



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

MODIFIED ESSAY QUESTIONS

**ESSAY STYLE MOCK EXAMINATION PAPER 2019
(revised shorter version)**

STIMULUS

To be used as a handout while answering questions.

MODIFIED ESSAY QUESTION 1: (20 marks)

You are a junior consultant on call overnight when you receive a call at 11pm from a first year registrar on call. The registrar has assessed Amy, a 19 year old woman with a diagnosis of borderline personality disorder. Amy had self-discharged from the inpatient ward where she was an informal patient, the evening of the day before this presentation. The discharge occurred less than 24 hours into a 48-hour long crisis admission - part of her crisis management plan. Amy has now been brought to hospital by police after a member of the public saw her cutting herself. The registrar says Amy reports feeling suicidal and wants to return to hospital for her crisis admission. She told the registrar she would kill herself if not re-admitted.

Question 1.1 (8 marks)

Outline (list and elaborate) the information you expect the registrar to have obtained? (8 marks)

Question 1.2 (6 marks)

Outline (list and explain) aspects of risk that may influence your decision whether to readmit Amy.

Amy then absconds from the Emergency Department. Several hours later, you receive another call from the registrar saying Amy has been returned by police, having been retrieved from railway tracks where she had lain down. She was compliant with the police returning her to hospital. She now presents as quiet and calm, saying the crisis has passed. She says she wants to go home and sleep, denying a need to return to hospital. The police emphasise their annoyance at their ongoing involvement and state their opinion that Amy should be placed under the Mental Health Act and admitted. The registrar has also talked by phone with Amy's mother, who is fearful that Amy will kill herself and is asking for her to be readmitted.

Question 1.3 (6 marks)

Outline (list and elaborate) your immediate and medium-term management plan.

MODIFIED ESSAY QUESTION 2

(21 marks)

You are working for the local child and adolescent mental health service that provides liaison to the government child protection services. You are asked to see Jacek, an 8 year old boy who has recently been placed with a new set of foster parents after his fourth placement broke down. He was removed from his mother aged 10 months, with concerns he was significantly neglected due to her substance use problems. His new foster parents Ian and Melinda have requested an early review with child psychiatry as they are aware of previous difficulties with Jacek at school and in his foster homes. Ian and Melinda are experienced foster parents with no other children currently placed with them. They have begun work on routines around eating and sleeping. So far Jacek has been quiet at home, wanting to retreat to his room. They have found packets of their dry pasta as well as biscuits moved from their pantry and placed under his bed.

Ian and Melinda have enrolled Jacek in their local primary school. They say he has had some basic assessments and apparently his reading is at year 2 level (six year old), he is not holding a pen well, and he struggles with writing. He is noted to be restless and easily angered in class, having already bitten another child in the first two weeks of school.

You arrange an assessment and school observation.

Question 2.1 (6 marks)

List the key differential diagnoses you would plan to gather information on in your assessment.

Question 2.2 (6 marks)

List the key information you would hope to gain from school observation.

Jacek appears to have small stature, with a flattened philtrum and small palpebral fissures. His birth weight on record was small for gestational age. Given his mother's reported substance use problems you suspect a Fetal Alcohol Spectrum Disorder.

Question 2.3 (4 marks)

List the behavioural and psychiatric difficulties that may be associated with Fetal Alcohol Spectrum Disorder.

You arrange a classroom observation and Conner's rating scale, both of which suggest Jacek has ADHD. The Child Welfare Services staff hold his guardianship, and you decide to discuss with them whether Jacek should have a trial of stimulant treatment, or whether non-pharmacological management strategies should be used.

Question 2.4 (2 marks)

Outline (list and justify) the key possible problems with stimulant treatment for Jacek that would need to be discussed.

Having not been in contact for three years, Jacek's birth mother has contacted Child Welfare Services asking for supervised visits one weekend day per month. Ian and Melinda initially agreed to this but now report that he is much more unsettled on the evening after the visit and for the following two days.

Question 2.5 (3 marks)

Outline (list and explain) the reasons why Jacek may be unsettled after seeing his mother.

MODIFIED ESSAY QUESTION 3

(28 marks)

You are the on call consultant for a small mental health service and you are asked to see Liam, a 35 year old man brought to hospital by the police. This follows an incident where he took his clothes off and exposed himself to neighbours. Liam presents with paranoid delusions of being under surveillance, as well as bizarre behaviour. His forearms are covered with sores where he has been trying to dig things out of his arms. He was recently discharged after an inpatient admission for a drug-induced psychosis after smoking methamphetamine, and has not attended arranged follow-up. Liam recently lost access to his children and has been asked to leave the family home. He is now living with his sister who has young children.

