

Situational Judgement Test

- Practice Paper -

Instructions:

- o This paper is designed to take **1 hour**
- o There are two parts in this assessment:
 - o In Part One, rank in order of appropriateness the five responses to the situation (1 = most appropriate; 5 = least appropriate). Nb there are marks available for near misses; there can be no tied ranks, ie you may not use the same rank more than once.
 - o In Part Two, choose the three most appropriate from eight possible actions. Nb you must only select three options.
- o There are **30 questions** in this paper; **16** questions in Part One (worth a maximum of 20 marks each) and **14** questions in Part Two (worth a maximum of 12 marks each). Please try and assign your time accordingly.
- o In this assessment you will be presented with scenarios typical of those that Foundation Year One (FY1) doctors encounter.
- o For each scenario, consider yourself to be a FY1.
- o Please answer what you **should** do when responding to the questions.
- o You may sometimes feel that you would like more information before answering. However please give your best answer based on the information provided in the question.

Please note:

- o There is no negative marking; you should therefore attempt all the questions.
- o There is a glossary on page 2 with definitions of some of the terms that are used within the question paper. You may find it useful to consult this if you do not understand a term. Terms which are included in the glossary are marked with an asterisk.
- o Answers and rationales for this paper are available from the UKFPO website.

Glossary

British National Formulary	The British National Formulary (BNF) is a medical and pharmaceutical reference book for information and advice on prescribing and pharmacology
Clinical supervisor	The professional responsible for supervising Foundation doctors in day to day clinical practice, teaching and assessing the trainees. Each Foundation doctor will have at least one named clinical supervisor
CT	Computerised Tomography is a method of medical imaging
Educational supervisor	The professional responsible for making sure Foundation doctors receive appropriate training and experience. The educational supervisor should assist in professional and personal development. Each Foundation doctor will have a named educational supervisor for each placement
Infection Control	The department concerned with preventing healthcare-associated infection
Learning Portfolio	The Foundation Learning Portfolio allows trainees to plan their professional and personal development, and to document their progress
Multi-disciplinary team	Multi-disciplinary teams consist of a variety of medical specialists and allied medical staff. MDT meetings are often arranged to plan aspects of patient treatment
Occupational Health	The Occupational Health department is concerned with protecting the safety, health and welfare of people engaged in work or employment
Occupational therapist	An individual trained to help people who face everyday challenges due to mental, physical or social disabilities
Specialty trainee (registrar)	Middle grade doctor
Workplace Based Assessment	Regular workplace based assessments are undertaken and documented throughout the Foundation Year One (FY1) to give evidence of satisfactory completion of the year

Part One

1. 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 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 (registrar)* 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

2. 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. The bed numbers on your ward have reduced and you have found you have some free time available. However, the number of learning opportunities has also reduced as a result.

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

- A. Take on a position of responsibility in the doctors' common room committee
- B. Ask the Foundation Programme Director if you can move to another firm
- C. Ask your consultant if you can be scheduled for 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 re-assessed for training

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

Rank in order 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 (registrar)
- B.** Ask another senior colleague for advice on whether a different drug should be prescribed
- C.** Decline from prescribing the drug but write in the patient notes that the drug is contra-indicated in this patient
- D.** Discuss with the ward pharmacist the most appropriate drug to prescribe instead
- E.** Try to contact the specialty trainee (registrar) to inform him of the patient's other treatments

4. Whilst taking a history from a new patient, she tells you that she was sexually abused by her father as a child but has since come to terms with this. Later she mentions that her father is looking after her eight year old daughter while she is in hospital. You explain that you will have to inform Social Services of the possible risk to her daughter. She says that she would not leave her daughter at risk and insists that the information she has given you remains confidential.

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

- A.** Offer to telephone her father to check that her daughter is ok
- B.** Discuss what you should do with the nurse in charge of the ward
- C.** Discuss what you should do with your clinical supervisor*
- D.** Explain that it is your duty to discuss this with Social Services as her daughter may be at risk
- E.** Agree to keep the information confidential but suggest that she try and find alternative caring arrangements for her daughter

5. 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 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

6. At your morning briefing you are informed by Infection Control* that all hospital staff must roll their sleeves up when they have any clinical interaction with patients. During your shift you notice that your FY1 colleague always has her sleeves down.

Rank in order 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 to 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 (registrar)*

7. 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 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

8. The specialty trainee (registrar)* 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 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

9. 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 (registrar)* are dealing with a patient on the neighbouring ward. This is your first week and you have not yet attended a potentially critically unwell patient by yourself.

Rank in order 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 (registrar)* 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

10. 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 before he left 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 there is no intranet version. Your consultant has already gone home.

Rank in order 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.** Find a protocol on the internet from a local hospital
- D.** Ask the nurse in charge of the ward what is normally given
- E.** Seek advice from the surgical specialty trainee (registrar)*

11. 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 provide a written 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 following actions in response to this situation (1= Most appropriate; 5= Least appropriate)

- A. Take the CT scan request form to another radiologist
- B. Ask the radiologist to explain in more detail what was missing from the request
- C. Ask your specialty trainee (registrar)* 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

12. On the morning ward round, your specialty trainee (registrar)* said that Mrs Anderson is medically fit following her total knee replacement and could be discharged if the occupational therapist* feels 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 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

13. 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 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*
- D.** Discuss with Mr Reese's family his wish to die at home
- E.** Discuss Mr Reese's home circumstances with his General Practitioner

14. 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, you are contacted by a specialist trainee in microbiology who 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 following actions in response to this situation (1= Most appropriate; 5= Least appropriate)

- A.** Prescribe what the microbiology trainee 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.** Suggest that the microbiology trainee reviews the patient herself in order to be able to make an informed decision
- E.** Do not change the prescription and make a record in the notes of the microbiology trainee's concerns

15. You are just finishing a busy shift on the Acute Assessment 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 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 on the notice board 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 (registrar)* 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

16. 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 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

Part Two

17. You have been approached by a FY1 colleague, James, who has been on shifts with another FY1 doctor, Mark, for the last two weeks. James tells you that Mark has gradually 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

18. 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 General Practitioner
- E. Seek advice from a specialist consultant about your back pain
- F. Arrange to speak with your specialty trainee (registrar)* 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

19. 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 (registrar)* 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

20. You are a FY1 doctor working in the Emergency Department (ED). 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

21. You are assisting on a ward one afternoon 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

22. You have just started your shift. You have not met one of the patients, Mrs Gordon but you know 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

23. 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

24. 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

25. 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. You immediately ensure the patient is treated appropriately.

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 patients urine output
- F. Offer to write a protocol formalising team communication
- G. Record your account of the nights events in the patient's notes
- H. Ask the nurses to increase the frequency of observations on the patient

26. 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 (registrar)* for advice

27. 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* about the best course of action to take

28. 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

29. 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

30. At lunch a 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 (registrar)*
- C. Advise her to take a few days annual leave to rest
- D. Encourage her to seek some counselling
- 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