

HKMLE and the Internship



HKMLE Basics

Ensuring Justice

Maintaining
Professionalism

Protecting
the Public

- Make sure you're eligible (5 years medical training, hold medical qualification, done a period of internship)
- Apply (painful application form)
- Held twice a year
- The exams:

Part I : The Examination in Professional Knowledge — 2 papers, 120 questions, MCQ (best of 5)

Part II : The Proficiency Test in Medical English

Part III : The Clinical Examination (OSCEs — medicine, surgery, paeds, O+G)

- The internship: 12-months.
 - Exemption? Rare.
 - Deferral? If in full time medical training — varies
- Apply for full registration with HK Medical Council
 - Partial registration also possible but cannot work privately

Part I – Examination Professional Knowledge

- Rumored to be the hardest questions from the final year exams for CU/HKU students
- No specific curriculum but guidance exists on the HKMLE website
- 2 papers, 120 questions, MCQ best of 5. Negative marking (unusual for UK grads)
- To pass you must get >50% overall and cannot score <50% on either paper
- Aim very high MBBS level, not as detailed as MRCP
- Resources:
 - As per final MBBS
 - Old CU/HKU questions (have you got friends doing medicine in HK?)
 - HKMLE prep course run by successful licentiates in HK
 - Onexamination/Pastest
 - USMLE/GMAT question banks
- Preparation time varies between individuals. I did 6 weeks - daily study all day, 5 days a week (I am not good at exams).

Part II – English proficiency

- Can't remember much about this
- Comprehension
- Writing a clinic letter
- Summarising results
- No clinical knowledge required
- Should not pose a barrier for UK grads



Part III – Clinical

- UK OSCE style
- Surgery with Orthopaedics: venepuncture, hernia, varicose veins, shoulder exam: all the usual suspects
- Medicine: 1 long case (history taking followed by clinical knowledge/questions from examiners), 2 short cases (8 mins) (resp/cardio/abdo/neuro/thyroid/breast), some 4 minute stations with lab tests and imaging to interpret
- Paediatrics: previously the hardest with lots of obscure syndromes. Lately it's OSCE based now which is easier
- O+G – station/paper based... breast exam/PV (model), speculum (model), STD testing/counselling – all final MBBS standard stations

Part III: Medicine

1 Long case 1 hour (30 min history, 10 min clinical examination, present findings and viva)

4 x 8 min stations (resp/neuro/cardio/abdo exam)

4 x 4 min stations (data interpretation, spot diagnosis)

My experience of the long case

內科學

Non-small cell lung ca. Monthly bisphosphonate infusions and Tarceva. Bone mets +.

PMH: CVA, TB, nephrectomy (renal TB), diabetes, hypertension

Examination: rushed – only 10 mins because history took a long time

Viva questions for history: causes for lower limb swelling, method of diagnosis – questions surrounding her having had a "bone marrow" biopsy (patient's words), different ways to obtain biopsy for lung ca, Tarceva, staging (I said TNM) asked what stage patient is, how to stage clinically talked about PET, methods for monitoring disease progression, asked where patient's bone mets are, talked about management of hypercalcaemia, radiotherapy indications

Medicine cont.

Viva questions for physical examination:

Reduced breath sounds left lower zone – differentials

Residual dysarthria (CVA), visual blurring – said I wanted to do full neuro but didn't have time

Significance of midline scar for CS – probably because I mentioned it was midline

Pair of examiners, one did questioning. Relaxed – tried to help me during viva, discussion led by what I presented. No pre-set questions. **Only mention what you want to talk about!**

Leave 15 mins for physical examination.

Medicine

8 min stations

Abdo - Renal transplant

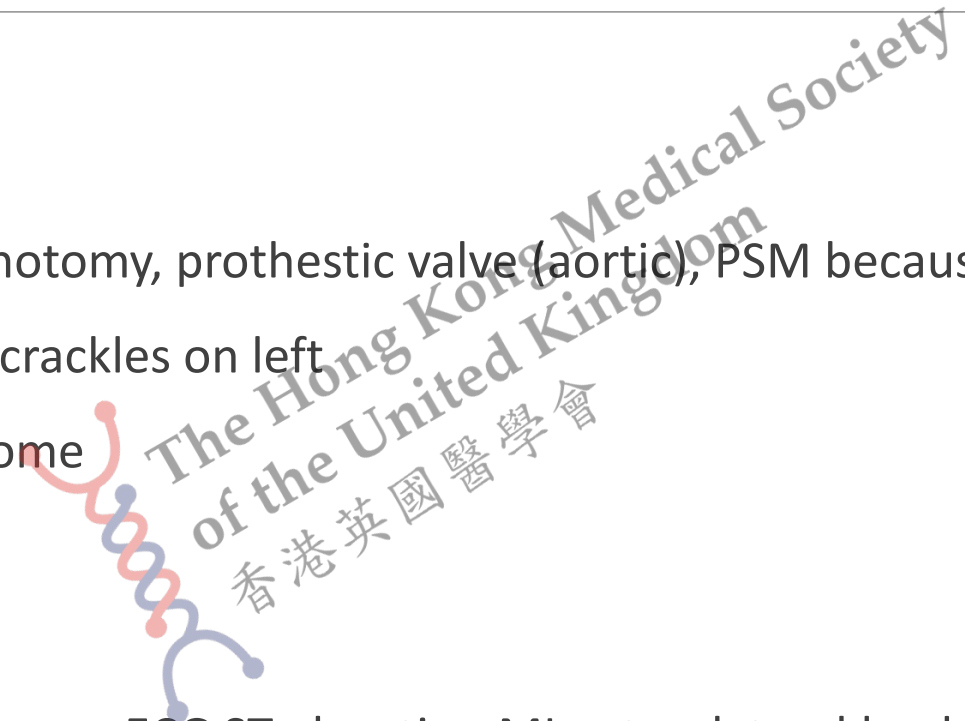
Cardio – pacemaker, sternotomy, prosthetic valve (aortic), PSM because of MR

Resp – pneumonectomy, crackles on left

Neuro - cerebellar syndrome

4 min stations

RA hands, CXR pneumothorax, ECG ST elevation MI anterolateral leads



Medicine – Long cases examples

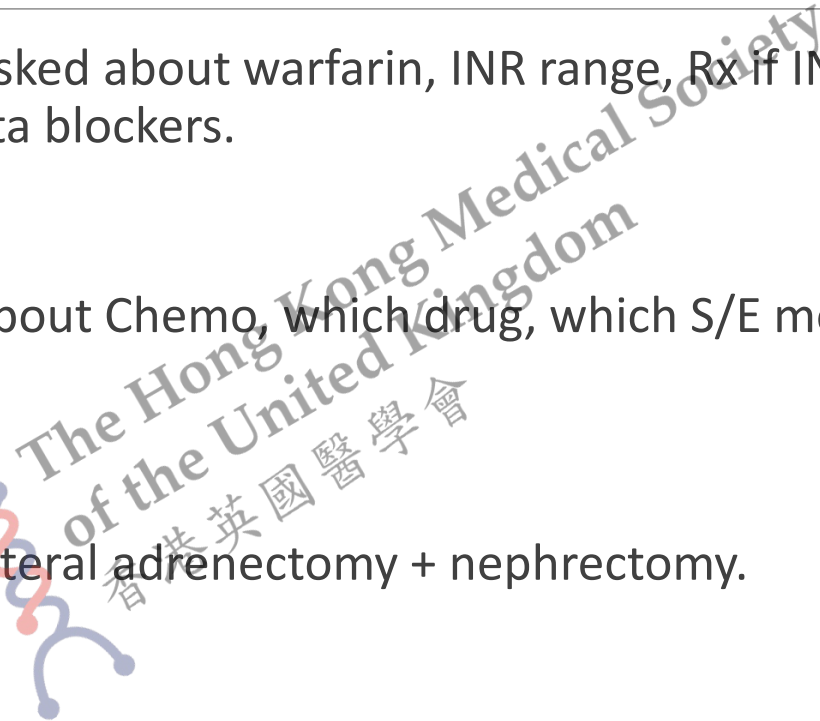
AR with valve replacement? - asked about warfarin, INR range, Rx if INR high/bleeding. loads of pharmacology questions on beta blockers.

Sjogren's syndrome

Lung Ca - LOADs of questions about Chemo, which drug, which S/E more common than others. para-neoplastic features.

Diabetes insipidus - DDx, Ix

Adrenal insufficiency post unilateral adrenalectomy + nephrectomy.



Surgery

- 10 stations, 2 rest
- Data interpretation – look at blood results give diagnosis complications (i.e pancreatitis)
- Venepuncture – like final MB
- Thyroid – unilateral goitre, previous thyroidectomy- differentials
- Hand washing – asked what “VRE” means
- Shoulder examination – xray showing anterior dislocation and asked about three special tests
- Data – bowel obstruction on xray – management. Also a coronal CT abdo showing inguinal hernia.

O+G

- 10 stations, 1 rest
- Gynae history taking (LIF pain 2/7 increasing in severity, not pregnant) eventually asked her if she'd had scans and she produces a TVS report showing huge left sided cyst. Had to counsel her for risks of torsion/rupture/surgery
- Explain booking test results to 10 week pregnant 32 year old. Was anaemic
- Smear taking on a model followed by trichomonas positive results – had to counsel patient
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Written

- IVF results, PVB in early pregnancy, management of failure to progress in labour, management uterine prolapse, post partum DVT, pre-eclampsia, contraceptive copper coil
- Time adequate, more straightforward than other subjects.

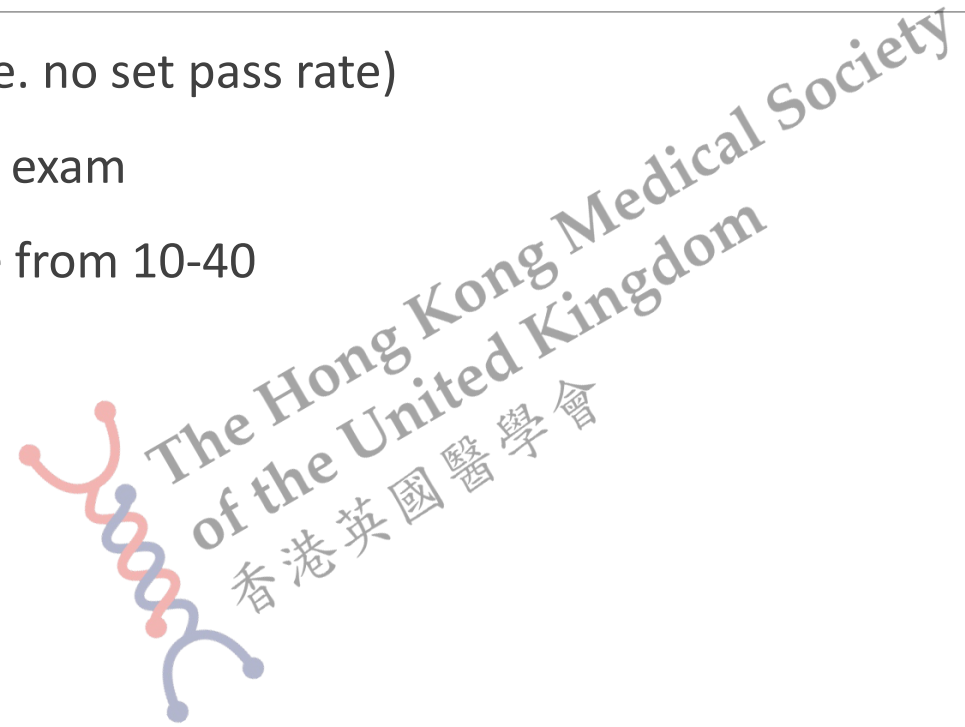
Part III: What are they looking for?

- Final MBBS level
- Good communication skills
- Professional clinical manner
- Systematic approach and clinical skills
- No in-depth investigations/management questions
- Running commentary
- Washing hands (!!)
- hidden alcohol!



Part III Pass Rates

- Pass mark on a curve (i.e. no set pass rate)
- Up to 72 candidates per exam
- Number that pass range from 10-40



Results of the Licensing Examination

Year		Examination in Professional Knowledge			Proficiency Test in Medical English (March)			Proficiency Test in Medical English (September)			Clinical Examination			Completed Internship
		Sat	Passed	%	Sat	Passed	%	Sat	Passed	%	Sat	Passed	%	
1996		154	11	7	–	–	–	140	88	63	40	12	30	
1997		178	13	7	15	12	80	90	48	53	27	9	33	11
1998		165	43	26	7	7	100	51	43	84	49	17	35	6
1999		165	20	12	5	4	80	57	39	68	49	9	18	16
2000		132	13	10	1	0	0	48	28	58	42	10	24	10
2001		124	13	10	*	–	–	50	37	74	35	9	26	10
2002		104	11	11	*	–	–	31	13	42	33	13	39	7
2003		76	11	14	*	–	–	30	26	87	27	7	26	9
2004		77	7	9	*	–	–	20	13	65	21	9	43	7
2005		81	11	14	*	–	–	29	22	76	22	5	23	10
2006		105	21	20	*	–	–	36	29	81	26	9	35	5
2007		117	22	19	*	–	–	34	33	97	37	18	49	8
2008		138	12	9	*	–	–	38	25	66	23	8	35	9
2009		158	41	26	*	–	–	39	22	56	48	15	31	12
2010		168	43	26	*	–	–	65	64	98	72	21	29	11
2011		221	51	23	*	–	–	54	50	93	76	21	28	15
2012		237	61	26	*	–	–	74	67	91	108	47	44	23
2013		280	102	36	*	–	–	115	103	90	143	46	32	27
2014	(1 st Sitting)	107	25	23	28	22	79	–	–	–	85	46	54	48
	(2 nd Sitting)	200	35	18	–	–	–	77	58	75	70	28	40	
2015	(1 st Sitting)	121	18	15	42	30	71	–	–	–	62	24	39	79
	(2 nd Sitting)	176	41	23	–	–	–	56	50	89	66	16	24	

* suspended from 2001 to 2013

	Part I (n ~ 300)			Part III (n~ 130-150)	
	Sep	May	%	May	Nov
2016	22	14	12	14	27
2017	29	31	20	27	26

香港醫務委員會所舉辦的2004年度執業資格試

學訓練的地方	考生人數 Number of candidates														
	Part I – Professional Knowledge					Part II – English exam					Part III - Clinical Exam				
	第一部份：專業知識考試					第二部份：醫學英語技能水平測驗					第三部份：臨床考試				
	No. candidates		No. passed		%	應考人數		合格人數		合格率	應考人數		合格人數		合格率
	總人數	其中已在 香港以外 註冊人數	總人數	其中已在 香港以外 註冊人數		總人數	其中已在 香港以外 註冊人數	總人數	其中已在 香港以外 註冊人數		總人數	其中已在 香港以外 註冊人數	總人數	其中已在 香港以外 註冊人數	
內地 China	41	11	2	0	4.88%	13	3	8	2	61.54%	11	6	4	2	36.36%
台灣 Taiwan	5	3	0	0	0.00%	2	1	2	1	100.00%	1	1	0	0	0.00%
英國 UK	5	5	0	0	0.00%	0	0	0	0	-	0	0	0	0	-
澳洲 Austr	8	8	2	2	25.00%	0	0	0	0	-	1	1	1	1	100.00%
荷蘭 Holland	1	1	0	0	0.00%	0	0	1	0	100.00%	0	0	0	0	0.00%
加拿大 Canada	3	2	2	1	66.67%	0	0	0	0	0.00%	6	4	3	2	50.00%
美國 USA	2	2	1	1	50.00%	0	0	0	0	0.00%	1	1	0	0	0.00%
孟加拉 Bangladesh		2	0	0	0.00%	2	2	1	1	50.00%	0	0	0	0	-
南非 SA	1	1	0	0	0.00%	1	1	1	1	100.00%	0	0	0	0	-
日本 Japan	1	1	0	0	0.00%	1	1	0	0	0.00%	0	0	0	0	-
俄羅斯 Russia	1	0	0	0	0.00%	0	0	0	0	-	0	0	0	0	-
尼泊爾 Nepal	1	1	0	0	0.00%	0	0	0	0	-	0	0	0	0	-
菲律賓 Phillipines		2	0	0	0.00%	0	0	0	0	-	0	0	0	0	-
新西蘭 NZ	0	0	0	0	-	0	0	0	0	-	1	1	1	1	100.00%
合計	77	39	7	4	9.09%	20	8	13	5	65.00%	21	14	9	6	42.86%

