Your role: You are junior doctor in outpatients’ clinic.

Problem: A man with alpha-1 antitrypsin deficiency.

Patient: Mr Terry Evans, a 48 year-old man.

Please read the scenario below. When the bell sounds, enter the examination room to begin the consultation. Please remember to take this instruction sheet into the examination room with you.

Scenario:

This patient was diagnosed with alpha-1 antitrypsin deficiency about a decade ago. He has no other system involvement, apart from slightly raised transaminases. He is known to have never abused alcohol. He would like to start a family, but to your firm’s knowledge, his wife is unaware of the diagnosis.

Your task is to discuss a practical management plan for his problems.

Continued on next page...
LAW AND MEDICINE TEACHING MATERIAL

You have 14 minutes to communicate with the surrogate followed by 1 minute for reflection before 5 minutes of discussion with the examiners.

Your examiners will warn you when 12 minutes have elapsed.

Do not take the history again except for details that will help in your discussion. You may make notes if you wish on the paper provided, but do not make any marks on these instructions.

*Any notes you make must be handed to the examiners at the end of the station. You are not required to examine the patient/relative.*
NOT A REAL MRCP EXAMINATION STIMULUS

LAW AND MEDICINE TEACHING MATERIAL
MRCP(UK) PACES
Station 4: COMMUNICATION SKILLS AND ETHICS

Your role: You are the patient, Mr Terry Evans, a 48 year-old man.
Problem: Discussing the plan of management.

Scenario:

You are actually well on the whole. However, as a result of routine screening in a hospital admission for a suspected pulmonary embolism, raised transaminases were detected. After much investigation, this was eventually found to be due to alpha-1 antitrypsin deficiency, and you attend outpatients’ clinic every 6 months. You have never suffered any problems as a result of this diagnosis.

You are a freelance architect. You regularly go out for a drink after work, never drinking two pints of beer a night. You do not smoke, but you have admitted before to the hospital that you occasionally use recreational drugs. You have never been explained how this disease can affect the liver and the lungs.

You do know, however, that this disorder is genetic. You would therefore like some advice about the possibility of genetic counseling, having read about it on the internet. You remain deeply concerned about the issue because, to your knowledge, his wife has never been aware of the diagnosis. She has a different doctor, and they have no children so far.

Attitudes and emotional responses

Most of all, you are anxious, but, as a graduate in architecture, you are keen to discover more about the condition. You are keen not to give up your lifestyle, but you would like to remain healthy.

Questions you might ask include:

- What does this condition involve?
- Do I have tell my wife?
- Is it safe for me to drink?
- Can I carry on taking cocaine at parties?
- Does it run in families?
- How can I arrange genetic counseling for me and my wife?
- What will genetic counseling involve?
Station 4: COMMUNICATION SKILLS AND ETHICS

Examiners should advise candidates when there are 2 minutes remaining (ie 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 and 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 and not to do harm
• Duty to act just
• 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.
Problem: Discussing the management of a man with A1AT deficiency.

Candidate’s role: The doctor in the clinic.

Surrogate’s role: The patient, Mr Terry Evans, a 48 year-old man.

The examiner should refer to the marking guidelines in three domains on the marksheet and to the anchor statements. The examiners are invited to explore the communication skills of the candidate with reference to the specific issues raised by the scenario below. Both examiners should consider these, and any others they feel appropriate, and agree the issues that a candidate should address to achieve a Pass and a Clear Pass. The examiners should also agree the criteria for Fail and Clear Fail.

The candidate should:

• show understanding of the patient's fears given the genetic nature of the condition
• offer a practical solution for genetic counseling
• address the confidentiality issues involved
• show a sympathetic response to patient’s anxieties

Point(s) of ethical interest:

• beneficience
• confidentiality
• autonomy