OSCE REVISIONS · BY MEDREVISIONS

The Complete PLAB 2 Candidate Guide

How to use every feature of the platform to walk into your exam fully prepared — what to study, in what order, and how to get the most out of each tool.

Tailored for the PLAB 2 clinical exam · 8-minute stations · simulated patient

A practical walkthrough of the platform — from your first login to exam day.
Built around the way the platform actually works, page by page.
From the team behind MedRevisions — trusted by 30,000+ doctors since 2019.

MORE THAN PLAB 2

Dedicated candidate guides and tracks for every exam we serve — plus the MedRevisions family for theory prep.

- MLA OSCE (UKMLA CPSA) — LIVE
- AMC Clinical — LIVE
- MedRevisions — PARENT
- UKMLARevisions — THEORY
- Clinical OSCE — LIVE
- NAC OSCE — COMING SOON
- PLABRevisions — THEORY
- OSCE Revisions blog — ARTICLES

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What's inside

This guide takes you through every page on the platform, explains what each one is for, who should use it, and how to squeeze the most value from it. It ends with a single combined study strategy and the fastest realistic route to a pass.

GETTING ORIENTED

SECTION 01

The big picture

Before you click anything, understand one thing: the whole platform reshapes itself around your exam. Because you're on the PLAB 2 track, you're not looking at the entire multi-exam library. You're looking at a curated, high-yield station set chosen specifically for PLAB 2 — and the timings, mock format, and feedback are all calibrated to the real exam.

What "PLAB 2 mode" actually changes for you

- **The content you see is curated.** Notes, Frameworks, Tips, Scenarios, and the Start Here roadmap all show the curated PLAB 2 set rather than the platform's full 1,800+ multi-exam library. This is deliberate — it stops you wasting time on stations that don't come up in your exam.
- **Timing is set to the real thing.** Every station runs on the PLAB 2 clock: 8 minutes with around 1.5 minutes reading time, and a warning bell at the 2-minutes-remaining mark — the exact cue you'll hear on the day.
- **No examiner viva.** PLAB 2 is simulated-patient only. You won't be drilled with viva questions at the end (that belongs to other exam tracks), so your practice mirrors your format.
- **Mocks are built to PLAB 2 shape.** The full mock is 16 scored clinical stations plus 2 rest stations, 8 minutes each — the same circuit you'll sit.
- **You get a PLAB-only "Recently tested" rail.** Stations themed on what has come up in recent exams are surfaced just for you (more in Sections 07 and 12 — it's central to the fast track).

GOOD TO KNOW

If you ever see a "This station isn't part of the PLAB 2 library" or "Switch exam" message, that's the platform keeping you on-track — that station belongs to a different exam. You're not missing required material.

MORE THAN PLAB 2

OSCE Revisions also prepares candidates for the **MLA OSCE (UKMLA CPSA)**, **Clinical OSCE** and **AMC Clinical**, with **NAC OSCE** and **MRCS OSCE** on the way. This guide is written specifically for PLAB 2 — dedicated candidate guides for the other exams live on the website: oscerevisions.com/mla-osce · oscerevisions.com/amc-clinical · oscerevisions.com/blog.

WHO'S BEHIND THIS

OSCE Revisions is the clinical-exams sister platform of MedRevisions, which has helped **30,000+ doctors** prepare for their licensing exams **since 2019**. Every note, framework, checklist and marking rubric on the platform is built and reviewed by **practicing doctors who know the UK system and this exam** — so what you study here is what the exam actually rewards. Learn more at medrevisions.com and oscerevisions.com.

How marking works (so you study the right things)

PLAB 2 is aligned to the GMC's Clinical and Professional Skills Assessment (CPSA) and the MLA Content Map 2026. Every station is scored against three domains of roughly equal weight, and every feedback report also breaks your performance into 10 competencies. Knowing these is the single most useful thing you can do, because it tells you exactly what examiners reward.

Data Gathering & Assessment

Clinical Management

Interpersonal Skills

The three PLAB 2 marking domains carry roughly equal weight. Interpersonal Skills is the domain candidates most often underestimate — it's a full third of your mark.

DOMAIN	THE 10 COMPETENCIES YOUR FEEDBACK SCORES
Data Gathering, Technical & Assessment	Active Listening · Clinical Reasoning · Examination Skills · Interpretation of Findings
Clinical Management	Management Plan · Clear Communication · Time Management
Interpersonal Skills	Language & Fluency · Rapport & Empathy · Patient Concerns (ICE)

WHY THIS MATTERS

Every feedback report you'll ever get is organised against these exact headings. When you read a review in Section 09, you're really being told which of these 10 boxes you ticked and which you missed. Study with these in mind from day one.

GETTING ORIENTED

SECTION 02

The study loop

There are a lot of pages, but they fall into four jobs — the loop the platform is built around: Learn → Practise → Review → Simulate. Almost every candidate who struggles is doing only the first. The

ones who pass cycle through all four, again and again.

1 LEARN — get the material into your head

Reading the structured content: Start Here, Frameworks, Notes, Mind Maps, Videos, Comparisons, Exam Tips, Specialty Guides. This is where you understand what a good consultation contains and what the examiner is looking for. Most candidates over-invest here and never speak out loud.

2 PRACTISE — rehearse it out loud, under the clock

Talking through stations with the AI patient: Station Scenarios → the live Station, plus Build a Station. This is where knowledge becomes a performance. PLAB 2 is not a written exam — you pass by doing, fluently, in 8 minutes. If you're not practising out loud, you're not preparing for the actual test.

3 REVIEW — find your gaps and close them

Reading feedback and tracking trends: Session Review, Revision Notes, History, Analytics, AI Professor. Every practice station produces a detailed report. The candidates who improve fastest treat each review as a to-do list, not a grade.

4 SIMULATE — rehearse the whole exam day

Full timed Mock Exams that string stations into the real circuit. Stamina, transitions and pacing are skills of their own — you only build them by sitting the whole thing.

> **THE LOOP THAT WORKS**
>
> Learn a topic → Practise it as a live station → Review the feedback → note the 2–3 things you missed → Practise again → Simulate under full mock conditions. One full loop on a topic beats three passive read-throughs. Aim to spend at least half your total study time in PRACTISE, REVIEW and SIMULATE — not just LEARN.

GETTING ORIENTED

SECTION 03

The platform map

Here's the entire sidebar, grouped the way the platform groups it, with a one-line "what it's for" so you always know where to go.

STUDY	WHAT IT'S FOR
Dashboard	Your home base — progress, scores, and "what to do next" suggestions.

STUDY	WHAT IT'S FOR
Start Here	A guided, week-by-week roadmap through every must-know topic. Begin here.
Frameworks	The reusable consultation structures and mnemonics that fit the 8-minute clock.
Notes	The core revision library — one rich, multi-tab note per station/topic.
Videos	Curated video clips, pulled together from across all the guides.
Mind Maps	Visual, branch-out maps for seeing a topic's whole structure at once.
Exam Tips	Bite-size, high-yield pearls and traps — plus a flashcard trainer.
Comparisons	Side-by-side tables for telling similar conditions apart (differentials).

SPECIALTY GUIDES	WHAT IT'S FOR
Examinations	Step-by-step physical examination checklists.
Procedures	Step-by-step clinical procedure guides.
Prescribing	Drug details, dose calculations, prescription templates.
Data Interpretation	Systematic approaches to bloods, ECGs, ABGs, X-rays.

PRACTICE	WHAT IT'S FOR
Station Scenarios	Browse and launch practice stations with the AI patient.
Build a Station	Generate a full station for any topic or scenario you want to practise.
AI Professor	An AI tutor you can ask anything, any time.
Mock Exam	A full timed circuit that mirrors the real exam day.

MY PROGRESS	WHAT IT'S FOR
Revision Notes	AI-written notes auto-generated from your own performance.
My Notes	Your own private notebook — clips, reflections, anything you save.
History	Every past session, searchable and sortable.
Analytics	Charts and weak-area detection across all your practice.

ONE THING ABOUT ACCESS

Every paid plan unlocks the whole platform — there's no higher tier that unlocks extra features. What plans differ by is your balance of **AI Attempts**: separate pools for **voice** and **text** practice with the AI patient. A free account starts with 3 voice + 3 text attempts so you can try before subscribing, and the core frameworks are free too. See Section 10 for how to budget them.

IF YOU ONLY REMEMBER ONE THING

Start Here is your spine. It sequences everything else. When you don't know what to do next, open it and continue where you left off.

STUDY — LEARN THE MATERIAL

SECTION 04

Dashboard · Start Here · Frameworks

Dashboard

Your personalised home. It greets you, shows where you left off, and — most usefully — tells you what to do next.

- **Stat cards:** total sessions, average score and pass-rate, mock exams taken, and total practice time.
- **Progress charts** once you've done a few graded sessions: a score trend line against the pass line, a pass-rate gauge, and a strength-by-specialty radar.
- **Smart recommendation chips:** "Practise [your weakest specialty]", "Review [N] notes due", "Take a mock", and a nudge back to Frameworks if your scores suggest structure is the problem.
- **A PLAB-only "Recently tested" rail:** stations themed on recent exams, newest first, with a one-tap "Start a Recent Themes mock." One of your highest-value shortcuts.

BEST FOR / HOW TO USE IT

Everyone, every session. Open it at the start of each study session and do whatever the recommendation chips suggest. Let it point you at your weak spots rather than re-practising what you're already good at.

Start Here — your guided roadmap

A week-by-week path through every must-know topic, built only from your curated PLAB 2 set. It's the antidote to "I don't know where to begin." The roadmap is broken into weekly steps, each containing clusters of related presentations. Every cluster has one anchor note (badge: "Anchor — read fully") and a few variants ("skim only for differences").

- **Read the anchor properly.** It teaches the whole pattern. The variants are minor twists — once you know the anchor, a variant takes two minutes.
- **Use "Continue."** The "Pick up where you left off" card drops you back exactly where you stopped.
- **Use the "Practice station" pill right from the roadmap** — read the anchor, then immediately rehearse it out loud. That's the LEARN→PRACTISE loop in one place.
- **Watch the progress %.** A cluster only counts as done when the anchor and all variants are ticked — an honest measure of curriculum coverage.

PRO TIP

Don't try to finish Start Here before you start practising. Read a week's anchors, then go and practise those stations. Reading the whole roadmap with zero out-loud practice is the classic trap.

Frameworks

The reusable skeletons that make every station manageable inside 8 minutes. If Notes teach you what to say for each condition, Frameworks teach you how to run any consultation.

- **The 8-Minute Station Playbook:** a timed timeline — Opening (0:00–0:30), Presenting complaint, History, Background, Examination offer, Differential & explanation, Management, and Safety-netting & close (7:30–8:00). Internalise this clock and you'll never run out of time.
- **The "Universal Five":** PMAFTOSA, ICE, SOCRATES, CARE, and ABCDE. These five mnemonics carry you through the vast majority of stations. They're non-negotiable.

Each framework opens into structured sections (Consultation Flow, Key Questions, Differentials & Red Flags, Examination, Management, Safety Netting, Interpersonal Skills, Examiner Checklist, Quick Review). The Universal Five and the playbook starters are free for every account; a subscription unlocks the full framework library across consultation, communication, ethics, prescribing, teaching and emergency stations.

BEST FOR / FAST-TRACK NOTE

Absolutely every candidate, early and often. The frameworks are the foundation everything else sits on. Know the 8-minute playbook cold before you do anything else.

STUDY — LEARN THE MATERIAL

SECTION 05

Notes · Videos · Mind Maps

Notes — the core revision engine

This is the heart of the platform. Each note is a complete station guide written and reviewed by practicing doctors, built with multiple tabs so you can use the same note in different ways depending on how much time you have.

TAB	WHAT IT GIVES YOU	USE IT WHEN…
Full Guide	The complete teaching note: Overview, Candidate Brief, Consultation Flow, Key Questions, Differentials, Examination, Management, Written Prescription, Safety Netting and IPS points — with inline tips and a Key-Points summary card.	You're learning the topic for the first time.
Quick Review	The note distilled into cards: Key Differentials, Must-Ask Questions, Core Management, Safety Netting, IPS Tips, Examiner Pitfalls.	You already know it and want a fast refresh.
Examiner Checklist	An interactive, tickable mark sheet with a progress bar — literally the boxes an examiner ticks.	Self-testing from memory.
Exam Script	A worked, turn-by-turn model dialogue of the station.	You want to hear what a strong consultation sounds like.
Station Prep	Key points, branching tips, exam tips, and likely patient concerns in one panel.	The few minutes before you launch the live station.
Videos	Curated clips relevant to that specific station.	You learn better by watching.

