

Station Number

AFFIX CANDIDATE  
LABEL HERE

CANDIDATE No:.....

### Instructions for Candidates

#### Scenario

Alan Smith is a 44-year-old man who has been referred because of his drinking. He has yet to be assessed, and you are the SHO for the alcohol team.

#### Instructions

Take an alcohol history, with particular emphasis on symptoms of dependence syndrome.

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

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AFFIX CANDIDATE  
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History Taking: Alcohol Misuse

CANDIDATE No:.....

### Instructions for Patients

**Answer questions based on the following scenario.**

**Do not volunteer information unless asked.**

This station tests the candidate's ability to take a history from a patient.

You are Alan Smith, a 44-year-old man.

#### **Key Attributes**

You act relaxed, but a little restless and emotional when talking about emotive topics in your life.

#### **Key Dialogue**

The candidate should focus primarily on your pattern of drinking, with reference to specific symptoms (as below).

#### **Drinking History**

- You first started drinking in your late teens and would drink at weekends with friends in the pub
- In your late twenties, you started drinking more, and at the end of each working day
- You lost your job and your wife in your early 30's because of your drinking. You started attending Alcoholics Anonymous after this and for many years you managed to control your drinking
- Your daughter was killed in a car accident nine years ago and you started drinking after this

#### **Current Pattern of Drinking**

- You have been drinking pretty much every day in the last few years
- You drink a mixture of vodka and cider, up to a bottle of vodka and 2L of cider a day
- You start drinking in the morning to take away the shaking and the sweats
- You spend most of the day drinking, or you go around to your friend's house to drink
- You have had to drink more and more over the last few years. If you don't have a drink in the morning you feel shaky, nauseated. You find it hard to control your drinking
- You crave alcohol if you haven't had a drink for a while. You managed to cut down your drinking a few months ago, but you started again at the same kind of levels.

**Personal History**

- You have no real hobbies or interests – drinking dominates your life
- You think that your memory and concentration have been affected by your drinking, and admit you have lost your marriage and job because of alcohol.

**Mental State**

- Your mood is low and you sleep poorly. Your appetite is low, but you eat one meal a day and your weight is stable. You have poor motivation, but can get down the local supermarket to buy alcohol
- You are able to have a laugh with your mates, and enjoy watching football on TV. You are pessimistic about the future and sometimes feel hopeless. You don't have any suicidal ideation

You think that you probably have a problem with your drinking, but don't think that much can be done.

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### Instructions for Examiners

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

This is an OSCE station to test the candidate's ability to take a concise substance misuse history from a patient.

The skills being tested are:

1. Sensitivity when asking difficult questions about a patient's life
2. A willingness to get good information about patterns of use
3. Knowledge of ICD-10 criteria for dependence syndrome
4. Ability to differentiate between harmful use and dependence syndrome

Station Number

Examiner's Name:

.....

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History Taking: Alcohol Misuse

### 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		
<b>Approach to the patient – Rapport, empathy, and style</b>	2	1	0		
<b>History of Dependence Syndrome</b> (one point for each, up to a maximum of 6):					
• A strong desire or sense of compulsion to drink	1	½	0		
• Difficulty in controlling the amount drunk	1	½	0		
• Physiological withdrawal state after drinking stops, with the possible use of alcohol to relieve this	1	½	0		
• Evidence of tolerance	1	½	0		
• Progressive neglect of alternative pleasures and interests	1	½	0		
• Persistence of drinking in spite of evidence of harmful effects	1	½	0		
<b>Effects on functioning</b> , e.g. forensic, relationships, work	2	1	0		
<b>Asks about mood symptoms:</b>	2	1	0		
• Mood, sleep, appetite, concentration, energy, anhedonia					
<b>Asks about suicidal ideation</b>	2	1	0		
<b>Asks about other substances misused</b>	2	1	0		
<b>Overall Approach to Task</b>	4	3	2	1	0

Score (Max 20)

Overall Grading of station

**Clear Pass**

**Borderline**

**Clear Fail**