

PACES Station 4: COMMUNICATION SKILLS & ETHICS

Your role:	You are the doctor in the outpatient department
Problem:	Explaining the need for lifestyle changes to a patient with rheumatoid arthritis
Patient:	Mr Robert Dawes, a 45-year-old man

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:

This patient has been found to have rheumatoid arthritis. The symptoms began 6 months ago. He is being treated with methotrexate 20 mg weekly but is not responding well to treatment. He still has symptoms of stiffness and pain. His liver function tests showed an abnormal serum alanine aminotransferase of 62 U/L (normal range: 5–35), although the serum alkaline phosphatase was normal. He is obese, smokes, and drinks two glasses of wine almost every evening.

I would be grateful if you would discuss lifestyle changes with the patient, which could help to control his rheumatoid arthritis more effectively.

Your task is to explain to the patient the need to stop smoking, reduce alcohol intake and lose weight.

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, Mr Robert Dawes, a 45-year-old man
Problem: Explaining the need for lifestyle changes to a patient with rheumatoid arthritis

Scenario:

Over the past 6 months, you have had pain and stiffness in multiple joints. This has included your hands, feet, knees and shoulders. Your joint stiffness is worse in the mornings. You attended the rheumatology clinic 5 months ago and were told that you have rheumatoid arthritis and would need regular medication to treat it. You were given a lot of information at the clinic but found it difficult to remember everything that was said.

You have been taking a medication called methotrexate for 4 months. You take eight tablets each week and have regular blood tests. You are also taking regular painkillers, although you continue to have pain and stiffness in your joints. It is not as severe as it was 4 months ago but is still affecting your life. You have always been well previously and there is nobody in your family with rheumatoid arthritis.

The joint symptoms have affected your life. You work in computing, in an office most of the time. You had a few weeks off sick when the symptoms first started; you have now returned to work and it is important for your career that you do not have more time off sick.

You used to cycle to work. You felt this kept you fit, and you regret that you have not been able to cycle since you developed joint pain and stiffness. Your weight has increased, which you have put this down to lack of exercise.

You are a smoker; you smoke 20 cigarettes per day and have done for 20 years. You understand that smoking is not good for your health but you feel that stopping at the moment would be difficult, as you find smoking helps you to relax and your pain seems to be worse when you are under stress.

You drink one or two glasses of wine most evenings. You feel that the wine helps you relax and sleep better. You have been avoiding alcohol on the day that you take your methotrexate tablets. You have been told that your liver tests are abnormal.

You have two children, aged 15 and 10 years. They live with your ex-wife, from whom you separated 3 years ago.

Attitude and emotional responses

You are worried about the arthritis and the effect it has had on you. You realise that smoking is not good for you but feel you have other priorities at present and that this is not the time to stop. You need to continue working and not take any more time off sick.

You are trying to cope with pain of the arthritis. You understand that there has been some improvement over the past 4 months but you are worried that improvement is slow.

You would like to be doing more exercise as you know the lack of exercise is making you unfit and put weight on. However, you feel that more exercise will increase your pain and might damage your joints.

Make sure you ask the following question:

- Is there anything I can do to help treat my arthritis?
- Will exercise damage my joints?

Other questions you might like to ask include:

- Can a diet help with my arthritis?
- Should I worry about the abnormal liver function tests?

NOT TO BE USED IN THE EXAM

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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 the need for lifestyle changes to a patient with rheumatoid arthritis
Candidate's role:	The doctor in the outpatient clinic
Surrogate's role:	The patient, Mr Richard Dawes, a 45-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 is the importance of lifestyle change in this scenario?

Clinical Communication Skills (Clinical Skill C)

- Explains the need to stop smoking in terms the patient can understand
- Explains the need to reduce alcohol intake with reference to the abnormal liver function tests and methotrexate therapy
- Explains the need to exercise and manage weight in the context of reduced mobility from joint pain

Managing Patients' Concerns (Clinical Skill F)

- Recognises the anxiety and stress that the patient is experiencing at present
- Acknowledges the difficulty in changing lifestyle
- Recognises the patient's concerns about continuing to work

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

- Is aware of the adverse effect smoking has on rheumatoid arthritis, and the fact that it is a risk factor for disease onset and increased cardiovascular risk in rheumatoid arthritis
- Is aware that the optimum weight for a patient with rheumatoid arthritis is normal body mass index
- Is aware of the adverse effect of alcohol and methotrexate on liver function

Maintaining Patient Welfare (Clinical Skill G)

See marksheet