

Tips for Question Writing for the *Neurology*® Resident & Fellow Section

Adapted from “Item Writing Principles” by Lynne Shindoll, MA (Manager, eLearning)

Instructions for Social Media Formatting

- **IMPORTANT:** We do not post videos or figures with *identifiable* patients or patient information on social media.
 - Things to watch for: faces without blurring to obscure identity, voices that could be identified, visible tattoos, etc.
- **Post Length**
 - Twitter posts must be **280 characters or less**, including links, spaces, punctuation, and hashtags. Links are automatically shortened to 23 characters.
 - Twitter poll answer choices must be **25 characters or less**. We are limited to **no more than 4 poll answer choices**.

Principles of Question Writing

Tips for Good Questions

- Format = stem + 4 options
 - 3 plausible distractors
- Limit question to one concept
- Parallel construction of answer choices
- Consistent sentence length and style throughout the question
- One correct answer

Common Errors & Pitfalls

- Poor content selection
- Poor focus
- Including superfluous information that is not key to answering the question
- Negative stems (NOT, LEAST)
- “All/none of the above” answers
- More than one correct answer

Common Errors in Content Selection

- Too basic for intended audience
- Too broad to be useful
- Too detailed or tests minutiae
- Esoteric/controversial topics
- “Interesting” but not essential
- Facility/region specific

What do I Ask?

Recall

- Simple definitions
- Basic concepts

Analysis

- Pertinent history/physical findings
- Diagnostic testing that should be ordered?
- Relevant imaging studies
- Most likely diagnosis

Management

- Goal-directed actions to resolve problems
- Management/treatment principles
- Options list specific treatment

Evaluation

- Assess patient response to previous treatment to determine next step
- Determine extent to which treatment is effective
- Need for additional treatment

Content Selection: Unfocused question

Anti-DPPX is:

- A. a disorder associated with involuntary movements, hyperesthesias, and diarrhea
- B. a genetic disorder characterized by cerebellar atrophy
- C. a potentially fatal disorder if not detected early
- D. a disease that can result in psychiatric changes and blindness

Content Selection: Focus - *Improved*

A 37-year-old man has 2 years of involuntary movements, hyperesthesias, and diarrhea. He is found to have cerebellar atrophy and a heterozygous GAA expansion in *FXN*. He continues to worsen, and a serum autoimmune encephalitis panel is sent. Which of the following is most likely?

- A. Anti-Ri
- B. Anti-DPPX
- C. Anti-Yo
- D. Anti-Tr (DNER)

Content Selection: Too much superfluous detail

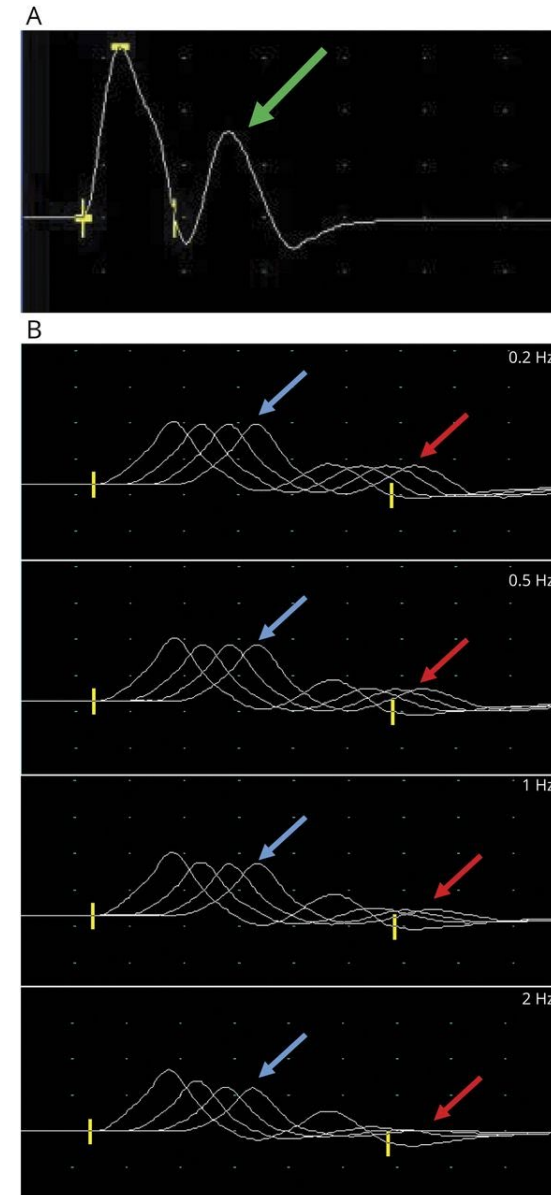
A 38-year-old woman presents for progressive weakness and fatigue. She initially experienced fatigable weakness after giving birth to her first child. Gradually she developed difficulty holding up her head at the end of a day. She also could not tolerate walking or standing for a long time. She denies droopy eyelids or double vision. She has tried to work outside the home in the past but states she has never been able to hold a job because of her fatigue. Her motor nerve conduction studies with repetitive stimulation are shown. Testing for AChR and MuSK antibodies is negative. After a positive genetic test result, she was prescribed fluoxetine. What is the most likely diagnosis?

- A. Slow-channel syndrome
- B. Myasthenia gravis
- C. Fast-channel syndrome
- D. RYR1 congenital myopathy

Content Selection- *Improved*

A 38-year-old woman presents for fatigable weakness and bilateral ptosis. Her motor nerve conduction studies with repetitive stimulation are shown. Testing for AChR and MuSK antibodies is negative. After a positive genetic test result, she was prescribed fluoxetine. Which of the following is the most likely diagnosis?

- A. Slow-channel syndrome
- B. Myasthenia gravis
- C. Fast-channel syndrome
- D. RYR1 congenital myopathy



Avoiding Bias/Stereotyping in Item Writing

Things to Avoid:

- Does the item include content that is different or unfamiliar to certain test takers?
- Is the item free of jargon?
- Will distractors be unusually attractive to certain test takers?
- Does the item portray certain groups in a bad light?
- Does the item depict certain groups in stereotypical situations or with medical conditions?
- Does the item depict certain groups with stereotyped emotions (or occupations or in certain situations)?
- Does the item contain biased language?