

SCENARIO 3 History

Mr/Mrs Smith is a 52yo patient who was sent to the emergency department by their LMO with dyspnoea. Please take a history and communicate an interim management plan to the patient.

You will not be required to examine your patient.

The patients vital signs are:

Afebrile

Pulse 95

BP 140/75

RR 20

O2 sats 96%

Curriculum reference:

- Medical expertise
- Communication
- Professionalism
- Health advocacy

Information for actor. Can be male or female depending on available staff. (gender neutral name)

This is a patient with dyspnoea without a clear precipitant, though PE cannot be excluded.

Patient is generally well with no significant comorbidities, significant allergy to penicillin. Taking HRT. Smoker 20cigs/day, daily alcohol.

You woke with dyspnoea yesterday, which has not resolved in the last 24 hours. You normally exercise daily but were unable to do so due to the dyspnoea, thought there is no PND or orthopnoea. You have had no fevers or haemoptysis, and no recent travel. You have had a dry cough for the last couple of days

You had asthma as a child but were never admitted to hospital and have had no recent exacerbations. You have a child at home with an URTI but no other infectious contacts

You saw your GP today who told you that your chest sounded fine, and that he was referring you to hospital for a 'scan' (you're unsure what that means).

Prompts (if not addressed by candidate):

“What could be causing my shortness of breath”

“Will blood tests help?”

“My GP said something about a scan for blood clots –what does that mean”

“Do you think I need admission to hospital”

SCENARIO 3 History

Domain	Criteria for high rating
Medical expertise	<p>Asks open ended questions</p> <p>Asks all appropriate questions regarding risks for PE</p> <p>Asks questions to exclude alternative diagnoses: LRTI, CCF, Anaemia etc</p> <p>Management plan includes appropriate investigation plan which must include an xray and appropriate discussion over the use of CTPA/VQ</p>
Communication	<p>Clarity of communication</p> <p>Offers patient opportunity to ask questions and clarify information</p> <p>Communicates a clear plan of management including IV access, blood tests, U/S, admission to hospital, referral to surgical unit</p>
Professionalism	<p>Shows respect</p> <p>Professional appearance, demeanor and conduct</p>
Health Advocacy	<p>Alcohol and smoking intervention (optional for good marks)</p>

Question 3 History

Candidate Name:

A. Component Assessment

Select ONE option that best represents the candidate’s performance in this OSCE. Use the 9-point graded scale, where 1 is poorest and 9 is best. TICK ONE CELL for each row below.

	1	2	3	4	5	6	7	8	9
Medical Expertise									
Communication									
Health Advocacy									
Professionalism									

B. Station Difficulty (please circle): Low Moderate High

C. Examiner Notes on Candidate Performance

Positives

Areas for Improvement

Suggestions

D. Global Rating for Standard Setting (please circle)

Clear Fail

Marginal Fail

Borderline

Marginal Pass

Clear Pas

