

# **Regulations for the Intercollegiate Membership Examination of the Surgical Royal Colleges of Great Britain and Ireland held Overseas**

## **Revised September 2015**

Membership of one of the Surgical Royal Colleges of Great Britain and Ireland is open to surgeons who have passed all parts of the Intercollegiate Membership Examination and meet the criteria set out in paragraph 1 below. The examination syllabus, format and content, are common to all four colleges. The examinations are held separately by each College. Part A is held at approximately the same time worldwide. Part B (oral, clinical, communication skills) may be held at different times of the year by each of the Colleges.

Candidates can enter any Part of the examination through any College.

Candidates will be eligible for election as Members of the College with which they successfully complete Part B (oral, clinical and communications skills) of the examination.

## **End Date of the MRCS under the Regulations dated June 2006 (revised April 2009)**

Commencing from January 2011, the Part 1 and Part 2 (MCQ) written papers detailed in the MRCS Regulations (dated June 2006 revised April 2009) will be replaced by Part A (MCQ) written paper. The final opportunity to sit the Part 1 and Part 2 (MCQ) papers is April 2011.

Candidates who **have not** passed both Part 1 *and* Part 2 (MCQ) papers by the conclusion of the April 2011 diet, who are not time-expired will be required to enter and pass Part A (MCQ) under these Regulations (dated January 2011), in order to progress. A previous pass in *either* Part 1 *or* Part 2 will not be taken into account in the award of Part A (MCQ).

Candidates who **have** passed both Part 1 and Part 2 by the conclusion of the April 2011 diet, who are not time-expired and have **not** achieved a pass in any component of the Part 3 examination will be required to transfer to these Regulations (dated January 2011) and enter and pass the next part of the MRCS under these Regulations in order to progress.

Candidates who have achieved a pass in any component of the Part 3 examination of the MRCS taken under the MRCS Regulations (dated June 2006 revised April 2009) by 31 December 2010 must continue under the same MRCS Regulations (dated June 2006 revised April 2009).

In these MRCS Regulations (dated January 2011) the Part 3 examination of the MRCS taken under the MRCS Regulations (dated June 2006 revised April 2009) has been renamed Part B (oral, clinical and communications skills). The Part B (oral, clinical and communication skills) and Part 3 examinations will be identical. Candidates will be permitted a maximum of six attempts across all components of Part B (oral, clinical and communication skills). Candidates who complete their MRCS under the MRCS Regulations (dated June 2006 revised April 2009) will continue to be subject to the time limitations contained within those Regulations.

The Part 3 examination conducted under the MRCS Regulations (dated June 2006 revised April 2009) will cease to be offered after 31 December 2013. Candidates who have not passed all three parts of the Part 3 examination by the conclusion of the final oral/clinical/communication skills diet in 2013 will have no further opportunity to sit the examination and will be time-expired.

The Part B (Oral, Clinical and Communication Skills) in these Regulations (dated January 2011) will end on 31 January 2016.

## **1. Eligibility for Diploma**

To be eligible to obtain the Diploma of Membership under these Regulations, all candidates **must**:

- 1.1 hold a primary medical qualification that is acceptable to the Councils of the four Colleges; (prospective candidates who wish to check the acceptability of their medical degree should check the list of medical schools on <http://avicenna.ku.dk/database/medicine/> or the World Directory of Medical Schools on <http://search.wdoms.org/>. If the medical school does not appear on this list, candidates should contact the examinations department/section at the College to which they wish to apply for the examination);
- 1.2 have passed Parts A (or Parts 1 and 2) and B (oral, clinical, communication skills) of the MRCS examination; and
- 1.3 have applied for Membership and been approved by the relevant College Council. Details of the procedure for election to Membership may be obtained from individual Colleges.

Candidates should note that eligibility for entry to Higher Surgical Training in the Republic of Ireland is dependent upon possession of the Certificate of Completion of Basic Surgical Training (CCBST). To acquire the CCBST trainees will need to have passed the MRCS and to meet a number of other conditions, including successful completion of twenty four months' training in recognised posts from defined specialties and completion of mandatory courses. Full details of the CCBST are available by accessing the RCSI website found at the end of these regulations.

**Note: CCBST ended in the UK in June 2007.**

## **2. Entry to Examination**

- 2.1 In order to enter the examination, all candidates **must** possess a primary medical qualification that is acceptable to the United Kingdom General Medical Council for Full or Limited Registration or to the Medical Council in Ireland for Full or Temporary Registration; overseas candidates must hold a primary medical qualification acceptable to the Councils of the four Colleges. (See note under paragraph 1.1 above on checking eligibility of primary medical qualifications.)
- 2.2 Candidates may enter for Part A at any time after gaining their primary medical qualification, however they are strongly recommended to be in surgical training before entering any part of the examination.
- 2.3 Candidates can enter Part B (oral, clinical, communications skills) of the examination on successful completion of Part A.
- 2.4 Once a candidate has sat the MRCS Part A or Part B (oral, clinical, communications skills) under these Regulations (dated January 2011), he/she may not apply for entry to any part of the MRCS held under previous Regulations.

