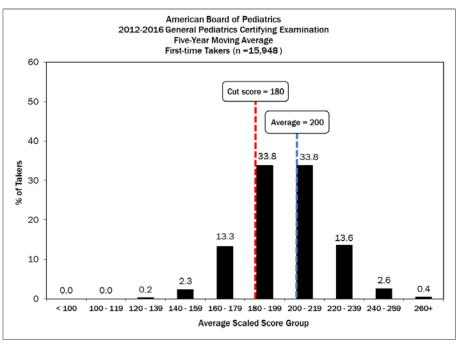
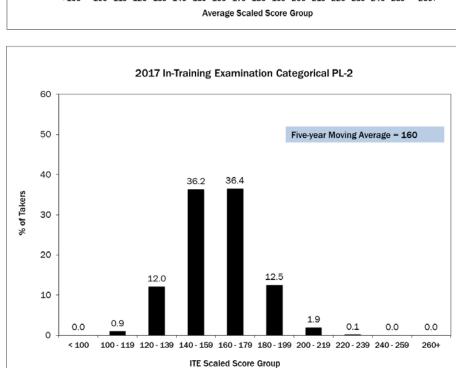
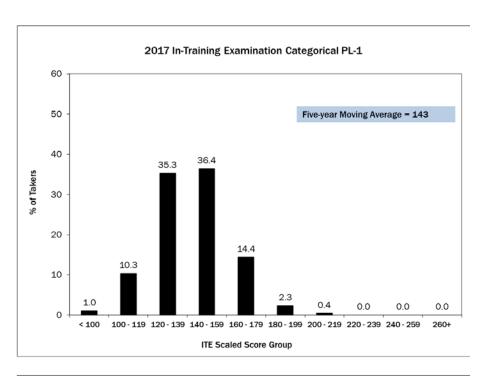
Categorical Residents Explanation of ITE Score Graphs

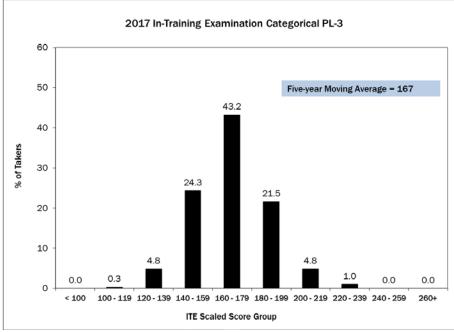
The scaled score reported to residents is based upon the absolute standard of performance required by the American Board of Pediatrics (ABP) for the General Pediatrics certifying examination. Scaled scores range from 1 to 300 with the absolute standard or passing score set to 180. Using an absolute standard, each candidate is evaluated solely on his or her performance on the examination. All candidates that achieve a 180 or higher on the examination will pass, regardless of how his or her peers performed.

Because all 150 items on the ITE have been used on a prior certifying examination, scores on the ITE are directly comparable to scores on the certifying examination. For comparison purposes, this report provides the results of first-time takers of the General Pediatrics certifying examination since the absolute passing standard was applied in 2012. The charts on the following page contain the score distributions and average scaled scores achieved by PL-1, PL-2, and PL-3 categorical pediatrics residents on the 2017 ITE, and 2012-2016 results from first-time takers of the certifying examination. When examined from left to right and top to bottom, the charts show the progression of resident performance from their PL-1 year through first attempt at the certifying examination.











Five-Year Average Pass Rate on the First Attempt of the General Pediatrics Certifying Examination

