Scenario: The patient started to develop a tremor in his right hand 6 months ago. He also noticed that he was slowing up and was finding it more difficult to use his right hand. He initially saw his family doctor who referred him to a consultant who diagnosed Parkinson’s disease 6 weeks ago and started him on treatment with a dopamine agonist.

The patient has returned to the clinic today to further discuss his diagnosis and future management.

Your task is to answer the patient’s questions about his diagnosis and further management.

DO NOT EXAMINE THE PATIENT

DO NOT TAKE A HISTORY

Any notes you make must be handed to the examiners at the end of the station.
PACES Station 4: COMMUNICATION SKILLS & ETHICS

Your role: You are the patient, Mr George Campbell, a 65-year-old man
Problem: Discussing the diagnosis and management of Parkinson’s disease with a newly diagnosed patient

Scenario:
You were diagnosed with Parkinson’s disease by a specialist 6 weeks ago. You had already researched your symptoms (which started about 6 months ago) on the internet and suspected that you might have Parkinson’s disease. You have had a good response to the treatment that the consultant gave you. The tremor is still present, but you do not feel as slow and feel as if you can use the right hand more effectively. You are aware that it is a progressive disease and that your symptoms are likely to get worse in the future.

Attitude and emotional responses
Although you suspected the diagnosis, you were upset when it was confirmed by the specialist. You are very concerned about the impact that it is likely to have on your future. You are very active and are worried that you will have to give up your favourite hobbies of golf and cycling. You are married and are worried about the impact it will have on your wife if she has to care for you. You are also concerned about losing your driving licence.

Make sure you ask the following question:
- What support is available for the future?

Other questions you might like to ask include:
- Will I be able to drive?
- Are there any clinical trials that I could participate in?
Examiners should advise candidates when there are 2 minutes remaining (i.e. after 12 minutes). If the candidate appears to have finished early remind them how long is left at the station and enquire if there is anything else they would like to ask, or whether they have finished. If they have finished, please remain silent and allow the candidate that time for reflection. The surrogate should remain until the end of the 14-minute period.

A good candidate would be expected to have agreed a summary plan of action with the subject before closure. Nonetheless, in discussion, the examiners will usually ask the candidate (after one minute’s reflection) to summarise the problems raised in the foregoing exchange.

The candidate should be asked to identify the ethical and/or legal issues raised in this case and how they would address them. The framework for discussion should include consideration of these four underlying principles:
- Respect for the patient’s autonomy
- Duty to do good
- Duty to do no harm
- Legal aspects (a detailed knowledge of medical law is not required)

Candidates are not expected to have a detailed knowledge of medical jurisprudence. For overseas candidates in the UK, detailed knowledge of UK law is not required, although candidates should be aware of general legal and ethical principles that may affect the case in question.

The candidate should recognise his/her limit in dealing with a problem and know when, and from where, to seek further advice and support.

Examiners should refer to the marking guidelines in the four skill domains on the marksheet.

Examiners are reminded that, during the calibration process, the surrogate should be rehearsed and specific aspects of the scenario that require clarification or emphasis should be discussed. The boxes on the next page indicate areas of potential interest in this case which both examiners should consider, along with any other areas they feel appropriate. Examiners must agree the issues that a candidate should address to achieve a Satisfactory award for each skill and record these on the calibration sheet provided. Examiners should also agree the criteria for an Unsatisfactory award at each skill.
Problem: Discussing the diagnosis and management of Parkinson's disease with a newly diagnosed patient

Candidate’s role: The doctor in the general medical outpatient clinic

Surrogate’s role: The patient, Mr George Campbell, a 65-year-old man

Examiners are reminded the areas below indicate areas of potential interest, but are not intended as absolute determiners of Satisfactory performance. It is for the examiners to agree and record the specific criteria they will assess the candidate on during the calibration process.

During the interview please use the following question to explore aspects of communication and ethical interest:

- What issues should be discussed with a patient before they participate in clinical research?

Clinical Communication Skills (Clinical Skill C)
- Shows empathy
- Elicits the patient’s concerns about his diagnosis
- Listens to patient’s requests regarding treatment options

Managing Patients’ Concerns (Clinical Skill F)
- Advises the patient to inform the local driving authority
- Offers sources of support such as a specialist nurse, regular clinic appointments and charities such as Parkinson’s UK
- Suggests that multidisciplinary support such as physiotherapy, occupational therapy and speech and language therapy will be available if he needs it
- Suggests advance care planning so that his wishes can be upheld in the future

Clinical Judgement (Clinical Skill E) (also points of ethical interest)
- Explains that there is currently no cure for Parkinson’s, but that symptoms can be managed for many years with medication
- Explains that stem cell therapy is still an experimental therapy with limited evidence of benefit and is not routinely available in the UK

Maintaining Patient Welfare (Clinical Skill G)
See marksheet