



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

**Feedback - January 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

<b>Course date:</b>	<b>24<sup>th</sup> January 2018</b>
<b>Venue:</b>	<b>School of Biosciences, Cardiff University</b>
<b>Attendance:</b>	<b>30 Delegates</b>
<b>Aimed at:</b>	<b>Delegates intending to take the Royal College of Surgeons Part B Examination.</b>
<b>Course fee:</b>	<b>£185.00</b>

### 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 - 1130	<b>Group Rotations - I (Candidate groupings will be informed at the start)</b> 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
<b>1130 - 1145</b>	<b>Break for Refreshments</b>
1150 - 1320	<b>Group Rotations - II (Candidate groupings will be informed at the start)</b> 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
<b>1320 - 1400</b>	<b>Lunch</b>
1410 - 1540	<b>Group Rotations - III (Candidate groupings will be informed at the start)</b> 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
<b>1540 - 1600</b>	<b>Break for Refreshments</b>
1600 - 1730	<b>Interactive Discussions:</b> 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

**Mr Umair Aslam, MRCS**

Senior Registrar in Cardiothoracic Surgery  
Morrison Hospital, Swansea

**Mr Vishal Kumar, MBBS, MRCS**

Speciality Registrar in Trauma and Orthopaedics  
Glan Clwyd Hospital

**Mr Wahid Abdul, BSc(Hons), MBBCh, MRCS(Eng)**

Speciality Registrar in Trauma and Orthopaedics  
Nevill Hall Hospital, Abergavenny

### Trainee Tutors

**Mr Adam Jones, MBChB, MRCS**

Speciality Trainee in Urological Surgery  
George Eliot Hospital NHS Trust, Warwickshire

**Mr James Olivier, BMBS, BMedSci, MRCS**

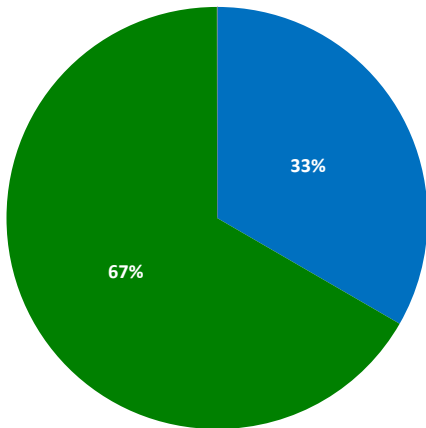
Speciality Trainee in General Surgery  
Musgrove Park Hospital, Taunton

**Mr Jack Pearce, MBChB, MRCS**

Speciality Trainee in Trauma and Orthopaedics  
Morrison Hospital, Swansea

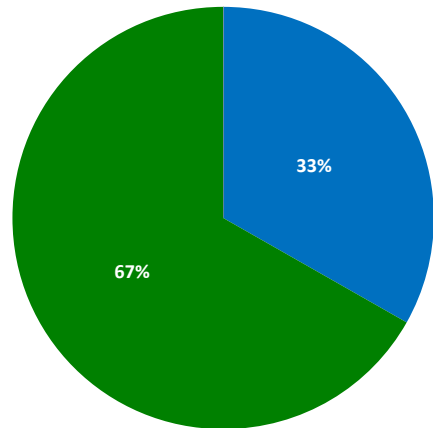
# Overall Teaching Feedback

How was the clarity of the demonstrations?



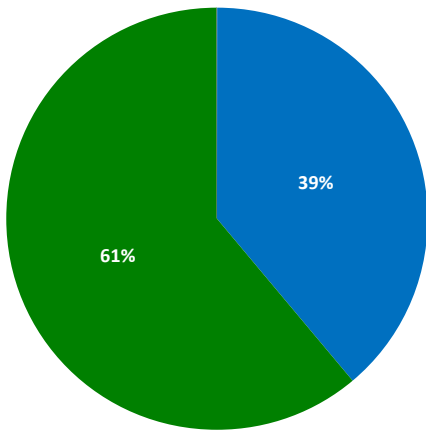
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

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



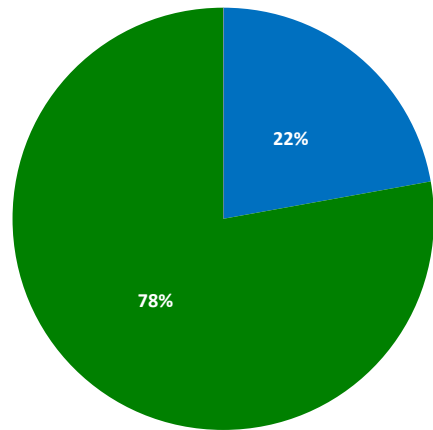
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

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



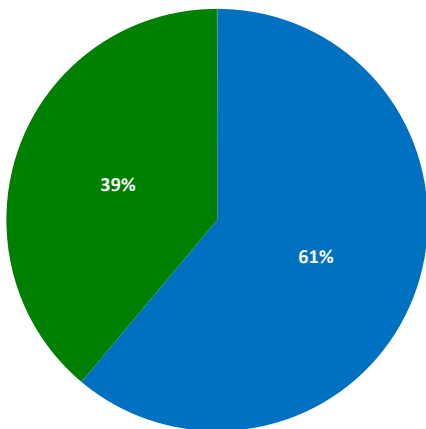
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Did you get sufficient chance to practice the stations?



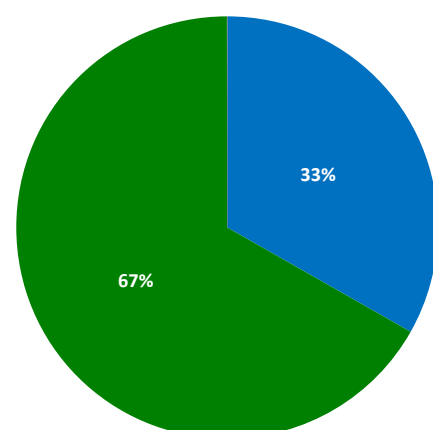
■ Yes, always ■ Yes, mostly ■ Neutral ■ Not much ■ Not at all

Introduction to the Course and Structure of the Exam



■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

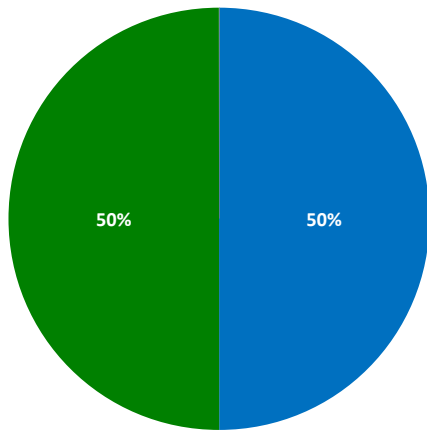
Theatre Safety Principles, Gowning and Glowing Handling Instruments and Essential Concepts in Suturing Techniques



■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

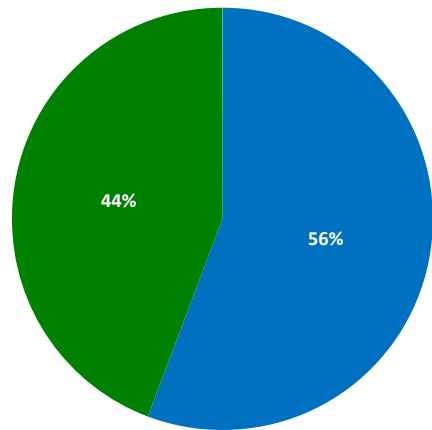
# Overall Teaching Feedback

Chest Drain Insertion



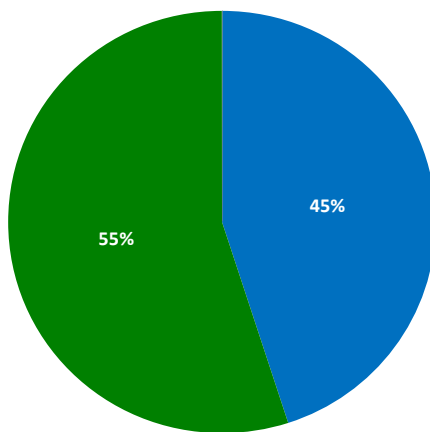
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Male Urinary Catheterisation



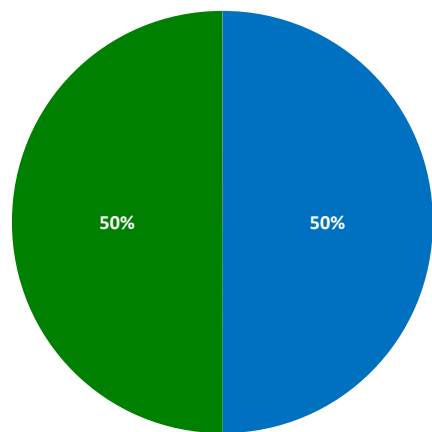
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Venepuncture of High Risk Patient



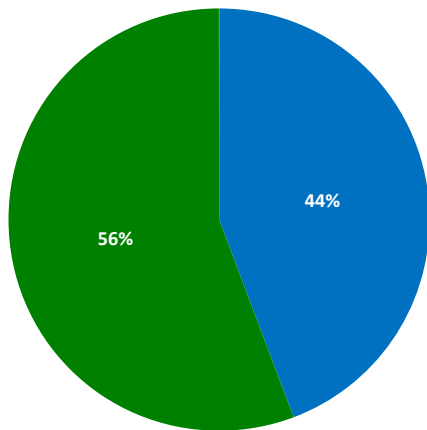
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Knot Tying



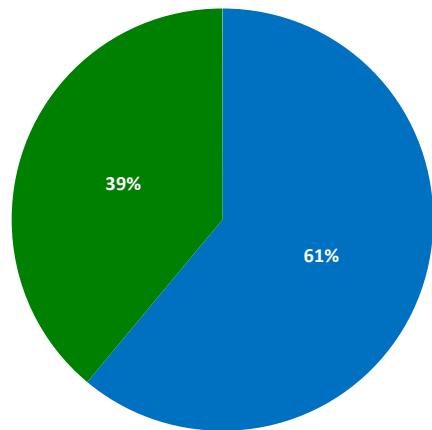
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Suturing



■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

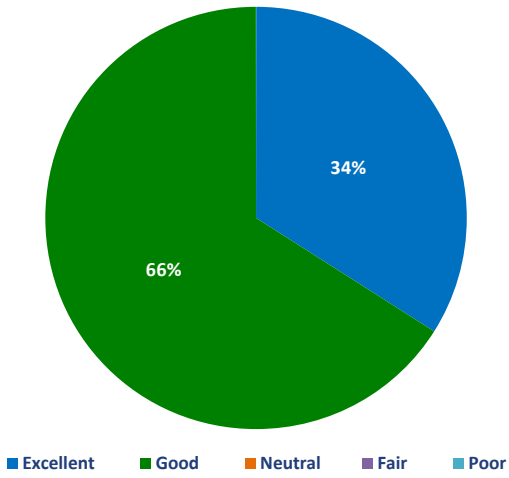
Surgical Excision of a Naevus



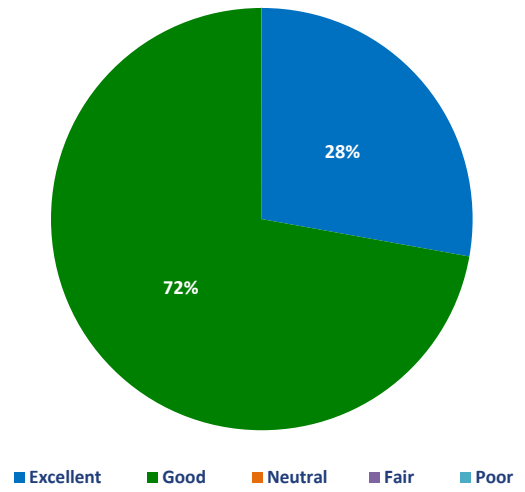
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

# Overall Teaching Feedback

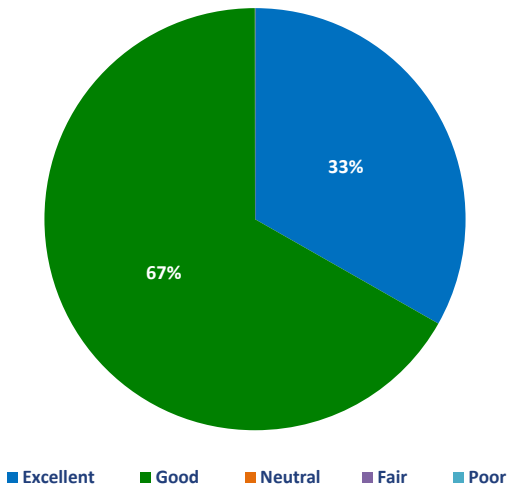
Debridement of a Contaminated Wound



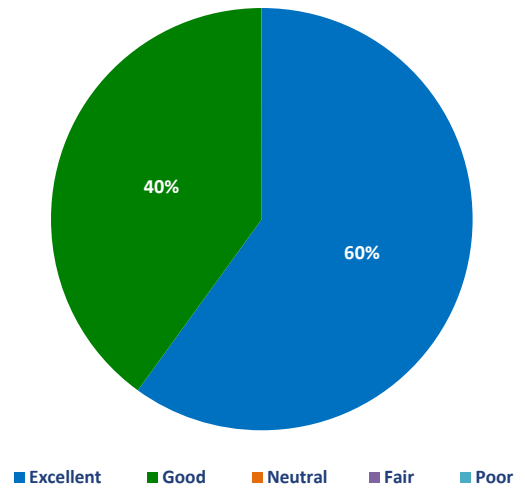
Fine Needle Aspiration Cytology



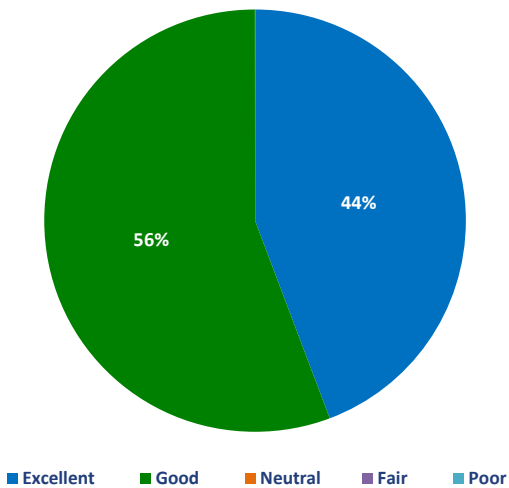
Lumbar Puncture



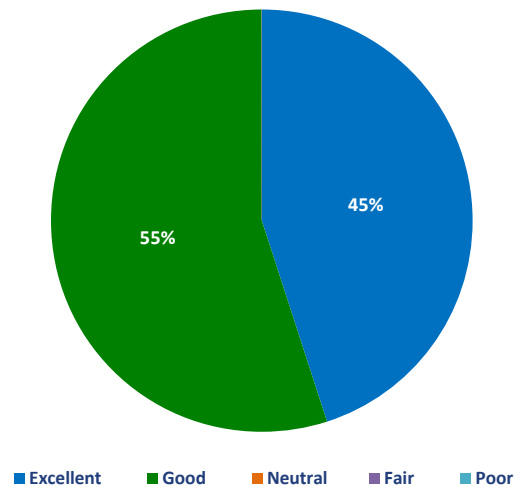
Pre-operative Assessment



Post-operative Management

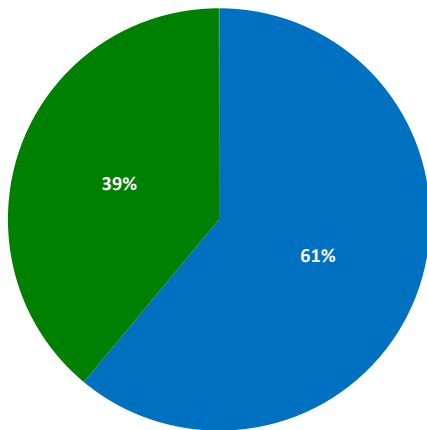


Antibiotics



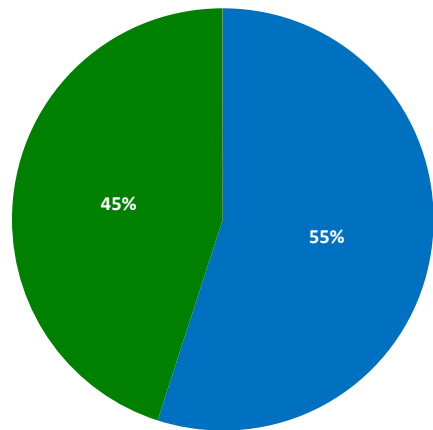
# Overall Teaching Feedback

Theatre List Prioritisation



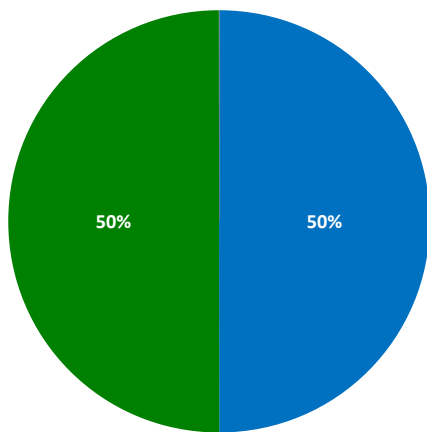
