



MSSBU OSCE PRACTICE CASE 4_04_03

Station Vignette

You are a 4th year student on GP rotation

The GP has asked you to take a brief history from Bryant, a 47-year-old male who has come into the practice. He is a regular patient of yours.

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

Patient details	Bryant, 47yo male, unemployed
History of presenting complaint	<ul style="list-style-type: none">• Your husband forced you to come to the GP hoping to help 'fix you'. You have not felt like yourself for a few months and believe that there is no hope left. For the last 2 months you feel like there's no point in living – and believe that the world will be on different without you in it.• If directly asked: 6 months ago your best friend committed suicide.• You have been estranged from your parents and siblings after coming out to them in your 20s.• You now sleep over 12 hours every day and wish you could asleep forever as it's the only time you feel peace.• You eat the meals your partner cooks for you but don't enjoy food anymore the way you used to.• You have seriously given thought to committing suicide and will ask the doctor if they know the easiest way to go. You have no concrete plans yet.• You quit your job 4 months ago and is currently unemployed.• Your partner is very concerned about you and tries to help but is unable to make a difference.
Past medical hx	<ul style="list-style-type: none">• Asthma as a child• Appendectomy 16yo• Previously severely bullied as a child and endured years of self harm during high school (cutting wrist). You saw a therapist for a few years during university, nothing since.
Medications hx	<ul style="list-style-type: none">• None regular
Family hx	<ul style="list-style-type: none">• Uncle with bipolar
Social hx	<ul style="list-style-type: none">• Lives at home with husband, no children• Social smoker and drinker

EXAMINER QUESTIONS

1. What are **three (3)** risk factors of suicide this patient has?

MARKING CRITERIA – Case 4_04_03

Item	Criteria	Mark
Introduction	<input type="checkbox"/> Hand hygiene <input type="checkbox"/> Appropriate introduction <input type="checkbox"/> Explains personal role and gains consent	/2
History	<input type="checkbox"/> Asks open questions <input type="checkbox"/> Establish duration of symptoms <input type="checkbox"/> Establish triggers/stressors/life events <input type="checkbox"/> Core symptoms: <ul style="list-style-type: none"> • Low mood • Anhedonia • Sleep • Appetite • Dysphoria • Fatigue • Concentration • Esteem low • Suicidal ideation 	/10
Screening for other risks	<input type="checkbox"/> Explore support system <input type="checkbox"/> Explore plans	/2
Other histories	<input type="checkbox"/> Past medical hx <input type="checkbox"/> Previous psychiatric hx <input type="checkbox"/> Allergies <input type="checkbox"/> Family hx	/4
Social history	<input type="checkbox"/> Smoking hx <input type="checkbox"/> Alcohol hx <input type="checkbox"/> Recreational drugs <input type="checkbox"/> Home environment	/4
Question	<input type="checkbox"/> 3 of: male, non-heterosexual orientation, history of self harm, low self esteem, life stresses, lack of social supports, non-intact family, suicidal ideation and planning.	/3
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	/4
Global score	Overall impression of candidate based on warmth, clarity and competence: 1 = fail 2 = borderline 3 = pass/expected 4 = good 5 = excellent	/5
	Total	/34