

## Student Instructions Station No Final MB

### **Background information to station:**

You are a Foundation Doctor working in General Practice.

This patient was diagnosed with asthma today. They are being commenced on 2 puffs as required of Salbutamol and 2 puffs twice daily of Budesonide (inhaled steroid) via metered-dose inhalers (MDIs).

### Specific student instructions:

- 1. Counsel this patient about their new diagnosis of asthma.
- Explain and demonstrate to the patient how to use the salbutamol and steroid inhalers using the placebo inhalers provided.

There will be a warning bell when 2 minutes are left in the station.



## **Examiner Instructions**

## **Station No**

## **Final MB**

Station author: Dr Caroline Lavery

#### Assessment outcome:

This station assesses the student's ability to counsel a patient about a new diagnosis of

asthma and the use of inhalers.

#### **Background information to station:**

Students are asked to perform the role of a Foundation Doctor working in General Practice. They are asked to review this patient who has been diagnosed with asthma; to counsel them on the diagnosis and demonstrate utilisation of inhalers.

The student should begin by confirming what the patient already knows about asthma. The simulated patient will then ask the following 7 questions:

#### 1. What is asthma?

G: Explains in non-medical jargon e.g. a condition with variable narrowing of the airways due to excessive irritation and inflammation

2. Why has this happened to me?

G: Explains narrowing can be precipitated by various triggers e.g. cold, smoking, exercise, strong emotions, dust, dander AND Explains it is often a condition that runs in families; often part of a triad of atopic conditions [eczema, hayfever, asthma] G: both; A:one; P:neither

- 3. Which symptoms do I need to watch out for? SOB, wheeze, chest tightness G: 3; A: 2; P: 0-1
- 4. Is there anything I can do as well as taking the medication to stop things getting worse?

Avoidance of triggers, flu vaccination, smoking cessation G:any; P:none

### 5. What is in these inhalers and when do I use them?

Blue, 'reliever' inhaler- salbutamol- only used for attack- widens the airways by relaxing the muscular layer. Brown, 'preventer' inhaler- steroid- used twice daily-dampens down inflammation- helps to prevent attack and keep more sustained control G:both correct

 Are there any side effects? Blue/salbutamol- fast heart rate, tremor of hands. Brown/steroid- dry mouth, hoarse voice G:3-4; A1-2; P=0



#### 7. Please show me how to use these inhalers

Explains indication- inhalers deliver medication into lungs and airways where it is needed. Dose is released by pressing canister.

- Stand upright
- o Check expiry date, check number of doses left
- o Shake inhaler vigorously, remove cap
- Hold inhaler with index finger on top, thumb on bottom
- o Breathe out fully, then place mouth around mouthpiece making a tight seal
- Press firmly down on inhaler while simultaneously taking a deep breath in
- Hold breath for 10 seconds then replace cap

G: Clear explanation with minor omissions only; A: more than 2 omissions; P: major omissions and unclear/poorly explained

#### Potential areas of serious concern:

After using inhaler mouthpiece gives to patient to use



Marking sheet	G = Good, A = Acceptable, P = Poor
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DETAIL / question	MARK	WEIGHTING
1.Overall introduction including identification of self and patient (Name & role, purpose of encounter, confirms patient's agreement)	G A P	210
2. Rapport & professional manner (shows interest, respect, concern, appropriate body language, closure)	G A P	210
3. Attention to infection control throughout	G P	1 0
4. Establishes patient's understanding of asthma	G P	2 0
5. SP will ask, <b>What is asthma?</b> G: Explains in non-medical jargon e.g. a condition with variable narrowing of the airways due to excessive irritation and inflammation	G A P	420
<b>6. Why has this happened to me?</b> G: Explains narrowing can be precipitated by various triggers e.g. cold, smoking, exercise, strong emotions, dust, dander AND Explains it is often a condition that runs in families; often part of a triad of atopic conditions [eczema, hayfever, asthma] G: both; A:one; P:neither	G A P	420
<b>7.Which symptoms do I need to watch out for?</b> SOB, wheeze, chest tightness G: 3; A: 2; P: 0-1	G A P	210
<b>8.Is there anything I can do as well as taking the medication to stop things getting worse</b> ? (avoidance of triggers, flu vaccination, smoking cessation) G:any; P:none	G P	2 0
<b>9.What is in these inhalers and when do I use them?</b> Blue, 'reliever' inhaler- salbutamol- only used for attack- widens the airways by relaxing the muscular layer. Brown, 'preventer' inhaler- steroid- used twice daily- dampens down inflammation- helps to prevent attack and keep more sustained control G:both correct	G A P	630
<b>10.Are there any side effects?</b> Blue/salbutamol- fast heart rate, tremor of hands. Brown/steroid- dry mouth, hoarse voice G:3-4; A1-2; P=0	G A P	210
11.Suggests rinsing the mouth after using steroid inhaler to reduce risk of oral candidiasis/thrush	G P	1 0
<b>12.Please show me how to use these inhalers</b> (See examiner instructions) G: Clear explanation with minor omissions only; A: more than 2 omissions; P: major omissions and unclear/poor	G A P	630
13.Observe patient doing above, correcting as necessary	G P	10
14.Elicits patient's ideas, concerns, expectations	G P	1 0
15. SP Rating: SA: Strongly agree; A: Agree; JA: Just Agree; N: Neutral; D: Disagree	SA A JA N D	43210
Global mark: E: Excellent; V: Very good; P: Pass; B: Borderline; F: Fail	EVPBF	54321



## **Simulated Patient Instructions**

## **Station No**

## **Final MB**

### Background information to station:

Students are asked to perform the role of a Foundation Doctor working in General Practice. You have just been diagnosed with diagnosed with asthma. The student is expected to counsel you about the diagnosis and demonstrate utilisation of inhalers.

### How the role should be portrayed:

You are a little anxious about the diagnosis you have just been given.

You may choose your own name and date of birth.

You don't know anything about asthma but you think your cousin has it.

Please ask the following 7 questions:

- 1. What is asthma?
- 2. Why has this happened to me?
- 3. Which symptoms do I need to watch out for?
- 4. Is there anything I can do as well as taking the medication to stop things getting worse?
- 5. What is in these inhalers and when do I use them?
- 6. Are there any side effects?
- 7. Please show me how to use these inhalers

### Background

You have had breathlessness and chest tightness, intermittently for 6 months, especially during weekdays

You work as a painter and decorator

Past Medical Conditions: none



- Family History: father- eczema, cousin asthma
- Drug History: Nil. No allergies.
- Social history: never smoked, non-drinker, lives with partner.
- The student will talk you through the inhaler technique:
  - Stand upright
  - Check expiry date, check number of doses left
  - Shake inhaler vigorously, remove cap
  - Hold inhaler with index finger on top, thumb on bottom
  - Breathe out fully, then place mouth around mouthpiece making a tight seal
  - Press firmly down on inhaler while simultaneously taking a deep breath in
  - Hold breath for 10 seconds then replace cap
- Once student demonstrates inhaler technique and asks you to perform:
  - o first time- do not take deep breath in before inhaling dose
  - o second time- perform the whole routine correctly

#### Clothes/props: Nil specific

**First sentence (after introductions) if student starts with open question:** I have just been told I have asthma

Potential question	Response
What do you know about asthma?	I have heard of it but I don't know anything about
	it. I think my cousin has it.
Do you know why you're being	To help my breathing
started on inhalers?	



## **Site Co-ordinator Instructions**

## **Station No**

## Final MB

### Equipment check list:

- Simulated patient, any age, any gender
- Blue (salbutamol; β2 agonist) placebo inhalers
- Brown (steroid) placebo inhalers
- 3 chairs
- Table for equipment
- Cleaning wipes
- Handgel/wash