



Computer based assessments–Mind your eyes!

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LETTERS TO THE EDITOR**Computer based
assessments – Mind
your eyes!**

Dear Sir

In researching the United States Medical Licensing Examination (USMLE), a predominantly computer based assessment, as a medical student, I have become conscious of my concerns about computer based examinations in medical education. Although I don't have 20/20 vision, my eyes work fine. However, staring at a bright screen for long periods is difficult under normal circumstances, let alone whilst concentrating on an exam. As we become ever enveloped in the fantastic world of information technology, which offers countless innovative and exciting opportunities, it is important to remember that computers cause eye strain, dry irritated eyes and more (Blehm et al. 2005), making concentration quite challenging.

Computer based assessment has really taken off with many institutions employing it as a means of progress testing or examining students. There has been research suggesting that medical and indeed other students enjoy computer based assessment and in fact prefer some aspects of being examined this way. The majority of these studies however, looked at ongoing small assessments rather than large end of year examinations. I would agree that for short tests or in self-assessment exercises, computers are a valuable resource with undisputed benefits, allowing access to certain media for example.

Nevertheless, computer examinations are much more tiring than a traditional paper based examination. There is something quite demanding about reading from a lit screen, be it a paper, a magazine or an exam question. Some of the worst things about medical examinations on computers are the reams of text to be digested for each question, particularly relevant in the clinical years where patient histories may be extensive. When faced with blocks of text, question after question there is a sinking feeling in the stomach. I simply can't focus on a screen full of text.

Computers provide many advantages over paper-based assessment with excellent opportunities for teaching, ongoing assessment and short examinations. Despite this, thought must be given to subjecting students to long periods of assessment at computer screens. My plea therefore, to medical educators worldwide is to think of our eyes and concentration spans when choosing media for examinations. If exams are to be lengthy or will incorporate lots of text, please, spare us a thought and give us a pencil and some paper. Before we move to include computers in all our assessments in medical education, it is imperative that we further evaluate their use for this purpose.

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Reference

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