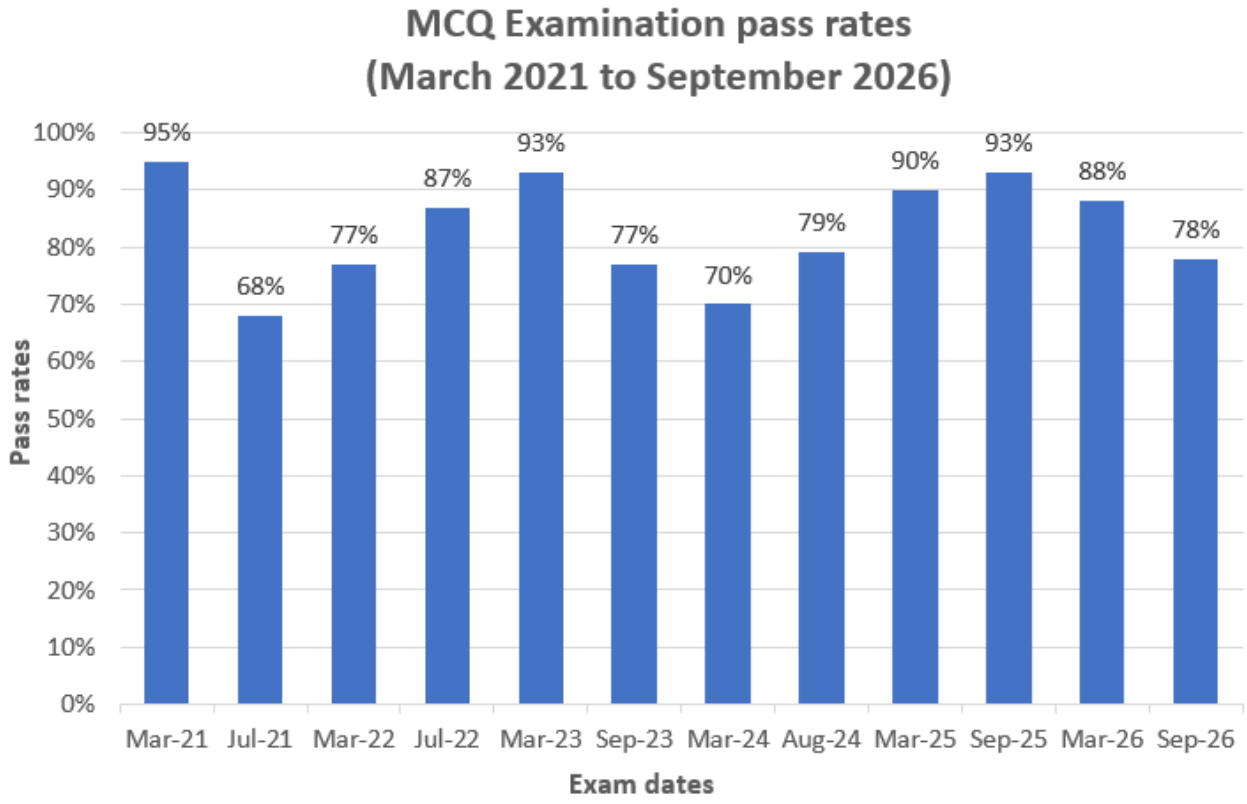
September 2026
Multiple Choice Question Examination (MCQ)
- Post Examination Report

The September 2026 Multiple Choice Question (MCQ) Examination was conducted binationally on 18 September 2026 with 236 candidates sitting the exam across 12 test centres. The overall cohort pass rate was 78%.

The detailed analysis of the results showed that 83.5% of first-time candidates were successful. The pass rate for second-attempt candidates was 44.4%, third-attempt candidates was 37.5% and fourth-attempt candidates was 50%, while no candidate attempting the examination for the fifth time or more achieved a pass. The relatively lower rate of passes among candidates sitting for their third or subsequent attempt, although potentially reflecting a small cohort size, highlight a group requiring more targeted support and training to meet the expected standard.

The Committee for Examinations (CFE) adhered to established procedures in the development and delivery of the September 2026 MCQ Examination. Fellows from across Australia and New Zealand contributed to the standard setting of each question and the determination of the final cut score, which established the examination pass mark.

Table 1: MCQ Examination pass rates (2021 to 2026).



The pass mark was aligned with the standard expected of trainees at the end of Stage 3. Candidates were provided with performance feedback in specific curriculum areas. These areas included:

- Assessment,
- Basic science, medical knowledge,
- Epidemiology, diagnosis & classification, public health,
- Ethics, history and philosophy
- Leadership, governance and relevant legal frameworks

- Phenomenology,
- Psychology, philosophy and psychodynamic principles,
- Sociocultural awareness,
- Specific areas of practice,
- Specific disorders,
- Treatments in psychiatry.