香港醫務委員會所舉辦的2005年度執業資格試

成醫學訓練的地方	考生人數														
	第一部份：專業知識考試					第二部份：醫學英語技能水平測驗					第三部份：臨床考試				
	應考人數		合格人數		合格率	應考人數		合格人數		合格率	應考人數		合格人數		合格率
	總人數	其中已在香港以外註冊人數	總人數	其中已在香港以外註冊人數		總人數	其中已在香港以外註冊人數	總人數	其中已在香港以外註冊人數		總人數	其中已在香港以外註冊人數	總人數	其中已在香港以外註冊人數	
內地	44	9	4	1	9.09%	23	1	16	1	69.57%	11	5	4	2	36.36%
台灣	5	4	0	0	0.00%	3	3	3	2	100.00%	2	2	0	0	0.00%
英國	11	10	4	4	36.36%	0	0	0	0	-	4	4	0	0	0.00%
澳洲	5	5	1	1	20.00%	0	0	0	0	-	1	0	0	0	0.00%
巴基斯坦	1	1	0	0	0.00%	0	0	0	0	-	0	0	0	0	-
加拿大	1	1	0	0	0.00%	0	0	0	0	-	1	1	0	0	0.00%
美國	2	1	0	0	0.00%	0	0	0	0	-	1	1	0	0	0.00%
孟加拉	2	2	0	0	0.00%	1	1	1	1	100.00%	0	0	0	0	-
日本	1	1	0	0	0.00%	1	1	1	1	100.00%	0	0	0	0	-
新西蘭	3	3	1	1	33.33%	0	0	0	0	-	1	1	0	0	0.00%
印度	1	1	0	0	0.00%	0	0	0	0	-	0	0	0	0	-
尼泊爾	1	1	1	1	100.00%	0	0	0	0	-	1	1	1	1	100.00%
菲律賓	4	1	0	0	0.00%	1	0	1	0	100.00%	0	0	0	0	-
合計	81	40	11	8	13.58%	29	6	22	5	75.86%	22	15	5	3	22.73%

香港醫務委員會所舉辦的2006年度執業資格試

完成醫學訓練的地方	考生人數														
	第一部份：專業知識考試					第二部份：醫學英語技能水平測驗					第三部份：臨床考試				
	應考人數		合格人數		合格率	應考人數		合格人數		合格率	應考人數		合格人數		合格率
	總人數	其中已在 香港以外 註冊人數	總人數	其中已在 香港以外 註冊人數		總人數	其中已在 香港以外 註冊人數	總人數	其中已在 香港以外 註冊人數		總人數	其中已在 香港以外 註冊人數	總人數	其中已在 香港以外 註冊人數	
內地	40	7	1	1	2.50%	24	3	17	3	70.83%	5	3	3	2	60.00%
台灣	8	4	1	1	12.50%	6	3	6	3	100.00%	1	1	0	0	0.00%
英國	19	19	7	7	36.84%	0	0	0	0	-	6	6	3	3	50.00%
澳洲	11	10	4	3	36.36%	0	0	0	0	-	4	3	2	2	50.00%
加拿大	3	3	2	2	66.67%	0	0	0	0	-	2	2	0	0	0.00%
美國	5	4	1	0	20.00%	1	1	1	1	100.00%	2	1	0	0	0.00%
孟加拉	3	3	0	0	0.00%	0	0	0	0	-	0	0	0	0	-
印度	2	2	1	1	50.00%	1	1	1	1	100.00%	1	1	0	0	0.00%
捷克	1	0	0	0	0.00%	1	0	1	0	100.00%	0	0	0	0	-
緬甸	1	1	0	0	0.00%	1	1	1	1	100.00%	0	0	0	0	-
新西蘭	1	1	0	0	0.00%	0	0	0	0	-	1	1	1	1	100.00%
巴基斯坦	1	1	1	1	100.00%	0	0	0	0	-	1	1	0	0	0.00%
烏克蘭	1	1	0	0	0.00%	1	1	1	1	100.00%	0	0	0	0	-
日本	1	1	0	0	0.00%	0	0	0	0	-	0	0	0	0	-
愛爾蘭	2	2	2	2	100.00%	0	0	0	0	-	2	2	0	0	0.00%
俄羅斯	1	0	0	0	0.00%	1	0	1	0	100.00%	0	0	0	0	-
菲律賓	5	2	1	0	20.00%	0	0	0	0	-	1	0	0	0	0.00%
合計	105	61	21	18	20.00%	36	10	29	10	80.56%	26	21	9	8	34.62%

The internship

- Medicine, Surgery, Paeds, O+G (3 month placements)
- Rotate to different hospitals
- You submit your preferences (rank them).
- There is a “swap” period amongst all other interns (via FB/online system/whatsapp)
- Number of oncalls (i.e. staying on the night having worked the day) varies
- Saturday is a working day
- Oncall rooms/post-call half day
- A/L pretty good (?8 days every 3 months)
- “homework”, rounding (multiple rounds, BD)



Date	Day	(Ex)
01-Mar	Sun	8
02-Mar	Mon	
03-Mar	Tue	
04-Mar	Wed	
05-Mar	Thu	
06-Mar	Fri	
07-Mar	Sat	
08-Mar	Sun	
09-Mar	Mon	
10-Mar	Tue	
11-Mar	Wed	
12-Mar	Thu	Y
13-Mar	Fri	Y
14-Mar	Sat	Ed
15-Mar	Sun	T
16-Mar	Mon	Y
17-Mar	Tue	T
18-Mar	Wed	Y
19-Mar	Thu	T
20-Mar	Fri	T
21-Mar	Sat	T
22-Mar	Sun	Y
23-Mar	Mon	T
24-Mar	Tue	Y
25-Mar	Wed	Y
26-Mar	Thu	Y
27-Mar	Fri	Y
28-Mar	Sat	Pauline
29-Mar	Sun	T
30-Mar	Mon	T
31-Mar	Tue	T

(Sat 8AM - 12N and 12N - 8AM)

On leave: T Chiu 1, 19-23, K Mo 1-31

No call request: T Chiu 18, T Tan 27

Compensatory leave & rest day:

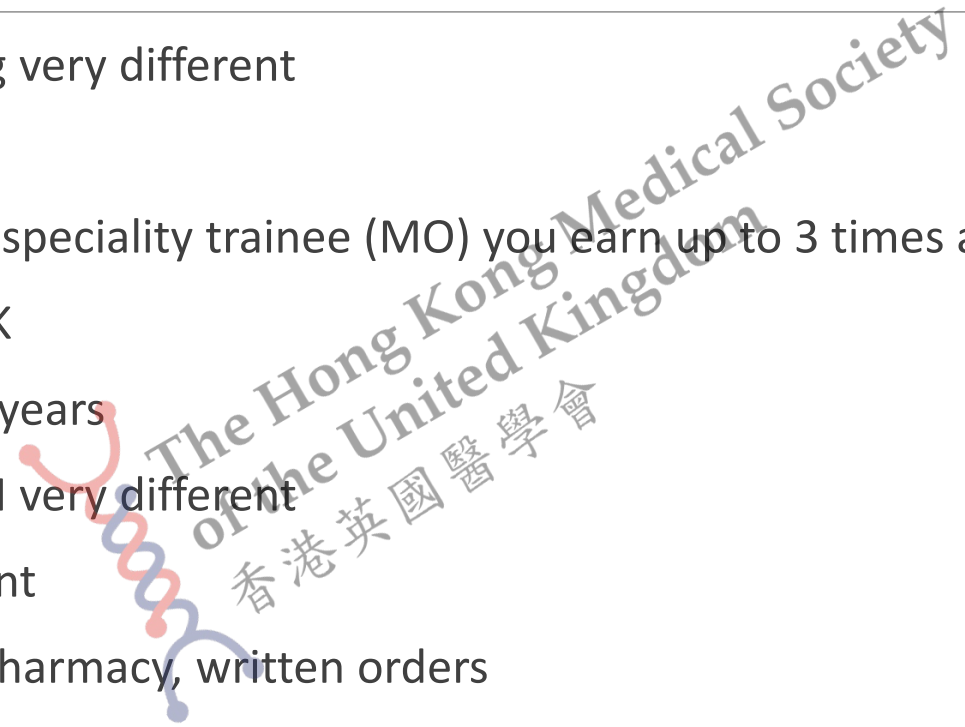
Sick Leave:

Remark: This leave record which update on 26.0

Department of Paediatrics, QEH																	
Call List - May 2015																	
	House Officer				Medical Staff										Consultant		
Date	A9/B2(PICU)/	C9/E9/G2/E2/	General				PICU		Neonatal				2nd		3rd		
	B9/H9/R10/ALG	A11	B9	A9	H9	R10	B2	E9	C9	PN	LW			Long	Short		
1 SH	Y T Tong	M W Lee	K H Kwok			R Yeung			P Y Tong			P Y Loung		D Wong	K O Chang	W Tse	
2	C F Li	C W Wong	Y S Yeung			W L Cheung			W I Yam			E Fu		K F Kwan		C W Luk	
3 Sun	E Au	T F Yau	G C Ying			K W Ng			J Chiu			K F Lam		C H Ng	W H Chan	B But	
4	W I Ng	Y T Tong	Y H Law						S To			P Ho		P W Yau		S H Lee	
5	C F Li	M W Lee	K H Kwok						T W Wong			P Y Loung		K W Kwan		S P Wu	
6	T F Yau	E Au	K W Ng						R Yeung			E Fu		K L Siu		C W Law	
7	W I Ng	Y T Tong	W L Cheung						S Fan			P Ho		K O Chang		W Chan	
8	M W Lee	C F Li	W I Yam						J Chiu			K Law		D Wong		W Tse	
9	T F Yau	E Au	G C Ying			Y S Yeung			S To			P Y Loung		W H Chan		S P Wu	
10 Sun	C W Wong	W I Ng	K H Kwok			J Sit			N Yau			E Fu		P W Yau	K F Kwan	C W Luk	
11	Y T Tong	C F Li	Y H Law						S Fan			K F Lam		K L Siu		S H Lee	
12	T F Yau	E Au	W L Cheung						J Chiu			P Y Loung		D Wong		B But	
13	C W Wong	W I Ng	K W Ng						T W Wong			S Wong		K F Kwan		W Chan	
14	Y T Tong	C F Li	J Sit						P Y Tong			W F Hui		Y S Yau		C W Luk	
15	T F Yau	E Au	C I Kuok			Y S Yeung			S To			E Fu		K O Chang		S H Lee	
16	C W Wong	W I Ng	K H Kwok			R Yeung			W I Yam			K Law		P W Yau		B But	
17 Sun	M W Lee	Y T Tong	A Lo			Y H Law			S Fan			W F Hui		D Wong	Y S Yau	C W Law	
18	C F Li	T F Yau	G C Ying			W L Cheung			P Y Tong			S Wong		K L Siu		W Chan	
19	E Au	C W Wong	C I Kuok			K W Ng			K Law			E Fu		K F Kwan		B But	
20	M W Lee	Y T Tong	A Lo			J Sit			T W Wong			K F Lam		D Wong		C W Luk	
21	C F Li	T F Yau	G C Ying			N Yau			J Chiu			P Ho		Y S Yau		W Chan	
22	E Au	C W Wong	W L Cheung						W I Yam			W F Hui		C H Ng		B But	
23	Y T Tong	M W Lee	A Lo			Y H Law			Y S Yeung			S Wong		K L Siu		C W Law	
24 Sun	W I Ng	C F Li	C I Kuok			R Yeung			T W Wong			K Law		Y S Yau	K O Chang	S P Wu	
25 PH	T F Yau	E Au	G C Ying			K W Ng			S Fan			P Ho		C H Ng	W H Chan	W Chan	
26	C W Wong	M W Lee	J Sit						K F Lam			P Y Loung		P W Yau		W Tse	
27	Y T Tong	W I Ng	C I Kuok			Y H Law			R Yeung			S Wong		K L Siu		C W Luk	
28	C F Li	T F Yau	A Lo			N Yau			P Y Tong			K Law		W H Chan		S P Wu	
29	E Au	C W Wong	K H Kwok						Y S Yeung			P Ho		P W Yau		C W Law	
30	M W Lee	Y T Tong	C I Kuok			W I Yam			T W Wong			W F Hui		K O Chang		W Tse	

