Style guide to the registration assessment



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Introduction

Purpose of this guide?

Passing the GPhC's Registration Assessment is a prerequisite for applying to register as a pharmacist.

This guide provides information on the agreed style and format of the assessment papers and resource packs. This is to ensure consistency throughout the assessment papers and to make sure wording and formatting are aligned with current practice. It reflects the style rules that are usually followed in the registration assessment.

Who is this guide aimed at?

This guide is a primarily a reference source for the board of assessors, question writers and GPhC staff.

1. Font

1.1 Typeface

- Tahoma 16-point is used for all standard text
- black text is used throughout

This type face is used throughout the question papers. The only exception to this rule is where a signature is used. For example, on a prescription template, the prescriber's signature is presented using Bradley Hand ICT font.

1.2 Use of bold

Bold type face is used for:

- question stem, for example:
 - What percentage of this child's recommended daily salt allowance is contained in the total daily dose of Gaviscon suspension?
- directions, for example: Questions 25 and 26
- titles in tables

1.3 Use of underlining

Underline is not used.

1.4 Use of italics

With the exception of Latin names of organisms, italic font is not used.

E.g., Staphylococcus aureus

1.5 Use of block uppercase

Block uppercase is used where the word NOT is used in a question, for example:

Which of the following is NOT related to the long-term use of proton pump inhibitors?

Occasionally, block uppercase is used when representing a dispensing label, for example:

• Take one tablet TWICE a day

2. Layout

2.1 Use of bullet points

Bullet points may be used to make a list of questions clearer to read, such as a list of medicines in a stem in both the question paper and resource pack. For example:

The woman is currently taking the following medication:

- aspirin 75mg once daily
- atorvastatin 40mg once daily
- ramipril 10mg once daily

Bulleted lists will follow these style rules:

- the list start with a 'lead-in' line
- all questions in the list will start with a lower-case letter, unless proper nouns
- all questions will make sense running from the lead-in line
- commas, semi colons, 'and' or 'or' will not be used at the end of questions
- full stops will not be used
- may or may not be listed in alphabetical order

The following styles of bullet point are used for primary and secondary level bullets:

- XXXXXX
 - o XXXXXX
 - o XXXXXX
- XXXXXX
- XXXXXX

Numbers or letters are used as bullet points only where there is a need to show listed questions in a hierarchy or a specific grading or reference system.

2.2 Full stops and spacing

In a paragraph, single spacing is used after full stops.

Full stops are not used between a number and its unit, for example: 40mg

2.3 Alignment

Text is left-justified with a ragged right edge.

2.4 Question format

Questions should be developed on the templates provided by the GPhC. Where a question contains a table, capital letters are used for the first word in each cell. The text is left aligned.

Full stops are not used at the end of text in cells.

3. Style

3.1 Dates and times

The date is presented in the UK format of 'day, month, year', for example: **15 April 2022**. Numbers in dates are not followed by th or st, for example: **21 September 2022**, rather than 21st September 2022.

In a table, the format DD/MM/YY can be used. For example, within a summary care record or on extract from a prescription.

Time is presented using the 24-hour clock, for example 13:00

3.2 Numbers

Where possible, numbers are not used at the start of a sentence. For example: **Side effects were reported by 15% of patients**, rather than: 15% of patients reported side effects.

A comma is used to separate thousands (and not a space) where the number is over 9999. For example: **40,000 units** not 40 000 units. Write 1000 not 1 000

Numbers appear next to the units. For example, 40mg. The number and units must appear on the same line.

Do not use a space to separate a number from the %, <, >, \ge , or \le symbols. For example, 10% not 10 % and \ge 10 not \ge 10.

Courses of treatment are represented as 3-day not three day.

When stating medicine doses, the dose is represented by numbers and the number of dose units can be spelt out in words or in figures. For example, clopidogrel 75mg 1 tablet once daily or clopidogrel 75mg one tablet once a day.

3.3 Units

Units are presented in the following formats:

%	kilocalorie(s)	mole(s)
% w/w	kg	nebule(s)
% w/v	kg/m²	other
% v/v	mg	pack(s)
Accuhaler(s)	mg/hour	patche(s)
ampoule(s)	mg/kg	patient(s)
bottle(s)	mg/kg/day	penfill(s)
box(es)	mg/L	PhEur unit(s)
can(s)	mg/mL	Pounds (sterling)
capsule(s)	microgram(s)	pump actuation(s)
cartridge(s)	micrograms/kg/minute	prefilled pen(s)
day(s)	minute(s)	respimat inhaler(s)
device(s)	mL	sachet(s)
drop(s)	mL/hour	syringe(s)

drops/minutemL/kg/hourtablet(s)gmL/minutetest(s)g/kgmmoltube(s)hour(s)mmol/kgTurbohaler(s)

inhaler(s) mmol/kg/day unit(s) litre(s) mmol/L vial(s)

This list is non-exhaustive.

Usually, metric units should be used. Symbols for metric units are not pluralised. For example, 25kg not 25kgs.

If imperial units are considered appropriate, then candidates should be given information on converting to metric within the question.

Use micrograms not mcg or µg.

3.4 Ages

Example: A 30-year-old man, a 3-month-old infant.

3.5 Gender

'Man' and 'woman', or 'boy' and 'girl', not 'male' and 'female' or 'gentleman' and 'lady'.

Other gender descriptions, for example, trans man, trans woman can be used.

In some questions it will be acceptable to use 'patient' or 'child'.

3.6 Patients

If it is necessary to refer to the patient by name (for example in a linked set of questions), a single initial is normally used and not full names, for example Mr P, not Mr Patmore. Where names are used in a paper they will start with Mr/Mrs/Child A and are listed in alphabetical order throughout a question paper.

The preference is to describe the patient by age and gender, rather than letter, and so an initial is only used when necessary for clarity.

3.7 Patients and their conditions

Outdated terms that stereotype or stigmatise are avoided when writing about disabilities, health conditions and mental illness. People should not be labelled according to their condition, by using terms such as 'the blind', 'diabetics' or 'addicts'. For example:

- visually impaired people (not blind people)
- people with learning difficulties, and people with learning disabilities (these are two different things)
- people with mental ill health

- people with diabetes. For example, a 56-year-old man who has type 2 diabetes not a 56-year-old diabetic man
- people with terminal conditions
- people with addiction or substance misuse problems

The phrase 'suffering from' (a condition) is not used unless it is a direct quote from a patient. For example: 'A 43-year-old woman has hypertension', rather than 'A 43-year-old woman suffers from hypertension'.

Avoid unnecessary words and phrases such as 'on examination' and 'has a previous medical history of'. For example, 'a man with hypertension has a BP of 155/100mmHg' and not 'a man has previous medical history of hypertension and on examination he has a BP of 155/100mmHg.

3.8 Quotation marks

Double quotation marks used in questions indicate direct speech. For example, a patient's description of an adverse effect.

3.9 Patients and their medicines

When referring to a patient taking medicine the following examples are a guide to the style of wording used:

- She was taking ramipril (or any other drug), not 'she was on ramipril'
- He was advised to take, not 'he was prescribed'
- He was treated with, not 'he received' or 'he was started on'

Directions will either be written in full or as the Latin abbreviation. The Latin abbreviations listed in the BNF are acceptable. Full stops are not used with Latin abbreviation. For example:

- bd or twice daily
- od or once daily
- om or every morning

A mix of formats will be used throughout the assessment paper. For example, twice daily, twice a day, once a week, once weekly.

3.10 Virus names

Do not italicize a virus name when used generically or when referring to a strain (e.g., herpes simplex virus, influenza A (H1N1) virus), and do not use capital letters unless the virus name includes a proper noun (e.g., West Nile virus, Ebola virus). Italicize species, genus, and family of a virus when used in a taxonomic sense. In this case, virus names should follow the rules of orthography of the International Committee on Taxonomy of Viruses (ICTV). The table below summarizes how to format virus names, but refer to <u>ictvonline.org/virusorthography.asp</u> for a full overview of ICTV recommendations. It is usually not necessary to mention the taxonomy of a virus if it is well known.

Formatting of virus names

Note: this information comes from http://ictvonline.org/virusorthography.asp where there are further examples of formatting rules and a full taxonomy index.

Type of term	Formatting	Examples
Virus order, family, subfamily, or genus	Italics with first letter of the name capitalized	Herpesvirales (order) Herpesviridae (family) Alphaherpesvirinae (subfamily) Simplexvirus (genus)
Species name	Italics with the first letter of the first name capitalized. Never abbreviate species names.	Human alphaherpesvirus 1 Mumps virus
	Exceptions: proper nouns, parts of proper nouns, or alphabetical identifiers may be capitalized even if they occur as the second word.	West Nile virus Influenza A virus Enterovirus A
Virus strain or generic name	Not italicised and the first letter of the first word is not capitalized, unless it is a proper noun or includes alphabetical identifiers	Ebola virus herpes simplex virus influenza A (H1N1) virus

3.11 Bacteria names

When the name of a microorganism is used in binary combination, the generic name is capitalised and the specific name is all in lower case, for example: **Staphylococcus aureus**. When referring to an infection more generally, all lower case is used, for example: **staphylococcal infection**.

3.12 Medicine names

Generic or non-proprietary medicine names are used unless there is a valid reason to use a brand name.

In accordance with the BNF, international non-proprietary names (rINNs) are used where available, or, in the absence of a rINNs, British Approved Names (BANs) are used. Exceptions are adrenaline and noradrenaline where the BAN is used.

Valid reasons for using a brand name may include a clinical need to specify the brand, for example with lithium preparations and biosimilars, or when use of the brand name is more appropriate, for example, when a patient requests a particular product or a non-prescription product with multiple constituents. All generic names are lower case unless at the beginning of a sentence. If using a brand name, then the generic name is usually included in brackets.

Trademark signs (™) are not used.

Use full names including salts where these appear in the BNF. For example, morphine sulfate and ulipristal acetate.

When using a brand name, ensure generic drug name follows in brackets e.g., Clexane (enoxaparin sodium).

3.13 Services and departments

General names of departments are not capitalised, for example: emergency department, intensive care unit, outpatient clinic, or roles of clinicians, for example: microbiologist.

The outpatient clinic is used and not 'outpatients'

3.14 Other settings

Use the term 'care home' or 'care home with nursing' as appropriate, rather than residential home, nursing home, old people's home etc.

3.15 Organisations, bodies, and committees

Capitals are used when referring to a specific organisation or body, but not when referring generally to a type of organisation. For example: **General Pharmaceutical Council is an independent regulator**.

3.16 Spellings

Oxford English Dictionary spellings are used.

Medical terminology is used where appropriate, for example, hypertension rather than high blood pressure.

The following spellings should be used:

adviser (not advisor) dose-effect response ageing dose-response study alongside (one word, no hyphen) first-line (not first line)

although (not though) healthcare (not health care or health-care)

baseline (one word, no hyphen) healthcare professional

beta-blocker homeopathy (not homoeopathy)

breastfeeding (one word) inpatient (no hyphen)

case-control study (with an en dash) no one (two words, no hyphen)

childcare (one word, no hyphen) premenopausal comorbidity (no hyphen) pre-registration

contraindication (not contra-indication) preventive (not preventative)

cooperate (no hyphen) co-opt, co-optees dietitian

pharmacy-patient interaction

re-administer, re-administration regimen (not regime, for a drug or treatment regimen) side effect (but hyphenate when used before a noun [thing], as in 'side-effect profile')

3.17 Abbreviations

Recognised abbreviations will be used throughout the registration assessment, for example NKDA, NSAID or AF. Abbreviations should not be used in a question in order to confuse candidates but when the abbreviation is likely to be used in practice in the scenario described. The use of an abbreviation in a question will be taken into consideration by the standard setting panel when it may affect a candidate's response.

Latin abbreviations such as od will be in lower case.

3.18 Symbols

Use the degree symbol in 37.5°C not superscript ⁰

Use the symbol \times not lower-case x. For example, $350 \times 10^9/L$

Trademark signs (™) are not used.

4. Question format

Part 1 – Calculation paper

The part 1 paper comprises 40 'free-text' calculation questions.

Each question in the Part 1 paper comprises a stem and a question.

A 5-year-old girl, who weighs 23kg, is prescribed clobazam 250micrograms/kg twice daily, as adjunctive maintenance therapy for epilepsy. To aid administration of this medicine, her parents have been advised that each dose should be rounded to the nearest whole mL.	
How many mL of clobazam 10mg/5mL oral suspension are needed for two weeks' treatment? mL	

Part 2 – MCQ Paper

Part 2, MCQ paper consists of 90 single best answer (SBA) questions (questions 1 to 90), and 30 extended matching questions (EMQ) (questions 91 to 120).

SBA questions

Before question 1 the following information is provided.

Single Best Answer questions comprise of a stem, a question and 5 options (A-E). For example:

A mother brings her 6-year-old son into your pharmacy. The child has had a cold for the past two days, but his symptoms have worsened. He now complains of mild headache, general aches, and tiredness. This morning he has developed an itchy rash on his face and body. The child has no other medical conditions and no known allergies.

A photograph of the rash is provided below:



Which of the following is the most appropriate?

A provide advice about the condition and recommend the use of hydrocortisone cream for the rash **B** provide advice about the condition and recommend the use of ibuprofen for the headache and general aches as necessary

C provide advice about the condition and recommend the use of paracetamol for the headache and general aches as necessary

D provide advice about the condition without recommending any medicines

E refer the child to his GP

Usually, options are provided in alphabetical or numerical order.

Multiple SBA questions may be combined to create a 'patient journey' set, or questions surrounding the same topic.

EMQ questions

EMQs are grouped in themes in sets of 2 to 5 questions. The theme must be the same within a set and the list of options must be the same. The first question in the set states the number of questions in the set.

Theme: Drug interactions

The next two questions are based on the same list of options, but different scenarios. Each option may be used once, more than once, or not at all.

A 64-year-old man takes escitalopram 20mg daily for generalised anxiety disorder. He had a transient ischaemic attack 12 years ago and has recently been diagnosed with non-valvular atrial fibrillation. He has been newly prescribed dabigatran etexilate 150mg twice daily.

Select the most likely possible consequence of the drug interaction from the list.

- A bleeding risk increased
- **B** bradycardia
- C diarrhoea
- **D** hypertensive crisis
- **E** myopathy
- F QT interval prolongation
- **G** reduced eGFR
- **H** thrombosis

Theme: Drug interactions

A 37-year-old man takes methadone hydrochloride 1mg/mL oral solution 90mg daily for opioid addiction. He has been diagnosed with depression by his GP who has prescribed citalopram 20mg daily. The man has no other relevant medical history and has no known allergies.

Select the most likely possible consequence of the drug interaction from the list.

- A bleeding risk increased
- **B** bradycardia
- C diarrhoea
- **D** hypertensive crisis
- **E** myopathy
- **F** QT interval prolongation
- **G** reduced eGFR
- **H** thrombosis