





SAMPLE QUESTIONS.....	20
IMAGE QUESTIONS.....	20
SAMPLE MCQ EXAMINATION .....	20
Appendix C: Suitable resources .....	27



graduates of Australian medical schools who are about to commence intern training. These are described in the AMC graduate outcome statements listed in Appendix A .

The graduate outcomes form the basis of medical education in Australia and are used to accredit medical schools. They are expressed in terms of four overarching domains:

- 1) Science and Scholarship: the medical graduate as scientist and scholar
- 2) Clinical Practice: the medical graduate as practitioner
- 3) Health and Society: the medical graduate as a health advocate
- 4)

## 2. Structure and content of the MCQ examination

### 2.1. Structure of the MCQ examination

The MCQ examination is a computer administered examination comprising 150 multiple-choice questions administered over 3.5 hours.

At least half of the questions are taken from a pool of previously calibrated questions. The remainder of the questions are new questions – that is questions that have not previously been used in an AMC MCQ examination. These new questions and candidate responses are inspected and calibrated before being used for scoring.

The examination is delivered as a Computer Adaptive Test (CAT). A CAT format of MCQ is a form of computer-based test administration in which each candidate takes a unique, customised examination. Research has confirmed the comparability between CATs and fixed length tests, but with CATs requiring less than half the number of questions to obtain more precise results.

Each CAT MCQ examination is automatically equated to any other test drawn from the AMC pools. In the CAT MCQ format examination, for each candidate the first question is randomly

## Adult health - Medicine and Adult health - Surgery

These patient groups cover a broad spectrum of adult health and aged care, and involve a sound foundation knowledge of the medical sciences (physiology, biochemistry, anatomy, pharmacology) and an understanding of pathobiology and pathophysiology. They include developed and practiced clinical skills (communication, history taking, physical examination, counselling) an appropriate understanding of principles of treatment and familiarity with current management strategies (investigations, procedural interventions, drug and non-drug therapies).

## Women's health

Gynaecology covers a broad spectrum of women's healthcare, and involves all principles of adult health as above. Obstetrics also embodies these principles with the addition of the understanding of the basic sciences as they apply to reproduction and the effects of pathobiology and pathophysiology on the reproductive process (pregnancy, labour, birth and the post-natal period).

## Child health

Child health includes developmental dimensions of children's health from fetal development and transition to extra-uterine life to the end of adolescence, including growth, physical development, puberty and intellectual development in normal and abnormal situations. Clinical features and natural history of important conditions are covered including basic pathophysiology of medical and surgical conditions including recognition and management of developmental disability. Core clinical skills and management of common and important conditions in a range of settings (emergency, ambulatory, inpatient, convalescent) are included covering medical, surgical and psychosocial interventions.

## Mental health

The assessment, diagnosis and management of psychological, behavioural and mental disorders and illnesses and addictions across all age groups, based on bio-psychosocial and cognitive principles. This includes history, mental state features, investigations and co-morbidities, with management to include the use of psychological/behavioural, physical, pharmacological and psychotherapeutic interventions, with their risks and benefits.

## Population health and Ethics













Conditions:

- x ID documentation presented must be original (no photo copies) and valid (unexpired), with the first name and last name on AMC records to match exactly the first name and last name on the IDs presented on the test day.
- x Expired forms of ID will not be accepted unless accompanied by valid renewal papers.
- x Any government-issued ID that is missing a visible signature or containing an

## 6. Results

Candidate results will be available to download from their candidate portal at 9.00am on the Thursday, four weeks following their AMC CAT MCQ examination. This is in accordance with the process notified on the AMC website - <https://www.amc.org.au/assessment/mcq/mcq-results/>

Please note: Under no circumstances will results be given over the telephone.

## 7. Candidate conduct

### 7.1. General conduct of candidates

Candidates are expected to conduct themselves courteously in examinations, correspondence and in personal contact with examination centre staff, employees or agents of the AMC and other candidates. Candidates whose conduct is disruptive, or is considered by the AMC to have been outside the bounds of reasonable and decent behaviour, may be excluded from the examination and/or refused the opportunity to sit future AMC examinations.

