

The Complete MLA OSCE Candidate Guide

How to use every feature of OSCE Revisions for the UKMLA CPSA — what to study, in what order, and how to rehearse 10-minute stations with examiner viva.

Tailored for MLA OSCE (UKMLA CPSA) · 10-minute stations · examiner viva

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 MLA OSCE

Sibling OSCE tracks and the MedRevisions family for theory prep. IMGs sitting the GMC CPSA in PLAB 2 format should use the PLAB 2 guide instead.

[PLAB 2](#)

LIVE

[AMC Clinical](#)

LIVE

[MRCS OSCE](#)

COMING SOON

[OSCE Revisions blog](#)

ARTICLES

[Clinical OSCE](#)

LIVE

[NAC OSCE](#)

COMING SOON

[MedRevisions](#)

PARENT

CONTENTS

What's inside

This guide walks UK graduates (and anyone sitting a university-style CPSA/OSCE) through the platform calibrated to MLA OSCE — 12 stations, 10 minutes, examiner viva — not the PLAB 2 circuit.

GETTING ORIENTED

The big picture — MLA OSCE on this platform	01
The study loop	02
The platform map	03

STUDY & PRACTISE

Start Here · Frameworks · Notes	04
Station Scenarios · Mock Exam · viva	05

TRACK

Progress · AI Attempts · readiness	06
------------------------------------	----

PUTTING IT TOGETHER

Strategy · quick reference · links	07
------------------------------------	----

SECTION 01

The big picture

On the MLA OSCE track you are preparing for a **university-style UKMLA CPSA**: typically **12 stations, 10 minutes** each with about **2 minutes reading**, and an **examiner viva** at the end of many stations. That is a different rhythm from PLAB 2's 8-minute, 16+2, no-viva circuit — and the platform calibrates timing and mocks to your track.

- **Full library access.** Unlike the curated PLAB set, MLA OSCE sees the full 1,800+ multi-exam library mapped to the GMC MLA Content Map 2026.
- **Timing matches finals-style CPSA.** 10-minute stations + reading time, with viva pressure at the close.
- **UK guidelines.** Management should reflect NICE, CKS, BNF and NHS pathways — the same UK consultation style PLAB rewards, taught for UK graduates.
- **Mocks mirror your format.** Timed 12-station circuits with viva-aware practice so the end-of-station questions do not surprise you.

IMG OR UK GRADUATE?

If you are an IMG sitting the GMC CPSA in the **PLAB 2 format** (16 stations, 8 minutes, no viva), use the [PLAB 2 candidate guide](#) and the [PLAB 2 hub](#). This MLA OSCE guide is for the **UK medical school / finals-style** assessment shape.

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 is built and reviewed by **practicing doctors who know the UK system and finals-style OSCE assessment** — so what you study here is what the exam actually rewards. Learn more at medrevisions.com and oscerevisions.com.

How marking still maps

Feedback on the platform still breaks performance into Data Gathering, Clinical Management and Interpersonal Skills with 10 competencies — the behaviours UK examiners reward in a structured consultation. Study those headings from day one.

**Data Gathering &
Assessment**

Clinical Management

Interpersonal Skills

SECTION 02

The study loop

The platform is built around four jobs: Learn → Practise → Review → Simulate. Candidates who pass cycle through all four.

1 LEARN

Start Here, Frameworks, Notes, Mind Maps, Videos, Comparisons, Exam Tips, Specialty Guides.

2 PRACTISE

Station Scenarios and Build a Station with the AI patient — out loud, under the clock.

3 REVIEW

Session Review, Revision Notes, History, Analytics, AI Professor. Treat every "not met" as a to-do.

4 SIMULATE

Full timed Mock Exams so stamina, transitions and pacing become automatic.

THE LOOP THAT WORKS

Learn → Practise → Review → Practise again → Simulate. Aim to spend at least half your time in PRACTISE, REVIEW and SIMULATE — not only LEARN.

GETTING ORIENTED

SECTION 03

The platform map

Here's the entire sidebar, grouped the way the platform groups it.

STUDY	WHAT IT'S FOR
Dashboard	Progress, scores, and "what to do next" suggestions.
Start Here	Guided week-by-week roadmap through must-know topics.
Frameworks	Reusable consultation structures and mnemonics.
Notes	Core revision library — multi-tab notes per station/topic.
Videos	Curated clips across the guides.
Mind Maps	Visual maps of a topic's structure.
Exam Tips	High-yield pearls and a flashcard trainer.
Comparisons	Side-by-side differentials.

SPECIALTY GUIDES	WHAT IT'S FOR
Examinations	Physical examination checklists.
Procedures	Clinical procedure guides.
Prescribing	Doses, calculations, prescription templates.
Data Interpretation	Bloods, ECGs, ABGs, X-rays.
PRACTICE	WHAT IT'S FOR
Station Scenarios	Browse and launch AI patient stations.
Build a Station	Generate a station on any topic.
AI Professor	On-demand tutor.
Mock Exam	Full timed circuit mirroring your exam day.
MY PROGRESS	WHAT IT'S FOR
Revision Notes	AI notes from your own performance.
My Notes	Private notebook.
History	Past sessions, searchable.
Analytics	Weak-area detection across practice.

ONE THING ABOUT ACCESS

Every paid plan unlocks the whole platform. Plans differ by **AI Attempts**: separate **voice** and **text** pools. Free accounts start with 3 voice + 3 text. Text is not unlimited — see the Subscription page for current counts.

STUDY & PRACTISE

SECTION 04

Start Here • Frameworks • Notes

Start Here opens on the MLA / Clinical Core must-know set (~665 stations) with anchor notes and variants. Read anchors fully; skim variants for differentiators only.

Frameworks still teach structure — but internalise a **10-Minute Station Playbook**: opening, history, ICE, examination offer, explanation, shared plan, safety-netting, and a deliberate close that leaves room for **examiner viva questions**. Do not rush the last minute; viva marks live there.

Notes use Full Guide, Quick Review, Examiner Checklist, Exam Script, Station Prep and Videos — written and reviewed by practicing doctors. Rate notes for spaced repetition.

PRO TIP

After each note, ask: "If the examiner probes my differential or management in the last two minutes, can I defend it calmly?" That is the MLA OSCE muscle PLAB candidates do not need in the same way.

STUDY & PRACTISE

SECTION 05

Station Scenarios • Mock Exam • viva

Station Scenarios browse the full library by specialty and type. Choose Voice (uses a voice AI Attempt) or Text (uses a text AI Attempt). Text is typically more plentiful — warm up structure in text; save voice for full spoken runs including a crisp close.

"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. Candidates who arrive having done dozens of full spoken run-throughs consistently report the real encounter felt **easier** than practice — the hard part was already automatic.

Mock Exam on the MLA track runs a **12-station, 10-minute** circuit with reading time — rehearse stamina and the viva reset between patients. Start mocks once frameworks and a slice of Start Here are done; ramp to weekly, then denser in the final fortnight.

Session Review still grades against doctor-calibrated rubrics. Expand every "not met," discuss with AI Professor, retry within a day or two.

TRACK

SECTION 06

Track progress & AI Attempts

Revision Notes, My Notes, History and Analytics close the loop: Analytics shows weak areas → Station Scenarios to drill them → Review generates a Revision Note → History shows the score climbing.

Every plan unlocks the entire platform. Plans are a one-time payment (not auto-renewing) and differ only by AI Attempts. And you're not betting on an unknown: OSCE Revisions comes from MedRevisions, which has supported 30,000+ doctors since 2019.

AI Attempts come in two pools: **voice** and **text**. A live voice station uses one voice attempt; text mode uses one text attempt. Free = 3 + 3. On standard plans text is typically twice the voice count. Budget text for structure warm-ups; save voice for full spoken runs.

PUTTING IT TOGETHER

SECTION 07

Strategy · readiness · links

TIME TO EXAM	DAILY COMMITMENT	YOUR ROUTE
12+ weeks	~2–3 h/day	Full Start Here coverage + weekly mocks.
8 weeks	~3–4 h/day	Anchors first; viva closes every practice station.
4–6 weeks	~4–6 h/day	Frameworks + high-yield clusters + frequent 12-station mocks.
Under 4 weeks	Maximum sustainable	Playbook + mocks + weak-area Analytics only. Be honest about postponing.

Am I ready?

1. Consecutive full **12-station** mocks at or above your pass line without retries.
2. You can defend differentials and management calmly in a **viva-style close**.
3. No lagging domain on Analytics across recent sessions.
4. 10-minute playbook automatic from memory, out loud.
5. Reading time, transitions and viva no longer spike your pulse.

START HERE · LINKS WORTH KEEPING

Start free — MLA OSCE track oscerevisions.com/signup?exam=UKMLA

3 voice + 3 text AI Attempts.

MLA OSCE landing oscerevisions.com/mla-osce

MLA OSCE study plans oscerevisions.com/mla-osce/study-plans

UKMLA CPSA explained oscerevisions.com/blog/ukmla-cpsa-explained

UKMLA CPSA study plan oscerevisions.com/blog/ukmla-cpsa-study-plan

MLA Content Map revision oscerevisions.com/blog/mla-content-map-revision

UKMLARevisions (theory) www.ukmlarevisions.com

MedRevisions www.medrevisions.com

PLAB 2 guide (IMG CPSA format) oscerevisions.com/guides/osce-revisions-plab2-candidate-guide.pdf

OSCE Revisions blog oscerevisions.com/blog

**OSCE
REVISIONS**

OSCE Revisions · Sister platform of MedRevisions, helping 30,000+ doctors since 2019 · Candidate Guide · Tailored for MLA
OSCE · oscerevisions.com