

Management and Information Giving – Note for Actor

Patient demographics:

You are Emily Sanders, a 23-year-old female who has come for some advice about contraception as she has recently been started on COCP.

Your signs and symptoms: fit and healthy

PMH: none

FH: none

Only reveal if asked about – smoke 15 cigarettes a day for last 3 years

Keep pressing your questions until satisfied with answer from student.

Understanding of Contraception:

- I have taken COCP for last month and understand it stops ovulation. But I have some concerns.

Concern 1:

- I have been reading about the pill and it says it increases my risk of blood clots?
- Is this true and is it not dangerous?
- May be asked about symptoms but say no problems so far

Concern 2:

- Sometimes I have missed the pill because I forget. What do I do if I miss them?

Concern 3:

- Are there other option with less risk?

Management and information Giving – Notes for Candidate

Role: FY1 doctor in a GP centre

This is Emily, a 23-year-old female who has presented to the GP with concerns about recent COCP contraception.

You will need to establish the patients understanding of the condition, then the patient has some concerns. You must answer these questions appropriately.

This station will last 10 minutes and you will be notified by an invigilator at 8 minutes.

There will be no questions from the invigilator.

Management and Information giving – Examiner marksheet

- Maintains professional throughout
 - Open and non-judgemental communication, natural flow to conversation
 - Empathetic and puts patient at ease
 - Explores understanding of condition
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- Concern 1: Explains that yes there is a risk. Reassure the risk is very low if no family history or other risk factors for DVT. Explores these risks
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- Concern 2: Gives missed pill advice. Missed one then take 2 and carry on as normal. If missed two take the last one and one for today but protection may be affected. If in first week of pack then need emergency contraception if had unprotected sexual intercourse. If in week 2 or 3 then use extra protection for 7 days but don't need emergency contraception. Any other confusion. Info on NHS website or ask pharmacy.
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- Concern 3: Explain other that are suitable which are POP, IUD and subcutaneous implant. POP is a pill like COCP but is suitable in DVT history as has no oestrogen which is what increases risk. IUD is a device in the uterus that is copper and toxic to sperm. Subcutaneous implant – under the skin usually in forearm and requires small surgery to place and release small amounts of progesterone and oestrogen.

Global Impression:

- **Excellent**
- **Good**
- **Pass**
- **Borderline**
- **Fail**

Patient impression/comments: