



Exam Expertise

MRCS Part A

Opinion, advice and insight from the January 2019 Exam

The MRCS Part A examination (2019/1) took place on 9 January 2019. The results were released on 29 January 2019.

49% of Pastest customers have reported passing the exam, which is **9% higher than the overall pass rates** commonly reported by the surgical Royal Colleges (not yet disclosed for this exam).

On average, successful candidates answered over 3,500 questions in the Pastest resource with unsuccessful candidates averaging 2,725 questions answered.

Hardest topics in
Jan 2019 Exam

Orthopaedics
Vascular
Physiology

(According to Pastest users)

Paper 2 was painful!

For this exam sitting, the majority of candidates were in agreement that Paper 2 (Principles of Surgery in General) was definitely the trickier of the two papers.

This was mainly due to vignettes being longer than in Paper 1, meaning some candidates struggled to answer all the questions in the two-hour time limit.

“Time management was a real problem in Paper 2 in particular - I rushed through questions more than I would have liked!”

Heavy on Orthopaedics

Another reason why Paper 2 gave many candidates a headache was because of the high volume of orthopaedics questions.

This speciality was also regarded as the hardest in the exam, with one Pastest user remarking that **“Paper 2 had some very specific ortho clinical questions and brachial plexus injuries that took me by surprise!”**

Average Qs
answered by
successful
candidates

3,588

Watch out for negative questions

Negatively-phrased questions - e.g. ‘what is the LEAST likely diagnosis’ - do crop up in the MRCS Part A exam, albeit infrequently. This is despite such questions being deemed poor practice in undergraduate medical exams.

There is a need, therefore, to read the question very carefully and right to the end, so you don’t unwittingly opt for the ‘most likely’ rather than ‘least likely’ diagnosis (although, helpfully, the negative phrasing is either bold or underlined in the questions).



“I didn’t pay much attention to **negative questions** until I saw some in the Pastest bank - and then similar questions appeared in the exam!”

Know your abbreviations and acronyms

Common acronyms such as ‘MRI’ and ‘CT’ aren’t spelt out in the exam - which shouldn’t cause candidates too many problems - however a less common acronym or abbreviation is sometimes thrown in without being written out in full. Don’t get caught out!

Most frequently searched for terms in MyPastest

Thyroid



Breast



Anatomy



Prepare for testing tables

MRCS Part A questions can often include a table of results to examine. In the January 2019 exam a ‘big table’ (as described by candidates) appeared in a couple of questions concerning Arterial Blood Gas.

This table was particularly tricky to decipher so the more questions containing tables you encounter in your revision, the more prepared you’ll be for the exam.

“I vividly remember this **huge table of blood results** with thick, black lines. It was massive, a real data overload and a struggle to make sense of!”

Get ready for a marathon, not a sprint

The MRCS Part A exam is five hours long, comprising a three-hour Applied Basic Sciences paper and a two-hour Principles of Surgery in General paper. That’s 300 questions to answer. All on the same day.

If you’re going to be successful you’ll need to pace yourself and consistently hit the required rate of one question per minute (candidates can’t leave in the first 90 minutes of the Applied Basic Sciences paper or the first 60 minutes of the Principles of Surgery in General paper, anyway, so there’s no rush!).

Average mark of Pastest users who answered **3,000+ Qs**



Summary

- Practise answering questions against the clock to get ready for the time-pressured Paper 2 and complex tables
- Don’t leave any stone unturned when revising as the volume of questions in certain specialties may be higher than expected
- Read each question in full to avoid being tripped up by negative phrasing
- Swot up on abbreviations and acronyms just in case a less common term is referred to without being written out in full

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