MRCP(UK) Part 2 Clinical Examination (PACES23) Guidance notes for candidates

General

Full details of the examination, including demonstration videos, regulations and advice on examination preparation are available at mrcpuk.org

The examination comprises five stations, each assessed by two independent examiners. Candidates start at one of the five stations and move round the carousel until the cycle has been completed. The Stations are:

<table>
<thead>
<tr>
<th>Station</th>
<th>Encounter</th>
<th>Timing</th>
</tr>
</thead>
</table>
| Station 1 | Communication  
Respiratory system | 10 minutes  
10 minutes |
| Station 2 | Consultation | 20 minutes |
| Station 3 | Cardiovascular system  
Neurological system | 10 minutes  
10 minutes |
| Station 4 | Communication  
Abdominal system | 10 minutes  
10 minutes |
| Station 5 | Consultation | 20 minutes |

The examination lasts 125 minutes, including the five minutes between each of the stations. At Stations 1, 2, 4 and 5 the five minutes are used to read the clinical scenarios and are therefore a vital part of the examination.

Important things to remember

Arrive in good time (the start of the examination and the reporting time are shown on your Admission Document). Please be aware that the start time may, occasionally, be delayed for reasons such as travel problems, overrunning previous cycles or examiner calibration.

You will be asked to show your photo ID on arrival, without this you will not be permitted entry. Your ID must comply with the guidance given in the MRCP(UK) examination regulations.

You may not take any electronic communication devices into the examination, even if
it is switched off. Please hand in any devices you have with you (e.g. mobile phone, pager).

You may not take books, notes or any form of recording device into the examination.

If you wish to use equipment, such as an amplifying stethoscope or magnifying ophthalmoscope, you must declare your intention as soon as you arrive, so the examiners can assess the patients using this equipment should they wish to do so. You will not be able to use such equipment unless you declare your intention in time for the examiners to do this.

**Before the examination**

You should ensure that you are familiar with the MRCP(UK) examination regulations available at [mrcpuk.org](http://mrcpuk.org).

It is an offence to seek to gain prior knowledge of the clinical cases or scenarios used in the examination. Any attempt to visit the hospital or examination centre (including as part of a training course) at which you have been allocated a place, after being notified of that placement, will be regarded as an act of suspected misconduct and be investigated accordingly. If misconduct is proved the details of the case will be passed to the relevant regulatory body (i.e., the General Medical Council) and if you are in a UK training programme, the individual responsible for overseeing your training. Results for the examinations under investigation, and in serious cases any previous attempts, may be annulled/withheld and you may be barred from entry for a specified period.

**Dress codes and infection control**

- Dress and appearance are an important aspect of professionalism. Your fingernails should be short and clean. You should dress in a smart and conservative manner, and in accordance with any dress code in force at the hospital in which the examination is being run.

- You must come prepared to meet any local dress code or infection control requirements. Failure to comply will mean that you cannot sit the examination and, in these circumstances, you will not be eligible for a refund.

- Infection control policies vary from centre to centre. At examination centres in the UK, you are usually required to wear a short-sleeved shirt or blouse (or be prepared to roll up your sleeves), with no neck-tie, false nails, wrist-watch or wrist jewellery (a plain wedding ring is usually acceptable).

- Hand-washing facilities or alcohol gel are provided at each examination centre. You must make appropriate use of them to comply with standard infection control requirements and, if you cannot locate the hand-washing facilities, you should ask your examiners.
• Remember that you will be required to examine patients so avoid wearing garments that are either tight or restrictive, or excessively flowing - or anything that makes it more difficult for you to carry out a physical examination satisfactorily.

• Remember also that you will be expected to communicate with the patient or surrogate, so be aware of anything that might make it more difficult for you to demonstrate empathy and understanding eg facial veil or dark glasses. If you do not clearly demonstrate these abilities, examiners will mark the corresponding skills as unsatisfactory.

At the examination centre

You will receive 16 marksheets and should enter your RCP code, examination number and the centre number on each one, using the 2B pencil provided. Use CAPITAL LETTERS. Some examination numbers and centre numbers have only two or three digits, so you should put zero(s) before the number to make it up to four digits. For example, ‘123’ should be entered as ‘0123’.

Please hand the appropriate marksheets to the examiners when you arrive at each station.

The examiners record their marks independently and without conferring. During the examination, no examiner knows the marks you have scored at any other station. Do not be concerned by the fact the examiners may be writing on the marksheets during the station, as they are asked to make written comments on candidates’ performance, both positive and negative.

