General Surgery ST3 2027: Application Guide

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Summary

- General Surgery ST3 is a nationally coordinated, competitive entry point to higher surgical training in the UK, recruiting for England, Scotland, Wales and Northern Ireland. In the 2025 round there were **834 applications** for **161 posts**, a competition ratio of 5.18, up from 3.76 in 2024 (see Competition ratios below; a 2026 ST3 figure has not been published).
- Applications for the 2027 Round are yet to be confirmed officially. In previous years, Oriel application opens at the end of November and the evidence upload window is from December to early January.
- Unlike Core Surgical Training, the round is not shortlisted by a national exam. Candidates score themselves against seven questions on Oriel, upload the supporting evidence to the Qpercom portal, and a consultant scores the evidence. Shortlisted candidates then sit a remote, three-station interview. The shortlisting score and interview score are added to give one national rank.
- Priority status under the Medical Training (Prioritisation) Act 2026 applies at the offer of an interview and at the offer of a post, and it does not change your rank.

Important: *at the time of writing (25 October 2026) the NHS England General Surgery pages still show the 2026 round. The General Surgery 2027 timeline, shortlisting templates and interview details had not been published. Where this guide uses 2026 information as a guide, it says so. Check Oriel and the NHS England General Surgery pages before you rely on any date or scoring rule. NHS England has said it will update the General Surgery pages by the day before applications open, so this guide is due for review on 18 November 2026.*

Key dates

2027 round

Date	Event	Status
10am Thu 19 Nov 2026	Applications open on Oriel	Reported
4pm Thu 10 Dec 2026	Applications close. No late applications	Confirmed by NHS England
Fri 11 Dec 2026	Priority status shown on Oriel (the day after the deadline)	Follows NHS England rule
5pm Tue 15 Dec 2026	Deadline to request a review	Confirmed by NHS England

Date	Event	Status
	of priority status	
TBC	Evidence upload window on Qpercom	General Surgery 2027 dates not published
TBC	Shortlisting, score release and appeals	Not published
11 Jan to 9 Apr 2027	National ST3/ST4 interview window. General Surgery interview dates not published	Reported
10:00 Fri 19 Feb 2027 to 5pm Fri 26 Feb 2027	Second priority review window for invited candidates	Confirmed by NHS England
By 5pm Tue 13 Apr 2027	Initial offers released	Reported
1pm Wed 21 Apr 2027	Hold deadline	Reported
4pm Thu 22 Apr 2027	Upgrade deadline	Reported
August to December 2027	Posts start, with the exact date set by the employing trust	Reported

Confirm all dates on the Medical Hub and Oriel. All dates are subject to change.

2026 round, for reference

The 2026 General Surgery ST3 timeline is the best guide to how the stages are spaced.

Date	Event
By 5pm Wed 19 Nov 2025	Advert appears
10am Thu 20 Nov 2025	Applications open
4pm Thu 11 Dec 2025	Applications close
Tue 16 Dec 2025 to Mon 12 Jan 2026	Evidence upload window on Qpercom
Mon 26 and Tue 27 Jan 2026	Shortlisting scoring
Thu 12 Feb 2026	Shortlisting results released
Thu 12 to Mon 16 Feb 2026	Appeal window (72 hours after receiving your score; process grounds only)
Tue 10 Mar 2026	Invitations to interview
Thu 19 Mar 2026	Preferencing opens
Thu 26 and Fri 27 Mar 2026	Interviews (remote)
Thu 2 Apr 2026	Preferencing closes
By 5pm Tue 14 Apr 2026	Initial offers released

Date	Event
1pm Wed 22 Apr 2026	Hold deadline
4pm Thu 23 Apr 2026	Upgrade deadline

Eligibility

Eligibility comes from the 2027 General Surgery ST3 person specification.

- Primary medical qualification (MBBS or equivalent) and eligibility to work in the UK.
- Full GMC registration at the time of application, and a licence to practise on the post start date.
- Core surgical competence shown in one of three ways: current employment in a UK Core Surgical Training programme that will be completed by the post start date; completion of a UK Core Surgical Training programme, evidenced by a satisfactory ARCP outcome submitted with your application; or a completed Alternative Certificate of Eligibility to Enter Higher Surgical Training submitted with your application.
- MRCS passed by the "initial offers released by" date for the round. In 2026 the last eligible MRCS Part B sitting was February 2026. Applicants in 2026 could instead confirm they were sitting an exam that leads to full MRCS by the offer date. The 2027 person specification does not mention this option, so check the advert.
- For Locum Appointment for Training (LAT) posts, no more than 24 months of LAT experience in the specialty by the post start date.
- You must not hold, or be eligible to hold, a CCT or be eligible for the specialist register in this specialty, including through the Portfolio Pathway.
- Complete employment history, including gaps, and disclosure of any fitness to practise proceedings or conditions. In 2026, anyone answering yes to a fitness to practise question also had to complete the fitness to practise declaration form.

Longlisting checks

Applications are checked against the person specification before shortlisting. Missing evidence will likely lead to withdrawal. In 2026 the checks covered:

- MBBS or equivalent listed as your primary qualification.
- MRCS Parts A and B, or a confirmed sitting that leads to full MRCS by the offer date.
- A complete employment history, including Foundation, Core Surgery and overseas posts.
- Surgical competences signed off: CT1 competences at application and CT2 at appointment. Applicants who are not on a UK Core Surgical Training programme need an ARCP outcome 1 at CT2 or a signed Alternative Certificate of Eligibility. Competences may be signed off by several supervisors, and applicants with incomplete evidence got 48 hours to resubmit.
- You can be withdrawn at any stage if you are found to be ineligible, even after an offer.

Forms that may be required

- Alternative Certificate of Eligibility to Enter Higher Surgical Training: needed if you are not

on, or will not complete, a UK Core Surgical Training programme. It replaced the CREHST. For 2026 only, a satisfactorily completed 2021 CREHST was also accepted. A missing or incomplete certificate means rejection before interview.
- Support for Application to another region: needed if you move region within the same specialty. It must be signed and confirm satisfactory progress.
- Support for Reapplication to Specialty Training: needed if you previously resigned or were removed from a training programme.
- Fitness to Practise declaration form: needed if you answer yes to any fitness to practise question.

Other points on applying

- NHS England limits applications to five per recruitment round. Round 1 has had this limit since 2026, and Round 2 has it for the first time in 2027.
- Oriel is the main channel for communication. Check Oriel and your personal email at least every 24 hours.
- Reasonable adjustments and the Disability Confident Scheme: include your requests and upload all documentation with your application. Missing information may mean adjustments cannot be made.
- Deferred starts and less than full time training are handled through the Medical Specialty Recruitment pages.
- Recruitment is hosted by the London Recruitment Office for the General Surgery Specialty Advisory Committee.

How selection works

1. Complete the application on Oriel, including the seven shortlisting self-assessment questions. Applications close at 4pm on 10 December 2026 (confirmed by NHS England).
2. Upload your evidence to the Qpercom Evidence Portal. Each question needs one merged PDF containing the question's template and its supporting evidence.
3. The Educational Supervisor certifies the evidence. A signed Shortlisting Evidence Applicant and Educational Supervisor Checklist is mandatory.
4. A consultant scores your evidence. High-stakes decisions need a second independent agreement from a clinical lead. You receive your score. You cannot appeal the score itself, but you have 72 hours to appeal if you believe the published process was not followed.
5. Shortlisted candidates book an interview slot on Oriel and sit three online stations: Clinical, Management and Professional Development.
6. Your shortlisting and interview scores are combined into one national ranking, from which offers are made to all available posts, according to your preferences.

Score weighting

NHS England says ranking is based on the combined shortlisting and interview scores. It does not publish a weighting between the two. A global presentation score of 0 to 5 also serves as the first tie-break (a 2026 change).

Medical Training (Prioritisation) Act 2026

When it applies

For General Surgery ST3, prioritisation applies at two stages:

1. The offer of an interview.
2. The offer of a place on a training programme.

NHS England states that this applies to all recruitment other than ACF Round 1 and ST1 Public Health, and that the 2027 General Surgery ST3 person specification says the Act applies to all recruitment using it. Interview invitations are therefore not based on shortlisting score alone: priority applicants are considered first.

Who is in the priority group

You are prioritised only if you meet the criteria for all three headings. The status is binary: in the priority group or not.

Criterion	Qualifies	Does not qualify
Country of primary medical qualification	UK, Ireland, Iceland, Liechtenstein, Norway or Switzerland. A UK qualification does not count if all or most of the training was outside the British Isles. An Irish qualification does not count if all or most of the training was outside Ireland.	Any other country
Immigration status	British citizen; Commonwealth citizen with right of abode; Irish citizen not requiring leave; indefinite leave to enter or remain; leave granted under EU Settlement Scheme residence rules	Any other status, including Partner or Dependent status
Relevant UK programme	The UK Foundation Programme, completed or current; Locum Appointment for Training (LAT) posts in the specialty you applied for; or a relevant UK training programme that is an entry route for your specialty according to the person specification (for General Surgery ST3 that is UK Core Surgical Training)	A LAT post in a different specialty, the Malta Foundation Programme, trust-based programmes, non-training posts leading to an Alternative Certificate of Eligibility

What it does and does not change

- It does not change your score or your rank.
- At the interview stage, priority applicants are invited first. Non-priority applicants who are invited should still attend.
- At the offer stage, appointable priority applicants are considered in rank order before non-priority applicants, repeated in every matching round.
- Priority status does not guarantee an offer, because the number of posts is finite.

Checking and correcting your status

- Status appears on Oriel the day after the deadline, which is 11 December 2026 for Round 2 if applications close on 10 December.
- If you think it is wrong, you must complete the prioritisation review form by 5pm on Tuesday 15 December 2026, with evidence if the form asks for it. The form must be completed in every case, and late forms and evidence cannot be considered.
- A second review window for invited candidates opens at 10:00 on Friday 19 February 2027 and closes at 5pm on Friday 26 February 2027.
- Only an immigration status held on or before the relevant deadline can be considered.
- Failing to report an incorrect status can result in any offers being withdrawn. Applicants rejected at shortlisting are not reinstated if their status later changes.

Shortlisting: the self-assessment and evidence

What it is

Candidates answer seven questions on Oriel, each scored against fixed bands, and upload the evidence for each answer. A consultant scores the evidence. NHS England had not published the 2027 questions at the time of writing, so the table below is the 2026 version and should be treated as a guide. Only the current year's templates are accepted: earlier templates lead to withdrawal.

The seven questions (2026 version)

Question	Domain	Scoring
1 (max 8)	Post-Foundation General Surgery time, by the end of July 2026 or the end of Core Training	0 to 3 months: ineligible. 4 to 7: 1. 8 to 12: 6. 13 to 36: 8. 37 to 60: 4. 61 or more: 1
2 (max 10)	Appendicectomies you completed (assisting only is excluded)	0 to 9: ineligible. 10 to 20: 2. 21 to 35: 7. 36 to 70: 10. 71 to 85: 5. 86 or more: 1
3 (max 8)	Single best closed-loop audit, presented	Scored on involvement, reference standard, study design, clinical importance and impact

Question	Domain	Scoring
4 (max 4)	Time in related specialties (T and O, plastics, neurosurgery, ENT, cardiac or thoracic, A and E, ITU, paediatric surgery, urology, vascular, OMFS)	None: 0. At least 4 months in one: 2. At least 4 months in each of two or more: 4
5 (max 10)	Your two best PubMed-indexed publications	5 per publication, based on contribution, authorship level, study quality and impact factor
6 (max 10)	Your two best academic presentations	5 per presentation, based on contribution, presenter role and study quality
7 (max 5)	Stand-alone degree (UK-awarded, not intercalated)	PG Certificate: 1. Diploma or Masters without thesis: 2. Masters with thesis: 3. MD: 4. PhD: 5

The maximum total across the seven questions is 55, calculated from the listed maxima. The 2026 round also changed the operative minimum: you need at least 10 appendicectomies at Supervised Trainer Scrubbed (STS) or above.

