

# *RACGP Education*

**Exam report 2022.1 KFP**



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*We acknowledge the Traditional Custodians of the lands and seas on which we work and live, and pay our respects to Elders, past, present and future.*

## 1. Exam psychometrics

Table 1 shows the mean and standard deviation of the entire cohort of candidates who sat the exam. These values can vary between exams and semesters. The reliability is a measurement of the internal consistency of the exam, with values between 0 and 1.

A candidate must achieve a score equal to or higher than the pass mark in order to pass the exam. The Modified Angoff standard-setting method is used in determining the pass mark. This is a criterion-referenced methodology that is used internationally in high-stakes assessments.

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

The Royal Australian College of General Practitioners (RACGP) has no quotas on pass rates; there is not a set number or percentage of people who pass the exam.

**Table 1. 2022.1 KFP psychometrics**

|                        |       |
|------------------------|-------|
| Mean score (%)         | 63.02 |
| Standard deviation (%) | 7.31  |
| Reliability            | 0.82  |
| Pass mark (%)          | 56.39 |
| Pass rate (%)          | 81.54 |
| Number sat             | 948   |

## 2. Candidate score distribution histogram

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

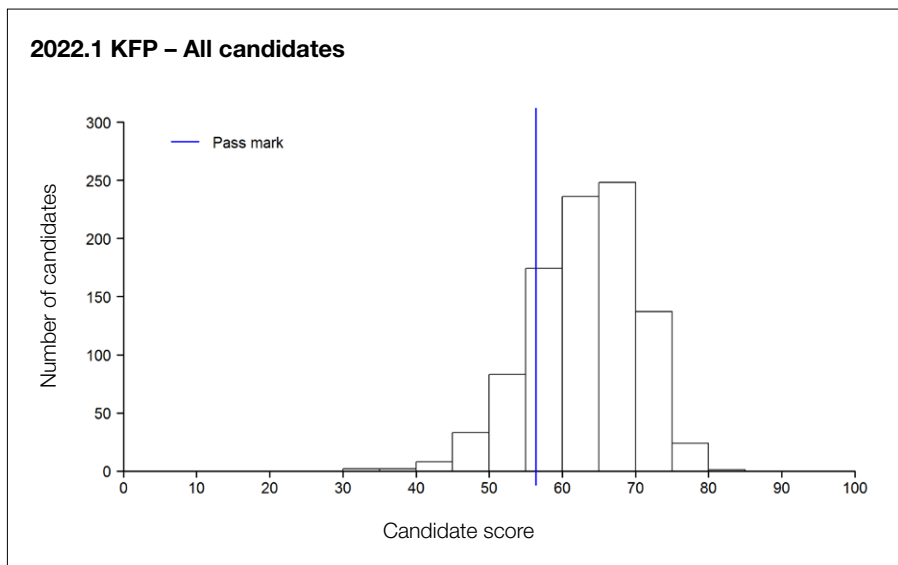


Figure 1. Final 2022.1 KFP score distribution

## 3. Candidate outcomes by exam attempt

Table 2 provides pass rates (%) displayed by number of attempts. As displayed below, there is a general trend that suggests candidate success diminishes for each subsequent attempt. Preparation and readiness to sit are therefore paramount for candidate success.

Table 2. 2022.1 KFP pass rates by number of attempts

| Attempts                       | Pass rate (%) |
|--------------------------------|---------------|
| First attempt                  | 91.5%         |
| Second attempt                 | 75.2%         |
| Third attempt                  | 68.5%         |
| Fourth and subsequent attempts | 51.2%         |

## 4. Candidate performance – AKT and KFP exam

Table 3 shows the performance of the 696 candidates who sat both the Applied Knowledge Test (AKT) and the KFP exam in the 2022.1 exam cycle.

**Table 3. 2022.1 AKT and KFP exam pass/fail correlation**

| AKT   | KFP  | Number | Percentage |
|-------|------|--------|------------|
| Pass  | Pass | 518    | 74.4%      |
| Pass  | Fail | 25     | 3.6%       |
| Fail  | Pass | 66     | 9.5%       |
| Fail  | Fail | 87     | 12.5%      |
| Total |      | 696    | 100.0%     |

## 5. Feedback report on 2022.1 KFP exam cases

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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This feedback report is published following each KFP exam in conjunction with candidate results. All of the questions within the KFP exam are written and quality-assured by experienced general practitioners (GPs) who currently work in clinical practice and are based on general presentations typically seen in an Australian general practice setting. The questions must therefore be answered in the context of Australian general practice.