**In view of the surgical focus of Part B (oral, clinical, communication skills) examination candidates are strongly recommended to have at least 18 months' training in different surgical specialties before entering the Part B examination.**

### **3. The Examination**

The examination is in two parts:

#### **3.1 Part A Multiple Choice Questions (MCQ)**

- 3.1.1 Part A is a four hour MCQ examination consisting of two papers, each of two hours' duration, taken on the same day.
- 3.1.2 The marks for both papers are combined to give a total mark for Part A.
- 3.1.3 Part A is held up to three times a year in centres worldwide. The examinations are held almost simultaneously at all centres. The papers taken at any particular sitting are identical in content.
- 3.1.4 The papers cover generic surgical sciences and applied knowledge, including the core knowledge required in all nine specialties as follows:  
  
Paper 1 - Applied Basic Sciences MCQ paper  
  
Paper 2 - Principles of Surgery-in-General MCQ paper
- 3.1.5 To achieve a pass in Part A the candidate will be required to demonstrate a minimum level of competence in each of the two papers in addition to achieving or exceeding the pass mark set for the combined total mark for Part A.
- 3.1.6 The examination may include a number of questions that are being pre-tested. These questions will not contribute towards the final mark of the examination. Candidates will not be made aware of which questions are being pre-tested.
- 3.1.7 **With effect from the April 2013 Diet**, candidates will be entitled to a maximum of 6 attempts at Part A.

#### **3.2 Part B (oral, clinical, communications skills)**

Part B of the MRCS consists of three components: the oral, the clinical and the communication skills. Candidates must take all components of the Part B (oral, clinical, communication skills) with the same College.

##### **3.2.1 The Oral Component**

The oral is the first component of Part B of the MRCS.

- 3.2.1.1 The oral component is a knowledge-based part comprising three individual question and answer sessions, each lasting 20 minutes, in:
  - Applied surgical anatomy & operative surgery;
  - Applied physiology & critical care;
  - Applied surgical pathology & principles of surgery.

- 3.2.1.2 Candidates will be awarded a mark in each part of the oral and a pass or fail overall in the oral component.
- 3.2.1.3 Candidates must pass the oral component in order to proceed to the clinical and communication skills components.
- 3.2.1.4 Candidates who fail the oral component are not required to re-sit Part A; they are only required to re-sit and pass the oral component of Part B before attempting the clinical and communication skills components of Part B.

### **3.2.2 The Clinical Component**

The clinical is the second component of Part B of the MRCS.

- 3.2.2.1 Candidates must have passed Part A and the oral component before sitting the clinical component.
- 3.2.2.2 The clinical short cases will be organised into four 15-minute bays. The bays will require candidates to be able to diagnose, elicit physical signs from and be familiar with the treatment of patients with conditions in the following areas: trauma and orthopaedics; vascular; endocrine, breast, skin, head and neck; and trunk and groin. There are two examiners in each bay and candidates will be awarded a mark by each examiner; all bays are equally weighted.
- 3.2.2.3 Candidates who fail the clinical component will not be required to re-sit the oral component or Part A; they will only be required to re-sit the clinical component.

### **3.2.3 The Communication Skills Component**

Communication Skills is the third component of Part B of the MRCS. It is held at the same time as the clinical component and does not require a separate application form (unless the candidate is re-sitting only this component).

- 3.2.3.1 Communication skills will be assessed in two bays. One bay will assess the giving of information and one will assess taking and presenting a history. The total assessment time will be 25 minutes. Candidates will be required to demonstrate the ability to provide information to, and receive information from, patients, their relatives and other healthcare professionals.
- 3.2.3.2 There are two examiners in each bay. In the Information Giving bay each examiner will award one mark. In the Information Gathering bay each examiner will award two marks, one mark for the history taking and one for the presentation of the history.
- 3.2.3.3 Candidates who fail the communication skills component but have passed the clinical component will only be required to re-sit the communication skills component.
- 3.2.3.4 To facilitate the assessment of non-verbal communication skills and interaction with the examiner and patient (or actor in the role of the patient as the case may be), the colleges will require candidates for the duration of the components in question for the Part B (Oral, Clinical and Communication Skills) to remove any clothing and/or other item which covers all, or part of, the candidate's face.

Candidates may sit Part A and Part B (oral, clinical, communications skills) with different Colleges.

All parts of the examination will be conducted in English.

#### **4. Timing**

- 4.1 Candidates must pass Part A before applying to sit Part B, and must pass the oral component before proceeding to the clinical and communication skills components.
- 4.2 Candidates are allowed up to six attempts at the MRCS Part A (with effect from April 2013).
- 4.3 Candidates are permitted *six attempts* in which to pass all components of the Part B (oral, clinical, communication skills).
- 4.4 Candidates are allowed up to four attempts at any combination of the MRCS Part B (OSCE) and the MRCS Part B (OCC).
- 4.5 The number of attempts for each Part is defined in 4.2 and 4.3 above. Failure to pass the Examination within the permitted number of attempts as defined above will debar the candidate from applying for any component/part of the MRCS examination under these, or any other regulations.
- 4.6 One additional attempt may be granted under the Additional Attempt Policy
- 4.7 The number of attempts for completion of the Part B (oral, clinical, communication skills) cannot be increased unless granted under the Additional Attempt Policy.
- 4.8 Candidates who are “time-expired” in the Intercollegiate MRCS examination of the Surgical Royal Colleges of Great Britain and Ireland (Regulations June 2006 revised April 2009) or the Collegiate MRCS, or have taken the maximum number of attempts at the Part B (OSCE) (Regulations July 2008 revised May 2010) are not permitted to sit Part A or Part B (oral, clinical, communication skills) of the Intercollegiate MRCS examination of the Surgical Royal Colleges of Great Britain and Ireland under these Regulations.
- 4.9 Candidates who have passed Part 1 and Part 2 of the Intercollegiate MRCS (Regulations June 2006 revised April 2009), who are not time-expired, and who transfer to Part B (oral, clinical, communication skills) of the Intercollegiate MRCS examination under these regulations, are subject to the limitations of paragraph 4.3.
- 4.10 Any candidate who has passed Part A of the Intercollegiate MRCS examination (Regulations July 2008 revised May 2010 and July 2010) may choose to complete the requirements of the MRCS examination by applying to sit Part B (oral, clinical and communication skills) under these regulations.
- 4.11 Candidates who have passed any parts of the MRCS examination will not be permitted to re-sit the same component.
- 4.12 Any candidate entering any part of the MRCS under these regulations are required to pass Part B of the examination within seven years of passing Part A or seven years from passing the second component of Part 1 or Part 2 of the Regulations dated June 2006 (revised April 2009).

## **5. Recommendations and Advice**

- 5.1 It is recommended that candidates do not enter Part A until they have commenced their first year's training.
- 5.2 It is strongly recommended that candidates seek the advice of their trainer or programme director, or equivalent, before deciding when to take any part of the examination, particularly before taking Part B, as they will then only have six attempts in which to pass all components of this examination.
- 5.3 It is also strongly recommended that candidates do not enter the clinical component before completing a Basic Surgical Skills course and, preferably, an Advanced Trauma Life Support®/Care of the Critically Ill Surgical Patient/Early Trauma and Critical Care course.

## **6. Admission to the Examination**

**Candidates should consult individual College websites or contact the examinations department/section of the relevant College for details of dates and venues for examinations. Details of the examinations department/section of each of the four Colleges are to be found at the end of the regulations.**

- 6.1 Application for entry to any part of the examination must:
  - 6.1.1 be made on the appropriate (paper or electronic version) application form;
  - 6.1.2 be accompanied by the specific examination fee payment of which must be received in full by the relevant College before a candidate may enter the examination; and
  - 6.1.3 reach the examinations department/section of the appropriate College by the date specified in the examinations calendar. Applications received after the closing date may be returned.
- 6.2 If, exceptionally, a candidate is permitted to enter the examination without first having paid the specified examination fee and fails thereafter to pay the fee, the candidate shall not be permitted to take any further part with any Surgical Royal College without payment of the outstanding fee or, if the unpaid fee relates to such a candidate's Final part of the examination, the relevant College reserves the right not to mark or assess that part of the examination or not allow the candidate to proceed to Membership of the relevant College in accordance with these regulations.
- 6.3 Proof of Eligibility

All first-time applications for Part A must be accompanied by a certificate confirming the holding of a primary medical qualification acceptable to the Councils of the four Colleges (see note under paragraph 1.1 above on checking eligibility of primary medical qualifications). Candidates who have previously entered Part A with one College and then apply to a different College will also have to supply full details as set out here to the new College.

- 6.4 Candidates must bring proof of identity to each examination. Proof of identity must be an official document, such as a current passport or driving licence that includes their name, signature and a photograph.
- 6.5 For the purposes of visual identification, any candidate sitting any examination will be required to remove any clothing and/or other item which covers all, or part of, the candidate's face. The Colleges will observe sensitivity, and in specific circumstances privacy in the visual identification of candidates.
- 6.6 The colleges reserve the right to make recordings of the examinations for the purposes of quality assurance and training.

