

Station Number

AFFIX CANDIDATE
LABEL HERE

CANDIDATE No:.....

Instructions for Candidates

Scenario

This patient was admitted earlier today due to heavy alcohol misuse and depressive symptoms. He has been drinking around 30 units of alcohol per day for the last 4 months. He gives a history consistent with alcohol dependence syndrome. His diet has been poor.

He has not yet had a physical examination.

Instructions

Given his history, conduct an appropriate physical examination. **Do not examine aspects of his mental state.**

Explain to the examiner what you are looking for (**Marks are awarded for the commentary/ explanation that you give to the examiner**).

PLEASE REMEMBER TO HAND YOUR IDENTITY LABEL TO THE EXAMINER

Station Number

AFFIX CANDIDATE
LABEL HERE

Examination Skills: Physical Examination of
Alcoholic Patient

CANDIDATE No:.....

Instructions for Patients

Allow the candidate to test specific skills without interruption. Please do not ask them what they are doing – the examiner should be doing this.

This station tests the candidate's ability to perform a specific aspect of physical examination. They have been asked to physically examine a patient with alcohol problems.

Key Attributes

You have no neurological problems. You cooperate fully with the examination.

Key Dialogue

There should be no dialogue with the candidate, other than answering questions. Your answers should be those that you would normally give, i.e. a role is not required.

Station Number

AFFIX CANDIDATE
LABEL HERE

Examination Skills: Physical Examination of
Alcoholic Patient

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 OSCE station is testing the candidates' knowledge and abilities in the following areas:

- a) Knowledge of the physical complications of alcohol dependence
- b) Competence in conducting a basic physical examination, with modification for specific disease conditions
- c) Ability to look for and highlight relevant physical findings

The patient has been instructed not to mimic any particular findings – i.e. the candidate should not detect any positive findings.

Although the candidate has been instructed not to examine the mental state, the candidate is permitted to refer to the reasons for admission when establishing rapport.

The candidate has been asked to give a running commentary to their examination. Marks are awarded for knowledge of specific findings that should be looked for. Candidates who give a good explanation of their examination will score full marks, whilst half-marks are awarded for incomplete information.

Station Number

Examiner's Name:

.....

AFFIX CANDIDATE
LABEL HERE

CANDIDATE No:.....

Examination Skills: Physical Examination of
Alcoholic Patient

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; explains what they are going to do | 2 | 1 | 0 | | |
| Looks at patient from end of bed. • Jaundice; abdominal distention; spider naevi; caput medusa; gynaecomastia | 1 | ½ | 0 | | |
| Examines hands • Leuconychia and palmar erythema. | 1 | ½ | 0 | | |
| Asks patient to bend both hands back • Asterixis | 1 | ½ | 0 | | |
| Examines eyes: • Icterus; Nystagmus; Ophthalmoplegia | 1 | ½ | 0 | | |
| Cardiovascular: • Pulse; blood pressure (raised in heavy alcohol misuse); Precordial examination and auscultation; Peripheral oedema | 1 | ½ | 0 | | |
| Respiratory examination | 1 | ½ | 0 | | |
| Abdominal Examination: • Asymmetry; ascites; hepatomegaly | 1 | ½ | 0 | | |
| Neurological Examination - Tone • Cogwheel rigidity and myoclonus seen in alcoholic pellagra encephalopathy; Tremor seen in acute alcohol withdrawal | 1 | ½ | 0 | | |
| Neurological Examination – Power • Loss of power with heavy drinking; Quadriplegia with Central Pontine Myelinosis | 1 | ½ | 0 | | |
| Neurological Examination – Reflexes | 1 | ½ | 0 | | |
| Neurological Examination – Sensation • Loss of pain sensation in the limbs and trunk seen in Central Pontine Myelinosis | 1 | ½ | 0 | | |
| Neurological Examination – Coordination • Ataxia seen with cerebellar damage, and Wernicke’s syndrome | 1 | ½ | 0 | | |
| Neurological Examination – Orientation • Confusion seen in a variety of alcohol-induced states | 1 | ½ | 0 | | |
| Overall Approach to Task | 4 | 3 | 2 | 1 | 0 |
| Score (Max 20) | | | | | |
| Overall Grading of station | Clear Pass | | Borderline | | Clear Fail |

Station Number

Examination Skills: Physical Examination of
Alcoholic Patient

Requirements for this station

The following should be made available for this station:

1. Cotton wool
2. Tongue depressor
3. Pen torch
4. Ophthalmoscope
5. Tendon hammer
6. Tuning Fork
7. Stethoscope
8. Thermometer
9. Sphygmomanometer