The KFP exam is designed to assess the clinical reasoning and clinical decision-making of the candidate – a core competency for all clinicians. It is important to remember that the KFP exam is not simply a short-answer paper, but requires the analysis of the clinical scenario and consideration of the initial information and any evolving information as the cases progress. The candidate is then required to answer focused questions relating to the context of the given clinical scenario.

The paper reflects the breadth of clinical encounters seen in Australian general practice, and as such, the answers should relate to that context. This feedback report is a summary of the information derived from the actual examiners marking the questions. Each examiner marks one question for all candidates, which allows them to offer pertinent information on the common errors, as well as what constituted good answers.

The feedback is provided so all candidates can reflect upon their own performance in each case. It is also being provided so prospective candidates, as well as those assisting them in their preparation, can see the breadth of content in the exam. This feedback report should be read in conjunction with the advice given in the RACGP Education [AKT and KFP guide](#).

## Case 1

This case focused on a child of Aboriginal descent presenting with his grandmother with a new itchy rash. Candidates were required to identify the most likely diagnosis and to advise on appropriate non-pharmacological and pharmacological management strategies.

It is important for candidates to consider all the information provided in a case stem. Common errors included providing aspects of education not tailored or relevant to the clinical case presentation and that did not consider the key features of the case.

## Case 2

This case focused on an adult male presenting with back pain and stiffness. Candidates were required to outline additional aspects of history that would suggest a further underlying diagnosis, to arrange appropriate investigations and to provide pharmacological management strategies.

Common errors included articulating elements of the clinical case presentation that lacked specificity and did not add diagnostic value. As the KFP exam is a test of clinical reasoning, it is important that candidates provide answers that are specific, concise and relevant to the information provided.

## Case 3

This case focused on an infant presenting with fever and a rash after returning from overseas. Candidates were required to consider the most likely differential diagnosis and to articulate necessary immediate management actions.

Common errors included a lack of knowledge relating to the assessment and management of infective illnesses in the early childhood period, with diagnoses and subsequent management actions being offered that were not congruent with the case presentation.

## Case 4

This case focused on an adult female presenting to a rural practice with new onset heavy vaginal bleeding. Candidates were required to identify aspects of her history that increased the risk of serious underlying disorder and to outline appropriate investigations. As the case evolves, she reattends with heavy vaginal bleeding. Candidates were required to commence immediate management actions.

Common errors included providing aspects of history that were already provided in the case presentation. It is important that all answers directly address the questions asked within the case.

## Case 5

This case focused on a male child presenting with his mother with bedwetting. His parents had amicably separated. Candidates were required to find specific aspects of history to help determine the underlying diagnosis and to advise on non-pharmacological management strategies. The next day, his father, who was not present at the appointment, requests his medical record, which candidates were required to appropriately manage.

Common errors included providing aspects of history that were already provided in the case presentation. Further errors also included a lack of knowledge pertaining to the relevant legislation governing the release of medical records. The KFP exam assesses all aspects of the RACGP Curriculum, including broader domains relating to clinical governance, ethical dilemmas and medicolegal aspects of general practice.

## Case 6

This case focused on an adult female presenting with headaches and fatigue. Candidates were required to identify initial pharmacological management actions and to arrange appropriate initial investigations.

The most common errors included the provision of answers in excess of the number of answers required, increasing the risk of overcoding. Candidates should only provide the number of answers requested.

## Case 7

This case focused on an adult female presenting with progressive shortness of breath. Candidates were provided with her spirometry findings and required to identify initial pharmacological and non-pharmacological management actions. She represents nine months later with a new rash, for which candidates were required to outline the most likely diagnosis.

Common errors related to providing pharmacological management actions in lieu of non-pharmacological management actions. It is important to bear in mind that when the question asks for actions, these refer to a series of actions that need to be enacted in series. When the question asks for options, the inference is that it might not be expected or reasonable for all of the cited options to be commenced simultaneously.

## Case 8

This case focused on an adult male presenting with an itchy rash. He had previously seen a colleague at the practice who provided antibiotic therapy. Candidates were required to relay the most likely diagnosis and to commence pharmacological management actions. He later attends wishing to make a formal complaint relating to the colleague's actions, which candidates were required to appropriately manage.

The most common error related to providing differential diagnoses that were not congruent with the case presentation.

## Case 9

This case focused on an adult female presenting with a new mole. A detailed past medical history and current drug history was provided. Candidates were expected to outline additional examination findings that would increase the risk of a serious underlying diagnosis and to enact appropriate initial management actions. She attends the next day with a positive home pregnancy test, for which candidates were required to undertake appropriate pharmacological management actions.

