

### Self-Assessment Guidance 2026

The 2026 National Urology ST3 self-assessment scoring process will involve the prior publication of the scoring mechanism. Candidates will self-score as part of their application, and the verification of candidate's self-assessment scores will occur between applications closing and the interview date. The process is outlined in more detail below with further details available in the 2026 National Urology Handbook.

1. Information regarding the portfolio station and self-assessment will be published in advance of the interviews via this document, including:-
  - Structure of the station/interview
  - Questions
  - Marking scheme
  - Points available
2. Applicants will give themselves a self-assessment score as part of their application form. This will involve answering a series of multiple-choice questions. Details of the questions are available later in this document (*questions may appear slightly differently on the application form*).
3. All scores must only be based upon elements that have been completed and awarded by the closing date of applications on the 11<sup>th</sup> December 2025. Elements completed between the application closing date and the interview will not be accepted during self-assessment validation.
4. Candidates will be given a 7 day window to upload evidence to substantiate the answers given during Self-assessment. This evidence must be provided as a single PDF file per question, applicants will therefore be required to combine several documents into one PDF if supplying more than 1 piece of evidence for a single question. There is a 'Urology Self-Assessment Checklist 2026' available from the download section on the [National Urology recruitment webpage](#) for applicants to use whilst preparing their documents. More information is available in the 2026 National Urology Handbook, and full details of the self-assessment validation process will be supplied in to applicants in due course.
5. The presentation and quality of your evidence will be assessed and scored as part of the application process. Evidence for each question should include a title page summarising the evidence provided. This title page should include a numbered list of pages and the relevance of the contents of each page. Marks will be deducted for incorrectly or poorly presented evidence. This will be assessed during validation and the SDG (Selection Design Group) panel decision is final.
6. Your self-assessment evidence will be validated and scored online, applicants will then be provided with feedback containing details of any adjusted scores. Applicants will then have 72 hours to appeal their score, any appeals will be assessed by an appeals panel and their decision will be final.

#### Please note:-

- If a candidate's self-assessment evidence is not provided in the specified format a score of zero will be awarded for that element of the portfolio.
- Your Self-assessment is scored based on the evidence provided this year. Achievement of a particular score in a previous year does not guarantee that the same score will be achieved in the current year.
- Candidates considered to have provided documents that are inaccurate, falsified, or contain private or confidential patient details will have evidence taken and be referred to a scrutiny panel. The scrutiny panel will be conducted by NHS England North East and Yorkshire and the candidate will

be offered an opportunity to explain their actions and provide supporting documentation. The result of the scrutiny panel may lead to one or more of, but not limited to, the following.

- Candidate removed from the current round of National Urology recruitment.
- Candidate being reported to the GMC.
- Candidates current Trust and/or NHS England being notified.

### Marking:

Only one bullet point/response for each question can contribute to the score.

#### **Postgraduate degrees and qualifications in medical science awarded subsequent to your primary medical degree**

Where a thesis of significant length (minimum of 2 years of full time study equivalent), contribution to research can be demonstrated and an oral examination of the thesis can be demonstrated. It is important to recognise the UK degrees carry significant component of research and non-UK degrees need to demonstrate the equivalence. A degree certificate alone without significant research will not be awarded the marks

**\* EXCLUSIONS** eg MD (where basic medical degrees equivalent to MB BS) and MS (where not requiring completion of a thesis). Non-UK higher degrees should be stand-alone qualifications, not integral to primary medical qualification, with regulations equivalent to the relevant UK qualifications. Intercalated degrees during the undergraduate courses ( eg: BSc or automatic MA with primary qualification) do not attract any points.

1) How many of the following postgraduate qualifications have you been awarded? **Peer reviewed theses in medical science** eg :- DPhil, PhD, MD, MCh, MS

- none - 0 points
- one or more - 6 points

2) How many of the following postgraduate qualifications do you have? **Peer reviewed theses in medical science** which have been **submitted, but not yet awarded**. eg :- DPhil, PhD, MD, MCh, MS (Thesis must be submitted within one year of award of a higher degree, along with evidence of progress being made towards this).

