

Situational Judgement Test

- Practice Paper -

Instructions:

- This paper is designed to take **140 minutes**.
- In **Part One (Q1-47)**, rank in order the five responses to the situation. Marks are available for near-misses. There can be no tied ranks, i.e. you should not use the same rank more than once.
- In **Part Two (Q48-70)**, choose THREE from eight possible responses, which address the situation when done together. You must **only** select three options.
- Answer what you **should** do as a Foundation Year One (FY1) doctor.
- You may sometimes feel you would like more information before answering, but please answer each question based only on the information provided.

Please note:

- There is no negative marking. You should therefore attempt all questions.
- A glossary is provided. The glossary terms are marked with an asterisk (*) the first time they appear in the question.
- The corresponding question paper without the answers and rationales is available for download from the UKFPO website if you would like to practice as if you are completing the live test.

Glossary

<p>Acute Admissions Unit</p>	<p>An Acute Admissions Unit (AAU), or Acute Assessment Unit (AAU), or Medical Assessment Unit (MAU) is a short-stay ward that may be located within the emergency department, although a separate department. The AAU acts as a gateway between a patient's general practitioner (GP*) and the emergency department, and the wards of the hospital.</p>
<p>Bleep/bleeped</p>	<p>A simple electronic device used to alert a doctor in a hospital that they should ring the displayed phone number as someone is trying to contact them; usually about a patient or a task that requires their attention.</p>
<p>British Medical Association</p>	<p>The British Medical Association (BMA) is a professional association and trade union for doctors working in the UK.</p>

Glossary (cont...)

British National Formulary	The British National Formulary (BNF) is a widely available reference book that is used extensively in the UK and contains information and advice on prescribing and pharmacology, as well as details about many medicines available on the NHS.
Care Quality Commission (CQC)	An organisation with responsibility to inspect and assess whether healthcare providers are meeting expected standards.
Chronic Obstructive Pulmonary Disease (COPD)	The term for a collection of lung diseases characterised by chronic obstruction of lung airflow that interferes with normal breathing.

Glossary (cont...)

Clinical supervisor	<p>The professional responsible for teaching and supervising Foundation doctors. Each Foundation doctor will have at least one named clinical supervisor.</p> <p>A clinical supervisor is responsible for: supervising day to day clinical and professional practice; supporting the assessment process; ensuring the appropriate range and mix of clinical exposures; and arranging a work programme to enable attendance at fixed educational sessions.</p>
Critical/clinical incident form	<p>A form completed to alert the patient safety team of an incident in which harm was done or could potentially have been done to a patient /staff member.</p>
CT	<p>Computerised Tomography (CT) is a method of medical imaging.</p>

Glossary (cont...)

<p>Do Not Attempt Resuscitation</p>	<p>Do Not Attempt Resuscitation (DNAR) is a legal order that is placed in the medical notes and states that cardiopulmonary resuscitation/advanced cardiac life support should not be performed if the patient's heart and/or breathing were to stop.</p>
<p>Educational supervisor</p>	<p>The professional responsible for making sure Foundation doctors receive appropriate training and experience. The educational supervisor is involved in teaching and training, and should assist in professional and personal development. Each Foundation doctor will have a named educational supervisor for each placement.</p> <p>The educational supervisor is responsible for:</p> <ul style="list-style-type: none">undertaking regular formative appraisal; providing support in the development of the learning portfolio*;ensuring understanding and engagement in assessment; being the first point of call for concerns/issues about training; and ensuring appropriate training opportunities are available for learning and gaining competences.

Glossary (cont...)

Exercise tolerance	Refers to the maximal exercise capacity of an individual. This can be measured by the peak workload achieved during exercise or their ability to endure prolonged exercise.
Falls clinic	A specialist clinic to review patient at risk of falls or following falls.
Four-hour target	A target in the emergency department to see, treat, and admit or discharge patients in under four hours.
Foundation Programme Director	The Foundation Programme Director is responsible for the management and quality control of the foundation programme together, ensuring that a group of foundation doctors have the appropriate supervision and training.
Foundation teaching sessions	Regular mandatory teaching sessions are provided for foundation doctors. Sufficient attendance at these sessions is required to complete the Foundation Programme.

Glossary (cont...)

General Medical Council	Every doctor practising in the UK must be registered with the General Medical Council (GMC). It is the principal regulatory body and aims to protect the wellbeing of all patients by ensuring proper standards in medical practice.
GP	A General Practitioner (GP) is a primary care physician or community based family doctor.
Healthcare Assistant	A Healthcare Assistant (HCA) supports nurses with the day-to-day care of patients. They are generally not qualified to provide the same level of medical care that nurses are.
Hospital's Rota Co-ordinator	A hospital's rota co-ordinator is an individual responsible for maintaining the daily medical rotas for FY1 and FY2 doctors.
Human Resources (HR)	Human Resources (HR) is the department within a hospital that is responsible for the administration and management of personnel, including recruitment.

Glossary (cont...)

ICU	Intensive Care Unit (ICU), or Critical Care Unit (CCU) or Intensive Therapy Unit (ITU) is the specialist ward where high level monitoring and treatment is provided to unstable or critically unwell patients.
Infection Control	Infection Control is the practice of clinical microbiology, which is principally concerned with the prevention and management of hospital-acquired infections.
Information governance team	The team responsible for the management of information at an organisational level.
Information technology (IT) department	The department responsible for all computer processes and communications within an organisation.
Intensive Care Team	The team of medical professionals who work in the Intensive Care Unit (ICU*) of a hospital.

Glossary (cont...)

Learning portfolio	A learning portfolio is an electronic means of recording learning experience and achievements. It is designed to help foundation doctors plan and manage their time, in order to maximise their learning. It also acts as evidence of achievement and is underpinned by the Foundation Programme Curriculum.
Locum	A locum is a doctor who temporarily fulfils the duties of another doctor if, for example, a regular doctor is absent or if the hospital is short-staffed.
Medical Assessment Unit	See Acute Admissions Unit*
Medical Admissions Unit	See Acute Admissions Unit*
Medical Defence Organisation	Medical defence organisations are mutual indemnity organisations that provide 24-hour access to medico-legal advice and support in clinical issues. They also provide indemnity and legal representation if required.

Glossary (cont...)

Medical Director	The most senior medical person in an organisation responsible for medical leadership and delivery of medical care.
Medical Emergency Team	A team of medical practitioners called to see patients who are either at risk or in cardiac or respiratory arrest.
Medical Staffing	Medical staffing is a specialist division of the Human Resources department (HR*) that is responsible for providing operational human resources service specifically to medical personnel.
Multidisciplinary team	Multidisciplinary teams (MDTs) consist of a variety of medical specialists and allied medical staff. MDT meetings are often arranged to discuss and plan complex aspects of patient treatment and to formulate safe discharge plans.
MRI	Magnetic resonance imaging (MRI) is a method of medical imaging.

Glossary (cont...)

MRSA	Methicillin-resistant Staphylococcus Aureus (MRSA) is a bacterium with antibiotic resistance and is therefore difficult to treat. It is a cause of significant morbidity and mortality.
Newborn Physical Examination	A newborn physical examination is an examination that is conducted on a newborn baby to check for problems or abnormalities within 72 hours of birth and again between six and eight weeks. It includes a general all over physical check, as well as specific screening elements which involve examination of the baby's eyes, heart, hips and testes.
Occupational Health	The Occupational Health (OH) department in a hospital is responsible for protecting and promoting the safety, health and welfare of employees.
Occupational Therapy	Occupational therapy/therapists aim to rehabilitate patients and promote independent function in all aspects of daily life.

Glossary (cont...)

Patient Advice and Liaison Service (PALS)	A service that offers confidential advice, support and information on health-related matters. It provides a point of contact for patients, their families and their carers.
Performance appraisal	Performance appraisals occur at regular intervals throughout the FY1 year. They are designed to be a positive process; providing structured and constructive feedback on performance, as well as monitoring progress and identifying development needs.
Phlebotomist	A healthcare professional who is trained to take blood from a patient for clinical tests in a safe and sanitary manner.
Specialty trainee	Middle grade doctor below the level of consultant.
Switchboard	The central communication hub of a hospital which co-ordinates internal and external telephone enquiries.
Ward clerk	A ward clerk is an individual who provides general administrative, clerical and support services for wards, units and departments within a hospital.

Glossary (cont...)

Workplace based assessment	Regular workplace based assessments are undertaken and documented throughout the Foundation Year One (FY1). These assessments provide evidence of achievements and the opportunity for any problems to be identified. A number of these assessments must be completed to a satisfactory level in order to progress beyond the FY1 year.
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Part One

1. Your consultant Dr Jackson has asked you to prescribe a second antibiotic for a patient who has a chest infection which has been slow to respond to initial treatment. Later that day, a pharmacist informs you that the new antibiotic is not in the hospital formulary. She tells you that the new antibiotic should not be used because of the risk of clostridium difficile infection.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A. Prescribe what the pharmacist advises
- B. Explain that Dr Jackson requested the antibiotic and he would be the best person to speak to about the prescription
- C. Agree to contact Dr Jackson to discuss the prescription
- D. Ask your specialty trainee* to review the patient to enable an informed decision
- E. Do not change the prescription and make a record in the notes of the pharmacist's concerns

2. On the morning ward round, your specialty trainee* said that Mrs Anderson is medically fit following her total knee replacement and could be discharged if Occupational Therapy* feel it is appropriate. The occupational therapist has assessed Mrs Anderson and believes it is safe for her to go home with a care package that has been arranged. It is now 4pm and the nurse informs you that Mrs Anderson is demanding to see a doctor as she does not feel that she is ready to go home yet. An elective admission is waiting in the day room for Mrs Anderson's bed.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Ask Mrs Anderson about her concerns
- B.** Ask a senior colleague to speak with Mrs Anderson
- C.** Ask the bed manager if he can find another bed for the elective patient
- D.** Explain to Mrs Anderson that the bed has already been allocated and she has to go home
- E.** Ask the occupational therapist to come and speak to Mrs Anderson with you

3. You are working on a busy paediatric ward. Your shift was meant to finish at 7pm, but it is now 9pm on a Friday, and you are still trying to complete some of your routine tasks from the day. This has happened on a number of occasions in the last month and you feel exhausted as a result. Your workload is also having a negative impact on your social life.

Rank in order **the importance of the following considerations** in the management of this situation (1= Most important; 5= Least important).

- A.** The impact on your own wellbeing if you are not able to take time to rest
- B.** The risk to patient safety if working whilst tired
- C.** Your right to finish at the designated time
- D.** That your consultant may give you a poor reference if you are not completing your tasks
- E.** That you are repeatedly disappointing your friends by not attending social events with them

4. You are working on the Surgical ward and you are about to attend theatre to observe your consultant undertake a complicated procedure. This will be a good learning opportunity for you and you anticipate being in theatre for about two hours. As you are about to leave the ward, one of the nurses tells you that a patient needs to have her medication reviewed prior to receiving her next dose in three hours' time. He tells you that he believes one of the other FY1 doctors has been making prescription errors. You also notice one of the patients on the ward beckon you over to his bed urgently. You know from experience that the patient often just wants to have someone to talk to as he gets lonely.

Rank **the order in which the following tasks should be undertaken** (1= Do first; 5= Do last).

- A. Review the patient's dose, as requested by the nurse
- B. Respond to the patient's immediate question or query
- C. Attend the theatre to observe the procedure
- D. Take steps to investigate the nurse's allegations about prescription errors further
- E. Spend more time with the patient if he wants someone to talk to

5. It is 6pm and you are clerking a patient who is to undergo an elective splenectomy the next morning. Before he left, your consultant asked you to prescribe the antibiotics and immunisations that need to be given that evening so that surgery can proceed tomorrow. You now cannot find the folder containing the pre-operative protocols and it is not available on the intranet. Your consultant has already gone home.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Seek advice from the on-call microbiologist
- B.** Look in the British National Formulary* and prescribe what is suggested
- C.** Refer to national guidance for pre-operative protocols
- D.** Ask the nurse in charge of the ward what is normally given
- E.** Seek advice from the surgical specialty trainee*

6. You are looking after Mr Kucera who has previously been treated for prostate carcinoma. Preliminary investigations are strongly suggestive of a recurrence. As you finish taking blood from a neighbouring patient, Mr Kucera leans across and says “tell me honestly, is my cancer back?”

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Explain to Mr Kucera that it is likely that his cancer has come back
- B.** Reassure Mr Kucera that he will be fine
- C.** Explain to Mr Kucera that you do not have all the test results, but you will speak to him as soon as you do
- D.** Inform Mr Kucera that you will chase up the results of his tests and ask one of your senior colleagues to discuss them with him
- E.** Invite Mr Kucera to join you and a senior nurse in a quiet room, get a colleague to hold your ‘bleep’*, then explore his fears

7. At your morning handover/briefing you are reminded by Infection Control* that all hospital staff should wear shirts with short sleeves. When wearing long sleeves, they must be rolled up and secured, particularly when having clinical interaction with patients. During your shift, you notice that your FY1 colleague always has her long sleeves down.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A. Tell Infection Control that your colleague is not complying with their policy
- B. Speak directly to your FY1 colleague about your observation
- C. Raise your observation with the nurse in charge of the ward
- D. Do not say anything immediately but monitor the situation over the course of the next few days
- E. Discuss the situation with your specialty trainee*

8. You recently discharged two patients from your ward with similar names, who had undergone similar procedures. Arrangements have been made for both patients to receive follow up care in the community. When checking the patient records, you realise that you mixed up their discharge letters and sent each letter to the wrong patient. This means that each patient will receive the other patient's treatment advice.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Inform the consultant of the mix up
- B.** Seek advice from an FY1 colleague about what you should do
- C.** Adjust the original letters in the patients' records
- D.** Trust that health care professionals providing follow up care in the community will correct the error, apologising to the patients for the mistake
- E.** Contact both patients to explain that there was a mix up

9. You are working on a surgical ward and are on your way to check the discharge of a post-operative patient, Joan, who is due to be transferred to a rehabilitation hospital. You have been advised by the ward manager that Joan's bed is needed urgently for a newly arrived patient. When you arrive at Joan's cubicle, her daughter, Allie, tells you that her mother has been complaining about her chest and is struggling with a cough. You review the observation chart and listen to Joan's chest, which does not indicate a problem. Allie insists that her mother has a chest infection and should not be discharged.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Ask the ward nurse to inform the rehabilitation hospital that Joan's condition needs assessing on arrival
- B.** Inform Allie that she should insist on a further review of Joan's condition when she arrives at the rehabilitation hospital
- C.** Advise Allie that you will delay the transfer in order to consult with a senior member of your team
- D.** Advise Allie of the urgent need to discharge her mother to create space on the ward
- E.** Contact the rehabilitation hospital and write detailed notes outlining Joan's symptoms and possible investigations to send with her

10. You joined a new team three months ago, and you work with two registrars/specialty trainees*, Anne and Emma, and an FY2 colleague, Malakai. You notice that the team works well when Anne is present, but when Anne is on leave or absent from the workplace, Emma and Malakai become very dominant and often undermine your decisions in front of patients.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Seek advice from a more senior colleague on how to improve team relations
- B.** Discuss your concerns with all team members
- C.** Request to be assigned to a new team
- D.** Document Emma and Malakai's behaviour towards you
- E.** Wait another week to see if the situation improves

11. You work on the Breast Surgery unit. Because of recent advances in surgical techniques, inpatient stay has dropped from five days to an overnight stay. This means that you seem to spend all your time clerking in patients and the number of learning opportunities has reduced as a result.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Take on a position of responsibility as part of the junior doctors' committee
- B.** Ask the Foundation Programme Director* if you can move to work at another unit
- C.** Ask your consultant if you can support outpatient clinics and theatre sessions
- D.** Offer to assist your FY1 colleagues on other busier wards
- E.** Inform the Foundation Programme Director that the job should be reviewed to include more learning elements

12. It has come to the end of your shift, but you have agreed to stay on the ward for another hour due to unforeseen circumstances. A patient, Mr Griffin, is admitted to the ward from the Acute Admissions Unit* (AAU). You notice that Mr Griffin does not have a drug chart or management plan, which should have been completed upon admission.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Contact the AAU to discuss Mr Griffin's management plan and drug chart
- B.** Ask the nurse in charge to request the management plan and drug chart from the AAU as soon as possible
- C.** Send a message to the FY1 doctor on the next shift stating that Mr Griffin was unfortunately admitted without a drug chart or management plan
- D.** Handover to the night shift FY1 doctor to chase the drug chart and management plan
- E.** Inform a senior doctor (specialty trainee*) that Mr Griffin was admitted without the correct paperwork

13. You are working on a respiratory ward. This ward is attached to a nationally acclaimed academic department. There are posters advertising research projects in all patient care areas. You overhear a patient telling a relative that he is concerned that his personal information will be used in research and made available for all to see.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Tell a nurse what you overheard and ask if she can reassure the patient regarding his concerns
- B.** Ask the ward manager if communication can be provided to patients explaining that patients' involvement in research is only carried out with their permission
- C.** Ask the patient why he has concerns about the confidentiality of his personal information
- D.** Reassure the patient that research will not be carried out using his personal information without seeking his permission
- E.** Inform the patient's relative that his personal information will not be used without his permission

14. It is 8am and you have just finished a busy night shift on the Acute Admissions Unit* (AAU). Mr Dean, a patient on your ward with acute renal failure, needs his blood tests to be re-checked in four hours' time. You approach Gerard, your FY1 colleague, who is starting his shift on your ward. You attempt to hand over the information relating to Mr Dean's case to ensure that the blood tests are carried out. Gerard says angrily that he has a long list of other patients to see and has just been called to an emergency situation on another ward. He refuses to accept your handover.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Stay on the ward to do Mr Dean's blood tests yourself
- B.** Explain to Gerard that he is now responsible for attending to patients on the ward so should accept your handover
- C.** Find another appropriate colleague to whom to hand over Mr Dean's case
- D.** Advise Gerard that you will leave detailed instructions regarding Mr Dean's case in the patient's clinical records for him to follow up later
- E.** Inform a nurse of Mr Dean's case, asking him or her to find another doctor to conduct the patient's blood tests

15. You are admitting a patient who does not speak fluent English for an elective operation. He does not have a translator or a relative present. You know from his notes that the patient speaks Urdu. It is apparent that his pain has worsened since his clinic appointment. You ask the patient how long he has been suffering from this pain. The patient appears to understand what you are saying but cannot reply. He is clinically stable.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Ask a doctor who speaks Urdu to attempt to communicate with the patient
- B.** Continue trying to communicate with the patient to ask about his symptoms
- C.** Telephone the NHS language services to obtain a translator
- D.** Ask a senior doctor for advice on how to proceed
- E.** Telephone the patient's next of kin to ask about the patient's medical history and symptoms

16. The specialty trainee* on your ward, Dr Kitson, is a good friend of yours.

She has just sent you a text saying she is running 30 minutes late for work and asks you to cover for her. One of the patients on the ward, Mr Bradley, informs you that Dr Kitson was supposed to be discharging him first thing that morning and it is now 9am. He explains that it is urgent he gets to work by 10am and it is a 45-minute journey to get there.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Sign Mr Bradley's discharge paperwork yourself
- B.** Explain to Mr Bradley that Dr Kitson has been delayed so he may want to contact his work and let them know the situation
- C.** Contact Dr Kitson and find out whether she can give verbal approval to the discharge
- D.** Find another senior colleague in your team to review and discharge Mr Bradley
- E.** Offer Mr Bradley the option of signing a self-discharge form

17. A patient, Mrs Mathews, has been admitted for investigation of abdominal pain, which her husband is aware of. You are asked to take a telephone call from him (Mr Mathews), who is asking for an update on his wife's condition. You have just found out from a urine test that Mrs Mathews is pregnant.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Tell Mr Mathews that he will need to speak to Mrs Mathews directly about her condition
- B.** Tell Mr Mathews that you would like to obtain Mrs Mathews' permission to speak to him first
- C.** Tell Mr Mathews that you would like to discuss Mrs Mathews' case with a senior colleague before speaking with him
- D.** Tell Mr Mathews that you are currently investigating Mrs Mathews' abdominal pain
- E.** Inform Mr Mathews that Mrs Mathews has had a urine test with a positive result

18. You are on the ward round with your consultant and attend to a patient who is complaining of a severe headache and neck stiffness. Before the consultation has finished, a nurse interrupts to inform the consultant that he is needed urgently to see another patient. The consultant asks you to conduct a lumbar puncture whilst he is away. You have not done or observed this procedure before.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Conduct the procedure to the best of your ability
- B.** Find another colleague to conduct the procedure whilst you observe
- C.** Telephone the neurology specialty trainee* for advice on how to conduct the procedure
- D.** Inform the consultant, away from the patient, that you have not conducted this procedure before
- E.** Find a senior colleague to supervise you conducting the procedure

19. You are checking drugs chart on a general medical ward and you notice that the diabetes specialty trainee* has prescribed double the dose of a tablet for a patient with diabetes. You are aware that sometimes double the dose of this tablet is given to patients. The patient is stable and the specialty trainee is due on the ward in a few hours.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Assume the dosage is correct as you know that sometimes the dose is doubled
- B.** Call the specialty trainee to check the dosage with him
- C.** Change the dose to the normal amount given
- D.** Check with the ward pharmacist whether she is aware of the double dosage for this patient
- E.** Check the dosage with the specialty trainee when he comes onto the ward

20. Albert, a 70 year old patient, was admitted mid-morning to the General Medical ward where you are working. Albert was recently diagnosed with a brain tumour and has come back to hospital for further tests. When he was admitted, you advised Albert and his family that an MRI* scan would be arranged within a few hours. The radiology department contacts you to inform you that Albert's scan will not be performed until tomorrow morning, as a result of urgent cases needing attention this afternoon. You inform Albert's family of the delay and they react angrily towards you.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Inform Albert and his family that the delay is the responsibility of the radiology department
- B.** Apologise for the delay, listening to the family's concerns
- C.** Explain the clinical need for other scans to be conducted before Albert's scan
- D.** Inform Albert's family about the formal complaint procedure
- E.** Advise Albert and his family that the information that you gave them earlier was accurate at the time

21. You and another FY1, Katrina, are working together as part of a surgical team. The ward is very busy and you are taking a blood test from a patient. You notice that Katrina has left the ward without telling you. A nurse tells you that she has gone to assist a surgeon in theatre. Katrina has had her bleeps* redirected to you, which has left you with a very heavy workload.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Contact the operating theatre to request that Katrina returns to the ward
- B.** Ask Katrina, when she returns to the ward, to speak to you in future when she needs to leave the ward
- C.** Tell the senior doctor on the ward that Katrina has left without informing you
- D.** Report Katrina to her line manager for leaving the ward
- E.** Write a list of the jobs that have arisen in Katrina's absence so that she can complete them when she returns to the ward

22. You are on your way to add a patient to an emergency theatre list urgently when a nurse approaches you and says that he is concerned about one of your patients, Mr Benn. Mr Benn's catheter is showing a very low urine output following his surgery earlier that morning. You had already checked on Mr Benn during your ward round two hours previously and had seen that his urine output was adequate given his body size.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Reassure the nurse that you reviewed Mr Benn's urine output on the ward round earlier that morning
- B.** Go straight to Mr Benn to review his clinical condition
- C.** Explain that you need to add a patient to an emergency theatre list urgently, asking the nurse to find another member of the team to review Mr Benn
- D.** Ask the nurse to record vital signs and tell him that you will review Mr Benn once you have added your patient to the emergency theatre list
- E.** Ask the nurse whether Mr Benn's urine output has changed since the ward round this morning

23. You are working on a medical ward. You notice that one of your FY1 colleagues on the ward, Bashar, is not completing his assigned tasks. You often find him in the staff room on his mobile phone when he should be completing his tasks on the ward.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Accept that it is not your place to intervene
- B.** Ensure that you cover any tasks Bashar fails to complete
- C.** Discuss this with your educational supervisor* at the end of the placement
- D.** Ask Bashar why he is often in the staff room rather than on the ward
- E.** Inform a senior colleague of your concerns

24. You are an FY1 working on a general medical ward. As you return to the ward from your break you overhear your FY1 colleague, Clare, speaking to one of the healthcare assistants, Melissa, in the corridor. Clare tells Melissa angrily that she needs to improve her skills if she is ever to be any good at her job. Melissa looks visibly upset, apologises to Clare then walks away. You have witnessed Clare talking in a similar way to other colleagues in the past.

Rank in order **the extent to which you agree with the following statements** in this situation (1= Most agree with; 5= Least agree with).

- A.** Melissa needs to learn to accept feedback from other members of the team
- B.** It is not your responsibility to speak to Clare about her behaviour
- C.** Clare should not be speaking to members of staff in this manner
- D.** Melissa should inform a senior colleague if she has been upset by Clare
- E.** Clare needs to be held accountable for her behaviour

25. One of the FY1 doctors working in your team, Haman, had a seizure whilst at a social event that you attended a few days ago. You have known him for some time and are aware that he is on medication for epilepsy. Today another FY1 colleague, who also knows about Haman's medical condition, tells you that she saw Haman driving to work this morning.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Advise your FY1 colleague to speak to Haman about what she observed
- B.** Advise your FY1 colleague to seek advice from a senior colleague
- C.** Ask Haman if he has been driving after he has had a seizure
- D.** Suggest to your colleague that she reports Haman to his consultant
- E.** Suggest to your colleague that it is Haman's decision whether he feels safe to drive

26. You are on duty at night and see a patient, Mrs Penn. Mrs Penn has developed sudden shortness of breath and signs consistent with acute pulmonary oedema. You have managed this condition successfully before. However, the nurse in charge of the ward wants you to call the specialty trainee* to come to see Mrs Penn. You are aware that the specialty trainee is currently in the Emergency Department caring for a sick patient.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Explain to the nurse that you have managed this condition before and can care for Mrs Penn
- B.** Make an initial assessment of the patient, administer appropriate treatment and then inform the specialty trainee
- C.** Telephone the specialty trainee in the Emergency Department, explain the situation and your experience and follow his advice about what to do
- D.** Tell the nurse that Mrs Penn is your patient and that you will take responsibility for your decisions
- E.** Go to the Emergency Department to explain the situation to the specialty trainee in person

27. Mr Farmer has been a patient on the ward for six months; he has a tracheostomy and he breathes with the aid of a ventilator following a traumatic brain injury. As you make your rounds, you notice Mr Farmer appears to be experiencing breathing problems. Both the consultant and specialty trainee* are dealing with a patient on the neighbouring ward. This is your first week as an FY1 and you have not yet attended a potentially critically unwell patient by yourself.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Call the crash team to attend to Mr Farmer as a matter of urgency
- B.** Seek advice from the physiotherapy team who are on the ward and have experience in managing Mr Farmer's case
- C.** Contact the specialty trainee to discuss Mr Farmer's symptoms
- D.** Ask the ward nurse to fully assess Mr Farmer's status with you immediately
- E.** Ask the consultant to return to your ward straight away to attend to Mr Farmer

28. You are working on an elderly care ward. During the ward round, your consultant asks you to request a CT* scan for Mrs Roberts. You overhear the specialty trainee* saying to another colleague that there is no indication that a CT scan is needed for Mrs Roberts and that it is inappropriate to request one. The consultant does not hear the specialty trainee's comments.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Request the CT scan, as asked by your consultant
- B.** Discuss the case and difference of opinion with the consultant radiologist
- C.** Discuss with your consultant the reasons for the CT scan
- D.** Tell your consultant that the specialty trainee has said that the CT scan is not needed and that the request is inappropriate
- E.** Suggest to your specialty trainee that if he thinks the scan is not needed he should raise this with the consultant

29. During a consultant ward round, you see a patient who needs to undergo a minor operation. The consultant asks the specialty trainee* to obtain consent, which he does. Later the nurse tells you that she is concerned because the patient does not seem to understand fully what is happening to him, although he is aware he is going to theatre.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Check the patient's understanding of the operation
- B.** Advise the patient to withdraw his consent until he has further details of the operation
- C.** Ask the nurse to contact the specialty trainee to speak to the patient
- D.** Inform your consultant that there may be concerns over the patient's consent
- E.** Inform the specialty trainee that the patient would like further clarification of the operation

30. A locum senior doctor* has asked you to prescribe a drug for a patient, Mr Singh. You have seen on Mr Singh's charts that he is allergic to a similar drug and you are concerned that a reaction may occur if you prescribe the suggested drug. The locum doctor does not know the patients on the ward well and recently reacted angrily when another FY1 on the ward questioned one of his decisions.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Speak with the on-call pharmacist about whether you should prescribe the drug to Mr Singh
- B.** Explain to the locum doctor that you are concerned about prescribing the drug to Mr Singh
- C.** Ask another senior doctor whether it is appropriate to prescribe the drug to Mr Singh
- D.** Prescribe the drug to Mr Singh, as requested by the locum doctor
- E.** Speak about your concerns with the nurse who would administer the drug to Mr Singh

31. It is 8am and you are beginning a New Year's Day shift. A fellow FY1 colleague has called in sick for the same shift; stating that she has food poisoning. The following day you learn that your absent colleague had posted pictures on a social networking site from a New Year's Eve party that she had attended the night before her shift.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Make other colleagues on the rota aware of the photos from the party
- B.** Suggest to your FY1 colleague that she remove the photos from the social networking site
- C.** Seek advice from another FY1 colleague
- D.** Ask your colleague for an explanation of why she called in sick the day after a party
- E.** Alert a senior colleague to the photos on the social networking site

32. You are working on a care of the elderly ward. Mrs Singh is dying and her family have requested a single room to provide her with some privacy. Another patient, Mr Green is currently in a single room but is well enough to be moved to the four-bed ward. All other single rooms are occupied with patients that cannot be moved. A nurse has advised Mr Green that he is to be moved out of the single room but he has refused as he says he feels uncomfortable being in a ward with other patients. Mr Green's daughter is a medico-legal solicitor.

Rank in order **the importance of the following considerations** in the management of this situation (1= Most important; 5= Least important).

- A.** Mrs Singh and her family have a right to privacy
- B.** That another single room is unlikely to become available in the near future
- C.** That Mr Green's daughter is a medico-legal solicitor
- D.** That Mr Green had the room first
- E.** Mr Green's reasons for wanting to stay in the single room

33. You work on a busy ward with an FY1 colleague. There are many tasks to be completed and the specialty trainee* has said that you and your colleague can go home once the tasks are complete. You have nearly completed your tasks when you are called to another ward on the other side of the hospital. Your FY1 colleague suggests that you call your ward when you are finished, because there will be no need to return to the ward if all the tasks are complete. When you are finished, you telephone your ward but get no answer.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Continue to telephone your ward until someone answers
- B.** Ask a nurse to contact your ward to say that you have gone home
- C.** Send a text message to your FY1 colleague, asking her to call you back
- D.** Return to your ward
- E.** Leave the hospital and go home

34. Your consultant has to attend to a patient on another ward. In her absence, she asks you to liaise with the radiology department to arrange an urgent CT* scan for Mrs Lewis. You request to book the test but are contacted by the radiologist a few hours later. He informs you that he has rejected your request on the basis of insufficient information.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Send the CT scan request to another radiologist
- B.** Ask the radiologist to explain in more detail what was missing from the request
- C.** Ask your specialty trainee* to discuss the request with the radiologist
- D.** Call your consultant to inform her that the radiologist has rejected the request
- E.** Ask your consultant to return to your ward so you can explain the situation

35. Mr Reese has end-stage respiratory failure and needs continuous oxygen therapy. While you are taking an arterial blood gas sample, he confides in you that he knows he is dying and he really wants to die at home. He has not told anyone else about this as he thinks it will upset his family, and the nursing staff who are looking after him so well.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Tell Mr Reese that whilst he is on oxygen therapy he will need to stay in hospital
- B.** Reassure Mr Reese that the team will take account of his wishes
- C.** Discuss his case with the multi-disciplinary team* (MDT)
- D.** Discuss with Mr Reese's family his wish to die at home
- E.** Discuss Mr Reese's home circumstances with his GP*

36. You and another FY1, Robert, are working together on a hospital ward and are sharing ward tasks. After a couple of weeks, it becomes clear that Robert has been taking most of the quicker and easier tasks, and has been leaving you with longer and more difficult tasks. This has allowed Robert to spend additional time collecting data for an audit that his educational supervisor* has asked him to do.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Speak with Robert about your concerns regarding the distribution of work tasks
- B.** Discuss the distribution of work tasks with your educational supervisor
- C.** Report the unfair distribution of work tasks to Robert's educational supervisor
- D.** Complain to the ward consultant about the allocation of tasks
- E.** Discuss the situation with another FY1 colleague

37. At the end of your shift you ordered a blood test and CT* scan for one of your patients, Mrs Tao, who was complaining of feeling faint and confused following surgery. The investigation results need to be reviewed tonight, otherwise Mrs Tao's treatment may be delayed. You have just arrived home and realise you forgot to hand over the need to review the investigation results to the FY1 doctor taking over your shift. You have been unable to contact the FY1 taking over directly.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Telephone the ward nursing staff and ask them to get the FY1 taking over your shift to look up the investigation results
- B.** Contact the on-call specialty trainee* and explain the situation
- C.** Go back to the hospital and look up the investigation results yourself
- D.** Contact an FY1 colleague working on another ward to ask her to look up the investigation results for you
- E.** Review the investigation results first thing in the morning when your shift starts

38. A patient with a complex medical history dies on the ward after a prolonged period of investigation and treatment. Although enough is known to be able to complete a death certificate, your consultant is keen to arrange a post-mortem to find out more. He gains the consent of the patient's family for this. However, shortly afterwards the family speak to you as you are passing on the ward. They tell you they felt coerced into saying 'yes' to the post-mortem and are upset about the request.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Refer the family's request back to your consultant and ask him to speak to them again
- B.** Ask your consultant for his reasons for requesting the post-mortem
- C.** Ask another senior colleague within the team to meet with the family to discuss their concerns
- D.** Explore the family's concerns with them
- E.** Reassure the family that post-mortems are standard practice in situations like these

39. You are working on a busy surgical ward and are on your way to speak to a patient on another ward about their elective surgery. Mrs Hill, who is the wife of one of your patients, approaches you. She tells you that her husband was meant to be discharged today but that no-one seems to be doing anything. She is very upset as she had made plans for his discharge and she begins to shout at you. Your consultant told you earlier today that Mr Hill will need to be observed for a further two days before he can be discharged.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Ask your specialty trainee* to explain to Mrs Hill why her husband is not being discharged today
- B.** Tell Mrs Hill that you will speak to her when you return to the ward
- C.** Take Mrs Hill into a side room with a nurse to discuss why her husband is not being discharged today
- D.** Explain to both Mrs Hill and her husband why he is not being discharged today
- E.** Inform Mrs Hill that you cannot speak with her until she has calmed down

40. It is 5pm and you are on-call. A nurse from another ward brings you a prescription chart. She tells you that one of her patients has not opened her bowels for five days and, because of this, is very uncomfortable and disturbing other patients. She asks you to sign a laxative prescription as the FY1 doctor on her ward has just refused to do so.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Agree to prescribe a laxative
- B.** Attend to the patient and make an assessment
- C.** Explain to the nurse that if another doctor has told her that a laxative is not required, then that must be the correct decision
- D.** Speak to the other FY1 doctor about why he refused to prescribe a laxative
- E.** Consult with your specialty trainee* about whether you should prescribe a laxative

41. You work on a ward with a nurse, Suzanne, who is also your friend.

Suzanne's mother, Belinda, is a hospital outpatient, whom you have examined previously. Following a discussion with the consultant, you are aware that the results of Belinda's recent CT* scan suggest pancreatic cancer. The consultant told you that he has asked Belinda to meet with him later on today to discuss the results and has said that her family may attend. Suzanne approaches you later on in the corridor and asks if the meeting has been scheduled because the results suggest bad news.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Explore with Suzanne any anxiety she may have about her mother's results
- B.** Confirm the results, advising Suzanne not to tell her mother before the meeting
- C.** Tell Suzanne politely, but clearly, that you cannot tell her the results because of patient confidentiality
- D.** Advise Suzanne to wait until the meeting as a senior colleague will be better able to explain the results
- E.** Ask Suzanne whether she has her mother's permission to discuss the results before responding

42. A pharmacist approaches you on the ward and queries the dose prescribed to a patient. The dose is twice the normal dosage for that particular drug. You know that the drug was prescribed by the consultant, but do not know the reason why. The pharmacist explains that he has seen the dose prescribed at that level for particular cases previously, but wanted to double check as it is quite unusual. The consultant is currently not on the ward.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Telephone the consultant to find out the reason why the dose is higher than normal
- B.** Explain to the pharmacist that you do not know why the dose is higher and politely request that he checks with the consultant if he is concerned
- C.** Change the dosage to the normal amount given until you are able to discuss it with your consultant
- D.** Ask the patient if he knows why he is on a higher dose of the drug than normal
- E.** Explain to the pharmacist that you would like to keep the dosage as prescribed by the consultant

43. You are working on the ward with a nurse, Penny, when you observe that she is not completing hygiene procedures correctly. You have seen Penny check dressings without putting on gloves and neglecting to use hand disinfectant before entering the ward. Penny is a senior nurse with many years of experience.

Rank in order **the importance of the following considerations** in the management of this situation (1= Most important; 5= Least important).

- A.** The risk to patient safety if correct hygiene procedures are not followed
- B.** Patients' potential anxiety if they notice that she is neglecting to use gloves and hand disinfectant
- C.** Penny's experience working on the ward in comparison to you
- D.** That it is the responsibility of the Infection Control* team to monitor and enforce hygiene procedures
- E.** The potential for other nurses to follow her example

44. You are working on a weekend and are providing cover for two other wards in addition to your usual ward. You are due to finish in 15 minutes. You are contacted by a nurse from one of the other wards, James, who asks you to speak to the relatives of Elizabeth, a patient who has recently been diagnosed with cancer. James tells you that Elizabeth has been informed of the diagnosis, but that the relatives now want to talk to a doctor to discuss the diagnosis and management plan without Elizabeth being present. You do not know Elizabeth, and the regular staff are not working on site this weekend.

Rank in order **the importance of the following considerations** in the management of this situation (1= Most important; 5= Least important).

- A.** The risk of miscommunication with the family as you are unfamiliar with the patient, her diagnosis and management plan
- B.** The potential conflict with James that will be caused if you do not comply with his request
- C.** The distress that could be caused to the relatives if they do not have the opportunity to discuss their concerns
- D.** The patient's right to confidentiality
- E.** That this conversation is likely to be time-consuming and therefore may mean that you will leave late

45. You are just finishing a busy shift on the Acute Admissions Unit* (AAU). Your FY1 colleague who is due to replace you for the evening shift leaves a message with the nurse in charge that she will be 15 to 30 minutes late. There is only a 30-minute overlap between your timetables to handover to your colleague. You need to leave on time as you have a social engagement to attend with your partner.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Make a list of the patients under your care on the AAU, detailing their outstanding issues, leaving this in the doctors' office when your shift ends and then leave at the end of your shift
- B.** Quickly go around each of the patients on the AAU, leaving an entry in the notes highlighting the major outstanding issues relating to each patient and then leave at the end of your shift
- C.** Make a list of patients and outstanding investigations to give to your colleague as soon as she arrives
- D.** Ask your specialty trainee* if you can leave a list of your patients and their outstanding issues with him to give to your colleague when she arrives and then leave at the end of your shift
- E.** Leave a message for your partner explaining that you will be 30 minutes late

46. On a ward round, the specialty trainee* tells you to write a drug prescription for a patient, Mrs Smith. Before prescribing the drug, you realise that this medicine is contra-indicated with Mrs Smith's other treatments. The specialty trainee has now left the ward.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Write up the drug as requested but omit the start date for the drug until you are able to speak to the specialty trainee
- B.** Ask another senior colleague for advice on whether a different drug should be prescribed
- C.** Decline to prescribe the drug but write in the patient notes that the drug is contra-indicated for Mrs Smith
- D.** Discuss with the ward pharmacist the most appropriate drug to prescribe instead
- E.** Try to contact the specialty trainee to inform him of Mrs Smith's other treatments

47. You have been working on the surgical team for four weeks. One of the nurses, Jill, has undermined your decisions several times, and has twice called you incompetent in front of patients and staff. You have mainly ignored Jill's comments, though you did try to speak to her once about your concerns without success. More recently an FY1 colleague told you that you should not allow her to speak to you like that. You have not had feedback from any other team members to indicate that there are any problems with your performance.

Rank in order **the appropriateness of the following actions** in response to this situation (1= Most appropriate; 5= Least appropriate).

- A.** Continue to ignore Jill's comments
- B.** Inform the nurse in charge about Jill's comments
- C.** Find Jill when she is on a break and ask what her concerns are with you
- D.** Inform your consultant about Jill's comments
- E.** Ask other FY1s if they have had similar problems with Jill

Part Two

48. You are an FY1 doctor working in the Emergency Department. A 48 year old patient presents with an ankle injury. He is intoxicated, loud and demands immediate medical treatment. There are four patients waiting ahead of him. He is upsetting the other patients and at one point, threatens another patient with physical violence.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A. Ask one of the nurses to try and calm the patient down
- B. Call security for assistance
- C. Tell the patient that his behaviour is inappropriate and will not be tolerated
- D. Arrange for the patient to be moved to a side room away from the other patients
- E. Arrange for the patient to be treated as soon as possible
- F. Tell the patient he will not be treated if he continues to behave in this manner
- G. Ensure the other patients are not distressed by the situation
- H. Ask the other patients if they would mind if this patient was treated before them

49. At lunch an FY1 colleague bursts into tears. She says she feels she is not coping with the job. She thinks that her consultant is too demanding and the nurses are annoyed because she is not keeping up with the workload.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A. Talk to her about the circumstances of her distress
- B. Suggest she discusses the issues with her specialty trainee*
- C. Advise her to take a few days' annual leave to rest
- D. Encourage her to get help from her GP*
- E. Offer to go with her to talk to her consultant
- F. Inform her educational supervisor* that she appears to be struggling
- G. Ask other members of the team to be supportive as she is having difficulties coping
- H. Offer to assist with some of her workload

50. You are on a busy colorectal team and regularly need to work late to complete all of your tasks. Your FY1 colleague, Jenny, works on the breast team and usually finishes all her jobs by lunchtime. You have 20 new patients this morning and a long list of jobs, including checking blood results. You will need to work late in order to complete all of these tasks. You notice that Jenny is checking her personal e-mails on the ward computer. Your specialty trainee* is busy in theatre.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Ask Jenny if she would mind helping you today
- B.** Inform your specialty trainee in theatre that you are extremely busy and need some help
- C.** Stay at work until you have completed all of your tasks
- D.** Talk to your consultant about the unequal workload between you and Jenny
- E.** Raise the issue of unequal workloads at the next departmental meeting
- F.** Explain to Jenny that it is not appropriate to check personal e-mails at work
- G.** Ask a medical student to assist you by requesting x-rays and scans
- H.** Hand over the remaining jobs to the on-call team at the end of your shift

51. A confused patient has intra-abdominal infection and acute renal failure after a procedure. Instructions to the nursing staff are clearly written in the notes regarding what action to take in response to a change in the patient's urine output. On the morning ward round, you find these instructions were not followed by the night nursing team and the patient has deteriorated as a consequence. The patient has now received treatment but follow up actions are required.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Inform the nurse in charge of the ward of the incident
- B.** Explain to the patient that there was an error with the management of her condition
- C.** Inform a senior member of the medical team of the incident
- D.** Speak to the nurses involved next time you see them about your concerns with their management of the patient
- E.** Find out whether the nurses were aware of the instructions regarding changes to the patient's urine output
- F.** Offer to write a protocol formalising team communication
- G.** Record your account of the night's events in the patient's notes
- H.** Ask the nurses to increase the frequency of observations on the patient

52. You are walking through your ward when you notice that a patient has two tablets in his hands that he is about to consume. The medication was prescribed to him earlier this morning and his case notes clearly state 'take one tablet twice daily'. The patient in question does not speak English.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Arrange for a translator to ask the patient if he knows how he is supposed to take the medication
- B.** Prevent him from taking both tablets now
- C.** Speak to the doctor who prescribed the medication about the incident
- D.** Illustrate on a piece of paper how and when to take the medication
- E.** Seek advice on drug dosing from the pharmacist
- F.** Inform the nurse in charge about the incident
- G.** Find out if his relatives speak good English and can translate the prescription to the patient
- H.** Ask the nurse who dispensed the medication to explain why he has more tablets than prescribed

53. You are working on a surgical ward and have been asked by the consultant to do a number of tasks: blood from four patients; chase up results from the ward patients and also from patients in yesterday's clinic; and to sort out infusion prescriptions for two patients due in this morning. You are approximately half way through these tasks and you are sure that you have a sufficient time during the morning to complete the rest. The consultant bleeps* you to ask you why the tasks have not been completed yet. You have heard from your FY1 colleagues that this consultant has a reputation for giving Foundation doctors lots of tasks to complete within a short period of time.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Explain to your consultant that it is unrealistic to expect all of the tasks to be completed by now
- B.** Tell the consultant that the tasks will be completed as soon as possible
- C.** Explain to the consultant what tasks you have done, and how long they have taken
- D.** Ask your FY1 colleagues for assistance with completing the tasks
- E.** Inform the Foundation Programme Director* that the consultant is giving junior doctors unrealistic timeframes to complete tasks
- F.** Ask the consultant whether he would be able to help you complete some of the tasks
- G.** After the tasks have been completed, seek advice from your educational supervisor* about how to approach situations such as these
- H.** Try to speed up completion of tasks by deferring some of the paperwork until later

54. You have just started your shift. You have not met one of the patients, Mrs Gordon but you know from the handover that she is being treated for a fractured knee and is recovering well. Her husband has noticed that she has lots of bruising around her knee. He angrily approaches you claiming her doctor is not doing her job properly as the bruising is getting worse.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Ask a senior colleague to speak to Mr Gordon
- B.** Ask the nurse who has been caring for Mrs Gordon to speak with him
- C.** Ask Mr Gordon to lower his voice as he is disrupting the other patients
- D.** Tell Mr Gordon the other doctor has now finished her shift so you are now taking over responsibility for Mrs Gordon
- E.** Try to answer any questions Mr Gordon has
- F.** Reassure Mr Gordon that the bruising will be the result of the fractured knee
- G.** Set up an appointment for Mr Gordon to meet with the consultant
- H.** Re-examine Mrs Gordon's knee

55. You have worked on a ward with another FY1 colleague, Ben, for the last three weeks. You have noticed that Ben seems to avoid writing prescriptions and filling in drug charts. The nurses appear to be getting frustrated with Ben because of this. When you speak to Ben about it, he tells you that he is dyslexic but has not told anyone as he is embarrassed.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Make the nursing staff aware of the situation
- B.** Check all the drug charts and prescriptions Ben has recently written
- C.** Explain to Ben the potential safety risks to patients if he continues to ignore the issue
- D.** Discuss the situation with a senior colleague
- E.** Recommend to Ben that he raises this with his educational supervisor*
- F.** Offer to help Ben with his prescriptions and drug charts
- G.** Discuss the situation with your team and ask them to help you monitor Ben's drug charts and prescriptions
- H.** Speak to Occupational Health* (OH) about the best course of action to take

56. You have been prescribed codeine for persistent back pain which has become worse in the last few weeks. You have noticed that during shifts you are becoming increasingly tired, finding it difficult to concentrate and your performance, as a result, has been less effective.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Ask a colleague to assist with your workload until you finish your codeine prescription
- B.** Make an effort to increase the number of breaks during your next shift
- C.** Stop taking the codeine immediately
- D.** Make an appointment to see your GP*
- E.** Seek advice from a specialist consultant about your back pain
- F.** Arrange to speak with your specialty trainee* before your next shift and make them aware of your situation
- G.** Seek advice from your clinical supervisor* regarding further support
- H.** Consider taking some annual leave

57. You become aware that one of your FY1 colleagues, Daniel, is consistently not doing his fair share of the ward work. His night shift colleague has told you that he leaves much of the routine work for her and provides poor handover information. However, he is personally very likeable and always performs jobs diligently when directly requested. You know that no-one has broached this with him yet.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A. Discuss Daniel's behaviour with his clinical supervisor*
- B. Suggest to the nursing staff that they ask Daniel directly to complete the routine work
- C. Explain to Daniel that his behaviour means colleagues have to do extra work and this could impact on patient safety
- D. Bring up the issue of effective handovers at the next team meeting
- E. Ask Daniel if he needs help with his handover
- F. Discuss the situation with your consultant
- G. Ask other staff on the ward if they are experiencing problems with Daniel
- H. Suggest to your night shift colleague that she speaks to Daniel directly about him not completing his tasks

58. You are working in the Emergency Department (ED). Mrs Gersbach, a 65 year old female patient, is admitted with chest pain. This is her fifth attendance with chest pain in the last two weeks. She has been extensively investigated over this time, and a cardiologist has documented that all investigations have been normal and that her pain is not cardiac in origin. Today, nothing on examination or any of the investigations suggest that her pain is a symptom of cardiac disease. There are no other worrying signs or symptoms.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Admit Mrs Gersbach to the Acute Admissions Unit* (AAU) for further investigations
- B.** Write to Mrs Gersbach's GP*, asking her to dissuade Mrs Gersbach from attending the ED
- C.** Explain to Mrs Gersbach that there appears to be nothing wrong with her
- D.** Reassure Mrs Gersbach that her pain is definitely not a symptom of cardiac disease
- E.** Ask a senior colleague to speak with Mrs Gersbach
- F.** Ask Mrs Gersbach if there is anything that she is worried about that might be causing her pain
- G.** Arrange an outpatient exercise tolerance* for Mrs Gersbach
- H.** Tell Mrs Gersbach that her attendance at the hospital is not the best use of the ED's doctors' and nurses' time

59. An FY1 colleague, Lewis, arrives late into work on a frequent basis.

You think you may have smelt alcohol on his breath previously, but were not sure. This morning Lewis smells strongly of alcohol and is unsteady when walking.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Ask Lewis if he has been drinking alcohol
- B.** Tell Lewis that he should go home immediately if he is unfit to work
- C.** Inform the consultant in charge of the ward that Lewis smells of alcohol and is unsteady when walking
- D.** Seek advice from a senior colleague about how to manage the situation
- E.** Explore with Lewis if there are any reasons behind his behaviour
- F.** Tell Lewis that if this happens again, you will have to tell the consultant
- G.** Tell Lewis to get a cup of coffee
- H.** Inform the General Medical Council* (GMC) of your concerns about Lewis

60. You are in the canteen and are joined by an FY1 colleague, Amadi, who is not on shift. Amadi tells you that his girlfriend was involved in a serious road accident last week and is now in the Intensive Care Unit* (ICU). He tells you that he is very stressed and has barely slept in the last week. He thinks that he is going to have difficulty coping with his weekend shift. He has refused to take compassionate leave as he does not want to leave the ward understaffed.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Advise Amadi to see his GP*
- B.** Suggest to Amadi that sleeping tablets may help
- C.** Advise Amadi to contact the Trust's counselling service
- D.** Advise Amadi to seek time off work from his consultant
- E.** Discuss your concerns with Amadi's educational supervisor*
- F.** Advise Amadi to discuss this with his educational supervisor
- G.** Offer to go somewhere more private to discuss Amadi's concerns
- H.** Contact the ICU to find out about Amadi's girlfriend's health situation

61. You are treating Mrs Taylor for a urinary infection. You receive the antibiotic sensitivity results. You inform your consultant that the *E coli* causing Mrs Taylor's urinary infection is sensitive to amoxicillin. As a result, this antibiotic is then started. You realise later that day that you have misread the result and that the *E coli* is actually resistant to amoxicillin and is sensitive only to ciprofloxacin. Mrs Taylor had no adverse reaction to the antibiotic.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A. Inform your consultant of the correct result
- B. Record the incident as a learning point in your learning portfolio*
- C. Contact microbiology for advice
- D. Tell Mrs Taylor that you have prescribed the incorrect antibiotic
- E. Reassess Mrs Taylor's vital signs
- F. Change the antibiotic to ciprofloxacin
- G. Repeat the urine specimen culture
- H. Ask your specialty trainee* for advice

62. You review a patient on the surgical ward who has had an appendicectomy done earlier on the day. You write a prescription for strong painkillers. The staff nurse challenges your decision and refuses to give the medication to the patient.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Instruct the nurse to give the medication to the patient
- B.** Discuss with the nurse why she disagrees with the prescription
- C.** Ask a senior colleague for advice
- D.** Complete a clinical incident form
- E.** Cancel the prescription on the nurse's advice
- F.** Arrange to speak to the nurse later to discuss your working relationship
- G.** Write in the medical notes that the nurse has declined to give the medication
- H.** Review the case again

63. You have been approached by an FY1 colleague, James, who has been on shifts with another FY1 doctor, Mark, for the last two weeks. James tells you that Mark has become increasingly careless in monitoring and documenting patient records. On three occasions, James tells you that he has found Mark asleep in the common room whilst on duty. You know Mark very well and have never witnessed such behaviour when you have worked with him previously.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Tell James that you have never witnessed such behaviour from Mark
- B.** Suggest to James that he speaks to Mark directly about his concerns
- C.** Advise James to document his concerns
- D.** Inform a senior colleague about what James has told you
- E.** Tell James you will speak to Mark about his behaviour
- F.** Ask other members of the team whether they have witnessed this behaviour in Mark
- G.** Advise James to speak to a senior colleague about his concerns
- H.** Ask James whether he has any evidence that patient safety is being compromised

64. It is the end of your shift and on your way out of the ward you remind one of the nurses that Mr Baker, who has been admitted to the hospital with chest pains, needs his blood taken within the hour for cardiac markers. The nurse tells you that the ward has now got very busy so Mr Baker will have to wait. She is very abrupt in her response to you.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Ask the nurse for further details about the other urgent tasks that need to be completed on the ward
- B.** Ask the FY1 taking over your shift to take Mr Baker's blood
- C.** Discuss with the nurse in charge the procedure for taking essential bloods at busy times
- D.** Insist that the nurse tries to find the time to take Mr Baker's bloods
- E.** Take Mr Baker's blood yourself
- F.** Suggest to the nurse that she considers how she speaks to other members of the team in future
- G.** The next day, speak to the nurse privately about the way she spoke to you
- H.** Speak to the nurse in charge about the way the nurse spoke to you

65. You are working on a busy medical ward and you have one hour left of your shift. During that time you have to complete paperwork, which will take approximately 45 minutes, and see three patients who may take 15 minutes each. A healthcare assistant asks you to speak to a relative of a patient on the ward, who has called the ward asking to speak to someone.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Ask a nurse on the ward to assist you with seeing the patients
- B.** Ask the healthcare assistant if he or she can ask a nurse who knows the patient to speak with the relative
- C.** Stay late at work to ensure that you complete all of the tasks
- D.** Finish the most important clinical tasks and hand over any uncompleted tasks to the next shift
- E.** Ask an FY1 colleague to assist you with completing your tasks
- F.** Inform a senior doctor that you will be unable to complete all of your tasks during your shift
- G.** Agree to speak to the patient's relative on the telephone
- H.** Ask the patient's relative to call back later to speak to a doctor

66. You are reading some medical magazines in the hospital canteen, whilst on a break. In one magazine, you come across an advertisement for private specialist services bearing the picture and name of Simon, a fellow FY1. You are aware that providing such services is not allowed for FY1 doctors as full registration has not been granted by the GMC* and they can only work in an approved programme and setting. You are aware that Simon is experiencing severe financial difficulties.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A. Suggest to Simon that he tells his educational supervisor* about the advertisement
- B. Suggest to Simon that he stops providing this service immediately
- C. Inform the Foundation Programme Director* about Simon's advertisement
- D. Discuss with Simon alternative ways for him to make money
- E. Ask fellow FY1s for their opinion on Simon's actions
- F. Ask Simon whether he is aware that providing specialist services is not allowed as an FY1 doctor
- G. Ask Simon whether anyone is aware that he is advertising these services
- H. Inform Simon that it is unacceptable to place such advertisements

67. During a ward round, your consultant loses his temper and shouts at the other FY1 doctor on your team for not having ordered blood tests for a patient. This incident is overheard by the patient concerned, the nursing staff and the rest of the medical team.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Once away from the bedside suggest to the consultant that the situation felt uncomfortable and you were worried that the patient had been upset
- B.** Tell the consultant later in private that you think that his behaviour was inappropriate
- C.** Advise your FY1 colleague that he should speak to the consultant about the incident
- D.** Discuss with the nursing staff whether this is usual behaviour for the consultant
- E.** Advise your FY1 colleague to speak to his educational supervisor*
- F.** Apologise to the patient after the ward round
- G.** Ask a more senior colleague on the team for advice
- H.** Ask your FY1 colleague if he needs any help with his workload

68. You are reviewing one of your patients, Mrs Hobbs, who is on your ward being treated for an infection in her toe. During a routine examination, you notice that in Mrs Hobbs' drug chart the FY2 has prescribed her penicillin and the administration is due in 45 minutes' time. You remember your consultant informing you earlier that day that Mrs Hobbs was allergic to penicillin.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Inform the FY2 that they have made an error
- B.** Cross out the prescription on Mrs Hobbs' drug chart, dating and initialling the amendment
- C.** Tell the nursing staff on duty not to administer penicillin to Mrs Hobbs
- D.** Contact your specialty trainee* to confirm what the consultant has said about the penicillin allergy
- E.** Inform your consultant about the situation
- F.** Ask Mrs Hobbs whether she is allergic to penicillin
- G.** Explain to Mrs Hobbs that an incorrect prescription has been made by the FY2
- H.** Review Mrs Hobbs notes to try and clarify whether she is allergic to penicillin

69. A 45 year old alcoholic is admitted in the afternoon with delirium tremens after stopping drinking two days previously. During the night, you are called to see him as he has become very aggressive and is demanding to be allowed home. As you arrive on the ward he punches one of the nurses. He is confused, shouting and threatening other patients.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Prescribe extra sedation for the patient
- B.** Ask the nursing staff to call hospital security
- C.** Attempt to talk to the patient to try and calm him down
- D.** Reassure the other patients in the ward that they are safe
- E.** Ask the nursing staff to help you restrain the patient
- F.** Ask the nursing staff to call the police
- G.** Inform the patient that his behaviour is inappropriate and will not be tolerated
- H.** Ensure that the nurse who was punched is not badly injured

70. You share the responsibility for the patients on the Cardiology ward with your FY1 colleague, Sam. He has previously confided in you that he is finding his FY1 role very difficult. It is the end of Sam's shift and he informs you that he has been unable to complete all his tasks and once again passes them on to you to finish as you are on a late shift.

Choose the **THREE** most **appropriate actions** to take in this situation.

- A.** Speak to your fellow FY1s to see whether they think that his conduct is acceptable
- B.** Suggest to Sam that he may want to discuss his difficulties with his clinical supervisor*
- C.** Advise Sam to inform his consultant that his workload is excessive and unachievable
- D.** Suggest to Sam that, on this occasion, you share the urgent jobs that need to be done with another colleague
- E.** Delegate some of the tasks to your other FY1 colleagues
- F.** Discuss with Sam what he is finding difficult about his role
- G.** Inform Sam's clinical supervisor about the incident
- H.** Set some time aside to help Sam with his prioritisation skills