



The Royal College of Emergency Medicine

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FRCEM Intermediate Situational Judgement Paper

Sample Questions

For each question candidates are required to select the most appropriate action. Each stem has been awarded a numerical score, agreed by a group of trained experts, where 4 = most appropriate action and 0 = least appropriate.

1. Time management CC4

You have a meeting with your educational supervisor next week. At the last meeting you set a number of goals and objectives but have not had time to complete any of them. You feel overwhelmed by the amount of things you have to do in the little time available.

What is the most appropriate action for you to take?

- A Offer to do the night shift for a colleague the night before so you can legitimately cancel the meeting. **0**
- B Make a list of the outstanding actions and aim to complete the easiest ones before the meeting. **3**
- C Cancel the meeting and aim to rearrange it for a later date when you have completed some of the actions. **2**
- D Attend the meeting and discuss with your supervisor how you can achieve the objectives within a defined time frame **4**
- E Cancel your social engagements for the rest of the week and do some work after your nightshifts in order to complete the objectives. **1**

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2. Patient focus CC12

The department is very busy with a 3 hour wait. You are approached by a lady who has been waiting to be seen for 30 minutes. She is very upset because she wants to be seen straight away as she has slight vaginal bleeding and is 10 weeks pregnant with IVF twins. All of her observations are normal and there are 10 people with the same triage category in front of her.

What is the most appropriate action for you to take?

- A See her straight away to try to alleviate her anxiety and to avoid a complaint. 0
- B Ask the Nurse to call the Gynaecology SHO to see if they can see her directly. 3
- C Tell her there are lots of people who have waited longer and that she will have to be seen in order of clinical priority. 1
- D Ask a Nurse to see her whilst she is waiting to be seen and to try and reassure her. 2
- E Apologise for the delay and reassure her that her observations are normal and she will be seen as soon as possible 4

3. Professional integrity CC14, Problem solving CC5

At the end of your shift the biochemistry technician rings to inform you that a patient you discharged earlier has a high positive troponin. He is young and presented with atypical chest pain and had no cardiovascular risk factors. His ECG and other investigations were all normal. He was symptom free and keen to go home. You did not realise that the test had been sent at triage and you are surprised by the result.

What is the most appropriate action for you to take?

- A. You would not have requested a Troponin therefore it should not influence your decision making as the result is likely to be erroneous. 0
- B. Call the patient to establish that he remains well and advise him to reattend if he develops further chest pain. 1
- C. Arrange for the patient to attend the next day for urgent cardiology consultant review. 2
- D. Recall the patient for a repeat troponin and ask your colleague to review the patient and arrange appropriate ongoing management. 4
- E. Submit an adverse incident report and ask the Medical Registrar to recall the patient for review. 3

4. Problem Solving CC8

You are the team leader in a major trauma resuscitation. The Radiology Registrar disagrees with the decision to carry out a whole body CT scan.

What is the most appropriate action for you to take?

- A. Tell him that you have clinical responsibility for the decision and believe that the patient needs a whole body CT scan. **3**
- B. Call the Radiology Consultant to discuss the indications for whole body imaging. **2**
- C. Listen to his concerns and if you feel they are justified modify your decision accordingly. **4**
- D. Agree to observe the patient for an hour and then review the need for imaging. **0**
- E. Ask the General Surgeon on the team to decide whether the scan is justified. **1**

5. Decision Making CC11

A 40 year old man with a history of alcoholism and recurrent attendances to the Emergency Department, is admitted to the observation ward overnight after being found asleep in the street intoxicated, with a reduced Glasgow Coma Score. The following morning the nurse tells you that he wants to take his own discharge. His Glasgow Coma Score is now 15 and she tells you he is back to his normal self.

What is the best course of action for you to take?

