

MFAEM Part B December 2004

O.S.C.E (7 minutes per station)

Station 1 Management of the Airway

You have one minute to prepare your equipment (with an assistant) before arrival of a thirty year old unconscious male.

On arrival assess and manage his airway

Foreign body in airway

Needed supplemental BVM ventilation for RR 6

Examiner encouraged intubation of the patient without drugs

Asked how do you confirm ETT position

Station 2 Manage cardiac arrest

Manage this patient who has collapsed.

Out of hospital cardio respiratory arrest.

BLS in progress by two assistants, no leads on.

In EMD.

ROSC after two cycles.

Station 3 Vital signs in a child

You have four minutes to prepare for the arrival of a ten year old unconscious boy. **Prepare your equipment and use your nurse, who is not trained in paediatrics. Explain to her what the equipment is for.**

Manage child on arrival.

Board to write doses/Broselow tape

ABCD approach

Septic shock secondary to right pneumonia

Asked to tell examiner positive findings and suggest further investigations

CXR was available if had time

Station 4 Cardiovascular examination (CVS).

This man has presented to the A&E department complaining of shortness of breath on exertion and mild ankle swelling. There is no history of chest pain.

Examine the patient's cardiovascular system and present your findings and management plan to the patient.

Murmur

Station 5 Safe defibrillation

Manage this cardiac arrest. Treat the rhythm appropriately.

Pulseless VT with BLS being performed by two assistants.

Asked reversible causes of cardiac arrest.

Station 6 Dysuria in a Man (STD)

Take a history off this thirty year old man who has presented with a history of dysuria. He has no abdominal pain and urine dipstick is negative. Advise the patient on further management and treatment.

ODQ has new homosexual partner. Asked me about confidentiality and did we have to tell his wife, asked if he could still have sex.

Station 7 GI Bleed

Take a history only from this man who has had haematemesis. He has been resuscitated with 1000 mls of normal saline and is stable. SUMMARISE your findings to the examiner. Tell the patient your plan for further investigation and treatment

On warfarin for dvt, Has list of medication in pocket

Week long history of dyspepsia.

Recent excess alcohol intake.

Recently started on ?NSAIDs or antibiotics

Dark stools in last 2/7.

Station 8 Headache history

Take a history from this lady, who presents to the emergency department complaining of a headache. After taking an appropriate history, explain to her your management plan.

Good History for S.A.H., needs urgent CT & Admission for LP, have to persuade patient to stay despite wanting to go home to look after mother

Station 9 Drug history in the elderly

This 82 year old man has collapsed ?cause and has been found to have a pubic ramus fracture. Take a drug history off this man.

Patient has list of medication in pocket including atenolol, bendrofluazide, aspirin, simvastin and recently started alpha-blocker.

Examiner goes on to ask further questions about cause of postural hypotension, what you would do in terms of further drug management.

Station 10 Breaking bad news

75 year old lady who was found unresponsive by her home help this morning. Her GCS has been 3 throughout, and she is now intubated and ventilated. A CT scan has been done which demonstrates a large intracerebral bleed. The neurosurgeons have seen the scan, suggest that her likelihood of a recovery is nil. The patient's daughter is now in the relative's room.

Speak with the daughter and explain that your patient is not suitable for surgical treatment, and agree that she is not for resuscitation.

Daughter asked to see CT scans which were in room

Asked if could wait 48 hrs to extubate pt before relatives arrived from oz.

Station 11 Knee joint examination

This young man has a history of recurrent patella dislocation.

Examine his knee and advise on further management.

Real patient. Patella apprehension, maltracking patella.

Station 12 Central nervous system examination

This lady [old] has fallen backwards and hit the back of her head. She is complaining of neck pain and weakness in her limbs. She has been placed in a c-spine collar and head blocks.

Examine the PERIPHERAL nervous system of this patient. Explain the differential diagnosis to the patient and make a plan of investigations.

Actress. Arm weakness > leg weakness. Reduced sensation C7-T1 both arms. Suspected central cord syndrome.

Station 9 Gynaecological examination

This 45 year old single lady presented to the A&E department complaining of left iliac fossa pain and intermenstrual PV bleeding. Bladder and bowel habit are normal. Pregnancy test is negative. Perform a pelvic examination and advise on further treatment and investigation.

Mannikin on actresses lap.

Left-sided tenderness with ?lump on bi-manual palpation.

Station 14 Clear the neck in an adult

This young man was involved in a low speed RTA. He has been placed in a c-spine collar and blocks.

Take a history and examine the patient to decide whether they require an x-ray.

Assistant available for manual in-line stabilisation

Did neuro arms, no midline tenderness, no distracting features, full ROM of neck, released from immobilisation.

Station 15 Fundoscopy

A 69 year old patient with hypertension presents to the A&E department complaining of visual disturbance associated with flashing lights. She is normally fit & well with no pre-existing eye disease

Examine the eyes (including fundoscopy), and discuss your findings with the examiner.

Dummy. Ophthalmoscope. Four different slides to slot in including papilloedema and CRVO. Asked for diagnosis and to point to correct picture to match to what had been seen at fundoscopy.

Station 16 Ear examination

This man is complaining of right sided earache.

Take a brief history, examine his ear and advise on further treatment.

Dummy. Otoscope. Different slides. I had fluid level of otitis media.

Station 17 Assessment of suicide risk.

This 45-year-old man has taken 40 paracetamol tablets 5 hours ago . His paracetamol levels are below the treatment line and he is 'medically cleared' to go home.

Take an appropriate history from the patient (5 minutes) and present your findings together with a management plan to the examiner (2 minutes).

45 year man, lost job 2 weeks ago, high alcohol intake, still expressing suicidal intent, socially isolated, went to allotment to perform act, not intending to be found.

Station 18 Suturing

This young woman has a cut in her forearm. The wound is not contaminated and there is no neurovascular or motor defect.

Suture the wound and give the patient appropriate advice.

Plastic skin strapped to real persons arm.