

Physician associate registration assessment (PARA) content map

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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.

Subheading	Capability	Where assessed		
Sublieading	Сарарінту		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 and	Learns and works effectively as a team member as part of a multi-professional and multi-disciplinary team and across multiple care settings.	~		
teamworking	Demonstrates they work effectively and in a timely manner with colleagues in ways that best serve the interests of patients.	✓		

Subheading	g Capability		Where assessed			
Subneading			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 learning	Engages in their induction and orientation activities, learns from experience and feedback, and responds constructively to the outcomes of appraisals, performance reviews and assessments.	✓				
	Explains and demonstrates the importance of professional development and lifelong learning and demonstrates a commitment to this.					
	Demonstrates reflective practice.	\checkmark				
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.

Subheading	Capability	Where assessed		
Jublicading	Саралітту		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. <i>To the level of Immediate Life Support (ILS).</i>	V	✓	V
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.	~	~	~

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

Subheading Capability		Where assessed			
Subireauling	Capability		OSCE	PARA KT	
Clinical	Understands safe prescribing of medications.		\checkmark	\checkmark	
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

polytrauma

Cardiovascular	
Presentations	Core conditions
 abdominal pain breathlessness cardiorespiratory arrest chest pain claudication cold/painless/pulseless leg collapse cough dizziness fever/night sweats headache 	 acute and chronic cardiac failure acute coronary syndrome arterial thrombosis common arrythmias hypotension hypertension infective/inflammatory cardiac conditions peripheral vascular disease valvular disease venous thrombosis
 headache heart murmurs leg swelling leg ulcers orthopnoea palpitations 	 Uncommon but critical conditions aortic aneurysm and dissection cardiac tamponade intestinal ischaemia pericardial effusion

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

Clinical haematology				
Clinical haematology Presentations abnormal bleeding bruising jaundice lower back pain lymphadenopathy	 Core conditions anaemia (inc. vitamin deficiencies) anticoagulation pancytopenia thrombocytosis sickle cell disease 			
 neck lump night sweats organomegaly rash tiredness unexplained fever weight loss 	 venous thromboembolism 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 			

Ophthalmology

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

Drecontations	Care conditions
 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 	 Core conditions 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
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Obstetrics and Gynaecology

Presentations	Core conditions		
 abnormal cervical smear result abnormal vaginal discharge amenorrhoea bleeding antepartum bleeding postpartum complications of labour diabetes in pregnancy 	 Bartholin's cyst cervical abnormalities (inc abnormal cervical screening) dysfunctional uterine bleeding, including causes of dysmenorrhoea, amenorrhoea and menorrhagia gynaecological prolapse 		
 hypertension in pregnancy irregular periods lump in vagina/vulva menopausal problems normal labour normal pregnancy and antenatal care pain in early pregnancy 	 infections of the cervix, vagina and endometrium normal labour/delivery antenatal care and diagnosis menopause uterine and ovarian malignancy 		
 painful or heavy periods 	Uncommon but critical conditions		
 pelvic mass pelvic pain postmenopausal bleeding seeking contraception unwanted pregnancy vulval itching 	 complications of early and late pregnancy 		

Endocrine and metabolic

Presentations	Core conditions		
• amenorrhoea	 adrenal insufficiency 		
 excessive sweating 	 Cushing's syndrome 		
• fatigue	• dehydration		
 gynecomastia 	 diabetes mellitus and its complications 		
 hypertension 	 disorders of the thyroid 		
 neck swelling 	 electrolyte abnormalities 		
 palpitations 	 hyperlipidaemia 		
 polydipsia 	 osteoporosis 		
polyuria			
 pubertal development 	Uncommon but critical conditions		
 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	• alcoholism	
 abdominal swelling 	 coeliac disease 	
dysphagia	 constipation 	
 change in bowel habit 	 disorders of gut motility 	
• cough	 disorders of the gallbladder 	
 constipation 	 eating disorders 	
• diarrhoea	 gastro-oesophageal reflux and gastritis 	
• jaundice	 gastrointestinal malignancy 	
• fever	haemorrhoids	
hematemesis	 hepatitis (viral, autoimmune) 	
• itching	 inflammatory bowel disease 	
• melaena	 irritable bowel syndrome 	
 organomegaly 	 liver failure (including cirrhosis) 	
• nausea	 malabsorption and intolerances 	
 per rectum bleeding 	• pancreatitis	
 vomiting 	 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
Mental health Presentations	 necrotising fasciitis Core conditions
 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 	 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
 bone pain fever joint dislocation joint pain joint swelling joint stiffness leg swelling lower back pain limp myalgia rash red eye 	 arthritis (osteo, inflammatory) bursitis and tendonitis gout joint sprains osteoporosis pathological fracture septic arthritis/joints simple dislocations (shoulder/elbow) simple fractures
 soft tissue injury and trauma 	osteomyelitisrenal 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 myalgia ptosis seizure squint transient loss of consciousness tremor urinary retention 	 Uncommon but critical conditions 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		
Presentations	Core conditions	
 agitation breathlessness coma itching pain psychosocial concerns secretions 	 advanced malignancy end stage chronic disease end of life care discussion (e.g. escalation status / DNACPR) frailty co-morbidity organ failure organ donation 	
	Uncommon but critical conditions	

PresentationsCore conditionsabdominal traumaacute kidney injurydysuriaacute kidney injurydysuriaacute urinary retentionerectile dysfunctioncalculi of the renal tractfluid balance abnormalities - dehydrationchronic kidney diseasehypertensionelectrolyte abnormalitiesloin painepididymitis and orchitisnocturiaparaphimosis/phimosisoliguriaprostate hyperplasiapenile paintesticular torsionperipheral oedemaurinary tract infection (lower and upper)proteinuriaUncommon but critical conditionstesticular painurinary incontinence
 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 dysuria acute urinary retention calculi of the renal tract chronic kidney disease electrolyte abnormalities electrolyte abnormalities epididymitis and orchitis paraphimosis/phimosis prostate hyperplasia testicular torsion urinary tract infection (lower and upper) malignancy of the renal tract
urinary retentionvisible and non-visible haematuria

Baarlana		
Respiratory Presentations	Core conditions	
 change in voice chest pain cough cyanosis fever haemoptysis shortness of breath snoring stridor wheeze 	 asthma bronchiectasis chronic obstructive pulmonary disease cystic fibrosis interstitial lung disease infection (bacterial, viral and fungal, tuberculosis) malignancy pleural effusion pneumothorax pulmonary embolism respiratory failure 	
Surgery	 Uncommon but critical conditions pulmonary hypertension empyema 	
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 rectal prolapse 	 appendicitis benign breast disease (abscess, infection, cysts) biliary disease bowel obstruction breast malignancy diverticulitis gastrointestinal malignancy hernia pancreatitis peri-anal disease peritonitis 	
wound dischargeweight loss	 Uncommon but critical conditions aortic aneurysm / dissection 	
	 bowel ischaemia ischaemic limb intussusception 	

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.

Cubbooding	Cubbooding	Where assessed			
Subheading	Capability	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.

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