RACGP Education

Exam report 2020.1 AKT

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Recommended citation

1. Exam psychometrics

Table 1 shows the mean and standard deviation of the entire cohort who sat the exam. These values can vary between exams. The reliability is a measurement of the consistency of the exam.

A candidate must achieve a score equal to or higher than the pass mark in order to pass the exam. The pass mark for the Applied Knowledge Test (AKT) and Key Feature Problem (KFP) exam is determined by the internationally recognised Modified Angoff method, and outcomes may vary between each exam cycle. The Objective Structured Clinical Exam (OSCE) pass mark is determined by the borderline group method (refer to the RACGP Education *Examinations guide* for further details).

The 'pass rate' is the percentage of candidates who achieved the pass mark.

The RACGP has no quotas on pass rates; there is not a set number of candidates who may pass the exam. Pass rates may vary depending on a wide variety of different variables.

Table 1. Psychometrics

Mean score (%)	71.82
Standard deviation (%)	9.79
Reliability*	0.89
Pass mark (cut score %)	65.54
Pass rate (%)	76.30
Number sat	1021

*The exam reliability is expressed as a value between 0 and 1, in line with international best practice in assessment reporting.

2. Candidate score distribution

The below histogram (Figure 1) shows the range and frequency of final scores for this exam. The vertical blue line represents the pass mark.
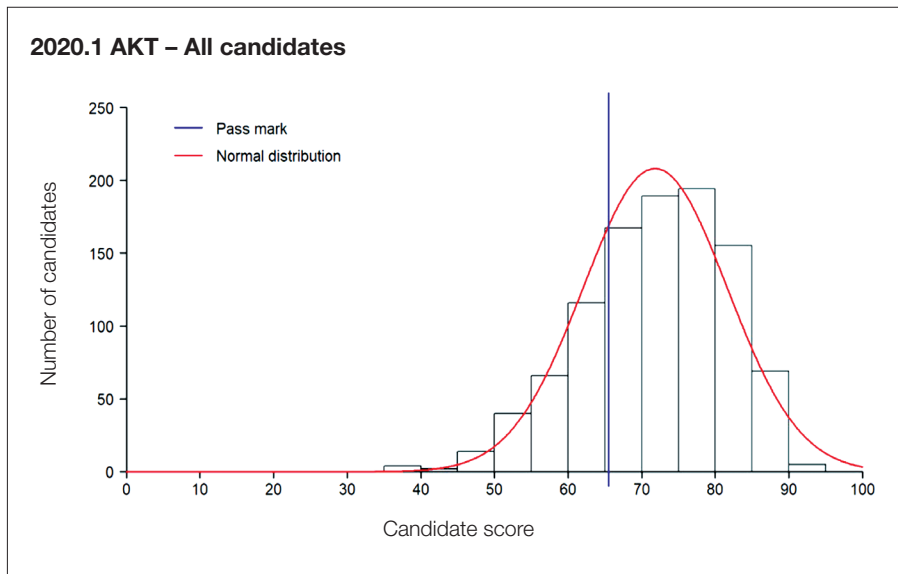

Figure 1. 2020.1 AKT score distribution

3. Candidate outcomes by exam attempt

Table 2 provides pass rates (%) displayed by number of attempts. As shown, the rate of passing decreases with increased attempts at the exam. Preparation and readiness to sit are important for candidate success.

Table 2. Pass rates by number of attempts

Attempts	Pass rate (%)
First attempt	86.9
Second attempt	48.7
Third attempt	47.9
Fourth and subsequent attempts	37.5

4. Preparation – Practice exams

An online practice exam is made available to enrolled candidates prior to each AKT and KFP exam. The purpose of this exam is to provide a simulated experience for candidates preparing for the real exam. Candidates are provided with automated feedback to complete their experience.

The practice exam is not designed to provide a mark or grade, or to give an indication of whether or not a candidate will pass. However, candidates who attempt the online practice exams perform better in the real exam than those who do not (Table 3). Attempting the practice exam is therefore highly recommended.

Table 3. 2020.1 AKT online practice exam

Attempted practice exam	Total number of candidates	Proportion of candidates	Number passing the real exam	Pass rate
Yes	767	75.1%	624	81.4%
No	254	24.9%	155	61.0%
Total	1021	100.0%	779	

5. Feedback report on 2020.1 AKT

All candidates are under strict confidentiality obligations and must not disclose, distribute or reproduce any part of the exam without the RACGP's prior written consent.

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All of the questions in the AKT are written by experienced general practitioners (GPs) who currently work in clinical practice, and are based on clinical presentations typically seen in an Australian general practice setting. The questions should be answered based on the context of Australian general practice.

It is important to carefully read the clinical scenario and question. Although more than one option may be plausible, only the most appropriate option for the clinical scenario provided should be selected.

It is useful for candidates to identify any areas of weakness in their clinical practice through self-reflection and feedback. A supervisor, mentor or peer may assist them in developing an appropriate learning plan to assist with future exams and ongoing professional development.

All questions in the AKT undergo extensive quality assurance processes. Questions are rigorously reviewed during the creation, pre-exam and post-exam review processes, and also during the standard-setting process following the AKT. Reviews are performed by GPs who are currently in clinical practice across Australia.

This report provides a sample of clinical scenarios from the 2020.1 AKT that some candidates found challenging. It describes alternative options selected by candidates and provides feedback regarding the correct answer to the question.

Example 1

The clinical scenario described a middle-aged female who presents after having a workplace medical assessment completed, where she was told she has an 'abnormal' electrocardiogram (ECG). An ECG and her medication list are provided.

The question asked, 'What medication is MOST likely to cause the abnormality identified on the electrocardiogram?'

Of the options provided, the most appropriate response was amitriptyline. Alternative options included aspirin, atorvastatin and frusemide.

This question requires multiple pieces of knowledge to be applied to a clinical scenario. Candidates need to identify the appropriate ECG abnormality (QT prolongation), and then demonstrate that they know which medication is most likely to contribute to this problem.

Example 2

The clinical scenario described a young woman who is 10 weeks pregnant. She had attended the clinic for cervical screening, as she has never previously had one and is overdue.

The question asked, 'What is the MOST appropriate next step regarding Anika's cervical cancer screening?'

Of the options provided, the most appropriate response was to collect a sample of cells from the cervix using a broom-type brush. Alternative options included advising her that she does not require cervical screening, and postponing cervical screening until after the postnatal period.

This question requires candidates to be aware of the cervical cancer screening guidelines. This is a critical skill that Australian GPs are using regularly, and it is important to be aware of the required steps in special situations such as pregnancy.

Example 3

The clinical scenario described a middle-aged woman who presents for a dressing change for a wound on her foot. She had spilt boiling water on it five days prior and had been self-dressing in that time. Examination findings confirm this is a simple burn with no signs of infection.

The question asked, 'What is the MOST appropriate dressing?'

Of the options provided, the most appropriate response was an absorbent foam dressing. Alternative options included iodine-based dressings and silver suphadiazine.

This question requires candidates to be aware which appropriate types of dressings are appropriate for different types of wounds. While nurses may be applying wound dressings in general practice, it is important for GPs to be guiding appropriate dressing selection and general wound management.

Example 4

The clinical scenario described a young male child brought in for a check-up at six weeks of age. Clinical details are provided, including the child's birth weight, erratic sleeping pattern of waking 2–3 times at night, an occasional momentary squint appearance of their eye, a small umbilical hernia, and gain of 75 g of weight weekly. The question states you are concerned that one of these findings requires further investigation.

The question asked, 'What is the MOST appropriate next step?'

Of the options provided, the most appropriate response was to recommend further investigation of breast milk volume. Alternative answers included referring him to a sleep clinic, referral to an ophthalmologist to consider eye patching, and organising urgent hernia repair.

This question helps elicit a candidates' understanding of 'normal' in a young infant, and checks for 'unconscious incompetence'; for example, candidates need to be aware that 75 g of weight gain a week is inadequate and that further investigation is required. If candidates are unaware that this weight is a concern, they may not know they need to investigate and thus might miss the red flag.

Example 5

The clinical scenario described a middle-aged man who is a new patient presenting for a prescription for his diabetes medication, metformin extended-release. Further details are given, including his latest HbA1c, 24-hour blood pressure monitoring result, body mass index and a urine dipstick. Cholesterol results are also provided. On the urine dipstick, he is noted to have proteinuria.

The question asked, 'What is the MOST appropriate next step to reduce his risk of developing chronic kidney disease?'

Of the options provided, the most appropriate response was to lower his systolic blood pressure below 130 mmHg. Alternative answers included initiating aspirin, reducing his HbA1c, and initiating a statin.

This question assesses typical chronic disease management in general practice. It is important candidates are aware and understand appropriate chronic disease guidelines, including the management/prevention of chronic kidney disease.

6. *Further information*

Refer to the RACGP Education *Examinations guide* for exam-related information.

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