



**Clinical & Procedural Skills
for MRCS OSCE Course**

Feedback - April 2018

Clinical & Procedural Skills for MRCS OSCE Course

This intensive, one-day revision course covered the clinical and procedural skills components of the MRCS Part B exam.

In the Intercollegiate MRCS OSCE Examination, the 'Clinical and Procedural Skills' component makes up approximately 15-20% of the total mark. This element of the exam tests the candidate's capability to apply basic science and clinical knowledge in a practical context. In addition, it examines the candidate's ability to perform practical tasks which are related to surgery and which require: manual dexterity; hand-eye coordination; and visual and spatial awareness. It also tests aspects including capacity, consent, theatre safety, the WHO checklist and general principles of safe surgery.

This intensive, practical skills course took candidates through every procedure that has been examined in recent years. The candidates were given the opportunity to practice in realistic exam conditions and were provided with structured feedback to further their development. Moreover, following the event the candidates were presented with their scores and were able to discuss specific practical aspects with both examiners and recent successful candidates.



Course Information

Course date:	11th April 2018
Venue:	School of Biosciences, Cardiff University
Attendance:	20 Delegates
Aimed at:	Delegates intending to take the Royal College of Surgeons Part B Examination.
Course fee:	£185.00

Highlights:

- Practical course with a high tutor-to-participant ratio.
- Hands-on sessions with scenarios simulating the real exam, as well as individual feedback and scores.

Topics included:

- Surgical scrubbing.
- Safe use of local anaesthesia.
- Suturing techniques.
- Knot tying at depth.
- Surgical excision of a cutaneous lesion.
- Urinary catheterisation.
- Consent and capacity.
- Cannulation and venepuncture of high-risk patients.
- Epidural technique.
- Lumbar puncture.
- Organising a theatre list.
- Appropriate radiology requesting.
- Discharge letter.
- Transfer documentation.
- Performing an FNA.
- Insertion of a chest drain.

Course Programme

0840 - 0900	Registration
0900 - 0910	Introduction to the Course and Structure of the Exam
0910 - 0945	Theatre Safety Principles, Gowning and Gloving; Handling Instruments and Essential Concepts in Suturing Techniques
1000 - 1100	Group Rotations - I (Candidate groupings will be informed at the start) Chest drain Insertion, Male urinary catheterisation, Venepuncture of high risk patient, Knot tying, Suturing, Surgical excision of a Naevus, Debridement of a contaminated wound, Fine Needle Aspiration Cytology, Epidural anaesthesia, Lumbar puncture, Arterial Blood Gas cannulation and Interpretation of ABG results
1100 - 1115	Break for Refreshments
1115 - 1215	Group Rotations - II (Candidate groupings will be informed at the start) Chest drain Insertion, Male urinary catheterisation, Venepuncture of high risk patient, Knot tying, Suturing, Surgical excision of a Naevus, Debridement of a contaminated wound, Fine Needle Aspiration Cytology, Epidural anaesthesia, Lumbar puncture, Arterial Blood Gas cannulation and Interpretation of ABG results
1215 - 1300	Lunch
1310 - 1410	Group Rotations - III (Candidate groupings will be informed at the start) Chest drain Insertion, Male urinary catheterisation, Venepuncture of high risk patient, Knot tying, Suturing, Surgical excision of a Naevus, Debridement of a contaminated wound, Fine Needle Aspiration Cytology, Epidural anaesthesia, Lumbar puncture, Arterial Blood Gas cannulation and Interpretation of ABG results
1410 - 1510	Group Rotations IV (Candidates will be informed of the groupings at the start of the course) Chest drain Insertion, Male urinary catheterisation, Venepuncture of high risk patient, Knot tying, Suturing, Surgical excision of a Naevus, Debridement of a contaminated wound, Fine Needle Aspiration Cytology, Epidural anaesthesia, Lumbar puncture, Arterial Blood Gas cannulation and Interpretation of ABG results
1510 - 1530	Break for Refreshments
1530 - 1730	Interactive Discussions: Pre-operative Assessment, Post-operative Management, Antibiotics, Theatre List Prioritisation, Transfer Documentation, Wound Healing, Reconstruction, Local Anaesthesia, Sutures, Tourniquet and Diathermy
1730 - 1745	Feedback and Closure

Faculty

Tutors

Ms Charlotte Leaman, BSc, MBBCh, MRCS

Speciality Registrar in General Surgery
All Wales Deanery

Miss Eshaa Sharma, MBBS, MRCS (Eng)

Speciality Trainee in Trauma and Orthopaedics
Ashford and St Peter's NHS Trust

Professor Stuart Enoch, MBBS, MRCSEd, MRCS (Eng), PGCert (Med Sci), PhD

Consultant in Surgical Studies
Doctors Academy

Mr Tom Combellack, MBBCh, MRCS

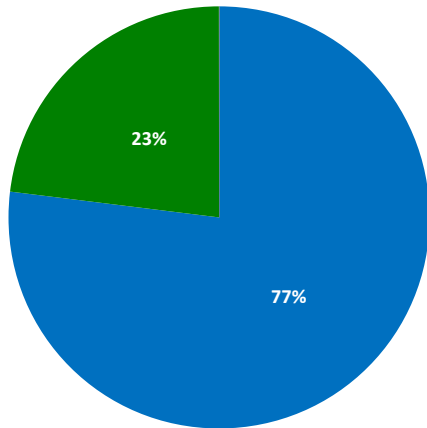
Speciality Registrar in Cardiothoracic Surgery
University Hospital of Wales, Cardiff

Mr Umair Aslam, MRCS

Senior Registrar in Cardiothoracic Surgery
Morriston Hospital, Swansea

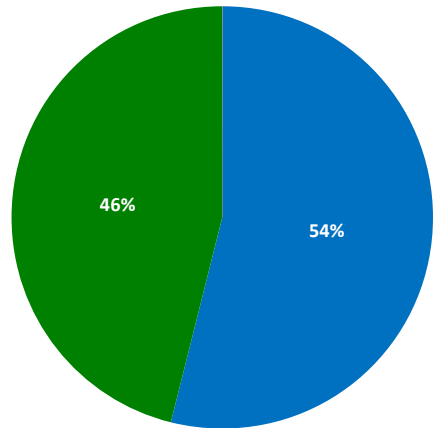
Overall Teaching Feedback

How was the clarity of the demonstrations?



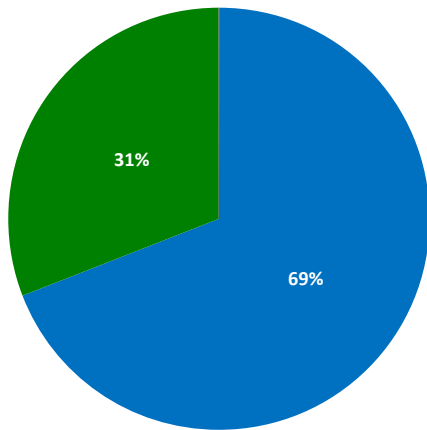
■ Excellent ■ Verygood ■ Neutral ■ Fair ■ Poor

How would you rate the general academic standard of the demonstrators?



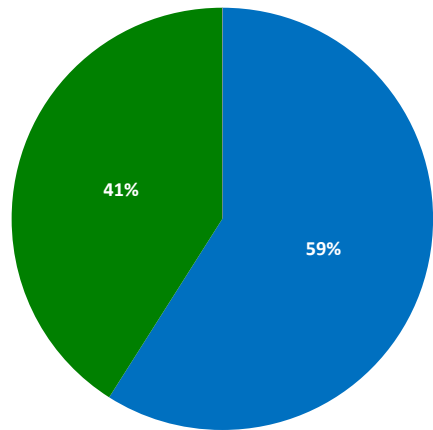
■ Excellent ■ Verygood ■ Neutral ■ Fair ■ Poor

How do you rate the relevance of the course to your exam?



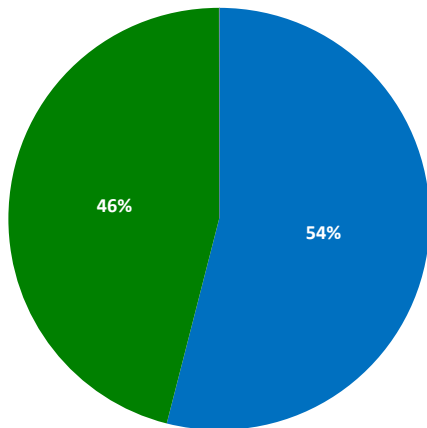
■ Excellent ■ Verygood ■ Neutral ■ Fair ■ Poor

Did you get sufficient chance to practice the stations?



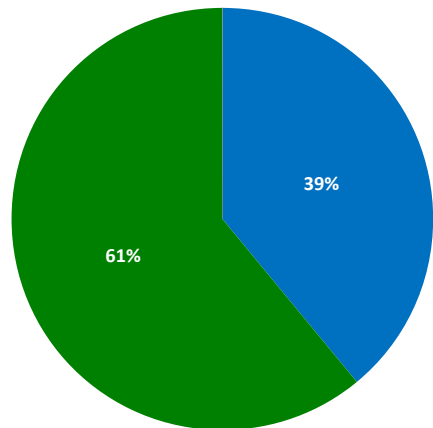
■ Yes, always ■ Yes, mostly ■ Neutral ■ Not much ■ Not at all

Introduction to the Course and Structure of the Exam



■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

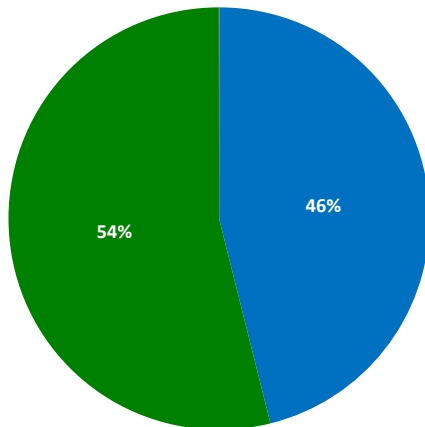
Sutures, Needles, Gowning and Gloving



■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

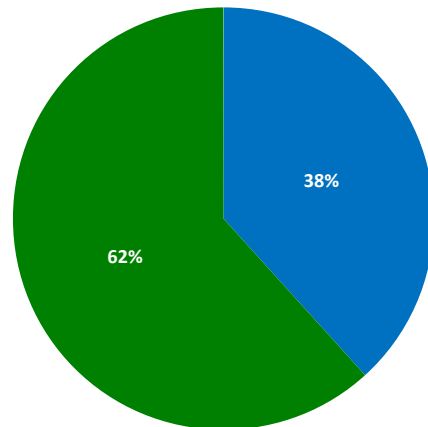
Overall Teaching Feedback

Chest Drain Insertion



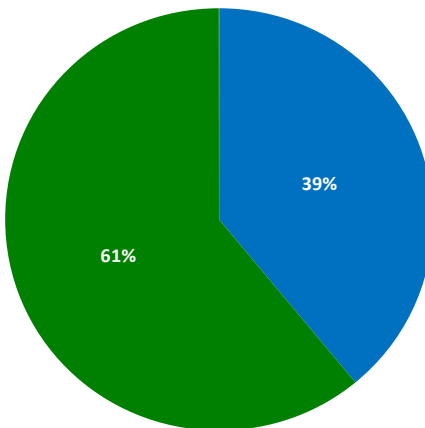
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Male Urinary Catheterisation



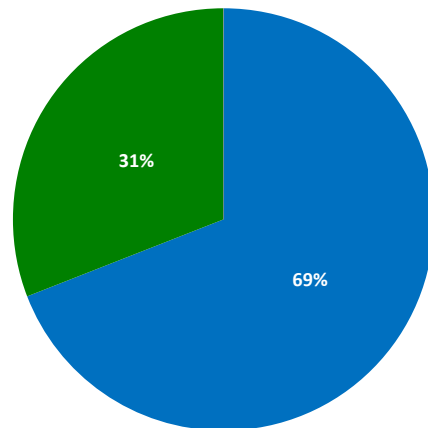
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Venepuncture of High Risk Patient



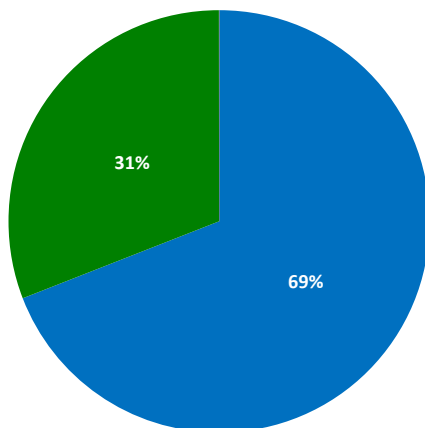
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Knot Tying



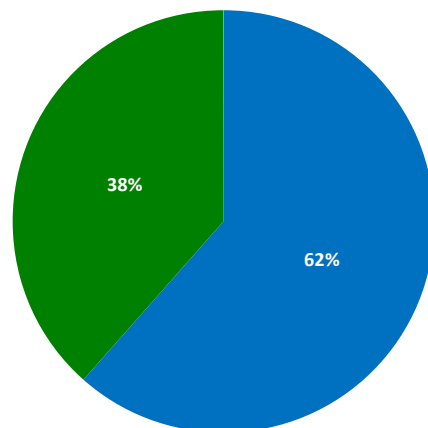
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Suturing



■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

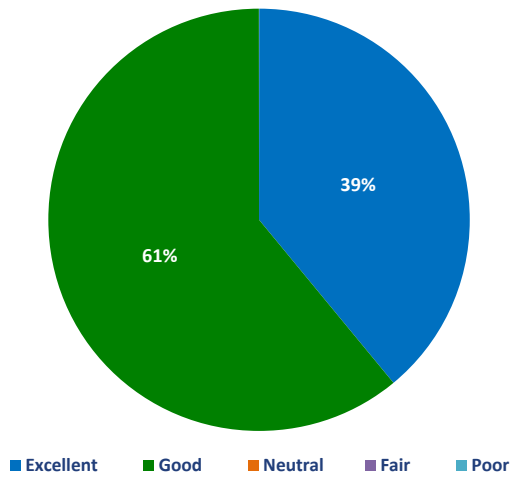
Surgical Excision of a Naevus



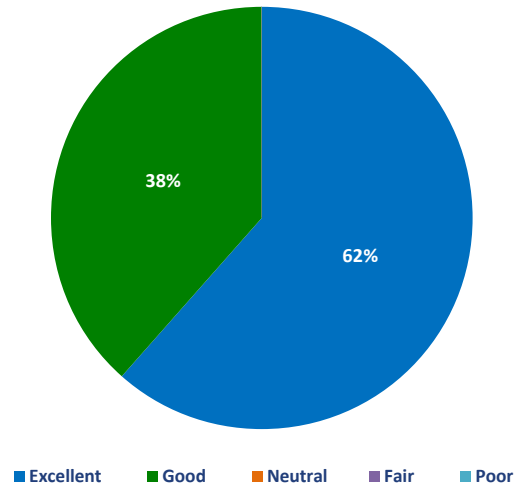
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Overall Teaching Feedback

