

# Candidate Guidance Notes for Evidence Based Commentary

This document is to be read in conjunction with the full [MFSRH Examination Regulations](#).

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## Objectives

The Evidence Based Commentary examines the candidate's ability to assess a clinical topic, and summarise and critically evaluate the key issues. The candidate will be expected to use relevant literature and evidence based guidelines to present management strategies. In addition to testing candidates' ability to meet these requirements, this part of the MFSRH examination assesses skills in written English.

## Subject

The topic will be chosen annually by the Examination Committee from any area within the MFSRH syllabus. The clinical topic will be posted on the FSRH website.

## Timescale for submission

The Evidence Based Commentary must be submitted at the latest by 31st August of the year before the candidate plans to sit Part 2 MFSRH.

You may submit your Evidence Based Commentary before or after applying for, or attempting the Part 1. All parts of the MFSRH Examination must be completed within seven years of passing either the Part 1 or Evidence Based Commentary (whichever is first) There is no other limit on the validity of a pass for the Evidence Based Commentary.

The topic for the Evidence Based Commentary is only valid for 1 year, that is 1st September to 31st August the following year, and you must submit on this topic within this timescale.

## Methodology and Structure

A discussion and critical evaluation of the topic should be presented, with particular reference to alternative management strategies, ethical and legal issues, communication and psychological aspects of clinical practice and public health issues including health promotion and disease prevention. Reference should be made to the relevant literature including evidence based guidelines.

Suggested headings include:

- ▶ Summary of Key Issues
- ▶ Literature Review
- ▶ Application of Evidence
- ▶ Identification of knowledge gaps and suggestions for future research
- ▶ References

These guidelines are intended to assist candidates in considering how best to present their work. The use of these headings is not mandatory and they may not all be relevant to all types of Evidence Based Commentary. Candidates are expected to show discretion in selecting the appropriate format for their Evidence Based Commentary (see also the examiners' marking schedule).

**There is no need to repeat the topic in your Evidence Based Commentary.**

The literature review should include a maximum of 20 appropriately cited references published within the last 15 years. You should avoid old references when you can cite more recent, relevant references.

### Length

The Evidence Based Commentary must be between 1000 and 2000 words of text, tables and appendices (references are not to be included in the word count).

**Candidates who excessively use tables to expand the number of words will be penalised and their Evidence Based Commentary may be graded a fail. This range of word count is mandatory and candidates whose Evidence Based Commentary is outside this range will have it returned unmarked. The word count must be stated on the submitted Evidence Based Commentary.**

**Caution: Extending the text by using tables and appendices can be penalised.**

### Presentation

The Evidence Based Commentary must be produced as a single Microsoft Word document and must be in English.

All parts of the text must be double line spaced, including the references.

**Margins should be at least 2.5 cm.**

All pages must be numbered consecutively in the footer.

A high standard of written English, with correct grammar and spelling, is expected. Ensure that all references are given fully and are correct using the Vancouver system [see **References**]. All sources mentioned in the text should be referenced (do not include material you do not refer to in the text)

Your Faculty Candidate Number must be present at the bottom of each page in the footer of the document. **Do not add your name.** If you are unsure of your Candidate Number, please contact the exams and assessment officer at [edofficer1@fsrh.org](mailto:edofficer1@fsrh.org).

### Title page

You should provide a front cover for your Evidence Based Commentary typed in the same style as the rest of the text. This cover should list:

- ▶ The title of the Evidence Based Commentary
- ▶ Your Faculty Candidate Number
- ▶ The date the Evidence Based Commentary is completed; this enables Examiners to make allowance for any changes in knowledge or practice that occur after the work is finished.
- ▶ The word count; this is mandatory.

- ▶ The following statement - 'This Evidence Based Commentary is submitted as part of the requirements for the Examination for Membership of the Faculty of Sexual and Reproductive Healthcare of the Royal College of Obstetricians and Gynaecologists'.

### Nomenclature, units, symbols and abbreviations

*General* - it is standard practice to give the full and correct name of any country, organisation or society when it is first used in the text. Thus the United Kingdom (UK) can thereafter be referred to as the UK.

*Numerical notation* - units used must always be stated, using the System International d'Unites (SI) where possible. Numerical values less than unity must have 0 inserted before the decimal point thus: 0.34 and not .34. Large numbers such as 55,000,000 should be abbreviated to  $5.5 \times 10^7$ , similarly very small numbers should be shown as  $5.5 \times 10^{-7}$  not 0.00000055. You should only give meaningful values. In the presentation of scientific statistical results this generally means rounding to one tenth of the standard error.

### References

**The Evidence Based Commentary should include a maximum of 20 appropriately cited references published within the last 15 years. If you quote more than 20 references your commentary will not be marked.**

You should avoid old references when you can cite more recent, relevant references. The reference list of the Evidence Based Commentary must include all published work referred to in the text. Conversely you should not cite material not referred to in the text.

The Vancouver system of referencing should be used. References should be numbered consecutively in the order in which they appear in the text. They should then be listed in this order at the end of the Evidence Based Commentary. Normally no more than three authors should be listed followed by '*et al.*' if there are more. An example of Vancouver style as used in the Journal of Sexual and Reproductive Healthcare is given below:

1. Wade EM, Mc Carthy P and Harris GS. A randomised use-effectiveness study of two methods of natural family planning. *Am J Obstet Gynecol* 1979; 134: 628-631

### Website reference citations

Where a reference is solely to a website, give the url within square brackets. Where the citation is to a publication that is printed and also available on a website, give the normal citation first followed by the url in square brackets. **'Accessed: date' must appear at the end of the reference.**

An example of a website citation:

19. UK National Screening Committee [[www.doh.gov.uk/nsc/index.htm](http://www.doh.gov.uk/nsc/index.htm)]. accessed dd mm yy

An example of an online publication (that also has print citations):

20. Alan Guttmacher Institute. Sharing Responsibility: Women, Society and Abortion Worldwide. New York: Alan Guttmacher Institute; 1999 [[www.agi-usa.org/pubs/sharing.pdf](http://www.agi-usa.org/pubs/sharing.pdf)]. accessed dd mm yy

## Originality

The Evidence Based Commentary must be the Candidate's own original work and must not have been submitted in any form for a previous examination or prize.

**All published material should be noted in the text and fully referenced and all unpublished data, ideas and advice, whether written or verbal, should be acknowledged.** You are asked to sign a declaration when you submit your Evidence Based Commentary, indicating that it is your own work.

Since plagiarism and fabrication are serious academic offences tantamount to the theft of intellectual property they can result in the Evidence Based Commentary being failed and the candidate being barred from further attempts at the examination.

## Submission of Evidence Based Commentary

To submit your EBC:

- ▶ Log in to the FSRH website
- ▶ Under My FSRH, click on 'take a qualification/recertify'
- ▶ On the membership exams tile, click 'qualify'
- ▶ Under Step 3, click on the link which reads 'Click here to submit your EBC'.

**We no longer require paper copies of the EBC to be sent to the faculty, or for copies to be emailed in. Payments are also now accepted via the website rather than cheque.**

If you have any issues with this process please contact the exams and assessment officer at [edofficer1@fsrh.org](mailto:edofficer1@fsrh.org).

## Criteria for assessment

You may find it helpful to know the criteria that are used by the examiners in assessing your Evidence Based Commentary. The examiners look for:

1. Identification and summary of the clinical problem/question. This should include a complete, concise summary with a logical structure. All the aspects you wish to discuss or compare to the literature must be included here.
2. Contemporary, thorough and relevant literature review. This includes journals, guidance issued by the National Institute for Health and Clinical Excellence (NICE) and evidence based guidelines from the Faculty of Sexual and Reproductive Healthcare (FSRH), Royal College of Obstetricians and Gynaecologists (RCOG) and the British Association for Sexual Health and HIV (BASHH). It may be appropriate to check the reference source quoted in guidelines. You must record the date that you submit the Evidence Based Commentary, as we will take this into account if new evidence is published during the year of operation of that topic.

3. Application of the evidence to the clinical situation. You should compare the key issues you initially identified in the summary with the literature review you have carried out. This should demonstrate detailed relevant knowledge integrated from many different sources. A thorough grasp of relevant concepts relating to knowledge and skills, attitudes, communication, evidence based practice, ethical and legal implications, psychological aspects of clinical practice and public health. There should also be evidence of well-chosen further reading, including primary sources where appropriate.
4. Identification of current knowledge gaps and recommendations for future research
5. Clarity of content and the quality of written English including spelling and grammar.
6. Any tables or charts used must complement the text **not** repeat information already given.
7. The Evidence Based Commentary is marked by Examiners who have had no role in advising you on your work. The Examiners have no knowledge of the identity of the author other than the candidate number.

Examiners will use the marking schedule given below:

	Aspect of Assessment	Grade	Mark allocated
1.	Identification and summary of clinical problem/question	Excellent (3) Pass (2) Borderline (1) Unsatisfactory (0)	
2.	Thorough, contemporary and relevant literature review	Excellent (3) Pass (2) Borderline (1) Unsatisfactory (0)	
3.	Application of evidence to clinical situation	Excellent (3) Pass (2) Borderline (1) Unsatisfactory (0)	
4.	Identification of knowledge gaps, controversies and recommendations for future research	Excellent (3) Pass (2) Borderline (1) Unsatisfactory (0)	
5.	Good quality English including spelling and grammar and correct style of references	Excellent (3) Pass (2) Borderline (1) Unsatisfactory (0)	
Overall grade - Total Marks allocated		Excellent (13-15) Pass (10-12) Borderline fail (6-9) Fail (<= 5)	

**The Evidence Based Commentary will not be assessed and will be returned unmarked if the word count does not fall within the range given in this guidance (see Length) or if more than 20 references are cited.**

### **Borderline Fail and Fail**

If the Evidence Based Commentary is graded a Borderline Fail the examiners will give the candidate brief written feedback detailing the amendments needed to pass.

**The candidate must make the requested revisions, highlight changes and submit the revised Evidence Based Commentary by 30th November of the same year.** A candidate who is unsure how to highlight changes should email the Examination Department for instructions.

Only one resubmission of the Evidence Based Commentary is permitted. If the revised Evidence Based Commentary does not pass the candidate will be required to prepare an Evidence Based Commentary on a following year's topic. A new submission fee will be payable for the new submission. If the Evidence Based Commentary is graded an outright Fail then the candidate cannot revise and resubmit on that topic and will be required to prepare an Evidence Based Commentary on a following year's topic. A new submission fee will be payable for the new submission.

If the Evidence Based Commentary is graded an outright Fail then the candidate cannot revise and resubmit on that topic and will be required to prepare an Evidence Based Commentary on a following year's topic. A new submission fee will be payable for the new submission.

## OUTLINE OF PROCEDURE FOR SUBMISSION OF EVIDENCE BASED COMMENTARY (EBC)

Faculty website, Candidate Guidance Notes for EBC  
New clinical scenario published on 1<sup>st</sup> September each year



Candidate submits EBC, Certificate of Originality and submission fee  
by the following 31<sup>st</sup> August



All EBCs on the topic are marked in September



Candidate is notified of results in writing during 1<sup>st</sup> week of October



Pass (or Excellent)

Borderline Fail

Fail



Candidate informed  
EBC Pass



Candidate advised of changes  
needed to achieve a Pass grade.  
Candidate submits revised EBC  
by 30<sup>th</sup> November



Examiners mark revised EBC



Revised EBC pass

Revised EBC fails



Submit EBC on new topic  
Must have passed EBC before applying  
to sit Part 2