

OSCEs November 2006

1. 15/12 old with SVT for one hour and talk to Mother. Initially stable and became unstable – **double resus station. Team/Communication/Practical. Pass rate 87%**
2. Instruct an ENP to phone the Paediatrician to refer a 14/12 old child with suspected NAI. Had 8 mins beforehand to read notes of child before discussing with her. ENP was very stressed and did not want to help you. Convince ENP of your concerns re child. You had to come up with a suggestion to try to help her ie move doctors to her area – **Conflict Resolution/Communication. Pass rate 85%**
3. Cranial nerve examination excluding II and VIII. Man was supposed to have abducens nerve palsy but apart from having diplopia, Patient had Parkinson's. Differential MS. CN exam was normal – **Examination. Pass rate 91%**

OR: Upper arms examination – PNS – one arm weakness – **Examination**
4. History of lady with abdo pain - renal colic. Go thorough gynae hx as well, have loads of time. Discuss Mx plan – pain control, investigations etc – **History. Pass rate 91%**

OR: History of haematuria – **History**
5. Examine lady with pelvic pain – RIF pain, new partner, no contraception – model, do PV and speculum and inform her of Plan – **Clinical Skill/Communication. Pass rate 80%**
6. Talk to mother of 3 yr old child who has recently been diagnosed with diabetes in Spain.
Explain how to use BM machine and explain what diabetes is. Need for good diabetic control. Multidisciplinary approach. Mention getting diabetic nurse and follow up. – **Communication/Practical. Pass rate 70%**

OR: Talk to mother of child with asthma – explain the disease and how to monitor with PEFr meter – **Communication**
7. Lady with chronic back pain with a stick. 18/12 off work. Issues wt gain, exercise, stick, – explain a plan for her – SS/OT/Physio/pain clinic/acupuncture. Show empathy – **Communication/Difficult case. Pass rate 91%**
8. History from a man with depression and assess his risk – recently unemployed, single, recent OD – cleared medically – use SAD PERSONS then sum up to

examiner. Assess for suicide risk and discuss management plan with examiner. –
History. Pass rate 89%

9. Prepare a 12 year old child for transfer – intubated, had head injury – large extradural on CT scan and refer to neurosurgeon via telephone. Issues: safe transfer, trace family with police. Ask for paperwork, don't make up the history/examination etc – **Skill/Communication. Pass rate 59%**
10. Trauma scenario – not allowed to touch patient at all and doctor (SHO) and nurse could not do very much or be taught how to do procedures. Man in RTA – high speed. Had sternal bruising and flail chest. Also splenic bruising. Became shocked despite fluid, bruising over sternum – ECG ST elevation – cardiogenic shock – **double resus station. Team/Practical/Examination/Communication. Pass rate 78%**
11. Teach ENP how to read a lateral C spine xray. ?underlying issue with ENP ?working beyond remit – **Teaching/Communication. Pass rate 69%**
12. CVS Exam – patient on warfarin, unwell with pyrexia, no chest pain. Had had sternotomy. Do CVS exam and inform examiners of a management plan. Prosthetic aortic valve heart sound with a systolic murmur. Explain echo/TOE, blood cultures and antibiotics and refer. **Exam/Knowledge/Communication. Pass rate 45%**
13. Suturing – suture a wound, fake skin on upper arm of patient. Prepare wound/explain to patient throughout. Post wound care and tetanus. Use assistant and communicate with her. **Practical Skill/Communication. Pass rate 89%**
14. Examine a knee – young man, history consistent of patellar dislocation, spontaneously relocated. Examine and formulate management plan – use of cricket splint. Apprehension test. **Examination/Communication. Pass rate 89%**

OR: Examine a man's back - **Examination**