

The FRCPath Practical Exam

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Histo/Cyto practical exam

Syllabus

- RCPATH Curriculum for Specialist Training in Histopathology (2005)
- 500-1000 surgical cases per year of all types including subspecialities such as neuropath, renal etc
- Cytology 300-600 cases per year
- Autopsy 20 per year (100 overall)

Exam Dates

- Held over two days in 4-7 centres in early April and October
- Up to 20 candidates in each centre divided into two groups of 10 (Newcastle up to 40)
- Candidates allocated to centres where they have not trained
- External Examiners asked to declare interests and as far as possible avoid examining own trainees
- Examiners must be actively engaged in diagnostic pathology

Structure

- Surgicals
- OSPE 1 and viva
- OSPE 2
- Long cases
- Macroscopic pathology and viva
- Frozen Sections and viva
- Gynae and Diagnostic cytology

Timetable

- Day 1 morning
 - Surgicals
- Day 1 afternoon
 - Long cases, Frozen and viva and OSPE 1 with viva
- Day 2 morning
 - Cytology
- Day 2 afternoon
 - Macros and viva, OSPE 2 (written)
- NB as slides and questions are circulated you **MUST NOT** discuss the exam with other candidates at any time during any half day period

Other issues

- Microscopes – take your own if possible or arrange to hire or borrow one of a make and type you are happy with
- Accommodation – list of suitable places provided by exam centre
- Local timetables given to candidates at centres
- All scripts and candidates identified by candidate exam number although local numbers may be used at centres for ease of timetabling

The Surgical

- Set Centrally
- 20 cases to report in 3h 20m
- Both biopsies and larger specimens, straightforward and difficult cases
- All sites and specialities may be covered
- Circulated as 10 sets of 2 over 3 hours 20 minutes
- 20 minutes to produce written answers to both cases then slides are moved on
- Strict time criteria

Long Cases

- Set and marked locally
- 4 cases
- Set of sections including special stains/immuno and sometimes also photos/EM
- 20 minutes per case to produce written answer

The OSPEs – OSPE 1

- OSPE 1
- Viva with 2 examiners
- Scenario provided during viva
- Structured discussion
- Usually covers
management/governance issues
- Set centrally but marked locally

The OSPEs – OSPE 2

- Written scenario usually with set of data and/or reports
- Usually covers a diagnostic scenario and may involve MDM setting
- May involve adherence to reporting protocols/guidelines/grading/staging etc
- Set centrally and marked locally

Frozen Sections

- 6 cases divided as two sets of 3
- 20 minutes to look at each set and take notes (40 minutes in all)
- 20 minute viva to discuss cases with 2 examiners
- Key approach 'What will you tell the surgeon'
- Set and marked locally

Macroscopic Pathology

- Set centrally
- 4 sets of macroscopic photographs with brief history and instructions
- 40 minutes to look at and mark photos
- Felt pen provided to mark where sections taken
- 20 minute viva with 2 examiners
- Marked locally on central criteria

Cytology

- 8 gynae cases (conventional, thinprep or surepath)
- 8 diagnostic cases (Pap and Giemsa)
- Slides circulated in pairs with 20 minutes for each set and written answers to be produced (2 hours 40 mins)
- Set and marked centrally by Cyto subgroup (chair Peter Smith)

Preparation

- Practical Experience is the key
- Cut up and supervised primary reporting of cases using local and national protocols
- Cytology screening and reporting
- Attendance and Presentation of cases at MDMs and CPCs
- Hands on Frozen section experience
- Presentation of prepared cases at Black Box sessions
- Training sessions and postgrad meetings

Preparation 2 – required reading

- RCPATH Guidelines and Minimum Data Sets
- TNM classifications
- Cytology Screening Guidelines
- Review articles on Diagnostic Pathology in Journals
- General background reading around cases in up to date textbooks.
- WHO books and AFIP Fascicles

Preparation 3 – the mock exam

- Do at least one timed mock exam covering as many aspects as possible including vivas
- Find someone who has examined in the last three years to set the exam and give you feedback
- Volunteer to invigilate if the exam is taking place at your centre
- Don't just look at old faded slide sets of obscure and difficult cases
- Don't be a mock junkie and don't ask people who are not your trainers or current examiners to give you mock exams

What is not required

- Detailed knowledge of obscure and rare cases and conditions
- Inability to make diagnostic decisions at the level required
- Inappropriate use of additional diagnostic tests
- Lengthy rambling answers with no conclusion or diagnosis
- Scattergun differential diagnoses with no deductive reasoning
- Unreadable reports without sentences or verbs

Pass or Fail

- You need to pass each section
- The sections are close marked so if you make a number of serious diagnostic errors you are unlikely to pass
- All sections are double marked and remarked if borderline
- We really do want to pass people – honest!

The MRCPATH *Practical* exam – what is it for?

- To see if you are safe to be let loose on the public as a diagnostic pathologist in the near future
- To test your diagnostic and deductive skills across the range of histo and cyto including complex cases and dealing with frozens, MDMs, management and governance issues
- To prepare you for the final year pre CCST where you learn how to become a consultant

I SUGGESTED I COULD WORK
FROM HOME BY FAX AND STUFF,
BUT THEY WEREN'T HAVING

IT



—Sophie