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Perspective

Course Review: Doctors Academy's MRCS Part B OSCE Course

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Abstract

The MRCS Part B course organised by Doctors Academy is a highly interactive five-day course held at the Doctors Academy Education Centre, Cardiff Bay and the School of Biosciences, Cardiff University. It aims to help surgeons-in-training prepare for Part B of the MRCS exam, highlighting the 'high-yield' topics that make up the knowledge and skills components of the exam. This article aims to provide a review of the course, including feedback from all courses between 2019 and 2021

Who Can Attend?

The delegates who attended the course from 2019 to 2021 had previously completed Part A of the MRCS exam and ranged from Foundation Year 2 Doctors to those in their second year of Core Surgical Training. There were 24 to 36 delegates each day, with a delegate-to-tutor ratio that did not exceed six delegates per tutor. Each day covered different components pertinent to the exam, and participants could decide which day(s) they wished to attend depending on their own needs.

Cost

The fee for each day was dependent on its content. The surgical anatomy and surgical pathology component (two days) were £425; the clinical and procedural skills component was £185; the critical care component was £190, and the clinical examination and communication skills component was £195. The fee included appropriate access to the online resource following the course, surface anatomy videos, slide handouts, lunch, and refreshments. On average, 57% of participants felt the course was of excellent value for money, whilst 43% felt the course was certainly good value for money. Regarding the refreshments, 65% of the participants found them excellent, and 34% found them good. There were no participants who found the course fee or the quality of the food neutral, fair or poor.

Venue

The procedural skills, clinical examination and communication skills components were held at the Doctors Academy Education Centre, Cardiff Bay. This provided spacious breakout rooms for focused interactive small group teaching and larger rooms for lecture-based teaching. The applied surgical sciences, anatomy, and surgical pathology components were conducted at the Anatomy Centre, Welsh Centre for Anatomical Education, Cardiff University. This allowed

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the course to utilise the anatomy prosection in the Dissection Room, further enhancing the quality of the anatomy teaching. Both venues benefit from their proximity to train stations, hotels, restaurants, and shopping areas. All participants liked the venues, with 55% rating them as excellent and 44% as good. College of Physicians and Surgeons of Cardiff has spacious breakout rooms that allow for small-group teaching. Welsh Centre for Anatomical Education allows anatomy teaching using prosections.

Course Content

The first day covered the procedural skills component of the exam. It started with a welcome lecture from the course convenor, Professor Enoch, followed by the allocation of delegates to small groups of five. The delegates completed a circuit of small group teaching covering the key procedural stations tested in the MRCS Part B exam. This included urinary catheterisation, lumbar puncture, debridement of a contaminated wound, fine needle aspiration cytology, intravenous cannulation, arterial blood gas interpretation, lesion excision, haemostatic stitch, knot tying and suturing. This was followed by lecture-based teaching that covered surgery principles, local anaesthetic, wound healing, and theatre list prioritisation. From the feedback, 100% of the delegates found the teaching to be precise (63% very good; 37% good) and relevant to the exam (63% very relevant; 37% relevant), and 100% of the delegates rated the general academic standard of the demonstrators as very high (63% excellent; 37% very high). All the delegates found the small-group teaching of the individual skills to be excellent or very good, as demonstrated in Figure 1.

Day Two was held at the School of Biosciences, Cardiff University. It consisted of interactive lecture-based teaching, which covered applied surgical sciences and critical care. Consultants delivered the teaching in critical care and consultant anaesthetists. The topics chosen for the lectures were crucial for the MRCS Part B exam, and the concepts were structured so that they were significantly more straightforward to understand than textbook-based learning. The content of the day was found to be excellent (44%) and very good (46%), with the demonstrations rated as high (41% excellent; 49% very good). All the delegates found the day relevant to the exam (45% excellent; 54% very good) and scored the academic standard of the lecturers as high (48% excellent; 52% very good). Each topic was also rated as very good or excellent, as shown in Figure 2.

The third and fourth days were dedicated to anatomy. One half of

the group started in the Dissection Room on the third day, whilst the other half received lecture-based anatomy and pathology teaching. After lunch, the two groups swapped. The delegates were divided into five groups in the Dissection Room and rotated around six stations (30 minutes each). At the end of the day, the entire group assembled in the lecture theatre for an interactive discussion of mock OSCE questions. The stations covered high-yield topics tested in the MRCS Part B exam, such as the foramina of the skull, upper and lower limbs, and solid organs of the abdomen. The stations had a mix of anatomical pictures and prosection provided by Cardiff University.

