

### **Cabrini Practice OSCE 3**

#### **Candidate Instructions:**

You are the Consultant in charge of a tertiary ED on a Sunday evening when your resident requests your assistance with a 25 year old Alex with chronic lower back pain.

They have re-presented with ongoing chronic lower back pain after a fall at work 3 years ago. They have been extensively investigated with blood tests, urine, CT and MRI spine in the past without significant pathology identified.

They are requesting Oxycodone since their previous supply has run out.

Your resident has performed a thorough examination (including lower limb neurological examination) which is normal. The patient has become aggressive and abusive towards your resident and they have asked for your assistance.

#### **Your Tasks:**

1. Address the patients current state
2. Arrange ongoing analgesia and a follow-up plan

#### **Domains:**

|                   |     |
|-------------------|-----|
| Communication     | 50% |
| Medical Expertise | 20% |
| Health Advocacy   | 30% |

**Role Player Instructions:**

You are Alex a 25 year old with chronic lower back pain ever since you slipped at work on a wet floor 3 years ago.

You have represented to the ED requesting oxycodone since you have been using increasing doses and have run out.

Your local GP usually prescribes oxycodone but they are on holiday.

You have become **frustrated and angry** with the ED residents many questions and elaborate examination without giving you the drugs.

You will now speak to the doctor in charge and express your anger and being treated so badly and frustration at not getting the pain killers you need.

You report lowered mood and loss of interest in usual activities. You are unable to work due to your back pain.

**Other PHx**

Anxiety

Asthma

**Medications-**

Oxycodone 5-15mg up to every 2 hours when pain severe

Mersyndol Forte 2 tablets 4 x day prn (Paracetamol; Codeine phosphate; Doxylamine succinate-antihistamine sedative)

Allergies- NSAIDs (due to your asthma), Panadol "doesn't work"

SHx lives with parents, on disability pension, regular alcohol, smoker 1 pack/day, occasional marijuana use for chronic pain

**Questions:**

*Are you going to give me my pain killers?*

*Why did you send that junior burger to see me? Get me a real doctor!*

*Nothing works except for Endone!*

After adequate explanation you calm down and agree to doctor's plan.

## 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 competency displayed | Well below minimum level of competency displayed | Below minimum level of competency displayed | Minimum level of competency displayed | Above minimum level of competency displayed | High level of competency displayed | Very high level of competency displayed |
|-----------------------------------------|--------------------------------------------------|---------------------------------------------|---------------------------------------|---------------------------------------------|------------------------------------|-----------------------------------------|
|-----------------------------------------|--------------------------------------------------|---------------------------------------------|---------------------------------------|---------------------------------------------|------------------------------------|-----------------------------------------|

Please rate **ALL** the following domains:

|                   |                       |                       |                       |                       |                       |                       |                       |
|-------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Communication     | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Medical Expertise | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Health Advocacy   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

[Detailed assessment criteria](#)

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

#### Communication:

- clear, **non-judgmental**
- empathy and **understanding regarding suffering** from chronic pain
- explanation of pain killer regime and how they work
- explanation of why can't prescribe long term oxycodone- explain opiate dependence**, accept short course to cover for next 24 hours
- be assertive** and set boundaries with clear expectations
- arrange **follow-up**

#### Medical Expertise:

- Explore current analgesic regime
- Appropriate **analgesic regime**- Paracetamol, NSAID (not contraindicated with asthma), consider long acting opiates e.g. Targin, also non-pharmacological treatment e.g. physio/heat/TENS/Anaesthetics pain service/epidural injection, also cease mersyndol

#### Health Advocacy:

- resist adding to patient's opiate dependence
- arrange follow-up and **chronic pain service**
- explore social supports and mental health issues e.g. reactive Depression from chronic pain

Station Summary:

## 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<br>Standard | Below<br>Standard     | Just at<br>Standard   | Above<br>Standard     | Well Above<br>Standard |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------------------|-----------------------|-----------------------|------------------------|
| In terms of a <b>safely practising junior emergency physician</b> , select the ONE option that best reflects the candidate's performance in this station: | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>  |

EXAMINER SIGNATURE: