The Royal College of Pathologists
Pathology: the science behind the cure

Paediatric pathology examination regulations

2026

These regulations must be read in conjunction with the ‘Regulations and guidelines – College examinations for membership and diplomas’.

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Entry and training requirements

There is no specific timing for entry to the examination. Candidates should obtain guidance from their educational supervisor as to when to sit the examination. Planning should take into account intended Certificate of Completion of Training (CCT) date (where applicable), but candidates should apply only when they are ready. Some general guidance is given below, but apart from the sequence in which the examinations can be sat, it is not intended to be prescriptive.

Part 1

Candidates must sit the Part 1 histopathology examination. Candidates usually take this examination after 2 years of training in histopathology in a department recognised for training in paediatric pathology or, in the case of candidates with postgraduate experience in paediatrics, obstetrics or fetal medicine, 2 years of training in a department recognised for training in general histopathology.

Part 2

It is anticipated that most trainees will sit the Part 2 paediatric pathology examination after 4 years of training. Trainees must have completed at least 2 years' training in a recognised histopathology training programme and at least 18 months' training in a recognised paediatric pathology training programme at specialist trainee or registrar grade. Candidates may not sit the Part 2 examination until 12 months after successfully completing the Part 1 examination.

Structure and format of the examination

Part 1

Candidates will take the Part 1 histopathology examination (see Histopathology regulations and guidelines for further details).

Part 2

The examination takes place over at least 2 days within the 3-week practical examination period and consists of:

Perinatal Pathology module:

- Postmortem Logbook:

  The candidate will submit a logbook of 20 postmortem cases for marking prior to sitting the FRCPath Paediatric Pathology Part 2 examination. The candidate will only be allowed to sit the remaining papers if the logbook is awarded a pass mark.

- Placenta Paper:

  This will comprise a selection of 10 placenta cases (including a complex case) (2 hours)

- Viva (Short structured Interview):

  The Viva in the perinatal module will focus on two cases from the candidate's postmortem logbook and other topics relating to management, quality assurance, health and safety, ethics and so forth. (1 hour)

Paediatric surgical pathology module:

- Short Surgicals Paper:

  The short surgicals paper has 15 cases (2 ½ Hours) and each case is represented usually by a single H&E section.

- Long Surgicals Paper:

  This paper comprises 3 long surgical pathology cases with additional special stains / immunohistochemistry and ancillary investigations. (2 Hours)

- Viva (Short Structured Interview):

  The Viva for the Paediatric Surgicals module will focus on practice in paediatric surgical pathology as well as relevant professional behaviours, laboratory management, medical education, specimen handling, national and international guidance and so forth (1 hour).

The candidate should reach the minimum pass mark in all sections of the examination within a module in order to pass that module overall. A candidate sitting the Part 2

examination for the first time will be expected to sit both modules in their first sitting. Passing a module will allow a candidate to bank that module.

Successful candidates will be able to demonstrate competence in perinatal and paediatric pathology appropriate for an independent consultant paediatric pathologist and to enter the continuing professional development and external quality assurance schemes.

Additional information on the examination format, which will be in effect from spring 2027, can be found on the College website.

Timing of the examinations

The Part 1 and Part 2 examinations will be offered twice a year in spring and autumn.