A candidate’s perspective of the DOHNS

Introduction
So you’ve just passed your MRCS or perhaps your MRCGP, you’re about to revert back to having a normal life and then… you realise there is the DOHNS exam. But wait a minute, isn’t the DOHNS exam not merely for General Practitioners with a special interest in ENT? Or is it just for ENT trainees and does it have nothing to do with General Practice?

The purpose of the now intercollegiate DOHNS exam is to test the breadth of knowledge, clinical and communication skills and the professional attributes considered appropriate for non-consultant grades and trainees in ENT Surgery by the Royal Colleges. It is also intended as a test for those who practice within other medical specialities but who have in interest in the aspects of where that speciality interfaces with ENT. This applies in particular to GPs with a special interest in ENT and considering setting up a service in minor ENT surgery. There are plans for the DOHNS exam to replace part of the intercollegiate MRCS exam for ENT trainees in the future. In the mean time it has already become an important line on your CV as several deaneries consider it a desirable criterion for short listing potential ENT SpRs. Taking this exam does show extra commitment to the speciality. Besides that, it is a good way of refreshing and broadening your knowledge of ENT Surgery.

Preparation for the exam
The entry requirements consist of 6 months of ENT Surgery in a recognised post. The exam consists of a written paper and an Objective Structured Clinical Examination (OSCE).

Good preparation is essential as with all exams. Although the DOHNS exam may not be the most difficult exam you will ever encounter it should most certainly not be taken lightly. You will not be able to wing it, even if you have lots of ENT experience. Several candidates just thinking that have failed miserably in the past. I would set aside a minimum of 2-3 months of regular revision along with practising of MCQ and EMQ papers. Try to arrange study leave as well in the last week before the exam. After reading the Exam Syllabus (available online, see reference 1) a good book to start with is Pastest Total Revision Ear, Nose and Throat by L. Badia and S. Philips. It provides a good overview of the knowledge required. For further reading and more detailed information, I would definitely recommend Key Topics in Otolaryngology by N.J. Roland et al, and ENT Secrets by B.R. Jafek et al. For anatomy I would recommend Last’s Anatomy by C.S. Sinnatamby.

The part II is more difficult to prepare for as it is a more practical exam. There are some good ENT picture atlases available though that are useful to study. It is also vital to practice your ENT examination under supervision of a friendly registrar.

In addition to this I would highly recommend a revision course as it is a good way of getting into the exam mind set. St Mary’s DOHNS course is an excellent 4 day course that will take you through all aspects of the exam and provides a wealth of information that enables you to fine tune your revision along with the opportunity to practice mock exam papers and OSCEs.
The exam

Part I consists of a 2½ hour written paper, comprising of 40 multiple choice questions (MCQ) and 100 extended matching questions (EMQ). This exam tests knowledge of embryology, anatomy, applied physiology, microbiology, medical statistics, good medical and surgical practice along with knowledge of presentation and management of classic ENT conditions. Time is limited so I would suggest not dwelling too long on questions. As always, don’t try to second guess yourself, be confident and leave yourself enough time to complete your answer sheet at the end. Apart from the few usual weird and wonderful questions the body of the exam is a fair test of basic ENT knowledge. In the most recent exam the pass rate was 77% (60/78).

Part II consists of an OSCE, comprising of approximately 30 stations, including 2-3 rest stations. Each station is allocated 7 minutes, marked by a bell, a sign to move on to the next desk. Most stations will have a photograph, an audiogram or a pathology specimen. Each station has a question sheet that generally asks for a diagnosis, expected symptoms and management. Some stations will have anatomical specimens (including a skull base and a temporal bone), surgical equipment and even a hearing aid with labelled parts to be named. There are 5 patient stations with an examiner present who guides you through the written instructions and marks your performance. Some cases involve examining a patient and then writing answers to questions about your findings, and others involve obtaining consent or taking a history from an actor. Certainly these stations are similar to the clinical part of the MRCS exam. In the most recent exam the pass rate was 86% (41/59).

And finally

Having passed my DOHNS I would certainly recommend sitting this exam to anyone with an interest in ENT. Apart from that all important line on your CV, it actually is a good and surprisingly nice way of improving your clinical practice and broadening your knowledge of ENT!

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1 http://www.intercollegiatemrcs.org.uk/dohns