

# **THE FINAL FCARCSI EXAM – HOW TO PREPARE AND PASS IT**

## **The Exam**

The FCARCSI/FRCA exam is an important milestone for those who want to pursue a career in Anaesthetics. The FCARCSI has five parts MCQ, SAQ, Clinical case, Viva 1 and Viva 2. With pass rate anywhere between 25- 50 % it is by no means an easy (if not tougher) alternative to the FRCA. This literature aims to provide specific advice on how best to approach and tackle each component of the exam.

Like for any exam the key components are an early start, systematic planning, efficient learning and most importantly, understanding how the exam is structured and how the whole process works. At least 6 months of preparation is required for the exam although about 10 months of planning is probably necessary.

## **Initial preparation (6-10 months)**

Are you eligible for the exam?

Plan your hospital/rotation.

Mental preparation - both yourself and family.

The Final Anaesthesia exam does demand every brain cell and every free minute of your life so be prepared to disengage from life with the exception of your books notes and journals. I prepped my spouse for months and months before hand that I wouldn't be available to help with family responsibilities. I warned my family that they wouldn't be hearing from me and that I would be absent from all events for at least three months. Prioritise anything else that is going on in your life so it will not compete with your time for preparing for and revising for the exam and otherwise stress you out.

Once that's done and you feel ready to start the exam preparation gets hold of the exam time table and syllabus from the college website. The Syllabus is really vast, so get a print out and follow up or highlight as you read different branches of anaesthetics. Helps you to know some thing about everything and prevents you from missing smaller and less important topics.

Plan and make the most of your study leave and do as many courses as you can afford.

Collect all the relevant material – books, previous questions papers, etc.

Speak to seniors and colleagues and get a good idea of the structure, marking system and technique of the exam.

Set up a small study group if possible which makes revising a little more pleasant and allows the burden of work and stress to be spread.

## **Components of the exam and marking system**

MCQ and SAQ are taken together at one sitting on the same day, the results of which are out after 2- 3 weeks. The clinical examination is held after about 2 weeks following the results.

The clinical examination has three components which include Clinical case, Viva 1 and Viva 2.

The College uses a five-point close-marking system, the marks being:

- 7 Outstanding Performance
- 6 Pass
- 5 Fail (Borderline)
- 4 Fail
- 3 Veto (if a candidate fails to answer a compulsory question in the E&SAQ Paper).

Candidates with a mark = 4 in either the MCQ section or the Short Answer Questions section will not be invited to attend the Clinical or Viva elements.

The following marks are required to pass the Final FCARCSI Examination

6, 6, 6, 6, 5

## Written Exam

**Aim** –Is to try and get at least a 6 in each of the MCQ and SAQ so that you can afford to get a 5 in one of the three oral components. It is very difficult (but not impossible) to pass the exam with a 6 and a 5 in the written. After the written results are out you can call the college and find out the break down results of your written exam even before the viva. I am not sure if it's a good idea though since having a 6 and 6 can make you feel more confident for the viva but having a 6 and 5 can make you feel more nervous and you may tend to lose hope even before you go for the orals.

## MCQs

40 MCQ's in 90 minutes, comprising of questions on Anaesthesia, Pain Management, Intensive Care Medicine, General Medicine, Surgery and Anatomy related to Anaesthesia Practice.  
Negative marking does apply to the Irish exam still although in due course they may consider withdrawing it similar to the FRCA

There is no predetermined cut off pass mark although the mean cut off scores in the previous papers have been between 50 – 55 %.

Studies have shown that by making wild guesses a candidate generally tends to get more positive than negative .Even without any idea the probability of getting a question right is 50 %.So in my opinion you should answer as many questions as you can as I feel there is a higher chance of gaining marks than losing.

Q base MCQs should help you determine what way works best for you.

Other little tips for MCQs

Read the question along with the stem

First guess is usually right

Do not dwell on a question too much

Look for words like `always` `never` - they are almost always false.

As mentioned earlier do as many MCQs as you can

## Books

MCQs by Karen Henderson – Lots of questions are taken straight from this book

MCQs by Elfuturi

Q base the whole series including primary (as much as you can)

## Websites

[Frca.co.uk](http://Frca.co.uk)

[Onexamination.com](http://Onexamination.com) I found this particular website quite useful as you can read selected topics and there are also graphs and statistics regarding your progress and where you stand compared to your peers.

## SAQs

3 hours of essay questions on the principles and practice of Clinical Anaesthesia, Intensive Care and Pain Medicine.

Question Paper has 2 parts - Part A and Part B ( allocate 1 hour 30 mins for each part)

Each part has 3 main stems. (Allocate 30 mins for each stem)

First stem – A single essay question

Second stem – Two Short answer question (15 mins for each)

Third stem – Three Very short answer questions (10 mins for each)

Total of 6 stems - **All questions must be attempted.**

**Marking of saq-** Each stem is marked and given a score of 3, 4, 5, 6 or 7 .Then depending on the individual stem scores an average is calculated and rounded off to award a score of 3,4,5,6 or 7 for the whole SAQ exam.

## **Where and how to prepare for SAQS**

Read past question papers, Practising question papers is vital to get the timing and the technique most suited for you, which also helps to familiarise with the format of the exam.

Allocate separate folders to collect relevant material for individual branches in anaesthesia like Obstetrics, Pain, ITU, Neurosurgery, etc. It helps a lot towards the end so that you know where to read what topic from since you are familiar with the material rather than reading a topic from off the internet 10 days before the exam.

Classify – Learn to classify everything you read. Little notes, flash cards or stick pads can be of immense help.

Learn to have a basic format for any question. Eg: Anaesthetic management of.....

You can write your answer using 8 Ps

Preoperative assessment

Preoptimise

Plan – GA/Regional

Premedication

Peroperative

Postoperative

Pain relief

Possible Problems

Key points – Have key points for everything you read, so when you are preparing towards the end just a quick look at the key points should help you produce the whole answer.

CPD Journals/ Review articles- make summaries with 10 key words for each article.

Study skills – Find out what works best for you and utilize them. I retain information by writing it down by hand much better than by typing or reading aloud. Not everyone works this way.

Other methods I saw among my friends: extremely detailed flashcards; repetition of incorrectly answered multiple choice questions every night before bed; studying from hand-me-down outlines; and reading aloud (over and over and over again...).

Other sources for SAQs

Guidelines - AAGBI, NICE, NPSA alerts

Books – Simon Bricker, The clinical viva and the basic science viva books are a great help as well

Oxford Handbook- very useful, read from cover to cover

FRCA website is an excellent source for SAQs and covers most of the topics including topics of recent interest and controversies

## **Clinical Case Viva**

Case study to be read by the candidate. Followed by 25 minutes of examination discussing the case including relevant investigations.

Here all the candidates are taken into a room or sometimes even in the corridor and you are given the case for a period of 5- 10 minutes. Investigations like blood results, ECG, chest X-ray may or may not be given at that time. I suggest write down the main problems and a crisp summary of the case.

Many candidates seem to have a problem to summarise a case as you don't really know how much to include and what to leave. I think the best way would be to start of with the age and the main problems you are concerned about. Give a brief pause after you mention that. If the examiner does not say anything or is waiting for you to carry on, then carry on with a summary of the investigations and blood results.

For example: I have been presented with a 70 year old gentleman with multiple co morbidities. The main problems I am concerned about is the possible difficult airway, ischemic heart disease, long standing diabetes mellitus .....

His investigations also show that he is anaemic, there is a degree of renal impairment and he also has cardiomegaly in his chest X-ray.

I would definitely want to do a more detailed assessment before I can anaesthetise him safely.

Practice summarising cases since you know for sure that this is the first question of your clinical case viva. A good start can make you sail through the discussion quite easily whereas a bad start can crumble the rest of your viva.

