

The following advice has been written by two students at the University of Leeds.

	Paper 1	Paper 2	OSCEs	Other specific advice
Year 1	<p>IMS, CBS, N&E</p> <p>Books: Medical Sciences by Naish, Anatomy and Physiology by Tortora, Illustrated Histology by Mitchell, Illustrated clinical biochemistry by Stewart. Media: Acland's anatomy Practical: HARC</p>	<p>ANATOMY SPOT TESTS</p>		<p>First year at Leeds is where the majority of the principles of physiology and anatomy (continued in second year) are learnt. For this reason it is really important to try get a grasp of these now as not only will it aid learning in subsequent years, but it may be harder to find the time to go back and learn this content.</p> <p>I book I found particularly useful was Principles of Anatomy and Physiology by Tortora and Derrickson. It is very comprehensive, clearly explains topics and each chapter has a summary and self test questions (with answers) to consolidate learning.</p> <p>For the histology part of the syllabus, shotgun histology videos online are useful, as is Wheater's functional histology, however it is quite detailed.</p> <p>A dedicated anatomy book is also useful for the first two years of anatomy, as these usually offer good images in order to help visualise parts of the body. Gray's anatomy and Essential Clinical Anatomy were two I used and I found them both helpful. They are good for revisiting anatomy in later years as well. N.B. for the spot tests, it is often also useful to look at anatomy atlases, as these show actual prosections rather than animated images, so it is more representative of what the spot test will be like.</p>

<p>Year 2</p>	<p>BMS, C&M</p> <p>Books: Medical Sciences by Naish, Anatomy and Physiology by Tortora, Illustrated Histology by Mitchell, Illustrated clinical biochemistry by Stewart. Davidson's Medicine, Kumar and Clarke Clinical Medicine, Hutchinson's clinical methods, McCleod's clinical skills, ABC of ECGs by BMJ.</p> <p>Media: look up examples of ECG and chest, abdomen, pelvis x rays.</p>	<p>ANATOMY SPOT TESTS</p>	<p>OSCEs do not feature as a formal examination in second year but this is where the first teaching of systems examinations occurs. These play an important role in clinical practice and subsequent OSCEs so practicing them whenever you get chance (particularly on patients) is recommended.</p> <p>When you get the opportunity to see patients to take histories, make every effort to take part rather than hoping someone else will do the majority of the talking. It is not examined until 3rd year so any experience doing it in 2nd year is excellent, plus you will have to start doing it a lot more in third year!</p> <p>Often many of the systems examinations have some variation in what things to look for and in what order. As long as you are confident in carrying out the exam and have been taught by a clinician or clinical educator it is less important to worry about the discrepancies in between some aspects of examinations.</p>	<p>The second year builds on what is learned from the normal physiology of the body to begin incorporating disease processes, as well as continuing anatomy sessions.</p> <p>It is worth refreshing briefly your understanding of basic physiology as this greatly helps when learning about the process of disease and how it manifests in patients.</p> <p>Systematic Pathology is the recommended textbook for BMS. It is very detailed and covers almost all of the content within BMS, however the lectures (at the time I sat the module) were very detailed and easy to understand. The weekly questions that are set should be seen as an opportunity to learn things throughout the module, rather than something to just simply pass. These are good exam revision and representative of what questions may appear on the exam.</p> <p>For the anatomy section in control and movement, textbooks mentioned above are useful for the gross structures of the limbs and central nervous system. However it is also very important to gain an understanding of the spinal tracts. Neuroanatomy by Crossman and Neary is excellent for this, and is also reliable, as occasionally online resources on the tracts can differ slightly. The articulate presentations on the VLE and the mock questions (if they are still there) are good practice and help consolidate learning.</p> <p>I&P and RESS introduce some important basic concepts, particularly with critical appraisal and research. Understanding and knowing what these are is useful in later years.</p>
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<p>Year 3</p>	<p>CLINICAL YEARS: GENERAL MEDICINE INTERGRATED EXAM</p> <p>Books: Lippincott's Pharmacology, Medical microbiology made ridiculously simple by Gladwin, Neurology and Neurosurgery Illustrated by Lindsey, Illustrated textbook of paediatrics by Lissauer, Neuroanatomy illustrated, Oxford handbooks: specialties, clinical medicine.</p> <p>Lecture notes (especially therapeutics)</p>		<p>This is the first time OSCEs are examined as a summative assessment at Leeds. The majority of stations are histories or system examinations.</p> <p>They are aimed to assess basic skills in history taking and examining patients so these can be built upon in subsequent years.</p> <p>OSCE: A Training Manual for Medical Undergraduates is full of sample stations and marking proformas with justification for marks, making it good for practicing stations. Both histories and examinations should be practiced whenever you get a chance on real patients as this hugely improves your clinical skills. To supplement this (and it is probably easier as well), practice with peers so you get the hang of asking the correct questions in histories and become slick at examinations.</p> <p>Societies often run practice OSCE sessions throughout the year and these are often run by later years who have had experience sitting these.</p>	<p>3rd year places a lot more emphasis on self directed learning as much of the year is spent on placement in comparison to previous years. Ideally, taking a look at all the conditions for listed in the study guide for this year can help in planning how many to cover each month/placement.</p> <p>General medicine and surgery form a large part of the conditions therefore a good clinical medicine resource is vital. Oxford Handbook of Clinical Medicine is invaluable and concise. Clinical Medicine by Kumar and Clarke is much more comprehensive, but likely to contain sufficient detail about the majority of conditions. Online resources include NICE guidelines, Medscape and Patient.co.uk professional reference articles.</p> <p>Investing some time in learning to interpret things like X-rays, ABGs, ECGs and basic blood tests is very useful as it crops up again and again during and after 3rd year. Radiology masterclass and radiopaedia are both good online resources for learning about X-rays. ECGs made easy is an excellent resource for ECG interpretation.</p> <p>To prepare for the integrated examination, some mock questions were released which are advisable to do although there are not many. Get Ahead for finals in medicine is a useful book for questions. Although it is aimed for finalists, many of the general medicine topics are manageable once you have gone over the conditions list.</p>
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<p>Year 4</p>	<p>CLINICAL YEARS: SPECIALITY MEDICINE INTERGRATED EXAM</p> <p>Medical Sciences by Naish, Student Gray's anatomy, Kumar and Clarke Clinical medicine, Oxford handbooks: specialties, clinical medicine, Clinical surgery by Henry.</p> <p>All of the above recourses. Particularly radiological resources and ECG books.</p>		<p>There are plenty of opportunities on placement to practice vital OSCE skills such as histories, examinations and explaining things to patients. Take advantage of as many of these as possible.</p> <p>There is plenty of OSCE practice scheduled in to each placement as well. Doing practice with peers again is useful, as practicing different scenarios and participating in group discussion after can aid learning as people often have different views and experiences of different things. It is easier to get feedback off peers as well as being observed.</p>	<p>As 3rd year focuses on general medicine and surgery, 4th year is aimed mainly at specialities: Paediatrics, Obstetrics and Gynaecology, Psychiatry, Oncology, General Practice, Emergency Medicine and Anaesthesia.</p> <p>This year places even more emphasis on self directed learning and keeping up with work as you go along is worthwhile doing, even if you prefer to cram (like me). This is because many of the specialities are very different and once you finish your rotation on it, it is difficult to find the time to go back to try and finish learning it while then trying to learn the next one.</p> <p>Textbooks are recommended for each ICU, and it is often personal preference that dictates which is used and when. Psychiatry, Paediatrics and Obstetrics and Gynaecology have textbooks in the recommended list which cover most of the topics of each of these ICUs. For example, Psychiatry by Burton, Illustrated textbook of Paediatrics by Lissauer and Clayden and Obstetrics and Gynaecology by Impey. These are just examples. Oncology, general practice and the acute specialities have less individual texts recommended (although Oncology has a handbook written by people at Leeds and this is the main recommended reading for that placement). It may then be better to rely on different resources such as those online rather than one textbook in particular, as it may not be sufficient to cover all of the content expected listed in each study guide (there is a separate study guide for each placement rotation with specific things to learn).</p> <p>Practice questions are a good way to gauge your learning and give you a feel for the integrated exam.</p>
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	Paper 1	Paper 2	OSCEs	Other specific advice
Year 1	<p>IMS, CBS, N&E</p> <p>Use the tutorials to get to grips with topics you don't understand. The tutors are receptive to students who ask questions and remember that if you don't understand something, it is likely that a lot of your peers also don't understand it either!</p> <p>The MSRC website has a lot of their own resources including MCQs for the Integrated Exam.</p>	<p>ANATOMY SPOT TESTS</p> <p>Anatomy Time in the dissection room is invaluable – make sure you complete the workbook before your anatomy sessions. Personally I found this made a huge difference to how much I remembered later.</p> <p>Spend time re-watching the anatomy demonstration videos (Do this earlier rather than later as the anatomy viewing booths become very busy the closer it gets to the spot test!)</p> <p>http://www.innerbody.com/ is a helpful site that gives you cartoon animations of different body systems along with descriptions.</p> <p>Histology For histology: Youtube shotgun histology. These are short videos that go through some of the main points of various histological subtypes.</p> <p>http://histology.leeds.ac.uk is another great resource for histology</p>	N/A	<p>The lectures are excellent sources of information. Use these to direct your further reading.</p> <p>It is worth starting to look at some of the drugs on the drugs formulary list and making short drug profiles.</p> <p>Try and utilise the mock exams to test your knowledge. Make the most of them now – when you are in year 4 and 5 you crave mock exams!</p> <p>Don't forget to utilise all the resources on the VLE. Remember – if it is on the VLE, then they can test you on it.</p>

