

**Notice of amendments to the MRCP(UK)  
Regulations and Information for Candidates 2009  
in respect of changes to the Part 2 Clinical (PACES) Exam**

**To have effect from the 2009/3 diet onwards**

Changes are being made to the MRCP(UK) Part 2 Clinical (PACES) examination that come into effect at the 2009/3 diet, as described at:

<http://www.mrcpuk.org/PACES/Pages/PACESChanges.aspx>

As a result of these changes several changes have been made to the 2009 *Regulations and Information for Candidates* so that they remain accurate and up-to-date. To minimise any confusion, where part of the 2009 Regulations has been amended or revised, that part is included in full below, using the same numbering as the text in the 2009 Regulations that it replaces.

Candidates for the MRCP(UK) Part 2 Clinical (PACES) examination should be aware that the revisions to the Regulations detailed below supersedes the corresponding text in the 2009 Regulations. No other parts of the Regulations are affected by these changes. These changes will be incorporated into the 2010 Regulations in due course.

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## **4. Academic Framework: The Aims and Objectives of the MRCP(UK) Examination**

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- *All text remains the same, apart from paragraph 4.6 which has been revised to be as follows:*

### **4.6 MRCP(UK) Part 2 Clinical Examination (PACES)**

#### **4.6.1 Purpose**

The MRCP(UK) Part 2 Clinical Examination (PACES) can be taken by physicians in training who have passed the MRCP(UK) Part 1 Examination or who have exemption from the MRCP(UK) Part 1 Examination (see Section 6.4), in accordance with the recommendations for necessary clinical experience detailed in Section 8.2.3. Success in this Examination is dependent on the candidate demonstrating the knowledge, skills and attitudes appropriate for a physician in training, in a clinical setting.

#### **4.6.2 Aims**

The MRCP(UK) Part 2 Clinical Examination (PACES) will test the following skills:

- physical examination;
- identifying physical signs;
- clinical communication;
- differential diagnosis

- clinical judgement
- managing patients' concerns;
- maintaining patient welfare.

The above are set out in more detail in the guidelines for the Examination, published on the MRCP(UK) website [www.mrcpuk.org/PACES](http://www.mrcpuk.org/PACES).

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## **8. MRCP(UK) Part 2 Clinical Examination (PACES)**

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- *Parts of Paragraph 8 has been significantly revised, and the text that follows supersedes the corresponding paragraphs in the 2009 Regulations:*

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### **8.1 Format**

The MRCP(UK) Part 2 Clinical Examination (PACES) is composed of five stations each assessed by two independent examiners. Candidates will start at any one of the five stations and then move round the carousel of stations at 20-minute intervals until the cycle has been completed. The stations are:

#### **Station 1**

Respiratory System Examination (10 minutes)  
Abdominal System Examination (10 minutes)

#### **Station 2**

History Taking Skills (20 minutes)

#### **Station 3**

Cardiovascular System Examination (10 minutes)  
Nervous System Examination (10 minutes)

#### **Station 4**

Communication Skills (20 minutes)

#### **Station 5**

Integrated Clinical Assessment

- Brief Clinical Consultation 1 (10 minutes)
- Brief Clinical Consultation 2 (10 minutes)

The MRCP(UK) Part 2 Clinical Examination (PACES) lasts a total of 125 minutes (including one 5-minute break before each station).

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### **8.10.1 Procedure**

Each candidate receives 16 marksheets before the start of the MRCP(UK) Part 2 Clinical Examination (PACES) and must complete his/her personal details on each sheet in capital letters, using a 2B pencil. The candidate hands one sheet to each examiner at Stations 2 and 4 and two sheets to each examiner at Stations 1, 3 and 5. Marksheets are station-specific. The examiners are required to record their marks for each candidate on the marksheet independently and without consultation. Examiners do not have any knowledge of the marks given by other examiners at other stations in the Examination during the cycle.