Always take a further history, think of more investigations and always preoptimize your patient. There will be something to do which you must say although in reality you would have probably just carried on.

All candidates during a particular session get the same clinical case though the questions may vary, for example one examiner may choose to concentrate more on preoptimization whereas the other may choose to go straight for the anaesthetic management but generally the discussion is quite friendly and examiners just want to be convinced that you would anaesthetise the patient safely.

Try and read a little about basic clinical medicine like anaemia, jaundice and also clinical examination of different systems. It could come up easily in your case discussion.

Short cases – This is followed by 3 short cases for 10 minutes each where fairly common topics like rheumatoid arthritis, COPD, Aortic stenosis , etc is discussed.

## **Viva 1**

Clinical Anaesthesia and Pain Management - 25 minutes. A structured viva examination is held relating to the clinical material provided, and also on Clinical Anaesthesia and Pain Management unrelated to the clinical material.

Anatomy related to various blocks is commonly asked including rough diagrams to demonstrate what you speak. Pain topics are commonly asked and are an important part of the Viva 1.

Read either Key topics in pain or Acute and Chronic pain from the Frca.co.uk website. That should be more than sufficient

## **Viva 2**

Intensive Care and Clinical Science - 25 minutes.

A structured viva examination is held relating to Intensive Care topics followed by application of Basic Sciences to Anaesthesia.

Intensive care topics are again one of the favourites of the Irish examiners. They do like to ask subjects which are topical so please have a rough idea of the current controversial subject.

They can ask any basic science question here and if you think that the Irish exam concentrates less on basic science that's absolutely wrong cause it can come up anywhere in the exam.

Therefore read basic sciences concentrating particularly on Anatomy, Pharmacology and Physics.

## **THE EXAM**

Determine where your exam is to take place and familiarise yourself with it. Be sure to arrive well in time so you will not panic if anything delays your journey.

If you are travelling from UK make sure you reach the day before, stay in a nice comfortable place and most importantly stop reading as soon as your flight takes off from UK. I figured out that not cramming through the last few hours can actually make you less nervous and allows you to have a good nights rest as well.

**MCQ**- 40 MCQS in 90 mins

Time is generally not the problem,

Attempt as many as you can.

Did you see the word "not" or "except" "never" “?”

## **SAQS**

Timing is crucial- Stick to time, When the time is up for that question just stop writing and move to the next one. Make sure all your key points are covered though.

6 questions in 3 hours

Part A

1<sup>st</sup> Stem 1 Essay question 30 mins

2<sup>nd</sup> Stem-2 Saqs 15\*2 = 30 mins

3<sup>rd</sup> Stem -3 very short answers 10\*2 = 30 mins

Similarly time Part B as well.

The secret towards passing SAQs is

**CLASSIFY**  
**KEY POINTS**  
**FORMAT**

Essay questions- read one question at a time as it helps to focus on that particular question rather than worry about something you don't know elsewhere in the paper

Formulate a plan in the first 2 mins with all the key words in some scrap paper

This will help you to present neatly and in an organised manner.

Write legibly and space out your answers well, May help you to add a few points later on as you remember.

Start well by either identifying main problems/ goals or give a brief introduction

Use headings and subheadings, emphasis on key points, prioritise.

Draw graphs and diagrams where appropriate

List the causes of .....`, mention the common and important causes first.

Avoid abbreviations

Read the question carefully to understand what the examiners want to read in your answer.

**CLINICAL**

Summarising your case well

Identify important problems.

Present the ECG and the Chest X ray in an organised manner.

Again classify where appropriate

Sound confident and be safe

Say simple and routine things first

**Conclusion**

If you follow the advice outlined here I am sure you will be well on your way to passing your upcoming exam. To ensure you are at your best, go to bed early the night before relax as much as possible and walk into the exam confident that you'll pass the first time.

Good luck!!!.

If you have any queries you can contact me on [payalkajekar@gmail.com](mailto:payalkajekar@gmail.com).

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