

OSCE

Candidate information

Your Registrar has been seeing a 52 year old man brought to your emergency department via ambulance after he lost control of his motorcycle at 80 km per hour on a bend and was flung several metres onto a bitumen road. He was wearing a helmet and full protective leathers.

His presentation is complicated by the pre-existing history of a mitral valve replacement and ongoing warfarin therapy. His INR was 3.1 when checked by his LMO last week.

On assessment he complains primarily of abdominal and back pain and tenderness. He is currently haemodynamically stable, GCS 15 and early bedside investigations including CXR, pelvic Xray and fast scan reveal no concerning injuries.

Please discuss the risks and benefits of warfarin reversal in this patient with your registrar.

Domain	%
Medical expertise	40
Prioritisation and decision making	
Communication	30
Teamwork and collaboration	
Leadership and management	
Health advocacy	
Scholarship and teaching	30
Professionalism	

Warfarin reversal discussion trauma

Actor (Registrar) information

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On assessment he complains primarily of abdominal and back pain and tenderness. He is currently haemodynamically stable, GCS 15 and early bedside investigations including CXR, pelvic Xray and fast scan reveal no concerning injuries.

Your consultant is to discuss the risks and benefits of warfarin reversal in this patient. It is unclear what sort of valve he has.

You must ask the consultant how to reverse his warfarin (doses needed).

Marking:

Risks	Benefits
Depending on MVR type –metallic or older types significant risk of clotting/embolic complications on reversal (cf porcine valves minimal risk) Eg risk of valve clotting, CVA, mesenteric ischaemia secondary to embolus	Prevent ICH, other life threatening haemorrhage eg intrabdominal, retroperitoneal (significant risk as high risk mechanism and clinically has pain etc)
Infection risks/fluid overload...standard risks of blood products	Avoid potential need for significant transfusion and complications of same

Reversal:

- FFP 150-300ml IV initially
- Prothrombinex 25-50 IU/kg IV
- Vitamin K dose 5-10mg IV
- Recheck INR and review need for further doses reversal

	Mark
Clear understanding of risks/benefits of warfarin reversal IN THIS PT	2
Knows drugs and doses used to reverse warfarin	2
Acknowledges risk of haemorrhage higher than risk of thrombosis	1
Discusses how to find out if valve is metallic	1
Approach to discussion – collegiate, clear	2
Mentions warfarin reversal protocol availability	1
Suggests Haematology or Cardiology input as needed	1