

## The Royal College of Surgeons of England

## The History of the MRCS Exam

Since the days of the Company of Barber-Surgeons (1540-1745) and the Company of Surgeons (1745-1800) prospective surgeons had trained by undertaking an apprenticeship, usually for seven years, at the end of which they took a Viva Voce exam in front of a Court of Examiners.

When the Royal College of Surgeons was founded in 1800 it initially operated the same system but, through a series of gradual changes, the training and examinations became lengthier and more challenging. Passing the College exam gave surgeons membership of the College so it became known as the MRCS (Membership of the Royal College of Surgeons) exam.

In the 1850s the College tried to raise surgery to the status of a more 'gentlemanly' profession, similar to that of physicians, by requiring candidates to have a good education in the 'liberal arts' – in other words classics, humanities, languages, maths and sciences. Those who could not provide suitable educational certificates had to take a general knowledge exam before taking the MRCS. In 1869 the College abandoned these exams and left the question of pre-medical education up to the General Medical Council.

By 1813 candidates for the MRCS were still expected to complete an apprenticeship, but also had to attend one course of anatomical lectures, one course of surgical lectures and to work in a hospital for at least a year. Following the 1815 Apothecaries Act the College published its first written curriculum in 1819.

When a candidate thought he was ready to take the exam, he would notify the College secretary who would arrange a suitable date for him. The Court of Examiners was obliged by the College's Charter to meet on the first Friday of the month, but they often met once or twice a week to meet the demand for examinations. The candidates were examined ten at a time by the whole Court. One examiner usually led the questioning, but the others could join in at any time. After the questioning the candidate withdrew and the examiners voted on whether to admit. The President abstained from voting to avoid the vote being hung.

In 1836 this procedure changed so that each candidate was only examined by 3 of the examiners instead of all ten, which allowed a greater number of candidates to be examined. The College President, Sir Astley Cooper, also decided not to reject any candidates without first giving them a written examination, so in 1837 a written exam was introduced for the first time, but only for borderline candidates.

Soon after this the procedure was changed again so that each candidate was briefly examined by four pairs of examiners.

In 1838 the Royal Surgical Colleges of England, Dublin and Edinburgh met to standardise the curriculum. They decided that candidates should study for three years in a recognised school of surgery, undertake 21 months' work in a hospital, complete courses in dissection, and attend various specified courses of lectures.

From 1860 a two-stage MRCS exam was introduced. The first exam took place part way through training and was an oral exam on anatomy, physiology, chemistry, botany and material medica. The second exam (known as the final exam) was in surgery and was both written and oral.

In 1876 the government passed an Act allowing medical colleges to admit women to their exams, but it was not until 1908 that the Royal College of Surgeons decided to do so. The first woman to become a Member of the College was Dossibai Patell, a student from Bombay, in 1910, and the first female Fellow was Eleanor Davies-Colley in 1911.

In 1885 the College created the 'conjoint' MRCS LRCP exam with the Royal College of Physicians. From that time it was not possible to simply take the MRCS exam on its own, but the Royal College of Surgeons Court of Examiners continued to set the exams. From 1887-1908 these exams were held at the purpose-built Examination Hall on the Embankment and from 1908 in Queen's Square in Bloomsbury. The Conjoint Exam was run by a Committee of Management and a separate Conjoint Exam Board, made up of members of both colleges. The conjoint Exam Board also created a number of further diplomas in specialisms such as public health and tropical medicine. The Conjoint Exam went through several changes before being discontinued in 2001.

Gaining the MRCS qualification currently requires the completion of a medical degree, followed by five years of work in paid training posts.