LEARNING OBJECTIVES

Demonstrate ability to break bad news in a caring compassionate effective manner
Use of a structured framework to guide consultation
Pre Reading: StratOG Module: Communication Skills

EQUIPMENT LIST

Quiet room
Tissues

PERSONNEL

MINIMUM: 1
ROLES:
Patient
Partner

FACULTY

MINIMUM: 1
Facilitator

TIME REQUIREMENTS

15mins
INFORMATION TO CANDIDATE

PATIENT DETAILS

Name: Vera Jones
Phx: Nil
Age: 29
Allergies: Nil

SCENARIO BACKGROUND

Location: Labour Ward

Situation:

You are the ST3 on labour ward. You are reviewing Mrs Vera Jones. She is 37 weeks into her first pregnancy. She has attended with her husband today thinking her membranes have ruptured. She was seen in clinic last week after her midwife though she was measuring large for dates and is booked for an USS this afternoon. She has otherwise been low risk in this pregnancy. She gives a history of a sudden gush of fluid this morning and some irregular tightenings. She has not noticed a change in her baby’s movements but hasn’t paid much attention this morning. The midwife has asked you to review Vera as she is unable to auscultate the fetal heart. You have explained this to the patient and her husband and performed an USS. Unfortunately there is no FH present. This is confirmed by the labour ward consultant.

Task:

Please inform Vera and her husband of you findings and answer their questions.

RCOG CURRICULUM MAPPING

Module 1: Clinical Skills
Breaking Bad News Session
Module 8: Antenatal Care
Care of the woman diagnosed with stillbirth
INFORMATION FOR ROLEPLAYERS

BACKGROUND

You and your husband have attended the Labour Ward because you think your waters have broken about 0600hrs and you are starting to have some irregular contractions.

This is your first pregnancy and you have been well with no problems. You went to the midwife last week and she thought you were measuring bigger than your dates so she sent you to antenatal clinic. The doctor saw you and mentioned something about the possibility of too much fluid around the baby and that you needed a scan. You are booked to have the scan this afternoon as it was the next available due to bank holidays.

You had felt baby moving normally yesterday but aren’t sure about your movements this morning you think you have been distracted with the tightenings. When you arrived and the midwife has assessed you she has mentioned that she can’t find your baby’s heartbeat. You’re not really sure what that means and think she has gone to get another machine as this one isn’t working. When she returns with the doctor and an USS machine you begin to feel a little more concerned.

The Doctor then tells you both that s/he can’t find your baby’s heartbeat.

RESPONSES TO QUESTIONS

You both are very confused, shocked and disbelieving – you say ‘But I could feel the baby moving’
You become very upset and silent for a few moments.
You then get slightly angry asking the doctor if this wouldn’t have happened if you’d had an earlier scan- after the explanation you then remain tearful/sad.
You ask the doctor:
What happened now?
Do I have to give birth to my baby?
Can I go home?
SCENARIO DIRECTION

Introduction

**Preparation: (describes)**
Has midwife present
Quiet environment without disruption (bleeps etc)
Water/tissues/leaflets

**Communication:**
Checks patient’s understanding
Warning Shot
Allows time for denial
Uses clear language avoiding jargon
Repetition of information
Empathetic and responsive to non verbal cues
Answers questions honestly
Addresses concerns
Summary of plan and follow up
Offers support /leaflet
Offers chance to return to discuss again
SCENARIO DEBRIEF

TOPICS TO DISCUSS

Communication Skills
Demonstration of Empathy
Ability to demonstrate active listening
Use of non-verbal communication
Approaches to diffusing anger
Structure to breaking bad news consultation

REFERENCES