and self-deprecation to the next question; clear your mind and do your best on the next.
- When the question says be specific, be as specific as you can. Emphasize being as detailed as possible in descriptions and explanations. You aren't penalized for being verbose, but complete sentences are not required. The only time you're penalized is if you write something that's detrimental to the patient.
- Current literature is important; new questions are written each year based on the current literature.
- Remember that for the case-based section, once you have moved on to the next page you cannot go back, so use the provided dry-erase board if there's something you think you'll want later (such as signalment).