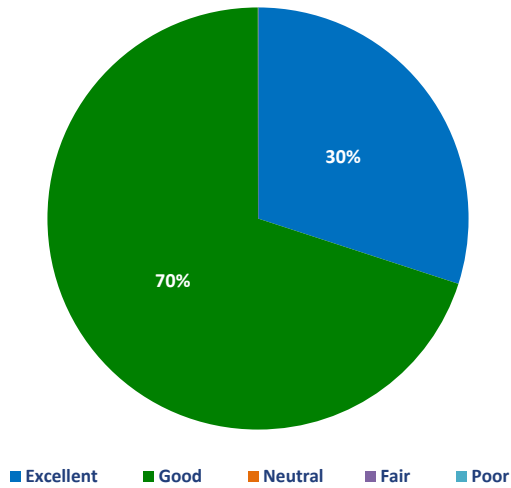
Debridement of a Contaminated Wound



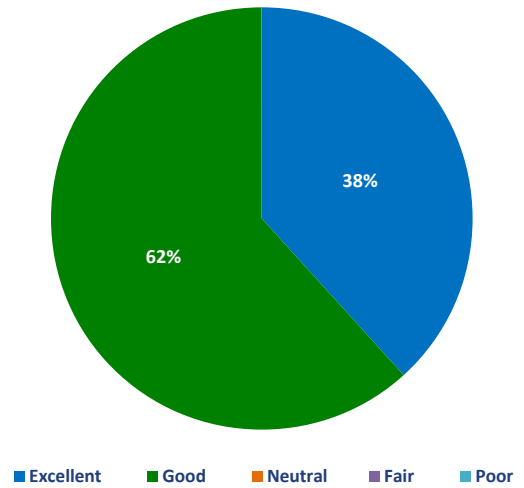
Fine Needle Aspiration Cytology



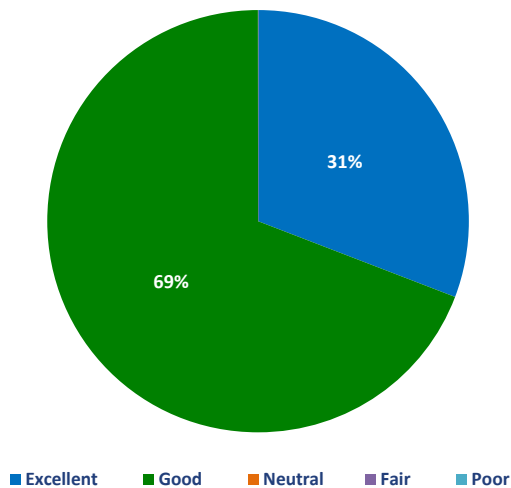
Lumbar Puncture (layers, indications), CSF Production and Drainage, Hydrocephalus



