

# Membership of the Faculty of Travel Medicine (MFTM)

## **Guidance to Candidates for Part A and Part B examinations**

January 2017

(Updated November 2018)

C	ontents	Page No.
1.	General information – entry to the examination	1
2.	Part A written examination (including syllabus)	1
3.	Part B objective structured clinical examination (OSCE) (including syllabus)	2
4.	Issue of examination results	5
5.	Sample questions and sample OSCE mark sheet	
	Part A	5
	Part B	6

## 1. General Information

## 1.1 Examination entry

The Part A and Part B examinations are scheduled to take place at a single diet and are held within a few days of each other.

Candidates may apply to enter as follows:

- Part A and Part B examinations being held within a single diet both parts to be sat in our Glasgow centres;
- Part A only in the UK, our examination centre is in Glasgow: internationally, candidates may submit a request to sit the examination in their country of residence: see the 'Sitting Part A in international centres' document on the MFTM page on the College website;
- Part B only our examination centre is in Glasgow.

Candidates wishing to enter Part A only or Part B only may sit these examinations in any order.

## 1.2 Eligibility

Eligibility requirements are as stated in the Examination Regulations. At the time of application, in addition to a completed and signed application form, all applicants must provide required documentary evidence (e.g. primary nursing, medical or equivalent certificate). Details of how to submit acceptable copies of such documents are available in the 'Information for Candidates' section on our website - Applications, Fees and Refund Policy.

## 1.3 Exemption from Part A

Details of acceptable exempting qualifications are as listed in the 'MFTM Exempting Qualifications' document available on the website.

## 2. Part A Written Examination

2.1 The aim of this part of the examination is to test the range of knowledge and understanding that underpins direct patient care. It will cover the range of topics included in the syllabus, as described in more detail below.

Part A takes the form of one written paper of three hours' duration. The paper consists of multiple choice questions, normally with 180 Single Best Answer questions. Each question is worth one mark: there is no negative marking. Candidates are awarded a pass or a fail.

The examination will be conducted in English.

Candidates must have experience in whole-time or cumulative part-time travel health practice of two years prior to entering the examination.

## 2.2 Part A examination syllabus

The subject headings in the syllabus will be tested in roughly the following proportions:

Topics by Group	Topic	Group
Travel advice		Aggregate
Travel Health Issues for Women and Children	<5	
Travellers With Underlying Health Problems and / or Disabilities	<5	
Psychological Issues for Travellers	<5	
The Returned Traveller	<5	
Health Issues for Asylum Seekers and Refugees	<5	
The Impact of Tourism on Host Countries	<5	30
Health Issues Associated With Cruise Travel	<5	
Health Promotion	<5	
Elective Medical Treatment Abroad	<2	
Special Groups of Travellers	<3	
Diseases		
Infections and Epidemiology of Infections	<10	20
Malaria	<10	
Physical hazards		
Health Risks From Excessive Sun Exposure and Solar Damage	<5	
Health effects of Altitude	<5	
The Effects of Travel in a Cold Climate	<5	
Health Risks From Expeditions	<5	30
Geographical Variations in Travel Health Issues	<5	
Health Issues Associated With Flying	<5	
Accidents and Injuries Experienced by Travellers	<5	
Health Issues Associated With Swimming, Snorkelling, SCUBA Diving	<5	
Travel clinics/services		
Providing a Travel Medicine Service	<10	10
Research Methods/ Critical analysis	<5	
Vaccines & vaccination		
Immunisation	10	10
Total	100%	100%

2.3 A sample question can be found at the end of this document.

## 3 Part B Objective Structured Clinical Examination (OSCE)

3.1 The aim of this part of the examination is to test clinical competence by assessing competencies, such as communication skills and knowledge, understanding and management of a range of scenarios.

Part B takes the form of an objective structured clinical examination (OSCE). The examination will normally last up to 135 minutes in total. The stations carry equal marks.

The examination circuit will comprise up to 15 assessed 'stations' and, normally, a few rest stations. Invigilators will be present to escort candidates around these stations in turn, usually spending 8 minutes at each, plus 2 minutes for travel and reading time.

At each of the stations you will be presented with a clinical scenario. This may take the form of:

- A simulated patient who presents for advice
- A scenario that requires interpretation but does not involve a simulated patient (e.g. interpretation of results)

Where a simulated patient is used, an examiner will be present who will observe your Interaction with the patient. An examiner may not be present in those stations without a simulated patient, where you will be asked to read the scenario and write your response. You will not be asked to carry out any active treatment. Candidates should maintain aseptic techniques during the exam and aqueous gel will be provided in each relevant station.

In line with current UK infection control practices the dress code requirements for the clinical examination are as follows:

- Arms to be bare below the elbow
- No jewellery on hands or wrists with the exception of wedding rings/bands
- No tie

An acceptable form of dress would be a conventional short-sleeved shirt/blouse, open at the neck or for a long-sleeved shirt/blouse with the sleeves rolled up throughout the examination. Tee-shirts and polo shirts are not acceptable dress. White coats are not required. Candidates with religious or cultural reasons for not observing this code will be expected to comply with the dress code in those rooms involving the physical examination of patients. For the purposes of visual identification and to facilitate the assessment of non-verbal communication skills and interaction with the examiner and patient, the College reserves the right to require candidates to remove any clothing and/or other item which covers all, or part of, the candidate's face. The College will observe sensitivity in the visual identification of candidates.

The examination will be conducted in English.

Candidates must have experience in whole-time or cumulative part-time travel health practice of two years prior to entering the examination.

- 3.2 The emphasis of the Part B examination is on practical clinical skills including:
  - Taking a detailed history
  - Carrying out a comprehensive risk assessment
  - Demonstrating communication skills (listening and imparting information)
  - Tailoring advice for individuals
  - Determining appropriate interventions
  - Providing advice
  - Counselling
  - Utilising available resources some stations may provide props or prompts
  - Demonstrating respect for the patient's ideas, concerns and expectations.
  - Demonstrating respect for patient's confidentiality and autonomy.
  - Using appropriate language and checking traveller's understanding.
  - Devising an effective treatment plan (evidence-based where possible).

Some stations may have a greater degree of difficulty than others but this will be reflected in the passing standard. You do not have to pass every station in order to achieve an overall pass in the examination.

An example of a structured clinical scenario can be found at the end of this document, along with a sample OSCE mark sheet showing the criteria on which your performance is assessed.

## 3.3 Part B examination syllabus

The subject headings in the syllabus will be tested in roughly the following proportions:

Topics by Group	Topic	Group
Travel advice		Aggregate
Travel Health Issues for Women and Children	<5	
Travellers With Underlying Health Problems and / or Disabilities	<5	
Psychological Issues for Travellers	<2	
The Returned Traveller	<5	
Health Issues for Asylum Seekers and Refugees	<2	41
Health Issues Associated With Cruise Travel	<5	
Health Promotion	<5	
Elective Medical Treatment Abroad	<2	
Special Groups of Travellers	<10	
Diseases		
Infections and Epidemiology of Infections	<10	20
Malaria	<10	
Physical hazards		
Health Risks From Excessive Sun Exposure and Solar Damage	<5	
Health effects of Altitude	<5	
The Effects of Travel in a Cold Climate	<2	
Health Risks From Expeditions	<5	30
Geographical Variations in Travel Health Issues	<5	
Health Issues Associated With Flying	<10	
Accidents and Injuries Experienced by Travellers	<2	
Health Issues Associated With Swimming, Snorkelling, SCUBA Diving	<5	
Vaccines & vaccination		
Immunisation	10	9
Total	100%	100%

Competencies by Group	Group
	Aggregate
Good Clinical Care	26%
Communication Skills	20%
Maintaining Good Clinical Practice	3%
Maintaining Trust	12%
Working With Colleagues	10%
Teaching and Training	1%
Key Areas of Practice	28%
	100%

## 4 Issue of Examination Results

### 4.1 Part A written paper

Examination results will be publicised on the College website approximately fifteen working days after the examination. Sufficient time is required after the examination to enable analysis of candidate responses by an external assessment specialist, followed by consideration by the examination board. Results will also be sent to you by post following publication on the website. If you have been unsuccessful, you will be given feedback on your performance in your result letter.

#### Part B OSCE 4.2

Examination results will be publicised on the College website approximately fifteen working days after the examination. Results will also be sent to you by post following publication on the website. If you have been unsuccessful, you will be given feedback on your performance in your result letter.

College website: www.rcpsg.ac.uk

#### 5. **Sample Questions**

#### 5.1 Part A written examination - single best answer question

A 34-year-old healthy woman who is 24 weeks pregnant comes for advice regarding travel to Kenya in 4 weeks' time.

Which of the following vaccines is normally contraindicated because she is pregnant?