All candidates must comply with the instructions of MCQ examination staff during examinations. Failure to do so will constitute a breach of examination procedures and may result in the candidate being excluded from the examination or refused the opportunity to sit future examinations.

A doctor who crosses professional boundaries while undewtix

### 7.3. Irregular Behaviour

Any attempt to circumvent the objectives or processes of the examination (as described in these Specifications or in other material made available to candidates), the reliability of candidate assessment, or the security of the examination or examination content, may:

a. produce exam results which cannot be confidently accepted as reflecting a candidate's true ability,

to( cas),2r((,))69.6t(,ord)(F-6[6m(h)266(ec)2digs)the (re)ue(a)5-2 (es)12.5 (t)-6.6 cd))F0 [sA667ss(26 (





# Appendix A: The AMC graduate outcome statements

The goal of medical education is to develop junior doctors who possess attributes that will ensure they are initially competent to practice safely and effectively as interns in Australia or New Zealand, and that they have an appropriate foundation for further training in any branch of medicine and for lifelong learning. Attributes should be developed to an appropriate level for the graduates' stage of training.

Included below is the list of graduate outcome statements. These statements, divided into four domains, reflect the skills, knowledge and attitudes that Australian medical students are required to demonstrate upon graduation. Graduate outcome statements can also be found in the AMC's Standards for assessment and accreditation of primary medical programs.

## Domain 1

Science and Scholarship: the medical graduate as scientist and scholar

On entry to professional practice, Australian and New Zealand graduates are able to:

- x Demonstrate an understanding of established and evolving biological, Clinical, epidemiological, social, and behavioural sciences.
- x Apply core medical and scientific knowledge to individual patients, populations and health systems.
- x Describe the aetiology, pathology, Clinical features, natural history and prognosis of common and important presentations at all stages of life.
- x Access, critically appraise, interpret and apply evidence from the medical and scientific literature.
- x Apply knowledge of common scientific methods to formulate relevant research questions and select applicable study designs.
- x Demonstrate a commitment to excellence, evidence based practice and the generation of new scientific knowledge.

## Domain 2

Clinical Practice: the medical graduate as practitioner

On entry to professional practice, Australian and New Zealand graduates are able to:

- x Demonstrate by listening, sharing and responding, the ability to communicate clearly, sensitively and effectively with patients, their family/carers, doctors and other health professionals.
- x Elicit an accurate, organised and problem-focussed medical history, including family and social occupational and lifestyle features, from the patient, and other sources.
- x Perform a full and accurate physical examination, including a mental state examination, or a problem-focused examination as indicated.
- x Integrate and interpret findings from the history and examination, to arrive at an initial assessment including a relevant differential diagnosis. Discriminate between possible

differential diagnoses, justify the decisions taken and describe the processes for evaluating these.

- x Select and justify common investigations, with regard to the pathological basis of disease, utility, safety and cost effectiveness, and interpret their results.
- x Select and perform safely a range of common procedural skills
- x Make Clinical judgements and decisions based on the available evidence. Identify and justify relevant management options alone or in conjunction with colleagues, according to level of training and experience.
- x Elicit patients' questions and their views, concerns and preferences, promote rapport, and ensure patients' full understanding of their problem(s). Involve patients in decision making and planning their treatment, including communicating risk and benefits of management options.
- x Provide information to patients, and family/carers where relevant, to enable them to make a fully informed choice among various diagnostic, therapeutic and management options.
- x Integrate prevention, early detection, health maintenance and chronic condition management where relevant into Clinical practice.
- x Prescribe medications safely, effectively and economically using objective evidence. Safely administer other therapeutic agents including fluid, electrolytes, blood products and selected intravenous agents.
- x Recognise and assess deteriorating and critically unwell patients who require immediate care

populations. Explain environmental and lifestyle health risks and advocate for healthy lifestyle choices.

- x Describe a systems approach to improving the quality and safety of health care.
- x Understand and describe the roles and relationships between health agencies and services, and explain the principles of efficient and equitable allocation of finite resources, to meet individual, community and national health needs.
- x Describe the attributes of the national systems of health care including those that pertain to the health care of Aboriginal and Torres Strait Islander peoples and/or Maori.
- x Demonstrate an understanding of global health issues and determinants of health and disease including their relevance to health care delivery in Australia and New Zealand and the broader Western Pacific region.

#### Domain 4

Professionalism and Leadership: the medical graduate as a professional and leader

On entry to professional practice, Australian and New Zealand graduates are able to:

- x Provide care to all patients according to “Good Medical Practice: A Code of Conduct for Doctors in Australia” and “Good Medical Practice: A Guide for Doctors” in New Zealand.
- x Demonstrate professional values including commitment to high quality Clinical standards, compassion, empathy and respect for all patients. Demonstrate the qualities of integrity, honesty, leadership and partnership to patients, the profession and society.
- x Describe the principles and practice of professionalism and leadership in health care.
- x Explain the main principles of ethical practice and apply these to learning scenarios in Clinical practice. Communicate effectively about ethical issues with patients, family and other health care professionals.
- x Demonstrate awareness of factors that affect doctors’ health and wellbeing, including fatigue, stress management and infection control, to mitigate health risks of professional practice. Recognise their own health needs, when to consult and follow advice of a health professional and identify risks posed to patients by their own health.
- x Identify the boundaries that define professional and therapeutic relationships and demonstrate respect for these in Clinical practice.
- x Demonstrate awareness of and explain the options available when personal values or beliefs may influence patient care, including the obligation to refer to another practitioner.
- x Describe and respect the roles and expertise of other health care professionals, and demonstrate ability to learn and work effectively as a member of an inter-professional team or other professional group.
- x Self-evaluate their own professional practice; demonstrate lifelong learning behaviours and fundamental skills in educating colleagues. Recognise the limits of their own expertise and involve other professionals as needed to contribute to patient care.
- x Describe and apply the fundamental legal responsibilities of health professionals especially those relating to ability to complete relevant certificates and documents, informed consent, duty of care to patients and colleagues, privacy, confidentiality, mandatory reporting and notification. Demonstrate awareness of financial and other conflicts of interest.

# Appendix B: Sample MCQ's

## SAMPLE QUESTIONS

This appendix contains sample question items, which reflect the format and





A 37-year-old woman presents to the Emergency Department at 12 weeks gestation in her fourth pregnancy with intermittent lower abdominal cramps and vaginal bleeding. She has a regular cycle with five days of bleeding every 28 days, and is certain of her dates. Her previous three pregnancies each ended in miscarriage before 10 weeks. Speculum examination confirms a moderate amount of blood with clots in the vagina. On bimanual palpation, the uterus is anteverted with size equivalent to







A 24-year-old woman presents to the Emergency Department with a painful swelling on the right side of the neck, worsening over the past three days. She is now having noisy breathing, difficulty swallowing and is feeling sweaty. On examination she looks in distress, with a temperature of 38.2°C, BP 100/70 mmHg and pulse 110/min. She has tender, enlarged lymph nodes on the right side of her neck. A view inside her mouth is shown in the photograph (see image). Which one of the following is the most appropriate management?

- A. Amoxicillin
- B. Incision and drainage
- C. CT head and neck
- D. Ultrasound neck
- E.

# Appendix C: Suitable resources

Online Medicine resource; suitable resources include UpToDate, BMJ Best Practice or Medscape.

Guidelines written by professional societies, colleges, and evidence-based medicine organisations; guidelines from the RACGP provide useful information on Australian practice.

Therapeutics Guidelines addresses current recommendations on use of medicines in Australia <https://tgldcdp.tg.org.au/etgcomplete>

State, territory and federal departments of health publish resources for clinical practice including the Australian Immunisation Handbook, 2018. <http://immunise.health.gov.au/>

Specific resources include:

Royal Children's Hospital Clinical Guidelines <https://www.rch.org.au>