<p>Year 2</p>	<p>BMS, C&M</p> <p>As above.</p>	<p>ANATOMY SPOT TESTS</p> <p>As above.</p>	<p>N/A</p>	<p>Learning the different muscle attachments for the anatomy spot test is tough. I would recommend getting a friend and testing each other on them.</p>
<p>Year 3</p>	<p>CLINICAL YEARS: GENERAL MEDICINE INTERGRATED EXAM</p> <p>The MSRC website has some good material covering the main conditions – do not rely solely on this however.</p> <p>Patient.co.uk is a useful resource, especially for the dermatology conditions.</p> <p>Kumar and Clarke is useful for understanding the conditions. However, the Oxford Handbook of Clinical Medicine helps you get more of a clinical picture.</p>	<p>N/A</p>	<p>Try and do as much practice on the wards. Clerk patients if at all possible and maybe time yourself when you do this so you can become more efficient at taking histories.</p> <p>If there isn't much to do on the ward, with another student go and practice</p>	<p>Do as many MCQ and EMQ questions as you can. Don't be afraid to use question books aimed at final year medical students. You may be surprised to find how much you know!</p> <p>As well as knowing the conditions on the study guide, it is useful to know differential diagnoses of those conditions.</p> <p>Try and look at as any ECGs, X-rays and ABG results as you can. A good grounding in these basic skills helps hugely for later years.</p>

<p>Year 4</p>	<p>CLINICAL YEARS: SPECIALITY MEDICINE INTERGRATED EXAM</p> <p>ACC - RRAPID handbook, Oxford Handbook of Clinical Medicine, ICU handbook and lectures</p> <p>Oncology – Lectures and the oncology handbook</p> <p>Primary Care – NICE bites</p> <p>Paediatrics – The Illustrated Textbook of Paediatrics</p> <p>GOSH – Essentials of Obstetrics and Gynaecology</p> <p>Psychiatry – Neel Burton</p>	<p>N/A</p>	<p>The 'Brian OSCE guide' is a useful resource – however it may be slightly outdated in some sections.</p>	<p>The Get Ahead Specialty SBA and EMQ books have plenty of questions on paediatrics, obstetrics and gynaecology and psychiatry.</p> <p>There are Dr Clarke courses that run in Leeds and London that are expensive but students have found them useful to attend. The courses are on obstetrics and gynaecology and paediatrics.</p> <p>Keep your eye on your email inbox as various societies and ICU leads may organise mock OSCEs during the year.</p>
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