



**THE ROYAL AUSTRALIAN AND NEW ZEALAND  
COLLEGE OF PSYCHIATRISTS**

# **MOCK WRITTENS ESSAY PAPER 2020**

**(Produced by the New Zealand Training Programmes)**

**CANDIDATE'S NAME:**

**DATE:**

**This is a shorter Essay Paper, in line with changes dating from 2019. The number of sub-questions has been reduced so that if candidates use the 1 mark for 1 minute timing system, they will have an additional 14 minutes of examination time at the end.**

**DIRECTIONS:**

**Please use a black or blue ball-point pen. Write your responses in the following pages. Write on the lined pages only. Answers written on blank pages will not be marked.**

**Your answer is to be contained within the lines applicable to that question or on the supplementary sheets provided.**

**You can request additional spare pages from the invigilator if needed. Write your name on the top of any extra page, and the question and sub-question number, and interleave the page into the booklet at the appropriate place.**

**Do not use the scrap paper provided to add any additional pages – always ask the invigilator for additional pages.**

# CRITICAL ESSAY

**Critical Essay Question: (40 marks)**

*In essay form, critically discuss this quotation from different points of view relevant to the practice of psychiatry and provide your conclusion.*

**"Where there is no hope, it is incumbent on us to invent it."**

**- Albert Camus, *The Stranger*, 1942**

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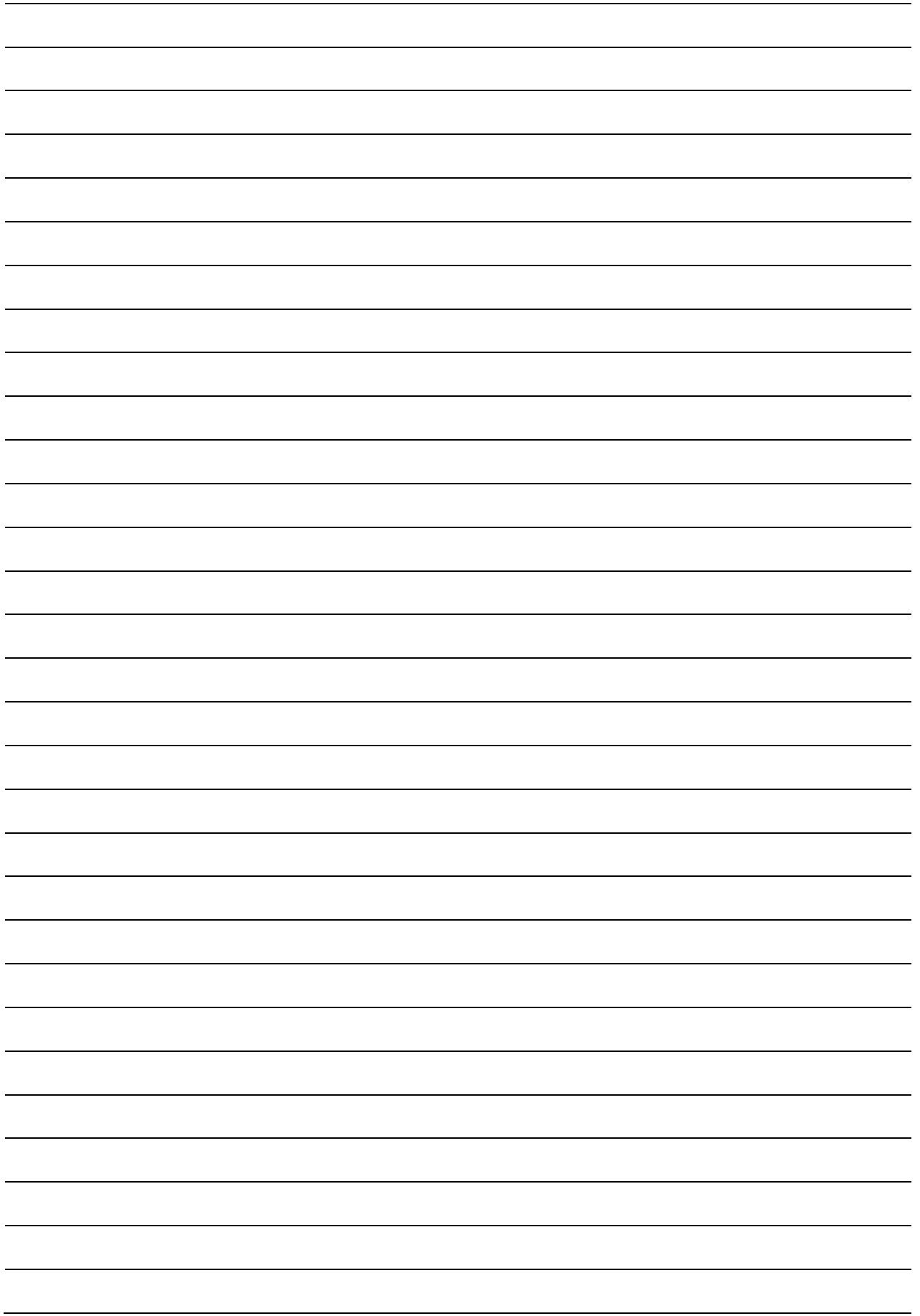
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# MODIFIED ESSAY QUESTIONS

## DIRECTIONS:

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## **MODIFIED ESSAY QUESTION 1 (22 marks)**

***Each question within this modified essay 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 you address each question separately and specifically. For example, answer question 1.4 fully, even if you believe you have partly covered its content in your answers to questions 1.2 and 1.3.***

You are a junior consultant working in the consultation-liaison service at a large general hospital. You have been asked by your general medical colleagues to urgently see John, a 41 year old Samoan man under their care. John was transferred back 3 days ago from the regional neurosurgical unit and has a peripherally inserted central cannula (PICC) in situ as he requires four weeks of treatment with intravenous antibiotics. The treating physician reported that John repeatedly stated that morning that he didn't need antibiotics because he was 'cured' and that "the bandage on my head proves it". He is increasingly irritable with nursing staff trying to give him medication and has attempted to leave on two occasions today. On his second attempt to leave, he required security to contain him. John is 6' 2" and strongly built.

### **Question 1.1 (9 marks )**

**Outline (list and explain) the specific information you need to gather in your assessment of John to safely manage the escalating situation.**

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## **MODIFIED ESSAY QUESTION 2 (22 marks)**

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You are a junior consultant working in a community mental health clinic and have been asked to review Joanne, an unemployed 28 year old woman who lives with her parents. Joanne was referred to your team one month ago by her GP, and was diagnosed with Obsessive Compulsive Disorder (OCD) by the psychologist on your service and a locum psychiatrist. She recently commenced psychological treatment.

The psychologist has asked you to see Joanne because she has stopped medication (fluoxetine 40mg mane, previously prescribed by her GP), and is now doing poorly. She has also lost weight in the past month.

### **Question 2.1 (10 marks)**

**Outline (list and explain) what you will include in Joanne's assessment.**

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**Modified Essay Question 2 contd.**

Joanne deteriorates further. She takes medications for three days then stops again. She is nearly paralysed by indecision related to her obsessions, fearing that any behaviour she completes will confirm her fear that she's done something terribly wrong. She attends psychotherapy but is not able to make use of therapeutic techniques outside sessions. Her BMI is now 15.5 and her food intake has been minimal for the last week.

**Question 2.3 (6 marks)**

**Outline (list and explain) the key elements of your treatment plan for Joanne at this point.**

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## MODIFIED ESSAY QUESTION 4 (18 marks)

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You are a junior consultant psychiatrist in an urban area and have been referred a new patient, Mrs Chin, to be assessed in your outpatient clinic. She is a 75 year old Chinese woman, married and living with her husband in their own home. She and her family emigrated from Hong Kong 30 years ago when she was in her mid-forties. Her son (her only child) lives locally with his family, in the same suburb. Her family are concerned that she has become unwell over the past four months. She is reported to be sad and to have lost interest in her usual hobbies (mah jong with friends, and calligraphy). Her sleep is poor and she can be disoriented at times. Her husband says that her memory is not as good as it used to be. Mrs Chin was prescribed an antidepressant by her GP but without any improvement so far.

### **Question 4.1 (6 marks)**

**Outline (list and justify) your differential diagnoses at this point.**

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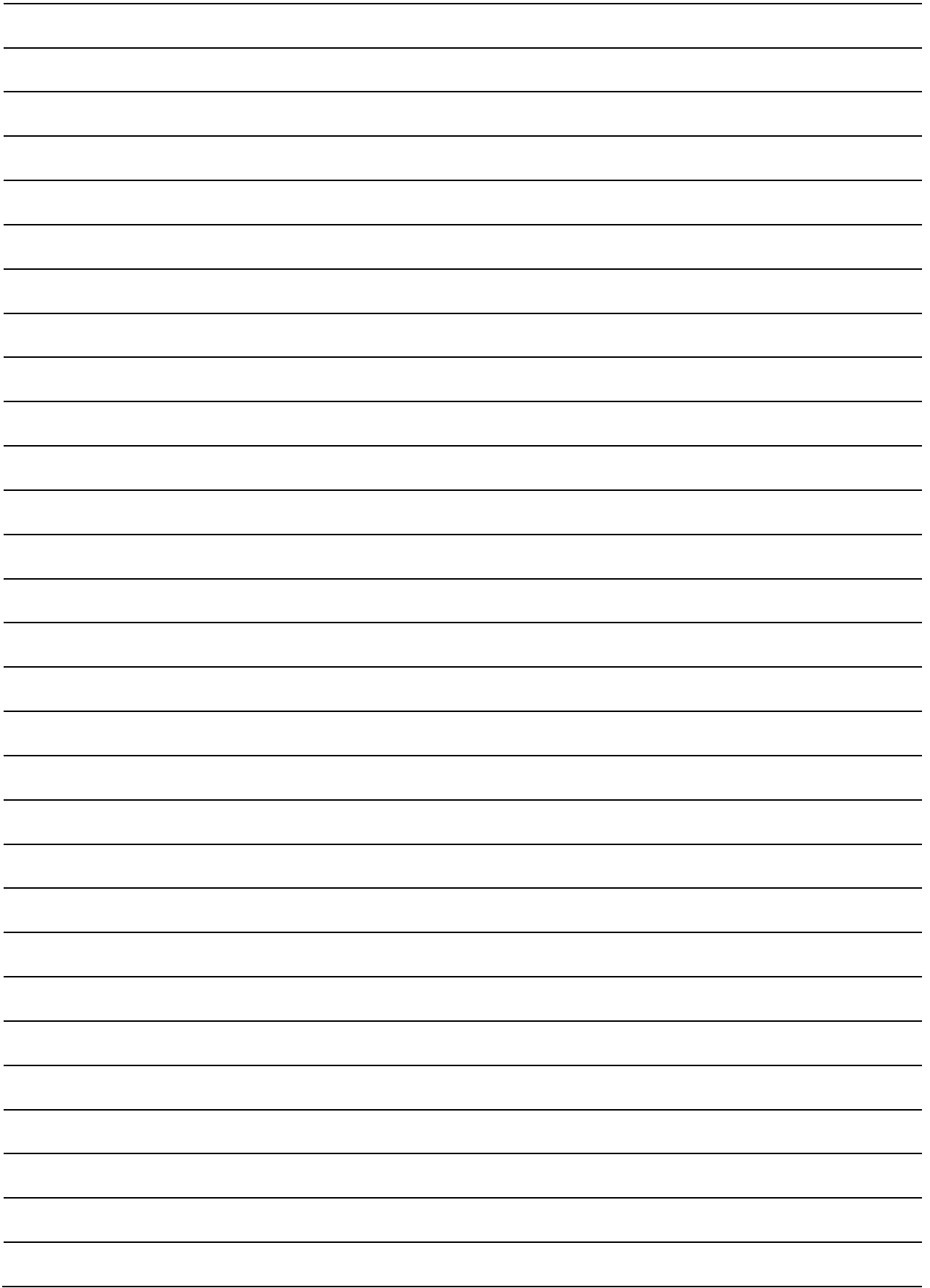
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## MODIFIED ESSAY QUESTION 5 (23 marks)

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You are a junior consultant psychiatrist and have been asked to see Davey, a 9-year-old boy referred by his school with concerns about his irritability, poor academic performance and restlessness in the classroom. You see him with his mother, Shannon, who has raised him as a solo parent after his biological father absconded on hearing of her pregnancy. She has had no further contact with the father, and Davey is her only child. Shannon works full-time in a supermarket and Davey attends after-school care. Davey spends Saturday with his maternal grandmother while Shannon does a second job as a cleaner, to supplement their income.

### Question 5.1 (6 marks)

List the key areas you need to assess in your initial work-up.

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**Modified Essay Question 5 contd.**

You arrange for Connors ADHD Rating Scales to be done at school and at home, for Davey. The results show high scores across all domains (Inattention, Hyperactivity/Impulsivity, Learning problems, Executive function, Aggression and Peer Relations), with *t* scores above 70 for Inattention, Learning Problems and Executive Function.

You talk with Shannon and suggest treating Davey with stimulant medication. Shannon says: "I'm worried he might be a bit slow, what with not doing too good at school. Shouldn't he have his IQ checked first in case that's the problem?"

**Question 5.2 (1 mark)**

**State why Davey should not have IQ testing first, before treatment for ADHD.**

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## MODIFIED ESSAY QUESTION 6 (18 marks)

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You are an on-call consultant psychiatrist called to assess Abigail (aged 23) in the Emergency Department (ED) on a Saturday. You are assisting with cover as the registrar was overloaded with other assessments. Abigail has presented to ED twice within the past 3 days, each time with overdoses of 10 paracetamol tablets. Abigail is well known to the ED with multiple past presentations of self harm including lacerating her wrists, intoxication and overdose. She has now been medically cleared for discharge from ED. The houseofficer's notes say that her current presentation was triggered by conflict with her father with whom she lives, as Abigail says he does not believe her report of childhood sexual abuse by a neighbour who was a friend of her father. Her father says Abigail has intense mood swings which are difficult to control or predict.

### Question 6.1 (4 marks)

List the most likely differential diagnoses which might account for her presentation at this point, based on the above information.

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