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Wound Healing



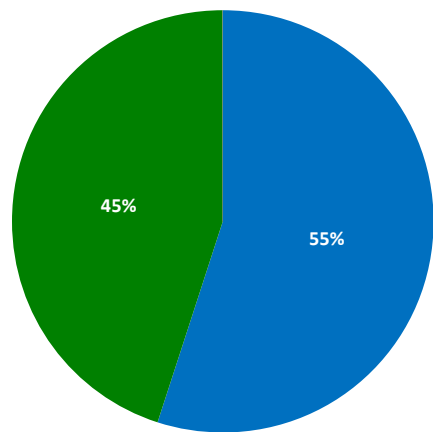
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Reconstruction



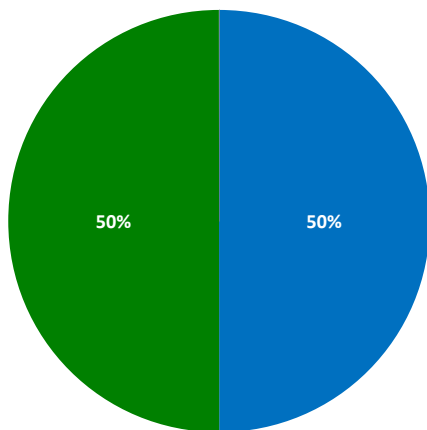
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Local Anaesthesia



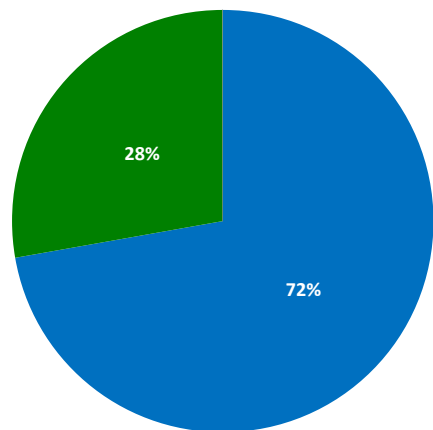
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Sutures



■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

Would you recommend this course to a friend?

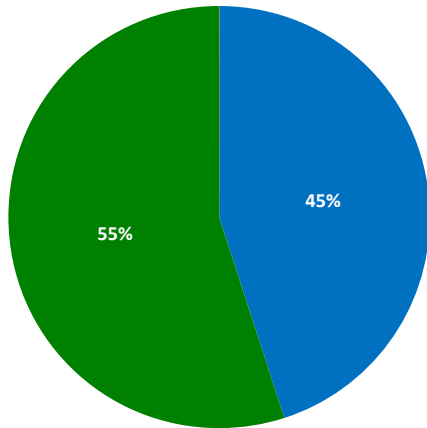


■ Most certainly ■ Certainly ■ Neutral ■ May be ■ Don't think so



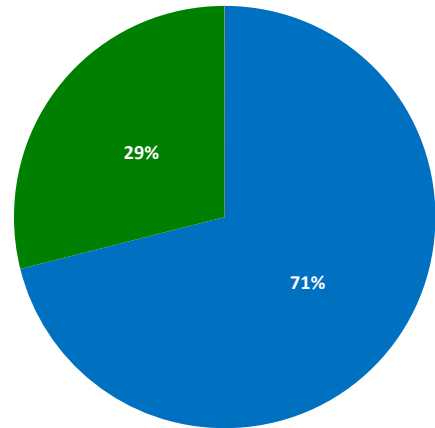
# Overall Teaching Feedback

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



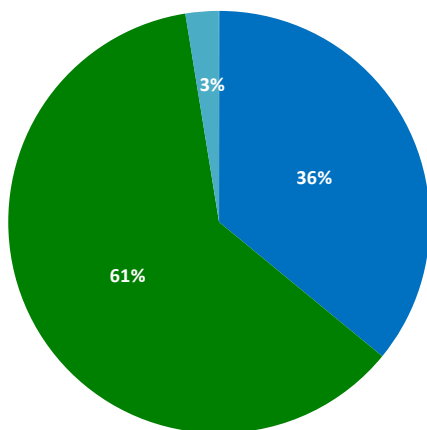
■ Most certainly ■ Certainly ■ Neutral ■ May be ■ Don't think so

How were the facilities and venue?



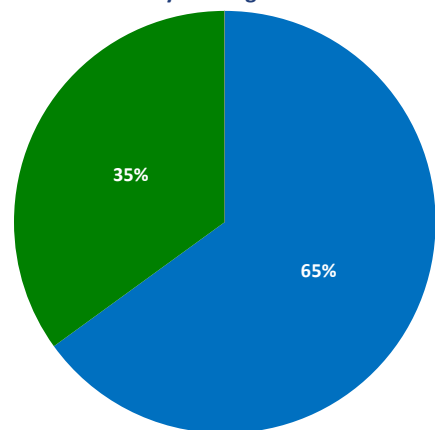
■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

How were the refreshments and lunch?



■ Excellent ■ Good ■ Neutral ■ Fair ■ Poor

How was the general friendliness of the faculty and organisers?



■ Very friendly ■ Friendly ■ Neutral  
■ Not very friendly ■ Can't comment

## Individual Comments

Great.

**FE**

***Shifa International Hospital Islamabad***

Its nice to have a faculty with such intimate knowledge of the exam.

**RI**

***Southampton General Hospital, Southampton***

Very good, particularly to have some insights from recent sitters.