- none - 0 points
- one or more - 2 points

3) How many of the following postgraduate **qualifications** do you have? **MSc or equivalent Post graduate degree without orally examined thesis**

- none - 0 points
- one or more - 3 points

### Paper / Publications

**'Formally accepted' papers and video papers to count, (but NOT abstracts)**  
**(Acceptance letters or papers/book chapters to be uploaded as evidence).**

Definition of peer reviewed publication = "Manuscripts (articles) which are evaluated by at least one subject specialist in addition to the editor before being accepted for publication". The paper must have a PMID number or equivalence. **Equivalence will be assessed during validation and the SDG panel decision is final. If it is in a Urology journal, we accept those without PMID number provided it is listed in Urology Green list. Here is the list of the journals -**  
<https://urologygreenlist.wordpress.com> **A non-Urology publication without PMID number will be awarded credit at the discretion of validating panel members depending on the robustness of the journal's peer review process.**

**Please Note:** Evidence for questions 4,5 and 6 must be presented as a copy of the abstract clearly identifying the authors name or a screen shot of the PubMed record, similarly, clearly identifying the authors name.

**Please note,** Books must have an ISBN number (books related to exam revision or interview preparation courses will not count).No publications may count in more than one category

**4) Since leaving medical school, how many first author peer reviewed papers or first author book chapters (case reports are not counted here) have you had published**

- none - 0 points
- one - 2 points
- two - 4 points
- three or more - 6 points

Where max points achieved in this category additional papers may be counted as 'Non-first author peer reviewed' in Question 5

**5) Since leaving medical school how many non-first author peer reviewed papers or first author case reports have you had published? Co-authors and collaborative authors are considered as non-first authors.**

- none - 0 points
- one - 1 points
- two or more - 2 points

Where max points achieved in this category additional papers may be counted as 'Non-peer reviewed papers' in Question 6

**6) Since leaving medical school how many non-first author case reports or Non- peer reviewed paper/ e-publications/podcasts /letters to editors within urology have you had published?**

- none - 0 points
- one or more - 1 point

### Audits and Quality Improvement Projects

(Please provide supervisor confirmation of your role using the standardised national selection audit/QIP supervisor form, only those submitted on version “National\_urology\_st3\_audit\_supervisor\_form\_V3” will be accepted)

7) Since leaving medical school, how many

‘closed loop’ / 2 cycle audits / QIPs, on separate topics, where you were the **primary auditor** (ie initiated, designed and completed the audit/QIP) have you completed?

- none - 0 points
- one - 2 points
- two or more - 4 points

Where max points achieved in this category additional audits/QIPs may be counted as ‘single cycles of audit’ in Question 9

8) How many of the ‘closed loop’ / 2 cycle audits / QIPs awarded points in question 7 were **Urology based**.

**Please note;** Audits must be on a Urological topic. Audits of generic topics (such as DVT prophylaxis, antibiotic prescribing etc) conducted in a Urology setting will not count.

- none - 0 points
- one - 1 point
- two or more - 2 points

9) Since leaving medical school, how many **single cycles of audit**, on separate topics, where you were the **primary auditor** (ie initiated, designed and completed the audit) have you completed?

- none - 0 points
- one - 1 point
- two or more - 2 points

10) How many of the single cycles of audit awarded points in question 9 were Urology based.

**Please note;** Audits must be on a Urological topic. Audits of generic topics (such as DVT prophylaxis, antibiotic prescribing etc) conducted in a Urology setting will not count.

- none - 0 points
- one - 1 point
- two or more - 2 points

### Presentations since medical school

(Projects submitted as evidence in the Audits section, cannot be counted here as well.)

Examples of International / National meetings: EAU, BAUS and BAUS section meetings, AUA, WCE, SIU, ISU (Irish) RSM Urology2020 onwards

Examples of Regional Meetings: East of England, South Thames, Welsh, Scottish, RSM Urology pre 2020

(Both in person and virtual presentations will be accepted)

(Please supply abstracts and conference/meeting programmes as evidence)

**Please note,** A moderated poster session is where the author must be present during the entire session to allow the author to explain and illustrate his/her concepts, techniques or research findings. It may or may not have a short presentation component in some conferences depending on their format. There usually is a panel of moderators. An unmoderated poster is where the poster is displayed but the authors are not required to be present.

**1st author poster presentation  
since medical school :**

11) How many times have you given a 1st author unmoderated poster presentation at a national / international meeting, since medical school?

- none - 0 points
- once or more - 2 points

Where max points have been achieved in this category, additional poster presentations may be considered as 'regional' and as such can be used in Question 12)

12) How many times have you given a 1st author unmoderated poster presentation at a regional meeting, since medical school?

- none - 0 points
- once or more - 1 points

**1st author podium/moderated poster presentation: since medical school  
(evidence provided must contain wording stating "Podium", "Moderated poster" or "Equivalent" to attract points)**

13) How many times have you given a 1st author **podium/moderated poster** presentation at a national / international meeting, since medical school?

- none - 0 points
- once - 3 points
- twice or more - 5 points

Where max points achieved in this category additional presentations may be counted as 'regional' in Question 14

14) How many times have you given a 1st author **podium/moderated poster** presentation at a regional meeting, since medical school?

(exclude 'in house' hospital meetings)

- none - 0 points
- once - 1 points
- twice or more - 2 points

### Postgraduate Medical Teaching / Experience / qualifications

(Please supply relevant evidence)

**Please note,** A course (to attract 3-4 points in Question 15) must be for a minimum of 4 hours or carry educational content equivalent of 4 CPD points. It excludes departmental teaching. A document explaining the role of the trainee (by Educational or Clinical Supervisor or Director of Medical Education) as a principal organiser is required, and must state the length of the course or CPD points

15) Have you been involved in medical teaching / training delivery?

- None - 0 points
- Informal / planned, but irregular / sporadic teaching activities (less often than monthly) - 1 point
- Informal / planned and regular teaching activities (at least monthly) - 2 points
- by contributing to a relevant course as faculty member - 3 points
- As principal organiser of a relevant course (which has already run by close of applications) - 4 points

16) Do you have a qualification in medical education? Non-Medical Qualifications are not accepted.

**Please note:-** Training the trainer courses or certificates in education courses must be medically focussed and must contain a minimum of 2 hours of medically focussed training. Examples would include courses provided by the UK medical colleges.

- None - 0 points
- Training the trainers' certificate or certificate in education (gained since foundation) -1 point
- Modular diploma in education (gained since foundation) -2 points
- MSc or equivalent in clinical education (gained since foundation) (If not already included in question 3) - 3 points

### Medical postgraduate prizes

(Please supply relevant evidence)

17) Have you been awarded any **medical postgraduate** (ie gained after medical school) 1st **prizes** (including research awards and travelling fellowships)?

(exclude best presentation prizes)

- none - 0 points
- one - 1 points
- two or more - 2 points

18) Have you been awarded any (first place) **'best presentation' prizes**?

- No - 0 points
- Yes from a regional meeting - 1 point
- Yes from a national / international meeting - 3 points

### Surgical logbook

Evidence of having performed the following Urological procedures with evidence of WBA's (work based assessments). WBAs must be validated by a consultant level or above, supervisor within the last 5 years.

The evidence for this must be uploaded in WBA format, with a separate individual validated WBA for each procedure. . Logbook entries and WBA summary sheets ARE NO LONGER ACCEPTABLE

19) What is the highest level Scrotal procedure that you have performed?

eg. excision epididymal cyst / hydrocele excision / scrotal exploration.

- None - 0 Points
- Level 1 - 0 Points
- Level 2 - 1 Point
- Level 3 (including 1 WBA) - 2 points
- Level 3 (including 2 WBAs) - 3 Points
- Level 4 (including 1 WBA) - 4 Points
- Level 4 (including 2 WBAs) - 5 Points

20) What is the highest level Cystoscopy (any) procedure that you have performed?

- None - 0 Points
- Level 1 - 0 Points
- Level 2 - 1 Point
- Level 3 (including 1 WBA) - 2 points
- Level 3 (including 2 WBAs) - 3 Points
- Level 4 (including 1 WBA) - 4 Points
- Level 4 (including 2 WBAs) - 5 Points

21) What is the highest level Circumcision procedure that you have performed?

- None - 0 Points
- Level 1 - 0 Points
- Level 2 - 1 Point
- Level 3 (including 1 WBA) - 2 points
- Level 3 (including 2 WBAs) - 3 Points
- Level 4 (including 1 WBA) - 4 Points
- Level 4 (including 2 WBAs) - 5 Points

22) What is the highest level Stent insertion procedure that you have performed?

- None - 0 Points
- Level 1 - 0 Points
- Level 2 - 1 Point
- Level 3 (including 1 WBA) - 2 points
- Level 3 (including 2 WBAs) - 3 Points
- Level 4 (including 1 WBA) - 4 Points
- Level 4 (including 2 WBAs) - 5 Points

### **Medical Management or leadership roles**

23) Have you undertaken any formal medical **management or leadership roles** since leaving medical school eg: Mess President, BMA local or regional rep, trainee rep on committee, rota manager for rota of 6 or more people for at least 6 months?

(Please supply evidence of these roles).

- no - 0 points
- yes - one role - 2 points
- yes - two or more roles - 4 points

### **Self-assessment evidence Layout**

24) I confirm that I will provide the evidence to support the responses to these questions in an organised manner and as specified in the written instructions. SDG station leads will be the final arbitrators

- no - 0 points
- yes - 2 points