

<b>Chapter number</b>	<b>Title</b>	<b>Key purpose</b>	<b>Domains on the assessment sheet</b>
Chapter 1	Briefing	Agrees how the next couple of hours will work Checks Registrar is the lead registrar Checks the team is otherwise ok Quick review of the assessment form to check what is on it Agrees the timing of feedback	Safety
Chapter 2	Identification of non English speaking patient	Picks up first card – non English speaker – ask for interpreter	Safety Time management Management of team
Chapter 3	Chest pain and abnormal ECG	Reviews all cards, realised this patient had abnormal ECG Noticed SHO not doing anything – asks to see this patient Gives explicit instructions having gone through the ECG with the SHO and rehearsed the key issues	Safety Clinical assessment Investigations Management of take
Chapter 4	Ambulance prior alert call-cardiac arrest – breaking bad news	Cardiac arrest – Long time down – 40 minutes pre-hospital with no output Carries out three cycles only then stop with team consent Son keen father's eyes donated – discussion after stopping- explains too long down Writes up notes – including arrest record Phones coroner's officer immediately	Team leadership Clinical assessment and management Medical records keeping Clinical judgement
Chapter 5	Large bowel obstruction	Comes for advice on Xray Discussion on case – rehearse the clinical history and exam Looks at Xray – large bowel obstruction Advises referral Ensures happy for referral and what going to say Gives advice on NG, IV fluids, catheter, gases and bloods etc	Clinical assessment, investigations, referrals, manage take, leadership,
Chapter 6	Ambiguous history through interpreter	Takes history through interpreter Writes up medical records - interrupted	Clinical assessment Medical records

Chapter 7	Interaction with nurse in charge – breach avoidance	Patient about to breach – not seen by medical registrar yet – can they go to ward – refusal as policy says no	Safety
Chapter 8	PV bleed	Checks referral ok, Gives next card – PV bleed and pregnant Asks to ensure IV line, blood gp and save and gynae referral –	Safety Clinical assessment Investigations Management of take
Chapter 9	Interaction with multiprofessional team	OT tells them Mr X is not safe to go home Referral to medical registrar	Clinical assessment Medical records Investigations Management Clinical leadership Handover
Chapter 10	Staff management	SHO sick tonight – phones agency,	Team leadership, time management,
Chapter 11	Renal colic	Reviews CTKUB – go and see patient Explains findings and referral to urology Deals with questions	Clinical judgement Clinical assessment Time management Investigations Medical record keeping Patient management
Chapter 12	Debriefing	Discussion of next steps,	Reflection, self development