

DESAIC Part II, Day 2, 30th September 2023 (Erlangen/ Germany)

To begin with, I wanted to point out that I passed the exam. As my brother in law, wrote a report about his DESAIC exam in Vienna 2022, I felt obliged to help my comrades in arms, by providing them with some useful information. The emphasis of this report is NOT to recollect the questions in full detail (which is neither possible, nor encouraged by the ESA, nor is it useful).

The exam was held on the premises of the university hospital of Erlangen, was face to face and offered in either German or English. The representatives of the ESA kept a friendly, well organized and strict regime. One gets explicitly informed that recordings of any kind are prohibited and having a mobile device with you in the exam room will lead to termination. Tea, coffee, fruit juice, water, sandwiches and biscuits were offered free of charge. Besides this, there were no special arrangements concerning lunch. The rules and procedure were as stated online. Keep in mind that every SOE consists of 5 questions. You get 10 minutes to prepare the first of the 5 questions. The other 4 questions can be completely unrelated to the previous question. It is therefore essential to have a broad knowledge and the ability to present and answer without having plenty of time to prepare. But that it is like our job at the hospital (hours of boredom, minutes of excitement, seconds of horror...).

I tried to remember the questions that were asked, but due to the number of questions I could not recollect all the questions. The thing I was quite sure about is, that it was not necessary to draw some chemical structures (good old urban legend...). SOE1: Pathomechanism of cardiac decompensation (countermeasures, good old knowledge of pathophysiology combined with some drawings did the job quite satisfactory); Plexus brachialis (anatomy, innervation of muscles, clinical use); use of EEG (waveforms, devices in anaesthesiology, Fourier transformation, limitations). SOE2: effects of drugs on their receptors (quite retarded question); adrenal gland insufficiency; muscle relaxans/ Baclofen/ Butylscopolamin, GABA receptors); TCI (compared to normal infusion regimens, compartement models). SOE3: Case report (hypotensive and tachycard patient during operation) what do you do/ potential reasons; management of intraoperative myocard ischaemia; blocks on lower limb; Patient positioning (general and special risks), risks and management of beachchair position (don't forget oesophageal stethoscope as a way of air embolism detection (not everyone has a fancy TEE or Doppler probe). SOE4: Case report (Patient comes to your hospital after suffering cardiac arrest and having ROSC) management of the patient; Case report (Hypertensive patient arrested by law enforcement at the airport -> suspected body packer, enjoyed the question especially about the drugs that could cause these symptoms) management of the patient; Interpretation of CT scan (fracture of the neck); Renal replacement therapy.

After everyone took all the 4 SOEs the staff met, there was a little speech and then the moment of truth came, when everyone got an email which gave him/ her the results. After that there was a little coming together, the opportunity to drink some sparkling wine to celebrate victory or forget defeat. It was the moment, when you could talk to the examiners. Most people who stayed did pass (about 57%), but I would recommend no matter what result you have (except you have reached 100%) to stay and use the opportunity to discuss with the examiners and get some valuable feedback.

As mentioned to the beginning, my brother in law gave me some valuable information, so that I could have a paved "autobahn/ motorway to success". I also want to give the readers insight how I prepared myself:

It is hard to put a number on how many months it is necessary to prepare oneself. Due to personal reasons (change of employer) I was unable to prepare myself specifically for this exam. I took emphasis on a broad relevant knowledge. I refused to learn ridiculous and unnecessary stuff like the chemical structure of propofol. But one cannot pass the exam without proper knowledge of anatomy, pathophysiology and physiology. How much effort has to be invested to cover those topics, strongly depends how serious you took your university studies. The Books I recommend:

- Physics, Pharmacology and Physiology for Anaesthetists Key Concepts for the FRCA (Cross, Plunkett)  
-> knowledge of the diagrams is essential, can't pass exam without this book
- Oxford Handbook of Anaesthesia (Oxford Handbooks) -> gold standard for clinical anaesthesia
- Anaesthesia secrets (Keech, Laterza)
- Dr. Podcast scripts for the primary/ final FRCA -> These 2 books are ideal for repetition, learn them inside out!
- Komplikationen in der Anästhesie/ Mehr Komplikationen in der Anästhesie -> These 2 German books are one of the few German books I would recommend, fun to read.
- Die Notfallmedizin (Ziegenfuss) -> german book about prehospital emergency medicine
- Oxford handbook of prehospital care

Of course there are other books (Viva books), and other ways of learning (youtube videos, podcasts) - > didn't use them. For situations where one cannot learn properly (on public transport, during operations) I would recommend the "onexamination app" from the BMJ (preparing for the Final FRCA).

Best of luck. And always remember it is just the beginning of the way (EDIC; FRCA). Keep calm, it is just the DESAIC not the FRCA.