

## **Adolescent Care - Student Instructions**

### **Triadic Adolescent Care History Station (10 minutes)**

You are an FY1 doctor in the GP surgery and are seeing John Smith, a 16-year-old, accompanied by his mother.

John's mother has persuaded him to see the GP because of laziness.

This station will last 10 minutes.

You will be expected to:

- Take a history.
- Establish the nature of the problem and its underlying cause.
- Give appropriate advice regarding the next steps to be taken in management.

## Adolescent Care - Patient Instructions

- Patient Diagnosis: Moderate Depression
- Add patient history:
  - *PC*: I am not lazy, and I don't know why I am here. I just don't want to do things anymore.
  - *HPC*: I don't like going of the house and I don't have many friends. I like being by myself. No one likes me anyway. It's been like this for like a month now.

If asked why the change and probed about it: reveal that you get bullied in school for my hair and get called a nerd because I like reading books. It makes me feel horrible and have a low mood.

Reveal if asked: you don't enjoy doing things anymore I don't even read anymore. I just sit in my room and play games of my phone and I don't want to go to school.

Reveal if asked: I don't even enjoy eating now and don't eat as much.

Revel if asked: No suicidal thoughts or self-harm

- *Systems review*: Deny any other symptoms
- *PMHx*: None
- *DHx + Allergies*: None
- *FHx* None
- *SHx*: None
- *ICE*: I don't want to be here but my mum forced me to come

### Instructions for patient and carer:

- Patient to appear reserved and not give many answers
- Carer – say to are annoyed and worried about him not doing anything all day and he wasn't always like this. He isn't even eating properly and doesn't talk to me.
- Carer to give most of the answers for the questions, don't let the patient speak much. Do this until candidate intervenes a couple of times.
- Become sympathetic when details about low mood and bullying revealed.

## Adolescent Care - Examiner Marksheet

Marking Criteria	Tick ( )
1. Introduction	
2. Professional attitude and patient friendly manner maintained throughout the history	
3. Addresses both parties equally, ensures both get to speak. Mediates conflict and discussion effectively.	
4. HPC – all aspects of depression history covered including suicidal thoughts and self harm.	
5. PC	
6. Other relevant symptoms + appropriate systems review	
7. PMHx	
8. DHx + Allergies	
9. FHx	
10. SHx	
11. ICE	
12. Establishes the nature of the problem and the underlying cause	
13. Gives appropriate advice regarding next steps Correct safety-netting advice	

### Global Impression:

- Excellent
- Good
- Pass
- Borderline
- Fail

### Patient Impression/comments: