



### New Format FRCPATH Part 2 Exam in Medical Microbiology

The GMC has recently approved a major re-structuring of the FRCPATH Part 2 examination in Medical Microbiology that will begin in Autumn 2017.

The new examination will take place over two days (compared with 3.5 days as currently). The format will be as follows:

| Day 1           |                |  |
|-----------------|----------------|--|
| Day 1 morning   | 2.5 hour paper | One Essay (choice of two) – similar to existing essay topics in present Part 2 written and short-answer questions (SAQs) – covering clinical and infection control scenarios, QC/QA, laboratory errors and troubleshooting, laboratory safety, laboratory management etc.<br><br>These SAQs will be similar to the written 'Scenario' questions that are already in the existing Part 2 Practical. Presently there are two questions lasting 1.5h each with 6 to 10 parts (scenarios) in each question.  |
| Day 1 afternoon | 2.5 hour paper | Critical appraisal (one paper) – exactly the same assessment as the existing Part 2 written, but with only one rather than two papers to appraise and SAQs (as described above)  |
| Day 2           |                |  |
| Day 2 morning   | 3.5 hours      | Case/laboratory based scenarios (simulating long/complex cases) in clinical microbiology.<br><br>These are <i>likely</i> to take a similar format to the present first morning of the existing Part 2 Practical (with some changes). These questions, presently, consist of reading Gram films associated with e.g. blood cultures and a complex mixture (e.g. from an intra-abdominal abscess etc) from a specific clinical case given with preliminary clinical, laboratory and radiological information. These will now <b>not</b> proceed to candidate manipulation of plates and cultures (e.g. identification and sensitivity testing) but to the assimilation of further <b>given</b> laboratory/clinical/radiological data, leading to the (expected) appropriate diagnosis and management of the patient. |
| Day 2 afternoon | 3 hour         | OSPE: Planned 15 stations (plus a variable number of rest stations), covering a range of topics including:<br><br>Data interpretation / infection control / parasitology / virology / mycology / communication skills / 'non-wet' basic laboratory skills (e.g. setting up a microscope) etc.<br><br>In other words, this will test the candidate's knowledge over a wide range of the Curriculum (employing a different assessment tool). The knowledge tested in the OSPE may have been tested in the existing Part 2 Practical by the 'Spots', Scenario questions, Virology etc.  |



The exam will be 'closed book' (ie **no** textbooks or manuals or other written material or equipment to be used, **except** when provided by the examiners).

Marks will be given for the totality of the assessments on *each* day. Candidates will be required to pass *both* days total assessment – with no compensation between Day 1 and Day 2. In other words failing either Day 1 or Day 2 will require re-sitting of *both* Day 1 and Day 2 assessments.

The new format has importantly retained both a wide variety of assessment methods/tools and multiple assessors.

### **Reasons for the change**

The introduction of the new 2014 curriculum was the principal driver for the change – the GMC expected that the examination would be updated in light of this.

There is also a recognition that Medical Microbiology has changed considerably since the last exam update, with increased automation and centralisation of laboratories.

The work of the Medical Microbiologist has also changed, with ever-increasing emphasis on clinical services, including infection control, but with less involvement in day-to-day laboratory benchwork. It was agreed that the new exam should be no less rigorous than the old, but the emphasis should be on testing knowledge and skills that consultants would be expected to use in their normal daily work.

Consideration was also given to the fact that the present Part 2, lasting 3.5 days, is the longest of any medical specialty in Europe, if not worldwide.

It is also clear that we (the College) are finding it increasingly difficult to interest centres/teams willing and able to host the exam in its present format.

We plan to have the first sitting of the new format exam in the autumn of 2017. **There will be no overlap period.**

We will run a pilot of the new components (OSPE and practical scenarios) in the spring of 2017. We intend that the pilot will involve candidates that have recently **passed** the FRCPATH Part 2 and will **not** be open to Candidates yet to pass the examination.

Although the new exam is shorter, and (hopefully) less of an operational challenge to organise, it will still need strong support from the profession as a whole, if it is to succeed - in terms of preparing banks of questions, standard setting and marking etc.

More information about the new examination will be made available on the RCPATH website from the spring of 2017.

John Hood  
Chair of the Panel of Examiners in Medical  
Microbiology, RCPATH

Aodhan Breathnach & Malur Sudhanva  
Co-Chairs of RCPATH Medical Microbiology  
CSTC