

SPECIALTY BOARD

PREPARATORY WORKSHOP ON RESEARCH SEGMENT

25 APRIL 2025

Dr. Catherine XR Chen
Deputy Coordinator, Research Segment

Guidelines on Exit Exam

Please take a reference from our college website:

www.hkcfp.org.hk

**Education & Examinations → Exit Examination
(for current examination 2025S)**

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Passing Rate

	2022 Full	2022 Suppl.	2023 Full	2023 Suppl.	2024 Full	2024 Suppl.	2025 Full
No. of Candidates attempted Research	12	5	11	1	13	3	21
No. of Candidates PASSED overall	8	3	1	1	10	3	19
Passing Rate	67%	60%	90%	100%	77%	100%	90.5%

Starting a Research Project

- Original work
- Candidate = principal investigator
- Same project cannot be submitted by any other candidate.
- Form a **research team** (involve your supervisor)
- Seek approval from your practice boss/ COS/ department

1st Year

May 2022	Preparatory workshop for Exit Exam
Mar- June	Literature review, identify and refine research question and draft research protocol (4 months)
July 31	Deadline for submitting Ethics Approval (IRB/ REC) (allow 2-3 months)
August 10	Exit Exam Clinical Audit and Research Forum
Sep	Commence data collection (6 months)
October 26	Deadline for submitting Research Seeding Fund

Ethics Approval for Research Study

- MUST seek Ethics Approval from a recognized Ethics Committee before starting your study.
 - HA, DH or universities.
- Candidates must **submit** the supporting document(s) with the Research Report
 - Be disqualified if failed to do so
 - **Date of ethics approval** must be sought **within 3 years** before the application deadline of Exit Examination.

Sample of Ethics Approval Letter



HONG KONG EAST CLUSTER

港島東醫院聯網



Ethics Committee, HKEC

3 Lok Man Road,
Chai Wan
Hong Kong

10 May 20xx

(Candidate's Name)
Resident Trainee

Dept. of Family Medicine and Primary Healthcare
HKEC

Ref: HKEC-20xx-021

Dear Dr. ,

The Ethics Committee (EC) of HKEC is authorized by the Cluster Chief Executive to review and monitor clinical research. It serves to ensure that research complies with the Declaration of Helsinki, ICH GCP Guidelines, local regulations and HA policy. It has the authority to approve, require modifications in (to secure approval), or disapprove research. This Committee has power to terminate/suspend a research at any time if there is evidence to indicate that the above principles and requirements have been violated.

The Committee has reviewed your research application dated 29 March 20xx by an expedited process, and reached the following decision basing on the documents submitted.

The Committee approves your application and the following documents, and requires you to adhere to the attached conditions:

Title of Study	(Research Title)
List of investigators	1. Resident Trainee, Dept. of Family Medicine and Primary Healthcare, HKEC. 2. Associate Consultant, Dept. of Family Medicine and Primary Healthcare, HKEC. 3. Associate Consultant, Dept. of Family Medicine and Primary Healthcare, HKEC.
Protocol title and version	Research Protocol (Feb 20xx)
Consent Form versions	N.A.

Information sheet title and versions	N.A.
Certificate of indemnity/insurance	N.A.
Other Documents	Questionnaire (English & Chinese versions)
Conditions	<ol style="list-style-type: none"> 1. The Principal Investigator is responsible and accountable for the confidentiality of the personal data of the study subjects they hold. The Principal Investigator must also ensure that there is appropriate arrangement to protect the security of personal data when it is stored, sent or received. 2. Apply a clinical trial certificate from department of health if applicable. 3. Do not deviate from, or make changes to the study protocol without prior written EC approval, except when it is necessary to eliminate immediate hazards to research subjects or when the change involves only logistical or administrative issues. 4. Report the following to EC: (i) study protocol or consent document change (use 'HKECRE001F7'), (ii) serious adverse event (use 'HKECRE001F8'), (iii) study progress (use 'HKECRE001F9'), (iv) new information that may be relevant to a subject's willingness to continue participation in the study, (v) final report upon completion of study (use 'HKECRE001F9b'). 5. Report first study progress to EC by 9 May 20 and thereafter at 12 monthly intervals until study closure. 6. Submit Research Final Report Form (use 'HKECRE001F9b') to EC upon completion of study.