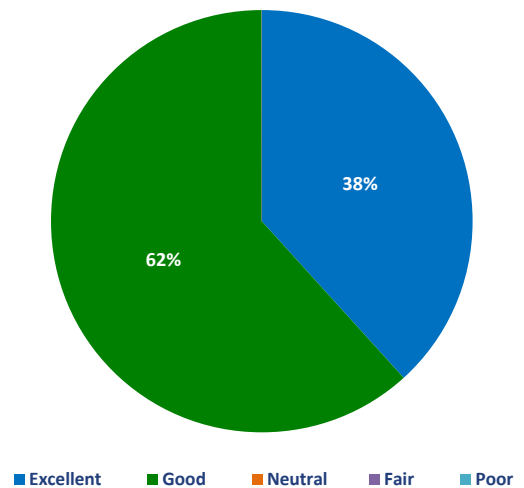
Pre-operative Assessment



Enhanced Recovery After Surgery

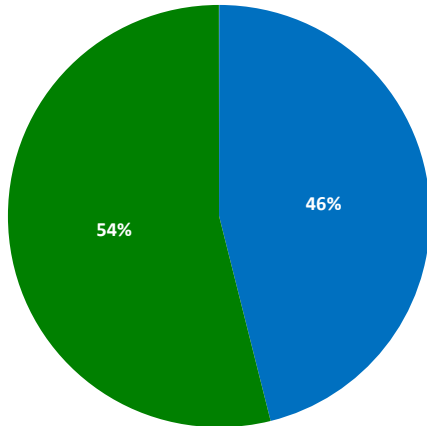


Drugs in the Peri-Operative Period



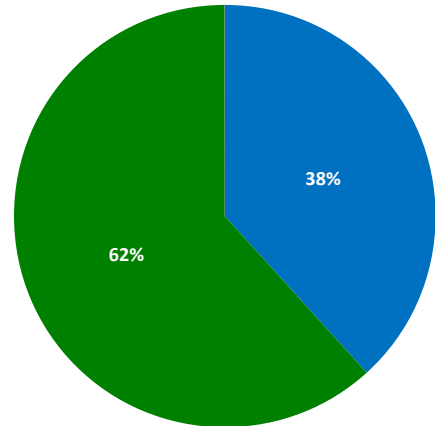
Overall Teaching Feedback

Theatre List Prioritisation



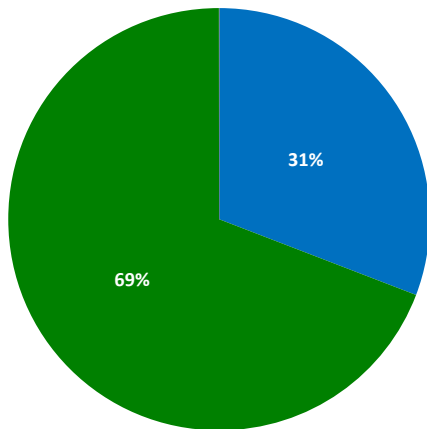
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Wound Healing



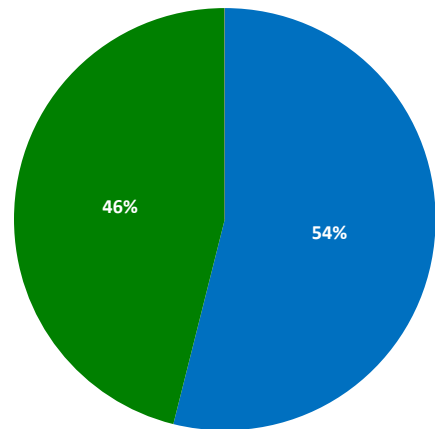
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Reconstruction



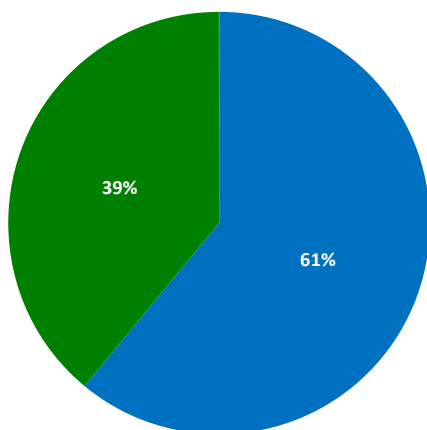
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Local Anaesthesia



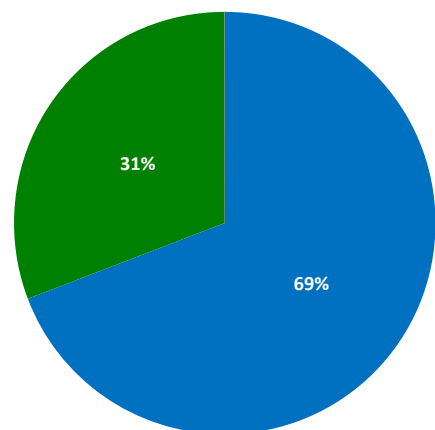
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Sutures



■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

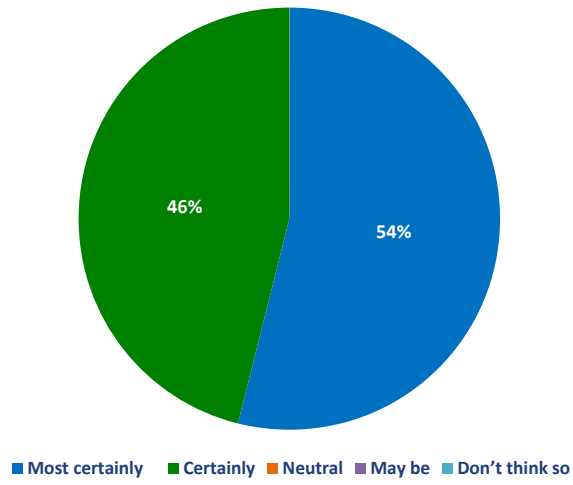
Would you recommend this course to a friend?



■ Most certainly ■ Certainly ■ Neutral ■ May be ■ Don't think so

Overall Teaching Feedback

Do you think that this course provided good value for money?