Differences between working in HK and UK

- Internship and FY training very different
- 100+ hour weeks
- Intern pay is low but as a speciality trainee (MO) you earn up to 3 times as much as a UK trainee
- Renting/living costs in HK
- All speciality training is 6 years
- Teaching hospital vs. DGH very different
- No study leave entitlement
- Night food, prescribing/pharmacy, written orders
- Time pressure, documentation
- Hierarchical



即時新聞 2018年03月12 請選擇

阻內地醫護來港執業？醫學會反轟陳茂波「保護主義論」

21,867 讚 3,529

最後更新: 0312 20:58 / 建立時間 (HKT): 0312 20:22



阻內地醫護來港執業？醫學會反轟陳茂波「保護主義論」

【新增短片】

財政司司長陳茂波早前就《財政預算案》到電台接受訪問，指本港公營醫療人手緊張已達瓶頸，輸入海外醫護面對大阻力，促正視醫療界保護主義。香港醫學會今日反駁，指醫療界有保護主義並非事實，強調醫生執業資格試門檻由兩間大學所訂，非醫學會或醫生制定，與本地醫學生畢業水平一致，如最新公佈去年9月考試結果，63人考臨床試合格率達41.26%，合格率不低；反之，醫管局過去5年聘請34名海外有限度註冊，僅12人至去年仍留任，問題在於公立醫院工作環境惡劣，醫管局未能挽留人才，始導致人手緊張局面。

醫學會回應新一份財政預算案，對於政府增加醫管局經常性撥款近60億元，並預留3,000億元作第二個10年醫院發展計劃，以及增加資助醫學生學位等表示歡迎，但不滿陳茂波早前在電台節目回應醫管局人手短缺時，僅稱引入海外醫生便能解決難題，未有針對指出醫管局未能挽留人手等。

醫學會會長蔡堅表示，公立醫院醫生人手緊張，與醫院工作環境惡劣，不少醫生在考取專業資格後，尋求更佳工作環境決定離職有關。要解決問題，他認為

In a radio interview, Financial Secretary Chan pointed out that manpower in the public sector of medical care has reached a critical situation and the recruitment of doctors from overseas had met with resistance, and blamed protectionism of the medical profession.

The Medical Association rebutted that its association does not have protectionism as the standard of the licensing exam is set by the two medical schools and not by the MA or doctors. The standard is set to be the same as the local graduates.

MA does not agree with Chan's view that recruiting overseas doctors can solve the manpower problem and that he did not address the inability of HA to retain them.

Dr. Choi of MA pointed out that manpower shortage in public hospitals is due to the poor working environment. Many doctors seek better working environment after obtaining their specialist qualifications.

Choi reiterated that he does not object the government recruiting overseas doctors with limited registration.



Doctor and athlete Heidi Yu strives for excellence in medicine and running

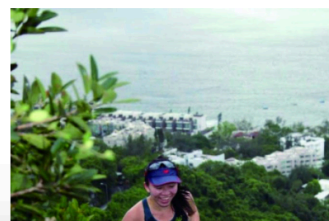


By Sarah Poon

Most days, after an intense 10-hour shift as an anaesthetist at the Pamela Youde Nethersole Eastern Hospital, 27-year-old Heidi Yu Wing-hay puts the drama of the operating theatre behind her and stretches her limbs and muscles. Showing no signs of exhaustion, she is ready to start her daily training – usually along the coastline of Repulse Bay – as a long-distance runner.

Yu's multiple identities means she has a tightly packed schedule, but also a richer life. Her irregular hospital shifts make it hard to train with a dedicated coach but it also means her training time is flexible. In 2016, when she came third in the Standard Chartered Hong Kong Marathon, Yu forced herself to put in two training sessions a day.

Her ambitions and interests in running can be traced back to her junior secondary years when she was selected for the school athletic team in Form One. After that, she spent most of her secondary school days practising for track and field events with external sports clubs. Even after she was admitted to an academically demanding major – the Bachelor of Medicine and Bachelor of Surgery Programme at the University of Hong Kong, her enthusiasm for sport did not fade. She started to specialise in 10km running and going orienteering.



"I am always obsessed with how I can do better," says the perfectionist Yu.

Yu's natural competitive streak drives her to excel at everything she does, which means she has to find a balance