- A. BCG
- B. Cholera
- C. Hepatitis A
- D. Hepatitis B
- E. Meningococcal vaccine

Correct answer: A

## 5.2 Part B objective structured clinical examination – sample question

Candidates will be given the following information to read outside the station: a further copy will be available for reference in the station. Two minutes are allocated to move from one station to another: this includes reading time outside the station.

## Instructions for candidate

Your traveller is going on a charity trek climbing Mount Kilimanjaro and seeks your advice regarding travel at high altitude. The traveller has well-controlled diabetes.

You are required to:

- a) Advise the traveller regarding prevention (including chemoprophylaxis), recognition and management of high altitude illness
- b) Advise on other health risks associated with travel to high altitude

## Notes for candidate:

You are not expected to advise on malaria or vaccines at this station.

Candidates will not be given the following information that is provided to the simulated patient, but will be expected to extract this information during the examination as part of the consultation process.

## Notes for simulated patient

You have been persuaded by a friend to take part in this charity walk. You have never done anything like this before in terms of length of walk or being at high altitude.

The entire trip will take 7 days. You will be camping most of the time. You will only need to carry your own small rucksack for each day; porters will carry everything else for the trip.

You are healthy and have well controlled diabetes, controlled with diet. You take minimal exercise.

When questioned by the candidate about high altitude and potential health problems, you should seem surprised and completely ignorant of such concerns. Your main concern regarding the trip is reaching the summit so that you will obtain maximum sponsorship for the charity (Cancer Research).

Previous travel experience is to mainland Europe on beach type package holidays.

## **Props**

No props needed.

**Faculty of Travel Medicine Membership Examination** [Note this schedule is an example only and may not be complete]

## **STATION NUMBER:**

## **CANDIDATE NUMBER:**

- 1. Communication skills:
- Introduces self
- Establishes rapport
- Active listening
- Explains effectively
- Invites questions

EXAMINER	OUTSTANDING	CLEAR	BORDERLINE	BORDERLINE	POOR	INADEQUATE
MARK		PASS	PASS	FAIL		
(CIRCLE	5	4	3	2	1	0
MARK						
AWARDED)						

- 2. Risk assessment:
- Patient factors
- **Travel Factors**
- Thorough assessment
- Appropriate assessment
- Assessment technique

EXAMINER	OUTSTANDING	CLEAR	BORDERLINE	BORDERLINE	POOR	INADEQUATE
MARK		PASS	PASS	FAIL		
(CIRCLE	5	4	3	2	1	0
MARK						
AWARDED)						

- 3. Advice prevention and recognition of altitude problems:
- Acclimatisation (details)
- Use of chemoprophylaxis (details)
- Symptoms of acute mountain sickness (details)
- High altitude cerebral oedema (details)
- High altitude pulmonary oedema (details)

EXAMINER	OUTSTANDING	CLEAR	BORDERLINE	BORDERLINE	POOR	INADEQUATE
MARK		PASS	PASS	FAIL		
(CIRCLE	5	4	3	2	1	0
MARK						
AWARDED)						

- 4. Advice management of altitude problems
- If AMS, rest at same altitude, treat symptoms (e.g. analgesia, anti-emetic)
- If worsens, descend immediately
- If HACE/HAPE, immediate descent
- Do not ascend with symptoms
- Mention drug Txs

EXAMINER	OUTSTANDING	CLEAR	BORDERLINE	BORDERLINE	POOR	INADEQUATE
MARK		PASS	PASS	FAIL		
(CIRCLE	5	4	3	2	1	0
MARK						
AWARDED)						

## 5. Advice – diabetes

- Other problems e.g. solar injury, cold injury, rock-falls etc.
- Impact of exercise on diabetes, importance of frequent monitoring
- Importance of care with food and water on diabetes
- Advise trek leader and travel companions re: symptoms and Tx hypoglycaemia etc.
- General fitness preparation

•						
EXAMINER	OUTSTANDING	CLEAR	BORDERLINE	BORDERLINE	POOR	INADEQUATE
MARK		PASS	PASS	FAIL		
	5	4	3	2	1	0
(CIRCLE						
MARK						
AWARDED)						

TOTAL MARK = /25

Global judgement (please circle):	CLEAR PASS	PASS	
	BORDERLINE	FAIL	CLEAR FAIL
COMMENTS (PLEASE PRINT)			
Fail or Clear Fail must be accompanie	ed by clearly written exp	lanatory comm	ents: