

Cabrini Practice OSCE 2

Candidate Information:

You are to demonstrate how you would perform a clinical examination of a patient who has been punched to their right eye.

You will interact with the Examiner and demonstrate your clinical examination to the Examiner on a healthy volunteer.

Your Tasks:

1. Demonstrate your clinical examination.
2. Answer the Examiner's Questions.

Domains:

Medical Expertise

- Examination 50%
- Management 30%

Prioritisation and Decision Making 20%

Examiner Instructions:

You are assessing the candidate on their ability to assess an eye injury.

The candidate will demonstrate how to perform the eye examination on a medical student volunteer.

You are to interact with the candidate lead the OSCE and question the candidate regarding their examination and assessment of eye injuries.

Further question prior to 5 Minutes ***“Are there any other examinations you would perform for an eye injury from a punch?”***

At 5 minutes ***“If the patient had a CT diagnosing a retro-orbital haematoma and you were concerned about an orbital compartment syndrome, could you describe how you would manage this?”***

Props:

Snellen Chart

Pen torch

No drops, tonopen or slit lamp

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 the following domains:

Prioritization and Decision Making	☐	☐	☐	☐	☐	☐	☐
Medical Expertise - Examination	☐	☐	☐	☐	☐	☐	☐
Medical Expertise –Management	☐	☐	☐	☐	☐	☐	☐

[Detailed assessment criteria](#)

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

Prioritization and Decision Making

- identify eye emergency
- rapidly manage with lateral canthotomy without delay for ophthalmological consultation

Medical Expertise

- Examination -systematic eye examination including
 - acuity**, pupils, eye **movements**, visual fields, fundoscopy, bony orbital rim assessment, slit lamp, fluorescein staining, tonometry, evert eye lids
 - seeking injuries- (**at least 3**) Bow out #/hyphema/sub conj haem/foreign body/globe rupture/corneal abrasion/orbital compartment syndrome
 - also examine for intracranial injury and cervical spine injury
- Management- Emergency **canthotomy/cantholysis** (indications IOP > 40, RAPD, proptosis)
 - infiltration with **local anaesthetic**
 - **clamp** skin at lateral edge of eye (1-2mins)
 - use scissors to make 1cm **incision** extending from the lateral corner of the eye (canthotomy)
 - cantholysis (usually required to adequately reduce IOP) –retract lower lid away from globe and palpate lower canthus and **cut the inferior crus**, can also cut superior crus

Station Summary: Demonstration of eye trauma exam and explanation of a lateral canthotomy

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 practising junior emergency physician , select the ONE option that best reflects the candidate's performance in this station:	☐	☐	☐	☐	☐

EXAMINER SIGNATURE: