South West Peninsula: Passing the Final FRCA

This guide is intended as a brief overview of the exam with some advice from people who have passed it on how to go about preparing for it. Included are some top tips on resources and some revision strategies if you are feeling overwhelmed.

Introduction

Recently the percentage of trainees passing the FRCA first time in the South West has dropped. The candidates themselves cite several reasons:

- Lack of preparation
- Naive to extent of knowledge required until too late
- Unexpected question material
- Not completed specialist modules
- Not enough teaching

Let me deal with these concerns first. This exam is tough. The pass mark is roughly 50% nationwide. At the last sitting there was a 55.56% local SOE pass rate (national SOE 63.7%)

The only way to pass is to work hard - most people who pass have done a minimum of 3-4 months solid revision for each section. Unexpected questions can be reduced by reading the **intermediate level curriculum.** The exam is set from this. Make sure you have read it early so you know the breadth of knowledge required.

The examiners think we are sitting the exam too early and our clinical experience is inadequate particularly in the specialty areas e.g cardiac/neuro/ paeds. However we need to pass the exam to progress to ST5 so what is the answer? When to sit an exam is a very personal choice and often revolves much more around home circumstances than clinical experience. My only advice is to ensure that, if you are sitting the exam early and have not completed the specialty modules, you arrange some taster days in them at Derriford. This is easily done and just requires a phone call/email to Sam Allen, Derriford anaesthetic secretary, to arrange (<u>samantha.allen6@nhs.net</u> or 01752 439205).

Teaching, as we all know, can be hit and miss but we must take some responsibility and use the time properly. Read the topics beforehand and use the sessions to clarify difficult concepts and consolidate knowledge. Don't do what I, and most people did – turn up, daydream throughout, take the handout away and put it in a pile of paper, which never gets looked at. This is a waste of both your time and the brains of the anaesthetist who has turned up to teach and holds all the knowledge that you need to pass the exam.

Exam Overview

The final FRCA exam is in two sections, which are taken separately.

- 1. A written exam comprising an MCQ exam (60x MTF and 30x SBA in 3 hours) and a SAQ exam (6 Qs from mandatory units, 4QS from general duties and 2Qs from optional units)
- 2. A structured oral examination (the infamous final viva) Two vivas:
 - Clinical anaesthesia is 50 minutes in total. 10 minutes preparation. 20 minutes devoted to 3 questions on the clinical material. 20 minutes devoted to 3 questions on clinical anaesthesia unrelated to clinical material.
 - Clinical science viva is 30 minutes split into 4 questions on application of basic science to anaesthesia/ICM/pain

Recent Relevant Feedback from the College

- In Aug 2014 the composition of the final FRCA MCQs changed to ensure the question topics fully cover the breadth of the curriculum.
- Poor answers to questions on **obstetrics** -? why as a fairly straightforward topic and predictable that it will come up.
- Candidates sitting the exam when still very junior are struggling make sure you have some **cardiac and neuro** experience prior to the exam.

Key Preparation Tips

- Visit the RCOA examinations page and read it thoroughly.
- Plan carefully when to do the exam. Book study leave. It is possible to book 5 days of private study leave. Clear your diary as much as possible and swap out of on calls in the two weeks beforehand.
- Order a "guide to the FRCA Examination: The Final. **READ IT. DO THE QUESTIONS.** They often come up!
- Go to the Resources for candidates written exam section and do the sample SBA questions
- Go to the Resources for candidates SOE section and watch the videos of the viva questions
- Read the SAQ reports for a few years before starting to revise it specifically points out why people lose/miss marks and also gives you an idea of the questions. The college are notoriously uninventive and stuff gets repeated
- Sign up for eLA
- ENSURE you have gleaned some neuro and cardiac experience if you are sitting the exam before completing these units of training. Contact Matt Ward (College Tutor) at Derriford to discuss this (<u>matthewward2@nhs.net</u>) and Sam Allen (Derriford Anaesthetic secretary) to arrange: <u>samantha.allen6@nhs.net</u> or 01752 439205. Book study leave well in advance. Go with a list of questions so the anaesthetist you are assigned to can help you maximally.
- READ THE INTERMEDIATE LEVEL CURRICULUM AND ENSURE YOU HAVE COVERED ALL SECTIONS IN YOUR REVISION – the questions are blueprinted to it.

- QUESTION SPOT i.e. look up new guidelines(AAGBI/RCOA/APA) new reports, anything controversial. Read the editorials in Anaesthesia and the BJA for the preceding year. They often provide examiners for ideas for new exam questions.
- Do not underestimate the basic science component it is often the reason why people fail. You need to go through the primary knowledge again.
- Although we have all now done many exams it is worth remembering the basics of exam preparation and to this end I recommend Dr Hiu Lam's guide on the Peninsula Deanery website: <u>http://</u> <u>anaesthesia.peninsuladeanery.nhs.uk/about-us/exam-preparationguide/</u>
- Some candidates have found Amy Cuddys 20 minute talk on power posing for some mental strength and encouragement the day before the viva helpful. (Youtube)

Books

There are no definitive books for anaesthesia exams. That is why it is crucial to follow the syllabus as otherwise you will miss things. Below are some recommendations. If a book is not on there it is not because it is bad it's just because the authors of this guide didn't use it! Books are a matter of preference and I would advise borrowing a few before buying them to check the format suits you.

