



**ARTP/BTS
NATIONAL ASSESSMENT
PART I
2005/6**

GUIDELINES FOR CANDIDATES

PART I PRACTICAL EXAMINATION

The Part I examination will take place in a specified examination centre usually within the months of May/June and will be performed at the weekend. Candidates will not be assessed in their own workplace but are required to indicate on the registration form the type of equipment regularly used and this will be made available during the examination. **NB All candidates are expected to use equipment manufactured by one of either Jaeger, Morgan Medical Ltd, Pulmolink or Sensormedics**

The practical examination will consist of the following procedures:

- pre-test procedures (including height and weight measurement, history taking eg smoking, medication)
- spirometry (including MFVC and peak expiratory flow)
- lung volumes (and subdivisions)
- transfer factor using the single breath technique
- administration of a bronchodilator
- calibration and quality control of equipment

NB All candidates will be expected to demonstrate use of a wedge bellows spirometer, a Wright peak flow meter and to measure dynamic lung volumes via a maximal flow volume curve as well as via a volume time device. The choice of method for measuring dynamic lung volumes will be at the discretion of the examiner on the day of the test

The metered dose inhaler (MDI) or nebuliser will contain a placebo inhalant unless administration of a specific bronchodilator is indicated by either (1) the patient or (2) the assessor. An MDI should be administered unless after coaching the patient cannot manage the correct procedure. At this point an alternative device should be selected. The response to the inhalant will not be measured.

The assessors will not ask questions whilst the candidate is performing the measurements. All tests should be performed according to the ARTP/BTS Guidelines for the Measurement of Respiratory Function (Respiratory Medicine 1994; 88: 165-194). Candidates will be expected to explain the reasons for any deviations from the published guidelines. **It is essential that candidates contact the allocated centre prior to the assessment in order to arrange a visit to familiarise themselves with the laboratory and check that the equipment/software is similar to that used in the current workplace.**

The tests should be carried out within the context of the local policies for Health and Safety, Infection Control, care and well-being of the patient. Again, penalties will be incurred if the tests are at variance with these policies. The assessors reserve the right to intervene during the assessment where, in their opinion, the well-being of the patient may be compromised.

If for any reason the assessment cannot take place or you are unable to attend the examination, failure to inform the assessors or examination centre at least 24 hours prior to the test will incur a charge.

Patient selection

The patients performing the tests during the assessments will be selected by the designated centres but will have prior experience of performing lung function tests. Reserve patients will be arranged in case of illness. Patients with severe respiratory dysfunction will not be chosen.

All patients will be advised prior to testing that an assessment of the candidate will be taking place during the measurements and that this will involve extra people being present in the testing room.

Oral Examination

Each part of the practical examination will be followed by a short oral examination of approximately ten minutes. Following this a final oral examination of approximately 45 minutes will be performed. Candidates must demonstrate knowledge of the calculation procedures and understand how the reference values are derived. The oral questioning will generally focus on how the tests were performed, the background theory to the measurements, the principles of the equipment utilised for the measurements, the results obtained and the expected changes in disease, knowledge of the testing protocols and departmental policies and procedures.

The candidate will be expected to manually calculate results for both lung volumes and transfer factor in order to demonstrate an understanding of the equations and their derivation. The candidate should have ready access to the equations necessary and be practised in the calculation of these results.

It is expected that a completed training portfolio/logbook will be available during the practical examination which should be brought with all candidates on the day of the assessment. For students undertaking the full BSc Clinical Physiology this will be the part I logbook. Those candidates undertaking the part I and part II independently of the full degree should bring their training portfolio (see below).

Training portfolio

Individual student logbooks are an important record of a trainee's experience in performing Respiratory Function testing. They should be no more than 1 lever arch file in size and contain the following:

- An outline of the trainee's department including number of staff, measurements performed etc
- A copy of the trainee's initial CV
- A log of the investigations performed by the trainee in meeting the competencies outlined by ARTP
- A copy of the Work Based Supervisors assessments of the procedures as detailed by the ARTP
- Copies of any assignments set and marked by the Work Based Supervisor as part of the overall training programme (this may also include oral questioning and interpretation of tests performed)
- Copies of training received in various aspects of Health and Safety eg Basic Life Support, Manual Handling, Fire and Security
- Certificates received from relevant meetings/courses attended eg ARTP Conference, ARTP/BTS Course in Basic Respiratory Function and Measurement.

The portfolio should **not** contain any photocopied material given to the trainee or used in preparing assignments. For example copies of departmental procedures should not be included but assignments requiring the trainee to explain the procedure would be. All objectives should be signed and dated by both the supervisor and the trainee.

**STANDARDS REQUIRED TO ACHIEVE A PASS AND INFORMATION
REGARDING RE-SITS**

GENERAL RULES

Candidates that are unable to attend either the practical examination on the date given must provide an explanatory letter which must be signed by their work based supervisor. In the case of vacations coinciding with the examination dates, evidence must be provided that the holiday was booked prior to the dates for the examinations being finalised.

Candidates must achieve a mark of 50% or above in each section of the practical examination – this equates to any C grade (C-/C/C+).

Candidates achieving a D grade in one or more of the sections will be asked to re-sit the practical examination and will be given feedback as to where the errors were made in the initial performance.

The re-sit practical examinations will be performed at an examination centre that is not the workplace of the candidate but will revert to the format in which two assessors will observe the performance. An overall viva will be performed at the end of the testing session in which both technical and clinical aspects will be discussed.

All results will be processed as soon as possible following the ARTP Examination Board meeting. There will be an appeals procedure for any candidates that feel they may have been unfairly marked. Successful candidates will receive certificates at the ARTP Annual Conference.

Please do not hesitate to contact me should you require any further information or have any queries regarding the assessment

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