#### Stations 1 and 3

At Stations 1 and 3 (each of which consists of two sub-stations lasting 10 minutes), the timekeeper sounds a bell to announce the start of the assessment at the station. One examiner takes the candidate into the station and shows the candidate written instructions for the first of the two cases. The candidate responds to the written instructions. The response involves the examination of the appropriate system and answering questions from the examiners that may include the diagnosis and management of the clinical problem. After five minutes, the examiners will remind candidates that there is one minute remaining in which to complete their physical examination (ie a total of six minutes is permitted). After six minutes, the physical examination will end, leaving four minutes for discussion of the case.

After 10 minutes, the timekeeper signals the end of the sub-station. The examiners and the candidate must then stop. The candidate is then shown written instructions by the second examiner for the second case. Examination at the second sub-station then starts and follows the same procedure as the first sub-station.

After 10 minutes, a bell sounds to signal the end of the Examination at the station. The examiners and the candidate must then stop. The candidate leaves the station and is directed to the next station. A period of approximately five minutes has been allowed for this changeover and for the examiners to complete the marksheets.

#### Stations 2 and 4

Stations 2 and 4 each last 20 minutes. At Station 2, the candidate is given a general practitioner's letter to read outside the station in the five-minute period before the start of the station. At Station 4, the candidate is given a clinical scenario to read. Rough paper is provided for note-taking (these notes do not form part of the examination and are destroyed afterwards). The timekeeper sounds a bell to announce the start of the station. One examiner takes the candidate into the station.

The interview involves interaction between the candidate and the patient/subject appropriate to the station. Candidates are alerted when 12 minutes, and again when 14 minutes, have elapsed. The simulated patient leaves the station after 14 minutes. The candidate is given one minute for reflection, or to make further notes, and is then invited to summarise and discuss important features of the history (Station 2) or the interaction with the simulated patient (Station 4).

#### Station 5

Station 5 consists of two sub-stations (each called a Brief Clinical Consultation) of ten minutes each. The candidate is given two sets of short written instructions or scenarios, one for each sub-station, to read in the five-minute period before the start of the station. The timekeeper sounds a bell to signal the start of the station. One examiner takes the candidate in to the first of the two cases. The lead examiner will advise which scenario applies to each case.

The candidate will have eight minutes with the patient/surrogate to take a focussed history, carry out a relevant examination, respond to the patient/surrogate's concerns or questions, and explain his/her management plan. Candidates are alerted after six minutes that they have two minutes left with the patient/surrogate. When the 8 minute consultation is complete, the candidate will then have two minutes to describe relevant physical findings, his/her preferred

diagnosis and any differential diagnoses to the examiners. The examiners may also ask about any other issues they need to clarify to complete the assessment.

After ten minutes the timekeeper signals the end of the sub-station. The examiners and the candidate must then stop. The candidate is then shown the patient/surrogate for the second case. Examination at the second sub-station then starts and follows the same procedure as at the first sub-station.

If a candidate completes the Examination in any sub-station or station before the end of the prescribed period, he/she should remain at the station; this could mean a period of silence.

Clinical scenarios must not be copied or removed from the clinical Examination centres. All MRCP(UK) Examination questions and clinical scenarios are confidential and are copyrighted by the Royal Colleges of Physicians. No person may communicate any question or part of a question to any other person or organisation. To do so would constitute a serious breach of copyright and of these Regulations.

On occasion a candidate may be observed by a trainee examiner. The trainee examiner will complete a marksheet for the candidate but the marksheet is not used in any way in the assessment of the candidate.

### **8.10.2 Method of assessment**

16 marksheets in total are completed by the examiners:

- one by each examiner at Stations 2 and 4 (total 4);
- two by each examiner at Stations 1, 3 and 5 (total 12).

The marks awarded on all 16 marksheets determine the candidate's overall MRCP(UK) Part 2 Clinical Examination (PACES) score.

Candidates are awarded marks for between four and seven separate clinical skills at each patient encounter, allowing a minimum of eight and a maximum of twelve judgments to be made on each candidate's performance in each skill over the course of the examination. A description of each of the seven clinical skills, and at which stations they are assessed, is available on the MRCP(UK) website, [www.mrcpuk.org](http://www.mrcpuk.org). The onus is on the candidate to demonstrate each of the skills noted on the marksheet for each encounter.

All marks are recorded on a three-point grading system and are detailed on the MRCP(UK) Part 2 Clinical Examination (PACES) marksheet. The grades are:

- unsatisfactory
- borderline
- satisfactory

These grades are converted to numeric values 0–2 (unsatisfactory=0, borderline=1, satisfactory=2). Grade descriptors are provided on the marksheets and are further refined in the examiner calibration process that takes place before each candidate is seen..

The MRCP(UK) Part 2 Clinical Examination (PACES) is marked out of a total of 172 marks (the maximum available from the 16 marksheets). The pass mark is reviewed for each diet and a pass mark confirmed by the MRCP(UK) Clinical Examining Board.

To facilitate electronic scanning of the marksheets, as well as clear photocopying if required, candidates are required to complete all aspects of the marksheets using a 2B pencil and, except for their signatures, to use CAPITAL LETTERS.

### **8.10.3 Marksheets**

Sample versions of the MRCP(UK) Part 2 Clinical Examination (PACES) marksheets used by examiners are shown below for information.

# ROYAL COLLEGES OF PHYSICIANS OF THE UNITED KINGDOM MRCP(UK) PACES EXAMINATION - CLINICAL MARKSHEET

## STATION ONE - Respiratory System Examination

CANDIDATE NAME (PLEASE PRINT)

Brief description of the case:

Please use 2B pencil only.

Examination number				Centre number			
e0	e0a	e0b	e0c	e0	e0a	e0b	e0c
e1	e1a	e1b	e1c	e1	e1a	e1b	e1c
e2	e2a	e2b	e2c	e2	e2a	e2b	e2c
e3	e3a	e3b	e3c	e3	e3a	e3b	e3c
e4	e4a	e4b	e4c	e4	e4a	e4b	e4c
e5	e5a	e5b	e5c	e5	e5a	e5b	e5c
e6	e6a	e6b	e6c	e6	e6a	e6b	e6c
e7	e7a	e7b	e7c	e7	e7a	e7b	e7c
e8	e8a	e8b	e8c	e8	e8a	e8b	e8c
e9	e9a	e9b	e9c	e9	e9a	e9b	e9c

Examiner number							
e0	e0a	e0b	e0c	e0d	e0e	e0f	e0g
e1	e1a	e1b	e1c	e1d	e1e	e1f	e1g
e2	e2a	e2b	e2c	e2d	e2e	e2f	e2g
e3	e3a	e3b	e3c	e3d	e3e	e3f	e3g
e4	e4a	e4b	e4c	e4d	e4e	e4f	e4g
e5	e5a	e5b	e5c	e5d	e5e	e5f	e5g
e6	e6a	e6b	e6c	e6d	e6e	e6f	e6g
e7	e7a	e7b	e7c	e7d	e7e	e7f	e7g
e8	e8a	e8b	e8c	e8d	e8e	e8f	e8g
e9	e9a	e9b	e9c	e9d	e9e	e9f	e9g

Examiner name:

Examiner signature:

Did you lead at this case? Yes  No

Please record your judgement for this candidate's performance on each of the clinical skills noted below. Any award of an unsatisfactory or borderline mark **MUST** be accompanied by comments.

Counselling recommended

Clinical skill	Satisfactory	Borderline	Unsatisfactory	COMMENTS
<b>Physical Examination (A)</b>	<input type="checkbox"/> Correct Thorough Fluent Systematic Professional technique of palpation, percussion and auscultation of the chest.	<input type="checkbox"/>	<input type="checkbox"/> Incorrect techniques Omits significant or important tests Unsystematic Hesitant and lacking in confidence Unprofessional	
<b>Identifying Physical Signs (B)</b>	<input type="checkbox"/> Identifies correct physical signs Does not find signs that are not present	<input type="checkbox"/>	<input type="checkbox"/> Misses important physical signs Finds signs that are not present	
<b>Differential Diagnosis (D)</b>	<input type="checkbox"/> Constructs a sensible differential diagnosis, including the correct diagnosis	<input type="checkbox"/>	<input type="checkbox"/> Poor differential diagnosis Fails to consider the correct diagnosis	
<b>Clinical Judgement (E)</b>	<input type="checkbox"/> Selects a sensible and appropriate management plan	<input type="checkbox"/>	<input type="checkbox"/> Unfamiliar with correct management plan Selects inappropriate management	
<b>Maintaining Patient Welfare (G)</b>	<input type="checkbox"/> Treats patient respectfully and sensitively and ensures comfort, safety and dignity	<input type="checkbox"/>	<input type="checkbox"/> Causes patient physical or emotional discomfort Jeopardises patient safety	

ROYAL COLLEGES OF PHYSICIANS OF THE UNITED KINGDOM  
MRCP(UK) PACES EXAMINATION - CLINICAL MARKSHEET

STATION FIVE - Brief Clinical Consultation One

CANDIDATE NAME (PLEASE PRINT)

Brief description of the case:

Please use 2B pencil only.

Examination number	Centre number	Scenario number	Examiner number
c01 c02 c03 c04	c01 c02 c03 c04	c01 c02 c03	c01 c02 c03 c04
c11 c12 c13 c14	c11 c12 c13 c14	c11 c12 c13	c11 c12 c13 c14
c21 c22 c23 c24	c21 c22 c23 c24	c21 c22 c23	c21 c22 c23 c24
c31 c32 c33 c34	c31 c32 c33 c34	c31 c32 c33	c31 c32 c33 c34
c41 c42 c43 c44	c41 c42 c43 c44	c41 c42 c43	c41 c42 c43 c44
c51 c52 c53 c54	c51 c52 c53 c54	c51 c52 c53	c51 c52 c53 c54
c61 c62 c63 c64	c61 c62 c63 c64	c61 c62 c63	c61 c62 c63 c64
c71 c72 c73 c74	c71 c72 c73 c74	c71 c72 c73	c71 c72 c73 c74
c81 c82 c83 c84	c81 c82 c83 c84	c81 c82 c83	c81 c82 c83 c84
c91 c92 c93 c94	c91 c92 c93 c94	c91 c92 c93	c91 c92 c93 c94

Examiner name:

Examiner signature:

Did you lead at this case? Yes  No

Please record your judgement for this candidate's performance on each of the clinical skills noted below. Any award of an unsatisfactory or borderline mark **MUST** be accompanied by comments. Counselling recommended

Clinical skill	Satisfactory	Borderline	Unsatisfactory	COMMENTS
<b>Clinical Communication Skills (C)</b>	<input type="checkbox"/> Elicits history relevant to the complaint and explains information to the patient in a Focused Fluent Professional manner	<input type="checkbox"/>	<input type="checkbox"/> Omits important areas of the history Unpractised Unprofessional Poor explanation to the patient	
<b>Physical Examination (A)</b>	<input type="checkbox"/> Correct Appropriate Practised Professional	<input type="checkbox"/>	<input type="checkbox"/> Incorrect techniques Omits significant or important tests Inappropriate focus to examination Hesitant and lacking in confidence Unprofessional	
<b>Clinical Judgement (E)</b>	<input type="checkbox"/> Selects sensible and appropriate investigations and treatment	<input type="checkbox"/>	<input type="checkbox"/> Selects inappropriate investigations or treatment	
<b>Managing Patients' Concerns (F)</b>	<input type="checkbox"/> Detects, acknowledges and attempts to address patient's concerns Listens Empathic	<input type="checkbox"/>	<input type="checkbox"/> Overlooks patients concerns Poor listening Not empathic	
<b>Identifying Physical Signs (B)</b>	<input type="checkbox"/> Identifies correct physical signs Does not find signs that are not present	<input type="checkbox"/>	<input type="checkbox"/> Misses important physical signs Finds signs that are not present	
<b>Differential Diagnosis (D)</b>	<input type="checkbox"/> Constructs a sensible differential diagnosis, including the correct diagnosis	<input type="checkbox"/>	<input type="checkbox"/> Poor differential diagnosis Fails to consider the correct diagnosis	
<b>Maintaining Patient Welfare (G)</b>	<input type="checkbox"/> Treats patient respectfully and sensitively and ensures comfort, safety and dignity	<input type="checkbox"/>	<input type="checkbox"/> Causes patient physical or emotional discomfort Jeopardises patient safety	

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## **8.11 After the MRCP(UK) Part 2 Clinical Examination (PACES)**

### **8.11.1 Results**

The MRCP(UK) Clinical Examining Board has overall responsibility for policy and procedures relating to, and the organisation of, the MRCP(UK) Part 2 Clinical Examination (PACES).

The MRCP(UK) Clinical Examining Board will consider reports from Examiners (and others as necessary) on the delivery of the MRCP(UK) Part 2 Clinical Examination (PACES) at centres within and outside the UK. The MRCP(UK) Clinical Examining Board is responsible for confirming the pass mark and success or failure of candidates in the Examination. Results are released only when the MRCP(UK) Clinical Examining Board is satisfied that the MRCP(UK) Part 2 Clinical Examination (PACES) has been conducted appropriately and in accordance with the procedures of the Royal Colleges of Physicians.

After every Examination, the MRCP(UK) Clinical Examining Board reviews the whole Examination. To do so, it considers statistical analyses of all candidates' performance, together with the comments of the examiners. In the light of these analyses and opinions, the MRCP(UK) Clinical Examining Board:

- agrees the pass mark for the diet
- may make modifications to the structure and format of the MRCP(UK) Part 2 Clinical Examination (PACES) that it deems desirable to ensure the validity of the Examination.

The RCP Code Numbers and Examination Numbers of all candidates, both passes and fails, will be published on the MRCP(UK) website. Candidates will not be identified by name, and are therefore advised to take careful note of both their RCP Code Number and their Examination Number when they receive their admission documents. Candidates may opt out of this facility when making their application and they must also re-confirm this on each occasion they apply for the Examination. Results cannot be collected from the Royal Colleges of Physicians or given over the telephone or by fax or e-mail.

All results are posted by first-class mail within five weeks of the end of the PACES Examination period in the UK.

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### **8.11.3 Fail result**

The MRCP(UK) Part 2 Clinical Examination (PACES) may be failed in the following ways:

- a candidate does not achieve the pass mark;

In addition any candidate who receives the following will have his/her overall performance reviewed by the Clinical Examining Board and may fail the examination irrespective of total test score:

- a mark of less than 28, or two or more unsatisfactory grades, on the skill 'maintaining patient welfare'
- three or more recommendations for counselling

If a candidate fails the MRCP(UK) Part 2 Clinical Examination (PACES) at their first or second attempt they may be deemed by the MRCP(UK) Clinical Examining Board to require more clinical experience before re-attempting PACES, or be recommended for counselling from a nominated Fellow or Member of one of the Royal Colleges. Candidates may request counselling themselves through their College of Entry. Candidates who fail badly may be recommended to defer re-entry for one or more Examinations. The Royal Colleges of Physicians may require evidence of further training before candidates who fail badly are permitted to re-enter the Examination. The Clinical Examining Board may reserve the right to restrict the entry of poorly performing candidates to the next examination diet in the exceptional circumstance of anticipated numbers of applications for PACES exceeding the number of available examination places.

Candidates may apply for the next MRCP(UK) Part 2 Clinical Examination PACES Examination in the next application period once they have received confirmation of their result. Candidates who have not passed MRCP(UK) Part 2 Written can apply for this Examination during the published application period for that Examination and do not need to wait until their result for MRCP(UK) Part 2 Written is confirmed.

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- ***Finally, please note that these changes also supersede the content of the publication MRCP(UK) Part 2 Clinical Examination (PACES) and Clinical Guidelines (2001/2 edition) referred to in paragraph 15 of the 2009 Regulations.***