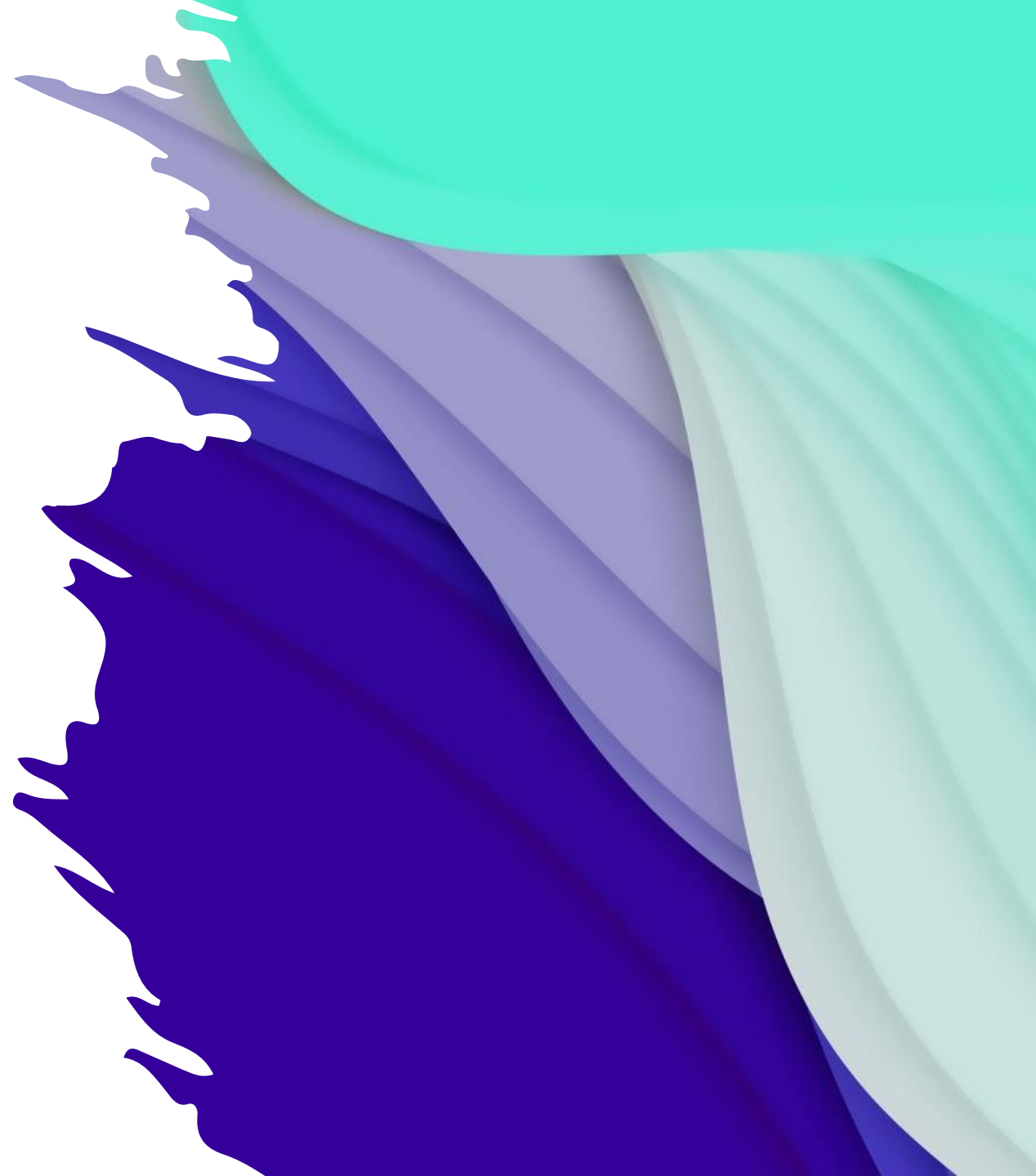


# Stage A exam How I studied

Dr Helena Hurst



# Disclaimer!

- Please remember everyone studies differently!
- How I studied, may not work for you
- I'm not a crammer
- Need to remember what's worked for you previously
- Look at the time till the exam

# Read through the curriculum

- Look at what is expected: i.e., which topics are big
- Recognise own strengths

## Scope of learning required\*

When tested at Stage A, you may be required to interpret a CT, MRI, or ultrasound image. You would be required to recognise large features on a plain x-ray, e.g. fracture, dislocation, pneumothorax, and cardiac enlargement. At an examination, you would be provided with the normal ranges of any chemical pathology or microbiological tests. You will not require a calculator for calculations of entities such as sensitivity, specificity, or likelihood ratio, although numbers or an algebraic equation may be offered for interpretation.

## Scope of learning required

At Stage A, you would not be examined on coeliac disease, malabsorption, or oesophageal motility disorders. For an occupational physician, the prime issue with gastrointestinal issues is that they are often chronic and variably affect a person's fitness for work. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.

## Scope of learning required

When examined at Stage A, questions asked of you may have an occupational scenario incorporated, but the question would be directed to diagnosis and/or clinical management rather than issues of work-relatedness. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.

# Previous marks

Highlight areas where more work is needed

- Unable to provide my previous marks! Sorry!
- However, focus should be made to the large topics of MSK and Epidemiology
- Other areas: neuro, professional qualities and hazards

# How do you study?

- Really think about how you study
- Need to also be realistic about time



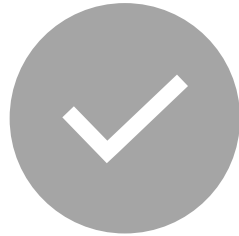
# What I did...

- Initially started with making notes on the entire curriculum
- Then concentrated on areas I lacked detailed knowledge: 60 hours document
- Made detailed short notes that I re read over and over
- Daily questions: added to notes from questions
- Weekly check ins with Honor! 😊
- Nearer the exam: more questions, past paper questions (What was available), additional material provided
- Week before exam: epidemiology!

# MCQs



LEARN HOW TO DO  
THEM



EASY ONES ANSWER  
STRAIGHT AWAY



UNSURE: REMOVE THE  
OBVIOUS WRONG  
ANSWERS FIRST



DON'T WASTE TIME  
ON ONES YOU DON'T  
KNOW



FOR ME: JUST TRY AND  
DO AS MANY AS YOU  
CAN



# Question banks and revision material I used

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- Textbooks: Kumar Clark, Davidsons etc
- Osmosis: good for videos and questions (not the best questions)
- Geeky medics
- AMC question bank
- Pastest question bank (final year medical school)
- MCQ book



# Where to spend time

- For me: questions!
- Read around the big topics: MSK, neuro, epidemiology
- Topics you're not confident in
- Be time efficient

# The Exam itself



15 min reading time: take your time, read through the paper



3 hours



120 MCQs



Approx 90 seconds per question



Eat before (I was hungry halfway through!)

# Summary

- Think about how you want to study, don't worry if it's different to others
- Look at time to exam: i.e., do you have time to make notes?
- Questions, questions, questions!
- If it works for you: have someone to study with
- Take your time in the exam
- Ultimately, study in a way that works for you!