THE EXAM

Having just negotiated the FRCS (Gen Surg) I thought that adding some tips on what helped me might be useful. Obviously everyone is different and what I did to prepare is not what might suit you.

The first thing to do is make sure you give yourself enough time. I started in January and sat the MCQ in June and Viva/ clinical in September. I was a little more laid back in the beginning but once I sent my cheque in for £1700 in April it really focussed the mind.

Where to pay you exam fee: http://www.intercollegiate.org.uk/

MCQ/ EMQ

Reading list

(What I read)

Companion Series All of them (some people didn't bother with

them)

Rush University Review of Surgery

Your old MRCS MCQ books

An American book of MCQs with explanations Astound yourself with what you used to know

about transplant surgery

EMQs for Surgery (Fligelstone and Davies)

Pitched slightly higher than MRCS

Exam syllabus

www.jcst.org/publications/Curriculum/generalsur

g_html/

(click on curriculum)

Example questions (look in all the specialties because some questions are relevant for General Surgery and they do come up!)

http://www.intercollegiate.org.uk/

The Exam Experience

The actual exam is held in a hotel in whichever city they chose for that sitting. I booked in the same hotel to reduce the chances of getting lost on the way to the exam. The down side of staying in the exam hotel is that you see a lot of other candidates. The exam itself is run very efficiently and is very like sitting university/ school exams with rickety fold up tables to complete the experience. The questions are widely varied and covered all the areas of the syllabus, so make sure you cover every topic – even in the other subspecialties.

VIVA/ CLINICAL Reading List

Exam Syllabus www.jcst.org/publications/Curriculum/generalsurg_html/

(click on curriculum)

Companion series All of them, especially the HPB one and the OG one

(you can be more selective of what you read if you read

them all for the MCQ)

Websites http://www.wmsurgeons.com/education/index.html

Excellent website with revision notes and practice

questions

Guidelines BSG - Barretts

BSG - Acute pancreatitis

BSG - Management of common bile duct stones

SIGN - GI Bleeding

IAP – Surgical management of pancreatitis

Guidelines for the management of gastrointestinal

stromal tumours

AUGIS - Consensus on Minimally invasive

oesophgectomy

Important Papers To follow

Courses

Manchester/ Alpine Course Usually held in January and July. Viva intensive and

you can ski if you go in January! www.surgicalcourses.org.uk

Going For Gold Held in July. Also has practice Clinicals.

www.derbyhospitals.nhs.uk/goingforgold.html

Liverpool Held in January

www.liv.ac.uk/surgery/courses/FRCS_Course/index.htm

Whipps Cross Held in January

http://www.wxmec.org.uk/courses/HSC.html

Miscellaneous

Organise a study group. Your colleagues will be much harsher on you than the

examiners. It also gives you a chance to discuss papers for the academic section. The study group will

also double as a general support group. Start a departmental Journal Club!

because they won't be able to examine on the day

anyway.

The Exam Experience

The Exam itself is a pretty unpleasant experience. I booked myself into the hotel where the exam was being held. In retrospect this was a bit of an error because all of the examiners were staying there too and I kept seeing them. I ended up eating breakfast in my room to avoid them.

On the actual day of the exam you are surrounded by people in various states of panic. The main aim of the day is to keep your cool and not say anything stupid to

the examiners. How you achieve this is individual. I went out for dinner, some people stayed in their rooms reading.

The actual viva is held in a large function room and while you are being viva'ed there are about 25 other people being viva'ed too so it's really quite noisy and you have to really concentrate to hear what the examiners are saying. Some if my vivas went very well and some went pretty badly. The main thing is to put the bad ones behind you and focus on the next section. It is always possible to make up for lower marks as each section is marked completely individually and there is no longer an automatic fail if you fail the clinical section.

The clinical section was held in an out patient department of one of the local hospitals. I hardly examined a single patient and it was more like an extension of the viva. Be prepared to comment on CT scans and go through informed consent.