

A 17 year old male attends with his Mother. He has a 3 day history of dysuria. Take a sexual history.

- Wash hands / alcohol gel
- Ensure privacy / confidentiality
- Introduce yourself
- Confirm identity of patient and relative
- Suggest may be appropriate for Mother to leave room

- Dysuria – 3 days
- Discharge
- Frequency
- Sores/ itching
- Testicular/groin pain/swelling
- Previous episodes

- Sexual partner(s)
- Recent casual or unprotected sex
- Male or female?
- Vaginal / oral / anal (giver or receiver?)
- Foreign travel / sex?

- PMH, DH, allergies

- Explain you would like to proceed to examine the patient, discuss the diagnosis with the patient, arrange appropriate investigations, advice re. barrier contraception, contact tracing, GUM F/U

- Thank patient

One of your SHOs has just received a needlestick injury.

She is being seen by your consultant, who requests that you see the patient (donor) and assess their HIV risk.

- Wash hands / alcohol gel
- Privacy / confidentiality
- Introduce yourself
- Confirm identity of patient
- Consent (and explain situation)
- Sensitive, tactful and empathic

- **Sex**
- Hetero / bi / homosexual
- Unprotected sex?
- Multiple partners?
- Recent STIs?
- HIV status of partner?

- **IVDU**
- ? IVDU
- ? shares needles
- ? partners IVDU

- **Blood products and transfusions**
- Haemophilia?
- Blood products prior to 1985?
- Partners haemophilia or blood products prior to 1985?

- Tattoos

- Any Qs
- Address anxieties
- Thank patient

You are asked to review a patient on CDU. He presented following an OD of paracetamol. His levels are below the treatment line, and he would now like to go home. He does not want to stay overnight to see the self harm team. Assess his suicide risk.

- Read notes and confirm blood results
- Wash hands / alcohol gel
- Introduce yourself
- Confirm identity of patient
- Consent

- Review history
- Explain that ideally should stay and see self harm team

- **Assess suicide risk (SAD PERSONS)**
- **Sex** – male (1)
- **Age** - <19 or >45 yrs (1)
- **Depression** (2)
- **Previous suicide attempts or psychiatric care** (1)
- **Ethanol / drugs** (1)
- **Rational thinking loss** (2)
- **Separated, widowed or divorced** (1)
- **Organised or serious attempt** (2)
- **No social support** (1)
- **Stated future intent** (2)

- **Calculates and explains significance of score**
- Score <6 – *may* be safe to discharge
- 6-8 *probably* requires psychiatric consultation
- >8 *probably* requires hospital admission

- Enquires re. home circumstances and supervision
- Arrange community psychiatric follow up
- Liaise with GP

- Checks patient understanding
- Thank patient

Your next patient is a 43 year old woman who has been assaulted. Take a relevant history.

- Wash hands / alcohol gel
- Suitable environment
- Female chaperone
- Introduce yourself
- Confirm identity of patient
- Consent
- Ensure comfortable – offer analgesia

- Identifies that this is domestic violence
- Identifies extent of injuries
- ? sexual abuse / rape
- ? previous domestic violence
- ? co-habiting
- ? children involved
- ? police involved - partner arrested

- Ensures safe environment for discharge
- Offers appropriate support

- Thank patient

This 40 year old woman has brought her 3 month old baby into the department. Mother has been out drinking tonight, leaving the baby in the care of her partner (baby's father). After she returned home she had an argument with her partner, who assaulted her while she was holding the baby. She is worried the baby might have been injured. The partner has been arrested by the police.

The baby is presently being fed by one of the nurses in another cubicle. You have seen the baby and there are no apparent external injuries, but you have decided to admit her hospital.

As you enter Mother's cubicle, she is sleeping (and smells of alcohol). Explain to her that you would like to admit the baby to hospital.

- Wash hands / alcohol gel
- Appropriate environment
- Female chaperone
- Introduce yourself
- Confirm Mother's identity
- Consent

- Brief history of events
- Asks about previous domestic violence or violence to baby
- Explains that you have seen baby – no apparent injuries
- Explains need for admission for further investigation
- Explains that there are no allegations against Mother
- Persuades her not to remove baby from department
- Allow Mother to see baby

- Check Mother's understanding

- Thank Mother

You have just been involved in the unsuccessful resuscitation of a pub landlord who hanged himself in the pub cellar. He was found by his wife. He was asystolic at the scene. You have just pronounced him dead. His wife was present throughout the attempted resuscitation.

You are told by the floor manager that some relatives are on the phone in the central area, and would like to speak to the doctor who has been looking after the patient...

- Wash hands / alcohol gel
- Request that call is diverted to a private phone
- Introduce yourself
- Confirm identity of caller

- Identify what caller already knows
- Enquires as to whether caller is alone or if another adult available to support
- Inform them that patient is dead
- Explain that all possible resuscitation has been performed
- Sympathises with caller
- Advises caller to attend hospital
- Offers to see caller once arrived

- Checks caller's understanding of situation
- Invites questions
- Thanks caller

- Inform security