



The Royal College of Emergency Medicine

Regulations and Information Pack

MRCEM Intermediate SBA examination

Applicable from 1 August 2021

July 2021

Contents

1. [Introduction to the MRCEM and FRCEM Examination Structure](#)
2. [Examination Regulations](#)
3. [Introduction to the MRCEM Intermediate SBA examination](#)
4. [MRCEM Intermediate SBA Eligibility Criteria](#)
5. [Oversubscription Criteria](#)
6. [Number of attempts and currency](#)
7. [Data sharing](#)
8. [Exemption and Equivalent Examinations](#)
9. [Structure and Content of the MRCEM Intermediate SBA](#)
10. [Sample Questions](#)
11. [Standard Setting and Examination Results](#)
12. [Guidance for Candidates with Additional Requirements](#)

Introduction to the MRCEM and FRCEM Examination Structure – applicable from August 2021

In August 2021 the College will introduce the 2021 curriculum and the associated examinations which are mapped to the curriculum.

From August 2021, the Membership examination consists of the following components:

- MRCEM Primary examination
- MRCEM Intermediate SBA examination
- MRCEM OSCE

From August 2021, the Fellowship examination consists of the following components:

- FRCEM SBA examination
- FRCEM OSCE

For further information regarding the MRCEM Primary, MRCEM OSCE or the FRCEM Final examinations, please refer to the relevant Information and Application Pack, available on the [Exams Section](#) of our website.

Examination Regulations

1. Applications for each component of the MRCEM and FRCEM examination should be submitted via the online application system, available via the [Examinations Section](#) of the College Website.
2. Applications may only be submitted during a specified time period ('the application window'). The date on which the application window opens (opening date) and closes for receipt of applications (the closing date) is published on the Examinations Section of the College Website.
3. Candidates must be on the General Medical Council's Register with a license to practice, or registered with the statutory regulator in the country in which they practice, without limitation on their practice. Candidates must declare if they have had at any time (or have pending) any investigations, suspensions, limitations or removal of medical registration in any country.
4. Completed applications must be submitted by 17:00 (GMT) on the published closing date after which time the system automatically closes. Partially completed or late applications will not be accepted.
5. It is a candidate's responsibility to ensure they have all the information required to complete the entire application form prior to the application window closing on the advertised date at 17:00 (GMT).
6. Upon submission of a completed application, candidates will receive an automated email confirming receipt of the application. Once the application has been approved candidates will receive an automated email to confirm this. Candidates will be sent a further email confirming details of their examination registration and instructions for booking their test appointment with Pearson VUE.
7. Candidates wishing to withdraw or transfer their examination entry must notify the Examinations Department in writing by 17:00 (GMT) on the closing date. Fees cannot be transferred or refunded after this time.
8. Candidates must apply for any required entry visas in good time prior to the date of the examination. In exceptional circumstances, subject to receipt of written documentation confirming the refusal of a visa, the Head of Examinations will consider requests for candidates to transfer their examination entry.
9. Candidates who do not attend an examination will forfeit their examination fee. In exceptional circumstances, for matters beyond the candidate's control, the Head of Examinations will consider requests to refund a candidate's examination fee, subject to receipt of written documentation (e.g. a detailed medical certificate, a death certificate for a direct family member) within 20 working days from the date of the examination. Please note that insufficient preparation is not considered a sufficient reason to refund an examination entry.
10. Candidates will be informed of the date on which examination results will be published at the time their examination entry is confirmed. In very exceptional circumstances this may be amended by the College and due notice will be published on the College website.
11. Results will be published to candidates' College website accounts and result letters can be downloaded on demand. Examination results will not be issued or confirmed by telephone or email.

Introduction to the MRCEM Intermediate SBA examination

The MRCEM Intermediate SBA examination replaces the FRCEM Intermediate SAQ and is mapped to the Specialty Learning Outcomes (SLO) of Year 1-3 of the Emergency Medicine 2021 Curriculum which is available on the [2021 curriculum website](#). All applicants for the MRCEM Intermediate SBA examination are strongly advised to familiarise themselves with the Year 1-3 SLOs in preparation for sitting the examination.

Candidates who are registered with the GMC should include their registration number in the appropriate place on the application form.

Candidates registered with the Irish Medical Council (IMC) or an international medical council are required to upload a copy of their current medical registration document at the time of application.

MRCEM Intermediate SBA Format of Examination

The MRCEM Intermediate SBA examination consists of a multiple-choice question (MCQ) paper of 180, single best answer questions (SBAQ). The examination is delivered as two, two-hour examination papers each containing 90 questions. The two papers are delivered on the same day with a one-hour break.

