OSCE

Candidate information

You have been asked to prepare a management plan for Kyle Jones. Kyle is a 26 year old male who has been presenting increasingly frequently to ED with various complaints. He suffers from complex PTSD and Cluster B traits.

You are meeting with your ED director to discuss the management plan.

Domain	**%**
Medical expertise	
Prioritisation and decision making	25
Communication	25
Teamwork and collaboration	
Leadership and management	20
Health advocacy	
Scholarship and teaching	15
Professionalism	15

Actor (ED director) information

You are meeting with a FACEM who is planning on writing a management plan for Kyle Jones, a 26 year old male with complex PTSD and Cluster B traits. Kyle has been presenting more frequently to ED with various complaints.

You are unfamiliar with Kyle and his pattern of presentations recently. You are also vague on how a management plan should be created.

Prompts:

- Why do you think Kyle needs a management plan?
- What should be on the management plan?
- Who should we get involved in the writing of the plan?

Marking:

Steps to create management plan:

- Identify care plan elements (using template is reasonable). Try to keep to one page
- Identify an ED champion for the patient – to develop plan and review/finalise plans
- Identify stakeholders involved in plan
- Schedule meetings to discuss plan
- Plan where to store plans in ED

	Mark
Understands principles behind creation of ED management plan	2
Reasonable list of stakeholders and justification for	2
Gives reasonable structure for care plan	1
Gives reasons for care plan for Kyle, with some examples of clinical care for him	1
Structured approach to creation/development of care plan	2
Displays understanding of review dates/need for group input into plan	1
Manner to colleague – collegiate, etc	1

ED CARE PLAN TEMPLATE

Patient Name	
Patient MRN	
DOB / Age / Gender	
Care plan date	Date care plan created: _____ Date(s) modified: _____
Situation [Reason for care plan]	[Provide brief (1 line) summarizing history of repeated presentations and reason for this care plan]
Background [Patterns of utilization and summary of relevant testing]	[Provide 2-3 sentences summarizing history of repeated presentations, including symptomatic complaints. List presentations in past (12) months, list or provide count of number of relevant tests (e.g., abdominal CT scans). Summarize what has been tried in the past.]
Assessment [Drivers of repeated utilization, resource(s) in place]	[Provide interdisciplinary assessment of the drivers of utilization] [Identify the clinical, behavioral, and social services in place, with contact names and numbers]
Recommendations [Directed at ED clinical staff to promote safety, quality, consistency and otherwise advance care]	[Provide recommendations to promote safety, quality, consistency of care] [Provide recommendations to minimize harm – such as avoiding certain medications or repeated tests without clear benefit] [Provide specific name/team/service to call while patient is in ED]
Whom to contact about care plan:	Name: _____ Phone/Email: _____

ED CARE PLAN EXAMPLE 1

HIGH-RISK PATIENT ASSESSMENT

Clinical Background

- History of [list diagnoses] with [frequent ED visits] for [list symptoms here]
- Is connected to [list relevant resources here]

Clinical Challenge

- 17 inpatient admissions at this hospital in past year; numerous other admissions at other area hospitals
- Requests [e.g., IV opioids]; declines other alternatives
- Attempts to manage presenting symptoms often unsuccessful

Name:

DOB:

Age:

Gender:

MRN:

Standards of Care:

- [Enumerate professional society and evidence-based management principles]
- [Narcotics have a high potential for abuse]
- [Medical ethics do not require prescribing a medication when you judge the risks to be greater than the benefits, even if the patient demands the medication]
- [Consider non-narcotic medications such as xxx]
- [Check the State prescription drug monitoring program before prescribing controlled substances]
- [An oral or written agreement for chronic pain medication management may be useful]

Recommended Intervention – Emergency Department

- [Rule out any emergency medical condition or life-threatening condition]
- [Attempt to treat symptomatic pain without the use of narcotics]
- [For safety place a sitter in the room]
- [If you feel medication is indicated, use [medication, dose, route; medication, dose, route]. Do not use [medication route].]
- [Contact case management as early in presentation as possible]
- [If no need for ongoing hospital care is indicated, patient will be contacted within 48 hours for followup at XXX clinic]

Recommended Intervention – Attending Physician

- [If patient cannot be discharged from ED, consider observation status]
- [Avoid narcotics; if medication treatment is indicated, attempt regimen, above]
- [Contact case management, social work, and pain management on admission]
- [Patient has primary care provider, pain management contract, hospital case management]