Clinical Management in the CSA

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Why this subject?

Aims of the session

- To look at the scope of "Clinical Management" in the CSA

- To reflect on strategies we use to help our learners understand and apply this domain

- To consider a model for teaching this domain

- To look at some common pitfalls

A very short quiz

- What proportion of marks in the CSA relate to clinical management?

What issues do your trainees have with Clinical Management?

Problems

- Time
- Missing (or avoiding) the point
- Ignorance
- Managing the condition rather than the patient
- **It's hard**

Feedback statements

What works for you?

Find what works for you, and exploit it.

Mark Twain
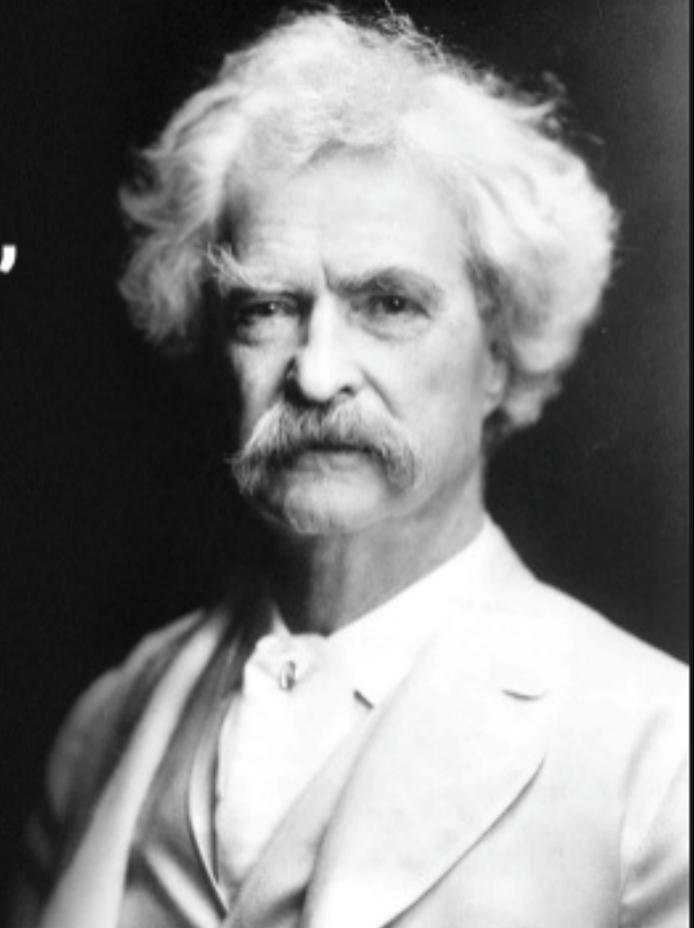
DECIDE
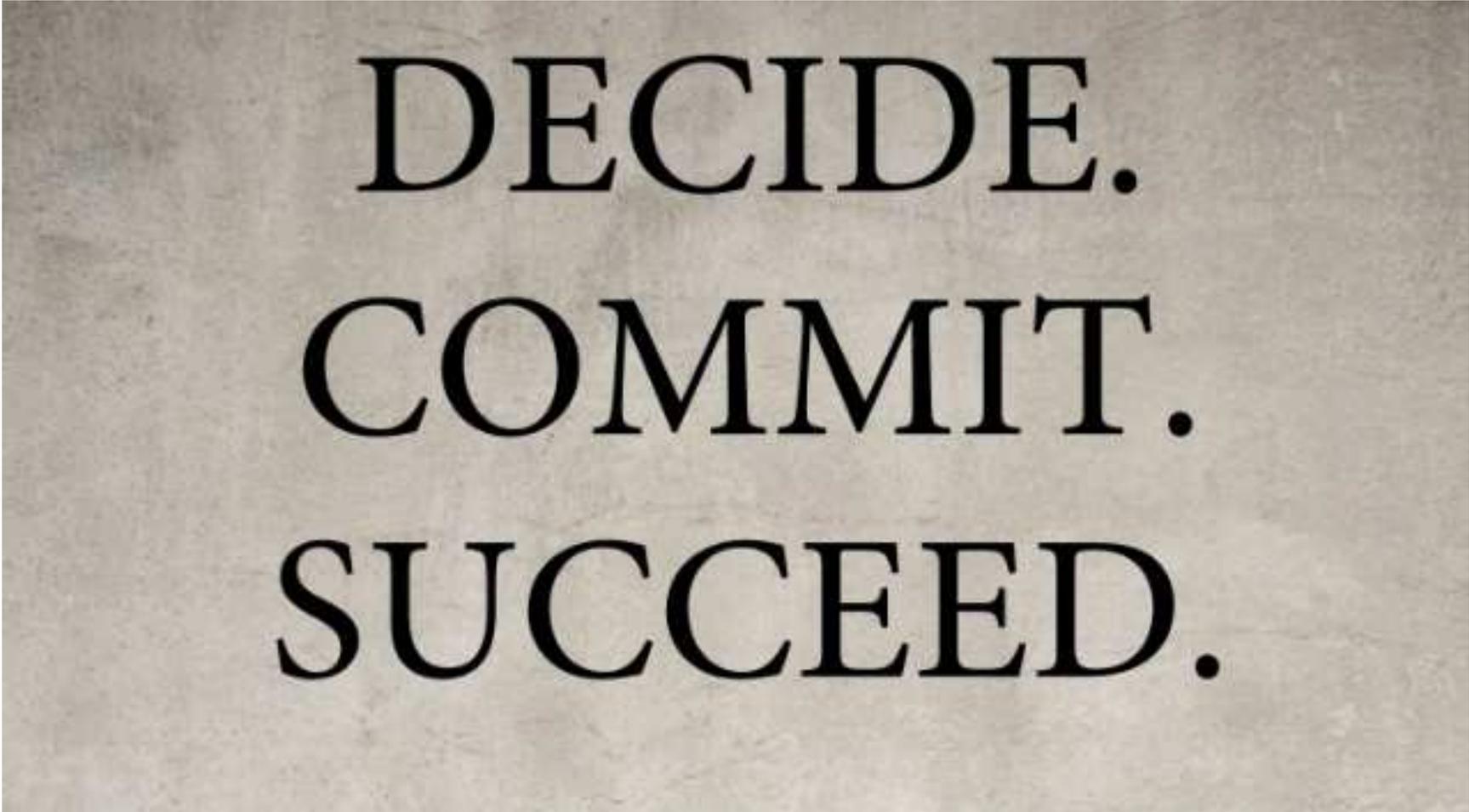
DECIDE.
COMMIT.
SUCCEED.

D =   Diagnose

E =   Explain

C =   Contextualise

I =   Involve

D =   Do

E =   Ensure

D = **Diagnose**

- What is the:
  - **D**iagnosis / **D**ifferential
  - **D**ilemma
  - nature of the **D**ecision

E = Explain

- **E**xplain all of this in a way that the patient (and the examiner) can understand

- **Say it out loud**

C = Contextualise

- Bring in what has been learnt about the patient's particular **c**ircumstances

- Revisit ICE

- How are you going to manage *this* patient with *this* diagnosis / dilemma

I = Involve

- PAUSE FOR BREATH

- **I**nform and **I**nvolve concerning possible ways forward

- Options?

D = Do

- **D**ecide (together) what you are going to **D**o

- Advice, investigations, referrals, prescriptions

- **D**o *something*….

E = Ensure

- **E**nsure that the patient has bought-in to the suggested plan

- Do they understand what is going to happen?

- Has a suitable follow up plan been put in place to **E**nsure their safety?

E is for Elephant

Where do candidates lose marks?

Bugbears

- "Obviously….."

- "What were you hoping I could do for you today?"

- "Options"

- "Sometimes people in your situation…"

Bear Traps

- Avoiding elephants

- Believing patient preference *always* takes precedence

- Getting in a pickle over confidentiality

- Giving a lecture rather than managing the patient

The fundamental question

- Is this patient better off for having seen this doctor today?