Day Four started with all the delegates attending a morning lecture on introductory, general and system-specific pathology lecture by Professor Enoch, followed by small-group teaching in the Dissection Room until lunch. After lunch, the delegates participated in a mock anatomy and pathology OSCE in the Dissection Room. This allowed the delegates to experience a realistic representation of the MRCS Part B exam, with the added benefit of immediate feedback to enhance learning.

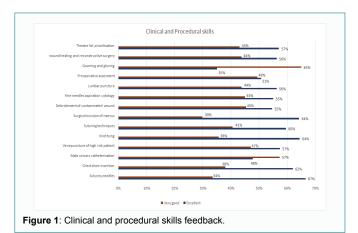
Most candidates found the introductory anatomy session valuable (63% excellent; 37% very good. Teaching using prosection and anatomical material was exceptionally well received, with 86% of delegates rating it as excellent and 14% deeming it as particularly good. The rating for each anatomical topic is graphically represented in Figure 3. All delegates found the teaching relevant to the exam (61% excellent; 27% very good) and agreed that it provided an excellent self-assessment (65% excellent; 35% very good). The mock OSCE was considered an exceptional learning opportunity, with 84% rating it as excellent and 16% as very good.

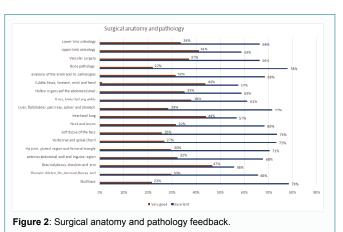
The final day of the course was held at the Doctors Academy Education Centre, Cardiff Bay. The delegates were divided into small groups of five and rotated through several stations that covered physical examination in the morning and communication skills in the afternoon. The communication stations discussed breaking bad news, history taking, and consenting. In each station, at least two delegates had the opportunity to practice a scenario and receive immediate feedback from the faculty and their peers. The content of the day was rated excellent by most of the delegates (54%), whilst the others rated it very good (46%). The relevance of the content to the exam and the clarity of the sessions were also rated highly (41% excellent and 49% very good, 46% excellent and 54% very good, respectively). The academic standard of the faculty was found to be high (48% excellent; 52% very good) Figure 4.

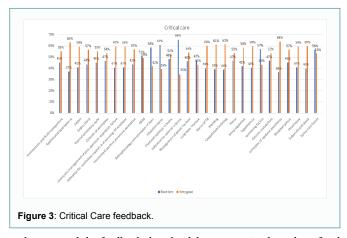
After completing the course, all participants received complimentary access to the Doctors Academy comprehensive online resource for MRCS OSCE, which includes podcasts, scripts, surface anatomy videos, and recorded talks. This allowed delegates to consolidate their learning following the course and revise the critical areas in which they struggled. It was also easy to access and use. The delegates received a certificate of attendance via email following the course.

Summary

This is an excellent course for those preparing for the MRCS Part B. It was highly interactive, focused and of very high academic standard. One key benefit of the programme was the anatomy teaching using prosection. The specimens were of outstanding quality and quintessential for learning anatomy pertinent to the MRCS Part B exam. The mock OSCE with prosection reflected the style of the







real exam, and the feedback that the delegates received was beneficial to their learning. Another factor that the delegates highlighted was the friendliness of the faculty and organisers. All delegates found the organisers to be very friendly. Overall, 57% of the delegates stated that they would most certainly recommend the course to others, whilst 74% certainly would.

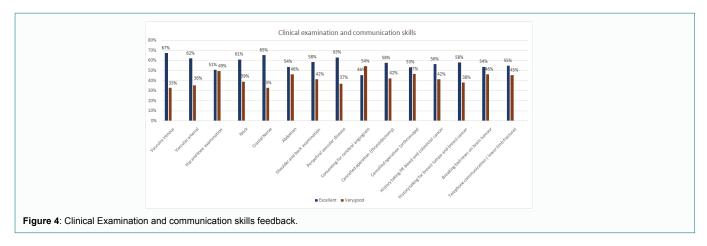
• Course: Doctors Academy MRCS Part B OSCE course

Contact: contact@doctorsacademy.org.uk

Cost: £995 (for all five days)

Organiser: Doctors Academy Group

Virtues: Anatomy teaching using prosection with a comprehensive mock OSCE



Shortcomings: Cost of Anatomy Session in the Dissection Room

Overall Rating: 4.5/5

Authors Contribution

Poh Tan, Khemerin Eng Study concept, design and planning. Poh Tan, Khemerin Eng, literature search, statistical analysis and drafting of manuscript. Poh Tan, overall content guarantor.