



**Regulations relating to the examination for Membership  
of the  
College of Emergency Medicine (MCEM)  
Applicable to the Spring 2013 diet**

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## Main changes to regulations for Spring 2013

These regulations contain significant changes to:

Part A may be taken in the first year of medical practice. In the UK this will be the first Foundation year or equivalent.

Candidates who sat the Part B examination prior to Autumn 2009 must pass the Parts B and C examinations by (and including) Spring 2013 to retain exemption from Part A. If a candidate has not passed Parts B and C by Spring 2013 they will be required to pass the Part A examination before being permitted to apply for Parts B and C.

Only candidates who submitted an intention to sit form and deposit by 31<sup>st</sup> July 2012 are permitted to apply for Parts B and C.

Candidates who subsequently do not apply to the exam – because they do not pass the Part A and are therefore ineligible, will have their intention to sit and deposit transferred to the next sitting. However, a failure to apply for the Part A resit – will then nullify the intention to sit for the B/C and the deposit will be forfeited.

The whole MCEM must be completed within 4 years of the first sitting of Part A (not date of success in Part A).

Preparation for the Part A is considered to require at least 6 months of focussed preparation. Candidates may wish to revisit undergraduate basic sciences and to focus particularly on anatomy and physiology as well as the other basic science components.

Failure to re-submit the correct application form before the closing date will result in the application being rejected regardless of whether the candidate is eligible. No mitigating circumstances will be considered.

Candidates who wish to make representations with regard to the conduct of the College examinations must do so in writing within 30 days of the last day of that section of the examination on that diet.

Appeals will be considered if they allege misadministration, bias or impropriety whether in the conduct or in the determination of the result of the examination. Appeals disputing the academic judgment of the examiners **will not** be considered. Appeals against the Regulations are not allowed.

Appeals will only be considered after the remainder of the examination is completed and the results released.

The full examination appeal process is available on the College website.

## Introduction

The Membership Examination of the College of Emergency Medicine (MCEM) assesses the knowledge, skills and behaviours necessary for the clinical practice of Emergency Medicine in the UK and Ireland, at the level of the senior decision maker. This is defined currently as the equivalent of the ST4 or specialty doctor.

The standard is at a level suitable to supervise foundation and core trainees and to provide senior clinical decision making when there is no consultant presence in the department.

These regulations are for the **Spring diet of 2013**. The regulations provide the formal framework whereby the examination will be conducted. The regulations refer to appeals but candidates should note that by signing that they have read the regulations and are applying for the examination – no appeal against the processes described herein is possible

Candidates and their trainers should be familiar with the curriculum approved by PMETB in June 2010 for ACCS training and the CT3 Emergency Medicine year (PEM and additional adult content):

<http://www.collemergencymed.ac.uk/CEM/Training%20and%20Examinations/Curriculum/Curriculum%20from%20August%202010/default.asp>

Candidates should note that Part A will test the basic science element of the main curriculum as well as the basic science curriculum appendix 7.

The MCEM examination will be run in overseas countries; in those countries, up to 15% of the overall content of the MCEM examination will reflect the local case mix. The examination will itself require the same standard to be demonstrated. Separate regulations concerning the application and re-application are found on the College website for international examinations.

## **Guide to the scope of the examination**

Part A assesses the basic sciences applied to emergency medicine.

Parts B and C assess the common competences and clinical competences required for the evaluation and immediate management of common clinical conditions seen in the Emergency department in adults and children. The full breadth of the major and acute presentations listed in the curriculum will be tested but no presentation that is not in the ACCS curriculum will be used in the exam.

Competence in children's emergencies is expected at a level delivered in a general Emergency Department and focuses mainly on the seriously ill and injured child, or the management of common childhood emergencies.

## **Format of the Examination**

The examination consists of three parts, Part A, B and C.

### **Part A**

This consists of a knowledge test in multiple choice format with 50 questions, each with four stems requiring true or false answers. It is not negatively marked. The examination addresses basic sciences as applied to Emergency Medicine including evidence based medicine and pathology. The basic science curriculum is found on the College website:

<http://www.collemergencymed.ac.uk/CEM/Training%20and%20Examinations/Curriculum/Curriculum%20from%20August%202010/default.asp>

Candidates are advised to consult the main curriculum in addition to the basic science curriculum to ensure they are informed of the application of basic science to Emergency Medicine.

Broadly speaking this focuses on anatomy, physiology, pharmacology, pathology, microbiology, and evidence based medicine.

The pass mark is set independently for each examination, and candidate's total score on the MCQs is required to be at or above the predetermined pass mark. The pass mark is usually around 70%.

Duration: 2 hours

### **Part B**

This paper examines data interpretation and problem solving skills and consists of 16 questions. The questions present a clinical scenario and may have clinical data including radiographs, CT scans, ECGs, blood test results and clinical photographs.

The pass marks is set independently for each examination and candidate's total score on all questions combined is required to be at or above the predetermined pass mark. The pass mark is usually between 65-70%.

Duration: 2 hours

## Part C

This consists of 18 Objective Structured Clinical Examination (OSCE) stations that assess knowledge, psycho-motor ability, interpersonal skills (including communication and conflict resolution), professional behaviour and clinical decision-making skills. There will normally be two rest stations.

The pass mark for each station is set independently for each examination. Candidates are required to pass 14 of the 18 stations to pass the whole examination.

Duration:                      Approximately 2.5 hours

### **All parts of the examination will be conducted in English.**

Each part stands alone, candidates being awarded either a "pass" or a "fail" in each part.

UK candidates must apply for Parts B and C together.

Part A must be passed before attempting Part B, Part B must be passed before attempting Part C.

## Timing

There will be two full sittings of each part of the examination per year in the UK as arranged by the Education and Examination Committee of the College of Emergency Medicine.

Additional sittings for Part B or Part C may be provided where necessary.

Occasionally it may be necessary to amend the dates and venues of an examination without prior notice to candidates. Candidates who have already been accepted to sit the examination will be informed of such changes as soon as possible.

Normally, the Part B will be held approximately 6 weeks before the Part C. The timetable for Parts B and C may vary for overseas examination diets.

## General Criteria for Eligibility

### 1. **Primary medical qualification**

The candidate **must** hold a primary medical qualification that is acceptable to the United Kingdom General Medical Council for Full registration or to the Irish Medical Council for Full or Temporary Registration.

### 2. **Registration with the required authority**

The candidate must also hold full current registration with the required authority. For the UK and Ireland, this will be the General Medical Council or Irish Medical Council. For overseas candidates this will be the Medical Council for the country where they work and reside. For Part A candidates who are in FY1 or equivalent we will accept provisional registration with a licence to practise.

### 3. **Registration of training**

UK trainees in EM Core Training posts must register with the Training Standards Committee (TSC) of the College of Emergency Medicine and must have paid their training fee. Please note: registration/training fee is separate from membership of the College. If you are unsure whether you have registered, or if you have a query about registration, please contact the College's Training Department.

### 4. **Geographical location**

Candidates will normally sit the examination in the country where they work/reside or in that country where there is an arrangement with a College of academic institution to provide this opportunity. **(Please see Appendix 1)**. Candidates will be required to resit the examination in the country where they sat the exam for the first time.

Candidates working in the UK and Ireland are **not** permitted to apply for overseas examinations but will be expected to sit the examination in the UK or Ireland.

Candidates should consult the website of the College of Emergency Medicine for details of dates and venues for examinations.

## **Part A – Eligibility Criteria**

Part A may be taken in the first year of medical practice. In the UK this will be the first Foundation year or equivalent.

## **Parts B and C – Eligibility Criteria**

### **1. Part A or equivalent success**

Candidates must have passed the MCEM Part A before entry to MCEM Part B.

Candidates will only be exempt from MCEM Part A if they hold one of the following qualifications:

- the Primary examination of the Australasian College of Emergency Medicine
- the Primary examination of the Hong Kong College of Emergency Medicine
- the Primary examination of the South African College of Emergency Medicine

**Candidates who sat the Part B examination prior to Autumn 2009 must pass the Parts B and C examinations by (and including) Spring 2013 to retain exemption from Part A. If a candidate has not passed Parts B and C by Spring 2013 they will be required to pass the Part A examination before being permitted to apply for Parts B and C.**

In the UK and Ireland candidates must pass the Part B examination before progressing to Part C.

### **2. Relevant experience**

The candidate must have experience that allows them to have gained competence in all presentations in the ACCS/CT3 curriculum and all common competences.

This is anticipated to require the following experience – gained by the time of sitting the examination:

- 36 months minimum experience within which
- 6 months must be in Emergency Medicine at a level above Foundation year 1 (post full registration) and ideally at Core training level or equivalent

### **3. Evidence required**

For trainees in training programmes, a signature confirming that all posts were completed satisfactorily (i.e. Foundation programme sign off) is acceptable evidence. A satisfactory outcome (outcome 1) of the ARCP for CT1 (or higher) is acceptable for trainees. Outcome 5 is only acceptable if there is a subsequent letter confirming evidence has been provided.

For non trainees their current Consultant must confirm that the candidate has completed all of the posts required to meet the eligibility criteria.

The candidate must complete the application form correctly. Full details of each post, grade and specialty must be completed and all time must be accounted for since qualification.

It is not possible for the College to judge the content or experience gained in posts overseas. **The educational supervisor/sponsoring consultant must ensure that the candidate is familiar with the curriculum and standard required**

### **4. Post type**

Each post should consist of continuous uninterrupted service for four months or more.

Total time in part-time posts **must** be equivalent to full-time training.

Locum post – time spent in **full-time** continuous locum posts which are for four months or more in the same department, will be accepted provided that evidence of appraisal, supervision and regular formal education is provided. This full-time locum post will be counted as substantive and the candidate must obtain a signature from the Educational Supervisor or Consultant confirming that they received appropriate training and supervision.

Locums of less than four months full-time working in one department, including multiple short term locums will **not** be accepted as evidence of supervised experience. Locums at less than full-time but in one department may be considered at the discretion of the Dean.

### **Maternity leave**

Candidates are permitted to apply from maternity leave – although the College believes that candidates are more likely to be successful if working within the 4 months prior to the examination.

### **Unemployment**

The College believes that in order to be successful in this examination, candidates would normally be in active clinical practice. Therefore the College will not normally permit candidates to sit the examination who are not in full or part-time employment at the time of the exam or the previous 4 months. Candidates who have been unemployed for more than four months will **not** be permitted to enter the exam. Candidates must have a valid GMC certificate with Full Registration (or equivalent) and have a signed letter from their last Educational Supervisor confirming that they have prepared adequately and are likely to be at the required standard.

Arrangements for candidates who are not working because of temporary illness are covered in the section on special needs.

**N.B. Candidates who are Trainees in ST5 and above are not permitted to enter for the MCEM examination. Non-trainees will not be permitted to take the FCEM examination within 2 years of sitting the MCEM examination (whether or not successful).**

### **Judgement of eligibility**

It is the candidate's responsibility to determine whether they feel that they are eligible to apply for the examinations. The decision (in writing) from the College will not be given until the fully completed application form and the appropriate fee has been submitted and checked by the Examinations Officer. **No advice on eligibility will be given over the telephone.**

### **Application process:**

#### **1. Intention to sit form and deposit**

Only those who submitted an intention to sit form and deposit by 31<sup>st</sup> July 2012 will be permitted to submit an application form.

The College reserves the right to offer places to candidates, who are enrolled on College training programmes and whose progress is dependent upon success in the examination.

Candidates who do **not subsequently** submit an **application form** on time will lose their deposit. They will be put on the waiting list for the next examination providing they apply in time. There are no mitigating circumstances which permit the return of the deposit other than the candidate ill health.

#### **2. The application form**

An application form must be submitted for the examination by the closing date – an intention to sit does not guarantee a place unless a correctly completed application form is received in time.

Candidates **must** apply for Parts B and C at the same diet.

The correct application form must be used – failure to submit a correctly completed application form including signatures, hospital stamp, relevant documentation (sign off, satisfactory ARCP) and correct fee will result in the form being returned and the application rejected. Resubmission will only be accepted if it is before the closing date. The application form will be sent to candidates by email 6 weeks before the closing date.

For first time applicants the application form will be sent on receipt of the intention to sit form.

For those candidates required to resit the examination, a form will be sent for application for resit by the Examination Officers with the results of Part B. Applications for resit will not be accepted on a first timer form.

### **3. Allocation of places**

The total number of candidates for Part B is not restricted, however the total number of places for Part C is restricted. Candidates must apply for both parts of the examination but may only be allocated a place at Part B and may be required to delay Part C if demand is high.

### **4. List of evidence needed**

Application for any part of the examination **must** be accompanied by **all of the required documentation**:

- Form stamped with hospital stamp on appropriate page
  - Certified copy of satisfactory ARCP form (trainees)
- OR**
- Sponsoring consultant confirming experience meets eligibility criteria (non trainees)
  - Correct fees (undated cheque(s) made payable in Pounds Sterling to the College of Emergency Medicine.
  - Completed equal opportunities form
  - Primary medical qualification (**overseas only**)

**Applications will only be considered once all documentation is received, with the relevant fees; incomplete applications will be returned without consideration of eligibility.**

Applicants **must** be eligible for the relevant part of the examination at the time of the examination sitting (not the time of application). This allows candidates to prospectively apply pending completion of the recommended experience. Failure to complete the anticipated experience will disqualify the candidate from the examination. Candidates are however reminded that failure to acquire the relevant experience and thus competencies will jeopardise their chance of success in the examination. Candidates should review the requirements for experience in the eligibility section of these regulations.

### **Application closing dates**

Application for entry to any part of the examination **must** reach the Examination Officer by the published closing date. Applications received after the closing date will be returned and not be considered for eligibility.

**Candidates are strongly advised to submit the application using Registered Post. If you do not receive an acknowledgement letter from the College three weeks after sending your application you are advised to contact the College to ensure that your form(s) has been received. The College will not take any responsibility for application forms that are not received/acknowledged.**

### **Resit candidates**

The whole MCEM must be completed within 4 years of the first sitting of Part A (not date of success in Part A).

After 3 attempts at the Part B examination the candidate must agree a detailed programme of training and preparation that addresses deficiencies and submit this with their resit application form. This programme must be completed before re-application and the educational supervisor must sign that the programme was undertaken satisfactorily.

Candidates may sit the Part C 3 times after passing Part B. Failure at the third attempt will result in the candidate having to resit the Part B examination before being able to attempt the Part C examination again. Candidates who are required to resit Parts B and C must agree a detailed programme of training and preparation that addresses deficiencies and submit this with their resit application form.

The College reserves the right to refuse entry to the examination after further failure following the described additional training. The College does not think it appropriate that candidates submit themselves for the examination repeatedly.

The trainer must ensure that the candidate is familiar with the curriculum and competency standard required.

Resit candidates **must** sit the examination in the country where they originally sat the examination.

### **Validated proof of identity**

Candidates must bring photographic proof of identity to the examination for **all** parts of the examination. Suitable proof of identity must be an official document, such as current passport or driving licence that includes the candidate's name, signature and photograph.

**Candidates will not be permitted to sit the examination if they do not produce photographic identification for registration at the examination.**

### **Confirmation of eligibility**

Candidates will receive written confirmation of eligibility within three weeks of receipt of the application(s) wherever possible.

Candidates whose application is incomplete will have the form(s) returned without consideration of eligibility. Similarly if the correct fee is **not** enclosed, the application will not be considered until the correct fee has been received. Such candidates will not have a place in the examination reserved until full documentation and fees are received.

Failure to re-submit the correct application form before the closing date will result in the application being rejected regardless of whether the candidate is eligible. No mitigating circumstances will be considered. **Candidates are strongly advised to ensure the form is complete and all evidence present on the first submission.**

All correspondence from the College will be by email with a Royal Mail letter to follow where necessary. Candidates **must** provide a working email address and are responsible for updating the College if this changes. Failure to provide notice of change of address or email will not be considered as mitigating circumstances.

### **Preparation for the examination**

Candidates are strongly advised to prepare adequately for the examination by following the curriculum as published and by consulting current Emergency Medicine textbooks.

Preparation for the Part A is considered to require at least 6 months of focussed preparation. Candidates may wish to revisit undergraduate basic sciences and to focus particularly on anatomy and physiology as well as the other basic science components.

Candidates are reminded that the Emergency Medicine encompasses a broad spectrum of cases and that national guidance and evidence based medicine protocols may be utilised in the examination.

Past papers are not available at present. Limited examples of past questions are found on the College website.

Candidates are strongly advised to request feedback on their clinical performance within departments and to undertake appropriate work place based formative assessments to allow them to focus their preparation for the examination.

Trainers have a responsibility to ensure that they are familiar with the standards and competences required to aid candidate's preparation as well as with the format of the examination

### **Withdrawal from examination**

Notice of withdrawal from any part of the Examination must be given in writing (letter, fax or email) to the appropriate Examinations Officer. Candidates will be asked to provide evidence for their reason for withdrawal.

### **Withdrawal prior to the closing date of the relevant examination**

The deposit submitted with the intention to sit form will **not** be refunded unless exceptional circumstances are proved.

### **Withdrawal after closing date**

Refunds or transfer of fees will not be made for any part of the examination where candidates submit their withdrawal request after the published closing date unless there are circumstances deemed as exceptional which can be substantiated. This will normally be in the following circumstances:

- Personal Illness
- Personal Involvement in an accident
- Death of a close relative (parent, sibling, spouse or child; the candidate must prove their relationship to the relative if they do not share the same surname).

Other cases may be considered on their own merit and at the discretion of the Director of Examinations. Documentary evidence is required in all cases.

Any request (accompanied by supporting evidence) must be submitted within four weeks of the Examination date if it is to be considered. No consideration to refunding fees will be given, irrespective of the circumstances, thereafter. Decisions on these cases will be made by the Director of Examinations, whose decision is final.

### **Conduct of the examination**

A senior member of the Examination Department staff at the College office will normally be present throughout the entire period of the examination. Candidates are strongly advised to contact either the Dean or the Administration staff present if they have problems of any kind.

Each paper or section of the examination will be drafted using a blueprint showing its link with the curriculum (**Appendix 2**).

Each question/station will be reviewed by the College Education committee examinations subgroup and an appropriate pass mark set before the examination is held.

Any subsequent adjustment to the examination pass mark after the candidates have sat the examination will be made only at the discretion of the Dean and as a result of the evidence of the performance of new questions or stations used in that examination.

Marking of the examinations will utilise both electronic scanning technology and manual checking. Any candidate who fails any section of the examination will have the marksheets manually double checked before release of the results.

### **Improper conduct by examination candidates**

In the case of improper conduct of an examination candidate as defined below, the College may refuse a candidate entry to the current or future examinations.

Improper conduct is defined as <sup>1</sup>:

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.

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, including passing information about the contents of the Part C to candidates on subsequent days of the same diet,
- refusing to follow the instructions given by examiners or examinations staff concerning the conduct of and procedure for the examination. For example, any candidate continuing to write after the bell at the end of a written examination will be immediately disqualified.

Removing or attempting to remove from the examination any confidential material relating to the conduct of the examination.

Obtaining or attempting to obtain confidential information concerning the examination from an examiner or examination official.

Passing confidential information on the content of the examination to a third party.

<sup>1</sup> This list is not exhaustive.

In accordance with its Standing Orders, in cases of serious misconduct not relating to the examination, the College may 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.

In the event of suspected improper conduct, the Dean of the College must, in conjunction with the Examinations Manager instigate an enquiry. The results of this enquiry must be made available within 30 days of the examination and be reported to the E & E Committee. In the case of serious misconduct, the College may decide to refer the case to the GMC.

Appeals are not allowed against disqualification.

### **Equal opportunities**

The College of Emergency Medicine aims to make every effort to provide an environment for candidates that is free from discrimination. It is the policy of the College that no candidate receives less favourable treatment than another on the grounds of age, gender, sexual orientation, marital or parental status, race or ethnic origin, colour, creed or religion, disability, political belief or social class or other irrelevant distinction. The College aims to assess candidates on the basis of merit, competency and potential.

To achieve this, the College has implemented the following strategies:

- formal mechanisms for training examiners
- improved equal opportunities awareness for departmental staff with regard to examinations practice and service
- monitoring admissions and examination results in relation to changes in the candidate population profile
- monitoring of:
  - modes of assessment
  - examiner behaviour
  - examiner population profile
- a review of results and appeals procedure
- review of policies and practices for fairness and relevance
- special arrangements policy for candidates with disabilities and/or other specific requirements
- policy for consideration of candidates' exceptional circumstances

The College is committed to inclusivity and promoting a diverse workforce within the specialty. Candidates are therefore required to complete an equal opportunities monitoring form. Personal details of candidates will be kept confidential in line with the data protection act. The College monitors success of different groups as part of the examinations process Quality Assurance.

The College will not accept behaviour from staff, members, examiners or candidates, which constitutes sexual or racial harassment or that which results in unlawful discrimination on any grounds. The College adheres to the provision for the protection of the rights of the individual within the following legislation:

- *The Sex Discrimination Act – 1976/1986*
- *The Disability Discrimination Act – 1995*
- *Special Educational Needs and Disabilities Act 2001*
- *The Race Relations (Amendment) Act – 2000*
- *Data Protection Acts 1984 and 1998*

The College maintains the right to discriminate lawfully in the interests of the medical/dental profession and this policy encompasses any regulations applied by relevant statutory or regulatory bodies such as the General Medical Council and General Dental Council.

## **Results**

The pass mark is set for each examination diet before the diet commences.

Examiners are invited to confirm the pass mark after marking the examination and further adjustment may be made in the light of the cohort performance on marker questions or stations.

The examination results are published on the College website showing the candidate number and pass or fail.

The Part A and B results will normally be published two weeks after the date of the examination.

The Part C results will normally be published three weeks after the last day of the examination.

## **Post Examination feedback**

The College is committed to providing summary feedback to unsuccessful candidates in a way that it can be used by candidates and their trainers to prepare the candidate for the next attempt. Successful candidates will not receive feedback.

Feedback will be limited to a list of areas in which the candidate performed poorly and will normally be available four weeks after the examination results have been published.

For the Part A examination this will describe the performance of the candidate in specific areas of basic sciences.

For the Part B examination the candidate will be given information on their overall performance relative to the pass mark and to the rest of the cohort.

For the Part C examination the candidate will be informed which stations he/she failed but will not receive detailed information on performance to either the candidate or their trainer.

No marksheet or documentation regarding the examination will be released to the candidate or their trainer.

The College will not under any circumstances release any additional information to candidates on their performance.

### **Grounds of appeal against the examination results**

Candidates who wish to make representations with regard to the conduct of the College examinations must do so in writing within 30 days of the last day of that section of the examination on that diet.

Appeals will be considered if they allege misadministration, bias or impropriety whether in the conduct or in the determination of the result of the examination. Appeals disputing the academic judgment of the examiners **will not** be considered.

Appeals will only be considered after the remainder of the examination is completed and the results released.

The full examination appeal process is available on the College website.

### **Provision of services for candidates with special needs**

The following table indicates the special provisions available for candidates with special needs. Any candidate who wishes to have special provision made must indicate the requirements at the time of application. The responsibility for requesting special modifications rests with the candidate. Candidates must provide a report from a relevant professional outlining their specific needs or adjustments required. The candidate must confirm that their trainer and/or head of school of emergency medicine is aware of their special requirements and is supportive of their application for the examination.

Candidates should note that there is **no** provision for extra time in OSCEs.

In general, candidates who are **not working** at the time of the examination due to temporary ill-health are considered to be ineligible for the examination and will need to submit written medical evidence to the Dean that they are able to take the examination if they wish to sit.

Candidates who are on sick leave from their employment at the time of the examination will not ordinarily be permitted to sit the examination, as the College considers this to be an eligibility exclusion criterion.

### **Pregnancy – examination deferral**

A deferral, with no financial penalty, may be permitted to a candidate supplying an appropriate medical report which satisfies the Dean indicating that:

- a) the candidate has any pregnancy related problems or illness and/or
- b) the candidate's confinement is due shortly before or around the date of the examination.

In such circumstances a deferral will be permitted and no further fee will be required including the deposit for intention to sit.

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. Details of the candidate's expected week of confinement should be notified to the College and where possible, at the time of the application. Deferral because of a spouse's confinement is not normally granted.

Each case will be assessed by the Examinations Manager together with the Dean. Candidates will be informed in writing of the outcome of their application for special consideration and of the arrangements that will be made to meet their needs.

Category	Special Provision(s)		
	Separate Rooms	Extra Time	Other
Visual Impairment	Yes	Yes in written only	<ul style="list-style-type: none"> <li>All written material whether in written examinations, orals or clinics enlarged, where possible</li> <li>Possible use of a computer in written examinations</li> <li>Possible use of a scribe to transfer MCQ answers to optically marked sheet</li> <li>Additional lighting</li> <li>Any photographic material should be enlarged</li> <li>Inform relevant examiners in orals and clinics</li> </ul>
Hearing Impairment or deafness	Yes (for orals)	No	<ul style="list-style-type: none"> <li>Written instructions issued at the start of an examination or seated near front of examination hall</li> <li>Sign language interpreter</li> <li>Inform relevant examiners</li> </ul>
Speech Impairment	No	Possibly (in orals only)	<ul style="list-style-type: none"> <li>Inform the relevant examiners in orals</li> </ul>
Dyslexia	Yes	Written only	<ul style="list-style-type: none"> <li>All written material in 'dyslexic friendly' fonts</li> <li>All written material on appropriately coloured paper if required</li> <li>Use of computer in essay style examinations</li> <li>Additional lighting</li> <li>Specific formatting</li> <li>Double marking of scripts</li> </ul>
Mobility problems which may: <ul style="list-style-type: none"> <li>Restrict access to certain rooms or ability to carry out clinical examination of patients</li> </ul> Reduced ability to sit for long periods e.g. back or neck problems or later stages of pregnancy	Yes if access difficult  Yes	No  Yes	<ul style="list-style-type: none"> <li>Ensure access is possible for all rooms and appropriate toilet facilities are available</li> <li>Adjustable chair</li> <li>In clinical examinations – patients in adjustable beds</li> <li>Adjustable chair</li> </ul>
Difficulties with writing e.g. Arthritis or RSI	Yes	Yes written only	<ul style="list-style-type: none"> <li>Use of a Scribe appointed by the College</li> </ul>
Reduced stamina e.g. ME	Yes	No	<ul style="list-style-type: none"> <li>Timetable oral or clinical examination in morning</li> </ul>
Dietary problems e.g. Diabetes			<ul style="list-style-type: none"> <li>Allowed to bring food/drink into the examination hall</li> <li>Provide refreshments at orals &amp; clinical examinations</li> </ul>

Mental Health Problems such as: <ul style="list-style-type: none"> <li>• Claustrophobia</li> <li>• Agoraphobia</li> <li>• Panic attacks</li> </ul>	Yes Yes Yes	No No No	Provision of a separate room in case the candidate suffers an attack and behaves in a manner that would disrupt the other candidates
Mitigating circumstances: <ul style="list-style-type: none"> <li>• Temporary conditions due to illness or injury on the day of the examination</li> <li>• Disruption during the examination</li> </ul>	No Possibly  No	No Possibly (Written only)  No	Possible effect on performance <ul style="list-style-type: none"> <li>• May need scribe or disabled access depending on nature of injury</li> </ul> Possible effect on performance <ul style="list-style-type: none"> <li>• To be considered by the examiners at the adjudication stage</li> </ul>

**Candidates should note that there is no extra time in OSCEs.**

## **Data Protection**

All personal information held by the Examinations Office of the College will be held in accordance with the Data Protection Acts of 1984 and 1998. Identifiable data collected will not be released outside of the College without the candidates consent.

## **Election to Membership**

Persons holding a medical qualification and who have been successful in the membership examination established by the College, may be elected to Membership of the College by examination by the College Council.

## **Annual Subscription fees**

Every Member shall pay each year such annual subscriptions as may be determined by the Council of the College. Failure to pay the relevant subscription will render the post-nominals "MCEM" invalid.

## **Diploma Ceremonies**

New Members will be invited to a Ceremony for the presentation of a diploma.

## **Alison Gourdie Medal**

Each year, the candidate with the best overall performance from all successful candidates in both sittings will receive the Alison Gourdie Medal, awarded at the annual College Scientific Meeting.

## Appendix 1:

Candidates resident overseas may currently sit the MCEM examination in the following locations:

Location	Candidates resident and working in:
India	India, Pakistan ,Hong Kong, Singapore,
Singapore	Hong Kong, Singapore, Australia, New Zealand, Far and Middle East countries, Pakistan
Egypt (Part A only)	Egypt and all Africa, Middle East
Ireland	UK and Ireland
UK	UK and Ireland, America, Europe

## Appendix 2: Examination blueprint EXAMPLE

Each examination is planned using a blueprint. Each area of emergency medicine will be represented equally within the examination.

	SAQ	OSCE
<b>Resuscitation</b>		Arterial haemorrhage
<b>Anaesthetics/ pain</b>	Entonox use	
<b>Wound management</b>	Pre-fibial laceration	Suture
<b>Major trauma</b>	Facial fracture	flail chest ABC moulage
<b>Musculoskeletal trauma</b>	high pressure injection injury	apply POP for colles fracture
<b>Urology</b>		Male catheterisation
<b>STD</b>		Genitourinary history in a male
<b>Eye problems</b>	Painful red eye	
<b>ENT problems</b>		Demonstrate an auricular block
<b>Dental emergencies</b>	Dental abscess	
<b>Gynaecology</b>		Retrieve a lost condom
<b>Obstetrics</b>		
<b>Cardiology</b>	Aortic stenosis complications	diagnosis management and referral STEMI
<b>Respiratory</b>		examine respiratory system
<b>Neurology</b>	alcohol withdrawal seizures	Examine cranial nerves
<b>Hepatology/gastroenterology</b>		
<b>Toxicology</b>	cocaine chest pain	
<b>Fluid and electrolytes</b>		Discuss fluid administration with junior doctor
<b>Acid base</b>	salicylate OD	
<b>Renal disease</b>		
<b>Diabetes and endocrine</b>	HONK	
<b>Haematology</b>		Sickle chest history
<b>Infectious diseases</b>		
<b>Dermatology</b>	HSP and complications	
<b>Rheumatology</b>		arthritic hands
<b>Neonatology</b>	neonatal conjunctivitis	
<b>Paediatrics</b>	croup management	choking child arrest
<b>Environmental</b>	lightening injury	
<b>Oncology</b>	Febrile neutropenic	
<b>Psychiatry</b>		manic history
<b>Major incidents</b>		
<b>Legal aspects</b>		Complaining relative
<b>Breaking Bad News</b>		Break bad news to relative