



Cabrini Practice OSCE 11

Candidate Information:

You are Consultant in charge in an urban district ED. It is 9pm on a weekday. A resident has come to you because the paediatric surgical registrar has refused to accept their patient. The Registrar was very rude on the phone and your resident is upset. They aggressively yelled at your resident and hung up the phone during the conversation. Your Resident states that they have not been spoken to like this before.

The patient is a 6 year old boy who you have assessed and are happy they have appendicitis. His testicles examine normally and urinalysis is negative.

The patient has an IV cannula. He is comfortable after receiving IV fentanyl. Bloods tests showed WCC $17.0 \times 10^9/L$. You do not have access to an afterhours Ultrasound service.

Current vital signs of patient:

Temp 37.5C

HR 110

RR 25

Your Tasks:

1. Counsel your resident regarding their interaction with the Paediatric Surgical Registrar
2. Make a phone call to the Paediatric Surgical Registrar and re-refer the patient and address the issues regarding their initial interaction with your resident.

Domains:

Communication	40%
Professionalism	30%
Health Advocacy	30%



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Resident Role Player Instructions: 0-2:30mins

You are a first year ED resident, who has been in the ED for 2 weeks. You are planning on complete Physician Training.

You are happy that you have assessed this 6 year old boy and felt that his most likely diagnosis is appendicitis.

You made a phone referral (with the blood result pending) to the onsite Paediatric Surgical Registrar who was rude and dismissive and yelled at you, stating that your assessment was "half baked" and to

"stop wasting my time and call me back when your boss has properly assessed the patient".

"I don't take referrals until all the blood results are back"

The Paediatric Surgical Registrar then hung up the phone mid-conversation.

You are upset by this interaction and your confidence has been affected. You don't know what you did wrong. You have not been spoken to like this in the past.

You are to describe your phone call with the Registrar and request that your consultant calls them to re-refer the patient.



Paediatric Surgical Registrar Role Player Instructions: 2:30-7mins

You are a first year paediatrics surgical registrar working in an urban district hospital. It is 2100hrs. You have been operating since 7am and have just left the hospital.

You received a phone referral from an ED resident about a 6 year old boy with suspected appendicitis. The resident failed to give you any further details on clinical findings of the patient and had not sought a senior ED medical officer's opinion prior to the referral. Also the blood results were pending at the time of the referral.

You would have liked more clinical details from the resident and a review by the ED senior doctor first prior to accepting the referral. However, you have had a long day. Instead of speaking professionally like you normally would, you said bluntly to the resident "I am not accepting this patient as you have not worked him up", and then you hung up.

Instructions for the phone call:

Now you receive a phone call from the ED consultant (the candidate) of the resident, requesting surgical review and admission of the patient.

You have had a long day and you really do not want to go back to the hospital to review the patient. You become defensive if you feel disrespected. However, you will accept the care of the patient if your concerns are addressed appropriately.

Questions you have for the ED consultant:

"Have you seen the patient yourself?"

"Well, your resident has not assessed the patient properly. They did not have the blood results back"

"Can you organise an ultrasound to confirm appendicitis?"

"Since the patient is stable and pain free now, can you keep them in ED short stay and I can review them in the morning?"



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Examiner Marking Sheet

COMPONENT ASSESSMENT

For each Domain below, select the ONE best option that best represents the candidate's level of performance. The option "**minimum level of competency displayed**" represents the level of safe independent practice as a junior **FACEM** in Australasia

Very poor level of competence displayed	Well below minimum level of competence displayed	Below minimum level of competence displayed	Minimum level of competence displayed	Above minimum level of competence displayed	High level of competence displayed	Very high level of competence displayed
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Please rate ALL of the following domains:

Communication	☐	☐	☐	☐	☐	☐	☐
Professionalism	☐	☐	☐	☐	☐	☐	☐
Health Advocacy	☐	☐	☐	☐	☐	☐	☐

[Detailed assessment criteria](#)

Please use the following criteria to inform your ratings above (mandatory items in ***bold italics***)

Communication:

Resident interaction: 0-2:30mins

- Appropriately introduce self to the resident
- Counsel/support ED resident** regarding their interaction with the registrar - use of ISBAR (Identify/Situation/Background/Assessment/Recommendation) or similar communication tool
- Explain to the resident this **interaction is unacceptable** and you will advocate for them

Paediatric Surgical Registrar phone call: 2:30-7mins

- Appropriately introduce self to the registrar
- Summarise findings** that support diagnosis in a concise manner
- Request admission** of patient tonight for surgical review
- **Be assertive** and resolve situation by explaining assessment and plan that needs to occur
- Acknowledge and address concerns** of the paediatric surgical registrar
- Make it clear that the paediatric surgical registrar's **behaviour is unacceptable**

Professionalism:

- Maintain professional tone and speech- with **measured non-emotive** responses
- explore both sides** of the interaction



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Health Advocate:

- Advocate for paediatric patient** to admission for definitive care
- Advocate for ED resident** and support them by challenging surgical registrar's behaviour and request apology for your resident, feedback to surgical registrar's supervisor

Station Summary: Conflict resolution with Surgical Registrar reading a patient with appendicitis

INFORMATION

EXAMINER NOTES (For examiner reference only)

OSCE 'incident reporting' notes: Please provide details if an issue occurs which may influence the candidate's

exam outcome e.g. protocol breach, candidate illness, etc.

GLOBAL RATING FOR STANDARD SETTING:

This scale is used in the standard setting process for the OSCE. Please rate the candidate's OVERALL performance in this OSCE. The rating should take into account the entirety of the OSCE, rather than just a sum average of the individual domain scores. This element MUST be completed for the standard of the examination to be set.

	Well Below Standard	Below Standard	Just at Standard	Above Standard	Well Above Standard
In terms of a safely practicing junior emergency physician , select the ONE option that best reflects the candidate's performance in this station:	☐	☐	☐	☐	☐

EXAMINER SIGNATURE: