OSCE
Candidate information

You are the ED in charge on shift in a remote hospital and have been asked to speak to a patient regarding their diagnosis and subsequent management. The patient is a 32-year-old female who is one week post-partum and presented with an extensive DVT. The ultrasound report will be available in the room.

Please advise the patient of the result and answer any questions she has.

Domain	**%**
Medical expertise	40
Prioritisation and decision making	20
Communication	30
Teamwork and collaboration	
Leadership and management	
Health advocacy	10
Scholarship and teaching	
Professionalism	

Actor (patient) information

You are a 32 yo female who gave birth one week ago. You presented to ED with two days of acute swelling of your left leg. You have NO shortness of breath or chest pain.

You have had an ultrasound of the leg and are awaiting the results. The consultant will be discussing the results of this scan and the management required with you.

Other information:

- You have had a previous DVT which was unprovoked (two years ago)
- You have recently had a change in bowel habit and loss of weight, despite pregnancy
- Your previous DVT and other symptoms have not been investigated

The consultant is likely to have you transferred by ambulance to a tertiary hospital. Your baby cannot travel in the ambulance with you and must be sent with your husband in a private car as a result (ambulance protocol). You may get upset over this and insist that either you travel with your baby, or you will not go at all. The consultant will have to negotiate a solution to this with you.

Prompts:

- "I can't be separated from my baby – I HAVE to have my baby with me in the ambulance!"
- Why did I get this clot?
- Are the medications you're prescribing for the clot safe for breastfeeding?

Marking:

	Mark
Recognises concerning diagnosis – above knee DVT, high risk patient	2
Appropriate management – transfer, anticoagulation	2
Appropriate choice of medication given post-partum/breastfeeding	2
Identifies appropriate choice of tests – thrombophilia screen, ECG, etc	1
Screens for possible cancer/previous DVT	1
Addresses patient concerns appropriately and offers solutions	1
Approach to patient	1

Left limb DVT study for Jamie FARRELL (DOB 20/06/1991)

Indication: acute left leg swelling, gave birth recently

Report:

Occlusive thrombus in the popliteal vein at the knee

Occlusive thrombus seen in the left peroneal vein from the popliteal vein to 7cm inferior to knee crease

Non-occlusive thrombus seen in SFV and LSV to within 3cm of the femoral bifurcation

No thrombus seen above bifurcation