All marks are recorded on a three-point grading system (satisfactory, borderline, unsatisfactory) and are detailed on the MRCP(UK) Part 2 Clinical Examination (PACES) marksheet. Grade descriptors are provided on the marksheets and are further refined in the examiner calibration process that takes place before the examination.

The grades are converted to numeric values (satisfactory=2, borderline=1, unsatisfactory=0) which are totalled to give your score for each skill, and a total score.

A trainee examiner or other observer may be present in addition to the examiners. Trainee examiners are there to learn and will complete marksheets, but this is only for their training and does not influence your score in any way.

If, at any encounter, you recognise a patient you are taken to (e.g., from a course or previous attempt at the examination), please inform the examiners. If at all possible, you will be directed to an alternative patient. If this is not practical, you will be permitted to continue with the examination of the patient, but examiners will make appropriate allowances.
3. Specific Station Guidance

**Station 1** comprises of two encounters of ten minutes each, **Communication** followed by **Respiratory system examination**.

In each encounter one examiner will act as the lead examiner.

On arrival at Station 1, you will receive your written instructions for the **Communication** encounter (the ‘Scenario’), and have up to five minutes to prepare. If you do not receive your instructions when you sit down at the Station, you must ask for them. You will be provided with paper on which you may wish to make rough notes, and you may take these into the Station with you but must leave them with the examiners after the encounter is finished.

When the timekeeper sounds a bell to signal the start, you should enter the Station, where you will be introduced to either a patient or a surrogate playing the appropriate role. The interview will involve interaction between you and the patient/surrogate. You may refer to the instructions and your notes, and take notes during the interview, but these will not form part of the assessment.

The interview with the patient/surrogate lasts 10 minutes, and after 8 minutes the examiners may remind you that you have 2 minutes to complete your interview. It is your responsibility to ensure you have demonstrated the required skills within the 10 minutes. If you complete the task before the end of the 10-minute period, you should remain in your seat, and the patient/surrogate will also do so. This could mean a period of silence, however, if you think of additional issues you would like to address with the patient/surrogate in the remaining time, this is permissible.

You will leave the Station after 10 minutes. There will be no questioning from the examiners, but you will move with the examiners to the respiratory system examination.

At the **respiratory** encounter, one examiner (‘the lead examiner’) will show you brief written instructions. You should respond to these instructions by examining the patient appropriately.

You must complete your examination within six minutes, and this will leave at least four minutes for discussion with the examiners. The examiners may remind you after five minutes that you have one minute left to complete your examination, but it is your responsibility to ensure you demonstrate the required skills within the six minutes. You are recommended to be structured and focused in your examination to make best use of the time available.

After ten minutes the encounter will end. The examiners and the candidate must then stop and proceed to the second encounter, where the procedures and timing are identical. A signal (often a bell or buzzer) will be given at the end of the second encounter to indicate the end of this Station.

**Stations 2 and 5: Consultation**

On arrival at these Stations, you will receive your written instructions (the ‘Scenario’), and have up to five minutes to prepare. If you do not receive your instructions when you sit down at the Station, you must ask for them. You will be provided with paper on which you may wish to make rough notes, and you may take these into the Station with you but must leave them with the examiners after the encounter is finished.

When the timekeeper sounds a bell to signal the start, you should enter the Station, where you will be introduced to either a patient and/or a surrogate playing the appropriate role. The interview will
involve interaction between you and the patient/surrogate plus examination of the patient. You may refer to the instructions and your notes, and take notes during the interview, but these will not form part of the assessment.

The interview and examination of the patient/surrogate lasts a maximum of 15 minutes, and after 13 minutes the examiners may remind you that you have 2 minutes to complete your interview. It is your responsibility to ensure you have demonstrated the required skills within the 15 minutes. If you complete the task before the end of the 15-minute period, you should remain in your seat, and the patient/surrogate will also do so. This could mean a period of silence, as the examiners will not begin the discussion until the full time to complete the task has elapsed. However, if you think of additional issues you would like to address with the patient/surrogate or wish to re-examine the patient in the remaining time, this is permissible.

After 15 minutes, you will be invited to address the examiners’ questions, which will usually involve summarising and discussing the important features of the case including pertinent parts of the history, examination findings, differential diagnoses, investigation and management plans plus addressing the patient’s concerns. This discussion with the examiners will last 5 minutes.

