

Feedback from a Part 2 Candidate in 2022

I'll note here my own revision approach, what came up in my exam, and what I'd do differently/maintain. I took the exam at the end of ST6, but had been a haematology SpR for just over 5 years (I'm a LTFT trainee).

My revision approach: For this first attempt at the exam, I wanted to minimise disruption to family life with two young children and other personal commitments. I was able to get a handful of extra nursery days and in total (including the 3 personal study leave days I took), I think I had around 8-10 days for personal revision. I also did the five day NHSBT revision course and the five day Andy Godfrey free revision course. In the evenings or on journeys I often listened to podcasts/lectures. There was much more I could have revised but I was running out of steam by the end of even this limited period of revision.

The most useful things for me in private study were listening to podcasts and lectures in the background; doing a lot of practice vivas (see below) and our TPD had set up 6 morphology practice exams. I also found the Embolus app useful for H&T revision. I did some guideline reading/notes but less than for Part 1 - more quick scans for principles than granular detail.

Overall points:

- I listened to recorded lectures of local teaching, plus the Blooducation and Bolus podcasts.
- People were so generous with practice vivas. I had about 8 practice vivas with consultants, and another 5 or so with a colleague who was also preparing for the exam. They had three purposes: they were motivating (they can be a "wake-up" in a dreary reading session), they revealed what I didn't know, and they were good to practice fluency in articulation
- We had weekly morphology training throughout our rotation - this helped so much and meant that morphology was still a concern to prepare for (especially running out of time), but I had a good base to work from.
- There was a lot of potential for wasting time about things that *might* come up but in reality wouldn't. One revision course had a session on lymph node histology interpretation as he thought it might come up. In practice, I didn't get a single trephine, and I think only one bone marrow aspirate in the whole exam. So blood film morphology was central. Even then, I decided that if a worm came up I'd just say "helminth" and not bother to learn how to identify it as it just wasn't realistic.
- You genuinely have learned 90% of what you need through daily clinical practice. I was glad to be taking this near the end of my training and especially after doing all the jobs in the rotation.

Exam experience on the day:

- I had a microscope nightmare which resulted in two wasted revision days, lots of stress, and a decent-sized bill for breaking part of a microscope. It came down to foolishly only taking home one practice slide and thinking that a microscope was broken, when it actually wasn't...anyway long story. The only moral would be to acquire/borrow a microscope early, check you're happy with both using it and transporting it; or alternatively paying up early for microscope hire and delivery.
- Once there - I appreciated staying with family and visiting friends while in near the centre. I played "the floor is lava" with toddlers every morning and evening of the exam! This meant I wasn't trying to frenetically revise and I felt relatively calm for the most part.
- Short cases: the hardest bit I think. I almost ran out of time. It is really important to know immunophenotyping and **how to report it**, not just the answer. So build it like a layer: immaturity markers, lineage markers, diagnostic markers and then any others that might

hint at subtype. I think almost half of my cases had some sort of immunophenotyping section. Comparatively, only one had haemoglobinopathy studies.

- Long cases: easier, but surprising level of detail about malignant management came up here. Not super in-depth but still enough that I had to know a bit about how to manage individual conditions.
- Coag written: major time pressure again. There was a mix of diagnosis and management questions, data interp, some on the principles of blood tests, a quality assurance question and so on.
- Transfusion written: Less time pressure, still tricky. A wide range of all the topics you would expect from the transfusion revision course came up.
- Vivas: these felt really rushed - but more the stress for the examiners rather than me. In general I knew most of what they were getting at, but on at least 3-4 occasions I had to just say "I don't know the answer to that" or "I'm not sure what you're getting at" (I passed the exam, so the lesson here is don't panic if you can't answer everything, you don't need to score 100%!)