

Preparing to take the MRCGP Applied Knowledge Test (AKT) A concise guide for trainees

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This guide is compiled from multiple sources and the views of many trainees, trainers, GP educationalists and MRCGP examiners alike. It is freely available and specifically intended to help with AKT preparation. We do not wish to repeat information that is available elsewhere within the MRCGP website, but aim to add clarity and signpost appropriate resources.

With particular thanks to:

The RCGP AiT Committee
The BMA GP Trainees Sub-committee

When should I take the Applied Knowledge Test?

We are all different in our confidence, learning styles, preparation, organisational skills and personal situations, but it seems clear that the second half of a standard ST2 year is a good time to sit the AKT - especially if you have completed a GP placement.

The pass rates for first-time ST2 takers in the April sitting of the exam are as good as first-time ST3 takers in the October sitting, and a pass in ST2 means one large assessment “hoop” is removed from the busy ST3 year. Many trainees who defer a sitting into ST3 find that the pressure of taking CSA and AKT and WPBA is distracting and detrimental when there is so much to learn about being a GP - apart from the exam! Equally a prolonged gap between AKT preparation and taking the CSA (which requires an up-to-date knowledge base) is best avoided so a balance needs to be struck.

If you are uncertain whether this is the right time for you, why not complete the [RCGP curriculum self-assessment tool](#) and discuss the results with your Educational Supervisor (ES) or Training Programme Director (TPD).

I know when I am taking the AKT, what next?

So, you've decided to take the AKT and are eligible, in which case this document is intended for you.

You will need to look carefully at the AKT sections of our website and allow at least three months of efficient exam preparation.

Know your own learning style and reflect on previous exam successes/problems. If this is not your first AKT sitting, review with your ES how you prepared previously, what changes to preparation you intend to make and whether or not you need any additional support. Do you and your ES agree that you are 'ready to sit' the AKT?

Be organised and apply early. Latest application dates for the AKT are on the [website](#).

But 'general practice' is such a diverse subject, where do I start?

Review, repeat or undertake a needs assessment(s) and concentrate on your weaker areas as opposed to reinforcing your strengths!

These could include prioritising your personal development plan based on the results of any of:

- [RCGP curriculum self-assessment excel spreadsheets](#)
- [RCGP Essential Knowledge Updates and Challenges](#)
- Patient Unmet Needs + Doctor Educational Needs
- Trainer feedback
- [RCGP Curriculum*](#)
- Results from on-line commercial exam preparation websites.

***How to use the RCGP Curriculum**

- The previously published AKT Content Guide has now been incorporated within the GP Curriculum
- Don't be put off by the lengthy list of topics!
- Do use the Curriculum Topic Guides as needs assessment tools
- In particular, consider your own training pathway to date. What areas are you likely to need to **now** concentrate on?
- For example, have you done a Paediatric rotation? How are your Family Planning, Ophthalmology and Dermatology skills?
- How much data interpretation and 'statistics' teaching did you have at your medical school and how confident are you with NHS primary care administration and governance issues?
- The following statement applies particularly for candidates who did not train in the UK but we recommend that most trainees spend additional time reviewing the sections:
 - ✓ Organisational – including administrative, statutory, ethical and regulatory frameworks
 - ✓ Evidence interpretation – including research, statistics and epidemiology. This requires an understanding of the principles of audit, the terms used in evidence-based clinical practice, the critical appraisal skills needed to interpret research data and the application of evidence-based clinical practice.

Which resources are most relevant?

RCGP resources include the following and more:

- ✓ AKT Summary Reports
 - The exam board produces specific feedback after every exam about areas that were not answered well. What themes can you identify that seem most relevant to you? Family planning and child development seems to be reported on a regular basis...
 - Summary reports for recent and archived AKT examinations can be viewed [here](#).
- ✓ How to prepare for the AKT
 - [AKT sample questions with answers](#)
 - [AKT presentation for candidates and trainers](#)
 - [Pearson Vue testing tutorial and practice exam](#)
- ✓ Essential Knowledge Updates and Essential Knowledge Challenges
 - Free to all AITs via <http://elearning.rcgp.org.uk> with direct answer to AKT-like questions including answer justifications to all but the latest EKC. These can be excellent preparation for the AKT.
- ✓ [RCGP InnovAiT](#)
- ✓ [RCGP Faculty AKT preparation courses](#)
- ✓ [RCGP One-day Essentials courses](#)
- ✓ [RCGP eLibrary](#)

UK Deaneries

Find out what support, resources and courses your local Deanery provides and what is available through your VTS Programme Directors.

Many Deaneries and VTS websites have excellent sections on the exam with 'Top Tips' and resources which previous trainees have found useful.

Patients, Trainees, Trainers and GP Educationalists

Your trainer and training practice are excellent resources. Have you considered reviewing consultations with your trainer in order to specifically examine the evidence for what was done?

The best preparation really is from your day-to-day work at your practice and with your VTS peers. Make sure you record and action any identified educational needs promptly and efficiently.

All the AKT examiners are working GPs and the questions are grounded in real-life. Previously the RCGP asked for a group of Trainers to sit the AKT and (reassuringly) they all passed, so please don't forget to ask your Trainer! This should include asking about the sort of paperwork and graphs/data interpretation they receive on a daily basis, which you may not otherwise see, such as: insurance reports, Department of Work and Pensions reports and practice performance information from the local primary care organisation.

Non-RCGP resources

Essential resources that should be regarded as 'mandatory' include the BNF, BNFC and GMC Good Medical Practice (see recommended reading).

There are a large number of commercial resources specifically created for AKT preparation and all can be very helpful to identify and address your learning needs. Many on-line commercial organisations have hyperlinks to the related evidence, so use these links to read around a topic in more detail, rather than just trying to recall the answer to an individual question. Discuss with other trainees and GP Educators which sites they have found most relevant.

We would caution against the over-reliance of repeatedly answering questions from one resource alone without looking at other resources.

The AKT examiners do **NOT** write questions for *any* commercial organisation.

Historically some trainees have reported that the style and difficulty of online/textbook questions can be very different from that of the exam. Avoid relying on MRCP style revision aids.

Whichever resource you use, ensure you take some questions under 'exam conditions' i.e. with the same time limitations (200 questions in 3 hours 10 minutes).

GP Update and NB Medical Hot Topics courses remain ever popular with AITs and qualified GPs alike.

Recommended reading

There is a daunting variety available. We recommend any that help you address unmet learning needs, just don't buy too many!

Every year the following generic list proves reliable, but is not exhaustive. This does not mean knowing all the content, but does mean prioritising your learning and identifying the most relevant from any of the following:

BNF first few chapters – essential reading, plus the main drug classes
InnoVAIT journal
NICE guidance/pathways
NICE Clinical Knowledge Summaries
SIGN guidance
Oxford Handbook of General Practice
British Medical Journal
British Journal of General Practice
DVLA At a glance guide to the current medical standards of fitness to drive
Good Medical Practice for General Practitioners (RCGP)
Good Medical Practice: Good Medical Practice (GMC)
Medical defence organisations' educational resources

Clearly, there is a lot to do and this needs dedicated time. It can help significantly to share the workload with your colleagues, each summarising the **relevant primary-care take home messages** from a different guideline. There is no need to read every page of every national guidance in detail!

Revision time tables and study groups can be very effective!

On the day

We promised not to repeat information available elsewhere, but please bear with us as at EVERY exam sitting to date there has been MORE THAN one trainee turned away because of incorrect ID or turning up late.

We cannot over-emphasise this enough so please ensure your photo ID matches your registration details including your professional name. If in any doubt, contact the Exam department well before the day of exam to make sure there will be no problems on the day.

Make sure you are clear of how to get to your chosen Pearson VUE test centre and have allowed ample travel time. Even if you are only a few minutes late, due to the quarantine regulations, you will not be allowed to take the exam.

Specific exam technique

- This is a timed exam with 200 questions in 190 minutes and no additional scheduled breaks. The timing permitted reflects an acknowledgement that you can take a short toilet/refreshment break at a point in the exam that suits you.
- So, with 57 seconds/question, aim to answer using the cover-test* and your initial intuition before quickly moving on.
- Watch the clock throughout and establish in advance how many questions you should have covered after 60, 120 and 150 minutes. This way you should not run out of time.
- Flag any questions for review at the end of the test that you feel unsure about or that are taking you too long and promptly move on to the next question. However uncertain you are, it is good exam technique to choose the answer that feels most right to you at that point in time rather than omitting to answer at all.
- Be VERY strict on yourself, especially early on, as spending too much time on a difficult or lengthy question potentially risks you not answering several simple questions at the end. The RCGP have published evidence showing that even those candidates omitting only one question are significantly less likely to pass.
- Remember there is no negative marking.
- The exam software will automatically ask you to review any flagged or unanswered questions before finishing the test. You can use any spare time to review as many other questions as you choose in the time available.

*The 'cover test' is when you cover the listed answer options and work out your answer from the question alone. If your answer is listed within the five options then it is **HIGHLY LIKELY** to be correct. Don't then let the other distracters distract you!

Single Best Answers

- Often use a clinical scenario
- Only **ONE** answer is correct
- You have to choose the most appropriate, typically from five options
- You may feel that your ideal answer is not included in the available options but you still need to select the most appropriate option from the list you have been given!
- Other options may be **plausible** but not "**MOST LIKELY**"
- "According to national guidelines" means "recommended by nationally accepted guidelines or the BNF, not local practice."
- Best practice may be to take no action!

Extended matching questions

- These questions have a list of possible options
- There will usually be 2 or more scenarios
- Choose the **MOST** appropriate option that **BEST** matches each given scenario
- Each option can be used once, more than once, or not at all.

Free-text questions

- These questions have no list of possible options
- You will need to type a short, accurate answer in the required textbox
- There will also be simple numerical calculations, and there will be a calculator available

In summary

Remember, you do have to do some work to obtain the successful result you deserve. Although a headline pass rate of approximately 70% appears daunting, over 95% of trainees will obtain a pass within the permitted four attempts.

You need to take the AKT seriously but we hope you feel ready for the preparation and, if assessments drive learning, patient care will also benefit from all your hard work...

The RCGP AKT group

We welcome feedback on this document via exams@rcgp.org.uk