Candidate Instructions for CSA

Welcome to the MRCGP CSA

Registration:
• A combined non-disclosure and telephone agreement form should have been completed and signed on check-in
• **N.B. You are required to hand in all electronic devices when registering** – if you have not already surrendered your mobile 'phone, etc.: Please do so immediately – it must be signed in before the briefing begins at 09.15
• You should remain in this waiting room at all times once registration is complete until directed to your floor at the end of the briefing

Facilities:
• Water and hot drinks are available
• Toilets are situated in the corridor past the reception area

Timetable:
• **09.15** - Briefing by a senior examination marshal.
• **09.45** - Proceed to examination circuits. Each room has its own individual locker for personal belongings
• **10.00** - CSA starts
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- **N.B. You are required to hand in all electronic devices when registering** – if you have not already surrendered your mobile 'phone, etc.: Please do so immediately – it must be signed in before the briefing begins at 13.20
- You should remain in this waiting room at all times once registration is complete until directed to your floor at the end of the briefing
- At 12.45 a curfew will be called whilst candidates from the morning session leave. During this period all candidates are required to remain in this seminar room until further instruction.

Facilities:
- Water and hot drinks are available
- Toilets are situated in the corridor past the reception area

Timetable:
- **13.20** - Briefing by a senior examination marshal.
- **13.45** - Proceed to examination circuits. Each room has its own individual locker for personal belongings
- **14.00** - CSA starts
The MRCGP Clinical Skills Assessment (CSA)

Welcome and Instructions
Fire alarm

- Stop what you are doing
- Leave all equipment
- Your examiner will escort you to assembly points – using the stairs
- Inform your Floor Marshal if you have a disability that would prevent you using the stairs
- Less able-bodied people will be attended to by a member of College staff
- Do not use lifts
NB: The building fire alarm test is carried out every Monday at 09:00 and should last no longer than approximately 20 seconds.
After the briefing

- You will be shown to your room
- Check GMC number on your door is correct
- Everything apart from diagnostic equipment into the locker inside your room. Place key on hook outside room
- Large cases/bags should have been handed over to Marshal or Floor Manager
- Water is available on each circuit – ask your Floor Marshal/Manager
What will already be on your desk:

- On your desk:
  - Some blank prescriptions [FP10]
  - Whiteboards (rubber and pen) for making notes
  - Possibly additional equipment that may be needed (i.e. items not part of ‘Doctors bag’)
  - iPad in frame set at the patient list screen
  - Patella hammer

- LEAVE all this behind at the end

- Assume all the usual facilities available e.g. hand-outs/referral to members of PHCT
What you are allowed on your desk:

- Standard & Children’s BNF (NB: both must be clear of additional/hand-written notes), stethoscope, ophthalmoscope, auroscope, thermometer, tape measure, peak flow meter (sphygmomanometer not compulsory) – N.B. Replacement equipment **cannot** be provided by the exam centre
- Marshal/Floor Manager may check BNF before the exam starts
- No other books, prompts or paper - if you have any with you please use the locker provided
Electronic Equipment

- Mobile 'phones, tablets, etc., should already have been handed in at reception – if not, hand them in to your Floor Manager as soon as you get to your floor.

- No use of any other electronic devices - this includes oxygen saturation monitors, digital pens, digital watches, and clocks - a digital timer is clearly visible on the wall in front of your desk and will automatically count up to 10 minutes for every case.
Logging in to your iPad

- When you enter your room, you will find that your iPad is already logged in and displaying your patient list for the day.

- Each iPad displays the patient list that is specific to the room it is in - i.e. they will be in the order that you will see them.
Logging in to your iPad

• Should you accidentally log out of your iPad, re-enter the app (if necessary) and log in using your GMC number:
View your patient list

- Tap on the appropriate bar to view case notes
Reading your case notes

Materials and instructions to candidate

In this station...
You are a Doctor in surgery

Case notes for the patient:
Name: Mabel Daventry.
Age: xx years
Address: House, Street

Social and Family History:
Information

Past medical history:
xx yrs ago Condition
xx yrs ago Condition
xx yrs ago Illness
x months ago BP reading

Current medication:
Tablets xxmg
Tablets xxmg
Reading your case notes

- You can look at any set of case notes at any time.
- Some may be longer than a page – there will be a prompt at the bottom to ‘scroll down’.
- At the end of each case ‘mark the case as complete’ by tapping the button at the bottom left-hand corner of the patient notes screen.
Reading your case notes

- iPad will automatically return to the patient list where the cases you have marked as complete will be highlighted in green. The next ‘unhighlighted’ case is therefore the next patient to be seen:
Reading your case notes

- If you go back to the patient notes that have just been ‘marked as complete’ a message at the top of the screen will inform you that you are on a case that has already been ‘marked as complete’:

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The notes you are viewing relate to case you marked as complete.
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- If you are pre-reading a later case and mark it as complete accidentally, this can be cleared with the same button as before:

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Mark case as not complete
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Marshals

- All experienced examiners and GPs
- Each floor has a marshal and member of College staff as Floor Manager
- They are there to help you!
- Tell them if you have a problem – do not wait until you get home
Examiners

- Examine one case only
- Unobtrusive
- They will attempt to be out of your eye line
- Marking during and afterwards
- No marks are submitted until after the case has finished
- Although we try to ensure that candidates are not examined by examiners from their locality, it is possible that you may recognise someone you know.