- A. Confirm he has capacity and then allow him to leave as you know he will return at some point. **3**
- B. Refer him to the alcohol liaison team for follow up in by the Community Alcohol Outreach Team. **4**
- C. Ask him if he will stay to have some Pabrinex before he goes as this is an opportunity to supplement him. **2**
- D. Advise him to stop drinking immediately as it is only a matter of time before he sustains a serious injury whilst drunk. **0**
- E. Prescribe a reducing course of chlordiazepoxide for him to commence when he gets home. **1**

Additional questions (added 12/09/17)

Q6

An elderly woman presents to the Emergency Department at 10am complaining of difficulty breathing. She has had numerous attendances in the past with mild exacerbations of COPD and has been admitted overnight on two occasions in the past week but was sent home the following morning following respiratory review. On examination she appears very anxious however her observations are all within normal limits and respiratory and cardiovascular examinations are normal.

What is the best management plan for this patient?

- A. Admit her under the medical team with the diagnosis of acute exacerbation of COPD. **1**
- B. Ask the COPD specialist nurse to see her in the department and to arrange community follow up. **4**
- C. Explain to the patient that her difficulty breathing is most likely due to anxiety and advise her to see her GP. **2**
- D. Explain to the patient that she should stop attending the Emergency Department as she has no evidence of an acute problem. **0**
- E. See the patient with a relative and reassure them that she does not need admission but may benefit from more social support. **3**

Q7

You have been looking after a patient who has presented with an isolated, lateral malleolus fracture that requires surgery. He has been reviewed by the orthopaedic team who have arranged for him to come back for surgery in a few days. He has been rude to the nursing staff and is now causing a disruption and is refusing to have a plaster because he wants his operation tonight. He is demanding to speak to your consultant who is busy in resus with a polytrauma.

How would you manage this situation?

- A. Ask orthopaedics to admit the patient with a view to expediting his operation. **0**
- B. Ask your consultant to speak to the patient once she is finished with the trauma. **1**
- C. Ask orthopaedics to review the patient again and explain their management plan. **3**
- D. Explain the importance of having plaster to prevent complications and why his operation will not happen tonight. **4**
- E. Explain that his behaviour is unacceptable and ask him to leave. **2**

Q8

A 75 year old woman attends with a persistent cough. She has a chest X-ray and is discharged with a diagnosis of a chest infection and prescribed appropriate antibiotics. The subsequent report shows a mass that is suspicious for malignancy.

What is the best action for you to take?

- A. Contact the medical team and ask them to arrange admission for investigation. **0**
- B. Contact the patient and explain that they have an abnormal chest x-ray that requires further investigation and refer for urgent follow-up. **4**
- C. Copy the report to the patient's GP and send the patient a letter telling them to make an appointment with their GP. **3**
- D. Recall the patient to the Emergency Department for an urgent CT chest. **2**
- E. Telephone the patient and tell them they may have lung cancer and to contact their GP urgently. **1**

Q9

You are asked by your FY2 colleague to review a patient who has attended complaining of a headache. She does not speak any English and her 11 year old son is translating. Your FY2 feels she is not getting the full picture about the headache but other than hypertension she has found no abnormality on examination. You are busy in the resuscitation room and there is a three hour wait to be seen in majors.

What is the most appropriate next step?

- A. Advise your FY2 to admit the patient for further investigation due to department pressures. **1**
- B. Advise the FY2 to use the translation telephone service to clarify the history in more detail. **4**
- C. Ask the FY2 to find out if there are any staff members in the hospital who are able to translate. **3**
- D. Ask the FY2 to use a translation App on their smart phone to rule out any concerning features. **2**
- E. Given the normal examination, reassure the FY2 that they can discharge the patient with analgesia. **0**

Q10

You are assessing an elderly man who has presented with a history of falls, general deterioration and weight loss. His family approach you and tell you they have suspected for some time he has a serious illness but that he has told them that if he was ever diagnosed with a terminal condition that he would not want to know. You then find that his chest x-ray shows an obvious malignant lesion of his right lung.

What is the most appropriate action for you to take?

- A. Talk to his family in private to gain more clarity about how and when he expressed these wishes. **3**
- B. Talk to the patient and ask him for his views on what information he would like about his illness. **4**
- C. Talk to the patient and inform him sensitively of the chest x-ray findings. **1**
- D. Tell him he needs admission to hospital as the chest x-ray is abnormal and requires further investigation. **2**
- E. Tell the family your suspected diagnosis and leave it to them as to how much the patient should be informed. **0**