

MRCS Examination | Part A

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Session objectives

- My experience
- Overview of MRCS
- Syllabus
- Exam technique
- Timelines for revision
- Questions

My Experience

- Current:
- ST3 Trauma & Orthopaedic Surgeon in Mersey
- ASiT Associate Honorary Secretary & Interim Northwest Regional Representative
- Previous:
- MBChB and MRes University of Manchester
- Foundation Training East Midlands
- Core Surgical Training Manchester & Lancashire
- Higher Specialty Training Mersey

My Experience

• MRCS Part A:

First attempt – September 2020 (CT1)
 FAIL

- Second attempt – April 2021 (CT1)

PASS

Overview of MRCS

What is the MRCS?

- Membership of the Royal College of Surgeons
- Mandatory exam for progression
- Split into parts A and B
- Part A = written (MCQ)
- Part B = practical (OSCE)
- Part A = intercollegiate
- Part B = specific college (e.g. RCS England or RCS Edinburgh, etc.)

Overview of MRCS | Part A

- 5 hour examination
- 2 papers:

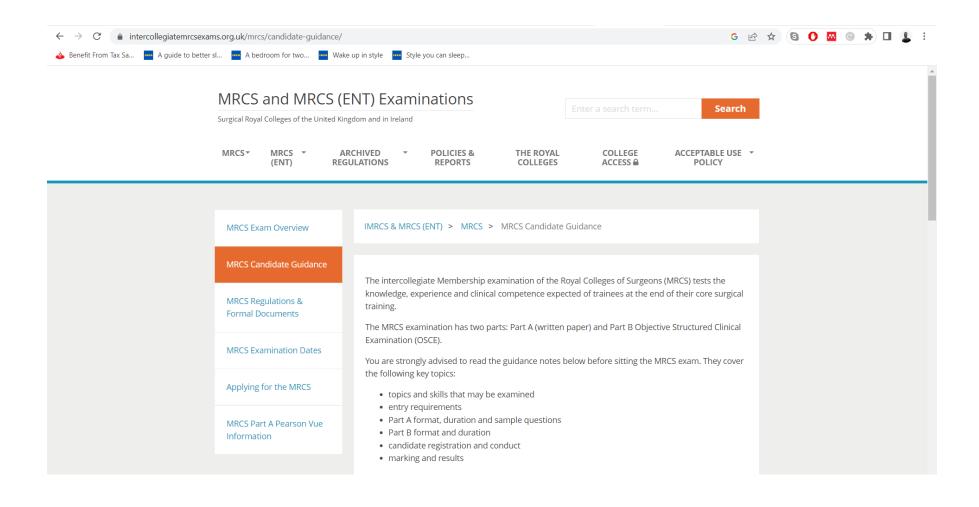
Paper 1 – applied basic sciences

Paper 2 – principles of surgery in general

- Combination of SBAs and EMQs
- Currently online Pearson Vue test centres (like driving test)
- Can sit 6 times

Overview of MRCS | Part A

Candidate guidance and further information



Syllabus | Applied Basic Sciences

- Applied anatomy (embryology, organs, surface anatomy, imaging)
- Physiology (thermoregulation, homeostasis, acid/base, cardioresp, haemostasis)
- Pharmacology (anaesthetic, common surgical meds)
- Pathology (genetics, immunity, repair and healing, thrombosis, shock)
- Microbiology (bacterial pathology, infections, transmissible viruses)
- Medical physics (scans, radiotherapy)
- Medical statistics (null hypothesis, screening programmes)

Syllabus | Principles of Surgery in General

- Epidemiology
- Common presentations
- Expected findings on history and examination
- Natural history
- Important investigations and likely findings
- Management options and published guidelines
- Prognosis
- Basic surgical skills
- Periop, intraop, postop care
- Critical care, paedicatric surgery
- Management of dying patient, health promotion

Syllabus | Important Links to Bookmark

• MRCS guide – syllabus, format, question allocations

Candidate%20Guide%20to%20MRCS%20examination%20August%2020 21%20FINAL

MRCS candidate guidance – overview of exam and key links

https://www.intercollegiatemrcsexams.org.uk/mrcs/candidateguidance/

Exam Technique

Disclaimer:

The information contained in the following slides is based on my own anecdotal experience and do not constitute official intercollegiate recommendation.

