

Station Number

AFFIX CANDIDATE
LABEL HERE

CANDIDATE No:.....

Instructions for Candidates

Scenario

Michael Brown is a 24-year-old man who works for a local printing firm. He has been brought up by the police after he had gone to the police station wanting them to investigate his employer. He was apparently very agitated, threatening to go round to his workplace and sort it out himself. When he didn't get the response he wanted at the police station, he started to break the furniture.

The police officers were concerned because he was "saying some very strange things that couldn't be true".

Instructions

Examine his mental state, looking specifically for abnormal thinking and delusions.

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

Station Number

AFFIX CANDIDATE
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Mental State Examination: Abnormal Thinking

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, and examine specific aspects of the mental state.

You are Michael Brown, a 24-year-old man. You have worked in a printing firm for the last five years. You have been brought up to hospital by police officers.

Key Attributes

You are agitated, suspicious, and quite obviously paranoid. You appear perplexed at times, but angry at being arrested. You are more than a little hostile towards the candidate and question whether he is "part of it all" and just there to have him "locked up".

Key Dialogue

- For the last month you have become increasingly suspicious about your workmates. You think that you are being harassed by management because of your revolutionary ideas about how to transform the firm
- You find it difficult to express these ideas, but you speak of "*inter-ink printing subsystems*" and "*copyrighted copytype formsetting*".
- You feel that frequently your thoughts become muddled and you can't think properly.
- This is probably because management are using modified computers to "block" your thoughts. You also think that this equipment can be used to "read" your thoughts to get your ideas.
- You have heard this equipment reading your thoughts via your walkie-talkie as a low pitched hiss and crackles – this sounds different to the usual radio noise. You believe that routine communication between your colleagues is really code words to indicate your position.
- You do not think that anyone is putting thoughts into your head or removing them.
- You believe that the security cameras are being used to follow you, and you know this because there is a little red light on each camera and they often flash in sync with the light on your walkie-talkie – therefore they are trained on you.
- You don't know how they're doing it, but they have probably bugged your clothes so they know where you are at all times. You have never seen these bugs. When

you get home from a shift, you wash your uniform to destroy any electronic equipment, and you scrape the soles of your shoes.

- You believe all of this with absolute uncertainty. You realise it sounds unlikely, but emphasise that the interviewing doctor hasn't done any shifts with you. You do not have evidence of this with you, but you have recorded these walkie-talkie communications on your walkman
- The only doubt you have is about the bugging – you haven't seen the bugs and maybe they're using other ways to follow you. (i.e. this is an overvalued idea/partial delusion)

Mental State

- You report restless sleep and reduced appetite. There is no weight loss. Your mood has been anxious, but you don't feel depressed or gloomy. You often get panicky at work, making up excuses to get out of situations that unnerve you.
- You feel very stressed by all of this, but you do not have any suicidal ideation.
- You have not had any unusual experiences such as hearing voices or seeing things. You do report déjà vu a little more commonly in the last few weeks.

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Mental State Examination: Abnormal Thinking

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. Knowledge of the phenomenology of delusions, ideas, ruminations, etc.
2. Knowledge of their significance in terms of diagnosis
3. Appears to have some familiarity when asking questions about unusual experiences

The depth of detail about particular beliefs is less important than scope and identification of abnormal thinking. This OSCE is primarily about phenomenology.

It is essential that delusions are tested for the strength of belief and certainty.

Station Number

Examiner's Name:

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Mental State Examination: Abnormal Thinking

CANDIDATE No:.....

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	3	1 ½	0		
Asks about formal thought disorder/ crowding - i.e. the subjective experience of abnormal thinking:	2	1	0		
Asks about alienation of thought (one point for each, up to a maximum of 3):					
• Thought insertion	1	½	0		
• Thought withdrawal	1	½	0		
• Broadcasting	1	½	0		
Asks about ideas of reference	1	½	0		
Paranoid ideation					
• Candidate is required to distinguish ideas from delusions	1	½	0		
Persecutory ideas					
• Candidate is required to distinguish ideas from delusions	1	½	0		
Differential between ideas and delusions (2 points for each, up to maximum of 4):					
• Evaluation of falseness of beliefs	2	1	0		
• Evaluates degree of conviction	2	1	0		
Suicidal ideation	1	1 ½	0		
Overall Approach to Task	4	3	2	1	0

Score (Max 20)

Overall Grading of station

Clear Pass

Borderline

Clear Fail