



# Modified Essay Questions

# MARKING GUIDE

FEBRUARY 2024

**INSTRUCTIONS:**

- Please use pencil ONLY.
- Do not fold or bend.
- Erase mistakes fully.
- Completely fill in the oval.



Please MARK  0  
LIKE THIS ONLY:  1  2

**Modified Essay 5**

Each question within this modified essay question will be marked by a different examiner. The examiner marking one question will not have access to your answers to the other questions. Therefore, please ensure that you address each question separately and specifically. Answer this question fully, even if you believe that you have partly covered its content in your answers to other questions.

You are a junior consultant psychiatrist in the consultation liaison team at a general medical hospital. Kelly is a 4-year-old girl who lives with her parents, Wayne and Naomi, and two older brothers. She was admitted to hospital for the investigation of a large intra-thoracic mass, with subsequent surgery 4 days ago. Early histology suggests that the mass is malignant.

You have been called to the ward by a staff nurse, who is concerned about Wayne's behaviour. Since being informed about the possible malignancy, Wayne has been teary, shouting and swearing at staff, has not slept at all, and staff are concerned that he may be hearing voices. These outbursts are related to all aspects of Kelly's care and Wayne is refusing to allow blood tests. Kelly has witnessed these outbursts and has been distressed.

**Question 5.1**

**Outline (list and justify) the information you would like from the treating team.**

*Please note: a list with no justification will not be awarded any marks.*

**(11 marks)**

<b>A.</b>	<b>Clarify the team's expectations of the psychiatrist</b>	<input type="radio"/> 0 <input type="radio"/> 1
<b>B.</b>	<b>Further clarification of Kelly's illness:</b> <ul style="list-style-type: none"> <li>• Nature of Kelly's illness and prognosis, which will inform priority of clinical investigations and how they will guide treatment.</li> <li>• What have the parents been told about the child's condition, treatment and prognosis? What is their understanding of the illness and prognosis?</li> <li>• What would be the medical risk of delaying investigations?</li> </ul>	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
<b>C.</b>	<b>Clarification of Wayne's current behaviour:</b> <ul style="list-style-type: none"> <li>• Urgency to address Wayne's mental state - current behaviour which may be associated with risk issues. Detailed description of father's behaviour.</li> <li>• Has the team sought any relevant information from Naomi about her husband, including a history of aggression/violence (including family violence) or substance use? What makes the referring team/staff-nurse consider Wayne to be hearing voices?</li> </ul>	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
<b>D.</b>	<b>Clarification of family issues:</b> <ul style="list-style-type: none"> <li>• Role of Naomi in this scenario and any conflict between parents regarding child treatment.</li> <li>• Impact on Kelly of her father's behaviour.</li> <li>• Has there been a family meeting?</li> <li>• What other family supports have been undertaken?</li> <li>• Are there any language, cultural or religious/spiritual considerations influencing the parents' decisions regarding management, and understanding of Kelly's illness?</li> </ul>	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
<b>E.</b>	<b>Staff issues:</b> <ul style="list-style-type: none"> <li>• Impact and potential risk to staff, especially front-line nurses, including staff being distressed by Wayne's behaviour.</li> <li>• How have staff responded to the father e.g. security being called?</li> <li>• Situation awareness (are there additional issues you need to be aware of - staffing, any previous incidents sensitizing the staff such as violence on the ward?)</li> </ul>	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
<b>F.</b>	<b>SPARE</b> (only to be used after approval from Chair, Writtens Subcommittee)	<input type="radio"/> 1
<b>G.</b>	<b>CANDIDATE DID NOT ATTEMPT</b>	<input type="radio"/>
<b>H.</b>	<b>DID HANDWRITING AFFECT MARKING?</b>	<input type="radio"/>

**NOTES TO MARKER**

The candidate is expected to seek clarifying information to assist decision-making in a complex system. There are multiple layers and candidates will be able to score marks for recognizing this (care system, patient, parent, self).

- **SPARE:** Only to be used after approval from Chair, Writtens Subcommittee.
- **DID NOT ATTEMPT:** If the candidate did not attempt this question, fill in ONLY the **CANDIDATE DID NOT ATTEMPT** bubble.  
*No other bubbles should be filled in.*
- **MARKS:** This question is worth 11 marks, however, a total of greater than 11 is acceptable.
- **CHECK:** You have marked one bubble for each sub question and initial the box once you have completed marking.



Marker initials






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**Modified Essay 5**

The information that is presented in italics in this question is a repetition of the earlier sections of the case vignette.

*You are a junior consultant psychiatrist in the consultation liaison team at a general medical hospital. Kelly is a 4-year-old girl who lives with her parents, Wayne and Naomi, and two older brothers. She was admitted to hospital for the investigation of a large intra-thoracic mass, with subsequent surgery 4 days ago. Early histology suggests that the mass is malignant.*

*You have been called to the ward by a staff nurse, who is concerned about Wayne's behaviour. Since being informed about the possible malignancy, Wayne has been teary, shouting and swearing at staff, has not slept at all, and staff are concerned that he may be hearing voices. These outbursts are related to all aspects of Kelly's care and Wayne is refusing to allow blood tests. Kelly has witnessed these outbursts and has been distressed.*

**Question 5.2**

**Outline (list and justify) the possible explanations for Wayne's behaviour.**

*Please note: a list with no justification will not be awarded any marks.*

**(6 marks)**

<b>A.</b>	<b>Adjustment issues:</b> • Grief, sleep deprivation, anxiety, fear, guilt, anger, self-blame.	<input type="radio"/> <input type="radio"/> <input type="radio"/>
<b>B.</b>	<b>Major mental illness:</b> • e.g. psychosis, mania, depression, substance misuse.	<input type="radio"/> <input type="radio"/>
<b>C.</b>	<b>Pre-existing issues with Wayne:</b> • Personality and coping style, previous losses, and life experiences (including lived experience with malignancies), cognitive/learning deficits.	<input type="radio"/> <input type="radio"/> <input type="radio"/>
<b>D.</b>	<b>Conflict with staff:</b> • As precipitant of father's behaviour, hospital rigidity and lack of patient & family focus.	<input type="radio"/> <input type="radio"/> <input type="radio"/>
<b>E.</b>	<b>Cultural, language or religious/spiritual factors:</b> • Driving Wayne's understanding of illness, Kelly's morbidity and mortality.	<input type="radio"/> <input type="radio"/>
<b>F.</b>	<b>SPARE</b> (only to be used after approval from Chair, Writtens Subcommittee)	<input type="radio"/>
<b>G.</b>	<b>CANDIDATE DID NOT ATTEMPT</b>	<input type="radio"/>
<b>H.</b>	<b>DID HANDWRITING AFFECT MARKING?</b>	<input type="radio"/>

**NOTES TO MARKER**

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*No other bubbles should be filled in.*
- **MARKS:** This question is worth 6 marks, however, a total of greater than 6 is acceptable.
- **CHECK:** You have marked one bubble for each sub question and initial the box once you have completed marking.



Marker initials