Exam Technique | Principles

- 1. Spaced repetition
- 2. Active recall
- 3. Curiosity
- 4. Etymology

Exam Technique | Spaced Repetition

1. Spaced repetition

What is it?

- Technique that tests information
- Spaces questions out
- Provides repetition of information following small pauses
- Increases familiarity with concepts

How to implement it?

Question banks (eMRCS, PastTest, etc.)

Exam Technique | Active Recall

2. Active recall

What is it?

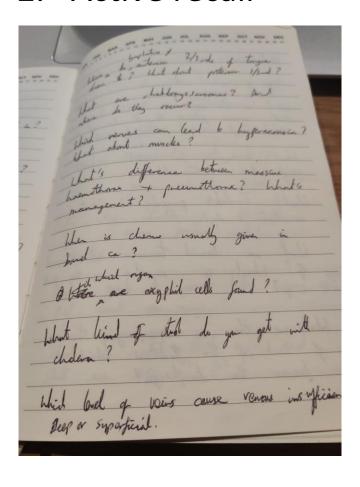
- Technique that encourages active recollection of information
- Creates pathways in brain for easier recall
- Works well with spaced repetition

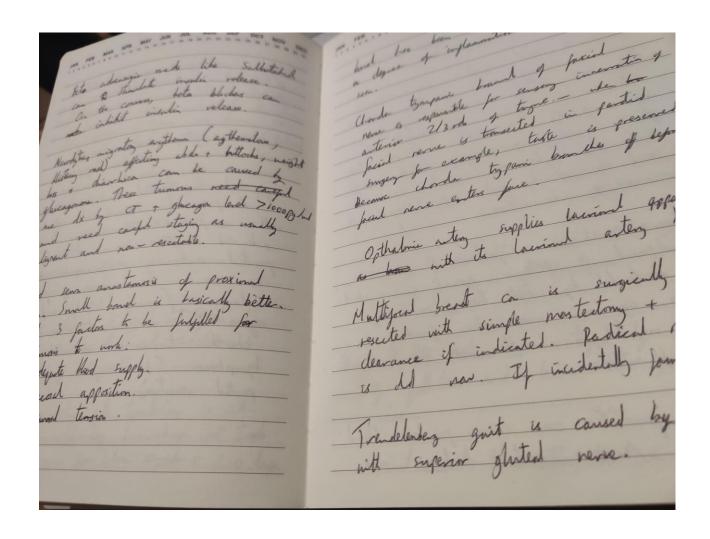
How to implement it?

- Use Q&A format
- Flashcards, notebook, etc.

Exam Technique | Active Recall

2. Active recall





Exam Technique | Curiosity

3. Curiosity

What is it?

- Not an exam technique per se
- Fosters openness of the mind to new information
- Helps to reduce stress of learning

How to implement it?

- Stop. Pause. Reframe information.
- Reconsider the information as if seeing it like vibrant colour or a piece of 3D art.
- Wow! It is the coolest piece of information you've ever come across!

Exam Technique | Etymology

4. Etymology

What is it?

- Not an exam technique per se
- The history of a word or phrase shown by tracing its development and relationships
- Medical exams are often just as much a language exam as a science exam

How to implement it?

- Look up the roots of common/new words
- Figure out the breakdown of the words
- See how many other words are derived from this root
- Enjoy cracking the code for medical words/terminology/jargon

Exam Technique | Etymology

4. Etymology

Working example:

Cholecyst (n.)

"gall bladder," 1846, from medical Latin cholecystis, incorrectly formed from Greek khole "gall" (from PIE root *ghel- (2) "to shine," with derivatives denoting "green, yellow," and thus "bile, gall") + kystis "bladder, cyst" (see cyst).

Related: Cholecystectomy. (ectomy = to remove!)

Timelines for Revision

- At least 3 months (+/- 2 months)
- "Complete question bank twice over"

- Advice:
- Book exam first then start working towards it
- Be mindful it's an expensive exam

Questions?

