

## **Guide to Primary FRCA – Wasim Mir (2019)**

The Primary FRCA is a much-talked about and often feared exam amongst Anaesthetists and even non-Anaesthetists. As a postgraduate exam, it is expected to be challenging, just as membership exams in other specialties, but I personally feel that much of the hype surrounding it can have a negative impact on the confidence of candidates. That being said, a substantial amount of people do not manage to pass at the first attempt, for a variety of reasons. This brief guide simply relays my thoughts on how I approached trying to pass it the first time around, but individuals must tailor revision to their own style and needs.

### ***When do I start?***

I treated this exam like training for a marathon. Smart preparation and planning, with the least time (and money) wasted was at the forefront of my mind. Working up to a peak without getting 'injured' by taking plenty of breaks in the form of short holidays, attending important social functions, and spending time exercising and continuing 'normal' day-to-day life was crucial to maintaining a healthy momentum throughout. Many of us struggle to balance work and on-call commitments with revision and as one gets older this undoubtedly gets more challenging. However, I tried not to treat this as an excuse, and with 2 children under 3 (one born just before the exam!), I attempted to blend my revision as much as possible with work and family life – there were many nights holding a baby at 3 am in one hand and a physics textbook in the other!

Nobody enjoys the hard slog of revising for a postgraduate exam, so make your first attempt the best attempt. The impact and support of family and friends is also a crucial aspect of this, so decide at an appropriate junction (with them) when is the right time to commit. The oft-branded time frame quoted is 6 months, yet even the most keen of candidates would struggle to maintain the revision-endurance required for that length of time. I personally feel one should start regular revision around 4 months prior to the MCQ (late April for Sept sitting). By regular I mean 45 minutes to an hour a day most weekdays, and a couple of hours on Saturday/Sunday.

### ***Where to start?***

A massive curriculum is the challenge for the Primary. 'Spaced repetition learning' is something that I found helps overcome the masses of information. Most content seems alien initially (and can even at the exam!) but after a few times reading about a hair hygrometer things begin to fall into place. Where to start? Print off the actual curriculum and see what is actually encompassed and expected of candidates. This can be found on the Basic Level Training curriculum section of the college website. I started actual revision on *e-learning for Health*. Compiled by the RCoA, it is an ideal resource for candidates and covers most, if not all, of the curriculum. I began with the revision tutorials to gauge (no pun intended) what was expected of core topics and exam questions. I then moved on to the actual Physiology, Pharmacology, Physics & Equipment tutorials in the examination section of the eLfH website, which contained vast amounts of question banks. The MCQs here encompassed 90% of revision in the week before the exam.

### ***Should I get an online question bank?***

Personally, I did not find other online question banks useful or similar to the exam, (I subscribed to Pastest early on as it was quite cheap but I don't think this is necessary). There are literally thousands of practice MCQs on eLfH, some of which are part of the college question bank and DO come up in the exam. As well as this, the 'Blue Book' given by the college contains ideal practice questions. I did this at the start of my revision, two weeks prior to the exam, and the day before the exam. Aim for >80% on MTF questions and 70% on SBAs. Old edition copies of the blue book are useful and contain repeat questions.

## ***What books should one read?***

Although MCQ practice is crucial, I based most of my revision on books, as I prefer reading to e-learning, but a blend is often healthy. A key ethos to maintain is to be in the mindset of revising for the OSCE/SOE from the start, therefore understanding principles is more important than pure fact recognition, which can be developed through repetition and closer to the MCQ. Some people prefer to buy their own books which is fine (and expensive), but I didn't buy any books as many libraries have enough of the key books, as well as friends who have recently taken the exam and are willing to lend!

In terms of books, I would recommend the following:

### **Pharmacology**

- *Pharmacology for Anaesthesia and Intensive Care* (Peck and Hill)

This is more than enough as a core text; it will be useful for both MCQ and SOE/OSCE. I read this cover-to-cover once in initial reading and then skim read closer to both exams.

### **Physiology**

- *Basic Physiology for Anaesthetists* (Chambers et al)

I didn't manage to read all of this cover to cover but focussed on core topics for understanding and more tricky topics commonly asked in SOEs such as blood/calcium homeostasis etc. (Physiology is covered well on eLFH)

### **Physics/Equipment**

- *Physics in Anaesthesia* (Kenny et al)

A great book, simple and very helpful in understanding concepts for a novice Physicist like me! Again, like Peck and Hill, I read this cover to cover in my early revision and then skim read towards the date of each exam

- *Essentials of Anaesthetic Equipment... 5<sup>th</sup> edition* (Shaikh and Stacey)

Another good book especially for diagrams, good to take on lists to read about a topic and visualise in theatre, also has some MCQs in which I didn't use but may be useful if have time.

### **Other Books**

- *Master Pass The Primary FRCA Structured Oral Exam Guides 1&2, 2nd Ed.* (Wijayasiri & McCombe)

I actually read this cover to cover before reading any of the core textbooks listed above, and found this a great way of introducing the concepts to our required level. Useful for both MCQ knowledge and OSCE/SOE, and a must have resource for the SOE!

- *Physics, Pharmacology & Physiology for Anaesthetists* (Cross & Plunkett)

This book is vital for the SOE in terms of graphs and facts/definitions but does need supplementing with the other books and material. I didn't use it for the MCQ but flicked through it before the SOE making sure I knew most of the diagrams.

Other resources which people have spoken highly of, which I didn't use, include *Dr Podcast* (audio or scripts), as well as Professor Mendonca's SBA book and *Basic Physics and Measurement in Anaesthesia* (Davis) – these cover what is in the other books but in a different style, simply pick them up and have a glance to see which you prefer.

## Courses

Courses always seem great in hindsight, especially if one passes. Personally, having spoken to others more senior, they didn't recommend an MCQ course as necessary so I focussed on practising questions, however, if one is able and has reimbursement then the Mersey/Coventry MCQ courses and College lecture days are booked well in advance so book early! The College also releases some MCQs straight after their course and 2 weeks before the exam on eLfh, these are invaluable.

## OSCE/SOE

As soon as the MCQ is done, and before the result, take a break. If you don't want to waste time but still want a break, I would recommend just getting used to the format of the OSCE/SOE by reading the introduction in the blue book and watching the college YouTube videos. (These videos are essential viewing, some literally come up word for word in the exam, so watch the night before if your brain is fried!)

Conversely to the MCQ, I felt a course would help for the OSCE. I booked the Coventry course (local) before even taking the MCQ (many people couldn't get a place waiting for the MCQ result) and it was great practice, especially for the OSCE. I ended up treating the OSCE on the day of the exam like it was just another course OSCE. Try and get as much simulated practice as possible, local hospitals often arrange sessions, but one course is often adequate, especially if time and money is limited. The OSCE is not too different in format from UK medical school OSCEs and many stations are reasonable such as ALS/comm. Skills/history and one can score highly. Others such as anatomy are often done poorly, but one poor station won't fail you.

The SOE isn't a pleasant exam, this is often the most vaunted part of the "day out in London" and referred to with various expletives. However, people pass. Practice is essential for the SOE, and speak to college tutors/FRCA examiners early to get in as much as possible for the exam (2 or 3 times a week for 6 weeks is enough I feel). Use the questions in the blue book as a guide to the style of questioning. Book-work still needs to be ongoing (it is highly awkward filling 5 minutes talking about something you don't know). I used *Graphic Anaesthesia* as an adjunct (caution as it has some mistakes) to hone in graph drawing skills and equipment diagrams.

A great piece of advice from an examiner I had early on was to not bother with practicing vivas on theatre lists, the best practice is timed 5 minute question practice akin to the actual exam in a quiet, face to face environment. If one is busy with work/family life, and feels they haven't had enough practice (I felt this over and over), rest assured that as long as you've had some practice in talking through answers, there comes a point where you will answer questions in an auto-pilot mode in the exam. Unless a replica question comes up, it is unlikely you will model a perfect answer, so just trust the fact that you can speak in an orderly fashion and this should carry you through.

Finally, it can be frustrating learning facts and principles that don't feel relevant or useful, but looking back, much of the knowledge learnt when revising for the Primary is quite satisfying especially if it is the first time since medical school (or ever) that you have understood scientific principles in physiology and pharmacology. Not passing the exam doesn't make you a poor clinician or anaesthetist, it just means you have to crack on and pass the next time! Make sure you book a hotel close to the college prior to exam day (book well in advance with a refundable option to avoid extortionate fees). Most importantly, ensure you plan time with family and friends after the day, ultimately there is far more to your career and life than this exam, and I genuinely believe it is simply a case of 'when' rather than 'if' for everyone. All the best!