



Year 4 Formative OSCE (August) 2019

Reading for Station 3

Candidate Instructions

Clinical Scenario

You are an intern working in a ward-call shift on the surgical wards.

You are asked to see 45-year-old Susan/Steve Cassey on the ward who you prescribed oral dicloxacillin to earlier this morning for cellulitis. You accidentally prescribed this medication without realising that she/he is allergic to penicillins.

Her/His vitals are stable but developed a severe rash upon administration of the medication. She/He is very upset and would like to speak to you.

Task

In a total of eight (8) minutes:

- Please speak to the patient and address her/his concerns
- At 6 minutes, you will be asked to stop and examine the new rash

Simulated Patient Information

The candidate has the following scenario and task

Clinical Scenario

You are an intern working in a ward-call shift on the surgical wards.

You are asked to see 45-year-old Susan/Steve Cassey on the ward who you prescribed oral dicloxacillin to earlier this morning for cellulitis. You accidentally prescribed this medication without realising that she/he is allergic to penicillins.

Her/His vitals are stable but developed a severe rash upon administration of the medication. She/He is very upset and would like to speak to you.

Task

In a total of eight (8) minutes:

- Please speak to the patient and address her/his concerns
- At 6 minutes, you will be asked to stop and examine the new rash

Instructions for simulated patient

- Your name is Susan/Steve Cassey and your DOB is 03/03/1974 (aged 45)
- You are wearing casual clothes and you are sitting laid back on the bed
- Appear reasonably angry with what has happened and demand an explanation

Patient information:

You are currently in hospital recovering from a cholecystectomy two days ago. Last night, you developed an erythematous rash diffusely spreading on the right lower leg. The doctor who saw you diagnosed you with cellulitis and you were started on a course of oral dicloxacillin antibiotics.

In the pre-operative clinic, you had told a junior doctor that you were allergic to penicillins and had an anaphylactic reaction from it previously. However, although you remember the doctor from yesterday telling you the name of the antibiotic (dicloxacillin), you did not know that this was a type of penicillin and thus did not question his decision. You also recall your allergy being recorded on the clinical notes during the clinic.

This morning, a different doctor (the student) had seen the notes from last night and prescribed this antibiotic without checking for allergies. The nurses then gave you this medication. You did not suffer an anaphylaxis reaction but developed a severe rash.

You are extremely angry that this happened and would like to speak with the doctor that made this mistake. You have lost trust in the treating team. You would like to make a complaint to the hospital.

If you feel like the doctor is apologetic and provides reasonable suggestions on ensuring this does not happen again, be reasonable and try to come to a conclusion before 6 minutes as students will be examining the skin reaction after this.

You are otherwise healthy. You live locally with your partner and three children. You are a busy café manager and want to return back to work as soon as possible. You have not other allergies.

Examiner Instructions

Please verify that you are examining the correct student by checking the name on the student's ID card against the name on the score sheet, as the student enters the room.

The candidate has the following scenario and task

Clinical Scenario

You are an intern working in a ward-call shift on the surgical wards.

You are asked to see 45-year-old Susan/Steve Cassey on the ward who you prescribed oral dicloxacillin to earlier this morning for cellulitis. You accidentally prescribed this medication without realising that she/he is allergic to penicillins.

Her/His vitals are stable but developed a severe rash upon administration of the medication.

She/He is very upset and would like to speak to you.

Task

In a total of eight (8) minutes:

- Please speak to the patient and address her/his concerns
- At 6 minutes, you will be asked to stop and examine the new rash

Instructions

- You are playing the role of the examiner in this exam. Please address the student as an examiner would, after you have checked ID. Please do not provide prompts on the station content.
- Stay out of the line of sight between the candidate and the patient during the station. Do not provide any positive or negative feedback to the candidate.
- Please record your observations on the scoresheet **as you go**, as discussed in the briefing.
- The candidate has 6 minutes to address the patients concerns. **At 6 minutes, stop the candidate and state the following:**
 - **“Please examine the new rash. You have two minutes remaining.”**
 - **Provide the ‘Photo of the rash’**
- Ensure the student is verbally stating the findings on the dermatological examination
- You have two minutes between candidates to finalise your scoring and ‘reset’ the station.

Aim of this station:

- Managing and communicating with an angry patient
- Performing a dermatological examination

Props and Sundries

- Simulated patient
- Handwash
- Photo of the rash

Author – Hiroki Hayashi and Grace Low

ID Check
(please tick)

OSCE Score Sheet

Station 3 – Angry patient and Dermatological examination

Student Name/Number.....

Examiners Name:

SP:

No.	Assessment Item (details)	PLEASE MAKE ONE TICK IN EVERY ROW						
1	Infection Control and Introduces self appropriately washes hands before, introduces self, appropriately washes hands after	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3			
2	Establishes reason for consultation Enquires about circumstances leading to patient’s dissatisfaction, Establishes current situation, Acknowledges patient’s anger, Allows patient to vent their anger, Explains how the mistake may have arisen, Accepts responsibility for error and apologises for mistake,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	6
3	Corrective action Offers to help alleviate their dissatisfaction, Advises patient on hospital complaints procedure, Explains a critical incident form will be submitted, Negotiates and agrees a course of action, Suggests ways for future prevention of errors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	
4	Concluding Patient concerns, Questions, Advises further supports in the hospital (e.g. clinical nurse specialist), Confirm the error will be addressed to a senior, Suggest follow up with patient/relative if further questions, Safety netting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	6
5	Communication skills (max 6 marks) Avoids dismissive/threatening body language, Minimal interrupting of the patient, Good use of eye contact, Does not raise voice, Avoids criticising patient/blaming colleagues, Good use of verbal/non-verbal cues, Demonstrates empathy, Remains calm/professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	6
6	Management (max 6 marks) Cease the antibiotics, Monitor vitals, Assess severity of reaction (ABCs), Documentation of allergy and event, Administration of antihistamines +/- steroids to alleviate rash, Discussion of event with senior and colleagues, Considers medi-alert bracelet,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	6
7	Dermatological exam: Inspection - General (max 5 marks) General inspection, Location, Colour (Erythematous/Purpura/Hyper-/Hypopigmentation), Size, Demarcation, Other appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	
8	Dermatological exam: Inspection – Specific (max 3 marks) Lesion morphology: Primary lesion: Macules, Papules, Plaques, Nodules, Vesicles, Bullae, Pustules (max 1 mark) Secondary lesion: Urticaria, Scale, Crusts, Erosions, Ulcers, Atrophy, Scars, Telangiectasias (max 1 mark) Lesion configuration: Discrete, Confluent, Linear, Annular, Target, Reticulated, etc (max 1 mark)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3			
9	Dermatological exam: Palpitation (max 3 marks) Texture, Temperature, Tenderness, Other appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3			
10	CLARITY (organisation, appropriate confidence)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		1	2	3	4	5	6	7
		Confused, disorganised, unclear		Below expected		Above expected		Outstanding
11	WARMTH (engagement, compassion, care for patient)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		1	2	3	4	5	6	7
		Cold, uncaring, brusque		Below expected		Above expected		Outstanding

Comments:

Photo of the rash – Right forearm



<https://www.pharmaceutical-journal.com/learning/learning-article/penicillin-allergy-identification-and-management/20069170.article?firstPass=false>