

MRCP(UK) PACES

Station 5: BRIEF CLINICAL CONSULTATION

Patient details: Mr Joe Brown aged 22.
Your role: You are the doctor in the medical admissions unit.

You have 10 minutes with each patient. The examiners will alert you when 6 minutes have elapsed and will stop you after 8 minutes. In the remaining 2 minutes, one examiner will ask you to **report on any abnormal physical signs** elicited, your **diagnosis or differential diagnoses**, and your **plan for management** (if not already clear from your discussion with the patient).

Referral text:

Clinical problem: This man presented to the medical admissions unit with a sudden onset of severe headache.

Physiological observations for the patient above	Reading on arrival
Respiratory rate (respirations per minute)	18
Pulse rate (beats per minute)	86
Systolic blood pressure (mm Hg)	114
Diastolic blood pressure (mm Hg)	76
Oxygen saturations (%)	98
Temperature °C	36.5
Other relevant observation data (units if applicable)	N/A

Your task is to:

- Assess the problem by means of a brief focused clinical history and a relevant physical examination. You do not need to complete the history before carrying out an appropriate examination.
- Advise the patient of your probable diagnosis (or differential diagnoses), and your plan for investigation and treatment, where appropriate.
- Respond directly to any specific questions / concerns which the patient may have.

Any notes you make may be taken into the examination room for your reference, but must be handed to the examiners at the end of the station.

NOT TO BE SEEN BY CANDIDATES**MRCP(UK) PACES****Station 5: BRIEF CLINICAL CONSULTATION**

Candidates will have a very limited time (8 minutes) with you to gather all the information they require, perform an examination and explain what further tests or treatments they would like to arrange, as well as answer your questions. The scenario below may be based upon your case, however, some aspects of your medical history may have been simplified or left out from the scenario for the purpose of the exam, for example other health problems, previous tests and treatments. It is very important that you stick to the history given below and do not deviate from it. This is essential to ensure that the exam is fair for all candidates. Those organising the exam will contact you beforehand to run through the scenario with you. Please read through the history carefully as you will have the opportunity at that point to raise any questions or concerns you may have.

You are: Mr Joe Brown aged 22.
You are in: the medical admissions unit.

History of current problem**Information to be volunteered at the start of the consultation**

You had a mild, generalised headache all day yesterday but you were able to go to college as usual. You were woken up at 3 am this morning with a severe headache. The pain started all over your head but it now feels as if the top of your head is in a clamp. Your neck is a little stiff and sore, along with a general ache in the top of your shoulders. The painkillers that you have been given (Nurofen) help a little.

Information to be given *if asked*

If you rated the severity of the pain, it would be 10 out of 10.

You do not feel sick and have not vomited.

You haven't had any feverish symptoms, cold symptoms or any other symptoms of infection of any kind. Your eyes are a little bit sensitive to bright light which makes you feel uncomfortable but it does not make your headache worse. You have had no problems with your speech or the function of your limbs. You have had no disturbance of your vision except for the slight sensitivity to bright light. You have no history of migraine.

Background information**Past medical and surgical history**

You have never been ill before or had any operations.

Relevant family history

You are the eldest of three children. Your siblings and your parents are alive, fit and well.

Medication record

Current medications (Please bring a list of your treatment with you and show it to the doctor if asked.)

You are not on any medications.

Personal history

Relevant personal, social or travel history

You are single.

You smoke socially. You drink up to three pints of beer or cider at weekends only.

Occupational history

You are a full-time student in the dramatic arts.

Physical Examination

The doctor will examine your eyes, face and neck. They may examine your arms and legs briefly, to check the strength.

You have a few specific questions / concerns for the doctor at this consultation.

Please note them down on a small card to remind you during the exam.

1. What is causing my headache?
2. Will it get better?
3. Will it happen again?

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DATE	CYCLE

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Examiners should advise candidates after 6 minutes have elapsed that “You have two minutes remaining with your patient”. 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 examine. If they have finished, please remain silent and allow the candidate that time for reflection.

The examiner should ask the candidate to describe any abnormal physical findings that have been identified. The examiner should also ask the candidate to give the preferred diagnosis and any differential diagnoses that are being considered. Any remaining areas of uncertainty, eg regarding the plan for investigation or management of the problem may be addressed in any time that remains.

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

Examiners must fully rehearse the scenario with the patient / surrogate during calibration. 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.

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Problem:	Sudden severe headache & subarachnoid haemorrhage.
Candidate's role:	The doctor in the medical admissions unit.
Patient details:	Mr Joe Brown aged 22.
Patient or surrogate:	Surrogate.
Clinical setting:	The medical admissions unit.

Examiners are reminded that the boxes 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.

Clinical skill	Key issues
Clinical Communication Skills (C)	Takes an appropriate history for a patient presenting with sudden onset headache, in particular assessing for the possibility of migraine, meningitis, tension headache as well as subarachnoid haemorrhage.
Physical Examination (A)	Notes the physiological observations. Performs a rapid screening neurological examination in particular checking for neck stiffness.
Clinical Judgment (E)	Routine bloods including inflammatory markers. Explains that the patient needs a CT or MRI brain scan urgently, followed by a lumbar puncture and analysis of CSF if the brain scan is normal. Explanation of management and likely outcome.
Managing Patients' Concerns (F)	Addresses the patient's questions and concerns in an appropriate manner.
Identifying Physical Signs (B)	No abnormal physical signs.
Differential Diagnosis (D)	Probable Diagnosis: Subarachnoid haemorrhage. Plausible alternative diagnoses: Tension headache, migraine.
Maintaining Patient Welfare (G)	Treats the patient respectfully, sensitively and ensures comfort, safety and dignity. Does not cause physical or emotional discomfort or jeopardise safety.