Simulated Surgery Guidance

This document was produced by the London Deanery

The simulated surgery is intended to be just like an everyday surgery in any general practice. It should be like a real morning or afternoon surgery. You will be given a consulting room and should remain there throughout the session. Refreshment will be provided halfway through the session.

Paperwork

- There will be a timetable showing the patients you will see during the surgery.
- You will be given written records for each case, which will provide some background information. We advise you to read these notes.
- You can make your notes on these records during or after the consultation for yourself. These notes will not be marked.
- Blood/XR forms, prescriptions and sickness certificates will be provided.

The patients

- You will have ten patients, each of whom is a role-player trained to present in a standard way.
- The cases are typical general practice problems.
- The role player will respond to your questions. They will tell you their story if you encourage them, not deliberately hiding information.

Physical examination

- If you decide that a physical examination forms an important part of your assessment of the case, you should examine the patient and your technique may be marked.
- The actors will not have abnormal physical signs, but you should do an appropriate examination based on the history.
- They may offer you a card with the findings on it.
- If a proposed examination is unnecessary, the role-player will refuse an examination.

Timing

- Consultations are limited to ten minutes; the start and end of the consultation will be signalled by a whistle.
- If you have not completed the consultation after ten minutes are up, you should allow the patient to leave.
There will be a few minutes to look at the next patient’s notes before that consultation starts.

Marking

- An observer will accompany each role player and will play no part in the consultation.
- You should ignore the observer.
- The observer will be looking at your consulting skills and making observations on a schedule.
- Observations of the six areas of consulting skill are outlined below.
- You will receive personal feedback based on these areas after the surgery.

The areas of consulting skills tested are as follows:

a) Gathering medical information

- Making use of information from the records provided
- Taking a history that elicits relevant information and excludes any potentially serious conditions
- Appropriate physical examination

b) Eliciting the patient’s concerns

- Welcome and courtesy
- Helping the patient to tell their story by using listening skills and non verbal cues
- Sensitivity to the patient’s feelings
- Discovering the patient’s concerns and expectations
- Respect for the patient’s wishes and confidentiality

c) Explaining the diagnosis

- Explaining your assessment of the problem
- Explaining the choices for treatment
- Involving the patient in the management plan
- Checking the patient’s understanding

d) Managing the problem

- Having a safe and effective management plan
- Acceptable prescribing, investigation and referral
- Appropriate use of time and resources

e) Closing the consultation

- Making appropriate follow up arrangements
- Thinking about health promotion and advice where appropriate
- Checking that the patient’s agenda has
These assessments are basically for the Deanery to get an idea of the refresher training requirements of the potential of the GP Induction and Refresher as well as forming part of the selection procedure.