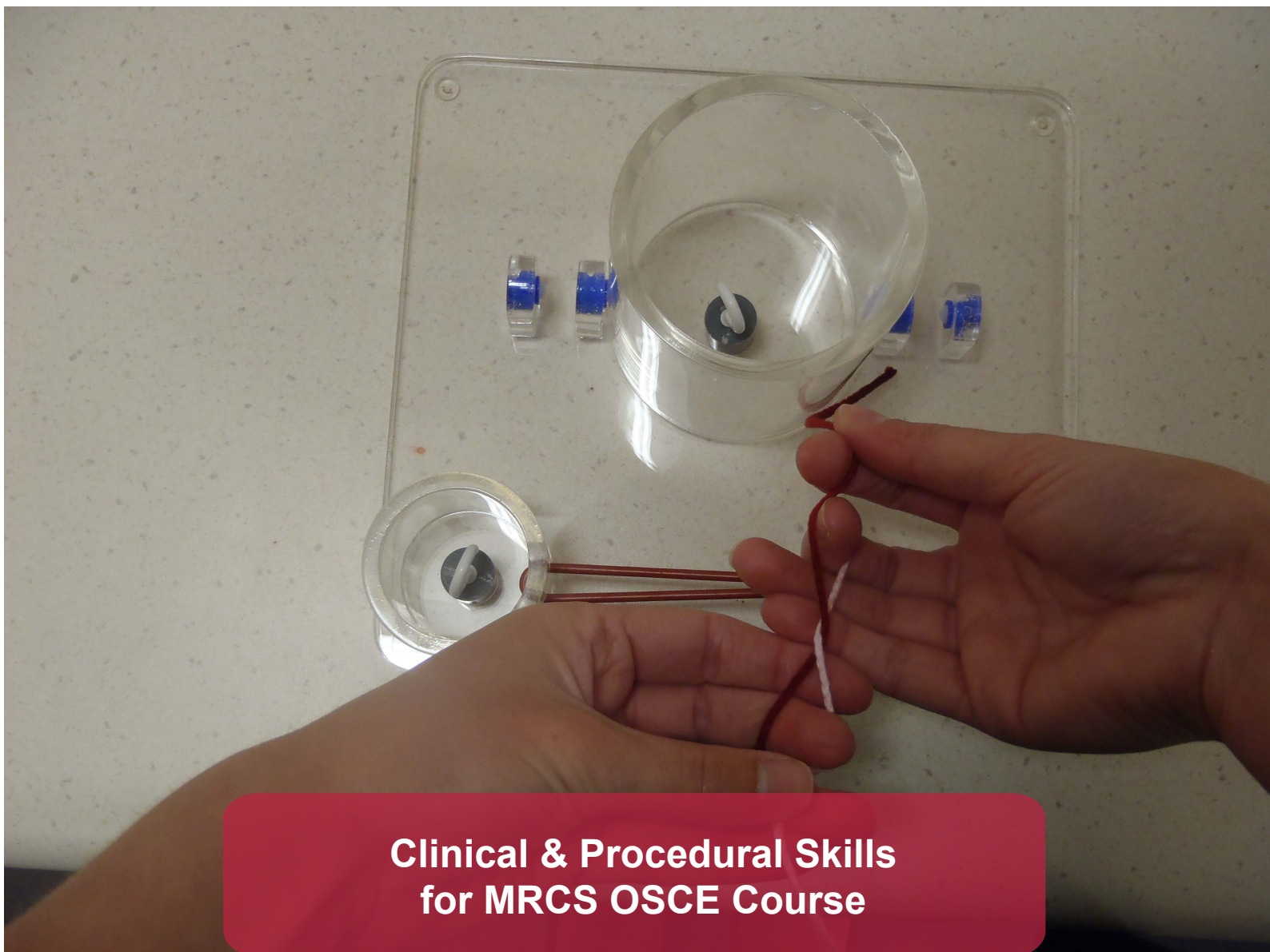
Individual Comments

Very good.

AA
Addenbrooke's Hospital, Cambridge

Very good.

DN
Peebles Hospital. British Virgin Island



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