Powerful note features candidates miss

- **"Practice Station" button** — jump straight from reading the note to rehearsing it live. Read → speak, in one click.
- **"Ask Professor" button** — open the AI tutor pre-loaded with that note's context.
- **Spaced repetition** — instead of just "Mark as Read," rate a note Again / Hard / Good / Easy. The platform then resurfaces it at the right time in a "Due for review" card and on your Dashboard. The single best way to make revision stick.

- **"Recently tested" badge** — when a note carries this badge, it reflects a recent exam theme. Prioritise these.
- **"Save to my notes"** — clip any section into your private notebook (Section 10).
- **Search & cluster view** — search by topic, system, or keyword, and switch to a "Clusters" view that groups related notes.

HOW TO ACTUALLY USE A NOTE

First pass: read the Full Guide. Second pass: close it and work through the Examiner Checklist from memory — whatever you can't recall is your revision list. Before practising: skim Station Prep. After practising: come back to Quick Review to lock it in, and rate it for spaced repetition.

Videos

Every curated clip from across the platform, in one searchable place, filtered by station type. Note the default filter opens on "Examinations" — tap "All" to see everything. Best for visual learners and for examination/procedure technique you need to see, not read.

Mind Maps

Interactive maps — expand branches, click nodes for detail. Great for seeing how a whole topic hangs together and for last-minute big-picture revision. An "Essentials" mode lets you filter by tier (T1 Must-Know → T3 Advanced) so you can focus on the highest-yield branches first.

BEST FOR

Notes are for everyone and are where you'll spend most LEARN time. Videos suit visual learners and exam/procedure technique. Mind Maps suit big-picture thinkers and final-week consolidation.

STUDY — LEARN THE MATERIAL

SECTION 06

Exam Tips · Comparisons · Specialty Guides

Exam Tips

A searchable library of short, high-yield pearls and traps drawn from every note — each tagged High/Medium/Low yield and linked to its source, plus a daily "Tip of the day." Pearl collections group

tips into rounds — including a free "PLAB traps" collection of exactly the avoidable mistakes that cost marks.

Study mode is an Anki-style flashcard trainer: press Space to reveal, then rate Again / Got it. Filter by yield or system, shuffle, and grind through them. Perfect for dead time — commutes, queues, the days before the exam.

Comparisons

Side-by-side tables showing how similar conditions differ across the features that matter — Site, Character, Red Flags, Key Investigation, Management. Built for the moment that wins or loses data-gathering marks: telling a dangerous differential apart from a benign one. Each cell can link straight to the full note, so a comparison doubles as a launchpad into deeper study.

BEST FOR

Tips suit everyone for spare-moment revision and for plugging the small gaps that separate a pass from a fail. Comparisons suit candidates who muddle similar presentations (chest pain, abdominal pain, headache) — i.e. most people.

Specialty Guides — the technical skill stations

Four focused libraries for the stations that test a specific technical skill rather than a conversation. Don't neglect these — they're highly scoreable because they reward a learnable, repeatable routine.

GUIDE	WHAT IT COVERS	BEST FOR
Examinations	Step-by-step physical examination checklists for every exam station.	Nailing a slick, complete examination routine.
Procedures	Step-by-step guides for clinical procedures tested in OSCEs.	Procedure stations and safe technique.
Prescribing	Drug details, dose calculations, and prescription chart templates.	Prescribing stations — a common, very scoreable format.
Data Interpretation	Systematic approaches to bloods, ECGs, ABGs and X-rays.	Any station that hands you a result to interpret.

PRO TIP

For exam and procedure stations, learn the routine until it's automatic, then practise it as a live station so you can narrate it smoothly under time pressure. The marks here are for completeness and safety — a memorised checklist is gold.

PRACTISE — REHEARSE OUT LOUD

SECTION 07

Station Scenarios · The live station · Build a Station

This is where preparation becomes performance. Reading notes is necessary but not sufficient — PLAB 2 is passed out loud, against the clock. Spend serious time here.

Station Scenarios — the practice browser

Browse your curated PLAB 2 stations by specialty, station type (history, counselling, presenting complaint, acute/emergency, ethics, teaching, procedure, prescribing), or difficulty. Each card lets you launch the station, jump to its Notes, or "Ask Prof."

- **"Recent themes" filter** — toggle it (or use the Dashboard's "View all recent themes") to see only stations themed on what's been coming up in recent exams. This is your highest-yield practice list.
- **Difficulty stars** — start at 1–2 stars to build fluency, then push to 4–5 as the exam nears.

The live station — how a run works

This is the AI patient encounter. Treat every run like the real thing.

- **Reading phase:** you get the candidate brief and a countdown reading timer (about 1.5 min on PLAB 2). Plan your structure before you start talking. You can pause the reading timer for longer with the brief.
- **Voice or Text mode:** Voice mirrors the real exam — you actually rehearse speaking aloud — and uses one **voice** AI Attempt. Text mode uses one **text** AI Attempt and is the cheaper way to drill content and structure (text attempts go further; see Section 10), so save voice attempts for full spoken run-throughs.
- **"Show perfect script"** reveals a model consultation while the clock waits. Use it as a template to learn from, not a script to memorise word-for-word.

During the station

- A live timer runs; a bell warns you at 2 minutes remaining — the real PLAB 2 cue.
- Special stations surface the right tools automatically: an observations chart for acute stations, a prescription/drug chart you can actually fill in for prescribing stations, and dismissible clinical findings cards when results are handed to you.
- You can Mute or Pause if needed (pause freezes the clock and the patient can't hear you), then End the station when done.

DON'T DO THIS

Don't lean on "Show perfect script" every run. Read it once or twice to understand the shape of a great consultation, then practise without it. The exam has no script — your fluency has to be yours.

"BUT THE REAL EXAM HAS A HUMAN ACTOR…"

True — and everything the examiner marks is still produced by **you speaking**. Structure, fluency, signposting, empathy phrasing, time management: these are speaker-side skills, and they only improve with spoken repetition. The AI patient adapts to what you ask, pushes back, and gets emotional — exactly the muscle you need for a live role-player. Candidates who arrive having done dozens of full spoken run-throughs consistently report the real actor felt **easier** than practice: the hard part — thinking, structuring and speaking fluently under a clock — was already automatic.

Build a Station

Create any station you want to practise. Pick any topic, presentation, or scenario and the platform generates a complete station for it — brief, notes, model script, and marking scheme — saved to your library. Give it a title, optionally a specialty/type and a short brief, choose the PLAB 2 (8-minute) format, and it builds. Best for practising new scenarios beyond the curated set. Once built, run it like any other station, in voice or text.

PRACTISE — REHEARSE OUT LOUD

SECTION 08

AI Professor · Mock Exam

AI Professor — your on-demand tutor

A chat tutor ("Professor OSCE") you can ask anything: clinical questions, exam technique, "why did I lose marks here." It's text-based and does not use voice attempts — lean on it freely.

The trick most candidates miss is context. The Professor is far more useful when launched from something, because it loads that context automatically:

- From a note → "Revision Note" mode — ask follow-ups on what you're reading.
- From a scenario → "Station Preparation" mode — e.g. "What red flags must I not miss here?"
- From a session review → "Post-Session Debrief" mode — e.g. "Where exactly did I lose marks and how do I fix it?"

BEST FOR

Everyone, especially after a station. Launch it straight from your review with "Discuss with Professor" and turn vague feedback into a concrete fix.

Mock Exam — exam day, rehearsed

A full timed circuit that mirrors the real thing. The PLAB 2 format is fixed and authentic: 16 scored clinical stations plus 2 rest stations, 8 minutes each with ~1.5 min reading — just like the real exam. The real day runs around 3 hours; the mock compresses the rest periods, so it takes about 2.5 hours.

- **Stamina is a skill.** Performing for 2.5 hours is completely different from one station at a time. You can only build that by doing it.
- **It rehearses the transitions** — reading, the bell, moving on, resetting your head for a fresh patient. These cost marks if they're unfamiliar.
- **"Recent Themes Mocks"** assemble circuits from the most recently tested stations (Mock 1 = newest). The closest thing to a preview of your exam — see Section 12.
- You get a full grading report across the whole circuit afterwards.

WHEN TO START MOCKS

Don't wait until you "feel ready" — you never will. Do your first full mock once you've covered the core frameworks and a decent slice of Start Here, even if you score badly. The report will redirect your study far better than guessing. Then do a full mock roughly weekly, ramping to 2–3 in the final fortnight.

PRACTISE — REHEARSE OUT LOUD

SECTION 09

Session Review — reading feedback properly

Moments after every station ends, you get a detailed review, graded against rubrics calibrated by doctors who know how PLAB 2 is marked. This page is where the real improvement happens — if you read it actively. Here's what's on it and how to use each part.

SECTION	WHAT IT TELLS YOU & HOW TO USE IT
Overall score + Pass/Fail	Your headline percentage with a colour-coded ring. Note it, but don't dwell — the detail below is what changes your next run.

SECTION	WHAT IT TELLS YOU & HOW TO USE IT
Sub-domain Scorecard	The 10 competencies from Section 01, each marked met / not-met with a comment. This is your to-do list. Every "not met" is a specific, fixable behaviour.
Communication style	A read on Empathy, Clarity, Interruption risk, and Structure risk. Low clarity usually means "signpost more"; high structure risk means "slow down and follow your framework."
Domain breakdown	Each of the three domains with its points. Expand to see per-item scores with an "Issue:" and an "Ideal:" line — the gap between what you did and what was wanted.
Examiner Feedback	A written paragraph plus explicit Strengths and Areas for Improvement lists. Read the improvements as actions for next time.
Personalised Revision Note	An AI-written note generated from this performance — "what you missed," the correct content, and practice phrases. Save it.
Conversation Transcript	The full back-and-forth. Re-read your own words — you'll spot where you rambled, interrupted, or missed a cue.

The 5-minute review routine that compounds

1. Note your score and which domain was weakest.
2. Read the Sub-domain Scorecard and write down every "not met."
3. Skim the transcript for the moment each one happened.
4. Tap "Discuss with Professor" and ask how to fix the biggest one.
5. Save the takeaways (or the Personalised Revision Note) to My Notes, then "Retry station" within a day or two.

> **THE MISTAKE TO AVOID**
>
> Glancing at the percentage and moving on. The score is the least useful thing on the page. The "not met" items and the "Issue/Ideal" lines are where your next 10% comes from.

TRACK — MEASURE AND ADJUST

SECTION 10

Track your progress

Revision Notes

AI-written notes auto-generated after each station, tailored to how you performed. They even scale in depth to your level — badged Foundation → Developing → Competent → Distinction. Filter by specialty or pass/fail. Your personal, performance-driven revision pile.

My Notes

Your private notebook. Clip sections from any note, jot reflections, organise into notebooks (folders), tag, pin, and colour-code. You can create a note pre-linked to a session, so post-station reflections live next to the feedback that prompted them.

History

Every past session and mock, with score, pass/fail, date, duration and specialty. Search and sort by date or score. Use it to find a station to retry, or to watch your scores climb over time.

Analytics

The bird's-eye view: average score, pass-rate, trend, best score, a rolling pass-rate line, performance by station type, and — most importantly — automatic "Weak Areas — Focus Here" detection. Let it tell you what to practise next.

HOW THESE WORK TOGETHER

Analytics tells you what's weak → you practise it via Station Scenarios → the Review generates a Revision Note → you clip the key fix into My Notes → History shows the score improving. That's the full feedback loop.

Your plan & AI Attempts

Every plan unlocks the entire platform. All notes, frameworks, mind maps, tips, comparisons, specialty guides, Mock Exams, Build a Station, personalised Revision Notes and the complete station bank are included with any subscription — there is no higher tier that unlocks extra features. And you're not betting on an unknown: OSCE Revisions comes from MedRevisions, which has supported 30,000+ doctors through their licensing exams since 2019. Plans are a one-time payment (not a recurring charge that auto-renews) and differ only in how many AI Attempts they include.

AI Attempts come in two pools: **voice** and **text**. A live voice station uses one voice attempt; a text-mode station uses one text attempt. A free account starts with 3 voice + 3 text. On the standard plans your text allowance is larger than your voice allowance (text is typically twice the voice count), and longer plans come with more of both; you can top up either pool at any time with add-on packs. Current plans and attempt counts are always shown on the Subscription page.

BUDGET YOUR ATTEMPTS

Use your more-plentiful text attempts to learn content, rehearse structure, and warm up. Save your voice attempts for full spoken run-throughs and for retrying stations you failed — the practice that most needs real, out-loud fluency.

PUTTING IT TOGETHER

SECTION 11

The combined master strategy

Here's how all of it fits into one coherent plan. Adapt the timeline to how long you have, but keep the sequence and the balance — most failures come from too much reading and too little speaking.

TIME TO EXAM	DAILY COMMITMENT	YOUR ROUTE
12+ weeks	~2–3 h/day	The full strategy below, at a comfortable pace.
8 weeks	~3–4 h/day	The full strategy, with Build-coverage compressed — lean harder on anchors, skim variants faster.
4–6 weeks	~4–6 h/day	Skip to Section 12: the three pillars, practised to mastery.
Under 4 weeks	Maximum you can sustain	Section 12 only — frameworks, recent themes, and a mock every 2–3 days. Be honest with yourself about whether to postpone.

The curated PLAB 2 set is finite and completable — Start Here's anchor-and-variants pattern carries the curriculum, and everything else is a variant of one of them.

1 Foundation (first week or so)

Master the Frameworks, especially the 8-Minute Playbook and the Universal Five (PMAFTOSA, ICE, SOCRATES, CARE, ABCDE). Open Start Here and read the first week's anchor notes. Do one practice station right away — even a bad one — to feel the format. Don't wait until you're "ready."

2 Build coverage (the main stretch)

Work through Start Here week by week. For each cluster: read the anchor (Full Guide), self-test on the Examiner Checklist, then practise it live. After each run, do the 5-minute review routine (Section 09). Rate notes for spaced repetition so they come back at the right time. Use Comparisons and Specialty Guides to sharpen differentials and technical stations.

3 Pressure-test (from the midpoint onward)

Start doing full Mock Exams — roughly weekly. Let Analytics point you to weak areas and practise those specifically (use Build a Station to create any extra scenario you want more reps on). Lean on the "Recently tested" rail and Recent Themes stations. Keep clipping fixes into My Notes.

4 Final fortnight (taper to performance)

Shift the balance hard toward practice and mocks (2–3 full mocks), prioritising Recent Themes. Revise from Quick Review tabs, Mind Maps (Essentials/T1), and Tips Study mode in spare moments. Re-run any station you've ever failed. Sleep, and trust the reps.

> THE BALANCE RULE
>
> If you're spending more than half your time reading, you're preparing for the wrong exam. PLAB 2 rewards fluent performance. Read enough to know what to say — then spend the rest of your time saying it out loud and fixing what the reviews flag.

PUTTING IT TOGETHER

SECTION 12

The shortest realistic path to a pass

Short on time? There's a lean route that, based on how past candidates have fared, gives you a strong chance of passing — provided you genuinely master each piece rather than skim it. It rests on three pillars.

Pillar 1 — Master the Frameworks completely

Know the 8-Minute Playbook so well you could run it in your sleep, plus the Universal Five mnemonics and the interpersonal-skills behaviours. This alone makes every station navigable — you'll always have a structure to fall back on, which protects your Data-Gathering and Clinical-Management marks even on a topic you're shaky on.

Pillar 2 — Drill the Recent Themed stations

Work systematically through the "Recently tested" rail (Dashboard) and the Recent themes filter in Station Scenarios. These are themed on what has actually been appearing in recent exams, so they're the highest-probability content you can practise. For each one: read the note, practise it live, review, retry until fluent.

Pillar 3 — Practise the Recent Themes Mocks until navigation is automatic

Run the Recent Themes Mocks (Mock 1 is the newest circuit) repeatedly. The goal isn't just content — it's navigating the format smoothly: managing the clock, the bell, reading time, and resetting between patients without panic.

THE LEAN WEEKLY RHYTHM

(1) Frameworks until automatic. (2) Each day: 3–5 Recent Themed stations — read, speak, review, retry. (3) Twice a week: a full Recent Themes Mock, then act on the report. (4) Use the Professor and Quick-Review tabs to patch gaps. Repeat. This is deliberately narrow — its power comes from repetition and review, not coverage.

HONEST CAVEAT

"Shortest" means most efficient, not effortless. The path works because the three pillars are practised to mastery and every review is acted on. If you have time, the fuller strategy in Section 11 is safer — but if time is tight, these three pillars are where to put every hour.

RESITTING?

A failed attempt is almost never a general failure — it's domain-specific, and your GMC result letter already tells you where. Its feedback statements (listening, rapport, examination, management, time, language…) map almost one-to-one onto the 10 competencies this platform scores on every single station. So don't restart from zero: run one full mock as a diagnostic, open Analytics, and drill the exact competencies your GMC letter flagged. Resitters who do this are often the fastest candidates to a pass — the gap was always narrower than it felt.

Am I ready? The green lights

No checklist can guarantee a pass — but candidates who can tick all five of these walk in genuinely exam-ready.

1. **Two to three consecutive full mocks at or above the pass line** — including at least one Recent Themes Mock — without pausing or retries.
2. **No lagging domain.** Analytics shows all three domains moving together; no competency is "not met" across your last several sessions.
3. **Frameworks are automatic.** You can run the 8-Minute Playbook and the Universal Five from memory, out loud, without notes.
4. **Anchors done, checklists passing.** Start Here anchors complete, and you can clear the Examiner Checklist from memory on the stations you once found hardest.

5. **The format feels boring.** Reading time, the bell, the reset between patients — none of it spikes your pulse any more. That's what "ready" feels like.

PUTTING IT TOGETHER

SECTION 13

One-page quick reference

"I want to..." → go here

IF YOU WANT TO...	GO TO
Know what to do next	Dashboard → recommendation chips
Start from scratch / follow a plan	Start Here
Learn how to run any consultation in 8 min	Frameworks → the Playbook
Learn a specific condition or station	Notes → Full Guide
Quickly refresh something you know	Notes → Quick Review
Test yourself from memory	Notes → Examiner Checklist
Hear what a great consultation sounds like	Notes → Exam Script (or "Show perfect script")
Tell similar conditions apart	Comparisons
Practise out loud, one station	Station Scenarios → the live station
Practise what's been coming up recently	"Recently tested" rail / Recent themes filter
Rehearse the full exam day	Mock Exam (esp. Recent Themes Mocks)
Practise any scenario you want (incl. new ones)	Build a Station
Ask a question / debrief a station	AI Professor
Understand where you lost marks	Session Review → Sub-domain Scorecard
Find your weak areas	Analytics → "Weak Areas — Focus Here"
Save a fix for later	My Notes / rate a note for spaced repetition

The numbers that matter for PLAB 2

- **Per station:** 8 minutes + ~1.5 min reading. Bell at 2 min remaining.
- **Full exam:** 16 scored clinical stations + 2 rest stations, ~3 hours (mock: ~2.5).
- **Marking:** 3 roughly-equal domains → 10 sub-domain competencies.
- **Format:** simulated patient only — no examiner viva.
- **Access:** every plan unlocks the whole platform; plans differ only by AI Attempts (voice + text). Free = 3 voice + 3 text.

The five habits of candidates who pass

1. They speak more than they read. Over half their time is live practice and review.
2. They act on every review. Each "not met" becomes a fix and a retry.
3. They use spaced repetition so nothing learned slips away.
4. They do full mocks early and often to build stamina and rhythm.
5. They prioritise recent themes — highest-probability content, practised to fluency.

> **IN ONE BREATH**
>
> Let Start Here sequence your learning, master the Frameworks, spend most of your time practising live and acting on reviews, and in the final stretch drill recent themed stations and mocks until the format feels effortless. Do that, and you walk in ready.

START HERE · LINKS WORTH KEEPING

Start free on OSCE Revisions `oscerevisions.com/signup?exam=PLAB2`

3 voice + 3 text AI Attempts — no card required.

PLAB 2 landing & study plans `oscerevisions.com/plab-2`

Exam overview, coverage and timetables.

PLAB 2 study plans (4 / 8 / 12 week) `oscerevisions.com/plab-2/study-plans`

How to pass PLAB 2 `oscerevisions.com/blog/how-to-pass-plab-2`

PLAB 2 marking domains `oscerevisions.com/blog/plab-2-marking-domains`

PLAB 2 mock exam guide `oscerevisions.com/blog/plab-2-mock-exam`

MLA OSCE (UKMLA CPSA) `oscerevisions.com/mla-osce`

Sister OSCE track for UK graduates.

Complete MLA OSCE Candidate Guide (PDF)

`oscerevisions.com/guides/osce-revisions-ukmla-candidate-guide.pdf`

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AMC Clinical `oscerevisions.com/amc-clinical`

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Complete AMC Clinical Candidate Guide (PDF)

`oscerevisions.com/guides/osce-revisions-amc-candidate-guide.pdf`

Australian guidelines, 20-station circuit, ≥9/14 pass.

Clinical OSCE Candidate Guide (PDF)

`oscerevisions.com/guides/osce-revisions-clinical-osce-candidate-guide.pdf`

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