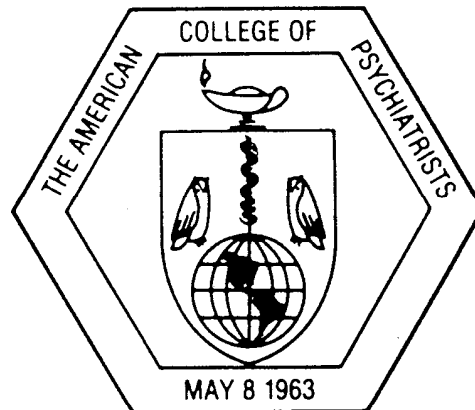


THE AMERICAN COLLEGE OF PSYCHIATRISTS

CHILD PSYCHIATRY RESIDENT IN-TRAINING EXAMINATION[®] (CHILD PRITE[®])

December 1 – 7, 2009



**INSTRUCTION MANUAL
For Program Directors and
CHILD PRITE Administrators**

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COMMUNICATION GUIDELINES

Questions concerning policies, receipt of test materials, administration of the examination, or billing and payments should be directed to:

Kathy Ricker
The American College of Psychiatrists
122 South Michigan Avenue, Suite 1360
Chicago, IL 60603
Telephone: (312) 662-1020
FAX: (312) 662-1025
Kathy@acpsych.org

Questions concerning the return of test materials, scoring procedures and examination results should be directed to:

Linda Waters
Prometric
1501 S. Clinton Street
Baltimore, MD 21224
Telephone: (443) 455-8121
FAX: (443) 455-8047
Linda.waters@prometric.com

CONFIDENTIALITY AND USE STATEMENT

The primary objectives of the Child Psychiatry Resident In-Training Examination[®] (CHILD PRITE[®]), offered by The American College of Psychiatrists (The College), are to provide an assessment of knowledge base of child and adolescent psychiatric issues and to provide educationally useful feedback to individuals and groups in the form of comparisons with peers in specific areas of knowledge. The CHILD PRITE is taken only by candidates in child fellowship programs. It may be used by residency programs as one factor, among many, for assessing the competency of a resident. Except as indicated herein, all residents' test results will be kept confidential.

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INTRODUCTION AND GENERAL INFORMATION

This Instruction Manual, which contains specific directions for administering the Child Psychiatry Resident In-Training Examination[®] (CHILD PRITE[®]), has been prepared by The American College of Psychiatrists (The College) to ensure that all psychiatric residents have an opportunity to be tested under comparable conditions.

The **REPORT OF TEST ADMINISTRATION** can be found on page 27 of this Instruction Manual.

Test Security

Test security is such an important aspect of an administration that it cannot be overemphasized. The training director is responsible for the security of all tests from the time they are received until they are returned to the resident. This means that no one is to have the opportunity to examine any test book at any time except the examinee taking the test. Also, no one may be permitted to copy the examination questions. **No examination test booklet shall be sent outside of the training program area unless authorized to do so by The College.**

Purpose of the Examination

While the purpose and construction of the CHILD PRITE follow the same stringent requirements as the PRITE, a few important differences exist between the two examinations. While residents may take the PRITE in all stages of psychiatry training, the CHILD PRITE is a 200-item specialty examination designed to be taken only by child fellows. This specialty examination is constructed and reviewed by child psychiatry specialists only from the PRITE Editorial Board. The examination surveys child and adolescent psychiatry issues in-depth. The content categories listed on pages 4 – 6 indicate the scope of the CHILD PRITE items which are unique to specialty practice in the field of child and adolescent psychiatry.

The CHILD PRITE provides a reasonably objective external criterion for use on a voluntary basis by training programs wishing to scrutinize curriculum content, goals, and effectiveness. The content of this examination and the policies governing its use are determined by democratic processes that seek to incorporate a broad segment of the educational community. These policies include specific safeguards, such as firm guarantees of confidentiality for individual residents and training programs, and prohibitions on the use of results for pass-fail purposes.

Each resident receives a detailed computer analysis of his or her test performance in comparison with other residents at a similar level of training. Each training director receives statistical summary data comparing his or her training program with other groups of participants. In addition, each training director receives copies of test results of individual residents.

Examination Stipulations

The following stipulations apply to each residency program's participation:

1. Test results of individual residents must be kept strictly confidential, except as indicated herein. A small amount of descriptive data must be provided for all participating residents (type of examinee, resident I.D. number, type of training program, and testing condition, etc.). Names, Social Security numbers, or other sensitive or personal factors about residents will **NOT** be collected. (See the instructions beginning on page 14 of this manual for further details.)
2. The results may be used as one factor, among many, for assessing the competency of a resident, but may not be used for pass/fail decisions.
3. The test must be administered during the period of December 1 through 7, 2009.
4. The makeup session should take place as soon as possible after the regular session has been concluded, but no later than December 11, 2009.
5. Uniform testing conditions and procedures are essential in a program that involves testing at many centers. To ensure a standardized testing environment for all examinees, the directions in this Instruction Manual must be followed exactly. This examination is intended to be a timed, proctored, closed-book examination taken under group testing conditions by child psychiatry residents. (Some flexibility is permitted to minimize hardship for residents unable to participate in standardized administration because of serious schedule conflicts or unanticipated difficulties such as illness, and to accommodate special testing needs, as required by the Americans with Disabilities Act.)
6. Test booklets must be collected after test administration and stored in a secure area. They will be distributed to residents at a later time when the examination results are returned to the program.
7. The training director at each participating training program must sign the contract supplied by The College. By signing the contract, each training director acknowledges and/or guarantees the following:
 - that all residents in the program are participating in CHILD PRITE
 - that the test results may be used by his or her program as one factor, among many, for assessing the residents' competency,
 - that the examination is not a certifying examination and agrees that it will not be used for making "pass/fail" decisions, and
 - that the program will take all measures necessary to comply with the Americans with Disabilities Act.

A program may not participate in CHILD PRITE unless the contract is signed and returned to The College, and payment is received in full.

8. The College must receive a signed contract by September 15, 2009. Payment for the examination materials ordered must be received by October 15, 2009. A late fee of \$35 per exam will be assessed for payments received after October 15, 2009.

9. The training director must notify The College **NO LATER THAN October 15, 2009**, of the following:
- all residents who have notified the program of any disabilities and auxiliary aids or modifications those disabilities necessitate,
 - the aid or modification the program has agreed to undertake,
 - any modification to the examination itself, which the program considers necessary, or
 - any determination that there is no appropriate on-site aid or modification.

How the Examination Is Constructed

This examination is constructed in a multi-stage, open-ended process designed to maximize its validity while permitting a large number of persons to influence its content. Representatives of The College, the American Academy of Child and Adolescent Psychiatry, the American Association of Directors of Psychiatric Residency Training, the American Psychiatric Association, and four psychiatry residents make up the CHILD PRITE Editorial Board, which develops the examination.

Members of the Board write the items. Each item is reviewed on the basis of (1) educational significance, (2) appropriateness of wording, and (3) verification of the correct responses. Reviewers may recommend any changes that seem desirable, including elimination of any items they consider inappropriate for this examination.

The CHILD PRITE Editorial Board makes the preliminary selections for items to be included in the examination. The primary goals at that time are to select well written, educationally significant items and to ensure appropriate distribution by topic. The wording of selected items is further refined with the assistance of consultants from Prometric who are experts in test construction methodology. The selected items are separated into content batches and sent to designated members of the PRITE Editorial Board for final review. Those members make recommendations to the Editor-in-Chief for the finalization of the 200 items that appear on the examination.

CONTENT CATEGORIES FOR THE CHILD PRITE

Titles of the 10 categories are in capital letters; the outlines are clarifications and conventions, but are not meant to be full definitions.

I. DEVELOPMENT

- A. Normal: Infancy, child, adolescent
 - 1. Cognitive
 - 2. Language
 - 3. Moral
 - 4. Biological
 - 5. Psychosexual
 - 6. Social
 - 7. Psychological (e.g., analytic, learning theory)
 - 8. Ethnic/cultural
- B. Family
- C. Developmental formulations
 - 1. Risk factors
 - 2. Protective factors
 - 3. Temperament factors
 - 4. Outcomes
- D. Anthropology/sociology/ethology

II. BIOLOGICAL SCIENCE

- A. Neurobiology
 - 4. Developmental
 - 5. Molecular
 - 6. Neuropathology
 - 7. Neurophysiology
 - 8. Imaging
- B. Genetics
 - 1. Molecular
 - 2. Epidemiological
- C. Basic psychopharmacology
 - 1. Developmental aspects
 - 2. Pharmacokinetics/pharmacodynamics

III. EPIDEMIOLOGY

- A. Cross-sectional
- B. Longitudinal
- C. Comorbidity
- D. Methodology
- E. Cross-cultural

IV. PSYCHOPATHOLOGY

- A. Developmental disorders
 - 1. Mental retardation
 - 2. Autism/PDD
 - 3. Learning disorders
 - 4. Communication/language disorders

- B. Disruptive behavior disorder
 - 1. ADHD
 - 2. Conduct disorder
 - 3. Oppositional disorder
- C. Mood disorders
- D. Substance abuse
- E. Sleep disorders
- F. Suicide
- G. Eating disorders
- H. Anxiety disorders
- I. Obsessive-compulsive disorder
- J. PTSD/dissociative disorders
- K. Abuse/neglect
- L. Family psychopathology
- M. Adjustment disorder
- N. Movement disorders
- O. Personality disorders/traits
- P. Schizophrenia/psychosis
- Q. Somatoform disorders
- R. Violence/homicide
- S. Infant/early childhood feeding disorders
- T. Elimination disorders
- U. Reactive attachment disorder

V. ASSESSMENT PROCEDURES

- A. Interview
- B. Rating scales
- C. Psychological testing
- D. Laboratory testing
- E. Mental status

VI. TREATMENT

- A. Somatic therapy
 - 1. Psychopharmacological
 - 2. ECT
- B. Psychological
 - 1. Psychodynamics (including play therapy)
 - 2. Cognitive
 - 3. Behavioral (biofeedback, relaxation techniques, conditioning)
 - 4. Family
 - 5. Group
 - 6. Short-term
 - 7. Psychoeducational
 - 8. Crisis intervention
- C. Residential care
 - 3. Acute hospitalization
 - 4. Partial
 - 5. Acute/chronic residential treatment
- D. Cultural competency

VII. PSYCHIATRIC ASPECTS OF PEDIATRIC DISORDERS

- A. Behavioral (e.g., asthma, diabetes)
- B. Neurological (e.g., epilepsy, metabolic illness, head trauma)
- C. Pediatric consultation

VIII. ISSUES IN PRACTICE (NOS)

- A. Foster care
- B. Adoption
- C. Custody
- D. Ethics
- E. Forensics
- F. Divorce
- G. Domestic violence
- H. Social violence
- I. Gay/lesbian youth
- J. Death/loss
- K. Administrative issues
- L. Infant psychiatry
- M. Emergency
- N. Minority issues

IX. CONSULTATION OTHER THAN PEDIATRICS

- A. School
- B. Court
- C. Community
- D. Advocacy

X. PREVENTION

Reporting of Results

The materials listed here will be prepared and sent to the training director after the scoring process has been completed. These materials will be sealed in a separate envelope for each resident and labeled with the individual resident's ID number.

Resident Reports

1. Resident Report 1 — showing the raw score, which is the total number of questions (out of the 200 total) that are answered correctly. In addition, means and standard deviations are provided for the total score and sub scores for the following four groups: (a) all examinees; (b) child psychiatry first-year residents; (c) child psychiatry second-year residents; and (d) child psychiatry fellows and others.
2. Resident Report 2 — lists the individual resident's answer choices so that the resident may review each question on the examination.
3. Percentile rank table (resident scores) – provides the resident with a way to compare his/her total raw score with the total raw score of other residents. Norm groups are the first-year and second-year residents.
4. *Information for Participants and Reference Bibliography.*
5. Answer keys (with sub score classifications for each item).

Training Director Reports

1. Resident Report 1 — copies of each resident's individual score report.
2. Training Director's Summary Report – showing the total raw scores of all participating residents in the program as well as the program's raw score mean for each resident's year.
3. Percentile rank table (program means) – provides the training director with a way to compare his/her program's raw score mean with those of other programs.
4. *Information for Participants and Reference Bibliography.*
5. Answer keys (with sub score classifications for each item).

GENERAL INSTRUCTIONS FOR THE TEST SESSION

2009 Testing Schedule

October 15: Program notifies The College of requests for aids or administration modifications based on disabilities, the program's actions, and any necessary examination modifications.

October 30: Requests for additional exams are due; requests for additional testing materials may not be honored after this date.

November 1 through 7: Test materials will be shipped to residency programs. **Upon receipt of materials, the Test Administrator or other individual designated by the Program Director should inspect all materials immediately to determine if there are any shortages or defective materials. This means going over each exam page by page. Any errors or defective or missing materials must be reported to The College at (312) 662-1020 immediately.**

December 1 through 7: Administration of examination by residency programs. A make up session should take place as soon as possible after the regular testing session has been concluded.

December 14: FINAL DATE FOR RECEIPT OF ANSWER SHEETS AT PROMETRIC.

Answer sheets received after December 14, 2009, may not be accepted for scoring. Answer sheets received with missing or incorrectly completed data may not be processed. The statistical feedback that will be reported to residents and training directors will include a large amount of group data; therefore, scoring can be based only on the properly completed answer sheets that are received at Prometric on time.

February 2010: Prometric mails all test results to training directors by traceable courier service.

Maximizing Attendance

The CHILD PRITE examination consists of 200 multiple-choice questions administered in a single 3½ hour test administration session. To ensure sufficient time for distribution of materials and explanation of instructions, allow 4 hours when scheduling the administration.

To protect the validity of the scores and to enhance the educational value of the administration, it is important that every resident take this examination under timed, proctored, closed-book, group testing conditions similar to those followed for other standardized examinations. The following guidelines are suggested for maximizing attendance:

1. Confer in advance with faculty and residents regarding the preferred date and time for test administration.
2. Publish the testing date well in advance so that residents can avoid schedule conflicts when planning personal time and other activities.
3. Arrange for clinical coverage by faculty members during the administration so residents can be free from distractions or interruptions.

4. Explicitly communicate the expectation that all eligible residents (primarily 1st – year and 2nd – year fellows) must be present for the scheduled testing session.
5. Schedule the examination on a day when religious observances will not result in attendance problems.

The Americans with Disabilities Act (ADA)

The Americans with Disabilities Act (ADA) requires that an organization offering an examination such as CHILD PRITE offer it in "a place or manner accessible to persons with disabilities or offer alternative accessible arrangements for such individuals." 42 U.S.C.§12189. Implementing regulations require organizations giving examinations to persons with impaired sensory, manual or speaking skills to:

1. Ensure that the examinations offered to disabled individuals accurately measure the individual's aptitude or achievement level, not their disability.
2. Ensure that the examinations designed for disabled individuals are offered in facilities that are accessible to individuals with disabilities and that such examinations are offered at times and locations as convenient as those of the regular examinations.
3. Provide appropriate auxiliary aids for disabled persons, unless the provision of such auxiliary aids would fundamentally alter the measurement of the skills or knowledge the examination is intended to test or would result in an undue burden.

Examples of auxiliary aids that may be required include the following: taped examinations, interpreters or similar accommodations (for persons with hearing impairments); qualified examination readers (for persons with visual impairments or learning disabilities); a person or mechanism to transcribe answers (for persons with manual impairments). In addition, testing procedures may need to be modified for disabled persons, e.g., by giving such persons additional time to complete tests in appropriate circumstances.

Disabled residents may be required to give advance notice and documentation of their disability and any aids or modifications they believe to be required. This advance notice is important to permit the program to make arrangements for disabled residents.

Programs should notify residents of the examination as soon as possible, setting a date by which the residents must notify the program of any relevant disabilities and aids or modifications required to permit their participation. Programs must notify The College of the following: (1) all residents who have provided such notification, (2) the aid, modification, etc. the program has agreed to undertake, (3) any modification to the examination itself that the program considers necessary, and/or (4) any determination that there is no appropriate on-site aid or modification, **NO LATER THAN OCTOBER 15, 2009.**

The test results of disabled residents for whom auxiliary aids have been provided or other modifications made will not be included in standardized group statistics.

When administering the examination to disabled residents, the program should make whatever modifications are necessary to the instructions in this manual. Any questions about the appropriate way to proceed should be referred to The College.

Make-up Testing Sessions and Nonstandardized Testing

Each training program should schedule one make-up testing session as soon as possible after the regular testing session has concluded for residents who unavoidably miss the main testing session. By participating in the make-up session, these residents may still benefit from the test-taking experience and obtain useful feedback. Decisions permitting individual residents to attend the make-up session should be made by the director of residency training. He/ she should evaluate the appropriateness of each request.

The following guidelines apply to the make-up session:

1. No more than one 3½ hour make-up session should be scheduled by any training program. This session should take place as soon as possible after the regular testing session.
2. The requirements for the make-up session are the same as for the primary test administration. This session must follow the time limit, closed-book conditions, and the presence of a proctor at all times, even if only one resident is being tested.
3. Residents who miss the regular testing session and are unable to attend the make-up session may take the test under any reasonable arrangement approved by the director of residency training. Those persons must be reported as having been tested under nonstandardized conditions. (See the instructions on page 16 for completing Block D of answer sheet.)

Clinical Coverage during Testing Sessions

Residents must be excused from all other obligations during the time period scheduled for the testing session. Be sure that this is communicated well in advance to faculty members and other persons acting as clinical supervisors for residents. Prior notification is especially important if some of your residents must be excused from clinical rotations outside your department.

If possible, clinical coverage by faculty members or other nonresidents should be arranged for every service (including the emergency room, admissions office, consultation-liaison service, inpatient service, outpatient clinic, etc.) **PAGERS, CELL PHONES AND PDAs MUST BE TURNED OFF OR SHOULD NOT BE PERMITTED IN THE TESTING ROOMS.** Be sure that switchboard operators and other key persons are informed of the arrangements for clinical coverage so requests for paging can be routinely redirected.

If extreme hardship is involved in relieving all residents of clinical responsibilities during the testing, the training director should randomly select one resident to act as O.D. The O.D. resident(s) can then take the examination at the make-up session. **(Do NOT ask for volunteers to act as O.D.)**

Proctors and Their Responsibilities

A PROCTOR SHOULD BE PHYSICALLY PRESENT IN EACH TESTING ROOM AT ALL TIMES. All proctors should be faculty members. Do not use secretaries or residents as proctors.

Proctor instructions are detailed in later sections of this manual. In general, the duties include distribution and collection of materials, explanation of instructions, and enforcement of standardized testing conditions. The presence of a proctor must be apparent at all times, but proctoring duties can be shared among faculty volunteers who proctor in shifts.

Both the distribution of materials and explanation of instructions at the beginning of a testing session and the collection of materials at the end of the testing session, require advance preparation. The person(s) responsible for these duties should take sufficient time to become thoroughly familiar with the instructions and procedures outlined in this manual.

Reading or any sort of quiet desk work by the proctor is permitted so long as the residents are not distracted by the activity, and so long as the continuous physical presence of a proctor is evident. The proctor should walk about the room during the test session to enforce standardized conditions and to make certain that the residents are completing the answer sheets properly. Proctors should carefully synchronize watches when they replace or are replaced by another to ensure that the timed testing period will be exactly 3½ hours in length.

The proctor should assist residents with understanding instructions, **BUT SHOULD NOT ASSIST WITH INTERPRETING TEST QUESTIONS.**

Examination Rooms and Seating Arrangements

In order to facilitate the distribution and collection of test materials and the monitoring of the testing room, the following arrangements are recommended.

1. If more than one testing room is required, the rooms should be adjacent. A proctor should be present in each room used.
2. Examinees are permitted to leave the testing area--one at a time--if they need to use the restroom, however, additional time will not be granted in such cases. The test books and answer sheets must be collected from an examinee that leaves the room for such a break. Test books and answer sheets must be collected from all examinees at the end of the 3½ hour timed testing period.

- Examinees should be seated in a manner that will allow sufficient work space and lessen the opportunity for communication during testing. Two types of seating typically used for standardized tests are shown in the diagrams below. In each case, the seating is alternated as examinees are directed to their seats. Desks and tables should be a minimum of three feet apart.

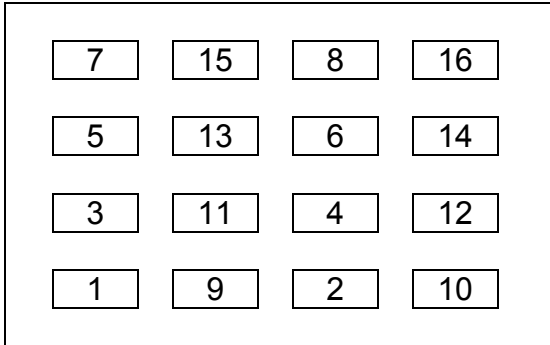


Figure 1 (desks)

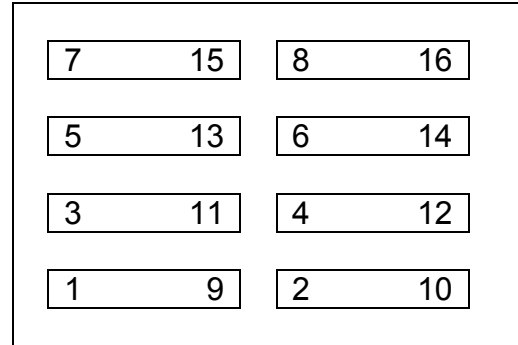


Figure 2 (8-foot tables)

- Provide comfortable writing surfaces for left-handed examinees.
- The testing room(s) should have a wall clock clearly visible by all examinees.

Advance Arrangements for the Testing Sessions

- Residents should be given sufficient notice of the examination to permit the residency program to inform The College of any disabled resident for whom auxiliary aids or other arrangements are necessary and about those for whom it has been determined that on-site accommodations are inadequate, **NO LATER THAN OCTOBER 15, 2009**
- The date, time, and location for the testing session should be announced as soon as they are determined. To avoid any possibility of a misunderstanding, each resident should receive a written announcement.
- Residents who enter your training program between the date of the initial announcement and the testing session should be notified of this important event as far in advance as possible (ideally on their first day of orientation to your training program). Arrangements should be made as soon as possible for any such resident who is disabled.
- Notify all faculty members and other persons acting as clinical supervisors of this important educational activity and that all residents must be freed from other duties to attend the testing session. Make specific arrangements for all required clinical coverage during the testing session.
- Reserve sufficient seating space for the examination.
- Enlist the services of faculty members who will act as proctors during the testing session.

7. Set the expectation that all residents will attend the scheduled session. However, if this causes a hardship for any resident, an examination make-up session can be scheduled.

Materials for Test Administration

Approximately one to two weeks before the examination, the following activities should take place:

1. Send a reminder to all eligible residents, clinical supervisors, and other persons involved with the test administration.
2. Reconfirm previous arrangements for clinical coverage and commitments by faculty members to act as proctors during the test administration.
3. Reconfirm room reservations and seating requirements for the examination.
4. Verify that all materials needed for test administration have arrived from The College. If a sufficient amount of materials needed for testing is not included in the shipment or if any defective materials are discovered, contact Kathy Ricker at The College, at (312) 662-1020.

<p>BE SURE TO INSPECT THE SHIPMENT OF MATERIALS IMMEDIATELY UPON RECEIPT TO DETERMINE IF THERE ARE ANY SHORTAGES OR DEFECTIVE MATERIALS. ALL MATERIALS MUST BE KEPT IN A LOCKED CONTAINER TO WHICH ONLY YOU HAVE ACCESS UNTIL THE DAY OF THE TEST.</p>

Materials needed for test administration:

- *Instruction Manual* (this manual)
- Test book
- Answer sheets
- Attendance roster for assigning names to ID numbers, for determining absentees at the test session, and for distributing the test results
- A supply of soft lead (no. 2) pencils
- A reliable watch (preferably a stop watch)

COMPLETING THE ATTENDANCE ROSTER AND ANSWER SHEETS

THIS TASK CAN BE TIME CONSUMING AND SHOULD BE DONE WELL IN ADVANCE OF THE TEST ADMINISTRATION.

The following are instructions for entering the necessary data for your examinees. **NOTE:** These instructions apply to all categories of examinees.

All demographic data required for computer processing must be recorded on the answer sheets.

Complete these blocks of the answer sheets in advance of the test sessions. USE ONLY A SOFT LEAD (NO. 2) PENCIL. Fill in the circles completely. If it is necessary to change some of the information, erase your first marks thoroughly.

Accurate completion of this task requires detailed knowledge of your residents' individual educational histories. **THE DIRECTOR OF RESIDENCY TRAINING SHOULD PERFORM THE TASKS DESCRIBED BELOW OR DELEGATE THEM TO AN ADEQUATELY INFORMED ASSISTANT.** Errors will delay computer processing of test results, are costly to correct, and may compromise the accuracy of all participants' results.

Attendance Roster

The master list of names and ID numbers should be prepared on the attendance roster (special computer-printed form) provided to the training director with the other testing materials. The ID numbers assigned to the training program are printed in sequential order on this form and space is provided for recording names of residents and other examinees.

The examinees' 9-digit numbers have the following structure: 09-XXX-XXXX. The first two digits are 09, designating the 2009 examination. The next group of three digits is the code assigned to your residency training program. The final four digits are generated sequentially.

If you ordered additional test materials after receiving your attendance roster, you will need to add the appropriate number of ID numbers to your roster. Determine the additional ID numbers from the last number pre-printed on your roster. (The last four digits should increment by one for each additional resident.) Also, draw in lines for the names of the residents for whom the additional materials were ordered.

The attendance roster must be used during the test session in order to distribute the correct answer sheets to the appropriate examinees. It also must be used for distribution of the test results, since the **score reports will identify examinees only by their ID numbers.** Keep your attendance roster in a secure place until test results are sent to you from Prometric. **Do NOT return the attendance roster to Prometric with the answer sheets.**

Answer Sheet Block A — Resident ID Number

Using the information on the attendance roster, fill in each examinee's ID number on the answer sheet in the boxes provided. Fill in the circles below the boxes that correspond to the numbers you wrote. **BE VERY CAREFUL. ID numbers that are entered incorrectly will result in delays in scoring and possible incorrect reporting of results.**

Answer Sheet Block B — Type of Examinee

Please record the **CURRENT** status of each examinee as of December 1, 2009. The categories listed are used to define the norm group and peer groups in computing standard scores and percentile ranks

Your response in this block will determine the scoring status for each resident with regard to his/her level of residency (first-year, second-year, etc.), and how his/her results will be used in the comparisons with other residents locally and nationally. Please fill out this block carefully. Once answer sheets are processed and scoring begins, no changes can be made; therefore, it is critical that each resident be classified accurately. A residency program's results may be impacted by incorrect classification of residents.

- Child Psychiatry — 1st Year Resident
- Child Psychiatry — 2nd Year Resident
- Child Psychiatry — Research Fellow
- Other Trainee¹

Answer Sheet Block C — Type of Training Program

This block is used only for compiling statistical summaries that will include examinees from many training programs. It does not affect the results received by any resident or by any single training program.

For most training programs, the same response choice will be used for all examinees. It is permissible to use different responses for different residents if this seems appropriate (e.g., if some of the residents tested with your group are actually receiving their training at some affiliated institution such as a state hospital, rather than in your own training program). This block is **NOT** concerned with the type of patients or geographic location, but rather with the administrative organization of the training program.

- Medical school training program
- Public mental hospital training program (i.e., state or county hospital)
- Private hospital training program
- Military training program
- Other type of training program (including VA hospitals not intimately affiliated with medical schools)

¹ If Training Director wishes to take the exam and have it scored, categorize as “Other”.

Answer Sheet Block D — Testing Conditions

The choice marked in this block in no way affects either the result reported to the individual examinee or the statistics reported to the training director. This variable is used to restrict membership in the norm group used for standardizing scores and the peer groups used to determine percentile ranks. Only residents tested under fully standardized conditions will be included in the calculations of the standard scores and percentile ranks.

- Standardized group: The resident took the test during the regularly scheduled testing session as specified in this manual.
- Make-up group: The resident attended the make-up session.
- Nonstandardized group: The resident did not attend the regular testing session or the make-up session (the test was not proctored or otherwise not taken under standardized conditions); includes disabled residents for whom auxiliary aids or other administrative modifications have been provided. Also includes Training Director if he/she chose to take the exam.

CONDUCTING AND SUPERVISING THE EXAMINATION

The CHILD PRITE is intended to be administered under the same conditions that apply to many standardized examinations. To facilitate that goal, this section of the Instruction Manual includes guidelines and procedures that are typical of many standardized tests.

The Day of Testing

1. Notify switchboard operators so that requests for paging can be held or redirected. **PAGERS, CELL PHONES AND PDAs SHOULD NOT BE ALLOWED IN THE TESTING ROOMS.**
2. Deliver the test booklets and other materials to the proctor who will begin the test session.
3. Ensure that all proctors are familiar with testing procedures as outlined here and beginning on page 11.
4. If a public address system is available, you may wish to broadcast an announcement of the examination administration about 15 minutes prior to its beginning.

Use of Testing Aids

Examinees may not use written or electronic notes, reference materials, or other forms of testing aids during the examination. Please indicate an area in the testing room, but away from where examinees are seated, where examinees can leave unauthorized materials, such as paper, textbooks, computers or other items. Throughout the test session, there should be nothing on the examinee's desk except the test book, answer sheet, and pencil(s).

Defective Test Booklets and Answer Sheets

If defective test booklets or answer sheets are found prior to the examination administration, contact The College for replacements. If defective materials are discovered during the test administration, it may be necessary to reschedule the test for the affected examinees.

Irregularities

Report in detail any irregularity that can affect one or more examinees' test scores significantly. Examples are: illness, power failure, timing irregularities, disturbances, and instances of giving or receiving assistance during the test. Describe such irregularities in detail on the Report of Test Administration (page 27 of this booklet).

Giving or Receiving Assistance

If an examinee appears to be cheating or attempting to cheat, quietly inform him/her of your observations and remind him/her that no assistance of any type is permitted. In doing this, avoid any direct accusations of cheating.

If the behavior continues, move the examinee to another seat where he or she can be more closely observed and where cheating would be more difficult. Explain that moving the resident will avoid any further suspicion of cheating.

If you, or a colleague, are convinced that an examinee is giving or receiving assistance during the test:

1. Have a faculty member or other colleague verify the cheating by observation.
2. At the earliest possible moment, and without creating a disturbance, inform the examinee that you are aware of the situation; explain that the situation will be reported to The College and Prometric.
3. Allow the examinee to continue testing, but, if the situation continues, move him/her to another seat in the testing room away from other examinees. Keep a careful watch for further evidence of cheating.
4. If the examinee is obviously collaborating with another examinee, follow the above procedures for each person involved.

It is very important to write a complete and detailed explanation of the irregularity, regardless of whether you suspected or were convinced an examinee was cheating. Attach the examinee's test booklet and answer sheet to your report and return them to Prometric with the answer sheets.

Group Mistimings

If a delay or interruption occurs during the timed portion of the examination, the lost time must be added to the closing time of the test session. Group mistimings should be noted on the Report of Test Administration (page 27 of this Manual).

Early Dismissal

Examinees that complete the test and wish to leave early may do so, but only one at a time in order to avoid distraction to others and confusion in the collection of test books and answer sheets. Make sure that every examinee that leaves early returns his/her test book and answer sheet. Once an examinee has turned in a test book and answer sheet, the examinee must not be allowed to re-examine them. Also, once an examinee has been dismissed from the testing room, the examinee may not return.

Questions

To ensure standardization of testing conditions at all test sites, you may not answer any queries regarding individual test questions.

Collecting Examination Materials

Before the examinees are dismissed at the close of the test session, you are to make a complete count of all test books (including those for examinees who left early). You must account for all examination materials. Examinees are not permitted to retain the test book or to make a copy of any question in the test book, nor are they permitted to examine the test books or answer sheets after they have been turned in to you. The examination materials must be secured at the close of the test session. This security is important and eliminates the possibility that any of your residents could share test booklets with colleagues in other residency programs

that have not yet tested. Should this happen, the integrity of the entire CHILD PRITE program, and the validity of the resident and training director's reports, could be affected. **The training director or individual that signed the contract will be held legally responsible for the collection and storage of all examination materials.**

Smoking, Eating and Drinking

Smoking, eating, and drinking are not permitted in the testing room(s).

DETAILED INSTRUCTIONS FOR THE EXAMINATION²

As examinees arrive at the designated time and place:

1. Place a check mark by each examinee's name on the attendance roster.
2. Hand each examinee an answer sheet containing his or her ID number.
3. Direct each examinee to a seat. (See the diagrams on page 12 for recommended seating arrangements.)