- Examiners are trained to make judgements solely on the basis of what they actually observe and hear during each consultation.
Role Players

- Professional, trained role players
- Play same case all day
- Well trained, rehearsed and standardised
- No assessment role
- Treat with courtesy, examine with care
- RPs do not deliberately conceal information
- Age/ethnicity matched to their case; however, occasional need to substitute a RP – in case of this event, you should always follow details in the case notes
Time allocation

- Cases last 10 minutes
- Sounder marks the start & finish of each case
  - Red: 📣
  - Blue/Purple: 📣
- Normally 2 minute break between cases
- After 7 cases there will be a 15 minute break for refreshment - please wait in your rooms to be collected
- You will be escorted to the toilet if required
- Please do not discuss cases during the break
- There will be 6 cases after the break
Format & Case content

- 13 simulated patients
- Each accompanied by an examiner
- Observers may be present for Quality Assurance or piloting purposes
- Typical cases from across RCGP Curriculum
- Manage the cases as you would in general practice, including prescribing, referring, etc.
- A clinical examination may be required …
Clinical Examinations

- Ask to examine the patient:
  - The patient may agree for you to proceed
  - You may be offered a model to examine
  - You may be given written, photographic or verbal clinical findings
- N.B. No findings/results, etc. will be displayed on the candidate iPad
- Your choice of examination will be marked
- Your examination technique will be marked
- The examiner may move to observe an examination
What is it like?

- A day in General Practice but
  - No computer
  - No interruptions
  - No need to write up the notes
  - You may be asked to go to another room for a home visit station. If this is the case, a Marshal will collect you from your room at the appropriate time; equipment will be provided in the home visit room
Telephone Cases

- Each room has a telephone on the desk
- You will call the patient from your room (press ‘1’)
  - If you terminate the call, you can reconnect by pressing ‘1’ again. The patient will still be ready to receive your call.
- Start the conversation as you would normally, introducing yourself by name
- Do not ring until the timer begins
- Marshal will stand by patient/examiner room to ensure call has connected successfully
- If not on telephone case, do not touch the telephone
Notes, etc.

- If a prescription is written, give it to the role player. It may be marked. There are cases that require you to write or give verbal instructions, re: a prescription.
  
  >>> Fit notes to be verbalised (no paper hardcopy).

- Apart from the above, please use the whiteboard if you make notes - not paper. Do not write on anything other than the whiteboard. No notes (paper or other) to be taken in to or out of the room.
After the case/at the end of the exam

- If you finish early, do not worry. Not all cases take 10 minutes. However, you can call a patient back in (so long as it is still within the original 10 minutes)
- Say *goodbye* and await the next case
- After the last case, do not leave your room or access your locker until a staff member has entered to collect all paperwork and your coloured lanyard
- Log out of your iPad – ‘Log out’ button in the top right-hand corner of the screen
- Your mobile ’phone will also be returned – once all this is complete you will be allowed to leave – but not before
- If you are meeting friends/colleagues at the end of your exam – please meet outside the building
Rules & Regulations

- Please stay in your room at all times until collected. Do not leave the circuits without the company of a member of staff.
- Do not remove any paperwork from your room.
- Do not discuss any of the cases or pass on cases to other people.
  - N.B. Either of these actions could result in disqualification from the exam.
- This is all stated in the Candidates Code of Conduct.
- Please ensure you are wearing your coloured lanyard at all times.
CSA results are represented as a table with a brief description of each case.

<table>
<thead>
<tr>
<th>Case</th>
<th>Domain scores</th>
<th>Feedback statements</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DG</td>
<td>CM</td>
</tr>
<tr>
<td>Middle aged male with eye problems</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Middle aged male with mental health problem</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Mother concerned re: genetic disorder in daughter</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Young adult female with a metabolic problem</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Adolescent male with a breathing problem</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Middle aged female with an injury at work</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Young adult female with digestive problems</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Middle aged male with a head pain</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Adolescent female with women's health problems</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Elderly male with lower limb problems</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Young adult male with men's health problems</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Young adult male with musculoskeletal pains</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Young adult female with upper limb problems</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Total Domain Scores</td>
<td>20</td>
<td>21</td>
</tr>
</tbody>
</table>
Questions?
Good luck!