OSCE Blueprint for National PA OSCE

Exam structure

The PA National Exam OSCE comprises a 14 station exam

- stations are 8 minutes long plus 2 minutes reading time.
- each one will be equally weighted
- all station have a total of 35 marks

The total achievable marks for an exam will therefore be 35 x 14 = **490 marks**

The pass mark will be calculated during the day using borderline regression and could potentially vary from eg 40% (for a difficult station) up to as high as 80% (for a straightforward station). The passmark for each station or the exam overall will not be known in advance of the exam being delivered.

Candidates must pass the total calculated passmark for the exam **AND** at least 10 out of 14 (71.4%) of the individual stations. If one or more station is dropped (eg due to procedural irregularity) then the students must pass still pass in excess of 70% of the remaining stations.

How was the content of the exam determined?

As Physician Associates are a relatively new profession in the UK with a rapid expansion in health education institutions and students the exam subcommittee perceived a need for consultation prior to determining the examination blueprint. In February 2017 a national survey was conducted with two separate groups of respondents

Group 1: Existing qualified PAs working in the UK and those working with them (circulated via email to the database from the managed voluntary register and selected individuals at FRCP or forwarded from PAs to their supervisors. Response n= 71 (n = 54 of whom were qualified PAs)

Group 2: Health education institutions currently running a PA course response n=35 providing representation from 24/27 HEIs.

An inclusive list of possible OSCE areas in consultation skills, procedural skills, examination skills and emergency management skills were presented and group 2 were asked if their course would prepare a student to demonstrate this skill while group 1 were asked if each skill was necessary for a newly graduating PA joining the workforce. There was also free text data collected to qualify each skill and a section asked about additional skills areas not on the list. Finally there was a question that asked respondents what weighting (percentage of each station type) should be presented at the national OSCE.

The results suggest there was broad agreement about the skills that should be tested, with minimal differences between the two groups of respondents.
Six skills were dropped due to <60% of one or other group rating them as important/taught:

- new-born baby checks
- handheld Doppler ultrasound examination/ABPI
- normal birth
- x-matching blood and transfusion management
- setting up an IVI
- strapping of musculoskeletal injury

There were no important omissions identified (a few were listed but none by more than one respondent).

The balance of OSCE stations in the exam question was clearly not understood by all respondents (some queried it, some left it out, some answered 100% for all subcategories and many did not have their numbers add up to 100%) however for those who appeared to understand the question the average weighting for each skill was:

- 40% consultation skills (5-6 stations)
- 30% examination skills (4-5 stations)
- 20% procedural skills and (2-3 stations)
- 10% emergency management (1-2 stations)

Blueprint List

Consultation Skills (approx. 40%)

- Focussed diagnostic history
- Information giving
- Shared decision making (explaining and planning incorporating patient perspective)
- Motivational interviewing (eg stop smoking)
- Triadic consultation (balancing a consultation with more than one informant eg parent and child, husband and wife, patient and nurse)
- Dealing with conflict, complaint
- Breaking Bad news
- Telephone communication (peer to peer handover, presenting to a supervising clinician, referral to a specialist or interdisciplinary)
- Written communication eg recording in the clinical record eg examination findings, discharge summary, ward round notes

Examination Skills (approx. 30%)

- Vital Signs (Temp, pulse, resp rate, saturation monitoring and BP) including EWS / MEWS type score calculation
- Nutrition eg calculating BMI
- Lumps and Bumps (describe and diagnose)
- Hand examination
- Spine cervical
- Spine lumbar
- Hip
- Knee
- Shoulder
- Rashes and skin disorders
- Lymphoreticular system
- Cardiovascular examination
- Peripheral vascular examination
- Respiratory examination
- Diabetic foot examination
- Neurological and ophthalmological examination of eyes

- Direct Ophthalmoscopy
- Cranial nerve exam
- Peripheral Nervous system (limbs)
- Neurology balance examination eg tremor / cerebellar system
- ENT - auroscopy
- ENT - hearing/ tuning forks
- ENT - neck examination
- Abdominal examination
- Rectal examination/ genitalia /hernia examination
- Pregnant abdomen
- Breast examination
- Examining children
- Developmental assessment for children
- Mental State Examination
- Verification of death (NB not certification, checking for signs of life)
- Clinical images various eg clubbing, endocrine, equipment etc

Procedural skills (approx. 20%)

- Handwashing
- Scrubbing gloving and gowning and use of PPE
- Urinalysis and interpretation
- IM injection
- SC injection
- Venepuncture
- Sterile fields and blood cultures
- Performing an ECG
- Checking peak flow / spirometry
- Arterial blood gas sampling
- Catheterisation male and female
- Cannulation
- Suturing (single interrupted suture for skin)
- Speculum and cervical cytology
- Preparation iv drugs
- Manual handling of patients
- Nasogastric tube insertion and position checking
- Wound care and dressings
- Obtaining ENT and skin swabs

• Urine dipstick pregnancy testing
• Capillary blood glucose monitoring

Emergency management (approx. 10%)
• BLS
• BLS in childhood/ chocking
• Intermediate life support (airway management and simplearrythmia recognition and management)
• Apply oxygen and nebulisers
• SIMMAN scenarios
• ABCDE approach to sick patient
• Initial seizure management
• Recognition and reversal poisoning eg opiates
• Manages electrolyte disturbance eg hyperkalaemia, hypoglycaemia
• Fluid resuscitation in shock eg blood loss
• Sepsis management
• First aid eg nose bleeds