A signal will be given at the end of the five minutes of discussion (twenty minutes in total) to indicate the end of this Station.

**Station 3: Cardiovascular and Nervous System Examination**

Station 3 comprises two ten-minute encounters, examination of the cardiovascular and nervous systems. These encounters may take place in any order.

At the cardiovascular and neurological system encounters, one examiner (‘the lead examiner’) will show you brief written instructions. You should respond to these instructions by examining the patient appropriately.

You must complete your examination within six minutes, and this will leave at least four minutes for discussion with the examiners. The examiners may remind you after five minutes that you have one minute left to complete your examination, but it is your responsibility to ensure you demonstrate the required skills within the six minutes. You are recommended to be structured and focused in your examination to make best use of the time available.

After ten minutes the encounter will end. The examiners and the candidate must then stop and proceed to the second encounter, where the procedures and timing are identical. A signal (often a bell or buzzer) will be given at the end of the second encounter to indicate the end of this Station.

For testing sensation at the CNS encounter, you must only use the equipment provided by the examination centre (e.g. Neurotips or orange sticks. It is important not to break the orange stick or other sensory testing equipment before using it on the patient). Do not use your own equipment.

**Station 4** comprises of two encounters of ten minutes each, Communication followed by Abdominal system examination. This station is very similar to station 1.

In each encounter one examiner will act as the lead examiner.

On arrival at Station 4, you will receive your written instructions for the Communication encounter (the ‘Scenario’), and have up to five minutes to prepare. If you do not receive your instructions when
you sit down at the Station, you must ask for them. You will be provided with paper on which you
may wish to make rough notes, and you may take these into the Station with you but must leave
them with the examiners after the encounter is finished.

When the timekeeper sounds a bell to signal the start, you should enter the Station, where you
will be introduced to either a patient or a surrogate playing the appropriate role. The interview will
involve interaction between you and the patient/surrogate. You may refer to the instructions and
your notes, and take notes during the interview, but these will not form part of the assessment.

The interview with the patient/surrogate lasts 10 minutes, and after 8 minutes the examiners may
remind you that you have 2 minutes to complete your interview. It is your responsibility to ensure
you have demonstrated the required skills within the 10 minutes. If you complete the task before the
end of the 10-minute period, you should remain in your seat, and the patient/surrogate will also do
so. This could mean a period of silence, however, if you think of additional issues you would like to
address with the patient/surrogate in the remaining time, this is permissible.

You will leave the Station after 10 minutes. There will be no questioning from the examiners, but you
will move with the examiners to the abdominal system examination.

At the abdominal encounter, one examiner (‘the lead examiner’) will show you brief written
instructions. You should respond to these instructions by examining the patient appropriately.

You must complete your examination within six minutes, and this will leave at least four minutes for
discussion with the examiners. The examiners may remind you after five minutes that you have one
minute left to complete your examination, but it is your responsibility to ensure you demonstrate
the required skills within the six minutes. You are recommended to be structured and focused in
your examination to make best use of the time available.

After ten minutes the encounter will end. The examiners and the candidate must then stop and
proceed to the second encounter, where the procedures and timing are identical. A signal (often a
bell or buzzer) will be given at the end of the second encounter to indicate the end of this Station.
Results

Results will be released on the MRCP(UK) website. Results letters can be viewed via your MyMRCP(UK) account.

Results cannot be collected from the Royal Colleges of Physicians or given over the telephone or by fax or email.

To pass the MRCP(UK) Clinical Examination (PACES23), you will be required to attain a minimum standard in each of the seven skills assessed and also attain a minimum total score across the whole assessment. The MRCP(UK) Clinical Examining Board will be undertaking a formal standard setting procedure which will determine the pass mark for each skill and the total minimum score.

You will fail if you do not achieve the pass mark on one or more skills, or do not achieve the overall minimum total score. In addition, any candidate who receives a mark of 28 for Skill G (Maintaining Patient Welfare) will have their overall performance reviewed by the Clinical Examining Board and may fail the examination, irrespective of total test score.

Confidentiality

You must not share information about the cases used in the examination. Scenarios must not be copied or removed from the centre. Patient confidentiality must be maintained.

Any breach of these conditions may be investigated under the MRCP(UK) Academic Misconduct Regulations (available at mrcpuk.org)

Compiled by MRCP(UK) on behalf of the Federation of Royal Colleges of Physicians of the United Kingdom
©2022 Federation of Royal Colleges of Physicians