



good performance, as well as areas where there is room for improvement. Comments are referenced to the 2019 RCGP curriculum. Many topics appear in several places throughout the curriculum, and we have not listed all of these.

## **Improvements**

In AKT 43, candidates performed better than previously in questions related to:

- Recognition of common and important drug side effects (Improving quality, safety and prescribing). However, this improvement was patchy. (See below)
- Recognition of symptoms which might indicate an underlying cancer (People with Long-term Conditions including Cancer). This was a continued improvement from that noted after AKT 42.
- Diagnosis of acute abdominal pain (Gastroenterology)

## **Areas causing difficulty for candidates**

### Improving quality, safety and prescribing (Professional Topic)

On several occasions in the past, we have fed back on safe prescribing. (See our weblink 'feedback report for the past five years' for details of the areas which have caused most difficulty). In AKT 43, candidates were not aware of the significance of findings indicating serious side effects from DMARD drugs. Prescribing of DMARD drugs often takes place across the primary/secondary care interface and GPs should be particularly alert to monitoring requirements and possible safety concerns requiring prompt action.

### Ear, nose and throat, speech and hearing (Clinical Topic)

In AKT 43, candidates were uncertain about the primary care monitoring and management of hearing loss in children.

### Gynaecology and Breast (Clinical Topic)

After AKT 40, we fed back on lack of knowledge around HRT. In AKT 43, candidates had difficulty with options for treating menopausal symptoms, in the presence of other important and common underlying conditions. We strongly encourage candidates who have had less clinical experience around women's health issues to identify these as learning needs where specific training or updating may be required.

### Neurology (Clinical Topic)

AKT 43 presented some challenges to candidates regarding neurological problems. Neurology can be challenging in day-to-day practice too, and perhaps warrants a little more attention in AKT exam preparation. Candidates are expected to be aware of red flag symptoms and possible underlying diagnoses, including when this relates to less common conditions. Candidates are also expected to have an awareness of the significance of common neurological examination findings relating to underlying diagnoses/lesions. This might include integrating common imaging results with neurological findings.

### Respiratory health (Clinical Topic)

In AKT 43, candidates had some difficulties with asthma management. We remind candidates to read questions carefully. Where guidelines for a condition exist, it is

important to be clear which section of the guideline might apply to the scenario. For example, is this a new diagnosis, acute exacerbation or routine review of sub-optimal asthma control?

### **Past 12 months (AKTs 41-43)**

We have highlighted a need for improvement in two of the last three sittings of the AKT exam regarding:

#### Children and Young People

The feedback has centred on the very important topic of safeguarding, including consent and capacity.

#### Gynaecology and breast

Management of menopausal symptoms, including the use of HRT and other options, and the management of irregular periods were the areas of difficulty.

#### Neurology

This includes diagnosis of important neurological conditions, red flags, and interpretation of examination findings.

We hope that candidates will not overlook these and other important areas in their exam preparation, guided by the GP Curriculum, particularly the Knowledge and Skills sections within each Topic Guide.

We now publish on the AKT website a summary of feedback over the last five years. This allows candidates to have an “at a glance” overview of areas where there is room for improvement, without the need to go back over 15 separate, archived AKT reports.

### **Misconduct**

Although misconduct in professional examinations is rare, we would warn candidates that it is taken very seriously and a full investigation of any allegation will be undertaken, including reviewing CCTV footage taken in the test centres. Please be mindful to carefully follow the instructions outlined by Pearson VUE test centre staff.

The MRCGP examination regulations and the code of conduct for the AKT and RCA assessments give detailed information about misconduct, including the possible penalties for misconduct, in the expectation that candidates will exercise an approach consistent with standards expected by the General Medical Council. See [Regulations for Doctors Training for a CCT in General Practice](#) for more details.

**AKT Core Group October 2021**

**Comments or questions to [exams@rcgp.org.uk](mailto:exams@rcgp.org.uk)**

## General advice and feedback points

- We realise that there are areas throughout the curriculum with which some candidates are less familiar or experienced than others. This may be due to differences in undergraduate or postgraduate training and the many varieties of clinical experience. We encourage candidates who are in this position, for example, around women's health issues, data interpretation, the application of basic medical statistics, evidence-based practice, general practice organisation and management, or any other topic, to identify these as learning needs where specific training or updating may be required.
- We remind candidates that the AKT tests for appropriate and cost-effective management, so sometimes the correct answer is **not** to investigate, prescribe or refer. Candidates find this option a difficult one to choose, as is sometimes the case in clinical practice.
- Some questions may relate to clinical situations such as management of mildly abnormal blood test results. As described above, it may be that significant additional testing is not required and this may be the correct answer option.
- We will ask about abnormal examination findings, including significant retinal examination findings. This question format will generally be photographs. We may also ask about normal findings, and some of these will be illustrated by photographs without any abnormality.
- We may ask about investigations commonly undertaken in secondary care after patients are referred, for example, for investigation of suspected cancer. We do not expect candidates to have detailed knowledge of these investigations, but we would expect that candidates have sufficient awareness to be able to respond to patient queries about possible further tests when a referral is discussed and agreed.
- We also remind candidates that drug choices should be those that reflect evidence-based, widespread, and accepted practice in primary care, and not those that a secondary care doctor with specialist skills and experience might sometimes make. There may be questions involving drug dose and volume calculations, where the maths will not be complicated. Please reality-check your answer, especially with regard to the volume to be administered. We receive answers to these calculations which are quite clearly wrong and by dangerously large amounts.
- Regarding non-clinical areas of the exam, overall, most candidates do well in questions on data interpretation and general practice administration. We use a range of resources to test data interpretation, including the types of graphs and tables regularly sent to practices from local primary care organisations and health boards. We would encourage all candidates, and in particular those who may feel they have gaps in their knowledge in this area, or whose training has not included data interpretation, to use the following 2019 resource produced

by the AKT group <https://www.rcgp.org.uk/training-exams/mrcgp-exam-overview/-/media/B4406D5D2E9A492B86AD74BC3FEFD08B>.

- Safeguarding issues will be tested in the AKT exam and candidates are reminded to regularly engage in participatory and non-participatory learning activities. Training requirements for child and adult safeguarding are detailed elsewhere (<https://www.rcgp.org.uk/training-exams/training/mrcgp-workplace-based-assessment-wpba/cpr-aed-and-child-safeguarding/child-and-adult-safeguarding.aspx>).
- The GP curriculum gives further guidance about professional and administration topics, and GP trainers can provide useful help to candidates by sharing the content of their administrative workload with trainees, many of whom may be unfamiliar with the range of administrative tasks with which GPs engage.
- We will continue to test on new and emerging knowledge relevant to primary care, and that includes areas such as COVID-19.
- Almost all candidates answer every question in the AKT exam. We hope that candidates have a good level of knowledge and can apply this knowledge confidently when selecting answers. However, there is no negative marking in the AKT exam and marks are not deducted if the chosen answer option is wrong.