RCEM delivers its written examinations electronically via computer-based testing company, Pearson VUE. <https://home.pearsonvue.com/rcem>

MRCEM Intermediate SBA Eligibility Criteria

A candidate will be eligible to enter the MRCEM Intermediate SBA examination provided they:

- a) Hold a medical qualification approved by the General Medical Council (GMC) for the purposes of registration **and**
- b) Has completed the UK Foundation Programme or equivalent (electronic evidence will be required at point of application) **and**
- c) Has passed the MRCEM Part A examination after 1 August 2012 and prior to 31 July 2016 **or**
- d) Has passed the FRCEM Primary examination after 1 August 2016 **or**
- e) Has passed the MRCEM Primary examination after 1 August 2021 **or**
- f) Is a DREEM trainee and has been granted exemption from the FRCEM Primary, MRCEM Part A or MRCEM Primary as a result of obtaining MRCS or MRCSI after 1 January 2012

Exemptions and equivalent examinations

MRCEM Part B or FRCEM Intermediate SAQ in place of MRCEM Intermediate SBA

MRCEM Part B passes obtained prior to August 2012 are deemed time expired. Candidates who sat the MRCEM Part B prior to August 2012 are therefore required to pass the MRCEM Intermediate SBA examination.

Candidates who passed the MRCEM Part B examination after 1 August 2012 are deemed to have passed an equivalent examination to the MRCEM Intermediate SBA examination.

Candidates who have passed the FRCEM Intermediate SAQ after 1 August 2016 and before 1 August 2021 are deemed to have passed an equivalent examination to the MRCEM Intermediate SBA examination.

Oversubscription Criteria

There is normally no restriction on the number of places available for the MRCEM Intermediate SBA examination, but candidates may not always be allocated their first choice of venue.

Number of attempts and currency

Candidates are permitted a maximum of six attempts in which to pass the MRCEM Intermediate SBA Examination. Previous attempts at the FRCEM Intermediate SAQ examination after August 2016 will count towards the number of available attempts.

In exceptional circumstances candidates may apply for approval for an additional examination attempt. Such cases will be dealt with on a case by case basis at the discretion of the Dean, whose decision is final.

Candidates with a late diagnosis of a neurodiverse condition (such as dyslexia, ADD, ASD) and who have previously sat an examination component without agreed reasonable adjustments may apply to the Dean to expunge such attempts. Such cases will be dealt with on a case by case basis at the discretion of the Dean, whose decision is final.

Previous attempts at the MRCEM Part B examination prior to August 2016 do not count towards the number of available attempts for the MRCEM Intermediate SBA examination.

A pass in the MRCEM Intermediate SBA will remain current. If at some future date it becomes necessary to replace it, holders of the MRCEM Intermediate SBA will be given a minimum of 24 months' notice of the date from which it will be deemed time expired.

Required Examinations Entry/Progression into ST4 (from August 2021)

Trainees in a GMC approved, UK training programme are required to complete the following examinations in order to progress or enter ST4:

Progression / Entry to Higher Specialist Training (ST4) from August 2021

- MRCEM Primary SBA (after 1 August 2021) **or**
FRCEM Primary (after 1 August 2016) **or**
MRCEM Part A (after 1 August 2012) **AND**
- MRCEM Intermediate SBA (after 1 August 2021) or
FRCEM Intermediate SAQ (after 1 August 2016) or
MRCEM Part B (between August 2012 – August 2016) **AND**
- MRCEM OSCE after August 2012 **or**
- FRCEM Intermediate SJP (between August 2016 – August 2021)

Candidates are reminded that the GMC normally considers an examination pass to be current so long as the candidate enters or re-enters an approved training programme within seven years of passing the examination and satisfies any other College currency requirements.

Data sharing

If you are registered or anticipate being registered with the GMC then your personal data, including your examination results, will be passed to the GMC for quality assurance and research purposes and to facilitate the awarding of certificates for completion of training (CCTs).

If you are a trainee in UK Emergency Medicine training programme, your personal data, including your examination results will be shared with your local Health Education England (HEE) office and/or your Head of School or Programme director.

Structure and Content of the MRCEM Intermediate SBA

The MRCEM Intermediate SBA is conducted in English and candidates are advised that IELTS Level 7 is the expected standard for completion of the MRCEM and FRCEM examinations.

The MRCEM Intermediate SBA examination is blueprinted against the 2021 Emergency Medicine curriculum. Candidates should refer to the key capabilities and descriptors for each SLO assessed in the examination. The clinical syllabus will be sampled across the examination and syllabus categories and descriptor highlights are indicated against each SLO as a revision aide.

The blueprint for the MRCEM Intermediate SBA is as follows

Curriculum Category	Syllabus categories/highlighted descriptors	Questions
SLO 1 Complex stable patient SLO1 Key capabilities SLO1 Descriptors	Allergy Cardiology Dermatology Ear, nose and throat Elderly care / frailty Endocrinology Environmental emergencies Gastroenterology and hepatology Haematology Infectious diseases Maxillofacial / dental Mental Health Musculoskeletal (non-traumatic) Nephrology Neurology Obstetrics & Gynaecology Oncological Emergencies Ophthalmology Pain & sedation Pharmacology and poisoning Respiratory Sexual health Surgical emergencies Urology Vascular	55
SLO3 Resuscitate ACCS LO8 organ failure (Excluding major trauma) SLO3 Key capabilities SLO3 Descriptors	Resuscitation Palliative and end of life care Trauma <i>including other clinical presentations</i>	40
SLO4 injured patient	Pain and sedation	30