Interpretation of the Graph

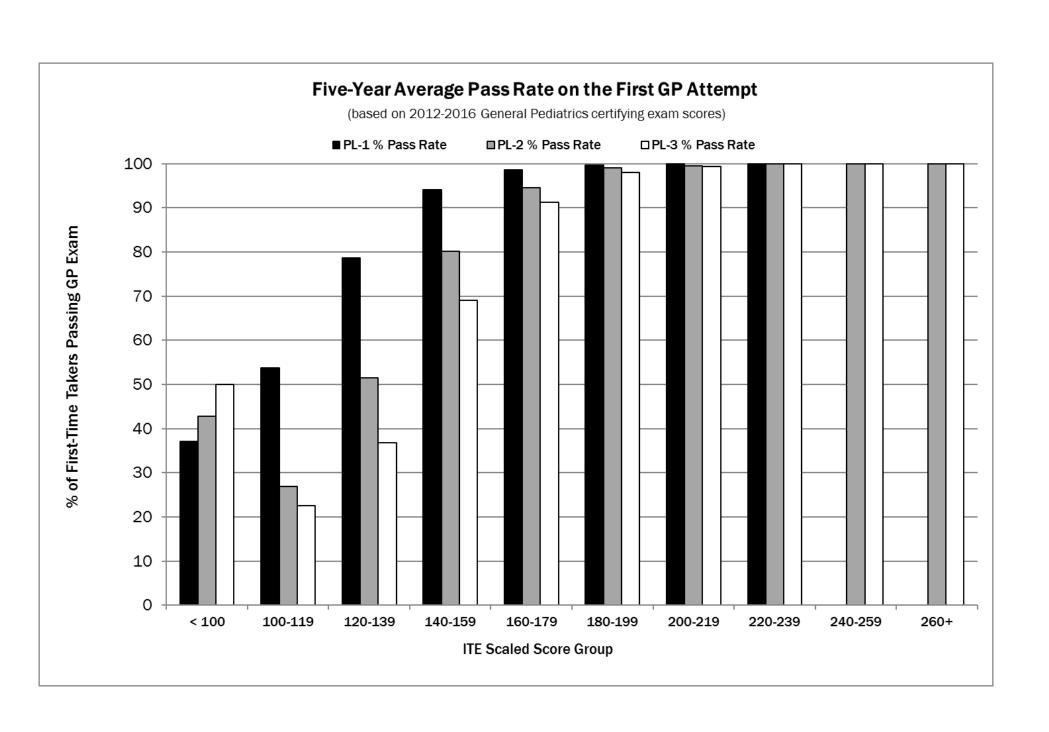
The graph on the following page displays the relationship between trainees' ITE performance and their first attempt on the General Pediatrics certifying examination. This relationship is provided for trainees at training levels 1, 2, and 3 (PL-1, PL-2, and PL-3).

Horizontal Axis: The horizontal axis provides a grouping of ITE scores based on the 1-300 score scale.

<u>Vertical Axis</u>: The vertical axis provides the certifying examination passing rate for each ITE score group. The black bar represents the PL-1 passing rate; the gray bar represents the PL-2 passing rate; the white bar represents the PL-3 passing rate.

<u>Example</u>: Suppose as a PL-2 you scored a 150 on your ITE. Look along the horizontal axis for 140-159. Using the gray bar, you can conclude that about 80% of PL-2s scoring between a 140 and 159 on their ITE passed the certifying examination on their first attempt. However, if a PL-3 scored a 150 on the ITE, he or she would use the white bar and conclude that the passing rate for PL-3s at this performance level is about 69%.

When interpreting ITE scores, please consider conditions which may influence test performance such as fatigue, anxiety, and preparedness. In addition to future training, these factors affect actual performance on the General Pediatrics certifying examination.





Comparison of ITE Scores to Average General Pediatrics Certifying Examination Scores

Interpretation of Tables

The following tables provide the mean (average) score for first-time takers of the General Pediatrics certifying examination for the past five administrations, dividing candidates into groups according to their ITE scores. A separate table is provided for each training level. The columns of data are defined as such:

<u>ITE Score</u>: This column provides all possible ITE score value ranges.

<u>Mean GP Score</u>: This value is the average General Pediatrics certifying examination score for those who attained the associated ITE score(s). The mean score is based only on first-time takers of the certifying examination over the past five administrations; repeaters are excluded from these calculations.

Standard Deviation: This value provides the standard deviation of the Mean GP Score.

95% Confidence Interval: This interval estimate provides an indication of the degree of certainty in the estimate of the true mean. Given this data, one can be 95% confident that the population mean will fall within this interval. The more narrow the interval, the more precise the estimate. If there is large variation in the certifying examination scores, the confidence interval will be wider than if the scores had less variation.

<u>Number of Test Takers</u>: This value provides the actual number of first-time test takers who attained the associated ITE score(s).

<u>Actual GP Score Range</u>: These values provide the range of GP scores for the number of test takers who attained the associated ITE score(s).

<u>First Attempt Pass Rate</u>: This value provides the percentage of candidates who passed the GP certifying examination on their first attempt over the past five years.

<u>Example Interpretation</u>: Suppose you are a PL-1 who scored a 108 on the ITE. The mean score of all first-time GP examinees who scored between 108 and 111 on their PL-1 ITE is 178. There were 275 candidates in the past five administrations who obtained this score. Of these 275 candidates, scores on the GP examination ranged from 127 to 233 and 47% of these 275 candidates passed the GP certifying examination on their first attempt. The confidence level that the true population mean will fall between 176 and 180 is 95%.

When interpreting ITE scores, please consider conditions which may influence test performance such as fatigue, anxiety, and preparedness. In addition to future training, these factors affect actual performance on the General Pediatrics certifying examination.

Comparison of PL-1 In-Training Exam (ITE) Scores to the General Pediatrics (GP) Certifying Examination Performance (based on 2012-2016 GP first-time takers)

PL-1 ITE Score	Mean GP Score	Standard Deviation	95% Confidence Interval	Number of Test Takers	Actual GP Score Range	First Attempt Pass Rate
< 50	172	28	101-243	3	141-197	33%
50-99	172	16	169-176	105	126-211	37%
100-103	178	16	175-182	87	140-223	45%
104-107	174	18	172-177	174	126-217	40%
108-111	178	17	176-180	275	127-233	47%
112-115	180	16	178-182	390	131-222	54%
116-119	184	17	183-186	721	122-233	61%
120-123	187	16	186-188	766	127-239	68%
124-127	189	16	188-190	1009	139-239	73%
128-131	192	16	191-193	1347	121-248	78%
132-135	195	16	194-196	1139	152-242	83%
136-139	197	17	196-198	1452	119-248	86%
140-143	201	16	201-202	1322	126-263	92%
144-147	203	16	202-204	1272	138-255	93%
148-151	206	16	205-207	1179	148-267	94%
152-155	209	17	207-210	955	154-277	95%
156-159	212	16	211-213	706	162-268	98%
160-163	213	16	212-214	724	152-268	98%
164-167	218	17	216-219	471	163-274	98%
168-171	220	18	218-222	383	178-281	100%
172-175	220	17	218-222	290	168-266	99%
176-179	222	16	220-225	193	182-275	100%
180-183	225	20	222-228	143	174-281	99%
184-187	229	18	226-233	87	191-270	100%
188-191	234	21	228-239	55	201-288	100%
192-195	234	16	229-239	41	191-267	100%
196-199	232	19	225-239	31	202-267	100%
200-203	231	22	218-243	15	187-260	100%
204-207	232	15	220-245	8	221-265	100%
208-211	244	18	215-273	4	228-266	100%
212-215	237	16	220-254	6	216-259	100%
216-219	232	32	181-284	4	203-271	100%
220-223	236	no data	236-236	1	236-236	100%
224-227	280	no data	280-280	1	280-280	100%
228-231	239	no data	239-239	1	239-239	100%
232-235	no data					
236-239	no data					
240-243	no data					
244-247	no data					
248-251	no data					
252-255	no data					
256-259	no data					
> 259	no data	-			-	

Comparison of PL-2 In-Training Exam (ITE) Scores to the General Pediatrics (GP) Certifying Examination Performance (based on 2012-2016 GP first-time takers)

PL-2 ITE Score	Mean GP Score	Standard Deviation	95% Confidence Interval	Number of Test Takers	Actual GP Score Range	First Attempt Pass Rate
< 50	189	1	176-202	2	188-190	100%
50-99	162	20	138-187	5	148-197	20%
100-103	161	11	135-188	3	150-171	0%
104-107	165	23	152-178	14	132-210	21%
108-111	170	19	161-179	20	130-200	35%
112-115	164	13	159-169	34	122-186	9%
116-119	173	15	170-176	96	127-213	33%
120-123	173	19	170-176	137	124-219	45%
124-127	174	16	172-176	207	125-229	37%
128-131	176	17	174-178	362	126-239	44%
132-135	181	15	179-182	431	122-231	53%
136-139	183	16	182-184	661	127-239	61%
140-143	187	15	185-188	834	140-247	69%
144-147	190	16	189-191	1003	140-240	74%
148-151	192	16	191-193	1145	119-241	80%
152-155	195	15	195-196	1391	147-242	84%
156-159	199	16	198-199	1130	137-269	89%
160-163	202	16	201-202	1402	138-251	93%
164-167	203	16	202-204	1285	140-269	94%
168-171	206	17	205-207	1076	143-271	94%
172-175	209	16	208-210	1047	165-261	97%
176-179	211	16	210-213	734	168-270	98%
180-183	213	16	212-215	627	148-265	99%
184-187	218	16	216-219	488	174-271	99%
188-191	219	17	218-221	446	154-281	99%
192-195	222	16	220-224	248	176-270	99%
196-199	224	18	222-227	221	183-274	100%
200-203	227	15	224-229	151	197-272	100%
204-207	231	22	226-236	86	179-288	99%
208-211	228	16	224-231	79	196-267	100%
212-215	231	17	225-236	44	181-280	100%
216-219	233	15	228-238	35	178-260	97%
220-223	239	19	228-249	14	211-267	100%
224-227	233	16	217-249	6	213-252	100%
228-231	248	22	220-275	5	225-281	100%
232-235	245	16	226-265	5	223-266	100%
236-239	234	7	170-298	2	229-239	100%
240-243	247	26	11-300	2	228-265	100%
244-247	no data					
248-251	244	no data	244-244	1	244-244	100%
252-255	no data					
256-259	252	no data	252-252	1	252-252	100%
> 259	271	no data	271-271	1	271-271	100%

Comparison of PL-3 In-Training Exam (ITE) Scores to the General Pediatrics (GP) Certifying Examination Performance (based on 2012-2016 GP first-time takers)

PL-3 ITE Score	Mean GP Score	Standard Deviation	95% Confidence Interval	Number of Test Takers	Actual GP Score Range	First Attempt Pass Rate
< 50	no data				_	
50-99	179	18	160-197	6	152-207	50%
100-103	184	no data	184-184	1	184-184	100%
104-107	139	1	132-145	2	138-139	0%
108-111	134	9	111-157	3	126-144	0%
112-115	152	21	137-167	10	126-190	10%
116-119	165	18	158-173	24	127-194	29%
120-123	163	14	159-168	38	137-192	11%
124-127	168	16	164-172	68	130-199	26%
128-131	171	16	168-174	146	133-215	34%
132-135	175	16	172-177	181	125-222	37%
136-139	177	16	176-179	315	121-222	43%
140-143	179	15	178-180	481	127-225	47%
144-147	184	16	182-185	689	126-229	61%
148-151	187	15	186-188	803	133-239	68%
152-155	189	15	189-190	1015	143-244	73%
156-159	193	16	192-193	1077	124-249	80%
160-163	196	16	195-196	1235	138-250	86%
164-167	198	16	197-199	1339	143-251	89%
168-171	201	16	200-202	1158	149-263	93%
172-175	204	15	203-205	1254	137-247	95%
176-179	206	16	205-207	951	154-268	95%
180-183	209	16	208-210	1027	161-270	97%
184-187	211	16	210-212	798	167-271	97%
188-191	215	15	214-216	673	169-270	99%
192-195	217	15	215-218	450	170-281	99%
196-199	220	17	218-222	368	176-288	99%
200-203	221	18	219-223	324	152-272	99%
204-207	224	15	222-226	175	176-268	99%
208-211	226	18	224-229	192	166-280	99%
212-215	230	18	226-233	103	186-272	100%
216-219	232	16	229-235	87	193-267	100%
220-223	232	16	227-236	43	186-265	100%
224-227	232	20	224-241	24	193-287	100%
228-231	242	18	227-257	8	218-274	100%
232-235	240	22	217-263	6	215-274	100%
236-239	239	16	222-255	6	207-250	100%
240-243	241	15	222-259	5	222-259	100%
244-247	no data					
248-251	281	no data	281-281	1	281-281	100%
252-255	248	no data	248-248	1	248-248	100%
256-259	no data					
> 259	255	23	45-300	2	238-271	100%

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The American Board of Pediatrics

2017 In-Training Examination Program Summary of Residents' Item Performance

Categorical Pediatrics

Listed below are the content feedback statements of all items organized by subtest, followed by the proportion of your residents who answered the corresponding item correctly. Items that were deleted from scoring are marked "DELETED" and proportion values are set to zero. Shaded cells indicate that more than half of your residents answered the item incorrectly. This information is provided at each training (PL) level and across all residents (Total). While this list is provided to assist you in identifying the strengths and weaknesses within your training program, no inference can be made due to small sample sizes.

Program: 902 Children's National Medical Center-George Washington Univ

Content Feedback Statement	Proportion of PL-1	F Residents A	Answering Co	rrectly: Total
	n = 40	n = 37	n = 35	n = 112
Subtest 1: Growth and Development/Preventive Pediatrics				
Counsel families and patients regarding the effects of diet, exercise, and smoking on the natural history of osteoporosis	0.90	0.81	0.91	0.88
Counsel parents and adolescents regarding firearm safety in the home	0.50	0.59	0.51	0.54
Differentiate among the possible causes of abnormal head shape and/or growth (eg, craniosynostosis, plagiocephaly, microcephaly, macrocephaly)	0.55	0.65	0.80	0.66
Evaluate the cognitive and behavioral developmental progress/status of a child at 24 months of age, including recognition of abnormalities	0.50	0.38	0.34	0.41
Evaluate the cognitive and behavioral developmental progress/status of a child at 4 years of age	0.53	0.54	0.54	0.54
Evaluate the cognitive and behavioral developmental progress/status of an infant at 6 months of age	0.55	0.81	0.63	0.66
Evaluate the motor developmental progress/status of a child at 36 months of age	0.85	0.89	0.83	0.86
Know the indications and schedule for hepatitis B vaccine in patients of various ages, including those born prematurely	0.95	1.00	1.00	0.98
Know the risk factors associated with hypercholesterolemia/hyperlipidemia	0.60	0.65	0.57	0.61
Plan appropriate administration of MMR vaccine during an outbreak	0.33	0.38	0.51	0.40
Recognize and evaluate a patient with failure to thrive	0.60	0.70	0.77	0.69
Recommend appropriate car restraint systems, including car seats, based on the age and weight of the child, including those appropriate for premature infants	0.58	0.68	0.77	0.67
Understand the factors that can cause variations in the normal developmental sequence and recognize their associated features	0.35	0.62	0.66	0.54
Understand the uses and limitations of the various anthropometric techniques available to assess growth and/or nutritional status	0.23	0.35	0.60	0.38
Understand when to screen for an increased blood pressure and how to interpret the results	0.83	0.95	0.94	0.90
Subtest 2: Cognition, Language, and Learning/Behavioral and Mental	Health/Psych	nosocial/ Ch	ild Abuse an	d Neglect
Advise parents regarding appropriate discipline and limit-setting for children of various ages	0.90	0.95	0.83	0.89
Differentiate normal variations in feeding patterns from those that reflect poor parenting	0.83	0.97	0.97	0.92
Identify the clinical findings, including developmental parameters, associated with autism spectrum disorders	0.90	0.92	0.97	0.93
Identify the prenatal and perinatal causes of intellectual disabilities, including factors associated with family history	0.65	0.73	0.74	0.71

Page: 1

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The American Board of Pediatrics

2017 In-Training Examination Program Summary of Residents' Item Performance

Program: 902 Children's National Medical Center-George Washington Univ

Content Feedback Statement	Proportion of PL-1 n = 40	f Residents A PL-2 n = 37	Answering Co PL-3 n = 35	rrectly: Total n = 112
Plan an appropriate evaluation of psychosomatic disorders	0.93	0.95	0.89	0.92
Plan the appropriate diagnostic evaluation of poor school performance	0.63	0.81	0.77	0.73
Plan the appropriate evaluation and management of suspected caregiver-fabricated illness	1.00	1.00	1.00	1.00
Plan the appropriate initial management of speech and language disorders	0.25	0.32	0.34	0.30
Plan the appropriate management of breath-holding in toddlers and preschool-age children	0.95	0.95	0.89	0.93
Plan the appropriate management of encopresis of various etiologies	0.83	0.89	0.89	0.87
Plan the appropriate management of head banging in toddlers and preschool-age children	0.55	0.65	0.57	0.59
Provide appropriate anticipatory and ongoing guidance to the parents of a child who has a chronic or handicapping condition	0.45	0.49	0.46	0.46
Recognize the clinical findings associated with anxiety disorders in patients of various ages, and manage appropriately	0.93	1.00	1.00	0.97
Recognize the historical, clinical, and radiologic findings associated with inflicted injuries (bruises, burns, fractures, intracranial injuries, and intraabdominal injuries) and differentiate them from those caused by accidental trauma and other non-traumatic causes	0.50	0.84	0.89	0.73
Recognize the history, signs, and symptoms of sexual abuse	0.80	0.84	0.91	0.85
Understand the response to divorce and/or blended families in patients of various ages	0.98	0.86	0.77	0.88
Subtest 3: Nutritional/Gastrointestinal				
Know the content of various infant formulas and milk sources, the indications for their use, and possible side effects	0.70	0.78	0.94	0.80
Monitor a patient receiving parenteral nutrition while considering the associated complications	0.63	0.95	0.97	0.84
Plan appropriate management for a patient with intestinal obstruction	0.65	0.86	0.77	0.76
Plan the appropriate diagnostic evaluation in a patient in whom Hirschsprung disease is suspected	0.68	0.65	0.89	0.73
Plan the dietary management of renal insufficiency in patients of various ages	0.13	0.24	0.49	0.28
Plan the evaluation of the acute onset of vomiting as a result of obstruction in children of various ages	0.53	0.32	0.49	0.45
Recognize the clinical features associated with celiac disease	0.33	0.43	0.51	0.42
Recognize the clinical features associated with chronic nonspecific diarrhea, and the prognosis for affected patients-DELETED	0.00	0.00	0.00	0.00
Recognize the clinical features associated with Meckel diverticulum, and manage appropriately	0.88	0.89	0.80	0.86
Recognize the laboratory and radiologic features of vitamin D-deficient rickets	0.48	0.73	0.71	0.63
Recognize the signs, symptoms, and causes of vitamin B12 deficiency, and manage appropriately	0.65	0.59	0.69	0.64



The American Board of Pediatrics

2017 In-Training Examination Program Summary of Residents' Item Performance

Categorical Pediatrics

Program: 902 Children's National Medical Center-George Washington Univ

Trogram. 702 Children's Patronal Medical Center George Washington C	Proportion of Residents Answering Correctly:				
Content Feedback Statement	PL-1 n = 40	$ PL-2 \\ n = 37 $	PL-3 n = 35	Total n = 112	
Understand the caloric requirements for patients of various ages, including those born prematurely, and the circumstances in which those requirements may change	0.38	0.32	0.46	0.38	
Subtest 4: Metabolism/Endocrine					
Differentiate between type 1 and type 2 diabetes	0.60	0.70	0.74	0.68	
Plan the appropriate diagnostic evaluation of a patient with primary gonadal dysgenesis (Turner syndrome)	0.78	0.84	0.86	0.82	
Plan the appropriate diagnostic evaluation of congenital adrenal hyperplasia, including during the perinatal period	0.73	0.89	0.91	0.84	
Plan the appropriate evaluation and management of a thyroid mass/nodule	0.60	0.81	0.74	0.71	
Recognize the clinical features associated with glycogen storage disease	0.83	0.76	0.94	0.84	
Recognize the clinical features associated with phenylketonuria	0.45	0.54	0.60	0.53	
Recognize the typical laboratory features associated with hypo- and hyperparathyroidism	0.70	0.84	0.86	0.79	
Understand the natural history of constitutional growth delay	0.75	0.76	0.94	0.81	
Subtest 5: Fluids and Electrolytes/Renal and Urologic/Genital					
Formulate a differential diagnosis of hypertension in patients of various ages	0.20	0.27	0.26	0.24	
Identify symptoms associated with hypernatremia, including those associated with rapid rehydration	0.88	0.78	0.63	0.77	
Plan the appropriate clinical and laboratory evaluation of proteinuria	0.45	0.70	0.77	0.63	
Recognize the clinical and laboratory features associated with hyperkalemia, and manage appropriately, including during an emergency situation	0.48	0.51	0.66	0.54	
Recognize the clinical findings associated with a varicocele, and manage appropriately	0.38	0.46	0.66	0.49	
Recognize the clinical findings associated with urinary tract infection in children of various ages	0.28	0.62	0.49	0.46	
Recognize the conditions in which circumcision is contraindicated	0.68	0.81	0.89	0.79	
Recognize the laboratory abnormalities associated with isotonic dehydration, and manage appropriately	0.48	0.81	0.94	0.73	
Understand the clinical and laboratory findings associated with renal tubular acidosis	0.33	0.32	0.37	0.34	
Subtest 6: Blood and Neoplastic Disorders					
Plan the appropriate management of a sequestration crisis in a patient who has sickle cell disease	0.78	0.89	0.97	0.88	
Plan the appropriate management of severe anemia of various etiologies, while considering the risks associated with various therapies	0.80	0.86	0.97	0.88	
Recognize complications associated with transfusion of blood products	0.55	0.43	0.23	0.41	
Subtest 7: Skin/Collagen Vascular and Multisystem					
Plan the appropriate management of acne	0.18	0.22	0.40	0.26	

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The American Board of Pediatrics

2017 In-Training Examination Program Summary of Residents' Item Performance

Program: 902 Children's National Medical Center-George Washington Univ

Content Feedback Statement	Proportion of $PL-1$ n = 40	F Residents A PL-2 n = 37	Answering Co PL-3 n = 35	rrectly: Total n = 112
Recognize the clinical features of Stevens-Johnson syndrome and manage appropriately	0.40	0.38	0.69	0.48
Recognize the clinical findings associated with pityriasis rosea, and manage appropriately	0.28	0.43	0.60	0.43
Recognize the clinical findings associated with the various types of juvenile idiopathic arthritis	0.60	0.78	0.66	0.68
Recognize the clinical findings associated with tinea capitis, and manage appropriately	0.75	0.92	0.94	0.87
Recognize the clinical findings associated with tuberous sclerosis, and manage appropriately	0.40	0.32	0.54	0.42
Recognize the laboratory findings associated with Henoch-Schönlein purpura	0.83	0.92	0.89	0.88
Subtest 8: Musculoskeletal/Sports Medicine and Physical Fitness				
Plan the appropriate clinical evaluation of scoliosis, and manage appropriately	0.78	0.92	0.83	0.84
Plan the appropriate diagnostic evaluation of developmental dysplasia/subluxation of the hip in patients of various ages	0.83	0.97	0.89	0.89
Plan the appropriate diagnostic evaluation of septic arthritis in patients of various ages	0.55	0.59	0.69	0.61
Plan the appropriate management of an uncomplicated sports-related ankle injury	0.58	0.68	0.71	0.65
Recognize the clinical findings associated with compartment syndrome	0.98	0.97	1.00	0.98
Recognize the clinical findings associated with the use of performance-enhancing drugs or nutritional supplements	0.73	0.76	0.66	0.71
Recognize the clinical findings associated with tibial torsion	0.73	0.81	0.86	0.79
Recognize the preventable causes of trauma in juvenile athletes and the physiology associated with increased trauma risk	0.58	0.65	0.69	0.63
Understand the criteria for return to play in sports after a head injury	0.80	0.81	0.89	0.83
Subtest 9: Neurologic				
Plan appropriate prophylaxis for recurrent migraine	0.28	0.59	0.57	0.47
Plan the appropriate diagnostic evaluation of Guillain-Barre syndrome, and manage appropriately	0.78	0.78	0.71	0.76
Recognize the clinical findings associated with a degenerative disorder of the central nervous system	0.33	0.54	0.49	0.45
Understand the etiology of meningitis in patients of various ages	0.68	0.46	0.69	0.61
Subtest 10: EENT				
Differentiate among the various causes of parotitis	0.45	0.46	0.54	0.48
Identify conditions associated with nasal polyps in patients of various ages	0.38	0.51	0.54	0.47
Plan the appropriate clinical evaluation of acute cervical lymphadenopathy	0.33	0.43	0.40	0.38
Plan the appropriate diagnostic evaluation of a peritonsillar abscess, considering commonly associated pathogens	0.30	0.46	0.46	0.40



The American Board of Pediatrics

2017 In-Training Examination Program Summary of Residents' Item Performance

Program: 902 Children's National Medical Center-George Washington Univ

Content Feedback Statement	Proportion of Residents Answering PL-1 PL-2 PL-3 n = 40 n = 37 n = 35			orrectly: Total n = 112	
Recognize the clinical features associated with branchial cleft anomalies, and plan appropriate evaluation and management	0.88	0.84	0.83	0.85	
Recognize the visual consequences of a tumor or hemangioma in the periorbital area	0.73	0.59	0.49	0.61	
Subtest 11: Respiratory					
Plan the appropriate clinical and diagnostic evaluation of stridor in patients of various ages	0.68	0.78	0.77	0.74	
Plan the appropriate clinical and laboratory evaluation of croup of various etiologies	0.35	0.78	0.63	0.58	
Plan the appropriate clinical and laboratory evaluation of vascular anomalies that affect the airway	0.80	0.86	0.86	0.84	
Recognize the clinical features of pneumonias of various etiologies and the associated sequelae	0.45	0.46	0.51	0.47	
Recognize the natural history of spontaneous pneumothorax/pneumomediastinum	0.53	0.51	0.57	0.54	
Understand the basic terminology and purpose of various pulmonary function tests	0.88	0.95	0.94	0.92	
Subtest 12: Cardiovascular					
Identify cardiac causes of cyanosis in children of various ages, including those who have tetralogy of Fallot	0.23	0.46	0.29	0.32	
Plan the appropriate evaluation of an innocent murmur, and manage appropriately	0.53	0.32	0.66	0.50	
Recognize the clinical findings associated with congestive heart failure in children of various ages	0.63	0.86	0.89	0.79	
Recognize the major clinical findings associated with the various types of acyanotic congenital heart disease	0.23	0.22	0.31	0.25	
Recognize the major clinical findings associated with the various types of cyanotic congenital heart disease	0.20	0.49	0.31	0.33	
Subtest 13: Allergy and Immunology/Infectious Diseases					
Identify the clinical features associated with AIDS in patients of various ages	0.50	0.57	0.54	0.54	
Identify the etiologic agents that commonly cause urticaria, angioedema, and/or anaphylaxis-DELETED	0.00	0.00	0.00	0.00	
Plan the appropriate infectious disease screening evaluation of an internationally adopted child	0.60	0.59	0.86	0.68	
Plan the diagnostic evaluation for congenital or acquired cytomegalovirus infection in normal and immunocompromised children of various ages	0.98	0.68	0.71	0.79	
Plan the laboratory evaluation of antibody function	0.55	0.32	0.57	0.48	
Recognize the clinical and laboratory findings associated with hemolytic-uremic syndrome	0.78	0.97	0.91	0.88	
Recognize the clinical characteristics of antibody deficiency syndromes after 4 to 6 months of age	0.93	0.84	0.83	0.87	
Recognize the clinical features associated with Giardia lamblia infestation, and manage appropriately	0.93	0.95	0.97	0.95	

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The American Board of Pediatrics

2017 In-Training Examination Program Summary of Residents' Item Performance

Categorical Pediatrics

Program: 902 Children's National Medical Center-George Washington Univ

Content Feedback Statement	Proportion o PL-1 n = 40	f Residents A PL-2 n = 37	nswering Co PL-3 n = 35	orrectly: Total n = 112
Recognize the clinical features associated with Staphylococcus aureus infection	0.55	0.49	0.54	0.53
Recognize the clinical features of graft-versus-host disease	0.90	0.78	0.89	0.86
Recognize the common characteristics of allergic rhinitis, and manage appropriately	0.60	0.76	0.77	0.71
Recognize the common clinical features associated with Pasteurella multocida infection	0.53	0.73	0.54	0.60
Understand the indications and limitations of immunotherapy, and manage associated side effects	0.30	0.38	0.43	0.37
Subtest 14: Fetus and Newborn/Genetics and Dysmorphology				
Recognize disorders associated with delayed or absent passage of meconium	0.23	0.32	0.26	0.27
Recognize the clinical and laboratory features associated with tracheoesophageal fistula in a newborn infant	0.63	0.70	0.74	0.69
Recognize the clinical and laboratory features in an infant of a diabetic mother, and manage appropriately	0.30	0.35	0.40	0.35
Recognize the clinical features and risks associated with overgrowth syndrome	0.25	0.27	0.31	0.28
Recognize the indication for nasopharyngeal suctioning during resuscitation of a newborn infant	0.83	0.97	0.94	0.91
Understand the prognosis associated with brachial plexus injuries	0.78	0.86	0.86	0.83
Understand the role of multifactorial inheritance in genetic disorders	0.25	0.57	0.43	0.41
Understand the significance of a gross chromosomal deletion	0.88	0.97	0.83	0.89
Subtest 15: Adolescent Medicine and Gynecology/Substance Abuse				
Distinguish normal from abnormal sexual development in males	0.93	0.92	0.94	0.93
Formulate a differential diagnosis of dysfunctional uterine bleeding	0.75	0.86	0.89	0.83
Formulate a differential diagnosis of urethritis in male adolescents	0.68	0.76	0.63	0.69
Identify the major physiologic consequences associated with inhalant use/abuse	0.48	0.24	0.46	0.39
Recognize the clinical findings associated with an acute amphetamine intoxication, and manage appropriately	0.78	0.81	0.89	0.82
Recognize the clinical findings associated with primary amenorrhea of various etiologies, and manage appropriately	0.68	0.65	0.60	0.64
Recognize the gynecologic etiologies of acute and chronic abdominal pain	0.98	1.00	1.00	0.99
Recognize the risk of abuse of prescription medications	0.93	1.00	1.00	0.97
Understand the non-contraceptive benefits of oral contraceptives	0.60	0.70	0.69	0.66
Subtest 16: Poisoning and Toxic Exposure/Critical Care/Emergency C	are/Pharmac	cology and Pa	ain Manage	ment
Plan the appropriate evaluation of abdominal trauma, with and without hematuria	0.38	0.46	0.43	0.42
Plan the appropriate management of a spider bite	0.30	0.38	0.29	0.32

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The American Board of Pediatrics

2017 In-Training Examination Program Summary of Residents' Item Performance

Program: 902 Children's National Medical Center-George Washington Univ

	Proportion of Residents Answering Corr			-
Content Feedback Statement	$ PL-1 \\ n = 40 $	$ PL-2 \\ n = 37 $	PL-3 n = 35	Total n = 112
Plan the appropriate management of fever in patients of various ages	0.93	0.97	0.97	0.96
Plan the appropriate use of intraosseous therapy	0.93	0.92	0.80	0.88
Plan the appropriate ventilatory support for patients with various conditions	0.83	0.86	0.94	0.88
Plan the management of a patient who has ingested iron pills	0.75	0.76	0.86	0.79
Recognize the clinical findings associated with airway injury in a patient with an acute burn	0.58	0.59	0.40	0.53
Recognize the signs and symptoms of carbon monoxide poisoning, and manage appropriately	0.70	0.92	0.89	0.83
Recognize the signs and symptoms of tricyclic antidepressant toxicity, and provide appropriate initial management	0.38	0.41	0.29	0.36
Understand the appropriate use of sedative analgesia	0.73	0.84	0.74	0.77
Understand the circumstances that require adjustment of renally excreted antibiotic doses in patients of various ages	0.38	0.57	0.66	0.53
Understand the common side effects of medications used to treat attention deficit hyperactivity disorder	0.83	0.92	0.91	0.88
Understand the prognostic factors associated with near-drowning	0.83	0.81	0.97	0.87
Subtest 17: Research and Statistics/Ethics/Patient Safety and Quality	Improvement	t		
Apply knowledge of human factors in the design of systems and processes promoting patient safety	0.78	0.78	0.91	0.82
Distinguish statistical significance from clinical importance	0.88	0.84	0.80	0.84
Identify the study design most likely to yield valid information about the benefits and/or harms of an intervention	0.90	1.00	0.89	0.93
Recognize and apply ethical principles involved in the patient-parent-pediatrician relationship regarding issues of informed consent/dissent/assent	0.95	0.95	0.94	0.95
Recognize and apply ethical principles regarding research involving children	0.63	0.73	0.69	0.68
Understand sensitivity and specificity and how to apply them to test results	0.78	0.97	0.94	0.89
Use effective methods of communication to reduce errors in the health-care setting	0.98	0.97	1.00	0.98