As in previous cases, common errors related to providing additional examination findings that lacked specificity, as well as outlining management actions that were not appropriate in the context of the case presentation.

## Case 10

This case focused on an adult female presenting with a progressively itchy vulva. Candidates were required to identify the most likely diagnosis and to commence appropriate pharmacological management actions. She later presents with a facial rash, for which candidates were required to further instigate appropriate pharmacological management actions in view of the facial rash.

Many candidates failed to demonstrate sufficient knowledge pertaining to pharmacological actions. The KFP exam frequently assesses knowledge of commonly prescribed medications, including pertaining to specific dosages. When this information is required, the question will indicate this requirement explicitly.

## Case 11

This case focused on an elderly man presenting with groin and knee pain. Candidates were provided a detailed past medical history and an X-ray image. Candidates were required to identify radiological features on the X-ray supportive of the most likely differential diagnoses and to provide advice relating to appropriate non-pharmacological advice.

Many candidates failed to provide non-pharmacological management advice that was congruent with current evidence-based guidelines. The KFP exam frequently assesses contemporary best practice for common presentations in context of the current supporting evidence base.

## Case 12

This case focused on an adult female presenting with facial pain and headaches, for which candidates were required to outline appropriate pharmacological management options. She reattends later presenting with persistent headaches and a rash, for which candidates were required to arrange appropriate investigations, as well as to outline appropriate non-pharmacological management advice.

As per previous cases, many candidates failed to demonstrate sufficient knowledge pertaining to pharmacological actions. The KFP exam frequently assesses knowledge of commonly prescribed medications, including pertaining to specific dosages. When this information is required, the question will indicate this requirement explicitly.



### Case 13

This case focused on an elderly adult male presenting to a rural emergency department with acute abdominal pain. Candidates were required to arrange appropriate initial investigations and to commence immediate management actions. As the case evolves, the patient makes a full clinical recovery and later presents for advice pertaining to fitness to drive, which candidates were expected to appropriately manage.

The KFP exam frequently assesses candidates' abilities to manage acutely unwell patients. Common errors included providing management actions that did not address the full clinical presentation or demonstrate sufficient knowledge to manage the clinical acuity of the presentation.

### Case 14

This case focused on an adult female presenting with fatigue and tongue soreness from nutritional deficiency. Candidates were required to identify the most likely differential diagnosis, to identify risk factors pre-disposing to the likely diagnosis, to arrange appropriate initial investigations and to instigate appropriate management actions.

The most common errors included providing answers that were general in nature and failed to appreciate the clinical presentation, particularly pertaining to instigating appropriate management actions.

### Case 15

This case focused on an adult male presenting with worsening shortness of breath. A detailed past medical history was provided, and candidates were required to identify the most likely differential diagnoses and to instigate appropriate management actions.

Common errors included providing differential diagnoses and subsequent management actions that were too narrow in scope and did not take into consideration all aspects of the detailed past medical history provided.

### Case 16

This case focused on an adult male with long-term disability and limited communication skills presenting with his mother with weight loss, vomiting and abdominal pain. Candidates were provided with a detailed past medical history and were required to identify the most likely diagnosis. As the case evolves, he makes a full recovery and later attends with his mother who enquires regarding eligibility for funding from the Australian National Disability Insurance Scheme, for which candidates were expected to provide suitable advice.

The most common errors related to providing answers that did not interpret the scenario holistically and did not take into account broader considerations pertaining to the case presentation. The KFP exam frequently assesses broader aspects of the RACGP Curriculum, including within the domains of clinical governance and medicolegal dilemmas.

## Case 17

This case focused on an adult female presenting with long-term widespread pain and fatigue. A detailed past medical history and drug history was provided, and candidates were required to provide suitable non-pharmacological and pharmacological management options. They were also expected to identify specific patient factors predictive of a poor long-term prognosis.

The most common errors related to providing pharmacological management options that did not take into account past medical history provided, and as such, increased the risk of harm to the patient in context of the current drug history. When considering pharmacological options, it is important to consider potential interactions and adverse effects.

## Case 18

This case focused on an elderly male presenting for the results of his annual health assessment. A detailed past medical history and investigation results were provided. Candidates were required to identify likely causes of the abnormal investigation results, to initiate pharmacological management actions and to provide appropriate non-pharmacological management advice.

Examiners were surprised at the volume of answers that failed to appreciate the implications of pharmacological interactions and contraindications when commencing further medications. When considering pharmacological management actions, it is important to consider the appropriateness of adding further medications when cessation of a currently prescribed medication could be a more appropriate strategy.

## Case 19

This case focused on a male infant of Aboriginal descent presenting with his mother to a remote practice with symptoms of fever and a cough. Candidates were given a detailed clinical presentation and were required to outline the most likely differential diagnoses, to identify relevant aspects of history that would predispose him to risk of more serious illness and to provide advice relating to likely onward management actions.

Several candidates provided answers that did not address the case presentation. Presentations suggestive of a serious underlying diagnosis, as well as relevant risk factors, are commonly assessed within the KFP exam, and candidates are expected to be able to recognise high-risk clinical presentations in line with current Australian clinical guidelines.

## Case 20

This case focused on an elderly female presenting for the results of her annual health assessment. A detailed past medical history and investigation results were provided. Candidates were required to identify likely causes of the abnormal investigation results, to arrange further appropriate investigations and to initiate immediate management actions.

The most common errors included providing answers that were not specific to the abnormal investigation results provided. Such answers do not allow candidates to demonstrate the range of knowledge required to score the full range of marks available.

## Case 21

This case focused on an elderly male presenting with palpitations. A detailed past medical history and the results of an electrocardiogram were provided. Candidates were required to arrange further investigations, to commence immediate pharmacological management actions and to provide onward further non-pharmacological management advice.

The most common errors included providing answers that did not take into consideration the key features of the case, and as such, were not applicable for the evolving clinical presentation. Candidates are expected to use the key features of the case to provide answers that are congruent to the clinical case presentation.

## Case 22

This case focused on an adult female with symptoms of insomnia, fatigue and low mood, for which candidates were expected to provide initial pharmacological management actions. As the case evolves, she attends eight weeks later with a progression of her symptoms. Candidates were expected to recognise the most likely diagnosis and to arrange immediate non-pharmacological management actions.

Although well answered overall, many candidates failed to appreciate the severity of the evolution of her symptoms, and as such, provided management actions that were not appropriate to the clinical acuity of the case presentation.

## Case 23

Candidates were presented with a pregnant female seeking advice relating to immunisation during pregnancy, after having had a previous local reaction, for which candidates were required to provide specific advice. She later presents in the postpartum period with persistent vaginal discharge. Candidates were required to specify further additional aspects of history that would suggest a serious underlying cause and to provide a differential diagnosis.

Common errors included a lack of knowledge relating to the National Immunisation Program. Immunisations are frequently assessed in the KFP exam as a core component of the RACGP Curriculum.

## Case 24

This case focused on an adult male presenting with acute abdominal pain, diarrhoea and fever. Candidates were required to outline the most likely diagnosis, to arrange appropriate investigations and to provide onward lifestyle advice.

Common errors related to providing incorrect differential diagnoses and management actions that were less appropriate in the immediate context, including with respect to lifestyle advice that is no longer reflective of current evidence-based practice.

## Case 25

This case focused on an adult female presenting with hearing loss and ear pain, for which candidates were required to advise on suitable pharmacological management actions. Having made a full recovery, she reattends six months later complaining of bilateral hearing loss. Candidates were required to provide the most likely diagnosis and to provide appropriate non-pharmacological management advice.

The common errors in this case included providing answers that did not demonstrate the expected range of knowledge pertaining to the assessment and management of hearing loss.

## Case 26

This case focused on an adult female presenting for the results of her work health assessment. A detailed past medical history and investigation results were provided. Candidates were required to identify the likely diagnosis and to arrange further investigations. She later reattends with a painful red eye, for which candidates were required to provide the most likely diagnosis.

Common errors included a lack of knowledge pertaining to a common presentation within the primary care context. The KFP exam assesses all aspects of the RACGP Curriculum, including broader domains relating to medicolegal aspects of general practice.

## 6. *In conclusion*

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As per previous examination cycles, there are several common themes to consider when approaching the KFP exam:

- Candidates must answer the question in the context of the clinical scenario, using all the information provided.
- It is important to ensure that answers provided are relevant to the key features of the case presentation.
- Provide only the number of answers requested; providing additional answers greatly increases the risk of overcoding.
- Be specific in answers. Non-specific answers might not score or will attract fewer marks.
- Ensure that answers provided are appropriate to, and address the acuity of, illness within the case presentation.
- Be aware of current clinical guidelines relevant to the provision of primary care at Fellowship level.
- Access the practice exams after enrolment closes and use the RACGP assessment resources, such as the exam support online modules accessed via *glearning*.

## 7. *Further information*

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Refer to the RACGP Education [Examinations guides](#) for exam-related information.





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