Examinees who arrive late should **NOT** be given additional time. All test books and answer sheets should be collected at the end of the 3½ hour timed portion of the test.

After the examinees are checked in and seated, close the door of the examination room and read aloud the boxed type below only:

We are now ready to begin.

You will have 3½ hours to complete this examination. You will be allowed to go to the restroom one at a time during testing. Before leaving the room, please give me your test book and answer sheet. You cannot make up time lost for using the restroom.

If you finish the examination in less than the allotted time and wish to leave, you may do so. Those who leave early must do so one at a time and as quietly as possible, after turning all materials in to me.

The following residents are absent and will take the test at a later time: _____. (Announce the names of absentees from your attendance roster.) Please refrain from discussing the examination with the residents I have named.

Use only a soft lead pencil (#2) to complete your answer sheet. If you do not have a pencil, raise your hand (distribute pencils as needed).... DO NOT USE A PEN.

Please turn your pagers, cell phones, PDAs and other electronic devices off. Do not place them in silent mode. You may not access these devices during this testing session.

We will now distribute the test books. Wait for all test books to be distributed and for further instructions before opening them.

² These procedures and instructions may need to be modified for disabled residents for whom auxiliary aids have been provided or other modifications made.

Distribute a test book to each examinee. When all test books have been distributed, say:

Open the test book to page 3. Read the confidentiality statement on page 3 and the directions on page 4.

When everyone has finished reading the statement and directions, read the following boxed instructions, pausing when four dots appear to allow time for the procedures to be carried out.

Sign your name in the space provided on the front cover of your test book....Turn your answer sheet so that side 1 is facing you.

Block A through D on your answer sheet has been filled in for you. Block A contains your identification number. The first two digits indicate the year of testing — 2009. The middle three digits are the code for this residency program. The last four digits are a sequential number assigned to you in advance by the training director.

Blocks B and C contain demographic data about this residency program. The response in Block D refers to the conditions under which you are taking this examination. Do not change any of the pre-coded information. However, if you notice an error or have a question about the information, contact the training director after the test session.

This examination contains 200 questions and includes three types of test items. Be sure to read the directions provided at the beginning of each section in your test book carefully. In answering the questions, select the best alternative and find the row of circles with the same number as the question on your answer sheet. Then find the circle in that row with the same letter as your answer.

Blacken the circle completely. If you change an answer, be sure that you erase your first mark completely and then blacken the circle for the choice you prefer. No credit will be given for questions with two or more responses marked or for unanswered questions.

Your test scores will be based on the number of questions you answer correctly, thus, it is to your advantage to answer every question. Do not make any stray marks on your answer sheet. Keep your materials directly in front of you and flat on your desk. **YOU MAY NOT GIVE OR RECEIVE ASSISTANCE OF ANY KIND AND YOU MAY NOT TALK TO YOUR NEIGHBORS. I cannot answer any questions about the content of the examination; however, do you have any questions about the mechanics of the examination...**

Answer any questions. Then say:

You may begin work.

Note the time you begin the examination and record that time in the appropriate section on page 27 of this manual.

If a blackboard is available, post the starting time. Also, calculate the ending time and post it as well.

You (and your assistants, if any) should move around the room periodically during the test session to make certain that the examinees are marking their answers properly and to enforce standardized testing conditions.

Exactly three hours and 15 minutes from the start of the test session, say:

You have 15 minutes to finish this test. All test books and answer sheets will be collected in 15 minutes. As a final reminder, be sure to mark all of your answers on your answer sheet. No credit will be given for a question unless the correct answer is marked on your answer sheet.

Exactly 15 minutes later, say:

Please stop work and put down your pencil. I will collect your test books first and then your answer sheets. Please remain seated until all materials have been collected and checked.

Record the ending time of the test session on page 27 of this manual.

Collect all test books and then all answer sheets. Make certain that every examinee has turned in a test book and an answer sheet, and be sure that no examinee has any written notes to take from the examination room. After everything has been checked, say:

Your test books will be returned to you when you receive your results. Thank you for your cooperation. You are dismissed.

Procedures for Make-up Testing

For the make-up test session, follow the same procedures used during the regular test session as found on page 20.

TIPS FOR PREVENTING SECURITY INCIDENTS

Test Materials

- Secure test materials as soon as they arrive.
- Never leave test materials unattended.
- Distribute and collect test books individually.
- Ensure that no examinee leaves the room with test materials.
- Ensure that no examinee copies, removes, or photographs any portion of the test materials.

Examinee Misconduct

- Never allow examinees to select their own seats.
- Assign examinees to specific seats in each testing room.
- Seat examinees a minimum of three feet apart.
- Seat all examinees facing the same direction in each room.
- Observe and check examinees' answer sheets throughout the testing session to ensure that they are properly gridding with a # 2 (soft lead) pencil.

AFTER TESTING HAS BEEN COMPLETED

Returning Answer Sheets via a Secure, Traceable Carrier for Scoring

Answer sheets must be returned to Prometric at the address shown below as soon as possible after testing, but **NO LATER THAN FRIDAY, DECEMBER 11, 2009**. Answer sheets received after that date may not be accepted for scoring. **DO NOT** return the answer sheets to The College in Chicago.

The following materials **must** be sent to Prometric:

_____ All answer sheets to be scored

_____ Report of Test Administration - page 27 of this manual - to be completed as follows:

- **Describe in detail any testing irregularities or any defective test materials.** Return defective materials to The College office in Chicago.
- **Record the ID numbers for any disabled residents for whom auxiliary aids or other administrative modifications were provided.** Describe their disabilities, and the aid or modification.
- **Record the date of the test session as well as the starting and ending times.**
- **Indicate the number of answer sheets being submitted to Prometric for scoring.** Be sure they are filled in completely. Since all analyses are based on a national sample, answer sheets can be scored one time only.
- **Use the space provided to record other pertinent comments about the test administration.**
- **Detach the completed Report of Test Administration (page 27) from this manual and return the Report to Prometric along with the answer sheets.**
- **Before returning the answer sheets to Prometric for scoring, photocopy them for your files.** Should the original answer sheets become lost, Prometric can use the photocopies for scoring purposes.
- **Store test booklets in a secure location until the examinees' test results are received.** At that time, the test books should be distributed to the examinees with their test results.

For security purposes, we request that you use a secure, traceable 2-day service to return the examination answer sheets to Prometric. Before sealing and returning the materials, make sure all answer sheets are flat in the envelope. The cost for returning answer sheets for scoring is the responsibility of each program.

For delivery by a secure, traceable carrier:

ATTN: Jamie Hegstrom
Prometric
ACP Program
1260 Energy Lane
St. Paul, MN 55108
Phone (651) 603-3254
Jamie.Hegstrom@prometric.com

PREPARING FOR THE CHILD PRITE[®] TEST ADMINISTRATION AND SECURITY PROCEDURES CHECKLIST

Use this checklist to plan for and keep track of the many details involved in test administration. Please follow all administrative and security procedures carefully to help prevent irregularities.

PREPARATIONS BEFORE THE TEST

- Note the dates designated by The College for test administration – DECEMBER 1 – 5. Arrange a make-up date within one week of final test administration.
- Reserve testing room(s) for appropriate dates: (October 1 – 15 -PRITE – December 1 – 7 -CHILD PRITE) Check adequacy of seating, lighting, and ventilation in testing rooms.
- Ensure that all residents and faculty members receive adequate notice of testing date to avoid schedule conflicts.
- Requests for special test accommodations must be submitted **NO LATER THAN AUGUST 15, 2009 (PRITE) or OCTOBER 15, 2009 (CHILD PRITE)**. The College cannot guarantee that requests received after that date will be approved. **ENSURE THAT ALL RESIDENTS ARE AWARE OF THIS DEADLINE.**
- Select proctors to assist with exam administration.
- Notify all late entrants to your residency program of the test dates and the deadline to request special accommodation.
- Select a secure place to store test materials.

RECEIPT OF TESTING MATERIALS

Testing materials will be shipped to programs via Fedex approximately one (1) month prior to test administration.

- Alert your receiving office that the shipment is expected via Fedex and arrange to have it delivered to you as soon as possible. (**NOTE:** for security reasons the shipment is not marked as examination materials.)

WHEN TEST MATERIALS ARRIVE

- Within 24 hours of the shipment's arrival, check to ensure that contents are complete.
- Notify The College immediately if there are any discrepancies or defective materials.
- Enter required information on attendance roster and individual answer sheets.
- Securely store test materials until date of test administration.
- Read the Instruction Manual carefully to ensure that you are familiar with the test administration process.
- Reconfirm proctor assignments; review test administration procedures with proctors.

ON THE DAY OF THE TEST

- Arrive early at the test site.
- Keep test materials in a secure area. Never leave testing materials unattended or accessible to examinees.

PROCEDURES DURING THE TEST

- Hand a test booklet and answer sheet directly to each examinee.
- Begin testing according to the instructions in the Instruction Manual keeping very careful track of timing.
- Proctors should walk about the testing room, watching their assigned areas closely while not disturbing the examinees.
- Allow only one examinee at a time to leave the room for a restroom break. Collect the test booklet and answer sheet from the examinee before they leave the room.
- Change the seats of examinees suspected of misconduct.
- NEVER LEAVE THE TESTING ROOM UNATTENDED.**

AT THE END OF THE TEST

- Collect an answer sheet and test booklet from each examinee.
- Account for all test books and answer sheets before dismissing examinees.

PROCEDURES AFTER THE TEST

- Check the testing room to be certain nothing has been left behind.
- Complete all appropriate reports and forms.
- Photo copy all answer sheets for your records.
- Evaluate the administration – write any suggestions for improvements on the Report of Test Administration found in the Instruction Manual.
- Secure the test booklets until you receive the test results.
- Return all answer sheets and the Report of Test Administration via secure, traceable courier, to Prometric at the address indicated in the Instruction Manual.
- Test booklets may be distributed to examinees at the same time that results are distributed to residents.

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TEAR OFF AND RETURN THIS REPORT WITH THE ANSWER SHEETS

REPORT OF TEST ADMINISTRATION

CHILD PSYCHIATRY RESIDENT IN-TRAINING EXAMINATION (CHILD PRITE)

Name of Residency Program

City

State

--	--	--

Record your training program code number in the boxes at left. Please note all irregularities affecting individual examinees. Irregularities affecting a number of examinees should be described in detail on a separate sheet of paper.

Examinee ID Number	Date and Time	Description of Irregularity

Examinee ID #	Describe Disability	Describe Accommodation Provided

Test Session:

Date	Time Test Began	Time Test Ended	Number of Answer Sheets

Make-up Test Session:

Date	Time Test Began	Time Test Ended	Number of Answer Sheets

Comments and suggestions for possible improvements in testing procedures are valuable to the growth and effectiveness of the testing program. You are not obligated to comment, but your suggestions would be appreciated. Use the space below for that purpose.

Signature of Training Director/Proctor in charge of testing

Phone