

Final FRCR Part B Examination – Purpose of Assessment Statement

The various components of the Fellowship of the Royal College of Radiologists (FRCR) examinations have been designed to assess the knowledge and skills of clinical radiology trainees as they progress through a number of levels of competence and to demonstrate readiness to progress to the next stage of training.

The award of the FRCR indicates that the candidate has attained the required level of competence across the components of the core [curriculum](#). The Final FRCR Part B is not designed as an exit examination, but instead marks an important step in the progression of trainees towards the ability to use their knowledge and skills as independent practitioners. At the same time the examination provides the public with an assurance that radiologists in training are being assessed to a consistently high standard and that the holders of the Fellowship have achieved a nationally recognised high quality of clinical performance.

The Final FRCR Examination has three components: rapid reporting, reporting and an oral examination. The three parts of the examination assess different aspects of a candidate's radiological skills, all of which are considered necessary for safe and effective radiological practice. All components are presented digitally using computer workstations.

Rapid Reporting

The rapid reporting component is built on the fact that the Accident and Emergency department is a large part of the radiological workload. It tests the ability of the candidate to rapidly decide if an image is normal or abnormal and the provision of a diagnosis for the abnormality. The images are all radiographs with no other forms of imaging tested. The balance of normals within the images is about 45-50%, with trauma cases as the majority but some chest and abdominal radiographs are included as they would be in a typical session of A&E reporting in the workplace. Each abnormal case shows one significant diagnosable abnormality.

This element of the examination reproduces the situation of plain film reporting as a safe radiologist needs to be able to identify abnormalities when present and confidently exclude them when they are not. It is authentic as the examination seeks to reflect what radiologists encounter in their clinical practice.

Reporting

The reporting component recognises that radiologists largely communicate their findings in the form of written reports. This element tests the ability of the candidate to make a number of observations, distinguish the relevance of these findings, deduce a list of differential diagnoses, suggest the most likely diagnosis and discuss further management including further imaging where appropriate. This part of the examination mirrors a mixed list of cross-sectional and fluoroscopic imaging and a short structured reporting sheet is provided. Each case can include any type of radiological imaging and often involves more than one e.g. plain film, CT and isotope study.

This written element of the examination aims to test the candidate's ability to assess and interpret a variety of clinical cases across all modalities safely, and to accurately communicate their findings, conclusions and recommendations.

Oral examination

The oral component further assesses the candidate's powers of observation and interpretation, but in addition allows assessment of the candidate's ability to discuss wide-ranging aspects of patient care as influenced by the radiological findings. This mirrors the day-to-day clinical discussions and MDT meetings, which form an integral part of a radiologist's workload.

Candidates are expected to be able to integrate their observations with emerging clinical information to help refine their differential diagnosis. It also tests their ability to communicate effectively, their analytical and decision making skills, and allows searching questions to explore their depth of knowledge and ensure that their practice supports patient safety.

This component forms part of the Final Part B examination as it can evaluate aspects of clinical competence which are more difficult to examine in a written format.

This element of the examination mirrors the day-to-day clinical discussions and MDT meetings, which form an integral part of a radiologist's workload. Oral examinations allow the examiners the unique opportunity to explore the candidates' depth of knowledge and to test higher cognitive skills. The format of the oral examination allows for flexibility and for complexity to be built into the examiners questioning.