Multiple Choice Questions (MCQs)

Table 2: Average percentage of marks achieved by the cohort, for each of the exam blueprint categories.

Question content	Average percentage of marks achieved
Assessment	71.0%
Phenomenology	68.3%
Treatments in psychiatry	64.8%
Psychology, philosophy and psychodynamic principles	64.7%
Specific disorders	63.0%
Specific areas of practice	61.2%
Basic sciences, medical knowledge	59.7%
Sociocultural awareness	54.7%
Leadership, governance and relevant legal frameworks	51.7%
Epidemiology, diagnosis & classification, public health	46.9%
Ethics, history and philosophy	46.9%

The average scores across question content areas indicate that the cohort performed strongest in Assessment, with a mean performance of 71.0%. Comparatively strong performance was also observed in Phenomenology (68.3%), Psychology, philosophy and psychodynamic principles (64.7%), Treatments in Psychiatry (64.8%), Specific disorders (63.0%), and Specific areas of practice (61.2%). Moderate performance was observed in Basic sciences and medical knowledge (59.7%) and Sociocultural awareness (54.7%). Lower performance was noted in Leadership, governance and relevant legal frameworks (51.7%) and Ethics, history and philosophy (50.5%). The lowest-performing content area was Epidemiology, diagnosis and classification, public health, with a mean performance of 46.9%.

Overall, candidate performance varied across the question content areas, with stronger performance observed in Assessment and Phenomenology, and comparatively lower performance in Epidemiology, Diagnosis and Classification and Public Health, Ethics, History and Philosophy, and Leadership, Governance and Relevant Legal Frameworks.

The specific areas of practice were grouped into the categories of addiction, child and adolescent, consultation-liaison, First Nations Peoples, forensic, and old age psychiatry. Analysis indicated that candidates demonstrated the strongest knowledge in addiction psychiatry (77.1%), followed by child and adolescent psychiatry (71.0%). Comparatively good performance was also observed in consultation-liaison psychiatry (63.1%) and old age psychiatry (60.6%). Lower performance was observed in First Nations Peoples (52.1%) and forensic psychiatry (41.7%), suggesting that candidates may benefit from additional study in these areas.

The specific disorders content covered anxiety, eating, impulse control, mood, organic, perinatal, personality, sexual, sleep, somatoform, substance use, and trauma/stress-related and dissociative disorders. Analysis showed that candidates demonstrated the strongest knowledge in perinatal disorders (83.5%), followed by personality disorders (74.8%), trauma/stress-related and dissociative disorders (70.3%), organic disorders (67.2%) and sleep disorders (67.4%). Comparatively good performance was

also observed in anxiety disorders (64.0%) and impulse control disorders (66.1%). Areas where candidates may benefit from additional study include substance use disorders (46.6%), mood disorders (38.6%) and eating disorders (6.8%).

Critical Analysis Problems (CAPs)

All Critical Analysis Problem (CAP) questions were drawn from Stage 1 and Stage 2 of the syllabus, covering basic sciences and medical knowledge.

The average percentage of marks achieved for CAP 1 was 64.2%, while the average for CAP 2 was 51.0%, indicating that candidates performed considerably better in CAP 1 than in CAP 2.

Analysis of candidate performance showed that CAP 1 was generally accessible to the cohort, with 14 out of 16 questions achieving a mean performance above 50%. Only 2 questions had a mean performance below 50%, indicating that most questions were answered successfully by a relatively high proportion of candidates.

In contrast, CAP 2 appeared substantially more challenging overall, with greater variability in candidate performance. 8 out of 16 questions achieved a mean performance above 50%, while 8 questions ranging from 25% to 50%, indicating that CAP 2 presented greater challenges for the cohort overall.

Overall, the CAP papers demonstrated an appropriate range of question difficulty and effectively assessed candidates' ability to interpret and critically evaluate research literature. Candidates are encouraged to read all provided information carefully, including lead-ins and question details, to ensure accurate interpretation of the questions being asked.

The CFE considered the CAPs to be robust assessments with a substantial proportion of questions performing well.

Final Comment

The CFE emphasizes to all candidates that the ability to read and interpret professional literature is considered a core skill for psychiatrists. Candidates are expected to demonstrate knowledge of various types of research studies, controls, sources of bias, basic descriptive and analytic statistics, and the accurate reporting of findings. You can access a detailed guide to the knowledge that may be assessed in the CAP component on the College website: RANZCP Guidelines for CAPs.

As the MCQ examination is predominantly a knowledge-based examination and covers the foundational knowledge from the Stage 1 and 2 curricula, it is important for candidates to ensure that they are up to date with basic sciences and applied clinical knowledge.

Overall, the September 2026 MCQ Examination demonstrated an appropriate range of question difficulty and continued to provide a robust assessment of the knowledge and critical appraisal skills expected of trainees.

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