

Regulations and Information Pack
FRCEM Intermediate Certificate Examinations

Applicable from 1 August 2016

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Introduction to the FRCEM Examination Structure – applicable from August 2016

From August 2016 the College is introducing a new suite of examinations, mapped to the Emergency Medicine 2015 Curriculum. Success in all components leads to the award of Fellowship by Examination (FRCEM).

The changes to the examination structure will be phased in during a two year period to permit trainees and other candidates the opportunity to complete the existing suite of examinations.

From August 2016, the Fellowship examination will consist of the following components:

- FRCEM Primary Examination
- FRCEM Intermediate Certificate:
 - Short Answer Question Paper
 - o Situational Judgement Paper (introduced from Autumn 2017)
- FRCEM Final Examination:
 - o Critical Appraisal (Short Answer Question Paper)
 - o Clinical Topic Review (with viva)
 - o Management Viva
 - o Clinical Short Answer Question Paper
 - Objective Structured Clinical Examination (OSCE)

From August 2018, the Fellowship examination will consist of the following components:

- FRCEM Primary Examination
- FRCEM Intermediate Certificate:
 - Short Answer Question Paper
 - Situational Judgement Paper
- FRCEM Final Examination:
 - o Critical Appraisal (Short Answer Question Paper)
 - Quality Improvement Project (QIP)
 - Clinical Short Answer Question Paper
 - Objective Structured Clinical Examination (OSCE)

The College continues to offer **Membership by Examination** (MRCEM) for candidates who have passed all of the following examinations:

- FRCEM Primary (or MRCEM Part A between 1 August 2012 and 1 August 2016 or granted exemption)
- FRCEM Intermediate SAQ (or MRCEM Part B between 1 August 2012 and 1 August 2016)
- MRCEM OSCE (previously called Part C. Passed after 1 August 2012)

For further information regarding the FRCEM Primary, the FRCEM Final examinations or the MRCEM OSCE, please refer to the relevant Information and Application Pack, available on the <u>Exams Section</u> of our website.

If you have any queries regarding the implementation of the new examination structure, please email exams@rcem.ac.uk.

Examination Regulations

- Applications for each component of the FRCEM examination should be submitted via the online application system, available via the <u>Examinations Section</u> of the College Website.
- 2. Applications may only be submitted during a specified time period ('the application window'). The date on which the application window opens (opening date) and closes for receipt of applications (the closing date) is published on the Examinations Section of the College Website.
- 3. Completed applications must be submitted by 17:00 (GMT) on the published closing date after which time the system automatically closes. Partially completed or late applications will not be accepted.
- Candidates in a GMC approved, UK training programme, must be registered or enrolled with the College and have paid the appropriate trainee administration fee/s.
- 5. It is a candidate's responsibility to ensure they have all the information required to complete the entire application form prior to the application window closing on the advertised date at 17:00 (GMT).
- 6. Upon submission of a completed application, candidates will receive an automated email confirming receipt of the application. Detailed written instructions confirming the exact date, timetable for, and location of the examination will be emailed individually to all candidates once the final allocation of examination spaces is confirmed, approximately four weeks prior to the examination.
- 7. Candidates wishing to withdraw or transfer their examination entry must notify the Examinations Department in writing by 17:00 (GMT) on the closing date. Fees cannot be transferred or refunded after this time.
- 8. Candidates must apply for any required entry visas in good time prior to the date of the examination. In exceptional circumstances, subject to receipt of written documentation confirming the refusal of a visa, the Examinations Manager or Director of Education will consider requests for candidates to transfer their examination entry.
- 9. Candidates who do not attend an examination will forfeit their examination fee. In exceptional circumstances, for matters beyond the candidate's control, the Director of Education will consider requests to transfer a candidate's entry to the next diet, subject to receipt of written documentation (e.g a detailed medical certificate, a death certificate for a direct family member). Please note that insufficient preparation is not considered a sufficient reason to transfer an examination entry.
- 10. Candidates will be informed of the date on which examination results will be published at the time their examination entry is confirmed. In very exceptional circumstances this may be amended by the College and due notice will be published on the College website.
- 11. Results will be published on the College website. Result letters and feedback will be posted to candidates within four weeks of the publication of results. Examination results will not be issued or confirmed by telephone or email.

Introduction to the FRCEM Intermediate Certificate

The FRCEM Intermediate Certificate examinations are mapped to the competences of Year 1-3 of the Emergency Medicine 2015 Curriculum (ACCS Plus) which is available on the 2015 Curriculum page of our website. All applicants for the FRCEM Intermediate Certificate examinations are strongly advised to familiarise themselves with the Year 1-3 competences in preparation for sitting the FRCEM Intermediate Certificate examinations.

FRCEM Intermediate Certificate Format of Examination

The FRCEM Intermediate Certificate consists of the following components:

- FRCEM Intermediate Short Answer Question (SAQ) Paper comprising of a 3 hour paper of 60, 3 mark questions
- FRCEM Intermediate Situational Judgement Paper (SJP) comprising of a 2 hour paper of 120 single best answer questions (SBAQ).

The SJP will be introduced from Autumn 2017.

Subject to eligibility criteria, candidates will be able to apply and sit each component independently but, as each component tests different skills and knowledge, candidates are required to pass all components, no cross compensation is permitted.

FRCEM Intermediate Certificate Eligibility Criteria

A candidate will be eligible to enter the FRCEM Intermediate Certificate examinations provided he/she:

- a) Holds a medical qualification approved by the General Medical Council (GMC) for the purposes of registration **and**
- b) Has completed the UK Foundation Programme or equivalent (electronic evidence will be required at point of application)
- c) Has passed the MRCEM Part A examination after 1 August 2012 and prior to 31 July 2016 **or**
- d) Has passed the FRCEM Primary examination after 1 August 2016 or
- e) Has been granted exemption from the FRCEM Primary or MRCEM Part A as a result of obtaining MRCS or MRCSI after 1 January 2012

Candidates who are registered with the GMC should include their registration number in the appropriate place on the application form. If you are registered or anticipate being registered with the GMC then your personal data, including your examination results, will be passed to the GMC for quality assurance and research purposes and to facilitate the awarding of certificates for completion of training (CCTs).

Candidates registered with the Irish Medical Council (IMC) or an international medical council are required to upload a copy of their current medical registration document at the time of application.

After submission of the online application, as part of the approvals process, the candidate's Educational Supervisor/Training Programme Director/Head of School or sponsoring consultant is asked to validate that the candidate has completed the required training experience, is familiar with the curriculum and understands the standard required. Candidates are advised that IELTS Level 7 is the expected standard for completion of FRCEM examinations.

Exemptions and equivalent examinations

MRCEM Part B in place of FRCEM Intermediate SAQ

MRCEM Part B passes obtained prior to August 2012 are deemed time expired. Candidates who sat the MRCEM Part B prior to August 2012 are therefore required to pass the FRCEM Intermediate SAQ examination.

Candidates who passed the MRCEM Part B examination after 1 August 2012 are deemed to have passed an equivalent examination to the FRCEM Intermediate SAQ examination.

MRCEM Part C (MRCEM OSCE) in place of FRCEM Intermediate SJP

Trainees should see below for the requirements for progression/entry into ST4.

Candidates who have been awarded Membership by Examination (MRCEM) prior to August 2018 are eligible to sit the FRCEM Final examinations and are not required to complete the FRCEM Intermediate SJP.

Candidates who have not been awarded MRCEM prior to August 2018 are still able to sit the required examinations in order to be awarded MRCEM but should be aware that they will be required to pass the FRCEM Intermediate SJP should they wish to sit the FRCEM Final Examinations at a future date.

Oversubscription Criteria

There is normally no restriction on the number of places available for either the FRCEM Intermediate SAQ or the Intermediate SJP examinations but candidates may not always be allocated their first choice of venue.

Number of attempts and currency

Candidates are permitted a maximum of six attempts each in which to pass the two components of the FRCEM Intermediate Certificate Examination (SAQ – 6 attempts and SJP – 6 attempts). In exceptional circumstances candidates may apply for approval for an additional examination attempt. Such cases will be dealt with on a case by case basis at the discretion of the Dean, whose decision is final.

Previous attempts at the MRCEM Part B examination prior to August 2016 do not count towards the number of available attempts for the Intermediate Certificate Short Answer Question (SAQ) Paper.

Previous attempts at the MRCEM Part C examination prior to August 2016 do not count towards the number of available attempts for the Intermediate Certificate Situational Judgement Paper (SJP).

A pass in the FRCEM Intermediate SAQ or SJP will remain current. If at some future date it becomes necessary to replace it, holders of the FRCEM Intermediate examinations (SAQ or SJP) will be given a minimum of 24 months' notice of the date from which it will be deemed time expired.

Required Examinations Entry/Progression into ST4

Trainees in a GMC approved, UK training programme are required to complete the following examinations in order to progress or enter ST4:

MRCEM by examination obtained prior to 31 July 2018

- MRCEM Part A (after 1 August 2012) or
 FRCEM Primary (after 1 August 2016) or
 Granted exemption (MRCS or MRCSI after 1 January 2012) and
- MRCEM Part B (after 1 August 2012) or
 FRCEM Intermediate SAQ (after 1 August 2016) and
- MRCEM Part C/OSCE (after 1 August 2012 and before 31 July 2018)

FRCEM Primary and FRCEM Intermediate Certificate

- MRCEM Part A (after 1 August 2012) or
 FRCEM Primary (after 1 August 2016) or
 Granted exemption (MRCS or MRCSI after 1 January 2012) and
- MRCEM Part B (after 1 August 2012) or
- o FRCEM Intermediate SAQ (after 1 August 2016) and
- o FRCEM Intermediate SJP (introduced after August 2017)

Candidates are reminded that the GMC normally considers an examination pass to be current so long as the candidate enters or re-enters an approved training programme within seven years of passing the examination and satisfies any other College currency requirements.

Membership by Examination (MRCEM)

The College continues to offer Membership by Examination (MRCEM) for candidates who have passed all of the following examinations:

- FRCEM Primary (or MRCEM Part A between 1 August 2012 and 1 August 2016)
- FRCEM Intermediate SAQ (or MRCEM Part B between 1 August 2012 and 1 August 2016)
- MRCEM OSCE (previously called Part C. Passed after 1 August 2012)

For further information regarding the MRCEM Examination please refer to the MRCEM Information Pack available on our <u>website</u>.

Structure and Content of the FRCEM Intermediate Certificate

The FRCEM Intermediate Certificate Examinations is conducted in English and candidates are advised that IELTS Level 7 is the expected standard for completion of the FRCEM examinations.

The blueprint for the FRCEM Intermediate SAQ is as follows:

Curriculum Category	LO/Sub-Category	Questions
Common Competences	History Taking	7
	Clinical examination	
	Therapeutics and safe prescribing	
	Decision making and clinical reasoning	
	Prioritisation of patient safety in clinical practice	
	Infection control	
	Managing long term conditions and promoting patient self-care	
	Health promotion and public health	
	Principles of medical ethics and confidentiality	
	Legal framework for practice	
	Evidence and guidelines	
Clinical Presentations - Core		40
Major & Acute Presentations	Anaphylaxis	18
	Cardio-Respiratory Arrest	
	Major Trauma	
	Septic Patient	
	Shocked Patient	
	Unconscious Patient	
	Abdominal Pain including loin pain	
	Abdominal Swelling, Mass & Constipation	
	Acute Back Pain	
	Aggressive/disturbed behaviour	
	Blackout/Collapse	
	Breathlessness	
	Chest Pain	
	Confusion, Acute/Delirium	
	Cough	
	Cyanosis	
	Diarrhoea	
	Dizziness and Vertigo	
	Falls	
	Fever	
	Fits / Seizure	
	Haematemesis & Melaena	
	Headache	
	Head Injury	
	Jaundice	
	Limb Pain & Swelling - Atraumatic	
	Neck pain	
	Oliguric patient	
	Pain Management	
	Painful ear	

	Palpitations			
	Pelvic pain			
	Poisoning			
	Rash			
	Red eye			
	Mental health			
	Sore throat			
	Syncope and pre-syncope			
	Traumatic limb and joint injuries			
	Vaginal bleeding			
	Ventilatory Support Vomiting and Nausea			
	Weakness and Paralysis			
	Wound assessment and management			
Anaesthetic Competences CT1&2	Preoperative Assessment - History Taking	4		
CITAZ	Preoperative Assessment - Clinical examination	•		
	Preoperative Assessment - Specific anaesthetic evaluation			
	Premedication			
	Induction of general anaesthesia Postoperative and recovery room care			
	Management of respiratory and cardiac arrest Control of infection			
	Introduction to anaesthesia for emergency surgery			
	Airway Management			
	Procedural Sedation			
	Transfer Medicine			
ICAAiabi A CCC	Critical Incidence	2		
ICM within ACCS	Obtains an arterial blood gas sample safely, interprets results correctly	2		
	Demonstrates aseptic placement of central venous catheter			
	Connects mechanical ventilator and selects initial settings			
Acute Presentations -	Prescribes safe use of vasoactive drugs and electrolytes			
Additional Adult ST3	Major trauma - Chest Injuries	6		
	Major trauma - Abdominal trauma			
	Major trauma - Spine			
	Major trauma - Maxillofacial			
	Major trauma - Burns			
	Traumatic limb and joint injuries - Lower limb			
	Traumatic limb and joint injuries - Upper limb			
	ABGs -Interpretation of abnormal blood gas results in the Emergency Department			
	Abnormal blood glucose			
	Dysuria			
	Emergency airway care (CT3 and covers HST)			
	Needlestick injury			
	Testicular pain			
	Urinary retention			
Paediatric Presentations - Major & Acute Presentations	Anaphylaxis	11		
	Apnoea, stridor and airway obstruction			
	Cardio-respiratory arrest			
	Major trauma in children			
	The shocked child			

1		
	The unconscious child	
	Abdominal pain	
	Accidental poisoning, poisoning and self-harm	
	Acute life-threatening event (ALTE)	
	Blood disorders	
	Breathing difficulties - recognise the critically ill and those who will need intubation and ventilation	
	Concerning presentations	
	Dehydration secondary to diarrhoea and vomiting	
	ENT	
	Fever in all age groups	
	Floppy child	
	Gastro-intestinal bleeding	
	Headache	
	Neonatal presentations	
	Ophthalmology	
	Pain in children	
	Painful limbs – atraumatic	
	Painful limbs- traumatic	
	Rashes in children	
	Sore throat	
Practical Procedures (ACCS)	Arterial cannulation	12
Practical Procedures (ACCS)		12
	Peripheral venous cannulation	
	Central venous cannulation	
	Arterial blood gas sampling	
	Lumbar puncture	
	Pleural tap and aspiration	
	Intercostal drain - Seldinger	
	Intercostal drain - Open	
	Ascitic tap	
	Abdominal paracentesis	
	Airway protection	
	Basic and advanced life support	
	DC cardioversion	
	Knee aspiration	
	Temporary pacing (external/wire)	
	Reduction of dislocation/ fracture	
	Large joint examination	
	Wound management	
	Trauma primary survey	
	Initial assessment of the acutely unwell	
	Secondary assessment of the acutely unwell (i.e. after initial resuscitation and in the intensive care unit)	
	Connection to a mechanical ventilator	
	Safe use of drugs to facilitate mechanical ventilation	
	Managing the patient fighting the ventilator	
	Monitoring respiratory function	
	Deliver a fluid challenge safely to an acutely unwell patient	
	Describe actions required for accidental displacement of tracheal tube or tracheostomy	
TOTAL	2000.100 doctors required for decidental displacement of classical table of classicostomy	60
TOTAL		00

The blueprint for the FRCEM Intermediate SJP is as follows:

Туре	Attributes	LO Number	LO Category	Questions
Common Competences	Patient Focus	CC1	History Taking The patient as a central focus of	25
		CC6	care Prioritisation of patient safety in	
		CC7	clinical practice	
		CC8	Team working and patient safety	
		CC10	Infection control	
		CC11	Managing long term conditions and promoting patient self-care	
		CC12	Relationships with patients and communication within a consultation	
		CC13	Breaking bad news	
	Problem Solving	CC1	History Taking	15
		CC5	Decision making and clinical reasoning	
		CC8	Team working and patient safety	
	Decision Making	CC1	History Taking	15
		CC5	Decision making and clinical reasoning	
		CC8	Team working and patient safety	
		CC11	Managing long term conditions and promoting patient self-care	
	Working in a Team	CC4	Time and workload management	25
		CC7	Prioritisation of patient safety in clinical practice	
		CC8	Team working and patient safety	
		CC11	Managing long term conditions and promoting patient self-care	
		CC12	Relationships with patients and communication within a consultation	
		CC14	Complaints and medical error	
		CC15	Communication with colleagues and cooperation	
	Time Management	CC4	Time and workload management	10
			Relationships with patients and	
	Self awareness	CC12	communication within a consultation	10
		CC24	Personal behaviour	
	Professional Intergrity	CC14	Complaints and medical error	10
		CC17	Principles of medical ethics and confidentiality	
		CC19	Legal framework for practice	
	Professional			
	Development	CC23	Teaching and training	10
		CC24	Personal behaviour	
	TOTAL			120

Sample Questions to illustrate the format of the Intermediate SAQ



An 11 year old boy presents with his parents to the ED having developed a limp over the last week.

- What is the abnormality on the x-ray? (1 mark)
- Name and describe the radiological sign associated with this abnormality? (1 mark)
- Name one complication associated with this condition. (1 mark)



A 45 year old lady presents to the ED with a two day history of abdominal pain. Abdominal examination confirms generalised tenderness.

- What is the diagnosis? (1 mark)
- Name two other symptoms which the patient may complain of? (1 mark)
- What would be your first two steps in your early management of this patient? (1 mark)

3.
On oxygen 10 litres:
pH 7.15
PaCO2 6.0 kPa
Pa O2 7.5 kPa
O2 sats 98%
Na 145 mmol/L
K+ 3.5 mmol/L
Urea 3 mmol?L
CI 90 mmol/L

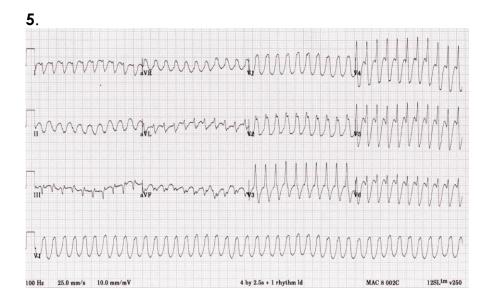
A 37 year old male is brought to the ED following a house fire. He is GCS 10 and agitated on arrival with a pulse of 120 and BP 105-85. He has sooty deposits around his face and mouth but no burns elsewhere on his body. He appears cyanosed and is receiving 10 L/min of oxygen through a face mask.

- Calculate the anion gap including your workings (1 mark)
- What is the explanation for this result in this patient? (1 mark)
- What empirical treatment might you consider? (1 mark)



A 17 year old male attend the ED complaining of a rash. He describes having a cold sore one week ago followed by the abrupt onset of a rash. The rash started peripherally and spread centrally. He is now unwell, febrile, tachycardic and is complaining of a headache. He also complains of a sore mouth and gritty eyes. He has haematuria on urine dipstick testing.

- Describe the key feature of this rash? (1 mark)
- What is the likely diagnosis? (1 mark)
- What is the most likely infective agent that has precipitated the rash? (1 mark)



A 57 year old man has two hour history of palpitations. On examination he is sweaty and has a BP of 100/50 but denies chest pain or breathlessness.

- Name two diagnoses which would explain this ECG picture? (2 marks)
- He then drops his BP to 80/60. What treatment is required? (1 mark)



A 60 year old male plumber attends with a painful and swollen right knee. He has been sent to the ED by his boss as he is finding it difficult working.

- What is the diagnosis (1)
- What is the main complication this patient may develop? (1)
- Outline two aspects of your treatment (1)

Standard Setting and Examination Results

The FRCEM Intermediate SAQ and the FRCEM Intermediate SJP are standard set using a modified Angoff Method. One standard error of measurement will be added to the cut scores identified using the Angoff method to calculate the required final pass mark for each paper.

The results for both the FRCEM Intermediate SAQ and the FRCEM Intermediate SJP will be published on a pre-advised day approximately four weeks after the date of the examination. Result letters and feedback will be posted to candidates within four weeks of the publication of results. Examination results will not be issued or confirmed by telephone or email.

Guidance for Candidates with Additional Requirements

The College recognises that some candidates may require reasonable adjustments when undertaking examinations. The responsibility for requesting reasonable adjustments lies with the candidate. Any candidate who wishes to request reasonable adjustments **must** indicate the requirements at the time of application. Candidates **must** provide a report from a relevant professional outlining their specific needs and the adjustments required.

Each request will be assessed by the College on its own merit. Candidates will be notified in writing of the outcome of their application for reasonable adjustments and of the arrangements that will be made to meet their needs.