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November 2013

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## A Practical Guide to the Situational Judgement Test

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# Foundation Programme Guru

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## Introduction to the SJT exam

The SJT examination, scheduled for the 7th December or January is a new challenge for final year medical students. It is a bit of an unknown quantity and as such, getting practice at the type of questions you will be asked is important if you want to do well.

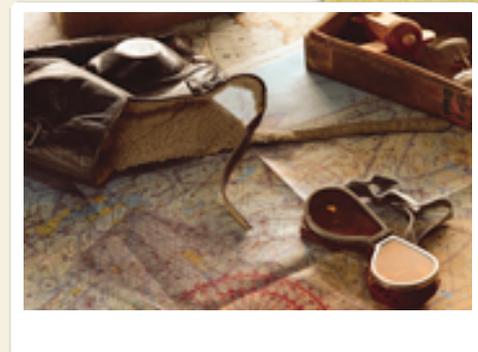
Situational judgement questions give you a clinical scenario and ask you to make judgements on what you would do. There are two formats, ranking questions and multiple choice questions. Ranking questions ask you to rank in order, your response to a situation (1 = Most appropriate, 5 = Least appropriate). Multiple choice questions ask you to choose the three most appropriate actions to take in a given situation.

In the exam there will be 70 questions, 60 of them count (40 ranking, 20 multiple choice) with the other 10 questions trials for future exams. You won't know which count therefore you should treat all 70 as if they do.

There are 2 minutes per question, and it is important to keep to time. In the trial runs of our online mock exams (soon to be available on our website) the candidates performing the least well did so because they failed to complete the paper in the required time.

People have written to us asking whether they should run to a crash call or walk, or if it's ok to leave work 30 minutes but not

an hour late. It is unlikely they will test you on something as small print as this. Most of the questions will be based upon important real life scenarios that you will experience once you start as a doctor. Therefore all questions should have reasonable scenarios with well thought out options to select from. There should be a correct answer that 90% of experienced doctors would agree on.



Our questions have been written by doctors at both SHO and registrar level. They have each been screened by our editorial team making sure that four specialty registrars agree on the correct answer. The scenarios have been designed to closely reflect the planned style of the SJT influenced by guidance from SJT question writers. The questions have then been thoroughly checked for accuracy by Consultants including Mr Ramachandran the author of *Secrets of Success: Getting Into Foundation Training*.

We want to help you as best we can, as we know what it's like to be in your position. Let us know if there's anything else we can do.

We're launching a question bank to help you get the practice you need. It's been carefully designed using the type of scenarios you will be asked, and relies of advice from official question writers.

Check it out at [www.foundationprogrammeguru.co.uk](http://www.foundationprogrammeguru.co.uk)

# What are SJT questions based on?

## BREAKING DOWN THE SITUATIONAL JUDGEMENT TEST

The foundation application programme is designed to test whether you will be a safe doctor who can make decisions even in difficult situations. There are several key concepts that are commonly tested. These concepts are useful when answering SJTs as they can form a framework for your decision to sit upon. For example if option A seems to put the patient first more clearly than option B then it is a better choice. We have provided a quick reference table containing many of the principles the SJT is designed to test, as summarised from official guidance and the GMC Good Medical Practice guide, and we discuss these principles in more detail with examples here.

### AS A FOUNDATION DOCTOR YOU ARE EXPECTED TO

#### **Put the patient first, treat patients as individuals and respect their dignity**

This means you put patient care at the centre of your decisions and work together with them to come to the right decision. You should show them respect and empathise with their point of view. If a patient is angry at having to wait, you should demonstrate empathy by apologising and trying to rectify the problem.

#### **Maintain patient safety**

You should do this always. If a medication required by the patient has been missed for whatever reason, then your first duty is to ensure that the medication is given, and to apologise to the patient for the mistake.

#### **Be committed to professionalism**

This means that you take responsibility for your actions, and if necessary challenge others on their

behaviour. For instance, if other members of staff, even those senior to you are behaving unprofessionally around a patient, you should intervene and ask them not to do so in front of a patient.

#### **Understand the extent and boundaries of your professional responsibilities and work within your own limitations, asking for senior help when needed**

You should be aware of your role as the FY1, and appreciate that you will often need to ask for help. If there is a situation that you feel is beyond your capabilities then your first port of call is normally your registrar, however the SHO or Consultant may also be able to help you.

#### **Maintain working relationships, and work well in a team**

In a team you should be trustworthy and reliable and demonstrate commitment and enthusiasm. You should work effectively with other doctors and in a multidisciplinary team. This should be done via a collaborative approach, respecting others' views. You should offer support and advice to your colleagues and share tasks appropriately. It is also important to show that you understand your own role within the team and ask for help when you need it.

Teamwork has various applications and can be tested with scenarios involving other FY1s, (eg not turning up on time), nurses (eg the wrong dose of a medication you prescribed is given), senior doctors (eg a bully as a registrar). In these questions you should choose an option that demonstrates good communication and diplomacy, and shows an ability to maintain working relationships.

## BREAKING DOWN THE SITUATIONAL JUDGEMENT TEST

### **Demonstrate good verbal and written communication**

Good verbal communication can be demonstrated through actively engaging with patients and colleagues in an equal and open dialogue and through active listening. Good written communication is concise and clear. Both should be adapted according to the context.

### **Cope well with pressure and make decisions in stressful conditions**

An FY1 should be able to work under pressure, adapt to changing circumstances and manage uncertainty. You should remain calm when faced with confrontation from colleagues or patients.

This means you remain calm and in control of a situation regardless of how stressful it is. Emphasis is placed on the ability to make decisions under pressure. For instance if you are in a cardiac arrest, a good decision would be to ensure someone is running the arrest eg the registrar whilst you take the patient's blood.

### **Be honest and act with integrity**

You should display honesty and integrity at all times and be aware of confidentiality and ethical issues. Never lie. In the SJT it is probably safe to assume that any option that involves a lie will be an inappropriate response.

### **Respect a patient's right to confidentiality.**

This includes: Keeping patient lists anonymised, logging out of the computer after viewing patient records, not leaving patient notes lying around, asking

the patient if they are happy discussing things with friends or family present, not using family members as translators, not discussing matters over the phone with family members unless specifically given permission by the patient. If you have to breach confidentiality, you should always discuss it with the patient and a senior beforehand

(Sources include the foundation programme website and the GMC Duties of a Doctor which you should all take time to read)

Use the principles here and in the table below as general guidance on how to approach the SJT question

## FURTHER PRINCIPLES THAT AN SJT MIGHT BE BASED UPON

COMMUNICATION	PROFESSIONALISM	PATIENT CENTERED
Chooses an appropriate setting for the conversation	Takes responsibility for their actions	Respects a patient's opinion and values
Has another member of the team present if necessary	Is reliable and committed	Puts the patient first
Listens empathetically	Is honest and acts with integrity	Maintains patient safety
Asks open questions	Remains calm under pressure	Treats the patient as an individual and respects their dignity
Negotiates to ensure optimum patient care	Apologises for a mistake and quickly acts to rectify the problem	Involves the patient in the decision making process
Summarises and clarifies the conversation	Deals appropriately with conflict	Treats relatives kindly and understands their concerns
Communicates well with team members	Understands their role and their limitations	Gains patient consent for any procedure
Documents clearly in the notes	Asks for senior help when needed	Maintains confidentiality

# Ranking Questions

Ranking questions ask you to rank five responses to a situation in order (1 = Most appropriate, 5 = Least appropriate).

This type of question lends itself well to situations where there isn't just one correct answer but a range of possible solutions, where one is a better response than another. Often this is because one answer deals with the situation appropriately but perhaps fails to respect one of the principles of good patient care, or one answer ensures a task is completed better than another.

In approaching a ranking questions, we suggest you read the question fully, and try to imagine yourself actually in that scenario. Read the answers from A to E and try to identify an answer that is the most correct and one that is obviously incorrect. Rank these 1 (most correct) and 5 (obviously incorrect). Then decide on the relative ranking of the answers in between and rank them 2-4.

If you're finding it difficult to decide on the order of two responses, and often it is designed to be difficult, we recommend going with your first or gut reaction as it is usually the correct one. Just pick one, and move on. Others will undoubtedly be struggling on that particular question too.

Ideal order	You rank it 1	You rank it 2	You rank it 3	You rank it 4	You rank it 5
C	4	3	2	1	0
D	3	4	3	2	1
B	2	3	4	3	2
E	1	2	3	4	2
A	0	1	2	3	4

*Ranking Markscheme*

## MARKING

Each question is scored out of 20, and for each of your 5 responses you can score up to 4 marks. If an answer should have ideally been ranked 1, C in the example table, and you ranked it 2 you will score 3 marks out of 4. If you ranked it 4 you'll only score 1 mark.

You can see from this that you can score highly even if you rank two of the options the wrong way around.

Don't give the same rank to two answers as both will score 0. You score 3 marks if you are nearly right anyway, so if you're not sure which of two responses is more appropriate then just pick one to be given the higher rank.

If you're unsure, just go with your gut feeling and come back to the question.

Working to time is key - 2 minutes per question

Don't give the same rank to two answers as this scores 0

You are a newly qualified FY1. You are one month into a four month rotation. The firm is very quiet and you have little to do, and feel that your educational and clinical needs are not being met.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Enjoy the quiet firm
- B Discuss your concerns with your educational supervisor
- C Discuss your concerns with the foundation programme director
- D Request that you move to a busier ward.
- E Help out your fellow FY1s on other wards

Answer BCDEA

Rationale This question assesses your ability to ensure your own continuing medical education. The first two years of your training are invaluable. The foundation programme allows a varied exposure to medicine in order to build the trainee's skills needed to become a competent doctor that is ready to apply and choose specialty training at the end of it. If any of your rotations fail to meet your clinical or educational needs it is vital that this is addressed as it will affect your ability to be a competent doctor. Your educational supervisor (B) is your first point of contact followed by the hospital foundation programme director (C). Enjoying the quiet firm (A) is least appropriate as it may compromise your training and shows lack of insight into your career and understanding of your professional requirements. The 3rd and 4th most appropriate answers (D) and (E) involve taking on more work showing a desire to learn but don't do this in the correct manner, ie through a discussion with the appropriate authority. (D) is more formal as you have informed someone of your desire, and therefore ranks above (E).

You are an FY1 working on a medical ward. The CT1 tells you he has tested positive for chlamydia and that he doesn't have time to go to the GP. He asks you to prescribe him antibiotics

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Tell the CT1 that he could go to A&E and take some from the medicine cupboard when no one is looking
- B Tell the CT1 to book an appointment to see his GP or local sexual health clinic
- C Take a full sexual history from him and prescribe the appropriate antibiotics after confirming this in the BNF
- D Refuse politely
- E Offer to hold his bleep for a couple of hours whilst he goes to visit the GP

Answer BDECA

Rationale This question assesses your ability to dealing with a difficult situation involving an inappropriate request from a senior colleague. You must refuse his request (D) however helping him by advising him to attend his GP or sexual health clinic (B), which also implies a refusal is a better top choice. The worst choice is to recommend stealing (A) which would call your integrity into question. Offering to hold an SHO's bleep (E) is risky, as a situation you aren't competent to deal with might arise, however, it is a better option than prescribing the antibiotics yourself (C).

You are on-call and asked to help clerk patients in A+E by the medical registrar. You have finished seeing the patient and the registrar comes to review the patient. As they are doing so the senior A+E Sister opens the curtain and states the patient must be moved immediately as the patient is about to breach the 4 hour limit. The Registrar and Sister begin to argue loudly in front of the patient.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Quietly extricate yourself from the argument
- B Intervene and suggest the conflict should be resolved elsewhere
- C Call security
- D Remove yourself from the argument and get the A+E consultant
- E Talk to the patient whilst the argument continues to distract them

Answer BDEAC

Rationale This question assesses your ability to deal with conflict in a professional manner. If issues arise between colleagues, discussions should be carried out in a sensible, rational and calm manner. It should certainly not be carried out in a public setting in front of patients. The best option is to intervene and politely suggest the discussion occurs elsewhere (B). The worst option is to call security as this is an over reaction which could make the situation worse for the patient and certainly embarrasses your colleagues. After (B) the next most appropriate response would be to ask for senior help (D), potentially embarrassing your colleagues but dealing with the situation professionally so that the patient is not affected. Simply removing yourself from the cubicle (A) is a poor choice as it fails to address the issue and demonstrates a lack of professionalism.

# GUIDE TO THE SITUATIONAL JUDGEMENT TEST PAGE 10

You are an FY1 on night shift with a registrar. They have mentioned that they don't want to be disturbed as they have been working all day and they are covering for sickness. You attempt to cannulate a patient twice but fail: they are on IV vancomycin for a peri-prosthetic hip infection.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

A Bleep the anaesthetist to cannulate the patient

B Call the on-call consultant

C Wake up the registrar

D Have a third attempt at cannulation

E Omit the antibiotics until the morning

Answer CADBE

Rationale This question assesses your ability to prioritise patient care. The most appropriate option here is to wake up the registrar (C). No matter what the registrar has said to you, the patient needs cannulation and your registrar should have an attempt before resorting to the help of another service. If they fail, you will have to bleep the anaesthetist (A), as waking up the consultant for this would be highly irregular (B). You should never have more than two attempts at cannulation classically (D), although there are situations where this might be appropriate. Missing antibiotics in a scenario like this is the worst option (E) as it jeopardises patient care.

# GUIDE TO THE SITUATIONAL JUDGEMENT TEST PAGE 11

You are working as an FY1 in Cardiology and have seen a registrar being verbally aggressive to another of the FY1s during your first few weeks. He has a reputation for being an angry doctor.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Approach the registrar yourself to speak to him about his behaviour
- B Advise the FY1 to approach their educational supervisor
- C Go and speak to the registrar with the FY1 in question in order to lend moral support
- D Advise the FY1 to talk to the registrar's consultant
- E Advise the FY1 to make notes of each incident, including witnesses

Answer BDECA

Rationale This question assesses your ability to deal with a difficult colleague. Although there are many reasons why the registrar is behaving like this, his actions are not acceptable and something must be done. It is not your responsibility to act in the first instance and it may just make things worse if you approach the registrar yourself (A) or with your colleague (C), although (C) is favourable to (A). As such, the best option would be for your FY1 colleague to approach their educational supervisor as they are responsible for his/her training (B), and then to discuss this with the registrar's consultant if this doesn't help (D). Advising the FY to make notes (E) would be useful but may lead to a delay in changing the behaviour of this aggressive Cardiology registrar and therefore is behind (B) and (D).

# GUIDE TO THE SITUATIONAL JUDGEMENT TEST PAGE 12

You are an FY1 working in a surgical ward. One of the patients, who happens to be the father of one of the FY1s on another ward, has just undergone an uncomplicated laparoscopic cholecystectomy and is doing well having just arrived back on the ward. The FY1 comes up to you at lunch and asks how his father is doing.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Tell him you are unsure about how much you can tell him so he should talk to the nurses on the ward
- B Tell him that his father is fine and has just come back on to the ward
- C Tell him you can't say anything without the father's direct permission
- D Tell him that the op note and recovery ward notes are on the electronic patient system and he should look on there under someone else's user ID
- E Tell him that you can bring his father's notes into the doctor's room on the ward for him to look at

Answer BACDE

Rationale This question assesses your ability to communicate with a colleague and relative of a patient whilst maintaining confidentiality. You are not revealing anything specific about the patient by telling your colleague that his father is fine following his operation (B) making this the best option as it would be most appropriate to reassure your colleague in this situation. If you are genuinely not sure how much you can say without breaking confidentiality, the next best option would be to ask him to call the ward (A) and speak to the nurses as any other worried relatives would do. You could refuse to say anything (C), but this would only worry your colleague. Both of the final options (D) and (E) are not acceptable and would result in disciplinary action. (D) is ranked ahead of (E) as the latter option would implicate both of you in this unethical procedure of finding out information about his father.

# GUIDE TO THE SITUATIONAL JUDGEMENT TEST PAGE 13

You are an FYI working in orthopaedics. You are being poorly supported by your seniors and you never leave work on time. You are coming in most weekends to finish discharge scripts and you are feeling depressed and struggling to sleep.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A      Take a period of annual leave from work
  
- B      Speak to your educational supervisor
  
- C      Ask your colleague to prescribe some antidepressants
  
- D      Take a period of sick leave
  
- E      Speak to your FYI colleagues for advice

Answer      BEADC

Rationale      This question assesses your ability to manage your working relationships and ensure you are working within your own limitations. Your educational supervisor (B) should always be your first port of call for problems like this. Speaking to your colleagues (E) could be less effective in terms of making changes, but will definitely help you put things in perspective, gain advice; they may be feeling similar to you. A period of annual leave (A) may help in the short term, but is unlikely to be any different when you're back at work. You should not have to take sick leave (D) unless you are unwell and it is not going to rectify the problem. Hopefully, it is clear that asking your colleague to prescribe you medication (C) would be unethical and likely create problems for your colleague too making this the worst option.

You are the medical FYI on call for the weekend. You are asked by one of the nurses to sign a self discharge form for a patient, due to be discharged on Monday. You see the patient who states she has terminal cancer and wants to die at home. She states she will be leaving the hospital today and nothing and no-one will persuade her otherwise. The patients daughter comments that she is unhappy with the care her mother has received and will be making a formal written complain to the trust. You have never met the patient or the daughter prior to this encounter.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Refuse to sign the self-discharge form.
  
- B Sign the self-disharge form.
  
- C Advise the patient that she will be leaving against medical advice however may return through A&E should the need arise. Sign the form.
  
- D Apologise to patient and daughter and ask if there is anything you can do to rectify the situation.
  
- E Document your discussion with the patient and her family in the medical notes, signing the form if still appropriate.

Answer DCEBA

Rationale This question assesses your ability to put patient care first and your understanding of self discharge. The patient is well within her rights to leave against medical advice at any time as there is nothing in the scenario to suggest she doesn't have capacity. (D) is the most appropriate option as you may be able to rectify the situation and delay the patients discharge until Monday when the team looking after her will be available. If that fails then it is important that you advise the patient that they will be leaving against medical advice and make a contingency plan should the patient need to return (C). You must document every discussion you have had with the patient and their family (E) which comes after (C) as it doesn't give the patient the information they will need about the self discharge process. If the patient has capacity to make decisions you must sign the form (B) however you should have carried out options (D), (C) and (E) prior to this. Unless you have grounds to believe otherwise you must respect the patients wishes hence (A) is the least appropriate option.

# GUIDE TO THE SITUATIONAL JUDGEMENT TEST PAGE 15

From across the ward you see one of your fellow FY1 colleagues throw a sharp into a normal waste bin. Before you have time to catch her up she has disappeared. The sharp is lying on top of all the rubbish in the bin, clearly visible and accessible.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Put a note on the bin that it is not to be used as there is a sharp in it, call waste management to come dispose of the bin quickly and safely
- B Report your colleague to their consultant
- C File an incident report
- D Bleep the colleague in question asking to speak to the regarding the incident
- E Ignore the issue as it is unlikely anyone will get a needlestick injury as the sharp is already in the bin

Answer ADCBE

Rationale This question assesses your ability to deal with a potentially dangerous clinical situation. The most important issue in this scenario is that the dangerous sharp is dealt with immediately so that no one gets injured. The most appropriate option is (A) as it prevents injury and deals with the sharp in question. The worst option is to ignore it (E) as someone could receive a serious injury because of your actions.

It is essential that you discuss your colleagues actions with them as soon as possible (D) however this is less of a priority than dealing with the sharp. When discussing their actions with them you will need to find out if they are aware what they have done is wrong and whether they believe they may have made this mistake before. You may need to file an incident report (C) after this to try to prevent something similar happening again. It is unlikely that you will need to inform your colleagues consultant (B) if the situation is dealt with correctly.

# GUIDE TO THE SITUATIONAL JUDGEMENT TEST PAGE 16

You have just returned home from your day shift and suddenly realise that you have double dosed a patient's subcutaneous heparin, prescribing it twice a day instead of once a day.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Phone the hospital ward, and speak to the nurse in charge ensuring that she checks the drug chart and asks the doctor on call to cross one of the doses off
- B Cross the dose out in the morning before it is due to be given
- C Phone the on call registrar to inform them of your mistake
- D Phone the FY1 on call, explain your mistake and ask them to ensure one of the doses is crossed off
- E Phone the on call consultant to apologise for your mistake

Answer DACEB

Rationale This question assesses your ability to put the patient first and be safe. Double the dose of therapeutic heparin could significantly increase the patient's risk of bleeding. The best option is that which most reliably ensures that the second dose is crossed off. Phoning the FY1 on call (D) provides direct communication with the doctor who will be responsible for crossing it off. Speaking through an intermediary, the nurse on the ward (A), would probably solve the problem but is less direct and therefore second best. Speaking to the consultant and even registrar is over the top for this incident, putting (C) and (E) 3rd and 4th respectively. Leaving the problem until the morning (B) is the least appropriate option as it risks the dose being given early before you arrive.

# GUIDE TO THE SITUATIONAL JUDGEMENT TEST PAGE 17

You are the medical FY1 on call for the evening. You are on your way to the handover meeting which started 10 minutes ago when you get called by a nurse to say that a patient has a heart rate of 150. The patient is otherwise well.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Proceed immediately to review the patient as they might be very unwell; handover can wait.
- B Ask the nurse for the rest of the observations and some clinical history to determine the severity of the situation. If not peri-arrest, discuss the patient with the registrar as soon as you get to handover.
- C Ask the nurse to take a set of observations and an ECG, informing them that someone will be up to see the patient soon.
- D Go to the meeting and handover the patient to the night team.
- E Ask the nurse to give a stat dose of metoprolol a beta blocker to reduce the heart rate down to safe levels whilst you are in handover and then review the patient immediately after handover.

Answer BCDAE

Rationale This question assesses your ability to prioritise tasks and put patient care first. It is important to go to the handover meeting so that you make the night team aware of any patients you are concerned about. However, this patient might be unwell.

If the patient were peri-arrest your only option would be to call for senior help and attend to them immediately. As they are “otherwise well” it is best to ask the nurse for observations and some history to allow you to assess over the phone how unwell the patient is (B) and inform your senior with this information available to help them prioritise urgency. The worst option is to blindly prescribe a beta blocker without assessing the patient properly (E).

The middle options are ranked by deciding which provide the most information to the team you are going to hand over to. An ECG (C) is more helpful than nothing (D) to the registrar you are handing over to, but both are better than not attending handover at all, as this would mean information about this and other patients would not be communicated to the night team.

You arrived on the ward this morning to discover that a phosphate infusion that you had prescribed last night before leaving has not been administered. You remember handing the prescription over to the nurse looking after the patient. She has now finished her shift.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Set up the infusion yourself immediately.
- B Check the patient's serum phosphate today as it may no longer be required.
- C Inform the senior sister on the ward of the situation straight away.
- D Call the nurse in from her day off to explain her actions.
- E Prescribe oral phosphate supplementation whilst the IV form is sourced.

Answer CAEBD

Rationale This question assesses your ability to deal with medical errors, prioritise patient care and communicate with colleagues. The senior sister is likely to be able to organise for the infusion to be put up immediately (C) which immediately rectifies the problem. She will also be able to investigate, in due course, why the nurse did not carry out the request, in due course. You should prioritise patient care over asking the nurse who made the error for an explanation, making (D) inappropriate.

Setting the infusion up yourself (A) allows the patient to receive the infusion however it is less good an option than going via the nursing sister as the nurse remains unaware of her error and therefore may make a similar mistake in the future. Oral phosphate (E) is not as effective as IV but is better than doing nothing (B) as if the serum phosphate level was low enough to warrant an infusion, it is unlikely that it will have normalised by itself.

# GUIDE TO THE SITUATIONAL JUDGEMENT TEST PAGE 19

You are an FY1 on call. You are called to a cardiac arrest of a 60-year-old gentleman. You notice that his wife is present as the crash team performs CPR. She is very distressed but keen to stay.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Take her into a quiet room, listen to her concerns and explain the situation
- B Allow her to watch the CPR whilst explaining what the arrest team is doing
- C Allow her to watch the CPR and ask a nurse to stay with her
- D Ask her to leave as you feel it is too distressing for her to see
- E Ask the medical SPR to explain the situation to her whilst you run the crash call

Answer      BCADE

Rationale      This question assesses your ability to respect the wishes of patient relatives whilst ensuring the patient receives the treatment they need. Resus council guidelines recommend that families be given the choice of whether to stay during the resuscitation. You are told that the wife is keen to stay for the resuscitation and therefore she should be allowed to. The best option is for you (B) or a nurse (C) to stay with her. (B) comes first as it includes an explanation of what the team is doing. The least appropriate option is for you to run the crash call instead of your medical registrar as you would be acting beyond your competencies as an FY1 (E).

It is less appropriate to ask her to leave than to stay, however between the two, explaining the situation in a quiet room (A) is better than simply asking her to leave (D).

You are an FY1 on the ward. You have been asked to catheterise a middle-aged gentleman with advanced MS. He is currently clinically stable. Whilst you are alone, he asks you to help him die.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Explain that you cannot help him to die but explore his reasons for wanting to die and document the conversation
- B Put him on the Liverpool Care Pathway (LCP)
- C Explain that you are simply here to catheterise him, and that you recommend he speaks to the consultant next time he is around
- D Explain that you are only in your first year as a doctor therefore you will get someone more senior to talk to him
- E Refer the patient with his consent to the palliative care team

Answer AEDCB

Rationale This question assess your ability to act within the law and demonstrate good communication of a difficult topic. It is illegal to help someone to die but you should explore his reasons for expressing this wish as it may be that there is something you can do to help him (A). Once you have explored the patient's reasons it would be appropriate to refer him to experts in end of life care, such as the palliative care team (E), however, this has to be with his consent.

Placing the patient on the LCP (B) is not appropriate as the patient is not currently about to die and therefore does not require it, therefore doing so could be seen as euthanasia. (The Liverpool care pathway is a set of guidelines that may be implemented in the last hours or days of the dying patient to sustain comfort).

For the 3rd and 4th option it is understandable that a FY1 might not feel confident discussing these issues and arrange for a senior to do so (D) although there is little reason why you can't explore the issues in general as an FY1 thus showing your support to the patient, explaining why (B) is better than (D). It is better to arrange this for his (D) than leaving the patient to ask the consultant at an unspecified time in the future (C).

# GUIDE TO THE SITUATIONAL JUDGEMENT TEST PAGE 21

You are the surgical FY1. You have just been phoned by blood transfusion, who inform you that the bottle you sent has the wrong date of birth. The patient is scheduled for an elective abdominal aortic aneurysm repair first on tomorrow's theatre list. You are currently busy with a patient who has chest pain.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A      Immediately go and retake blood from the patient.
  
- B      Add the job to your job list, and make sure the blood is correctly taken, labelled and received by confirming this with the lab.
  
- C      Call up the ward and speak to the nurse in charge, and ask them to take the blood.
  
- D      Fill in a blood form for the phlebotomist to take the blood first thing tomorrow morning.
  
- E      Take the blood yourself as soon as you have dealt with the patient with chest pain.

Answer      BECDA

Rationale      This question assesses your ability to prioritise your patient's needs. You are currently dealing with a medical emergency, which takes priority and therefore leaving this patient to immediately take bloods (A) would not be appropriate. It is important to ensure that the patient for surgery has a valid cross match available, which as well as sending blood involves checking that it has been correctly processed. The only answer that does all of this is (B). Now you have your top and bottom answer the others can be ranked by whether they ensure patient safety - ie that the cross match blood is successfully sent. (E) doing it yourself after the medical emergency is dealt with is better than asking a nurse to take it (C) as you can be certain the blood has been sent. Leaving the form out for the phlebotomist (D) is less appropriate as you can't be sure there won't be another problem with the blood sample in the morning when it will be too late to rectify and the case will therefore be delayed.

# GUIDE TO THE SITUATIONAL JUDGEMENT TEST PAGE 22

You are the medical FY1 on call during the night. Your shift starts at 8.30 and you have just woken from sleep to find out that it is already 8.15. It will take you an hour to get to work.

Rank in order the following actions in response to this situation (1 = Most appropriate, 5 = Least appropriate)

- A Get into hospital as quickly as you can, sending a text to the day FY1 apologising for your lateness
- B Call in and explain that you are feeling unwell, and therefore wont be able to make it into do the night shift
- C Contact the registrar on call, apologise and explain that you will be 45 minutes late
- D Contact the FY1 you are taking over from and apologise explaining that you slept in and will be 45minutes late
- E Contact the day team and tell them that you are on the train, but it has been delayed and therefore you will be late

Answer CDAEB

Rationale This question assesses your ability to communicate with you colleagues and your ability to act with integrity. The worst options involve a lie (B) and (E) as this obviously does not demonstrate integrity. Between the two options, (B) is worse than (E) as it also leaves the hospital without sufficient medical cover at night putting patient safety at risk. The best option is to inform and apologise to the person responsible for the medical take, the registrar on call (C), as he/she can arrange appropriate cover for your lateness. This is more appropriate than simply calling or texting the FY1 as they are not the doctor responsible for the take. Calling them (D) is preferable to texting them (A) as it ensures the message has been received.

# Multiple Choice Questions

The multiple choice questions ask you to choose the three most appropriate actions from a possible eight.

There is normally one answer that is definitely correct, one or two that are definitely incorrect and then a few that could all be appropriate. Try to choose what you should do over what you might actually do in the situation, as it will tend to be the correct response.

For the multiple choice questions, don't select more than 3 as that will score 0 for the whole question even if the top three answers are chosen, and don't choose just 2 as you'll be missing out on 4 handy marks.

Don't linger too long trying to decide between two answers, as it will mean you might not complete the test!

Available for each question:

For example:  A  B  C  D  E  F  G  H

51	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H
52	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H
53	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H
54	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H
55	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H
56	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H
57	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H
58	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H

MCQ answersheet

## MARKING

12 points are available for each question, 4 for each of the 3 most appropriate answers. Everything else scores 0. This makes this type of question more discriminating, as getting one of the three wrong scores 8/12, whereas in the ranking question, misranking 2 answers may still score between 16-18/20.

Always select 3 responses never 2 or 4

Keep to time

Go with your gut if you're not sure

During a busy ward round your consultant asks you to prescribe an antibiotic on the patient's drug chart. You are not certain of the dosage and the ward round has already moved on to the next bay.

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

- A Ask the other Fr who works on the same ward what the dosage is and prescribe the antibiotic
- B Prescribe the antibiotic with the dosage you think is correct, but make sure you return after the ward round to double check it in the BNF.
- C Ask the consultant or another senior in your team who is familiar with the dosage to prescribe the antibiotic
- D Add it to your list of jobs from the ward round and return and prescribe it after checking the dose in the BNF during a break in the ward round
- E Write the drug on the chart without the dose and sign it to remind you to check the dosage later
- F Call up the ward pharmacist and ask her to prescribe it for you
- G Do not prescribe the drug, it is not safe to do so without knowing the dose, you can inform the consultant of this on tomorrow's ward round and prescribe it then
- H Quickly fetch the BNF from the doctors desk and prescribe the antibiotic on the ward round

Answer C, D, H

Rationale This question assesses your understanding of prescribing as an Fr. It is a new responsibility that you will not have experienced before. Before prescribing any medication you must be sure of the indications, duration, dose, route of administration, contraindications, side effects and any allergy the patient has. In this case you are not certain of the dosage so you cannot prescribe it until you have checked in the BNF (D), (H). This should be done quickly as the surviving sepsis campaign demonstrated that a delay in giving antibiotics can result in worse outcome. Asking a senior on the round achieves the same effect (C). Relying on another Fr is not the best option as they also have minimal experience too and so are less reliable than a senior doctor or the BNF (A). Ward pharmacists cannot prescribe antibiotics, however they are a useful source of advice on prescribing, therefore it would have been appropriate to ask them what the dose is and prescribe it yourself (F). You should never sign a prescription until you are confident it is completed safely as it might be given by the nurses in error before you have had the chance to check it (B) (E). Not prescribing the antibiotics until the next day could cause the patient to deteriorate, and it is important to give antibiotics promptly as per "surviving sepsis"

# GUIDE TO THE SITUATIONAL JUDGEMENT TEST PAGE25

An elderly patient with dementia has become acutely confused; nurses call you in the middle of your night shift to inform you he has absconded from the ward.

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

- A Call the police within the first five minutes as per hospital protocol
- B Ask the nursing staff to inform neighbouring wards and security staff
- C Carry on with your clinical duties and leave this for the nursing staff to resolve as they are better qualified to do so
- D Call the site manager and inform them of the situation
- E Take no action at this point as he will probably return, but check back in a couple of hours
- F Visit the ward to find out further details, including current clinical condition, then inform your SHO
- G Call the patient's out of hours GP to obtain more information about the patient's history
- H Start searching the hospital and then surrounding sites

Answer B, D, F

Rationale This question assesses your ability to prioritise your work-load and put patient care first. As the Fr on nights you will be busy and unable to start searching for the patient yourself (H) as it would jeopardise the care of other patients. Calling the police is not indicated at this time and unsurprisingly there is also no protocol for calling them within 5 minutes (A). The site manager at night is the best person to coordinate the search for the patient (D) and informing the surrounding wards (B) and your senior (F) of the situation is appropriate. Whilst you are going to leave the majority of the search to the nursing and security staff (C) it is more appropriate to ensure the correct people have been informed before carrying on your clinical duties, otherwise you risk a situation whereby the nurses on the ward think you are dealing with the situation when you are not. To do nothing (E) is less appropriate as the patient may need medical attention. The out of hours GP is an emergency service and it would not be appropriate to phone them for this particular situation.

You have been trying to contact your clinical supervisor via email to meet to discuss your eportfolio personal learning objectives for the upcoming rotation. He eventually emails you saying he will fill it out on your behalf and that you don't need to hold a meeting.

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

- A This is against the recommendations therefore it is your duty to express your concerns to the GMC as otherwise the training of juniors in the future could be jeopardised.
- B Allow your clinical supervisor to complete the portfolio without you but check in with him about your learning objectives to ensure they are ones you will be able to meet
- C Email him back with a list of objectives you have decided on and agree that it is much easier if he does it remotely
- D Email your clinical supervisor to express that you would much rather meet in person to go through the objectives, suggesting he recommend a convenient time to meet
- E Go and find your clinical supervisor to discuss the matter, making it clear that you will return at a different time if it is inconvenient at present
- F Express your dissatisfaction with the clinical supervisor, suggesting that if he doesn't meet with you you will be forced to report him to the deanery
- G Discuss with your previous clinical supervisor, a rheumatologist that you got on very well with, and ask her advice
- H Express your concerns to your educational supervisor if you don't manage to resolve the situation

Answer D, E, H

Rationale This question assesses your ability to work with your senior colleagues and tests your communication skills. Doctors are often busy but all clinical supervisors should understand the importance of their role; they might simply require some reminding. Reminding them in person (E) or via email (D) of the importance of the learning objectives to shape your learning is appropriate. If this doesn't work then the next step is to seek advice from your educational supervisor (H), who might be able to talk them directly and resolve the situation. This is just more appropriate than your previous clinical supervisor (G), which would be the 4th best option.

You shouldn't allow the learning objectives to be inputted without meeting (B), (C) as it does not allow you to discuss how you should achieve and measure these objectives. Threatening your supervisor (F) is a poor decision, and would reflect an inability to communicate with seniors. It is extreme to report this to the GMC (A)

Tip: beware of selecting an option because some parts of it appear appropriate eg preventing the training of other juniors being affected.

During a ward round your consultant breaks the bad news of a cancer diagnosis to a patient. Whilst taking blood from the patient later that day they start to ask you numerous in-depth questions about the diagnosis, treatment options and prognosis; most of which you do not know the answer to.

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

- A Inform the patient that you will express their concerns to a senior colleague who will come and speak with them
- B Reassure the patient that they will be okay, and not to worry about things. Recommend they ask again on tomorrow's ward round
- C Try to avoid answering any questions at all and leave the room quickly as it is not appropriate for an FI to provide this information
- D Explain you will get a senior to speak to them and inform your consultant what the patient said prior to the ward round later on in the week
- E Telephone the next of kin first, inform them of the diagnosis and prognosis so that they, the person closest to the patient, can give the answers in a way the patient will understand
- F Answer their questions as best as you can, explaining that you are the junior in the team and omitting any statistics or specific details but asking your senior to speak with them later that day
- G Inform the patient that you cannot answer their questions fully as you are not familiar with the details, but that you will ask someone senior to do so
- H Give the patient some details that you remember your consultant giving to another patient with a similar diagnosis of cancer

Answer A, F, G

Rationale This assesses your ability to recognise the limitations of your knowledge and your ability to communicate with patients in a difficult situation. This situation will occur as an FI so you need to be confident with managing it. It states in the question that the information asked is beyond your limitations – it is important to recognise this (G) and be open with the patient about this fact. You should also recognise that this patient has been given an upsetting diagnosis and will need answers to their questions so your senior will need to speak with them (A),(F) soon. Waiting until later in the week is therefore not appropriate (D). As a doctor you should act with integrity and be honest. Providing incorrect information is not appropriate (B), (H), nor is avoiding the situation (C) as providing the correct information is part of your duty of care to that patient. Calling the next of kin first involves breaking patient confidentiality (E) which is inappropriate.

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As an F1 you arrive at the hospital and start to feel unwell with a high temperature, vomiting and diarrhoea. You know that you will not be able to last the day and are feeling quite faint.

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

- A Ask a fellow F1 to prescribe some antisickness medication so that you can complete your shift
- B Inform your medical staffing department and go home
- C Your duty is to look after patients therefore its important to get through the shift safely. Ask a nurse to provide you with some anti-emetic and paracetamol from the drug cabinet on the ward
- D Call your registrar and make them aware of the situation
- E You find the drug cabinet on the ward is unlocked so take some medications for your symptoms, ensuring that you finish the shift and maintaining patient safety
- F Drink some water and take an antidiarrhorea tablet and continue on with your shift
- G Stay in the hospital but stay away from clinical areas
- H Make your consultant aware of the situation

Answer B, D, H

Rationale This question assesses your integrity, ability to communicate with your team. You are unwell and potentially infectious, therefore it is not an option to remain in hospital (A), (C), (F), (G). In addition getting medical either from the nurses, a fellow F1 or through theft (E) is not appropriate. When you are unwell, you should go home, inform medical staffing (B) so that they can make arrangements for cover, and the senior members of your team, namely the consultant (H) and registrar (D).

As the FR on a respiratory ward whilst checking bloods an angry relative storms towards you and starts shouting and swearing. She is the daughter of one of your patients. They are intimidating you and complain that the nursing staff have been administering their antibiotics late each day. They wish to make a formal complaint and are threatening to sue the hospital.

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

- A Advise them where the Patient Advice Liaison Service (PALS) office is located should they wish to make a formal complaint
- B Tell the nurses off and insist that they give the antibiotics on time from now on
- C Ban the relative from visiting this ward, it is not appropriate for them to shout at members of staff
- D Tell her that if she tries to sue she will be wasting her money
- E Ask the relative to speak with the nurse in charge instead, as giving medication is their responsibility
- F Inform the relative that her behaviour is aggressive and threatening and that this behaviour will not be tolerated
- G Tell the patient that their relative is behaving inappropriately
- H Try to answer any questions that the relative may have offering to try and address her concerns

Answer A, F, H

Rationale This question addresses your ability to deal with difficult relatives. Whether these concerns are founded or not they should be dealt with in the same manner – first of all, if this relative is being aggressive and intimidating then you need to ensure that you are safe (as well as your surrounding patients and colleagues). Informing the relative that this behaviour is unacceptable is important (F). The next step is to try and address their concerns and see what the issues are however if relatives or patients wish to complain they have a right to and should be directed to the third party which is the PALS office (A). Often a difficult situation can be resolved through good communication therefore assuming they calm down you should offer to address their concerns (H).

It is less appropriate to pass an angry relative onto a team member like the nurse in charge (E), and definitely not your place to tell nurses off (B) or ban the relative from the ward (C). Commenting that to sue is a waste of money (D) and that they are being inappropriate (G) are less helpful and not as professional a way of dealing with the situation.

You are on a busy shift as an F1 and are asked to prescribe a patient's regular medications. This includes a beta blocker for his hypertension. You happily prescribe the medications. Two days later the ward pharmacist is reviewing the drug charts and draws your attention to the prescription. You have prescribed ten times the appropriate dosage of his beta blocker.

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

- A Inform the patient that they will not be receiving the beta blocker as they no longer need it
- B Find the nurse looking after the patient and ask how she could not have noticed giving ten tablets
- C Ask the ward pharmacist not to tell anyone about this
- D Complete a clinical incident form
- E Cross the medication off the drug chart, inform the patient of the error and document the error in the notes
- F Inform the patient that the nurse made a mistake and gave too much of their beta blocker
- G Review the patient immediately in an ABC manner
- H Cross the medication off the drug chart, prescribe the appropriate dose and continue with your ward jobs

Answer D, E, G

Rationale This question assesses your ability to deal with a mistake you have made, and to act with integrity. Unfortunately drug errors will be made during your F1 year. The main priorities are ensuring the patient is well (G), apologising for the mistake and preventing further error occurring (E). This includes completing a clinical incident form (D). (A) and (C) are dishonest and therefore would demonstrate a concerning lack of integrity. Blaming the nurse (B) is unhelpful and it is both a prescription and administering error, however it is worth sitting down as a team to discuss how this error can be prevented in the future. Option (H) skirts around the problem and does nothing to prevent the same mistake happening again.

One of the nurses on the ward asks you to take her blood as she has been feeling under the weather.

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

- A Ask her to print out sticky labels for the bloods and take them when you next have a minute.
- B Explain that it would be more appropriate for her to see her GP.
- C Tell her to go to A&E to get her bloods taken.
- D Write up a form for her to go to the phlebotomy service in outpatients.
- E Advise her to go to Occupational Health if she does not feel well.
- F Advise her to tell her seniors that she is feeling unwell as it may not be appropriate for her to be on the ward.
- G Ask an F1 from another ward who does not work with her every day to take the blood.
- H Tell her that she should know better to ask you and report her to the sister in charge.

Answer B, E, F

Rationale This question assesses your ability to recognise the correct course of action if you are put in a difficult situation by a work colleague. It focuses on decision making and a basic knowledge of what and what is not appropriate as a junior doctor. In this situation you should advise the nurse to go see either her GP (B) or occupational health (E) if she is feeling unwell. You also should advise her to speak to her seniors about feeling unwell as it may not be appropriate for her to be at work (F). You should not take the blood yourself (A) or write up a form to have bloods taken in phlebotomy before being formally assessed (D). Although you could advise her to go to A&E if she feels unwell they do not act as a phlebotomy service (C). It goes without saying that you should not pass the buck to another F1 (G) nor it is appropriate to berate her or report her to the sister (H).

You are the medical Fr on the cardiology firm. A patient you clerked with chest pain was due to have a 12 hour troponin sent at 8am so that the result was available for the ward round at 9am. It is now 9am and you suddenly realise you forgot to put the blood request form out, and as a result the patient has not had their blood test.

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

- A Wait for you consultant to ask, then check for the result, explaining that you can't understand why the test is not back yet
- B Quickly take the blood, and send it to the lab urgently, and explain the delay to the consultant on the ward round
- C Call the on call Fr and ask them to help you out by taking the blood
- D Explain the situation to your consultant and ask him if it's ok for you to peel off to arrange the troponin urgently
- E Tell your team, and arrange for one of you to take blood for the patient whilst the rest see other patients on the ward
- F Don't worry about it as you can make a decision based on the ECG and clinical symptoms anyway
- G Carry on with the ward round to avoid a delay and sort the test out afterwards
- H Leave a blood request form out for the phlebotomist tomorrow

Answer B, D, E

Rationale This question assesses your ability to deal with a mistake, putting the patient first and show integrity. You have made a mistake, which could affect the clinical decision, for instance, this patient might need further investigation like an angiogram, which could now be delayed. It is important to rectify this mistake and to be honest about the fact you have made it. (B) shows initiative in solving the problem before you have even asked about it subsequently explaining the mistake. In (D) and (E) you are honest and tell a senior your mistake and then rectify it to ensure patient care is put first. All three are appropriate.

(A) is dishonest, and will delay the test result, (C) is inappropriate as it is not an emergency situation and the patient's team are around and therefore this should not fall to the on call Fr. (F) does not help the patient as a troponin will help in making the clinical decision, and (G) and (H) would result in unnecessary delay.

You meet with a fellow F1 after work for supper. Over the meal she informs you that she hates working as a doctor and wants to quit. You are only 1 month into the job and you feel this would be a mistake. Although you endeavor to talk her round she is insistent that there is nothing about the job that she enjoys and she feels she is over worked with no appreciation.

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

- A Tell her she should visit the GP as you think she may be depressed
- B Email her registrar and ask that they are more considerate with her
- C Advise her to speak with her educational supervisor about these matters
- D Tell her that you think she should not quit
- E Tell her that you think she should leave medicine
- F Allow her to speak her mind and vent her frustrations
- G Leave a leaflet for a counseling service in her bag the following day
- H Advise her to spend some time thinking properly about leaving medicine before she makes any concrete decisions

Answer C, F, H

Rationale This question assesses your ability to support and communicate with your colleagues. She should be free to speak her mind and debate the pros and cons of working as a doctor. (F) and the best advice is to speak to a trusted senior such as her educational supervisor (C). Taking further time to make a decision is also sensible (H). It is important not to interfere or act without her knowledge (B), (G) At this stage you should probably neither try to persuade her to stay nor leave (D), (E) as she needs to make that decision herself. Whilst her GP might offer further support, it is insensitive to suggest that she may be depressed when she has not suggested this herself.

You are an FY1 doing Upper GI surgery. One of your SHOs is going away to Paris for the weekend with her boyfriend but is on call on Friday night and asks you to carry her bleep for the last 2 hours of her on call.

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

- A Carry the bleep for her, thereby demonstrating good teamwork
- B Tell her that you will not be able to carry the bleep as you are not sufficiently experienced to act as on call SHO.
- C Advise her to try and swap her shift with one of her peers.
- D Agree to do it only if she covers your next weekend on call.
- E Report the situation to your consultant.
- F Apologise and explain that you don't think it is appropriate for her to ask you to cover her shift.
- G Carry the bleep but only if the registrar on call knows that you are a house officer carrying the SHO bleep.
- H Contact medical staffing to arrange a locum for those two hours who is sufficiently qualified.

Answer B, C, F

Rationale This question addresses the importance of working within your limitations and communicating effectively with your colleagues when you feel their actions may not be appropriate. The most appropriate response in this scenario is to explain that you are not qualified to cover her shift (B), advise her to swap it with a colleague of a similar level (C) and also discuss the fact that you find the request inappropriate with her in person (F) rather than with anyone else. This is a mild situation and is a one off and so there is no need to escalate this to your consultant (E). You are not qualified to carry the SHO bleep and should not do so (A) even if the registrar on call knows you are underqualified (G) or by trying to swap shifts with her (D). It is not your responsibility to contact medical staffing (H) if a locum is required.

You are the medical house officer on the acute medicine ward. One of your patients is unable to speak English. Her brother, who translates for her, pulls you to one-side and admits that he has been obtaining antibiotics illegally and giving them to his sister at home by hiding them in her food so that she gets better. He asks you to keep this confidential.

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

- A Discuss with your consultant the need to contact social services and highlight that there is a vulnerable adult who needs further input.
- B Report the brother to the police.
- C Inform your registrar of what he has told you.
- D Explain to the brother that you are unable to keep this information secret.
- E Find out what dosing regimen the brother was using and check with pharmacy to see if it was appropriate.
- F Ring the medical registrar on call for advice.
- G Ask the brother to go and explain what he has been doing to the patient making sure an interpreter is present to confirm what he says.
- H Do not do anything until you get a professional interpreter so that you can corroborate the story with the sister.

Answer      A, C, D

Rationale      This question assesses your ability to deal with a difficult situation on the ward and highlights the importance of knowing how to deal with vulnerable adults. This patient is a vulnerable adult and this needs to be highlighted to social services (A). You also need to explain to the brother that what he has told you cannot be kept confidential (D) and that you must inform other members of your team including your registrar (C). It is not your responsibility to report the brother to the police or to try and interfere with his relationship with his sister - this is something better dealt with by social services (B), (G). Speaking to pharmacy about the dose of antibiotic (E) may be helpful but is certainly not urgent and there is no need to ring the medical registrar on call in this case as it can be dealt with within your own team/ward (F). Given this situation it is also important that you use formal interpreters for future encounters with this patient but it does not mean you cannot act on the information you already have (H).

As the Fr doctor clerking patients in the Acute Medical Unit the next patient you are due to see has a familiar name. As you approach the bed you realise that you used to attend school with her.

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

- A Take history and examine the patient as normal without mentioning that you know her
- B Approach the patient and explain that if possible you will ask another a colleague to take her history
- C Return to your team members, explain the situation and ask if someone else would be able to take her history instead of you
- D Approach the patient, she is happy to be seen by you so you continue as normal and offer to email her the test results
- E Take the history from the patient but do not examine her to avoid her embarrassment
- F Approach the patient and ask if she is happy to be seen by you after reminding her that the consultation will remain confidential
- G Take a brief history and examine the patient, you already know her background so it makes taking a history quicker and easier
- H Call your mutual friend to let them know she is in hospital

Answer B, C, F

Rationale This question assesses your knowledge of the GMC 'good medical practice guidelines'. It is suggested that you should avoid treating patients that you know closely where possible. In this scenario it is either appropriate to not see her, however if you have reinforced that the consultation will remain confidential and you act professionally then it is acceptable (B),(C) or (F). Patient confidentiality is key here – so it is not appropriate to email results or to call a friend (D), (H). It is unprofessional to either pretend that you do not know the patient as it is highly likely she will recognise you and then feel uncomfortable throughout the consultation (A). It is not appropriate to fail to take a full history or examination (E), (G) as you must put the patient's care first.

Whilst on the ward a patient informs you they heard another patient fall to the ground whilst using the bathroom. How do you initially respond?

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

- A Go and assess the fallen patient immediately, taking an ABCDE approach
- B Ask the nursing staff find the patient and inform you themselves if needed
- C Continue on with your ward jobs, this is not part of your role, and finishing the jobs are your priority
- D Call the family first, they have a right to know
- E If the patient does not need urgent medical assistance ask the nurses to get them back into their bed and then go and complete your assessment after their observations have been taken
- F Leave the ward to find your registrar, as they may need senior input
- G Document your assessment of the fallen clearly patient in the notes
- H Fill out an incident form first as otherwise it may get forgotten

Answer A, E, G

Rationale This question assesses your ability to manage patients safely. Patients frequently fall in the hospital although most don't injure themselves severely. You must assess the patient quickly in case they are severely unwell. This would be done in an ABC manner as seen in both (A) and (E)

To attend to the patient either alone or with a nurse is the ideal (A), (G). It would cause a real delay to the patient being attended to if you do not even inform anyone else (B). Prioritising patient safety is the key here so filling out paperwork and calling family members before the patient has been assessed is not right (D), (H). If the patient is not injured (E) then it can be more comfortable for the patient to be returned to bed before you fully assess them as lying on a hard, cold, wet, cramped bathroom floor would not allow for an easy examination.