

**MRCP(UK) PACES**

## Station 4: COMMUNICATION SKILLS AND ETHICS

<b>Your role:</b>	You are the medical officer on the ward
<b>Problem</b>	Explanation of post-myocardial infarction care
<b>Patient:</b>	Ms Tonia Bolton, a 45-year-old heavy-goods vehicle driver

Please read the scenario printed below. When the bell sounds, enter the room. You have 14 minutes for your consultation with the patient, 1 minute to collect your thoughts and 5 minutes for discussion. You may make notes if you wish.

Where relevant, assume that you have the patient's consent to discuss their condition with the relative/surrogate.

**Scenario**

The patient has recently been transferred from the coronary care unit. She suffered a large anterior myocardial infarction, which was treated successfully by thrombolysis 5 days ago. Her post-infarct course has been uncomplicated. She has no previous history of ischaemic heart disease but there is a strong family history, her father having died of a myocardial infarction aged 52. The patient smoked 20 cigarettes per day until the day of admission.

Currently her blood pressure is 120/70 mmHg, her heart rate is 80 beats per minute and regular and her chest is clear. There are no murmurs on auscultation. Prior to discharge she will need an echocardiogram and an exercise tolerance test. Her current medication is aspirin 75mg daily, metoprolol 25 mg bd, ramipril 5 mg daily and simvastatin 40 mg at night.

**Your task** is to advise the patient of the further investigations that are needed, the need to change her lifestyle to reduce risk of recurrence, the drugs she has been prescribed and the implications for her work as a Heavy Goods Vehicle (HGV) Driver.

The Driver and Vehicle Licensing Agency (DVLA) regulations state that a patient must be off metoprolol for 48 hours prior to Exercise test and for HGV drivers they are disqualified from driving for 6 weeks (providing exercise test is negative).

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, Ms Tonia Bolton, a 45-year-old heavy-goods vehicle driver  
**Problem:** Explanation of post-myocardial infarction care.

**Scenario:**

You suffered a heart attack five days ago and are currently convalescing on the cardiology ward. You are beginning to realise the implications the heart attack may have on your future employment as a heavy-goods vehicle (HGV) driver. You have been feeling physically well since the pain in your chest went away and are now more in a frame of mind to discuss what happened, what will happen and what the future holds for you.

You do not look after yourself very well. You eat irregularly between driving, smoke 20 cigarettes per day and drink several pints when you are not going to be driving. You have not smoked since admission. You have previously been well, but you have a family history of heart disease, your father having died of a heart attack when he was 52.

**Attitude and emotional responses**

You are not used to being ill and want to resume normal life as soon as possible. You are a little dismissive of the need for changes to your lifestyle; you will need convincing that these really are necessary.

**Make sure you ask the following question:**

- How much damage was done to my heart muscle during the heart attack?

**Other questions you might ask include:**

- Will I make a complete recovery?
- Will I need any other investigations before going home?
- When can I stop all the medications I have been given since admission?
- Do I have to change my diet or stop smoking? What help can I get to stop smoking?
- Will I be able to get back to work as a heavy goods vehicle driver?

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DATE	CYCLE

**Station 4: COMMUNICATION SKILLS AND ETHICS**

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 mark sheet.

The box on the following page indicates areas of potential interest in this case. Both examiners should consider these, and any other areas they feel appropriate, and agree the issues that a candidate should address to achieve a Satisfactory award for each skill. These should be recorded on the calibration sheet provided.

Examiners should also agree the criteria for an Unsatisfactory award for each skill.

**Continued on next page...**

# NOT TO BE SEEN BY CANDIDATES

## INFORMATION FOR THE EXAMINERS

Scenario N° EX3

<b>Problem:</b>	Explanation of post-myocardial infarction care
<b>Candidate's role:</b>	A medical officer on the ward
<b>Surrogate's role:</b>	The patient, Ms Tonia Bolton, a 45-year-old heavy-goods vehicle driver

Examiners are reminded that the boxes 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:**

To what extent are you able to dictate the need for lifestyle changes necessary for this patient's management?

### Clinical skills    Key issues

Clinical Communication Skills (C)	<ul style="list-style-type: none"><li>– Explains the nature of a myocardial infarction.</li><li>– Explains routine post-myocardial infarction management including what happens during echocardiograph and exercise tolerance testing; why these tests are being done, and what information they provide.</li></ul>
Managing Patients' Concerns (F):	<ul style="list-style-type: none"><li>– Explains the reason for taking the drugs he has been prescribed</li><li>– Talks generally about post-myocardial infarction rehabilitation and goes into some detail as to the implications for heavy-goods vehicle license holders (she may not drive for six weeks and must inform the DVLA). Provided he has an exercise test and there are no other ongoing clinical problems he may be permitted to resume driving heavy-goods vehicles.</li></ul>
Clinical Judgement (Skill E): (also points of ethical interest)	<ul style="list-style-type: none"><li>– Discusses lifestyle issues such as smoking, exercise and diet.</li><li>– Respects the patient's autonomy.</li><li>– Establishes trust and rapport.</li></ul>
Maintaining Patient Welfare (Skill G):	See mark sheet.