

Assessment update

The UK Medical Licensing Assessment.....would you pass finals if you sat them now?

Some of you will have heard about the new Medical Licensing Assessment(UKMLA) in Andrew Blythe's presentation at the recent Festival of Education. Someone asked if they would pass it which got me thinking. Read on for more info about the exam, including some CPD for you, and tips on how we can help our students prepare for it.

What do you need to know?

The MLA is the new national finals exam that will be coming into effect for all medical students due to graduate in 2025. It is currently being piloted, and it will be used in Bristol and other medical schools who sit finals in their penultimate year, in the coming academic year.

The UKMLA has been produced to make sure that UK medical graduates can demonstrate that they meet a common and consistent threshold for safe clinical practice. International medical graduates will also be required to pass it from early 2024, as it will replace the Professional and Linguistic Assessments Board test (PLAB).

It's a 2-part assessment made up of an Applied Knowledge Test and a Clinical and Professional Skills Assessment. Medical students will have to sit both parts on set dates chosen by their medical school. The principles are that the assessment is inclusive and integrated: combining specialties and looking at overall outcomes needed by graduates. Equally it is authentic – in that it tests what they will have to do as junior doctors. The exams are blueprinted to the (very detailed) MLA content map which you can view [here](#).

Applied Knowledge Test (AKT)

This exam is being created by the Medical Schools Council, with involvement from all medical schools. It is approved and quality assured by the GMC and delivered across the country by the medical schools. Design of this exam has been ongoing over recent years, with robust testing and piloting. The AKT has a common format, test standard, delivery process and policy framework. There are two papers for this on-screen (computer) exam. Each contains 100 single best answer questions. The specialties are spread across the papers with General Practice, Radiology and Pharmacology spanning both.

Developing the exam

With a few other colleagues, I am an item writer and do standard setting for the AKT. It has been really interesting to see the process of developing a new exam. As item writers, we strive to ask questions about common scenarios the students will encounter as F1 doctors. It can be difficult to find four good distractors (wrong or less right answers). We aim for questions which test not only knowledge, but also higher skills such as application of knowledge and synthesis. As a reviewer, my clinical knowledge has been tested, especially reviewing the basic science and Anaesthetics questions! In standard setting, it is interesting to see the differing views of specialists and generalists, and the biggest challenge is benchmarking for a day 1 F1 doctor.

Clinical & Professional Skills Assessment (CPSA)

This will be delivered by medical schools and will be similar to our current Year 4 finals OSCEs which many of you may have already been involved with. The overarching themes are readiness for safe practice, delivering person-centred care and managing uncertainty.

UK medical graduates will still be required to sit the **Situational Judgement Test (SJT)** but may, in time, not need to sit the **Prescribing Safety Assessment (PSA)** (as this is planning to be incorporated into the UKMLA).

How can you help your students prepare for the AKT?

- Knowing about it will really help you discuss it with them, assist in their preparation and provide support. This is a high stakes exam so understandably some students find it stressful
- Early learning needs analysis with regular reviews and focused learning where possible
- Ask them questions or even better, write some of your own single best answers questions or get them to write some
- Go through sample questions together - CPD for you as well!
 - Discuss best of five exam tips (see below) and keep an eye on the time – aim for 90 sec max per question

Now it's your turn

The Medical Schools Council AKT Exam Board has put together a 200-item practice exam (2 x 100 item papers) to help students prepare for the AKT. This exam has been designed to reflect the style and type of question that students will encounter when the final exam goes live. You can access it [here](#).

You could sit the paper for CPD and reflect afterwards for your appraisal. Here's some tips, followed by some questions to get you started.

Single Best Answer exam question tips

- Cover up the answers whilst you carefully read the stem
- Try to anticipate the correct answer before you are distracted by other options
- If you see the response that you anticipated, mark it and then check to be sure that none of the other responses are better. If you do not see a response that you expected, then work backwards from the ones that seem 'most wrong'
- Remember that you are looking for the **single best answer** (more than one may be correct)

1. A 27 year old woman has muscle weakness which is worse on exercise. When asked to count from one to 100 her voice progressively becomes weaker. She has bilateral ptosis.

Which pathophysiological process is most likely to be responsible for this disorder?

- A. Autoimmunity
- B. Genetic disorder
- C. Infarction
- D. Malignancy
- E. Meningeal infection

2. A 35 year old man visits his GP with a severe frontal headache of 12 hours' duration. It started suddenly, reaching maximum intensity within 1 minute. He has associated nausea. At the onset of his headache he noticed a small hole in his vision. This hole started centrally, moved to the edge of his vision and has now resolved. The headache is worse in bright light. Paracetamol has not helped his pain

Which feature should prompt immediate referral to hospital?

- A. Abrupt onset
- B. Failure to respond to paracetamol
- C. Nausea
- D. Photophobia
- E. Visual disturbance

3. A 73 year old man is in hospital with a chest infection. He has several episodes of confusion, anxiety and aggression, during which he attempts to leave the hospital. He is convinced he is being 'spied on' by the doctors and nurses and insists that 'cameras have been installed in my room'. These episodes alternate with periods of marked lethargy, which become more pronounced towards the evening.

His temperature is 37.8°C, pulse rate 100 bpm, BP 110/73 mmHg and respiratory rate 12 breaths per minute.

Which is the most likely diagnosis?

- A. Alzheimer's dementia
- B. Bipolar disorder
- C. Delirium
- D. Lewy body dementia
- E. Schizophrenia

4. An 80 year old man has sudden onset of loss of vision in his right eye. He has hypertension and a previous stroke. His visual acuity is hand movements only in the right eye and 6/9 in left eye. The right eye has an afferent pupillary defect; left eye pupil responses are normal. On fundoscopy there is a red spot at the right macula.

Which is the most likely diagnosis?

- A. Anterior ischaemic optic neuropathy
- B. Branch retinal vein occlusion
- C. Central retinal artery occlusion
- D. Macular degeneration
- E. Retinal detachment

5. A 24 year old man attends the Emergency Department after 2 days of vomiting. He has type 1 diabetes. He is drowsy but maintaining his airway. His pulse rate is 100 bpm, BP 90/60 mmHg, respiratory rate 30 breaths per minute and oxygen saturation 96% breathing air.

Investigations: Blood capillary glucose 32 mmol/L

Blood capillary ketones 6.2 mmol/L (<0.6)

Venous pH 7.15 (7.35–7.45)

Which is the most appropriate initial treatment?

- A. Intravenous 0.9% sodium chloride
- B. Intravenous 1.26% sodium bicarbonate
- C. Intravenous antibiotics
- D. Intravenous insulin
- E. Subcutaneous insulin

Answers on the next page!

If you would like to read more then please see [here](#)

<https://www.medschools.ac.uk/studying-medicine/medical-licensing-assessment>

Or email me lucy.jenkins@bristol.ac.uk

Answers: 1 A. 2 A. 3 C. 4 C. 5 A.