

PACES Station 4: COMMUNICATION SKILLS & ETHICS

Your role:	You are the doctor on the acute medicine unit
Problem:	Administration of an antibiotic treatment to the wrong patient
Patient:	Mrs Anne Smith, a 55-year-old woman

Please read the scenario printed below. When the bell sounds, enter the room. You have 14 minutes for your consultation with the patient/relative, 1 minute to collect your thoughts and 5 minutes for discussion. You may make notes if you wish.

Where relevant, assume you have the patient's consent to discuss their condition with the relative/surrogate.

Scenario:

Towards the end of a long and busy shift, you were asked by a nurse to administer the first dose of an antibiotic to a patient, for management of pneumonia.

Following administration of the drug, you realised that you had made an error in identification of the patient and administered the treatment to a patient with a similar name. This patient, who has chronic obstructive pulmonary disease, has been clinically assessed and observed and has come to no harm.

You have reported the error to a senior member of the medical team seeking advice on what to do and have agreed to speak to the patient to discuss the situation.

Your task is to explain the error to the patient.

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.

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Your role: You are the patient, Mrs Anne Smith, a 55-year-old woman
Problem: Administration of an antibiotic treatment to the wrong patient

Scenario:

You were admitted overnight with a worsening of your symptoms of wheeze and breathlessness. You have a past history of chronic obstructive pulmonary disease and have smoked approximately 20 cigarettes per day all your adult life. You recently completed a 1-week course of antibiotics with a reduction in your sputum production. The sputum is no longer green.

On admission to hospital, the doctor in the emergency department indicated that there were no signs of infection on examination and that blood testing and chest X-ray were normal. You have been admitted for treatment with nebulisers, steroids and for further investigation. You were told that you would not need a course of antibiotics and were surprised when the doctor arrived earlier to give you intravenous antibiotic treatment.

The doctor has called to explain that there has been a medication error and you have been given a course of antibiotic inadvertently.

Attitude and emotional responses

You are upset and angry that you have received a treatment that was not needed.

You are worried that this might cause harm as you are aware that too many antibiotics can cause resistance to treatment and bowel infections.

You understand that the ward is very busy and that the medical staff are under pressure while looking after a large number of patients.

Make sure you ask the following question:

- How could this problem have occurred and who is responsible?
- Will I come to any harm?

Other questions you might like to ask include:

- How can this problem be prevented in the future?

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DATE	CYCLE

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:	Administration of an antibiotic treatment to the wrong patient
Candidate's role:	The doctor on the acute medicine unit
Surrogate's role:	The patient, Mrs Anne Smith, a 55-year-old woman

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 are the key ethical issues arising from this case?

Clinical Communication Skills (Clinical Skill C)

- Provides a clear explanation of the medical error
- Openness, honesty and transparency
- Listens to the patient and shows empathy

Managing Patients' Concerns (Clinical Skill F)

- Acknowledges the patient's concerns and explains management plan
- Recognises ethical and legal considerations around the case
- Understands how the problem has occurred and how it can be avoided in future

Clinical Judgement (Clinical Skill E) (also points of ethical interest)

- Is aware that a clinical incident has occurred and needs to be reported (Examiner to explore details)
- Seeks senior help and takes clear documentary record of events and discussion with patient
- Engagement with senior team and clinical supervisor
- Risk management strategies to prevent future errors

Maintaining Patient Welfare (Clinical Skill G)

See marksheet