

Candidate name: XXXXXXXXXX, XXXXXXXX
Candidate code: XXXXXXXXXXXX **Your final result:** Pass
Examination session: May 2023 **Your total score:** 600

This report provides you with supplemental information on your performance on the National Assessment Collaboration (NAC) Examination.

The NAC Examination assesses core abilities to apply medical knowledge, demonstrate clinical skills, develop investigational and therapeutic clinical plans, as well as demonstrate communication skills at a level expected of a medical graduate entering into postgraduate training in Canada.

The exam assesses your performance across three broad domains that reflect a physician’s scope of practice as indicated in the following table. Each domain is assigned a weighting on the exam and the content weights are expressed as percentages.

| Domains | Weighting (%) |
|--------------------------|---------------|
| Assessment and Diagnosis | 70 ± 5 |
| Management | 15 ± 5 |
| Communication Skills | 15 ± 5 |

See p. 2 of this report for the domain definitions.

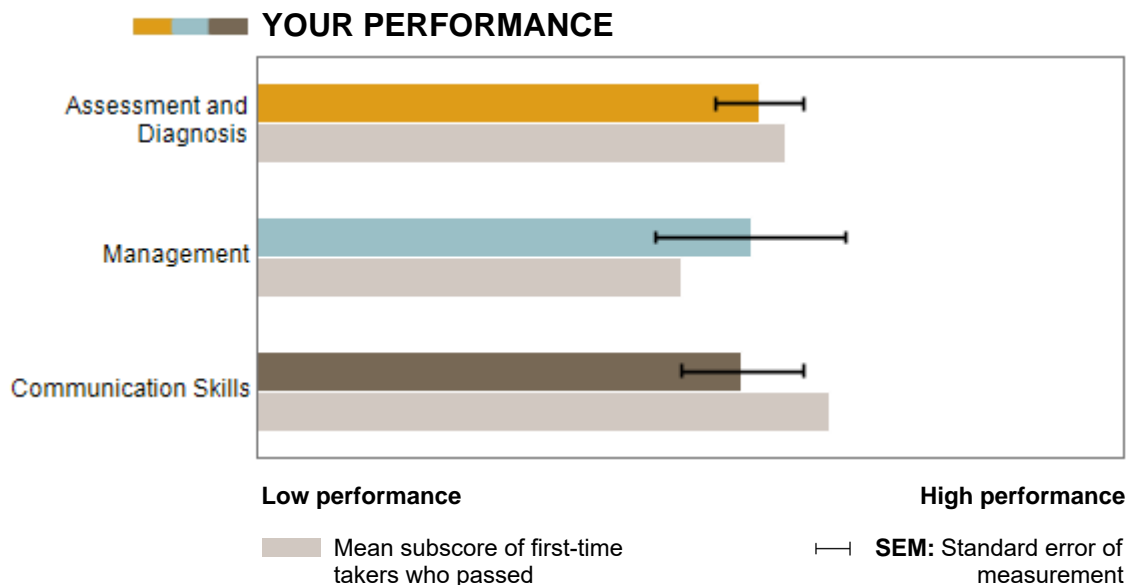
Figure 1 displays your performance in each domain. We provide your subscores along with the mean subscore of first-time takers who passed the same exam. We also provide the standard error of measurement (SEM) for each of your subscores. It represents the expected variation in your subscore if you were to take this exam again with a different set of questions covering the same domains.

Small differences in subscores or overlap between SEMs indicate that performance in those domains was somewhat similar. Overlap between the SEM and the mean score of first-time takers who passed signifies that performance is similar to the mean.

Subscores are based on less data than the total score and have less precision. Your total score and subscores cannot be compared as they are calculated differently. The pass score cannot be applied to Figure 1.

For more information, please visit the exam’s Scoring web page on our website, mcc.ca.

Figure 1: NAC Examination score profile



The following defines the three domains assessed by the exam:

- **ASSESSMENT AND DIAGNOSIS** covers the following physician activities:
 - **History Taking:** Acquires from the patient, family or other source a chronologic, medically logical description of pertinent events; gathers information in sufficient breadth and depth to permit a clear definition of the patient's problems.
 - **Physical Examination:** Elicits physical findings in an efficient logical sequence that documents the presence or absence of abnormalities, and supports a definition of the patient's problems; sensitive to the patient's comfort and modesty; explains actions to the patient.
 - **Diagnosis:** Discriminates important from unimportant information and reaches a reasonable differential diagnosis and/or diagnosis.
 - **Data Interpretation:** Interprets investigative data appropriately in the context of the patient's problems.
 - **Investigation:** Selects suitable laboratory or diagnostic studies to elucidate or confirm the diagnosis; takes into consideration associated risks and benefits.
- **MANAGEMENT:** Discusses therapeutic management, including but not limited to pharmacotherapy, adverse effects and patient safety, disease prevention and health promotion, when appropriate; selects appropriate treatments (including monitoring, counseling, follow-up); considers risks and benefits of therapy and instructs the patient accordingly.
- **COMMUNICATION SKILLS:** Uses a patient-centered approach; establishes trust and respect, and shows sensitivity to the patient's needs; provides clear information; confirms patient's understanding (encourages questions, and uses repetition and summarizing to confirm and/or reinforce understanding); respects confidentiality when appropriate; speaks clearly (volume and rate); avoids use of jargon/slang and uses vocabulary appropriate to the patient; demonstrates appropriate non-verbal communication (e.g., eye contact, gesture, posture and use of silence).