**RH**

***Torbay District General Hospital, Torquay***

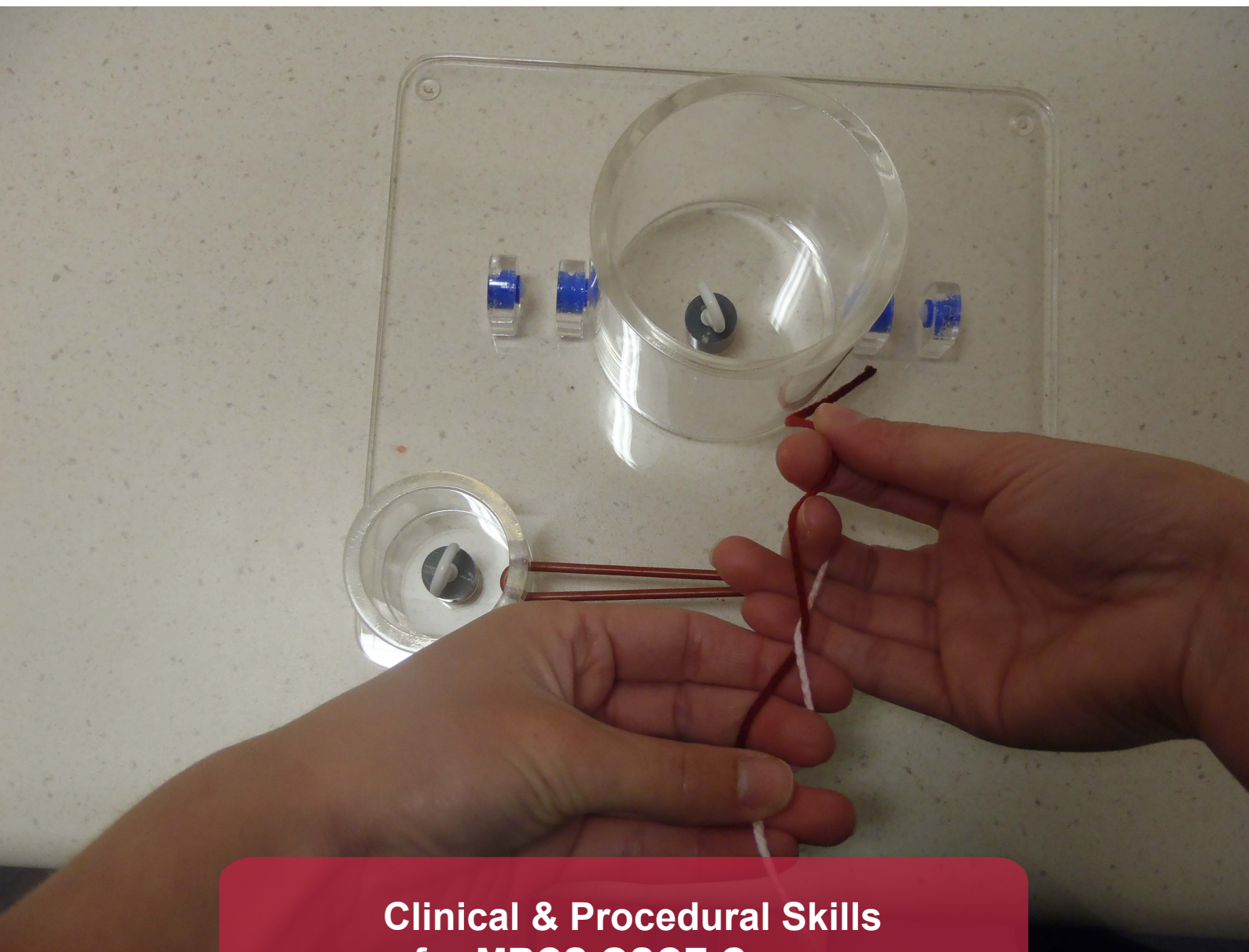
Good.

**BA**

***Mayo Hospital Lahore, Pakistan***

Thank you.

**YE**



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