Preparing to take the MRCGP Applied Knowledge Test (AKT) A concise guide for GP Registrars

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This guide is compiled from multiple sources and the views of many GP registrars, Trainers, GP educationalists and MRCGP examiners alike. It is freely available and specifically intended to help with AKT preparation. We do not wish to repeat information that is available elsewhere within the MRCGP website but aim to add clarity and signpost appropriate resources.

When should I take the Applied Knowledge Test?

Start thinking in broad planning terms approximately **six** months in advance. We are all different in our confidence, learning styles, preparation, organisational skills and personal situations.

However, it seems clear that once you have completed a GP placement is a good time to sit the AKT. Pass rates for first-time ST2 takers in the April sitting of the exam have traditionally been as good or better than first-time ST3 takers in the October sitting.

A pass in ST2 means one large assessment "hoop" is removed from the busy ST3 year. Many GP Registrars who defer a sitting into ST3 find that the pressure of taking SCA and AKT and completing WPBA is both distracting and detrimental. There is so much else to learn about being a GP - apart from the exam! Equally a prolonged gap between AKT preparation and taking the SCA, which requires an up to date knowledge base, is best avoided. A balance needs to be struck.

If you are uncertain when is the right time for you, please discuss your readiness to sit with your Educational Supervisor (ES) or Training Programme Director (TPD).

I am eligible and know when I want to take the AKT, what next?

Be organised and register early. Latest reasonable adjustment and application dates for the AKT are on the website.

You need to look carefully at the AKT sections of our website and allow **at least three** months of efficient exam preparation with protected time for revision. Planning last minute study leave to cover the broad GP Curriculum is not recommended. Know your own learning style and reflect on previous exam successes/problems.

If this is not your first AKT sitting, review with your ES how you prepared previously, what changes to preparation you intend to make and whether you need any additional support. Have you undergone screening for a specific learning difference such as dyslexia? Have you looked at our 'Resitting the AKT' document?

General practice is such a diverse subject, where do I start?

The GP Curriculum is very broad and the AKT samples across it. Undertake a needs assessment and concentrate on your identified areas of need as opposed to reinforcing your strengths! Review and repeat needs assessments on a regular basis as your knowledge and experience develop.

Prioritise your personal AKT development plan based on the results of any of:

- RCGP Self Test
- RCGP eLearning
- Patient Unmet Needs + Doctor Educational Needs
- Trainer feedback
- RCGP Curriculum*
- Results from on-line commercial exam preparation websites

*How to use the RCGP Curriculum

- Do not be put off by the lengthy list of topics!
- Read the <u>super condensed guides</u>
- Use the Curriculum Topic Guides as needs assessment tools
- Focus on the Knowledge and Skills guide within each Topic Guide
- Consider your own training pathway to date. What areas are you likely to need to concentrate on? For example, have you done a paediatric rotation? How are your primary care family planning, ophthalmology, ENT and dermatology skills?
- Evidence based practice, research and sharing knowledge is a professional curriculum topic. How much data interpretation and 'statistics' teaching did you have at your medical school? 10% of the AKT focuses around this area.

- How confident are you with NHS primary care administration and governance issues?
- The following statement applies particularly for candidates who did not train in the UK and who have therefore had less UK-based clinical and primary care NHS cultural exposure, but we recommend that most GP registrars specifically review:

Organisational – including administrative, statutory, ethical and regulatory frameworks

Evidence interpretation – including research, statistics and epidemiology. This requires an understanding of the principles of audit, the terms used in evidence-based clinical practice, the critical appraisal skills needed to interpret research data and the application of evidence-based clinical practice.

Which resources are most relevant?

RCGP resources include the following and more:

AKT Feedback Reports

- The examiners produce <u>specific feedback after every exam</u> about areas that were not answered well. What themes can you identify that seem most relevant to you?
- o There is also a five-year summary document to help you.

How to prepare for the AKT

- MRCGP candidate presentation
- What can Trainers do to help
- Preparing for the AKT video
- Data interpretation in the AKT worksheet
- Data interpretation topics
- Primary care and organisation management tips
- Example AKT questions
- Pearson practice tutorial
- Resitting the AKT

RCGP Self Test

- Free to all GP Registrars via http://elearning.rcgp.org.uk
 with direct answer to AKT-like questions including answer justifications to all.
- These can be excellent preparation for the AKT provided they are used for a gap analysis and deep learning rather than relying on superficial repetition of multiple questions.

RCGP InnovAiT

RCGP Faculty AKT preparation courses

RCGP One-day Essentials courses

RCGP eLearning

The RCGP eLEarning Essential Knoweldge Challenges are written in a style very similar to the AKT, althought although the EKC questions are very specifically pinned referring to one single piece of guidancethe material in the related module (unlike the AKT) RCGP Essential Knowledge Updates and Challenges

RCGP eLibrary

UK Deaneries/LETBs

Find out what support, resources, peer learning groups and courses your local Deanery provides and what is available through your VTS Programme Directors.

Many Deaneries and VTS websites have excellent sections on the exam with 'Top Tips' and resources which previous trainees have found useful.

There are also practical exam revision planning guides, for example the <u>Wessex</u> <u>Exam Game Plan</u>.

Patients, GP Registrars, Trainers and GP Educationalists

Your Trainer and training practice are excellent resources. Have you reviewed consultations with your trainer to specifically examine the evidence base for what was/was not done?

Why not complete a few example questions together and articulate your thinking out loud to compare with your Trainers approach to the same question? Find a colleague who has been recently successful and see if you can tailor any of their preparation to what best suits you.

The best preparation is from your day-to-day work at your practice and with your VTS peers. Make sure you record and action any identified educational needs promptly and efficiently.

All AKT examiners are working GPs, and the questions are based on workplace encounters.

Ask your Trainer about the sort of paperwork and graphs/data interpretation they receive daily, which you may not otherwise see, for example:

- o practice performance information from the local primary care organisation
- insurance reports
- Department of Work and Pensions reports

Review with your Trainer your decision making as regards:

- acute and repeat prescriptions
- o filing of investigations
- o answering electronic tasks from staff

Non-RCGP resources

Essential resources that should be regarded as 'mandatory' include the BNF, BNFC and GMC Good Medical Practice (see recommended reading).

There are many commercial resources specifically created for AKT preparation and all can be very helpful to identify and address your learning needs. Many on-line commercial organisations have hyperlinks to the related evidence, so use these links to read around a topic in more detail, rather than just trying to recall the answer to an individual question. Discuss with other GP Registrars and GP Educators which sites they have currently found most relevant.

We would caution against the over-reliance of repeatedly answering questions from one resource alone without looking at other resources.

Historically some GP Registrars have reported that the style and difficulty of online/textbook questions can be very different from that of the exam. Avoid relying on MRCP style revision aids. The AKT examiners do **not** write questions for commercial organisations.

Make use of Artificial Intelligence to create for yourself free practice questions on subject matters that you find more difficult.

Whichever resource you use, ensure you take some questions under 'exam conditions' i.e. within the same time limitations as the live exam.

Recommended reading

There is a daunting variety available so chose any that help address your unmet learning needs, just don't buy too many!

Each year the following generic list proves reliable but is not exhaustive. This does not mean knowing all the content, but does mean prioritising your learning and identifying the most relevant from any of the following (listed in alphabetical order):

- Being a General Practitioner (RCGP Curriculum)
- o BNF first few chapters essential reading, plus the main drug classes
- British Journal of General Practice
- British Medical Journal
- o DVLA At a glance guide to the current medical standards of fitness to drive
- GMC Good Medical Practice
- InnoVAIT journal
- Medical defence organisations' educational resources
- NICE Clinical Knowledge Summaries
- NICE guidance/pathways
- Oxford Handbook of General Practice
- SIGN guidance

Clearly, there is a lot to do and this needs dedicated time.

It can help significantly to share the workload with your colleagues, each summarising the **relevant primary-care take home messages** from a different guideline. There is no need to read every page of every national guidance in detail.

Revision timetables and study groups can be very effective. Efficient, organised virtual online meetings with colleagues can be both productive and memorable.

On the day

We promised not to repeat information available elsewhere, but please bear with us as at **every** exam sitting to date there has been **more than** one trainee turned away because of incorrect ID or turning up late.

We cannot over-emphasise this enough, so do ensure your photo ID matches your registration details including your professional name. If in any doubt, contact the Exam department well before the day of your exam to make sure there will be no problems on the day.

Be clear about how to get to your allocated Pearson test centre and allow ample travel time. Even if you are only a few minutes late, due to the quarantine regulations, you will not be allowed to take the exam.

Specific exam technique

- This is a timed exam with no scheduled breaks. The timing permitted reflects an acknowledgement that you can take a short toilet/refreshment break at a point in the exam that suits you
- So, with limited time per question, aim to initially answer using the cover-test*
- Quickly flag to review and move on if uncertain
- However uncertain you are, it is good exam technique to choose the options that feels most right to you at that point in time rather than omitting to answer
- Trust your intuition, which is subconsciously informed by multiple clinical encounters and learning memories
- Be very strict, especially early on, as spending too much time on a difficult or lengthy question potentially risks you not answering several simple questions at the end
- Watch the clock throughout and establish in advance how many questions you should have covered after 60, 120 and 150 minutes. This way you should not run out of time.
- Ensure to finish with enough time to review any flagged questions. Re-read them slowly. Change your answer if you mis-read the question first time, and be clear with yourself why you are changing your first answer for any other reason
- Remember there is no negative marking
- The exam software will automatically ask you to review any flagged or unanswered questions before finishing the test. You can use any spare time to review as many other questions as you choose in the time available

*The 'cover test' is when you hide the listed answer options from your initial view and work out your answer from the question alone. If your answer is listed within the five options then it is **highly likely** to be correct. Don't then let the other distracters distract you!

Single Best Answers

- Often use a clinical scenario
- Only one answer is correct
- You must choose the most appropriate, typically from five options
- You may feel that your ideal answer is not included in the available options, but you still need to select the most appropriate option from the list you have been given!
- Other options may be plausible but not "most likely"
- "According to national guidelines" means "recommended by nationally accepted guidelines or the BNF, not local practice."
- · Best practice may be to take no action!

Extended matching questions

- These questions have a list of possible options
- There will usually be 2 scenarios with the same list of answer options
- Choose the **most** appropriate option that **best** matches each given scenario
- Each option can be used once, more than once, or not at all when answering the two, paired questions

Free-text questions

- These questions have no listed options
- You will need to type a short, accurate answer in the required textbox
- These will almost always be simple numerical calculations
- · There is a calculator available

In summary

Remember, you do have to be organised, plan ahead and work hard to obtain the successful result you deserve.

Although the headline pass rates appear daunting, over 95% of candidates will obtain a pass within the permitted maximum number of attempts.

You need to take AKT preparation seriously, but we hope you feel well informed – if not please speak to a GP Educator in your locality.

If assessments can drive learning, patient care will benefit from all your hard work...

We wish you success.

The RCGP AKT group November 2024