

# March 2024 Multiple Choice Question Examination (MCQ) - Post Examination Report

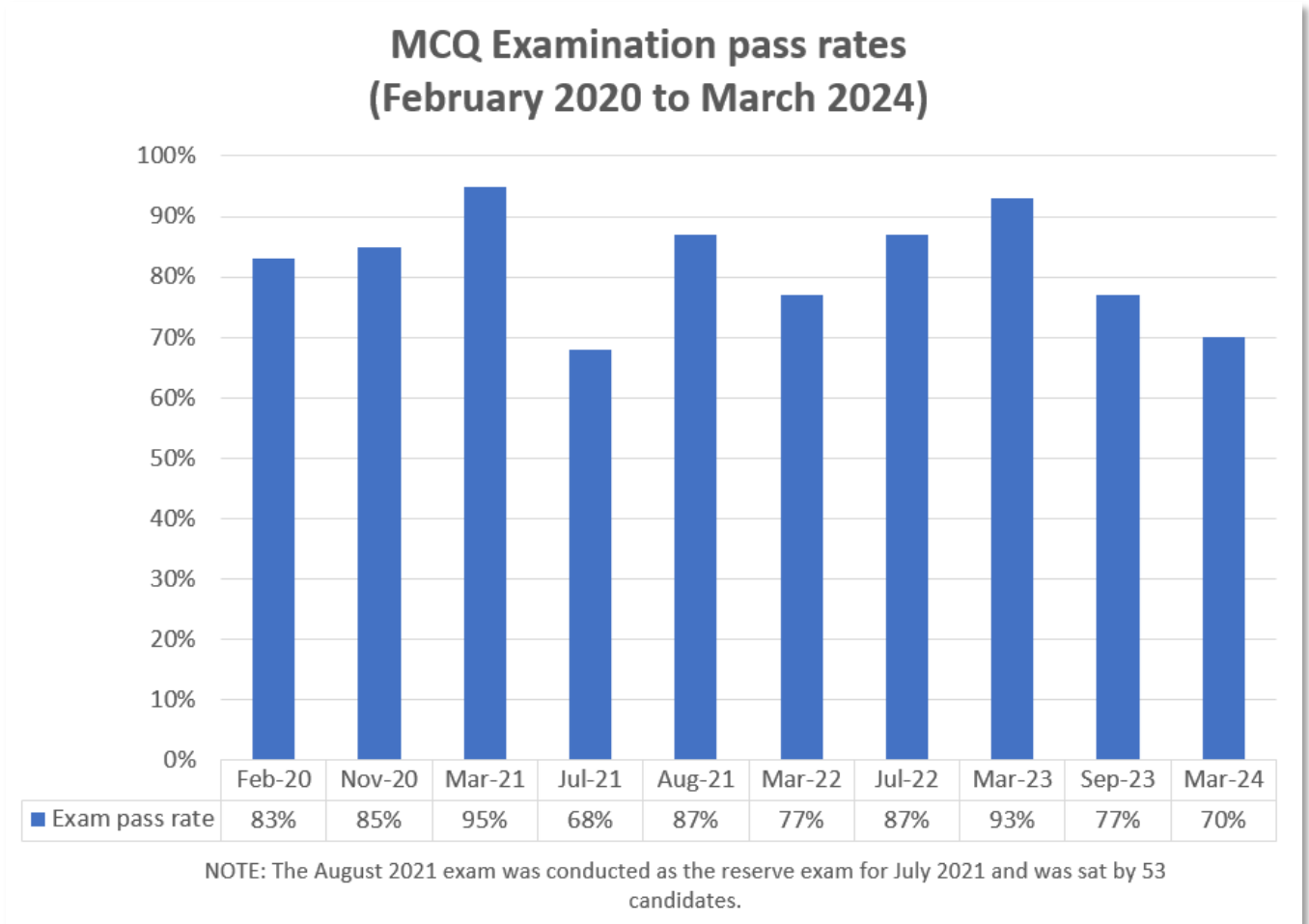


The March 2024 MCQ Examination was held on 1<sup>st</sup> March 2024. It was attempted by 215 candidates throughout Australia and New Zealand. The cohort had an overall pass rate of 70%.

Established procedures were adhered to by The Committee for Examinations (CFE) to create the March 2024 Multiple Choice Question (MCQ) Examination. Extensive standard setting exercises involving Fellows from Australia and New Zealand were conducted in which the final cut score was established.

Table 1 below shows the MCQ Exam pass rates since 2020.

**Table 1: MCQ Examination pass rates (2020 to 2024).**



The exam content covered the foundational knowledge of Stage 1 and 2 curriculum. The pass mark was set to the standard expected by the end of Stage 3 training. Candidates were provided performance feedback in identified curriculum areas.

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Table 2 shows a breakdown of exam content and the average percentage achieved for each question content.

**Table 2: Average percentage of each question content.**

Question content	Average percentage of marks achieved by cohort
Phenomenology	77%
Leadership, governance and relevant legal frameworks	68%
Assessment	60%
Psychology, philosophy and psychodynamic principles	60%
Epidemiology, Diagnosis, Classification and public health	60%
Basic sciences/medical knowledge	57%
Specific areas of practice	53%
Specific Disorders	53%
Treatments in Psychiatry	52%
Ethics, History and Philosophy	33%

Questions regarding specific areas of practice, specific disorders, and treatments in psychiatry suggested trainees could improve their knowledge within these topics. Analyses of questions related to ethics, history and philosophy indicated a higher likelihood of guesswork strategies being employed, pointing to a notable knowledge gap in this area.

## **Multiple Choice Questions (MCQs)**

MCQs cover foundational knowledge in psychiatry and can include areas of knowledge such as (but not limited to) neuroscience, pharmacotherapy, experimental design and critical analysis, history and philosophy of psychiatry, and principles of key psychotherapies. The examination questions from the data bank are continuously reviewed for quality based on the question's performance when previously used.

One poorly performing question was removed in this examination due to the lack of binational application; no candidate was adversely affected by this removal. Consequently, the total mark available was 179. The CAP component remained at 40 marks.

The performance of questions in all exams varies, and members of the CFE also review any MCQ items that show low performance. A post-examination review of poorly performing questions confirmed the quality and robustness of these questions, indicating that lack of knowledge may have contributed to poor candidate performance. Questions with a response pattern that was unexpected were individually reviewed.

The Specific Areas of Practice were broken down into the categories of Addiction, Child and Adolescent, Consultation Liaison, Forensic and Old Age. Analysis showed that candidates in this cohort had a strong knowledge in Addiction Psychiatry.

The Specific Disorders covered in the exam were Anxiety, Eating, Mood, Organic, Personality, Sexual disorders, Sleep, Somatoform Disorders, Substance Use Disorders, Trauma/stress-related and dissociative disorders. Analysis showed sound knowledge in Somatoform and Anxiety Disorders.

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## **Critical Analysis Problems (CAPs)**

The Critical Analysis Problems presented to the cohort were drawn from articles about research and a systematic review and meta-analysis.

All CAP questions are categorized within Stage 1 and Stage 2 of the syllabus as covering basic sciences and medical knowledge.

Analysis on the overall results showed that the cohort performed better in CAP 1 than in CAP 2, where questions within CAP 1 were answered, based on the frequency distribution with candidates showing confidence in the responses.

The cohort found most questions within CAP 2 challenging as the frequency distribution of answers showed a varied cross section of responses.

Although not required to be passed independently from the rest of the MCQ style examination, it was noted that 61% of the cohort scored above the nominal pass mark for the CAP component. The frequency distribution of responses across all questions showed that a majority of the cohort had a reasonable knowledge on the questions being asked.

## **Final Comment**

The CFE emphasises to all candidates that the ability to read and interpret professional literature is considered a core skill for a psychiatrist. Candidates are expected to have knowledge of various types of research studies, controls, sources of bias, basic descriptive and analytic statistics, and the accurate reporting of findings. You can access a detailed guide to the knowledge that may be assessed in the CAP component on the College website: [RANZCP Guidelines for CAPs](#).

The CFE would like to remind candidates that, as the MCQ examination is predominantly a knowledge-based examination, it is important for candidates to ensure that they are up to date with basic sciences and medical knowledge.

As illustrated in the previous pass rates, candidates continue to perform well in the MCQ examinations.

Handwritten signature of Dr Nathan Gibson in blue ink.

**Dr Nathan Gibson**  
Chair  
Committee for Examinations

Handwritten signature of Dr Sanjay Patel in blue ink.

**Dr Sanjay Patel**  
Chair  
Writtens Subcommittee

Handwritten signature of Dr Prachi Brahmbhatt in blue ink.

**Dr Prachi Brahmbhatt**  
Deputy Chair  
Writtens Subcommittee