

# TAYLOR · Confused & Erratic Patient

## SCENARIO

The students have been asked to assess the wound on the patient's arm; they will be required to take a brief history, perform a set of observations and examine the arm.

The students have been given the brief:

*"Steven/Sandra Taylor has been brought to A&E by police as they were concerned about a wound on the patient's arm and their behaviour."*

## PATIENT DETAILS

**Name** Steven / Sandra Taylor

**Age** 31

#### PRESENTING SITUATION

You are aware of your name and age, but are uncertain where you currently are, why or how you got there. You accept when told you were brought in by police but are unsure why / what you were doing.

Your arm is not painful — you are not concerned about it. You deny any pain anywhere else, nausea / vomiting, shortness of breath, palpitations, urinary symptoms, bowel symptoms, headache, weakness or change in sensation. Answer in the negative if students ask about any other current symptoms.

#### **You are not aware of:**

- The current prime minister / monarch
- The date WWII ended
- Current date / time
- Who the person speaking to you is (if asked, can guess secretary or actor etc.)

You are agreeable to have a chat but often get distracted by various other thoughts / topics (with no followable link / association to what is happening).

#### PATIENT PERSPECTIVE (ICE)

You have no Ideas, Concerns or Expectations from the consultation.

#### BACKGROUND

You are not aware of any past medical history or regular medications you take. You aren't sure if you smoke or take drugs but feel this is not something you would do. You aren't sure where you live or who with.

**You have a wound on your left forearm** — not aware of how you have got this. You don't particularly want anyone looking at it.

You are currently behaving in an **extremely erratic and unpredictable way**.

#### PLAYING THE ROLE — ERRATIC BEHAVIOUR

- Do not play the patient as *continuously* angry or shouting — although you may have episodes where you are more energetic
- Your behaviour should feel unpredictable and difficult for the students to follow
- Move around the cubicle rather than remaining seated
- Find it difficult to stay focused on the conversation
- Frequently change the subject to apparently random topics without explaining why
- Occasionally appear distracted by things that the students cannot see or hear
- Alternate between being friendly, suspicious, irritable and completely calm
- Occasionally laugh or smile at inappropriate moments
- Give some answers that don't quite make sense or don't relate to the question
- At times, appear very interested in what the student is saying, then suddenly lose interest

You are **not trying to attack the students**. However, if someone gets too close or tries to take your observations or examine you without permission, you should make it clear that they should **back away**.

#### INTERACTION WITH THE STUDENTS

- Allow the students to introduce themselves
- Be reasonably cooperative initially but don't readily agree to having the wound examined
- You may allow the students to put the sats probe on but take it off repeatedly after a few seconds
- You are reluctant to have your BP or temperature taken — you become uncomfortable and ask the student to back away / stop
- Give short, vague answers about what has happened
- You don't think you need to be in hospital and don't understand why you were brought
- Occasionally question why the students are asking particular questions
- Avoid giving a coherent account of events

#### AS THE INTERACTION PROGRESSES...

Gradually make the interaction more difficult:

- Interrupt the students occasionally
- Start answering a question but move onto a completely unrelated topic
- Ask the students questions that aren't relevant to the consultation
- Look around the room as though something has distracted you
- Occasionally speak to yourself quietly
- Suddenly become interested in an object in the room
- Change your mind about whether you want the students near you

#### THE WOUND — NOT YOUR PRIORITY

- Initially minimise the wound
- Describe it as insignificant or say that it doesn't need attention
- Do not readily allow the students to approach it
- If they ask to look at it, hesitate or move away
- If they ask to touch or examine it without explaining what they are doing, become particularly uncomfortable
- If someone physically approaches you unexpectedly, increase the distance between you and them
- You may get irritated and loud at times (especially in response to students being pushy to complete observations / examine your arm) but please do not get physical with the students

#### FACILITATOR NOTES

If the students explain they are leaving to get a senior, please allow them to step out of the room.

The whole scenario is expected to last **25 minutes**.