



## THE FACULTY OF CLINICAL ONCOLOGY

**TO: TRAINING PROGRAMME DIRECTORS  
REGIONAL POST-GRADUATE EDUCATION ADVISERS  
COLLEGE TUTORS  
EXAMINATION CANDIDATES**

### **FIRST EXAMINATION FOR THE FELLOWSHIP IN CLINICAL ONCOLOGY AUTUMN 2014**

The Examining Board has prepared the following report on the Autumn 2014 sitting of the First Examination for the Fellowship in Clinical Oncology. It is the intention of the Specialty Training Board that the information contained in this report should benefit candidates at future sittings of the examinations and help those who train them. This information should be made available as widely as possible.

**Dr Seamus McAleer**  
Medical Director, Education and Training

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### **FIRST EXAMINATION FOR THE FELLOWSHIP IN CLINICAL ONCOLOGY EXAMINERS' REPORT – AUTUMN 2014**

The pass rates achieved at the Autumn 2014 sitting of the First Examination for the Fellowship in Clinical Oncology are summarised below.

	All Candidates		UK-trained Candidates		UK First Attempt Candidates	
<b>Overall</b>	32/73	43.8%	22/48	45.8%	14/32	43.8%
<b>Cancer Biology &amp; Radiobiology</b>	45/62	72.6%	33/44	75.0%	29/39	74.4%
<b>Clinical Pharmacology</b>	45/65	69.2%	34/46	73.9%	29/38	76.3%
<b>Medical Statistics</b>	27/62	43.5%	19/40	47.5%	18/36	50.0%
<b>Physics</b>	37/71	52.1%	25/45	55.6%	19/33	57.6%

This examiners' report does not provide an in depth breakdown of performance on individual questions but is intended to guide trainers and candidates by highlighting particular areas of concern. The Examining Board noted that few candidates attempted all modules of the examination. Candidates are reminded that it is recommended that all modules are attempted at the first sitting, to maximise chances of success over the total of four permitted attempts.

#### **CANCER BIOLOGY**

Overall examination performance was very good. Candidates demonstrated knowledge spanning all areas of the cancer biology syllabus. One comment for feedback is that candidates need to

remember that they can be questioned on basic cellular processes as well as the more complex signalling mechanisms that regulate these.

### **RADIOBIOLOGY**

In general candidates performed well in this part of the examination and demonstrated a good understanding of radiation biology. Knowledge of survival curve parameters was good, however candidates should be aware of the ways whereby clonogenic survival curves are produced and the calculations to determine percentage survival performed. There was a slight weakness in understanding of LET and radiation quality. Some attention should be given to greater understanding of clinical radio-sensitivity of tumours and tolerance doses of normal tissues.

### **CLINICAL PHARMACOLOGY**

The clinical pharmacology questions were generally well-answered by candidates. No particular deficiencies in knowledge of the curriculum were identified except that candidates performed less well on questions relating to mechanisms of toxicity. The examiners would like to remind candidates that examination questions will relate only to drugs on the curriculum list.

### **MEDICAL STATISTICS**

Examiners advise candidates that more revision on analysis of case control studies is required, as well as further revision on interpretation of p values. The Examiners commended the candidates' overall improvement of knowledge about SAE reporting.

### **PHYSICS**

Performance overall was consistent with previous years. Candidates should be aware of the physical properties of all radio-isotopes listed in the curriculum and noted areas of weakness included electron beam dose distributions, brachytherapy dose calculation and the principles of linac head leakage.

Candidates performed well in the following areas:

- Basic electromagnetic radiation and its interaction with matter
- Calculations involving depth dose
- Internal organ motion including margins and IGRT solutions