OSCE

Candidate information

You have been asked to see Deneille, a 26 year old ATSIC female who has presented with a complication of a C-section she had 3 weeks ago. Deneille feels fine in herself but has had discharge from the surgical site. Her blood work and ultrasound of the area (ordered by a keen intern) show a small 3 x 2cm collection under the C-section scar medially and a mild increase in her white cell count (WCC).

She is afebrile and her observations are within normal limits. The baby is fine and is at home with her partner.

Domain	**%**
Medical expertise	50
Prioritisation and decision making	
Communication	30
Teamwork and collaboration	
Leadership and management	
Health advocacy	
Scholarship and teaching	
Professionalism	20

Actor (patient, Deneille) information

You are a 26 year old female who had an elective C-section three weeks ago. The C-section was at term and was uncomplicated. Baby is fine.

You are clinically well but have presented to ED with discharge from the C-section site.

Of note, you were meant to see the Obs Gynae team earlier this week for review and removal of sutures but weren't able to leave the house without your partner's permission. He has been increasingly strict with you since you became pregnant, and is now showing signs of coercive control:

- Monitoring your phone calls
- Separating you from your family and friends
- Keeping you financially reliant on him
- Being verbally abusive at times, but NOT physically abusive
- Insisting on knowing where you are at all times

You are not to tell the doctor this unless they ask. You may tell them that you were meant to have the stitches out earlier this week, but couldn't get to the appointment. You may prompt them by telling them you had four phone calls from the Obs Gynae team asking you to come into hospital, but on each occasion, you couldn't do so.

Prompts:

- Direct the doctor away from a history of how baby is doing – there are no issues there
- Play the role in a submissive manner
- "My partner doesn't like me leaving the house unless I have to…"

Marking:

	Mark
Takes efficient history around birth and review of symptoms	2
Identifies reason for loss to follow up and DV features in history	2
Identifies likely coercive control	1
Screens for physical abuse/assault	1
Shows some understanding of White Ribbon legislation/laws	1
Offers support services/social worker for DV	1
Manages medical issues (mild infection) appropriately	1
Manner to patient – open, non-judgemental	1