

Physician associate registration assessment (PARA) content map

General Medical Council

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Publication

This content map was published on 29 September 2022. We have shared it ahead of the start of the regulation of physician associates (PAs) to give educators, students and those who work with them time to prepare. It defines the expected content of the PA registration assessment from summer 2025 onwards.

Introduction

The physician associate registration assessment (PARA) is the means by which qualified physician associates can demonstrate their readiness to practice in the UK. It comprises a written assessment and OSCE which can be passed in either order. The PARA is set at the level of a newly qualified PA and is general in nature. The documents Generic and shared learning outcomes for PAs and AAs and the PA Curriculum will describe what all newly qualified Physician Associates must know and be able to do.

This document is one component of our test specification, which sets out our requirements for the design and content of the assessment.

The test specification comprises:

- A content map, which outlines the areas of knowledge and skill that could be covered in the PARA knowledge test and OSCE.
- A sampling grid, which outlines how an assessment should be built. It describes the
 weighting given to different areas of practice and makes sure questions are drawn from
 across the content map in a standardised way. This helps to ensure that sittings of the
 PARA are comparable with each other.

Higher education institutions (HEIs) should also use this document in conjunction with the PA curriculum to inform the design of their PA course. The curriculum sets out the high-level outcomes we expect newly qualified PAs to be able to demonstrate, and this content map sets out the specific areas we expect to be assessed, both in the PARA itself and more broadly within the PA course.

This is denoted throughout the document in tables showing the "Where assessed" columns. The columns are:

- HEI: we would expect this capability to be assessed as part of the course and must be demonstrated by all graduates.
- PARA OSCE: this capability may be assessed in the OSCE component of the PARA
- PARA KT: this capability may be assessed in the knowledge test component of the PARA

Level of assessment

The purpose of the PA registration assessment is to ensure that PAs seeking registration in the UK have met a common threshold for safe practice that is appropriate to their point of entry to the register.

The PARA content map sets out the core knowledge, skills and behaviours needed for UK practice. All PARA knowledge test and OSCE content will derive from the content map and be set a level reflecting the expectations of a newly qualified PA entering their first role in the NHS.

Structure of the content map

The Physician Associate Registration Assessment (PARA) content map is structured as follows:

- Domain 1: Professional values and behaviours
- Domain 2: Clinical capabilities
- Domain 3: Areas of clinical practice
- Domain 4: Professional knowledge
- Core procedures.

Domain 1: Professional values and behaviours

This domain refers to the values and behaviours expected of a physician associate practising in the UK, such as confidentiality, honesty, consent and patient-centredness.

Subbooding	Capability	Where assessed		
Subheading	Сараринцу	HEI	PARA OSCE	PARA KT
	Demonstrates insight by recognising and acknowledging their own personal and professional limits and by seeking help from colleagues and supervisors when necessary. This includes understanding their role as a PA and how this is communicated to patients.	√	√	
Personal and Professional	Demonstrates openness and honesty in their interactions with patients, their families and carers, colleagues, and their employers if things go wrong – known as the 'professional duty of candour'.	√		
conduct	Demonstrates awareness of the importance of their personal physical and mental wellbeing.	✓		
	Recognises and uses strategies to learn and work effectively.	✓		
	Recognises their role in contributing to the management and leadership of the health service.	✓		
	Recognises that there are differences in healthcare systems across the four nations of the UK and knows how to access information about the different systems.	✓		
Patient safety and quality improvement	Demonstrates that they can practise safely and participate in and promote activity to improve the quality and safety of patient care and clinical outcomes.	✓		
Leadership	Learns and works effectively as a team member as part of a multi-professional and multi-disciplinary team and across multiple care settings.	✓		
and teamworking	Demonstrates they work effectively and in a timely manner with colleagues in ways that best serve the interests of patients.	✓		

Cubbooding	Canability		Where assessed			
Subheading	Capability	HEI PARA OSCE		PARA KT		
Person- centred care and shared	Demonstrates the principles of person-centred care and shows they are able to work in partnership with patients, and where appropriate, their relatives, carers or other advocates.	✓	✓			
decision making	Understands the principles and values of integrated care and demonstrates when managing and preventing disease that they have considered the care of the complete person.	✓	✓			
Lifelong	Engages in their induction and orientation activities, learns from experience and feedback, and responds constructively to the outcomes of appraisals, performance reviews and assessments.	✓				
learning	Explains and demonstrates the importance of professional development and lifelong learning and demonstrates a commitment to this.					
	Demonstrates reflective practice.	✓				
Legal framework of	Safeguards vulnerable patients and escalates safeguarding concerns where appropriate.	✓	✓			
practice and healthcare ethics	Understands and behaves in accordance with legal and ethical responsibilities.	✓	✓	✓		

Domain 2: Clinical capabilities

This domain sets out the capabilities required to provide good clinical care, including the skills underpinning diagnosis, clinical management, and good communication.

The areas of clinical practice that will be assessed in the PARA sit beneath this, listed as both patient presentations and conditions.

The majority of the content tested in the PARA will be drawn from this domain.

Subheading	Capability	Where assessed		
Subfleading	Capability	HEI	OSCE	PARA KT
Communication skills	Communicates effectively with patients, their relatives, carers or other advocates, and with colleagues and members of the multidisciplinary team with whom they work.	✓	✓	✓
Diagnosis	Works collaboratively with patients and colleagues to diagnose and manage clinical presentations safely within their scope of practice. This includes being able to assess a patient's clinical presentation, undertake examinations and provide a holistic clinical summary, including health promotion where necessary.		✓	✓
	Provides care plans in collaboration with other health professionals and support from their supervisorhere necessary.	✓	√	✓
	Able to give immediate care to adults, children and young people in clinical emergencies and seeks support from their supervising doctor or healthcare professional where necessary. To the level of Immediate Life Support (ILS).	√	√	√
Clinical management	Has insight into when a situation is complex and uncertain and seeks support and recognises when a situation requires escalation.	✓	✓	✓
	Manages and monitors the efficacy and effects of medication and with appropriate supervision and advice from colleagues, reacts appropriately by adjusting medication, including stopping medication with due support, care and attention if it proves ineffective, is no longer needed or the patient wishes to stop taking it.	√	✓	✓

Subheading	Capability	Where assessed		
Subfleading Capability		HEI	OSCE	PARA KT
Clinical	Understands safe prescribing of medications.	✓	✓	✓
management (continued)	Uses information effectively and safely in a medical context, and maintains accurate, legible, contemporaneous, and comprehensive medical records.	✓	✓	

Domain 3: Areas of clinical practice

This domain is linked to Domain 2 (Clinical capabilities). It lists the patient presentations for which a newly qualified PA could reasonably be expected to assess and initiate treatment.

The list of patient presentations is:

- categorised into areas of clinical practice such as child and adolescent health, mental health and respiratory
- supplemented with a list of indicative conditions that would sit alongside these in each area of clinical practice.

ID	Area of clinical practice	ID	Area of clinical practice
1	Acute and emergency care (inc. toxicology)	10	Gastrointestinal
2	Cardiovascular	11	Infection (inc. sexually transmitted infections)
3	Child and adolescent health	12	Mental health
4	Clinical haematology	13	Musculoskeletal
5	Dermatology	14	Neurosciences
6	Ear, nose and throat (ENT)	15	Renal and urology
7	Ophthalmology	16	Respiratory
8	Obstetrics and gynaecology	17	Surgery
9	Endocrine and metabolic	18	Palliative and end of life care

Acute and emergency care (inc. toxicology)

Presentations

- abdominal pain
- anaphylaxis
- breathlessness
- burns
- cardiopulmonary arrest
- chest pain
- choking
- collapse
- facial swelling
- headache
- haemorrhage
- overdose
- palpitations
- poisoning
- seizure
- self-harm
- sepsis
- suicidal ideation/ attempts
- trauma
- unresponsiveness/coma
- wheeze

Core conditions

- acid/base disturbance
- acute coronary syndrome
- acute heart failure
- anaphylaxis
- arrythmias
- cerebrovascular events
- diabetic ketoacidosis
- drug overdose
- ectopic pregnancy
- electrolyte abnormalities
- open/closed fractures
- gastrointestinal bleeding
- intracerebral haemorrhage
- paracetamol poisoning
- venous thrombo-embolism
- pneumothorax
- pulmonary embolism
- respiratory arrest
- respiratory failure
- transient ischaemic attack

Uncommon but critical conditions

- aortic aneurysm and dissection
- cardiac tamponade
- compartment syndrome
- hypothermia
- polytrauma

Child and adolescent health **Presentations** Core conditions attention deficit hyperactivity disorder bruising crying infant autistic spectrum disorder coryza common childhood infections (RSV, cough Croup, measles, varicella) cyanosis developmental delay dysmorphic features diabetes diarrhoea epilepsy failure to thrive febrile convulsions fever Henoch-Schönlein purpura inhaled foreign body polyuria malabsorption and milk intolerances polydipsia seizure mesenteric adenitis rash non-accidental injury sepsis neglect wheeze testicular torsion injury testicular pain/swelling Uncommon but critical conditions penile abnormalities congenital or inherited disorders feeding difficulties cvstic fibrosis limp intussusception lymphadenopathy leukaemia pubertal development pyloric stenosis floppy baby vomiting

worried parent

Clinical haematology		
Presentations	Core conditions	
 abnormal bleeding bruising jaundice lower back pain lymphadenopathy neck lump night sweats 	 anaemia (inc. vitamin deficiencies) anticoagulation pancytopenia thrombocytosis sickle cell disease venous thromboembolism 	
 organomegaly rash tiredness unexplained fever weight loss 	 Uncommon but critical conditions bleeding disorders disseminated intravascular coagulation haematological malignancy neutropenic sepsis polycythaemia transfusion reaction 	

Dermatology		
Presentations	Core conditions	
 acne bites desquamation dry skin hair loss hypo and hyperpigmentation itching lumps nail abnormalities rashes pressure sores skin and subcutaneous lumps/ lesions 	 acne angioedema basal cell carcinoma bites cellulitis eczema and dermatitis lipomas fungal and mite infections psoriasis skin infection ulcers (arterial and vascular) urticaria malignant melanoma squamous cell carcinoma 	
	 Uncommon but critical conditions erthyroderma desquamation disorders inc. Steven- Johnson syndrome necrotising fasciitis 	

Ear, nose, and throat Core conditions **Presentations** acute hearing loss cerumen impaction common causes of dizziness (e.g. benign anosmia paroxysmal positional vertigo) dizziness ear discharge common causes of neck lumps including parotid swellings epistaxis ear infections facial pain oral fungal infections facial swelling hoarseness and voice change rhinitis nasal discharge sinusitis mouth ulcers including herpes simplex tonsil and pharyngeal infections including facial/neck lumps abscess sore throat Uncommon but critical conditions snoring stridor ENT malignancies swallowing problems acoustic neuroma

epiglottitis

tinnitus

vertigo

Ophthalmology			
Presentations acute loss of vision diplopia eye pain eye trauma including foreign bodies facial or periorbital swelling flashers and floaters gradual loss of vision loss of visual field red eye squint swelling to eyelid	 benign lumps of eyelid blepharitis cataracts corneal abrasion foreign body infective, inflammatory and allergic eye disorders optic neuritis periorbital and orbital cellulitis retinopathy (diabetic and hypertensive) third nerve palsy visual field defects Uncommon but critical conditions acute angle glaucoma amaurosis fugax retinal detachment retinal vascular or arterial occlusion retrobulbar haemorrhage temporal arteritis 		

Obstetrics and Gynaecology

Presentations

- abnormal cervical smear result
- abnormal vaginal discharge
- amenorrhoea
- bleeding antepartum
- bleeding postpartum
- complications of labour
- diabetes in pregnancy
- hypertension in pregnancy
- irregular periods
- lump in vagina/vulva
- menopausal problems
- normal labour
- normal pregnancy and antenatal care
- pain in early pregnancy
- painful or heavy periods
- pelvic mass
- pelvic pain
- postmenopausal bleeding
- seeking contraception
- unwanted pregnancy
- vulval itching

Core conditions

- Bartholin's cyst
- cervical abnormalities (inc abnormal cervical screening)
- dysfunctional uterine bleeding, including causes of dysmenorrhoea, amenorrhoea and menorrhagia
- gynaecological prolapse
- infections of the cervix, vagina and endometrium
- normal labour/delivery
- antenatal care and diagnosis
- menopause
- uterine and ovarian malignancy

Uncommon but critical conditions

complications of early and late pregnancy

Endocrine and metabolic Core conditions **Presentations** amenorrhoea adrenal insufficiency Cushing's syndrome excessive sweating dehydration fatigue gynecomastia diabetes mellitus and its complications disorders of the thyroid hypertension electrolyte abnormalities neck swelling hyperlipidaemia palpitations polydipsia osteoporosis polyuria Uncommon but critical conditions pubertal development sleep problems adrenal tumours weight gain diabetes insipidus weight loss disorders of the parathyroid growth hormone disorders hyperosmolar hyperglycaemic state metabolic bone disorders pituitary tumours thyroid neoplasm

Gastrointestinal	
Presentations	Core conditions
 abdominal pain abdominal swelling dysphagia change in bowel habit cough constipation diarrhoea jaundice fever hematemesis itching melaena organomegaly nausea per rectum bleeding vomiting 	 alcoholism coeliac disease constipation disorders of gut motility disorders of the gallbladder eating disorders gastro-oesophageal reflux and gastritis gastrointestinal malignancy haemorrhoids hepatitis (viral, autoimmune) inflammatory bowel disease irritable bowel syndrome liver failure (including cirrhosis) malabsorption and intolerances pancreatitis Gastro-intestinal ulcer disease
weight loss	Uncommon but critical conditions
	haemochromatosis

Infection (inc. sexual transmitted infections)

Presentations

- diarrhoea
- fever
- genital warts and ulcers
- loss of smell
- night sweats
- rash
- red eye
- sepsis syndrome
- sore throat
- swollen joint
- urethral discharge
- vaginal discharge
- vomiting
- weight loss

Core conditions

- bacterial/fungal/viral infections
- hepatitis
- infections secondary to insect bites (inc. Lyme disease)
- notifiable disease
- returning traveller (to include malaria)
- pyrexia of unknown origin
- sexually transmitted infections
- surgical site infection
- tuberculosis

Uncommon but critical conditions

- human immunodeficiency virus
- infections in immunocompromised patients
- necrotising fasciitis

Mental health

Presentations

- abnormal eating or exercise
- acute confusion
- addiction
- anxiety, phobias, obsessive behaviour
- behaviour/personality change
- delusions
- elation/elated mood
- fatigue
- hallucinations
- learning disability
- loss of libido
- low mood/affective problems
- memory loss
- mental capacity concerns
- pressure of speech
- self-harm
- sleep problems
- somatisation/medically unexplained symptoms
- substance misuse
- suicidal thoughts
- threats to harm others

Core conditions

- eating disorders
- delirium
- dementia
- emotional and child/elder abuse
- emotional and personality disorders
- mood disorders
- acute psychosis
- substance misuse and addiction

Uncommon but critical conditions

 mental health problems in pregnancy/post-partum

Musculoskeletal **Presentations** Core conditions arthritis (osteo, inflammatory) bone pain fever bursitis and tendonitis joint dislocation gout joint pain joint sprains joint swelling osteoporosis joint stiffness pathological fracture septic arthritis/joints leg swelling lower back pain simple dislocations (shoulder/elbow) simple fractures limp myalgia Uncommon but critical conditions rash red eye osteomyelitis soft tissue injury and trauma renal and metabolic bone disorders

Neurosciences			
Presentations	Core conditions		
 acute loss of vision altered sensation behaviour/ personality change diplopia dizziness dysarthria dysphagia facial weakness fasciculation gait disorders head injury headache incontinence limp weakness 	 Bell's palsy cerebrovascular accident central nervous system infections delirium dementia epilepsy essential tremor headache disorders migraine peripheral nerve injuries/palsy peripheral neuropathy radiculopathy Parkinson's disease transient ischaemic attack 		
 visual disturbance/change 	Uncommon but critical conditions		
 myalgia ptosis seizure squint transient loss of consciousness tremor urinary retention 	 cerebral and spinal cord tumours intracerebral haemorrhage motor neurone disease multiple sclerosis muscular dystrophies spinal cord compression spinal cord injuries 		

Palliative and end of life care Core conditions Presentations advanced malignancy agitation end stage chronic disease breathlessness • end of life care discussion (e.g. escalation coma itching status / DNACPR) pain frailty psychosocial concerns co-morbidity organ failure secretions organ donation Uncommon but critical conditions

Renal and urology			
Presentations	Core conditions		
 abdominal trauma dysuria erectile dysfunction fluid balance abnormalities - dehydration hypertension loin pain nocturia oliguria penile pain penile swelling peripheral oedema proteinuria testicular lump testicular pain urinary incontinence urinary retention visible and non-visible haematuria 	 acute kidney injury acute urinary retention calculi of the renal tract chronic kidney disease electrolyte abnormalities epididymitis and orchitis paraphimosis/phimosis prostate hyperplasia testicular torsion urinary tract infection (lower and upper) malignancy of the renal tract Uncommon but critical conditions nephrotic syndrome 		

Respiratory **Presentations** Core conditions asthma change in voice chest pain bronchiectasis cough • chronic obstructive pulmonary disease cyanosis cystic fibrosis fever interstitial lung disease haemoptysis infection (bacterial, viral and fungal, shortness of breath tuberculosis) snoring malignancy stridor pleural effusion wheeze pneumothorax pulmonary embolism respiratory failure Uncommon but critical conditions pulmonary hypertension empyema

Surgery			
Presentations	Core conditions		
 abdominal distention/mass abdominal pain anal pain breast lump change in bowel habit dysphagia haematuria jaundice (dark urine, pale stools) lumps in the groin nipple discharge painful, cold limb per rectum bleeding 	 appendicitis benign breast disease (abscess, infection, cysts) biliary disease bowel obstruction breast malignancy diverticulitis gastrointestinal malignancy hernia pancreatitis peri-anal disease peritonitis 		
 rectal prolapse 	Uncommon but critical conditions		
wound dischargeweight loss	 aortic aneurysm / dissection bowel ischaemia ischaemic limb intussusception major haemorrhage 		

Domain 4: Professional knowledge and skills

This domain refers to the areas of clinical and scientific knowledge that underpin clinical practice as a Physician Associate.

Subheading	Capability	Where assessed		
		HEI	PARA OSCE	PARA KT
Teaching and learning	Participates in the teaching and training of other healthcare professionals and supports less experiences colleagues.	✓		
Healthcare service and structure	Understands the structure of the NHS and their role as a healthcare professional within this.	✓		✓
Research and evidence-	Understands the application of research and audit and is able to manage information and data safely.	✓		✓
based medicine	Utilises evidence-based guidelines appropriately.	✓		✓
Health promotion	Understands the role of health promotion and illness prevention and be able to discuss this with patients.	✓	✓	✓

Core procedures in the Physician Associate Registration Assessment

This section sets out the core diagnostic, therapeutic and procedural skills that the newly qualified PA must be able to perform safely and effectively at the point of registration.

Expectations of competence

All of the skills below may be assessed in the PARA OSCE. The newly qualified PA should be competent to perform them independently, however some employers may require local induction and a period of observed practice for higher risk procedures, e.g. insertion of a nasogastric tube.

All newly qualified PAs should be competent to perform these procedures in adult patients. PAs starting work in paediatrics should have a discussion with their supervisor to identify procedures in which they might need further training for the paediatric context.

The following generic requirements apply to each procedure.

- Introduce themselves and their role
- Check the patient's identity
- Confirm that the procedure is required
- Explain the procedure to the patient and gain informed consent
- Follow precautions to reduce the risk of infections, including hand hygiene, use of PPE and safe disposal of sharps
- Label samples appropriately
- Accurately document the procedure
- Ensure confidentiality
- Interpret any results and act appropriately on them
- Arrange appropriate aftercare/monitoring

Category	Procedure		
Core clinical practice	Take baseline physiological observations (measure temperature, respiratory rate, pulse rate, blood pressure, oxygen saturations and urine output) and record and interpret appropriately		
	Perform surgical scrubbing up		
	Participate in cardiopulmonary resuscitation to the level expected in Immediate Life Support training		
Core clinical	Perform venepuncture		
practical procedures	Perform intravenous cannulation		
	Perform arterial blood gas and acid base sampling from the radial artery in adults and be able to interpret results		
	Take blood for culture of infectious organisms		
	Measure capillary blood glucose		
	Explain to a patient how to perform a peak expiratory flow, assess that it is performed adequately and interpret results.		
	Perform a urine multi dipstick test and be able to interpret results		
	Perform a 12-lead electrocardiogram and be able to interpret results		
	Take and/or instruct patients how to take a swab		
	Perform male and female urinary catheterisation		
Core therapeutic	Carry out nasogastric tube placement (In simulation only)		
procedures	Recommend and administer oxygen appropriately		
	Instruct patients in the use of devices for inhaled medication		
	Undertake basic drug dose calculations		
	Set up an infusion		
	Prepare and administer medications, including parenteral medications (subcutaneous, intramuscular, and intravenous).		
	Use local anaesthetics in different forms (topical, subcutaneous infiltration, urethral)		
	Perform wound care and closure, including suturing and dressing.		

Email: gmc@gmc-uk.org

Website: www.gmc-uk.org Telephone: 0161 923 6602

General Medical Council, 3 Hardman Street, Manchester M3 3AW

Textphone: please dial the prefix **18001** then **0161 923 6602** to use the Text Relay service

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