SLO4 Key capabilities SLO4 Descriptors	Major trauma <i>including other clinical presentations</i>	
SLO 5 PEM SLO5 Key capabilities SLO5 Descriptors	<i>All clinical syllabus categories as applicable to PEM, and additional PEM specific categories:</i> neonatal emergencies Safeguarding and psychosocial emergencies in children	25
SLO6 Procedural skills (ACCS) ACCS LO7 basic anaesthetic care SLO6 Key capabilities SLO6 Descriptors ACCS LO7 key capabilities ACCS LO7 Descriptors	Advanced airway management Chest drain External pacing Fracture/ dislocation manipulation Lumbar puncture Pain and sedation POCUS Vascular access in emergency- IO, femoral vein Wound management	20
SLO7 Complex or challenging situations SLO7 Key capabilities SLO7 Descriptors	legislation and legal framework organ/tissue donation Information governance safeguarding evidence and guidelines	10
TOTAL		180

Sample questions

Sample MRCEM SBA questions are available on the RCEM website [here](#).

Standard Setting and Examination Results

The MRCEM Intermediate SBA is standard set using a modified Angoff Method. One standard error of measurement (SEM) will be added to the cut score identified using the Angoff method to calculate the required final pass mark for the examination.

The MRCEM Intermediate SBA examination results will be published on a pre-advised day by 17:00, approximately five weeks after the date of the examination. Results will be released to candidates' College website accounts where results letters can be downloaded on demand. Examination results will not be issued or confirmed by telephone or email.

Guidance for Candidates with Additional Requirements

The College is committed to supporting candidates by providing fair opportunities when undertaking examinations. Candidates may submit a request for reasonable adjustments and should note that the responsibility for requesting adjustments lies with them.

Please refer to more detailed guidance [here](#).

MRCEM SBA Sample Questions

1. A 60 year old plumber attend the ED with painful swelling to his left knee. Clinical examination demonstrates a hot, erythematous knee with a range of movement from 20 degrees to 120 degrees. His observations are normal.

What is the most appropriate treatment?



- A) Arthroscopic washout
- B) *Flucloxacillin***
- C) Incision and drainage
- D) Naproxen
- E) Penicillin V

2. A 17 year old man attends the ED with a rash. He had a cold sore the previous week and has now developed multiple lesions to his hands and torso. He is systemically well.

Which of the following is the most likely diagnosis?



- A) Erythema migrans
- B) *Erythema multiforme***
- C) Gianotti-Crosti syndrome
- D) Pityriasis Rosea
- E) Stevens-Johnson syndrome

3. An 18 month old child is brought to the ED with a widespread rash. She has been ill with a fever and upper respiratory type symptoms for three days, but her fever settled earlier this morning. She appears clinically well with a n otherwise normal examination.

What is the most likely diagnosis?



- A) Erythema infectiosum
- B) Kawasaki syndrome
- C) Measles
- D) *Roseola infantum***
- E) Scarlet fever

4. A 45 year old woman presents to the ED with a two day history of abdominal pain. Abdominal examination confirms generalised tenderness. Her x-ray is shown.

What is the x-ray abnormality demonstrated?



- A) Gastric distension
- B) Gastric volvulus
- C) Inflammatory small bowel changes
- D) Large bowel obstruction
- E) ***Small bowel obstruction***

5. An 11 year old boy presents with his parents to the ED having developed a limp over the last week. He is systemically well and has no medical history.

What is the most likely diagnosis?



- A) Perthes disease
- B) Primary bone neoplasm
- C) Septic arthritis
- D) *Slipped upper femoral epiphysis***
- E) Transient synovitis

6. A 37 year old man is brought to the ED following a house fire. He is GCS 10 and agitated on arrival with a HR of 120 beats per minute and BP 105/85. He has sooty deposits around his face and mouth but no burns elsewhere on his body. He appears cyanosed and is receiving 10 L/min of oxygen through a face mask.

On oxygen 10 litres.

What is his calculated anion gap?

pH	7.15	Na	145 mmol/L
PaCO₂	6.0 kPa	K⁺	4 mmol/L
PaO₂	7.5 kPa	Urea	3 mmol/L
O₂ sats	98%	Cl	90 mmol/L
HCO₃	25	Blood Sugar	5

- A) 30
- B) 38
- C) 49
- D) 55
- E) 293

7. A 22 year old man presents with a three day history of sore throat and fever. His temperature in the department is 39°C. He has malaise and complains of mild upper abdominal pain. His oropharynx is as shown.

What is the most likely diagnosis?



- A) **Infectious mononucleosis**
B) Influenza A infection
C) Paramyxovirus infection (mumps)
D) Streptococcal tonsillitis
E) Viral pharyngitis
8. A 28 year old woman who is 36 weeks pregnant presents with vaginal bleeding. Her previous scans have confirmed an intra-uterine pregnancy. She is rhesus negative. She has no abdominal pain and ongoing significant bleeding.

What pathology is the most likely explanation for her haemorrhage?

- A) **Placenta praevia**
B) Placental abruption
C) Progression of Labour
D) Threatened miscarriage
E) Uterine rupture