OSCE
Candidate information

Your RMO has asked to see you on a non-clinical day to discuss anaphylaxis after a recent case they were involved in. They are emotionally fine but are interested to learn more about anaphylaxis management and pathophysiology. Please answer the questions they have.

Domain	**%**
Medical expertise	60
Prioritisation and decision making	
Communication	20
Teamwork and collaboration	
Leadership and management	
Health advocacy	
Scholarship and teaching	20
Professionalism	

Actor (RMO) information

You recently watched the ED team manage a severe anaphylaxis and have several questions regarding anaphylaxis. You have made time on a non-clinical day with your consultant to have these questions answered.

Questions:

- What are the indications for giving adrenaline in an allergic reaction?
- What dose is given and how?
- Why is the dose given into the anterolateral thigh?
- Why is the patient laid flat?
- If they go into cardiac arrest, what is the usual initial rhythm?
- If you have already given IM adrenaline and the patient arrests, should you still give IV adrenaline as part of the ALS algorithm?
- What is the role of steroids in anaphylaxis? (ie not anaphylactic arrest). *Steroids may dampen the immune response but will take hours to work. Should be given IV as dilation of stomach vessels secondary to anaphylaxis will reduce absorption of oral steroids.*

Marking:

	Mark
Shows excellent understanding of anaphylaxis pathophysiology	2
Correct doses and routes for adrenaline and hydrocortisone	2
Shows good understanding of reasons for IM vs IV, lying down, etc	2
Knows ALS algorithm	1
Understands indications for hydrocortisone in allergic reactions	1
Teaching approach	1
Offers further teaching	1