

Station Number

AFFIX CANDIDATE
LABEL HERE

CANDIDATE No:.....

Instructions for Candidates

Scenario

Kelly Smith is a 28-year-old woman who was diagnosed with schizophrenia last year. Her antipsychotic medication was changed two weeks ago because of weight gain on her previous medication. She has been free of symptoms for the last 9 months.

She has presented today complaining of stiffness in her neck, jaw, and tongue. She tells you that her “eyes have rolled back”. She is complaining of pain and is very distressed. She has no idea what’s happening.

Instructions

Explain to her what you think the problem is. Describe what treatment you are going to offer and how you are going to give it.

**PLEASE REMEMBER TO HAND YOUR IDENTITY LABEL TO THE
EXAMINER**

Station Number

AFFIX CANDIDATE
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History Taking: Dystonia/ Oculogyric Crisis

CANDIDATE No:.....

Instructions for Patients

Answer questions based on the following scenario.

Do not volunteer information unless asked.

This station tests the candidate's skills in making a rapid assessment of a specific drug-induced side effect.

You are Kelly Smith, a 28-year-old woman who was diagnosed with schizophrenia last year. You have come up to the ward today because you are very distressed at stiffness in your face and neck, and your eyes are rolling back uncontrollably.

Key Attributes

You are very anxious. Your face and tongue are stiff. Your head and neck are forced back. Your eyes are retracted back and you are unable to make eye contact. You appear terrified and desperate for reassurance.

Key Dialogue

You want to know what's going on. The dialogue should be driven by the following questions:

1. *What's causing this?*
2. *What is the treatment?*
3. *What are the side-effects of the treatment?*
4. *How do I take it?*
5. *Will this happen again?*

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History Taking: Dystonia/ Oculogyric Crisis

CANDIDATE No:.....

Instructions for Examiners

REMEMBER TO ASK THE STUDENT FOR THEIR IDENTITY LABEL AND AFFIX IT TO THE TOP OF THE MARK SHEET.

This station tests the following skills:

1. Ability to make a rapid assessment of a dystonic reaction.
2. Knowledge of a specific treatment for antipsychotic side-effects (IV/ IM Benzatropine) – the candidate should be advocating IV Benzatropine 1mg.
3. Skills in reducing anxiety in a distressed patient, and giving reassurance.

The candidate is not expected to:

1. Take a drug history
2. Assess symptoms of schizophrenia
3. Discuss the general treatment of schizophrenia

Note that the only IM/ IV antimuscarinic is Benzatropine Mesilate (Benztropine mesylate), and can be given in a dose of 1-2mg IM/ IV. Benzatropine is more likely to cause sedation than euphoria.

Station Number

Examiner's Name:

.....

AFFIX CANDIDATE
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CANDIDATE No:.....

History Taking: Dystonia/ Oculogyric Crisis

Marking Sheet

Please circle the appropriate mark for each criterion. The standard expected is that of a psychiatric Senior House Officer.

Criterion	Performed competently	Performed, but not fully competent	Not performed		
Approach to the patient – Rapport, empathy, and style	2	1	0		
Offers reassurance and information quickly and appropriately	2	1	0		
Correct diagnosis of dystonia/ oculogyric crisis	1	½	0		
Explains that it is a side-effect of her antipsychotic medication	1	½	0		
Describes appropriate treatment with Benztropine 1-2mg.	2	1	0		
Explains that it should be given via injection, preferably intravenously	2	1	0		
Tells patient that he/ she will have to put in a Venflon and give the drug over a couple of minutes	2	1	0		
Explains side effects of dry mouth, blurred vision, dizziness, and possible sedation.	2	1	0		
Makes appropriate comments about the likelihood of a reoccurrence, and steps taken to prevent it (e.g. dose reduction/ regular anticholinergic drugs)	2	1	0		
Overall Approach to Task	4	3	2	1	0

Score (Max 20)

Overall Grading of station

Clear Pass

Borderline

Clear Fail