



REGULATIONS AND GUIDANCE  
FOR MEMBERSHIP OF THE  
FACULTY OF OCCUPATIONAL MEDICINE (MFOM)  
(awarded from 1 August 2007)

April 2008 edition

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The Faculty of Occupational Medicine of the Royal College of Physicians of London was established “to develop and maintain the good practice of occupational medicine with a view to providing for the protection of people at work by ensuring the highest professional standards of competence and ethical integrity.” The Faculty admits Associates and Members.

Membership of the Faculty of Occupational Medicine (MFOM) is intended for registered medical practitioners who are committed to the full-time or part-time practice of occupational medicine, and confers formal recognition of competence. It is the highest level of competence recognised by assessment by the Faculty and its syllabus is detailed under the Regulations.

It is a normal requirement for those who aspire to being on the Specialist Register as Specialists in Occupational Medicine in the UK and will be awarded to those who have completed the requisite higher professional training, together with Part 1 and Part 2 Membership examinations, and demonstrated appropriate competencies through workplace-based assessments and a research dissertation or equivalent evidence.

Membership may also be available to medical practitioners outwith UK Specialist Training who can demonstrate an equivalent level of competence, as outlined in these regulations.

# MEMBERSHIP OF THE FACULTY OF OCCUPATIONAL MEDICINE (MFOM)

## Regulations and Guidance for candidates

### Foreword

The Regulations for Membership of the Faculty have been revised to reflect the changes in higher specialist training in occupational medicine which took place on 1 August 2007 with the introduction of a new PMETB-approved curriculum and assessment framework. These Regulations apply from 1 August 2007.

### **Notice of future amendments to the Regulations and revisions following publication of the April 2008 Regulations.**

The requirements for Membership will continue to change to reflect developments in the specialty and its regulation. While every attempt has been made to ensure that the MFOM Regulations 2008 are accurate, further changes to the assessments and Regulations may be implemented. Candidates should refer to the Faculty website ([www.facocmed.ac.uk](http://www.facocmed.ac.uk)) for the most up-to-date information, and where any such changes will be detailed. In addition, wherever changes are made notices will be issued indicating the nature of these changes and will be available with the relevant Examination application and submission forms. In order that candidates for Membership are fully briefed about the status of any proposed changes, they are advised to read these notices along with this publication.

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# SCOPE OF REGULATIONS FOR MEMBERSHIP

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**M1.** Regulations M2 to M48 (Section A) will apply to:

- (a) trainees who have entered an approved higher specialist training post or programme in occupational medicine in the United Kingdom (UK) after 31 July 2007;
- (b) trainees who enrolled in an approved higher specialist training post or programme in occupational medicine in the UK before 1 August 2007 and who have transferred to the new PMETB (Postgraduate Medical Education and Training Board)-approved curriculum and assessment system before 1 January 2009 (to whom certain transitional rules, T1 to T3, may also apply);
- (c) doctors outwith approved UK training posts or programmes who are seeking a higher qualification in occupational medicine in the UK, and who have not enrolled in an overseas training post approved *ad personam* by the Faculty.

Regulations M49 to M77 (Section B) will apply to trainees who enrolled in an approved higher specialist training post or programme in occupational medicine in the UK *before* 1 August 2007 and who do **not**/did **not** transfer to the new PMETB-approved curriculum and assessment system before 1 January 2009.

Regulations M78 to M82 (Section C) will apply to candidates enrolled prior to 3 April 2008 in Membership training posts outside the UK which were approved *ad personam* by the Faculty.

# SECTION A

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## **Guidance:**

As set out in M1, the regulations in this Section relate to: (a) trainees enrolled into UK specialist training after 31 July 2007; (b) trainees transferring to the new curriculum prior to 1 January 2009; and (c) doctors outwith UK specialist training. Old curriculum trainees (those enrolled before 1 August 2007 and who do not transfer before 1 January 2009) are referred to Section B, while doctors in overseas posts individually approved by the Faculty before 3 April 2008 should read Section C.

The regulations in this Section should be read in conjunction with the latest version of the Faculty's approved Curriculum for Higher Specialist Training in Occupational Medicine [http://www.facocmed.ac.uk/library/docs/t\\_curriculum07.pdf](http://www.facocmed.ac.uk/library/docs/t_curriculum07.pdf)

**M2.** Every candidate for the award of Membership must hold a medical qualification recognised by the Faculty.

*Candidates who are not registered with the General Medical Council of the United Kingdom will need to produce their original medical registration certificates or diplomas of medical qualification, and official translations of their diplomas, if not in English.*

**M3.** Other than as laid out in T1 to T3 (transitional provisions), formal assessment for Membership will consist of three centrally administered assessments:

1. a Part 1 examination;
2. a research dissertation or equivalent evidence (see M12);
3. a Part 2 Examination.

**M4.** Award of Membership will require all three of the elements of assessment in M3 to have been passed and such other conditions of relevant experience or training as specified in these regulations to have been met.

## **PART 1 MEMBERSHIP EXAMINATION**

**M5.** The Part 1 examination will comprise a multiple choice question (MCQ) paper, designed to assess factual knowledge to a level appropriate to the trainee's stage of training. This will be the same examination as set for the MCQ component of the Faculty's Diploma in Occupational Medicine (DOccMed). It will assess the same knowledge base and use the same question sets and there will be a common pass mark across both the DOccMed MCQ and the Part 1 examination. (The Part 1 examination, however, will **not** include the portfolio and oral defence components of the DOccMed, which are tested by other means and at a different level during the specialist training programme.)

**M6.** Other than as specified in M7 to M10 (eligibility and exemptions) and in D2 (DOccMed regulations – training courses), such regulations, written guidelines, and administrative arrangements as are in force in relation to the MCQ component of the DOccMed examination will apply to the Part 1 examination. These are published separately and should be read in conjunction with this section of the Membership regulations.

## ELIGIBILITY

- M7.** Before applying to sit the Part 1 examination a candidate must **either**:
- (a) be enrolled in an approved post or programme recognised for higher specialist training in occupational medicine in the UK; **or**
  - (b) provide evidence of (i) general professional training (see Annex 1) over a period of at least 3 years following the date of graduation given on their diploma of medical qualification **and** (ii) at least 1 year of full-time training or experience (or the equivalent pro-rata) in occupational medicine in a post or posts recognised by the Faculty.

*Documentary evidence submitted under M7(b) will require official translation, if not in English.*

- M8.** There is no set limit to the number of attempts a candidate may have at the Part 1 examination.

## EXEMPTIONS

- M9.** Candidates who have passed the DOccMed MCQ component will be deemed to have passed the Part 1 Membership examination, **provided that** the date on which they sat and passed the MCQ is:
- (a) not more than 5 years before their enrolment in an approved post or programme recognised for higher specialist training in occupational medicine in the UK, **or**
  - (b) not more than 5 years before the date on which their application to sit the Part 2 examination reaches the Faculty office.
- M10.** Under some circumstances (M41) an exemption to Part 1 will also apply to those who have passed the AFOM (Associateship) examination.

### **Guidance to candidates**

*The conditions that must be met before applying to sit the Part 1 examination are set out in M7. The Faculty's Specialist Advisory sub-Committee (SAC) will be the arbiter of acceptable training or experience under regulation M7(b). Exemptions may apply if a candidate has passed the MCQ component of the DOccMed examination or has passed the AFOM examination, but these are subject to time limitations as set out in M9 and M41.*

*Candidates for the Part 1 examination are strongly recommended to read the DOccMed guidelines insofar as these relate to the MCQ examination. The guidelines include sample questions, a learning syllabus and other useful details not repeated here. The **Diploma in Occupational Medicine Examination Regulations, Syllabus, and Guidance Notes for Candidates and Teaching Centres** are available on application and can be found at [http://www.facocmed.ac.uk/library/docs/dom\\_r04.pdf](http://www.facocmed.ac.uk/library/docs/dom_r04.pdf).*

*It is also recommended that in preparation for the Part 1 examination candidates undertake an appropriate academic course, such as a Faculty-approved DOccMed training course. This is **not** mandatory ie, DOccMed regulation D2 does not apply) if the intention is to sit **only** the Part 1 examination.*

*Some candidates may elect **voluntarily** to attempt the DOccMed (although this is **not** a requirement of specialist training). Those who pass the Part 1 examination will be deemed to have passed the DOccMed MCQ, provided that they pass the other DOccMed components within five years of passing their Part 1 Membership examination (DOccMed regulation D5). All other Regulations relating to the DOccMed will need to be satisfied, and in this context DOccMed*

regulation D2, the requirement to complete a Faculty-approved DOccMed training course, is mandatory. See [http://www.facocmed.ac.uk/library/docs/dom\\_r04.pdf](http://www.facocmed.ac.uk/library/docs/dom_r04.pdf).

### **Guidance to Annual Review of Competence Progression (ARCP) panels**

A trainee in a programme of higher specialist training beginning after 31 July 2007 will normally be required to pass the Part 1 examination before being eligible to progress in their training to Specialty Training Year 4 (ST4). Exceptions may arise (eg, in the event of illness), but careful thought should be given as to whether or not a longer training period is in the candidate's best interests.

There are no preset limits, prescribed in these regulations, as to the number of times the Part 1 examination can be attempted. However, in the event of repeated failure, ARCP panels may take a view on suitability to remain in training, considering local and personal factors, judgement about a candidate's likely ability to progress and practise eventually as an independent specialist, and the Gold Guide (A Guide to Postgraduate Specialty Training in the UK) of the time.

## **DISSERTATION**

**M11.** All candidates will be required to submit evidence of having acquired those competencies in research methods defined in the latest version of the Faculty's officially approved Curriculum for Higher Specialist Training in Occupational Medicine.

**M12.** This evidence may take one of several forms:

- (a) Most candidates will undertake and complete a piece of primary or secondary research or substantial audit during their time in approved training, and present their findings as a dissertation of prescribed format (M18).

The following alternatives may be suitable equivalent evidence:

- (b) a body of substantial published primary or secondary research (M19-M21);
- (c) a thesis accepted by a university for the award of a higher degree (such as MD, PhD, Master of Science, MPhil) (M14, M22-M23).

**M13.** Where authorship of a submitted work is shared (eg, in M12(b)), the candidate's contribution should be declared and should be accepted as material in the judgement of the Faculty's Chief Examiner (Research Methods).

**M14.** Normally, the submitted work should be relevant to the broad field of occupational health. However, at the discretion of the Chief Examiner (Research Methods), submissions demonstrating high-level mastery of research may be admissible, even if outwith the field of occupational health (eg, a PhD or MD on a different medical topic).

**M15.** Usually, the research dissertation or equivalent evidence must be submitted **before** a candidate is eligible to apply for the Part 2 examination. However, no such requirement will apply to those exempted the Part 2 examination by virtue of holding the AFOM (M41).

**M16.** Assessors appointed by the Chief Examiner (Research Methods) will evaluate the submitted work against the criteria set out in these regulations.

**M17.** The final decision, both as to admissibility for assessment and as to final adequacy, will rest with the Chief Examiner (Research Methods).

### **Dissertations, reviews and audits conducted for purpose**

**M18.** Any dissertation submitted to the Faculty for final assessment must be typewritten or

printed, written in English, and should have the following attributes:

- demonstration of mastery of a subject within the broad field of occupational health;
- a well-defined aim or set of aims;
- an adequate literature search, edited and commented upon in a manner which indicates understanding of the subject;
- appropriate methods and techniques;
- sufficient data to support any conclusions that are made;
- appropriate statistical methods where relevant,
- discrimination in the evaluation of collected data and other information;
- logical and appropriate interpretation of results;
- logical and thorough discussion of strengths, limitations, and context of the findings;
- logical and sensibly-drawn conclusions;
- suitable recommendations as to follow on actions or needs;
- clear logical presentation, with appropriate use of tables, diagrams or photographs to enhance the presentation of the data;
- proper use of grammar and spelling, and a style appropriate to scientific publication;
- use of double line-spacing and a font that facilitates reading (eg, Arial, Helvetica or Verdana);
- references in the Vancouver style.

### **Substantial published work**

**M19.** In the context of these regulations “substantial published primary or secondary research” means at least 2 research papers.

**M20.** The works under M19 must be written in English and published in a refereed scientific journal(s) held by nationally respected reference libraries or cited by MEDLINE, BIDS Embase, or PubMed. Papers that are “in press” will also be allowable, if evidence is provided of acceptance by the journal’s editor.

**M21.** Multi-author works must be accompanied by confirmation – signed by at least one of the other authors of the paper – of the contribution made by the candidate. This contribution must be substantial in terms of authorship, design and execution. The work must satisfy the criteria outlined in M11 and M14, and will be reviewed for this purpose by Faculty appointed assessors.

### **Examined degrees of universities**

**M22.** Candidates may elect to submit a thesis that has been accepted by a university (eg, as a Master of Science Degree in Occupational Health or Occupational Medicine). Such submissions must satisfy the criteria outlined in M11 and M14, and will be reviewed for this purpose by Faculty appointed assessors.

**M23.** Exceptionally, candidates may enter training in occupational medicine having already successfully completed an MD or PhD in a medical subject or may successfully complete an MD or PhD during the course of their training. In such cases, trainees may submit their thesis to the Chief Examiner (Research Methods) for a view on admissibility. If deemed admissible under M14, the MD or PhD will need to satisfy the criterion outlined in M11 and may be reviewed for this purpose by Faculty appointed assessors.

**Guidance:**

For work that has already been published following peer review or assessed by a university and awarded a degree, the main focus will not normally be on whether the **scientific standard** has been met, but on whether the **criterion in M11** is met – ie, whether the work confirms the acquisition of the competencies required by the Faculty's curriculum.

The Faculty recommends those who enter training and contemplate submitting a substantial published work or a university-assessed thesis to make early inquiries about admissibility. ARCP panels may wish to consider whether any reduction can be made in the normal four year duration of training for those satisfying the research competency: this is best resolved in time for the first ARCP review and due allowance should be made for the several months that may be needed to adjudicate any case put to the Faculty.

**Procedures**

**M24.** If planning to undertake a dissertation for purpose (M12(a)), candidates should seek approval of the outline protocol for their proposed work *before* data collection. The title and an outline of the work should be submitted on Form M2 to the Chief Examiner (Research Methods). This should be no more than 1,000 words in length and should focus on the rationale and method of study, together with timelines for proposed completion and any relevant ethical issues.

**M25.** The Chief Examiner (Research Methods), with input as required from other experts, will aim to advise the candidate about the suitability of their outline protocol.

**Guidance:**

Where appropriate, suggestions for improvement will be included in the response, which will usually be made within about 6 to 8 weeks of receipt.

**M26.** Outline approval is **not** required in relation to substantial published work or an examined degree (M12 (b) or (c)). However, candidates may wish voluntarily to submit an outline as set out in M24 and M25 (for which no fee is charged), to receive guidance on likely admissibility ahead of their final submission (which will incur an assessment fee; a possible delay to training could arise in the event of late discovery of inadmissibility).

**Guidance:**

The safeguard of submitting an outline proposal (M24 to M26) exists to avoid trainees investing time in a study that is likely to fall outside the rules and be judged inadmissible. Informal advice may also be offered on improving the protocol.

Those in an approved training programme can submit an outline proposal at any time, but it is recommended that they do this **early on**. Most trainees will conduct and write up their dissertation in Specialty Training Years 4 and 5 (ST4 and ST5) (after the Part 1 examination and before the Part 2 examination), but experience suggests that developing a good idea and laying the foundations for a good study take time.

Most research projects that collect health data will require ethics committee approval. Trainees should discuss the requirement with their supervisor, should budget extra time for this, and should indicate how issues of ethical approval will be/have been handled in any outline and final submissions to the Faculty. [Note that the Faculty Ethics Committee is not constituted to grant ethical approval to individual trainee dissertations. Instead, proposals will normally need to be submitted to a Local Research Ethics Committee, a Multi-Centre Research Ethics Committee (MREC), or to another appropriate committee such as those established by universities or the Armed Forces or the Health and Safety Executive].

**M27.** On the completion of the work, candidates should submit two unbound copies of their evidence to the Faculty for final assessment, together with Form M3 and the appropriate fee. A maximum of five keywords should be included on the submission form.

**M28.** For those submitting a dissertation written for purpose (M12(a)):

- (a) the length of the written work should be around 8,000 to 10,000 words (in general, credit will not be given for exceeding this limit);
- (b) good quality A4 paper must be used and the pages must be numbered;
- (c) the work must include an abstract of no more than 300 words, positioned at the start;
- (d) the volume must bear the title, the name of the candidate, the name of the qualification for which the dissertation is being submitted and the date of submission;
- (e) where appropriate, a shortened version of the title should appear on the first page of the text.
- (f) candidates should state clearly, in an acknowledgement, whether they have received any help with the study, and the respective contributions of other parties should be clear to the assessors.

**M29.** Those submitting substantial published research or the awarded thesis of a university (M12(b), M12(c)) should:

- (a) ensure that the text is clear, legible and easy to read;
- (b) provide proof of acceptance/publication by one or more journals, or confirmation of the degree awarded and university in question;
- (c) provide a frontispiece bearing an overall title, the name of the candidate, the name of the qualification for which the dissertation is being submitted, the date of submission and an abstract summarising the work.

**M30.** Following receipt of the final submission, the Faculty will appoint two independent assessors to evaluate the work. Usually, the assessors will be specialist occupational physicians. However, in certain circumstances the Faculty may appoint an assessor who is an expert in the relevant field of study, but not an occupational physician; and

if so, at least one assessor will be a specialist occupational physician.

- M31.** The assessors may require the candidate to attend for an oral assessment of their work, should this be considered essential in forming a judgement about the candidate's mastery of the subject and of the techniques used.
- M32.** The assessors may recommend acceptance without revision, minor revision, substantial revision, or outright rejection of the work. When submissions fail to meet the required standard, the assessors will issue written guidance on the points of correction and additional work, or the reasons for outright rejection.
- M33.** If the assessors are unable to agree as to whether the submission meets the required standard, the Chief Examiner (Research Methods) will either (a) act as a third assessor and adjudicator, or (b) appoint a third assessor and adjudicator, or (c) in exceptional circumstances, appoint two new assessors. An expert advisor may be appointed to assist the original assessors with highly technical content in a dissertation.
- M34.** After acceptance of the work and before Membership can be awarded, the candidate must provide one copy bound in boards and cloth back for retention in the Faculty library. The colour to be used is Arbelave 563 (green). The title is to be printed on the front cover and the information on the spine is to read (from top to bottom): MFOM, name of candidate, year of submission of bound copy. The abstract of the final submission will normally be published on the Faculty's web site.

## APPEALS

- M35.** If a candidate is unhappy with the assessment of their outline or final submission, then they should write in the first instance to the Chief Examiner (Research Methods), who will have discretion to appoint new assessors to aid in any review of decision. If, following written representations to the Chief Examiner (Research Methods), the candidate remains unhappy, then they may appeal to the Academic Dean. Details of formal appeal procedures are publicised on the Faculty's website and available on request.

## PART 2 MEMBERSHIP EXAMINATION

- M36.** The Part 2 examination will comprise the following sections:

1. a Multiple Choice Question (MCQ) paper;
2. a Structured Short Answer Paper;
3. an Observed Structured Practical Examination (OSPE).

## ELIGIBILITY

- M37.** Normally, before applying to sit the Part 2 examination a candidate must have:

- (a) passed their Part 1 examination, **and**
- (b) submitted their research dissertation or equivalent evidence to the Faculty.

- M38.** If enrolled in an approved post or programme recognised for higher specialist training in occupational medicine in the UK, the candidate must **also** provide evidence, following local ARCP panel review, of having achieved the end competencies of ST5 training.

*The competencies referred to are those defined in the approved Curriculum for Higher Specialist Training in Occupational Medicine, and elaborated with guidance in the Faculty's Specialty*

Training Handbook: <http://www.facocmed.ac.uk/edtrain/training/contents08.jsp>

**M39.** If *not* enrolled in an approved post or programme of specialist training in the UK, the candidate must *also* provide evidence of: at least 4 years of full-time practical experience or training in occupational medicine (or the equivalent pro-rata) in a post or posts acceptable to the Faculty.

**M40.** The Faculty's Specialist Advisory sub-Committee (SAC) will be the arbiter of acceptable experience or training under regulation M39.

### **Guidance on M39 and M40**

*Independently, the Faculty has published Specialty Specific Guidelines on evidence doctors must assemble when applying for UK specialist registration via the Certification of Equivalent Specialist Registration (CESR or article 14 route):*

<http://www.pmetb.org.uk/index.php?id=specialtyspecificguidance>. This may be taken as a rough guide as to the forms of evidence required of applicants. The standard met should be that of an independent specialist in the UK.

*Among other things, the SAC will normally seek evidence of (i) a sufficient **breadth**, as well as a sufficient **duration** of experience in occupational medicine (across a range of settings and covering a range of occupational health problems of a kind encountered in specialist training or practice); and (ii) structured employment involving the support and, ideally, the formal supervision of a senior occupational physician of consultant status. Normally the applicant will need to hold such a post for at least 6 months within the 12 months prior to their application to be eligible to sit the Part 2 examination; the practice of occupational medicine must be a **substantial component** of their work.*

*Other evidence on acquisition of relevant competencies may include: structured references, details of job(s) held and training undertaken, performance in educational appraisals, logbooks demonstrating competencies achieved, evidence of participation in audit and continuing education. **Final discretion as to the evidence required rests with the Faculty's SAC.** Such evidence will need to be submitted at least 4 months in advance of application to sit the Part 2 examination to allow due time for consideration by the SAC.*

### **EXEMPTIONS**

**M41.** Candidates who have passed the AFOM examination in its entirety before 1 January 2009 will be exempted both the Part 1 and Part 2 examinations.

### **Guidance on M41**

*A new approved Curriculum for Higher Specialist Training in Occupational Medicine was introduced on 1 August 2007. Trainees in approved posts at that time have the opportunity, until 31 December 2008, to switch to the new curriculum and assessment framework, and certain transitional provisions have therefore been made (see T1 – T3). In keeping with these, the Faculty has decided to treat a pass in the AFOM before 1 January 2009 as equivalent to passing the Part 2 examination.*

***Old curriculum trainees contemplating a transfer are strongly advised to read the transitional provisions (T1 – T3) and associated guidance in full.***

**M42.** The Part 2 examination will normally be held over two days. The MCQ and Structured Short Answer Paper will be held on the first day at one or more centres. The OSPE will be held on the second day, normally in the following week, and may be at one or more

centres.

- M43.** Full details of the new examination will be published separately. Questions may be chosen from any part of the published curriculum.
- M44.** Applications for admission to the examination must be made by the closing date ie, not less than 10 weeks before the date of the examination. The application is to be submitted on the Faculty's generic application form (available directly from the Faculty office or via the website [www.facoccmmed.ac.uk](http://www.facoccmmed.ac.uk)) together with evidence of employment and training as detailed above. The Faculty must receive the original signed form and under no circumstances will a photocopied or faxed form be accepted. All applications must be accompanied by the fee (see Annex 2 Core Regulations). Details of times and places of examinations will be available to candidates well before the due dates.
- M45.** Candidates who pass one or more parts of the Part 2 examination but fail to pass all parts will not be required to retake the section(s) they pass should they re-attempt the examination a second time within 2 years (a longer period may be considered at the discretion of the Faculty Assessment Sub-Committee under special circumstances, such as part-time training, maternity and problems of ill-health). If, when carrying forwards marks from an earlier sitting a candidate fails, they must resit the examination in full at their next attempt.

#### **APPLYING FOR MEMBERSHIP**

- M46.** Applications for Membership are made on Form M4. The completed form should be sent to the Academic Dean at the Faculty. The Academic Dean and President are responsible for approving the application on behalf of the Faculty Board. A fee for the diploma is payable to the Faculty at the time of the award of the Membership.

#### ***Guidance:***

*Where application is linked with an approved UK programme of higher specialist training in occupational medicine, Form M4 should be countersigned by the candidate's supervisor. If appropriate, the Faculty will make a recommendation for award of a CCT (Certificate of Completion of Training) to the PMETB, with details of the candidate's training and qualifications. Candidates may then apply to the PMETB for a CCT; the application form is available from the Faculty and must be countersigned by the educational supervisor and Regional Specialty Advisor or Postgraduate Dean. On receipt of the recommendation from the Faculty, the candidate's application form and the required fee, the PMETB will process the CCT application.*

#### **OTHER MATTERS**

- M47.** The Faculty may refuse to admit to assessment any candidate who infringes a regulation of the Faculty Board or whose behaviour is considered to be prejudicial to the proper management and conduct of the assessment.
- M48.** Any representations that candidates wish to make with regard to the conduct of any part of their assessment for Membership must be addressed in writing to the Academic Dean at the Faculty. Details of formal appeal procedures are publicised on the Faculty's website and available on request.

## TRANSITIONAL PROVISIONS: 1 AUGUST 2007 TO 31 DECEMBER 2008

### **Guidance**

Following the introduction of a new officially approved Curriculum for Higher Specialist Training in Occupational Medicine on 1 August 2007, trainees in approved posts at that time have a time-limited opportunity to switch to the new curriculum and assessment framework. Transitional provisions will apply to their situation as set out below.

Trainees who have enrolled **after** 31 July 2007 into an approved post or programme recognised for higher specialist training in occupational medicine in the UK must follow the regulations M2 to M48, rather than these transitional provisions.

- T1.** Trainees enrolled as of 31 July 2007 in an approved post or programme, recognised for higher specialist training in occupational medicine in the UK, may elect to transfer to the assessment system and Membership Regulations set out in Section A of this document. To do so, they must apply in writing to the Faculty's Director of Training or SAC and their application must reach the Faculty office before 1 January 2009.
- T2.** The arrangements for formal assessment of transferring trainees will depend on their prior experience. Specifically, in relation to the three elements of assessment in M3:
- (a) Candidates who have passed the Multiple Choice Question (MCQ) component of the DOccMed examination will be exempted the Part 1 examination **if** that pass was achieved within 5 years of the date on which their transfer application reaches the Faculty office.
  - (b) Candidates who have passed the AFOM examination in its entirety will be exempted both the Part 1 and Part 2 examinations, **if** that pass was achieved before 1 January 2009.
- T3.** Subject to the derogations in T2, all other regulations of Membership will apply.

### **Guidance on T3**

Thus, the award of Membership will require passes in (the equivalent of) all 3 elements of assessment and that the other conditions of relevant training have been met.

T3 means, for example, that before Membership can be awarded, an old curriculum trainee who switches to the new curriculum and has:

- a) **passed the AFOM examination** will be deemed to have passed both the Part 1 and Part 2 examinations; but they will still need to pass the dissertation/research competency element of assessment (M11 to M35) – they need not have submitted the dissertation before taking the AFOM (M15);
- b) **passed the Diploma MCQ in the recent past but not the AFOM or dissertation**, will need to pass both the dissertation and Part 2 examination and the dissertation, and to have submitted their research dissertation or equivalent evidence to the Faculty before applying to sit the Part 2 examination (M15, M37(b)).
- c) **not passed either the Diploma or the AFOM**, will need to take both Part 1 and Part 2 examinations and may not attempt the Part 2 examination until their ST5 competencies have been signed off by an ARCP Panel and their dissertation has been submitted.

**NB IMPORTANT:** If transferring without the AFOM, old curriculum trainees should appreciate that the Part 2 examination will not be available until **June 2010**; and that a pass in the AFOM will **no longer be recognised** in lieu of it **after 31 December 2008 (M41)**. In general, trainees following the new curriculum are expected to follow the new curriculum assessment provisions.

***Other guidance to trainees contemplating a transfer to the new curriculum***

The rules of ***specialist training*** (as opposed to the regulations for ***Membership***) require transferring trainees to participate fully in all of the assessment methods of specialist training, including workplace-based assessments (WBAs). In assessing a candidate's progress through their higher specialist training programme, ARCPs are likely to take performance in WBAs at the required level of competency into account, alongside other information.

*Old curriculum trainees who elect not to switch will not be required to participate in WBAs.*

## SECTION B

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### **Guidance:**

*The regulations in this Section relate to trainees who enrolled in an approved higher specialist training post or programme in occupational medicine in the UK **before** 1 August 2007 and who do not/did not transfer to the new curriculum under regulation T1.*

**M49.** Award of Membership of the Faculty of Occupational Medicine (MFOM) is an obligatory exit requirement of specialist training in occupational medicine in the United Kingdom (UK). Membership is awarded to a trainee who has:

- (a) completed a minimum of 4 years training in an approved supervised training post, and
- (b) submitted a satisfactory dissertation or equivalent evidence, and
- (c) **either** passed the AFOM examination **or** the Part 2 Membership Examination.

It may entitle the holder to the award of a Certificate of Completion of Training (CCT) by the Postgraduate Medical Education and Training Board (PMETB). Doctors awarded a CCT are eligible for inclusion in the Specialist Register of the General Medical Council.

**M50.** A candidate who has not passed the AFOM examination before June 2010 will be eligible to sit, and will be required to pass the Part 2 examination instead. If successful, the candidate will achieve the qualification of AFOM.

**M51.** M50 should be read in conjunction with M36 and M42-M45, which will also apply in these circumstances. However, there will be **no** requirement on the candidate to have submitted their research dissertation or equivalent evidence before application to the Part 2 examination, and there will no requirement to demonstrate a specified level of achievement at their formal in-training review (ie, M37(b) and M38 will **not** apply).

### **Guidance:**

*For trainees in an approved higher specialist training post or programme **before** 1 August 2007 who do **not** transfer to the new curriculum under T1, the regulations for Membership are **unchanged**, except that in 2010 the AFOM examination will be replaced by the Part 2 Membership examination. (This will involve a change of assessment methods but not in syllabus). Trainees who have not passed the AFOM before June 2010 (or who have only passed certain elements of it by this date) will need to take the Part 2 examination instead. They can do so without any of the special preconditions of eligibility introduced with the new curriculum. If successful, they will be awarded the AFOM, as previously.*

**M52.** Details on the requirements for Associateship and for specialist training in the UK are available in separate publications. Details of the new Part 2 examination will be published separately.

**M53.** All candidates will be required to submit evidence of having acquired competencies in research methods. The candidate should demonstrate competence in formulating and testing a research question, which would normally be relevant to the broad field of occupational health.

**M54.** This evidence may take one of several forms:

- (a) Most candidates will undertake and complete a piece of primary or secondary research or substantial audit during their time in approved training, and present their findings as a dissertation of prescribed format (M58).

The following alternatives may be suitable equivalent evidence:

- (b) a body of substantial published primary or secondary research (M59-M61);
- (c) a thesis accepted by a university for the award of a higher degree (such as MD, PhD, Master of Science, MPhil) (M55, M62-M63).

**M55.** Normally, the submitted work should be relevant to the broad field of occupational health. However, at the discretion of the Chief Examiner (Research Methods), submissions demonstrating high-level mastery of research may be admissible, even if outwith the field of occupational health (eg, a PhD or MD on a different medical topic).

**M56.** Assessors appointed by the Chief Examiner (Research Methods) will evaluate the submitted work against the criteria set out in these regulations.

**M57.** The final decision, both as to admissibility for assessment and as to final adequacy, will rest with the Chief Examiner (Research Methods).

### **Dissertations, reviews and audits conducted for purpose**

**M58.** Any dissertation submitted to the Faculty for final assessment must be typewritten or printed, written in English, and should have the following attributes:

- demonstration of mastery of a subject within the broad field of occupational health;
- a well-defined aim or set of aims;
- an adequate literature search, edited and commented upon in a manner which indicates understanding of the subject;
- appropriate methods and techniques;
- sufficient data to support any conclusions that are made;
- appropriate statistical methods where relevant,
- discrimination in the evaluation of collected data and other information;
- logical and appropriate interpretation of results;
- logical and thorough discussion of strengths, limitations, and context of the findings;
- logical and sensibly-drawn conclusions;
- suitable recommendations as to follow on actions or needs;
- clear logical presentation, with appropriate use of tables, diagrams or photographs to enhance the presentation of the data;
- proper use of grammar and spelling, and a style appropriate to scientific publication;
- use of double line-spacing and a font that facilitates reading (eg, Times New Roman, Arial or Helvetica);
- references in the Vancouver style.

### ***Guidance:***

*Candidates should discuss the suitability of the proposed subject with their supervisor, whose continuing advice should be sought during the preparation of the written work. It is advisable to initiate discussions at an early stage in training, preferably during the first year. Additional information about the development of the protocol is available in the Faculty publication 'GUIDANCE ON RESEARCH DISSERTATIONS WRITTEN FOR PURPOSE'. Candidates may be expected to answer questions about the progress of their study for the Record of In-Training Assessments (RITA), as part of an overall assessment of satisfactory progress with training.*

### **Substantial published work**

**M59.** In the context of these regulations "substantial published primary or secondary

research” means at least 2 primary research papers or 1 published significant and substantial review.

**M60.** The works under M59 must be written in English and published in a refereed scientific journal(s) held by nationally respected reference libraries or cited by MEDLINE, BIDS Embase, or PubMed. Papers that are “in press” will also be allowable, if evidence is provided of acceptance by the journal’s editor.

**M61.** Multi-author works must be accompanied by confirmation – signed by at least one of the other authors of the paper – of the contribution made by the candidate.

### **Examined degrees of universities**

**M62.** Candidates may elect to submit a thesis that has been accepted by a university (eg, as a Master of Science Degree in Occupational Health or Occupational Medicine). Such submissions must satisfy the criteria outlined in M53 and M55 and will be reviewed for this purpose by Faculty appointed assessors.

**M63.** Exceptionally, candidates may enter training in occupational medicine having already successfully completed an MD or PhD in a medical subject or may successfully complete an MD or PhD during the course of their training. In such cases, trainees may submit their thesis to the Chief Examiner (Research Methods) for a view on admissibility. If deemed admissible under M55, the MD or PhD may be reviewed by Faculty appointed assessors.

### **Guidance:**

*The standard required of submissions under M54 (b) or M54(c) will be the same as the standard required of theses or dissertations submitted under M54(a).*

### **Procedures**

**M64.** If planning to undertake a dissertation for purpose (M54(a)), candidates should seek approval of the outline protocol for their proposed work **before** data collection. The title and an outline of the work should be submitted on Form M2 to the Chief Examiner (Research Methods). This should be no more than 1,000 words in length and should focus on the rationale and method of study, together with timelines for proposed completion and any relevant ethical issues.

**M65.** The Chief Examiner (Research Methods), with input as required from other experts, will aim to advise the candidate about the suitability of their outline protocol.

### **Guidance:**

*Where appropriate, suggestions for improvement will be included in the response, which will usually be made within about 6 to 8 weeks of receipt.*

**M66.** Outline approval is **not** required in relation to substantial published work or an examined degree (M54(b) or 54(c)). However, candidates may wish voluntarily to submit an outline as set out in M64 and M65 (for which no fee is charged), to receive guidance on likely admissibility ahead of their final submission (which will incur an assessment fee; a possible delay to training could arise in the event of late discovery of inadmissibility).

### **Guidance:**

*The safeguard of submitting an outline proposal (M64 to M66) exists to avoid trainees investing*

*time in a study that is likely to fall outside the rules and be judged inadmissible. Informal advice may also be offered on improving the protocol.*

*Those in an approved training programme can submit an outline proposal at any time, but it is recommended that they do this **early on**. Experience suggests that developing a good idea and laying the foundations for a good study take time.*

*Most research projects that collect health data will require ethics committee approval. Trainees should discuss the requirement with their supervisor, should budget extra time for this, and should indicate how issues of ethical approval will be/have been handled in any outline and final submissions to the Faculty. [Note that the Faculty Ethics Committee is not constituted to grant ethical approval to individual trainee dissertations. Instead, proposals will normally need to be submitted to a Local Research Ethics Committee, a Multi-Research Ethics Committee, or to another appropriate committee such as those established by universities or the Armed Forces or the Health and Safety Executive].*

**M67.** On the completion of the work, candidates should submit two unbound copies of their evidence to the Faculty for final assessment, together with Form M3 and the appropriate fee. A maximum of five keywords should be included on the submission form.

**M68.** For those submitting a dissertation written for purpose (M54(a)):

- (a) the length of the written work should be around 10,000 words (in general, credit will not be given for exceeding this limit);
- (b) good quality A4 paper must be used and the pages must be numbered;
- (c) the work must include an abstract of no more than 300 words, positioned at the start;
- (d) the volume must bear the title, the name of the candidate, the name of the qualification for which the dissertation is being submitted and the date of submission;
- (e) where appropriate, a shortened version of the title should appear on the first page of the text.
- (f) candidates should state clearly, in an acknowledgement, whether they have received any help with the study, and the respective contributions of other parties should be clear to the assessors.

**M69.** Those submitting substantial published research or the awarded thesis of a university (M54(b), M54(c)) should:

- (a) ensure that the text is clear, legible and easy to read;
- (b) provide proof of acceptance/publication by one or more journals, or confirmation of the degree awarded and university in question;
- (c) provide a frontispiece bearing an overall title, the name of the candidate, the name of the qualification for which the dissertation is being submitted, the date of submission and an abstract summarising the work.

**M70.** Following receipt of the final submission, the Faculty will appoint two independent assessors to evaluate the work. Usually, the assessors will be specialist occupational physicians. However, in certain circumstances the Faculty may appoint an assessor who is an expert in the relevant field of study, but not an occupational physician; and if so, at least one assessor will be a specialist occupational physician.

**M71.** The assessors may require the candidate to attend for an oral assessment of their work, should this be considered essential in forming a judgement about the

candidate's mastery of the subject and of the techniques used.

- M72.** The assessors may recommend acceptance without revision, minor revision, substantial revision, or outright rejection of the work. When submissions fail to meet the required standard, the assessors will issue written guidance on the points of correction and additional work, or the reasons for outright rejection.
- M73.** If the assessors are unable to agree as to whether the submission meets the required standard, the Chief Examiner (Research Methods) will either (a) act as a third assessor and adjudicator, or b) appoint a third assessor and adjudicator, or (c) in exceptional circumstances, appoint two new assessors. An expert advisor may be appointed to assist the original assessors with highly technical content in a dissertation.
- M74.** After acceptance of the work and before Membership can be awarded, the candidate must provide one copy bound in boards and cloth back for retention in the Faculty library. The colour to be used is Arbelave 563 (green). The title is to be printed on the front cover and the information on the spine is to read (from top to bottom): MFOM, name of candidate, year of submission of bound copy. The abstract of the final submission will normally be published on the Faculty's web site.

### **Guidance:**

*For candidates occupying an approved training post leading to CCT and holding an National Training Number (NTN) or NTN(I), completion of training is indicated by the award of a signed RITA G form ('Final Record of Satisfactory Progress') by the relevant Regional Postgraduate Institute. When issued with a RITA G, candidates may apply for Membership of the Faculty. The RITA G form indicates that the following have been achieved:*

- a) award of Associateship of the Faculty of Occupational Medicine (AFOM) or (after 2010) the Part 2 examination;*
- b) submission of a thesis, dissertation or substantial published work of satisfactory standard;*
- c) satisfactory completion of a minimum of 4 years of specialist training in an approved post.*

*Applications for Membership are made on form M4, which must be countersigned by the candidate's supervisor. The completed form M4 should be sent to the Academic Dean at the Faculty. The Academic Dean and President are responsible for approving the application on behalf of the Faculty Board. A fee for the diploma is payable to the Faculty at the time of the award of the Membership. If appropriate, the Faculty will make a recommendation for award of a CCT to the PMETB, with details of the candidate's training and qualifications. Candidates may then apply to the PMETB for a CCT; the application form is available from the Faculty and must be countersigned by the educational supervisor and Regional Specialty Advisor or Postgraduate Dean. On receipt of the recommendation from the Faculty, the candidate's application form and the required fee, the PMETB will process the CCT application.*

### **TRANSITIONAL PROVISIONS**

- M75.** Where a research submission has been agreed in outline with the Faculty, and/or submitted to Faculty-approved assessors *before* 1 May 2008, candidates will have the option to have their dissertation considered under the Membership regulations that were in force in July 2007.

### **APPEALS**

- M76.** If a candidate is unhappy with the assessment of their outline or final submission, then they should write in the first instance to the Chief Examiner (Research Methods), who will have discretion to appoint new assessors to aid in any review of decision. If,

following written representations to the Chief Examiner (Research Methods), the candidate remains unhappy, then they may appeal to the Academic Dean. Details of formal appeal procedures are publicised on the Faculty's website and available on request.

#### **OTHER MATTERS**

**M77.** The Faculty may refuse to admit to assessment any candidate who infringes a regulation of the Faculty Board or whose behaviour is considered to be prejudicial to the proper management and conduct of the assessment.

## SECTION C

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### MEMBERSHIP FOR CANDIDATES ENROLLED PRIOR TO 3 APRIL 2008 IN OVERSEAS TRAINING POSTS APPROVED AD PERSONAM BY THE FACULTY

#### **Guidance:**

*An alternative path to Membership has existed historically for medically qualified overseas candidates occupying training posts outside the UK which were approved by the Faculty on an individual case-by-case basis. Application comprised a timetable describing the training programme, a curriculum vitae of the candidate, and details of their supervision and the qualifications of their trainer. The Faculty SAC then arranged an independent assessment of the training post and programme by an appointed specialist and Fellow or a Member of the Faculty. Approval came with certain conditions related to the length of training required to ensure equivalence with a four-year full-time specialist training programme in an approved post in the UK.*

*This provision was **closed to new applicants** on 3 April 2008 and is now replaced by the Section A regulations, which permit overseas candidates to bid for Membership by alternative means. The regulations in this Section apply to candidates enrolled in Membership training posts overseas that were individually approved (ie, ad personam) by the Faculty **before** 3 April 2008.*

- M78.** The Faculty's Specialist Advisory Committee (SAC) will be responsible for assessing applications for the alternative path to Membership as set out in this Section.
- M79.** The SAC will receive and consider a candidate's final written application for Membership. The standards required of candidates will be no less than those required of candidates who enrol for specialist training in the UK. The SAC will take into account the amount and quality of general professional training, the qualifications and experience of the trainer, and the Membership training programme and its length relative to that agreed upon approval. The total period of training will never be less than 4 years (and may have been specified as longer than this).
- M80.** The award of Membership obtained via the alternative path in this Section will **not** enable the candidate to be awarded a Certificate of Completion of Training (CCT) by the PMETB. A CCT can only be awarded to doctors who hold an NTN or NTN(I) **and** have been appointed in open competition to a training programme that is approved for higher specialist training **and** have satisfied all other training requirements of the Faculty of Occupational Medicine.
- M81.** The Faculty may refuse to admit to assessment any candidate who infringes a regulation of the Faculty Board or whose behaviour is considered to be prejudicial to the proper management and conduct of the assessment.
- M82.** Any representations that candidates wish to make with regard to the conduct of any part of their assessment for Membership must be addressed in writing to the Academic Dean at the Faculty.

## GENERAL PROFESSIONAL TRAINING

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*This Annex applies to those outwith UK specialist training posts or programmes.\**

It is a requirement, before attempting the Part 1 Membership examination (and the Associateship so long as this examination remains available), that candidates who are not enrolled in UK specialist training shall provide evidence of adequate and acceptable General Professional Training.

The aim of General Professional Training is to enable a doctor to obtain a broad medical experience before embarking upon specialist training. It normally occupies a period of at least two years after full registration and completion of the pre-registration year and the time is spent in a series of specialty registrar posts accepted for the purpose. General Practice Vocational Training in the UK (GPVT) will also meet this requirement.

It is important that the experience gained should be wide and varied. Thus, in addition to filling posts in General (Internal) medicine, trainees are encouraged to work in other specialties. Multi-disciplinary rotations in specialty registrar posts (not necessarily restricted to hospital practice) can offer such experience.

### POSTS SUITABLE FOR GENERAL PROFESSIONAL TRAINING\*

General Practice	General medicine	Cardiology
Diabetes & Endocrinology	Gastroenterology	Nephrology
Thoracic medicine	Clinical Pharmacology	Clinical Immunology & Allergy
Dermatology	Genito-urinary medicine	Medical Oncology
Infectious Diseases	Neurology	Rheumatology
Accident & Emergency	General surgery	Otolaryngology
Neurosurgery	Ophthalmology	Trauma & Orthopaedic surgery
Urology	Psychiatry	Rehabilitation

\* *From 1 August 2007, for purposes of obtaining a CCT, the experience required at enrolment into UK higher specialist training is that defined in the latest version of the Faculty's approved Curriculum for Higher Specialist Training in Occupational Medicine. Such enrolment will automatically qualify a candidate to attempt the Part 1 examination (under Membership regulation M7(b)).*

## GENERAL FACULTY EXAMINATION REGULATIONS

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### APPLICATION

- F1.** Application to take a Faculty examination must be delivered to the Faculty office by the advertised closing date, and accompanied by full payment of the fee.
- F2.** There is no limit on the number of times each examination may be attempted.
- F3.** Candidates with special needs or disabilities should contact the Faculty office to discuss any specific requests to modify the conduct of the examination or make other reasonable adjustments. Requests must be supported in writing and will require the candidate to provide appropriate evidence. They should be made at least 10 weeks before the examination in question, to allow adequate time for consideration. (If delays arise in obtaining the information the Faculty needs, the candidate may have to defer taking the examination until a later sitting.)

### POLICY OF NON-DISCRIMINATION

- F4.** The Faculty's policy is to make every effort not to discriminate on grounds of gender, ethnic origin, sexual orientation, religion or disability. Written papers are anonymised before marking. Multiple choice questions are marked by computer and in other types of paper, each question is marked by a different examiner or pair of examiners. After marking, monitors check the papers to confirm that there is no evidence of discrimination. The Faculty relies on individuals – its staff, members and examination candidates – to point out where there is a potential for discrimination, so that it may be avoided.
- F5.** The language of the examinations is English and, except where otherwise indicated in the Regulations, the examinations will be based on practice in the United Kingdom. Candidates are expected to be able to communicate effectively with patients in the practical elements of assessment. The examiners try to draft the written papers in clear, unambiguous English, avoiding the use of acronyms. If necessary, the medical invigilators of written examinations will explain any unclear sections.
- F6.** Examinations are scheduled when the Faculty can obtain the requisite facilities. The Faculty is therefore unable to guarantee that examination dates will avoid all religious holidays on all occasions. However, it does try to avoid them whenever possible.

### CONDUCT OF THE CANDIDATE

- F7.** The Faculty may refuse to admit to the examination, or to proceed with the examination of, any candidate who infringes a regulation of the Faculty Board or whose behaviour is considered by the Board to be prejudicial to the proper management and conduct of the examination.

### FEES

**F8.** The fees for admission to the examination will be determined annually by the Faculty. Details will be promulgated in any advertisement for the examination and on the Faculty website ([www.facocccmed.ac.uk](http://www.facocccmed.ac.uk)). Candidates who withdraw their application before the closing date for the examination will have the fee returned less 10% administration fee. Candidates who withdraw after the closure date will not normally be entitled to a refund of fees.

**F9.** There will be a separate fee to be paid for the award of the diploma on successful completion of the examination.

**DEFERRALS AND NO FINANCIAL PENALTY**

**F10.** Candidates who are sufficiently ill that their performance in the examination may be affected may apply, before the examination, to defer their examination without financial penalty until the next opportunity, on production of a medical certificate. Similarly, candidates who are pregnant or breast-feeding may apply to defer their examination on production of a medical certificate.

**FORMAT OF THE EXAMINATION**

**F11.** The examinations will comprise the general components shown in Table 1. Some examinations may require passes in the written components of the examination before moving forward to oral or clinical components. In certain of the examinations, passes in some components of an examination may be carried forward in the event of overall failure. Details are given in the regulations for specific examinations.

Component	MCQ <sup>(1)</sup>	MEQ <sup>(2)</sup>	Written Paper	Clinical exam	OSPE	Oral exam	Portfolio & viva	Photographic material	Journal
<b>Exam</b>									
MFOM Part 1	X								
MFOM Part 2	X	X			X				
DOccMed	X						X		
AFOM*			X (3)	X		X		X	X
DAvMed			X (4)			X			
DDAM	X	X		X					

**Table 1: Examination components**

- Notes:**
1. Multiple Choice Question paper
  2. Modified Essay Question paper
  3. Two papers
  4. Two papers [each include MCQ and Modified Essay Questions]
- \* The AFOM examination is being withdrawn in 2010.

- F12.** The weight given to each component of each examination will be given in individual examination regulations. The weight given to individual questions in essay or MEQ papers will be displayed on the examination paper.
- F13.** Since there are differences in the degree of difficulty of each examination, the examination assesses the candidate's performance in relation to a standard set by the examiners. As a result, the pass mark and the pass rate may vary at each examination, but the results may be and often are standardised, such that 50% represents a pass.

## **EXAMINERS**

- F14.** Examiners are appointed and trained by the Faculty. Refresher training is provided on a regular basis. In addition, the performance of examiners is monitored and standardisation applied. All are required to be in good standing and up to date with their Continuing Professional Development (CPD).

## **RESULTS**

- F15.** As soon after the examination as possible, candidates will be provided by mail with details of their marks. Candidates who fail an examination will receive the Chief Examiner's feedback on problem areas of performance. Results will not be provided by telephone under any circumstances. To comply with the Data Protection Act 1998, candidates will have access on request to any information held on them by the Faculty. Papers will be retained until the commencement of the next diet of that examination. Candidates who wish to apply for copies of their marked scripts (other than machine-marked MCQs) may apply to the Academic Dean; an administrative charge will apply.
- F16.** In the event of a candidate wishing to make an enquiry about his or her performance, or to submit any comments following an examination, these should be directed in the first instance to the Examination Coordinator at the Faculty Offices who will ensure that they are passed onto the appropriate officer. Under no circumstances are candidates to contact the Examiners, Deputy Chief Examiners or other officers directly at their place of work or at their personal address.

## **APPEALS**

- F17.** If a candidate is dissatisfied with a decision related to his or her examination, he or she should write to the Chief Examiner of the examination in question. This initial inquiry must be made by post (not by e-mail) and must be received by the Faculty within 21 days of the date on which the decision to which the appeal relates was issued. Applications made after this time cannot be considered under the Appeals Rules. The grounds for dissatisfaction should be clearly and fully stated, and it may help the candidate to read the criteria for appeal, which are set out in the Faculty Board's Appeals Rules and Procedures:  
<http://www.facocmed.ac.uk/library/docs/appealsrules2010.pdf>.

- F18.** The Chief Examiner, or an appointed deputy, will write a letter of response; and will, as

a matter of course, enclose with this letter details of the Faculty's Appeals Rules and Procedures.

- F19.** If after receiving the Chief Examiner's response (under regulation F18) the candidate remains dissatisfied, he or she may make a formal appeal to the Faculty's Academic Dean. He or she must do so by post (and not by e-mail), such that the Faculty receives the appeal within 21 days of the Chief Examiner's response being issued under regulation F18. No extension to this time limit will be considered.
- F20.** Any formal appeal made following the process and timescale of regulation F19, and of the Appeals Procedures, will be considered by the Academic Dean under the Board's Appeal Procedures, details of which will have been sent to the candidate with the Chief Examiner's response.
- F21.** The Appeals Procedures will specify the items that must be included in a notice of formal appeal under regulation F19. The appellant must also submit an appeal fee, the scale of which is defined in an annex to the Appeals Procedures. A portion of this appeal fee (as specified in the annex) will be non-refundable, unless the appeal is upheld.
- F22.** If the documentation submitted under regulation F19 does not conform to that stipulated in the Appeals Procedures, then the appeal will be deemed to have failed. No allowance of extra time will be made if mandatory items are missing.

*Guidance on regulations F17-F22, including further details of required timelines, procedures and potential outcomes, can be found at:*

<http://www.facocmed.ac.uk/library/docs/appealsrules2010.pdf>

## RELATED DOCUMENTS AND GUIDANCE

FOM website

<http://www.facocmed.ac.uk>

Curriculum for Higher Specialist Training on Occupational Medicine

[http://www.facocmed.ac.uk/library/docs/t\\_curriculum07.pdf](http://www.facocmed.ac.uk/library/docs/t_curriculum07.pdf)

Diploma in Occupational Medicine: Regulations, syllabus and guidance notes

[http://www.facocmed.ac.uk/library/docs/dom\\_r04.pdf](http://www.facocmed.ac.uk/library/docs/dom_r04.pdf)

Specialist Training Handbook, 2<sup>nd</sup> edition, November 2002

<http://www.facocmed.ac.uk/edtrain/training/contents02.pdf>

Specialty Training Handbook, 4th edition, April 2008

<http://www.facocmed.ac.uk/edtrain/training/contents08.pdf>

Specialty Specific Guidance

<http://www.pmetb.org.uk/index.php?id=specialtyspecificguidance>



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**Compiled and published by the Faculty of Occupational Medicine**

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