



MSSBU OSCE PRACTICE

CASE 4_04_02

Station Vignette

You are a 4th year student on GP rotation

The GP has asked you to take a brief history from Joseph, a 23-year-old male who has come into the practice. He is a regular patient of yours. He has come into the office as he has become increasingly fearful to leave his house and this is affecting his ability to take on daily tasks.

TASK

You have a total of **7 minutes** to take a history.

This includes:

- History of presenting complaint
- Constitutional history
- Past medical history
- Medications history
- Social history
- Family history
- Focussed systems review

At the end of the allotted time, you will have **1 minute** to answer the examiner's questions.

You do **NOT** need to complete a physical examination

PATIENT INSTRUCTIONS

You are a 23yo male who has previously been well. For 6 months you have been hearing voices talking to you.

- They appear to come from the outside, like they are being broadcasted into your head via what you believe is a microchip in your brain.
- Since they began, they have been mentioning undercover police officers trying to frame you for a crime you haven't committed. You are in quite a lot of distress.
- When it first began, the voices and intrusive thoughts occurred once a month ... over time this has become constant.
- You hear two distinct voices: one male, one female. They have become increasingly aggressive and, in the last two days, they have been saying you should take your own life to avoid being captured. They haven't told you to hurt anyone else, and you feel no compulsion to do so. You feel in control of your actions, and have thought about how you would end your life but haven't got access to the necessary equipment yet.
- You have no history of suicide attempts.
- Your father, who had schizophrenia, left your family when you were 10 and you have not been in contact since.

- You are afraid to leave your own home over the past two weeks due to constant fear of being caught. You believe most cars parked on the street are undercover cop cars.
- You have not been to university classes for two weeks and you have also missed out on work (you work at woolworths).
- You stay in a rental property near university with on roomates or pets.

- You smoke one pack of cigarettes daily and have been since you were 17. You occasionally smoke marijuana and drink alcohol with your friends from university but have not for a few months now.
- You have been experiencing headaches for the past few weeks but refuse to take Panadol as you are worried they have been poisoned. You have not seen your friends for weeks as you are afraid they might turn you in to the police.

- Throughout the interview you should act as if the voices catch your attention at times, and if the candidate asks, explain they are saying something consistent with the history presented to you. You should look dishevelled and have a restricted affect consistent with the theme of paranoid schizophrenia. You have normal thought form and nil somatic delusions.

EXAMINER QUESTIONS

1. What is the **immediate management** for this patient?

MARKING CRITERIA – CASE 4_04_02

Item	Criteria	Mark
Introduction	<input type="checkbox"/> Hand hygiene <input type="checkbox"/> Appropriate introduction <input type="checkbox"/> Explains personal role and gains consent	/2
Presenting complaint	<input type="checkbox"/> Leads with open question <input type="checkbox"/> Follows with another open question	/6
Positive psychotic sx	<input type="checkbox"/> Other delusions (denies delusions of grandeur, somatic, parasitosis, etc.) <input type="checkbox"/> Visual/auditory/tactile hallucinations <input type="checkbox"/> Thought insertion <input type="checkbox"/> Thought broadcasting	/6
Negative psychotic sx	<input type="checkbox"/> Anhedonia, amotivation, apathy, affect blunting	/2
Precipitating factors	<input type="checkbox"/> Recent stressors <input type="checkbox"/> Substance abuse	/2
Risk screening	<input type="checkbox"/> Asks if patient has been harmed by anyone, or has harmed anyone <input type="checkbox"/> Homicidal ideation <input type="checkbox"/> Suicidal ideation <input type="checkbox"/> Symptoms of depression <input type="checkbox"/> Symptoms of mania <input type="checkbox"/> Symptoms of anxiety	/5
Social history	<input type="checkbox"/> Alcohol and Smoking history (quantity in pack-years) <input type="checkbox"/> Other drug use, especially marijuana and hallucinogens	/2
Medical history	<input type="checkbox"/> Current medications <input type="checkbox"/> Allergies <input type="checkbox"/> Family history of schizophrenia <input type="checkbox"/> Family history of other psychiatric illnesses	/4
Question	<input type="checkbox"/> Admit patient under mental health act due to risk of personal harm <input type="checkbox"/> Begin atypical antipsychotic <input type="checkbox"/> MRI <input type="checkbox"/> ECG <input type="checkbox"/> Other acceptable (only 1): urine drug screen, FBC, lft, u&e	/5
Communication skills	<input type="checkbox"/> Appropriate questioning style <input type="checkbox"/> Actively listens to patient <input type="checkbox"/> Systematic approach to history taking <input type="checkbox"/> Appropriate conclusion and summary	/3
Global	Overall impression of candidate based on warmth, clarity and competence: 1 = fail 2 = borderline 3 = pass/expected 4 = good 5 = excellent	/5
	Total	/42