# Purpose of this report

The purpose of this report is to provide feedback to the general pediatrics community regarding content areas of strength and weakness, information which may be useful for identifying potential gaps in knowledge and guiding the development of educational materials. Using data from the American Board of Pediatrics' (ABP) Maintenance of Certification Assessment for Pediatrics (MOCA-Peds), this report summarizes diplomate performance on the questions within each of the 48 content areas assessed in 2022.

### MOCA-Peds content areas

In 2022, MOCA-Peds—General Pediatrics consisted of questions from a total of 48 content areas, broken down as follows:

- 45 learning objectives<sup>1</sup> Each diplomate initially received one question from each of the 45 specific content areas drawn from the general pediatrics content outline.
- Two featured readings<sup>1</sup> Each diplomate also received two questions per featured reading (eg, clinical guidelines, journal articles) for a total of four featured reading questions.
- One emerging topic Diplomates also received one question pertaining to a timely or pressing clinical pediatric issue.

A pool of questions was developed for each learning objective and for each featured reading. Questions were then drawn from the pool and administered to diplomates throughout 2022 according to the specifications described in the bulleted list above.

# Understanding this report

This report provides a graphical summary of diplomate performance on each of the 48 content areas assessed in 2022. Within the graphic and in the example below, the point ( • ) reflects the average percent correct for all questions within that learning objective or featured reading. The bar (—) reflects the range of percent correct values for the questions within that learning objective or featured reading. More specifically, the bar's lower endpoint indicates the most difficult question (ie, answered correctly by the lowest percentage of diplomates) and the bar's upper endpoint indicates the easiest question (ie, answered correctly by the highest percentage of diplomates).



<sup>&</sup>lt;sup>1</sup>Each diplomate also received 15 "repeat" questions selected from their original subset of learning objective and featured reading questions. Performance on the repeat administrations is not included in this report.

#### A note of caution

Many factors (eg, specific content of the question, wording of the question, plausibility of the incorrect answers) can impact diplomate performance on any question. It is thus difficult to determine if poor performance on a single question, or small set of questions, within a given content area reflects a true gap in diplomate knowledge or if the question(s) associated with that content area were difficult for other reasons (or some combination of both). Collectively, the entire set of MOCA-Peds questions (across all content areas) constitutes a psychometrically valid assessment of the diplomate's overall level of knowledge. Performance within a given content area is based on fewer questions, however, and is therefore less useful for making inferences about diplomate knowledge in that specific content area.

It is important to note again that for security reasons, a pool of questions was developed for each content area so that each diplomate received a unique set of questions. In addition, the number of questions can vary from one content area to the next. In cases where a content area had a relatively large pool of questions, the number of diplomates who answered each question was reduced, which diminished the statistical precision of each question's percent correct value. In cases where a content area had a relatively small number of questions, each question was answered by a larger number of diplomates, but the overall breadth of the content being assessed within that content area was constrained, which limits the generalizability of the results.

In other words, MOCA-Peds was designed to assess individual diplomates with respect to their overall level of knowledge in general pediatrics. It was not designed to provide the pediatric community with diagnostic feedback pertaining to specific content areas within general pediatrics. The results within this report may be informative and useful for that secondary purpose, but they should be interpreted with a degree of caution.

## Additional notes

- To protect the security of the content of the assessment, the questions themselves, along
  with information about the number of questions in the pool for any particular learning
  objective or featured reading, are not provided in this report.
- This report contains data aggregated across many diplomates participating in the MOCA-Peds program and cannot be used to make inferences or draw conclusions regarding any particular diplomate.

#### 2022 Content Area Feedback Report General Pediatrics

#### **Percent Correct** 100 0 Learning Objective Provide guidance regarding educational accommodations and interventions. 2. Identification, evaluation, and management of children with autism spectrum disorder (Featured Reading) Understand the management of a prepubertal child with genital warts. 4. Plan the management of a child with recurrent or persistent streptococcal infection. Understand the inherited patterns of various blood disorders. 6. Recognize the clinical features of juvenile idiopathic arthritis. Plan the initial evaluation of a child with thyroid enlargement. 8. Recognize common congenital anomalies. Plan the management of athletic amenorrhea. Evaluate and manage a child with postconcussion syndrome. 10. Diagnose and manage acute head injury. Recognize the signs and symptoms of cancers involving the bone. 12. Recognize the presentation of primary disorders of phagocytic number and/or function. Recognize and evaluate an adolescent with abnormal pubertal development 14. Recognize and manage labial adhesions. 16. Recognize and manage migraine variants in children. Plan the evaluation of a child with recurrent pneumonia. Evaluate and manage a child with a disorder of the scalp. 18. Evaluate a neonate with respiratory distress. 20. Recognize the clinical presentation and evaluation for oral allergy syndrome. Evaluate and manage infants and children with acute urinary tract infection. Recognize common X-linked genetic disorders. 22. Pediatric metabolic and bariatric surgery: evidence, barriers and best practices (Featured Reading) Identify and manage cutaneous vascular lesions of infancy. 24 Recognize the factors that relate to risk of error or reduced patient safety. 26. Recognize and plan initial evaluation of altered mental status. Understand strategies for youth suicide prevention (Emerging Topic) 27. Evaluate and manage a patient with nasal polyps. 28. Understand the impact of racism on child and adolescent health. Recognize complications of antibiotic overuse. 30. 31. Understand the diagnosis and management of infectious diarrhea. Evaluate the developmental status of a child at 24 months of age 32. Understand the differential diagnosis of tachypnea in an infant. Recognize the clinical manifestations of cardiac dysrhythmias. 34. Recognize and apply ethical principles involved in informed consent/assent. Understand the differential diagnosis, evaluation, and management of otorrhea in children. 36. Counsel families about healthy beverage consumption in early childhood. 37. Evaluate and manage an infant or child with a new heart murmur. 38. Know the differential diagnosis of acute abdominal pain. 39. Recognize the clinical presentation, diagnosis, and treatment of methemoglobinemia. 40. Know the differential diagnosis of hip pain. Evaluate an adolescent with secondary amenorrhea. 42 43. Manage problems associated with school overachievement. Develop a management plan for a patient with an abnormal depression screening 44 Recognize the clinical features of gastroesophageal reflux (including the symptoms involving other organ 45. systems). Provide guidance regarding toilet training refusal. 46. Understand the role of the pediatrician in prevention of child abuse and neglect. 47. Manage an adolescent with functional abdominal pain.