* Download forms from the HKEC intranet for use

Please report the progress of the study according to the time schedule stipulated in Clause 5 of Conditions shown above for the Cluster REC to consider whether the approval status can be maintained. Upon completion of the study, kindly furnish the EC with a final report using the form mentioned in Clause 6 of Conditions.

Yours sincerely,

Dr. Loletta SO
for Chairman of EC, HKEC

cc. COS(FM&PHC), HKEC

Research Funding

HKCFP Trainees Research Fund 2025 or
all registered HKCFP trainees four awards

HKCFP Research Seed Fund 2025.

All HKCFP members

Please contact College if you are interested in.

2nd Year

March- May

Data Analysis (3 months)

June - August

Writing full report (draft) + Submit to supervisor for comments

July /August
(TBC in 2022)

Exit Exam Clinical Audit and Research Forum

August

Pre-Exit Exam Workshop

Early January

Submit for Exit Examination

Format of the Research Report

- **2,500 – 4,000 words** (excluding the Abstract, References and Acknowledgements)
- **Abstract < 250 words**
Objective, Design, Subjects, Main Outcome Measures, Results, and Conclusions
< 5 keywords
- **Max: 6 Graphs + 6 tables + 15-30 references**
- **Abbreviations should be spelt in full when first used.**
- **No** names of the practice, the candidate and his/her supervisor

Format of Main Text

- (<https://www.bmj.com/about-bmj/resources-authors/house-style>)
- **Introduction** background and objectives
- **Method** Subjects, Study Design and Measurements, Interventions, Outcomes, and Statistical Methods
- **Results**
- **Discussion**
- **Conclusions**

Format of Main Text

- **References** (Vancouver style, Journal titles abbreviated = Index Medicus Style, up to 3 authors/editors: et al.)
https://www.nlm.nih.gov/bsd/uniform_requirements.html
- **Acknowledgements**
- **Appendix** All study instrument and questionnaire should be send in as part of the appendices

Plagiarism

- *Zero tolerance*
- *NOT allow plagiarism or AI generated outputs*
- *All reports will be checked by the Veriguide*
- *https://veriguide1.cse.cuhk.edu.hk/portal/plagiarism_detection/register.jsp*
- *Definition of plagiarism: refer to exit exam guideline → P.7 suggested reading*

VeriGuide Basic (Free Trial)



Single User Account

Individual student, teacher, etc

User type	
Originality checking	✓
Readability analysis	✓
Assignment collection	✗
Originality report quota	3
Files per submission	1
Help desk for account owner	✓
Extended help desk for teachers and students	✗

FREE TRIAL

VeriGuide Academic



Single Campus Account

Principal/head of university, high school, etc

Originality checking	✓
Readability analysis	✓
Assignment collection	✓
Originality report quota	No limit
Files per submission	No limit
Help desk for account owner	✓
Extended help desk for teachers and students	✓

PAID

Please note that the above services details are for references only. Please refer to our terms and conditions when you use or purchase our service.

Assessment Criteria

Background (20%)

- Research topic, question(s), aim(s) and objective(s)
- Originality, new knowledge / uniqueness
- Relevance and importance to HK practice and family medicine
- Critical review of background literature (update)

Methodology (30%)

- Appropriate for the research question(s)
- Sampling method (sample size calculation)
- Outcome measures
- Data collection
- Statistical tests & analysis of results (descriptive statistics, student-t test, chi square tests, logistic / liner regression...)

Assessment Criteria

Results (20%)

- Study population characteristics/ comparison
- Highlight of the results: significant + ve and – ve results
- Tables and charts

Discussion (20%)

- Compare (same/difference) results with previous literature (Vs background)
- impact of the research
- Strength and Limitation
- Application of results in daily practice/ family medicine
- Future research

Presentation (10%)

- Use of English (software checking, e.g. word, grammarly...)
- Copyediting (font style, size, spacing, paragraphing, table format, labelling)
- Reference list numbering, format

Dissemination of Research Report

1. HKCFP primary care conference
2. Overseas conference
3. HA convention
4. Submission to Hong Kong Practitioners

Suggested Reading:

1. *Robert H. Fletcher, Suzanne W. Fletcher, Grant S. Fletcher. Clinical Epidemiology – The Essentials. 5th Edition Philadelphia: Wolters Kluwer Health/Lippincott Williams & Wilkins, 2014*
2. *Geoffrey R. Norman and David L. Streiner, Biostatistics: The Bare Essentials, 4th Edition. Shelton, Connecticut : People's Medical Publishing House-USA, 2014*
3. *Peter Norton , Moira Stewart, Martin Bass et al Research methods for primary care vol 1 1991 Sage publications*
4. *Leon Gordis, Epidemiology. W B Saunders, 4th Edition, 2008 Robert*
5. *H. Fletcher, Suzanne W. Fletcher, Edward H. Wagner. Clinical Epidemiology – The Essentials. 5th Edition, 2005*
6. *Leon Gordis, Epidemiology, 3rd Edition. Philadelphia: Elsevier Saunders 2013*
7. *Marcello Pagano, Kimberlee Gauvreau, Principles of Biostatistics, 2nd Edition. Australia; Pacific Grove, CA: Duxbury, 2000*
8. *Rosaline S. Barbour, Introducing qualitative research. A student's Guide by Rosaline Barbour. 2nd edition. 2014 SAGE Publications Inc*

Common Mistakes: Background

Poor Justification of Topics and Research Questions

"...whether there have been *any previous studies* conducted in *Asia pacific (apart from HK)* .
..present *knowledge gap* will be useful to *justify novelty* .."

"I recommend the candidate to *read one or two key paper in the same field* and learn how other researchers present data, conduct discussionthere is *NO need to create your own style* in research"

Common Mistakes: Background

*Research Aim(s)/ objective(s)/ hypothesis/
research question(s) not stated*

- Should be stated clearly and explicitly

Common Mistake: Methodology

- Poor justification: why perform in single GOPC
- Consider doing pilot
- Selection or development of questionnaires (Chinese Version)

Psychometric validation or not?

Applicable in study population?

- Justification / calculation of sample size
- Small sample size limit the analysis

Common Mistake: Methodology

- No study flow chart

Explain steps of research (preferable with time line)

- Unclear sampling frame, inclusion and exclusion criteria

“...how the interviewees were selected and that may risk having only superficial and uniformity of data..”

- Wrong Statistical Method

“OR is not a percentage”

“I don’t understand why the candidate did not use multiple regression”

Common Mistake: Results

- Inappropriate tables

(Number of table, title, labeling, columns, statistical result presentation)

“The tablet were hard to follow with no. and % together”

Table 1: Basic sociodermagraphic characteristics of the research subjects (+/- comparison of intervention/ control group)

Table 2, 3, 4: Major results / statistical analysis according to research question(s)

- Duplication of results (tables and charts and figures)
- Describe all results in text

Common Mistake: Discussion

- The discussion and conclusion too are **repetitive**
- “I feel that this study’s conclusion is **premature**”
- Conclusion **too general**, to be useful in clinical practice, raise the question of “So what”
- “As with all novice researcher, they tried to **put too much data** in and then cannot explain some of the findings”
- **Limitation** not described
- “...There is little discussion regarding **future research** needed...”
- **Ethnic approval** and other **contributors** are not acknowledged

Common Mistakes: Presentation

- Mismatch/ wrong figures
- Use of English: Grammar, wrong word, typo...
- Inconsistent reference style, some are missing, some are not complete

Common Mistakes: Qualitative Research

- Justification the selection of qualitative **method** (why not quantitative?)
- Select an appropriate background **theory**
- Justification of using **focusing group /individual interview**
- **Sampling** method?
- **Interview guide / questionnaire**
- No details in **data analysis**
- Result interpretations and presentation

If you have any queries....

Please contact the Secretariat of Specialty Board

Tel: 2871 8899

alkyyu@hkcfp.org.hk or exit@hkcfp.org.hk

Thank You!