Courses

There are many courses all round the country. <u>www.frca.co.uk</u> has a pretty good list. The local courses are excellent friendly and cheap. If you want to go out of region the Bristol courses are supposed to be well run and good. I did the RCOA week course at the college and found it very varied – some excellent sessions and some poor. All very lecture based. Other than that I can't comment.

Websites

www.rcoa.ac.uk examinations section www.aagbi.org - Tutorial of the Week is an excellent resource as are the podcasts and mindmaps www.frca.co.uk- guide to passing the exam, and lots of educational resources as well as advice on books/websites/courses etc www.ceaccp.oxfordjournals.org - some exam questions seem to come straight from ceaccp articles. I strongly recommend using them for your revision and ensuring you have looked at the preceding years worth as they seem to offer inspiration for essays in the SAQ www.nice.org.uk- check relevant guidelines www.das.uk.com- check relevant guidelines www.nysora.com- useful anatomy and block info www.apagbi.org.uk- paeds guidelines

Mentoring and Support

- Ask your colleagues. They have been in the same position and will be a valuable source of advice and support
- Your educational supervisor may be extremely helpful and should be your first port of call
- Director of Education Dr Kate Holmes (Plymouth)
- Training Programme Director- Roger Langford (Truro)
- College tutors at all the hospitals
- Feel free to approach any of the Awsome or DAFT courses faculty for help – they will point you in the right direction (Kate Holmes, Gemma Crossingham, Debbie Sanders, Steve Copplestone, Dave Snow, Rob Rowland, Dave Ashton Cleary, Gary Minto, Lauren Weekes, David Adams)
- If you have previously failed the exam it is possible to arrange a guidance interview with the college- look at Guidance for Unsuccessful Candidates on the Examinations pages

The Written Exam

Books

- Key Clinical Topics in Anaesthesia by Roger Langford and Dave Ashton Cleary
- Oxford Handbook of Anaesthesia
- Training In Anaesthesia The essential curriculum by Catherine Spoors, Kevin Kiff.
- Anaesthesia and Intensive Care A-Z: An Encyclopedia of Principles and Practice by Steven Yentis
- Fundamentals of Anaesthesia by Pinnock
- Concise Anatomy for Anaesthesia by Erdmann
- Essentials of Anaesthetic Equipment by Al-Shaikh and Stacey
- Respiratory Physiology: The Essentials by John B. West.
- Principles of Physiology for the Anaesthetist by Peter Kam and Ian Power
- Basic Physics & Measurement in Anaesthesia by Paul D. Davis, Gavin N. C. Kenny.
- Pharmacology for Anaesthesia and Intensive Care by Tom E. Peck, Sue Hill.
- Clinical Notes for the FRCA by Deakin
- SAQS for the Final FRCA by James Shorthouse
- Short Answer Questions in Anaesthesia by Bricker
- Final FRCA Short Answer Questions by Nickells
- Get through Final FRCA:MCQs by Bahal

Local Courses

 Anaesthesia Written ShOrt answer and Multiple choice Examination Course (AWSoME) See www.theawsomecourse.co.uk

- PAWT (Peninsula Anaesthetists Written exam Training). It is longdistance and the emphasis is on technique (although some knowledge will be included) and encompasses both the essay questions and SBAs. It complements the SWOT and DAFT courses. Key features:
- Starts 5 months before exams
- Written questions and feedback every two weeks
- Focussed on current and common topics
- Directed to Peninsula trainees
- Not run by clever consultants but very average registrars. We just want you to pass! and it's FREE

If you would like to join please email us at pawtemail@gmail.com

Other Courses

 Bristol Final FRCA Crammer <u>www.bristolfinalfrca.com</u>

Websites with Questions - some free, some not!

www.frcaq.com

www.mededcoventry.com/Courses/Anaesthesia/Finals

www.onexamination.com

www.frca.co.uk

www.nischoolofanaesthesia-finalfrca.org.uk/SAQs/ http://frcaheadstart.org/exam_resources.html http://www.rcoa.ac.uk/examinations/exams-publications? title=&sort by=title&sort order=ASC

Strategies - various ideas from registrars that have passed the final

- 1. Use the syllabus as your revision guide and ensure you have covered everything. Look at the syllabus topic and then review the CEACCP articles to see if one matches and then make notes on flashcards, which are suitable for both structuring a SAQ or a viva question. If no CEACCP article exists, use a book. Making dual purpose viva/SAQ notes saves a LOT of time when it comes to viva revision.
- 2. Try noting down what you have done at work that day and making relevant notes that evening. For example you may anaesthetise a diabetic patient, use sugammadex and do an axillary block. This is a more interesting way to revise and gives you clinical experience to hang the knowledge off. However it is haphazard and you must check the syllabus regularly to ensure you are covering relevant bits.
- 3. Find a textbook you like and work through it. Be aware that it may not cover everything and because of the time taken to write, edit and publish it will be several years out of date so you will need to supplement your knowledge.
- 4. Go through questions and read around/make notes on the topics that come up.

- 5. Read around areas of weakness e.g final FRCA Dr Podcast chapter or 'Key Clinical Topics in Anaesthesia or CEACCP articles. Then consolidate with questions e.g the SAQ's in the James Shorthouse book or on the RCOA website.
- 6. You must **practice writing the answers** to the SAQs as timed whole exams you need to work out how to structure answers and ensure you can answer them within the **time**. You also need writing practice because your hand aches but your writing must be **legible**. Often candidates run out of time for the last question. Start off by doing one or two at a time and then move onto doing 4, 6, 8 or 10 at a time in timed manner to mimic exam conditions.
- 7. Find a revision buddy- split the paper in half and one prepares answers for 6 questions while the other would prepare answers for the other 6. Then answer the 6 questions that you hadn't prepared under exam conditions within the correct time frame. Then go over the answers together at the end.
- 8. Various SAQ strategies include answering Qs fully one at a time or putting the main points down for each and then going back and filling in the details or writing a structure for each question and then going back and filling in gaps. The written courses cover these ideas in more detail. DON'T BE AFRAID OF BULLET POINTS!

The Viva

Viva Books

- The Anaesthesia Science Viva Book by Bricker
- Dr Podcast Scripts for the Final FRCA by Leslie, Johnson, Thomas and Goodwin
- The Clinical Anaesthesia Viva book by Barker, Mills and Maguire,
- Physics Pharmacology and Physiology for Anaesthetists by Cross and Plunkett
- Structured Oral Examination in Clinical Anaesthesia: Practice Examination Papers by Mendonca
- The Final FRCA Structured Oral Examination: A Complete Guide (MasterPass) by Bobby Krishnachetty and Darshinder Sethi – this is purely past questions.
- Radiology for Anaesthesia and Intensive Care, by Richard Hopkins
- ECGs made easy

Local Courses

Devon Anaesthesia Finals Training Course (DAFT) course- 2 day course at Buckfast Abbey with four full viva exams intermingled with masterclasses. See www.thedaftcourse.co.uk samantha.allen6@nhs.net

There will be 2 weeks of viva practice held at Derriford (after work) in the weeks leading up to the final FRCA sittings. This will be arranged by a local trainee currently placed at Derriford and is open to all trainees in the region.

Other Courses

- Bristol Intensive finals Course (BIF) <u>www.bifcourse.org.uk</u> Sister course to Southampton based SCIF course - same material used on both.
- South Coast Intensive Finals course
 <u>www.scifcourse.org.uk</u>
- Mersey week long final SOE course <u>www.msoa.org</u>.uk
 Divided into groups of 4 and get given past papers and you gradually work through them vivaing each other. (It's worth learning all the primary graphs before you go as there is a test on primary stuff which

primary graphs before you go as there is a test on primary stuff which determines what group you will be according to ability and its best to be in a good group!)

Strategies

To pass the viva you need to be able to formulate a structured answer from the knowledge you hold already from the written exam. You cannot pass the viva without knowledge BUT if you have not practiced answering questions and speaking aloud you will not be able to convey the knowledge in a suitable way to the examiners. So a combination approach of reading and viva practice is required.

As a previous candidate states 'There is no point waiting until you have 'read everything' until you practice, you have to just risk being embarrassed and feeling stupid! The more you do, the better your technique becomes'

- 1. Find someone who is doing the exam at the same time and set up regular meetings. Viva each other and divide up difficult topics between you and teach each other to save time. If you are sitting the exam alone talk aloud to yourself answering questions
- 2. Sit down and work out how to structure your answers to questions. For example anaesthetic implications, surgical implications and patient implications or pre op/intra-op/post op. Before you open your mouth to answer a question think which structure you are going to use.
- 3. If you are going to draw diagrams PRACTICE them beforehand. Don't waste time in the exam trying to work out how to get your point across. Always LABEL them clearly and use the whole sheet of A4. If you have no artistic ability at all DO NOT waste time drawing!
- 4. Take a calendar to a clinical governance meeting or leave one in the coffee room and ask the consultants/other registrars to give you 15 minutes of their time for a practice viva. Chocolate bribery and assuring them that you will provide books sometimes helps. Do this in pairs or a group so they aren't being asked again and again by different people. You learn a lot from listening to a viva and giving feedback.

- 5. Do not underestimate the basic science component. This is often where people struggle and lose composure.
- 6. Don't forget the data interpretation component. ECG CXR/CT/MRI/ polysomnography/CTG/lung function tests have all come up

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