

PACES Station 4: COMMUNICATION SKILLS & ETHICS

Your role: You are the doctor in the clinic
Problem: Explaining a diagnosis of multiple sclerosis
Patient: Mrs Karen Craig, a 30-year-old married accountant with no children

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:

You are about to see this patient who attended as an inpatient 3 weeks ago. You were away on annual leave at the time so have not met her before. At that time she presented with weakness of her left leg, which had developed over a few days. She also gave a history of transient visual disturbance for a few days 1 year previously. No possible diagnoses were discussed at the time.

An MR scan of brain/upper spinal cord test has revealed extensive white-matter plaques including periventricular lesions and cervical cord lesions. She was also found to have delayed visual-evoked responses in her left eye. A lumbar puncture has shown oligoclonal bands present in cerebrospinal fluid which are not seen in serum.

Your task is to explain the results of the various tests and discuss the clinical diagnosis of multiple sclerosis. You should also answer any questions that the patient may have and discuss any other appropriate issues.

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 Karen Craig, a 30-year-old married accountant with no children
- Problem:** Explaining a diagnosis of multiple sclerosis

Scenario:

About 3 weeks ago you noticed that your left leg had become increasingly weak to the point that you felt you were dragging it around behind you. You were admitted to hospital and the leg improved without any treatment. A number of tests were performed while you were an inpatient. One involved having your head scanned inside a long tunnel (MR brainscan), another involved looking at flashing lights while recordings were made from patches stuck to the back of your head (visual-evoked responses). The final test involved having a needle in your back to remove some fluid from around the spine (lumbar puncture).

You have returned to the clinic today to find out about the results of these tests. You are very keen to find out what the problem actually was because none of the doctors or nurses you spoke to during your stay mentioned a cause for all of this, just the need for 'lots of tests before they could really say'. About a year ago, the vision in your left eye became blurred. It settled after about a week and you did not seek medical help at the time. You had forgotten all about it until the doctor asked you about this when you were in hospital for the tests.

Attitude and emotional responses

Your emotional response will be one of fear and rising panic at the unexpected finding of multiple sclerosis but you will come to terms with this if it is properly explained.

Make sure you ask the following question:

- What are the results of the tests and do they show a cause for my symptoms?

Other questions you might like to ask include:

- What treatment is available?
- What are the chances that the symptoms will recur?
- Will I be able to continue working?
- Can I have children?
- Can I drive?
- What is the long-term outlook?
- Will I end up in a wheelchair?

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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:	Explaining a diagnosis of multiple sclerosis
Candidate's role:	The doctor in the clinic
Surrogate's role:	The patient, Mrs Karen Craig, a 30-year-old married accountant with no children

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:

- In answering the patient's question about the diagnosis, what factors did you take into account and why?

Clinical Communication Skills (Clinical Skill C)

- Explains the results of investigations
- Explains the diagnosis of multiple sclerosis in terms appropriate to a non-medical person, including the possibility of further relapses and progression of the disease

Managing Patients' Concerns (Clinical Skill F)

- Addresses the patient's concerns appropriately

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

- Explains the implications of this diagnosis sensitively
- Discusses prognosis in general terms
- Discusses any treatments about which the patient may enquire, e.g. interferon therapy
- Is aware of own limitations, would refer for help if required
- Is honest about the uncertain prognosis

Maintaining Patient Welfare (Clinical Skill G)

See marksheet