Rules for each question (2026)

- **Question 1:** eligible posts must include both unselected emergency and elective general surgery (or a recognised sub-specialty). Non-training posts need a contract front page showing dates and role. If the contract lacks the specialty or dates, a supporting letter is required.
- **Question 2:** logbooks must be full, consecutive and verified, with the supervisor's signature, printed name and GMC number on each page. They must match your employment history. A logbook with gaps, or one that omits General Surgery posts, scores 1 point for this question. The same applies if logbook evidence looks exaggerated or omitted compared with your employment history.
- **Question 3:** both audit cycles must show your involvement, or the score is 0 and you are ineligible for interview. Submit the presentation slides (six per page) and a letter from the head of department or clinical lead. Generic audits, such as mandatory VTE, antibiotic compliance or simple notes audits, are not accepted. A certificate alone is not sufficient.
- **Question 4:** evidence must show unselected emergency and elective work in each specialty.
- **Question 5:** publications need a PubMed ID, an impact factor, and to be published by the evidence deadline. Pay-to-publish journals (for example Cureus) score 0. Collaborative papers need a collaborator list with your name highlighted, or no points are awarded. Submit them in order of preference.
- **Question 6:** presentations must have been given by the evidence deadline. Submit the meeting programme page and the presentation or poster. Departmental, hospital, regional and teaching presentations are not eligible, and 2026 no longer distinguished oral, poster and orally presented poster. Duplicate presentations of the same results score once.

- **Question 7:** intercalated degrees are excluded, including mandatory ones in training programmes. You need the award certificate or written confirmation pending graduation. Theses must be clearly evidenced. Overseas degrees need equivalence evidence and a certified translation if not in English, and the selection leads have the final say on equivalence. - UK ENIC

Evidence and probity

- Upload everything through the Qpercom Evidence Portal. Recruitment administrators cannot upload on your behalf, and access is withdrawn after the deadline. Evidence sent any other way is not accepted.
- Merge each question's template with its supporting evidence into one PDF.
- Every logbook page needs a legible Educational Supervisor name, signature and GMC number, or the application is rejected.
- A signed Shortlisting Evidence Applicant and Educational Supervisor Checklist is mandatory. Without it you are withdrawn.
- You are responsible for clear evidence. Unclear evidence is judged by the shortlisting committee, whose decision is final.
- If panel members are short, the volume of evidence assessed may be reduced, so upload presentations and publications in priority order.
- Using AI to write the templates is treated as a probity matter. False or misleading statements can lead to a Probity Panel referral and a GMC referral.
- You cannot appeal your shortlisting score. You can appeal only if you believe the published procedure was not followed, and only the evidence you uploaded is considered. Appeals must be lodged within 72 hours of receiving your score. Late appeals are not considered, outcomes are final, and disagreements over self-assessment scores sit outside the MDRS Complaints Policy.

Preparation timeline

- Before 19 November 2026: confirm your eligibility route and MRCS date, and start collecting a signed, consecutive logbook with your Educational Supervisor.
- By application: choose your best closed-loop audit, your two best publications and your two best presentations, and gather the proof each template asks for.
- 19 November to 10 December 2026 (reported dates): complete Oriel, then upload your evidence as soon as the Qpercom window opens, because mistakes cannot be fixed after it closes.
- January to March 2027, based on the 2026 pattern: prepare for the interview while shortlisting runs.

Interview format

In 2026, interviews were remote on the Qpercom Recruit platform and took about 40 minutes. The 2027 format had not been published at the time of writing.

Station	Content	Time
Clinical	Reading time for a clinical patient scenario, then	5 minutes reading, 10 minutes questions

Station	Content	Time
	questions on the scenario and related topics	
Management	Reading time for a management problem in a clinical setting, then questions on the scenario and related topics	5 minutes reading, 10 minutes questions
Professional Development	Questions about career aspects to date	10 minutes

- Each station has two consultant interviewers. One observer (a lay representative or a consultant or senior trainee) may be present. Observers do not assess candidates.
- You do not need to prepare or bring a portfolio for the Professional Development station. Portfolio evidence is not available to interviewers during the interview.
- You book a slot on Oriel, first come first served, by the deadline in your invitation. You may attend only one interview regardless of where you wish to train.
- Test the link from your intended device in advance. Contact the recruitment team early if you cannot connect.
- Have a passport or UK photo driving licence ready. You must show the whole room by camera to confirm nobody else is present, and the administrator confirms your identity first.
- Camera and microphone must be on throughout. The interview is terminated if the panel cannot see you.
- Recording is not allowed by the applicant, the administrator or the panel.
- You must agree to the Applicant Declaration on Oriel. The four-nation Postgraduate National Recruitment Programme Board position statement says anyone found using AI or other automated technologies during an interview will be disqualified from recruitment and may be referred to the relevant professional or regulatory body.
- NHS England has not published the scoring scale, marking domains or tie-break rules on its public pages. Check the Applicant Handbook and Oriel.

Ranking, preferencing and offers

- Eligible applicants are invited to preference posts on Oriel before offers are made. In 2026 preferencing opened a week before the interviews and closed about a week after.
- Scores are collated to generate one national ranking, from which offers are made to all available posts. Priority applicants are considered first in rank order.
- You have 48 hours (excluding weekends) to accept, reject or hold an offer. Offers made after the hold deadline can only be accepted or rejected.
- Upgrading is optional. If you opt in and a post you ranked higher becomes available, you are moved to it automatically.
- Programme and rotation details are released at the preferencing stage and sent to your Oriel account and registered email.

Posts in 2027

NHS England had not published 2027 post numbers at the time of writing. In the 2026 round the indicative numbers across the UK were 35 minimum to 117 maximum, and they varied by region.

Region (2026 round)	Minimum to maximum posts
East Midlands	4 to 9
East of England	5 to 10
Kent, Surrey and Sussex	6 to 21
London	5 to 10
North East	0 to 8
North West (Mersey)	0 to 2
North West (North West)	0 to 1
South West (Severn and Peninsula)	0 to 1
Thames Valley	0 to 5
Wessex	2 to 9
West Midlands	10 to 18
Yorkshire and Humber	0 to 11
Scotland	3 to 7
Wales	0 to 2
Northern Ireland	0 to 3

These numbers are indicative and may change during the recruitment period. The 2027 advert gives the current numbers.

Competition ratios

The table shows applications, posts and the competition ratio for General Surgery ST3 from 2022 to 2025. The ratio is applications divided by posts. It rose each year from 2023 (3.18) to 2025 (5.18). Applications rose from 515 in 2023 to 834 in 2025, while posts stayed between 153 and 181 across the four years.

Year	Applications	Posts	Competition ratio
2025	834	161	5.18:1
2024	681	181	3.76:1
2023	515	162	3.18:1
2022	532	153	3.48:1

Source: NHS England competition ratio data, checked by Surgical Steps on 25 October 2026. The 2026 ratio has not been published.



Promo code: ST3WEBINAR25

Sources

- NHS England: Overview of General Surgery
- NHS England: General Surgery ST3 applying
- NHS England: General Surgery recruitment timelines
- NHS England: General Surgery interviews
- NHS England: General Surgery ranking, preferencing and offers
- NHS England: General Surgery posts
- NHS England: General Surgery appendices
- NHS England: General Surgery ST3 2027 person specification
- NHS England: Prioritisation for 2027 specialty training recruitment
- NHS England: Changes to Medical Specialty Training recruitment for 2027
- NHS England: Recruitment timelines
- NHS England: Competition ratios for 2025
- NHS England: Competition ratios for 2024
- NHS England: Competition ratios for 2023
- NHS England: Competition ratios for 2022
- NHS England: Position statement on the use of AI during interviews
- Doctors Passport: 2027 specialty recruitment dates (third party, used for Round 2 application dates)

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