## **7. Withdrawal from the Examination**

- 7.1 A candidate who withdraws, in writing, an application for admission to any part of the examination may be refunded the fee paid (less an administrative fee of 20%) provided that notice of an intention to withdraw is received by the examinations department/section before the closing date by which applications are due, as shown in the examinations calendar. No refunds are normally made to candidates who withdraw after the closing date.
- 7.2 Applications for consideration of a refund on medical grounds must be accompanied by a medical certificate. Applications for consideration of a refund on compassionate grounds should be supported by the consultant or surgical tutor responsible for training. All such applications must be submitted to the examinations department/section of the appropriate College within 14 days of the commencement of the examination.
- 7.3 The Colleges reserve the right, regardless of eligibility to take the examination, to review applications on an individual basis in exceptional circumstances. For information on pregnancy and deferral see paragraph 12.
- 7.4 Candidates with special needs should advise the appropriate College at the time of application of the nature of their needs and any assistance that they require. Requests should be supported by medical evidence (an educational psychologist's report is required for requests for extra time because of dyslexia). If appropriate, details of extra time or other allowances made by other examining bodies should be given, although the Colleges are not bound to follow these.

## **8. Results**

Results will be posted on the website and sent out in the post by the examinations department/section of the College through which the candidate entered.

## **9. Feedback**

Candidates will receive a breakdown of their marks for all parts of the examination. Feedback for Part B (oral, clinical and communication skills) will comprise the mark awarded in each part of the examination together with the overall mark. The mark descriptors will appear on the MRCS website for reference at [http://www.intercollegiatemrcsexams.org.uk/old/pdf/oral\\_guidance.pdf](http://www.intercollegiatemrcsexams.org.uk/old/pdf/oral_guidance.pdf), but will not be sent to candidates with their results. No further breakdown of a candidate's performance will be available.'

## **10. Appeals Mechanism**

Details of the appeals process and fees charged may be obtained from the appropriate College.

## **11. Improper Conduct by Examination Candidates**

In the case of improper conduct of an examination candidate as defined below, the four Colleges acting jointly may impose a penalty relating to the candidate's eligibility for the relevant or future examinations. Improper conduct is defined as:

- 11.1 Dishonestly obtaining or attempting to obtain entry to the examination by making false claims about eligibility for the examination or falsifying any aspects of the entry documentation.
- 11.2 Obtaining or seeking to obtain unfair advantage during an examination, or inciting other candidates to do the same. Examples of unfair advantage are: having on the person any material that would give advantage in an examination once the examination has commenced (this includes electronic communication devices), communicating or attempting to communicate with another candidate once the examination has commenced, refusing to follow the instructions given by examiners or examinations staff concerning the conduct of and procedure for the examination. This list is not exhaustive.
- 11.3 Removing or attempting to remove from the examination any confidential material relating to the examination.
- 11.4 Obtaining or attempting to obtain confidential information concerning the examination from an examiner or examination official.
- 11.5 Passing confidential information on the content of the examination to a third party.

The list given above is not exhaustive.

- 11.6 If a candidate is found to have acted improperly his/her name may be reported to the relevant national authority. The Colleges may also on an individual basis decide that a candidate should not be allowed to proceed further with the examination or, having passed the examination, may not be admitted to Membership, according to their own statutes and regulations, in cases where serious misconduct not related to the examination is judged to make the person unfit to become a Member of the College.

## **12. Notification of Pregnancy and Deferral**

- 12.1 A deferral may be permitted to candidates supplying an appropriate medical report which satisfies the relevant College indicating that:
  - 12.1.1 the candidate has any pregnancy related problems or illness; and/or
  - 12.1.2 the candidate's confinement is due shortly before or around the date of the examination; and/or
  - 12.1.3 the candidate has sufficient discomfort for her to consider that it will have a detrimental affect on her performance.



12.2 In such circumstances, a deferral will be permitted and no further fee will be required.

12.3 Any candidate who does not inform the College of her pregnancy and is consequently unable to sit for that examination will not normally be allowed to defer this examination without submission of another fee.

**NOTE: These Regulations are under continual review. It is recommended that candidates keep in regular contact with their College to ensure that they have the most up-to-date information. Any changes will be announced on the College websites.**

## **College Details**

### **The Royal College of Surgeons of Edinburgh**

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Nicolson Street  
Edinburgh  
EH8 9DW  
Ph: 0131 527 1600  
Fax: 0131 668 9231  
E-mail: [examinations@rcsed.ac.uk](mailto:examinations@rcsed.ac.uk)  
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### **The Royal College of Surgeons of England**

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### **The Royal College of Physicians and Surgeons of Glasgow**

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