Question 3.1 (12 marks)

Outline (list and justify) your risk assessment for Liam, focussing only on Risk to Self and Risk to Others.

You decide to admit Liam to hospital under the Mental Health Act. Just after he arrives in the ward he becomes acutely agitated and causes major damage to property in his room. He then runs down the corridor and threatens nursing staff.

Question 3.2 (10 marks)

Outline (list and justify) your short term management plan for this situation.

Liam is no longer under the Mental Health Act, and has yet to see the drug and alcohol treatment team. The inpatient unit is very full so Liam needs to be discharged quickly. Liam drives heavy earth-moving equipment for a living, and wants to return to work as soon as possible because he is very short of money.

Without any income he will also need to remain at his sister's house which is stressful for everyone, and one of her children is taking methylphenidate for ADHD.

His employer has asked for a medical clearance for Liam to return to work.

His probation officer has also asked for a report, as he has just been charged with indecent exposure.

Question 3.3 (6 marks)

Describe your approach to managing information sharing in this situation, with Liam's sister, employer, and probation officer.

MODIFIED ESSAY QUESTION 4 (23 marks)

You are the consultant on an inpatient rehabilitation ward. One of your patients is William, a 55 year old man recently admitted to the service. He has a long history of paranoid schizophrenia including auditory hallucinations, alcohol and cannabis use and poor engagement with services over the last 25 years. He has been homeless for periods and has had several convictions over the years for minor offending – shoplifting, public nuisance and trespass.

He is prescribed 40mg Olanzapine per day.

He has previously been on Zuclopenthixol Depot, Risperidone and Haloperidol.

Question 4.1 (9 marks)

Describe how you would undertake a medication review and what information you would be seeking.

William's voices continue to tell him that he must escape the system and he regularly goes AWOL from the unit, usually being brought back a few days later by the police in an intoxicated and disheveled state, having slept rough.

You are considering a medication change, given the treatment resistant nature of his illness.

Question 4.2 (4 marks)

Outline (list and justify) what medications options you would consider, if you were to change his prescribed medication.

William responds well to a different antipsychotic. He is almost symptom free and engages well with his supports. A discharge pathway to a supported accommodation NGO is underway.

A Recovery Plan is needed.

Question 4.3 (10 marks)

Outline (list and elaborate) how you would develop this, and the information you would want to have in William's Recovery Plan.

MODIFIED ESSAY QUESTION 5 (18 marks)

You are a general adult psychiatrist working in a rural community team. You have been asked by a GP to review Kylie, a 28 year old woman who is 18 weeks pregnant. She is reporting low mood, tearfulness, and poor sleep. The GP tells you she was depressed after the birth of her first child (now aged 3) and overdosed on analgesic medication at that time. She is living with her partner who is the father of the two children, and there is some conflict as he was recently charged with a drink-driving offence. She has recently been to her GP with concerns about 'tantrums' in her 3 year old.

Following a comprehensive assessment of Kylie, you conclude that she has a severe depressive disorder and that antidepressant treatment is indicated. You decide to trial an SSRI.

Question 5.1 (10 marks)

Outline (list and justify) your approach to prescribing for Kylie, including the specific pregnancy-related risks of SSRIs that you would want to discuss.

Kylie initially responds to the antidepressant you have started. However when you review her at 5 weeks postpartum she presents as tearful, sad and overwhelmed. She has told her partner to leave as she was sick of his drinking. Her baby boy is waking frequently at night. She has brought both her children with her and you notice that her 3 year old looks sad and is clinging to Kylie. Kylie tells you she is exhausted, not sleeping and feels at breaking point with the children.

Question 5.2 (8 marks)

Discuss your approach at this point, focussing on assessing the risks and community-based non-medication options you would consider.

MODIFIED ESSAY QUESTION 6 (12 marks)

You work on a Liaison team and are called to the Emergency Department (ED) to assess Yasmin, a 25 year old Iranian woman brought to hospital from a Women's Refuge, where she had been for 24 hours. She has two children aged 8 and 11, who have remained at the Refuge in the care of the staff. ED staff tell you that she has been badly beaten and has many bruises, and evidence of old fractures to facial bones.

They have requested a consult as Yasmin has been largely mute since arrival at ED, often flinching away from staff, especially male staff. At times if left unattended she has gesticulated and muttered to herself and they feel she is confused and disorientated.

The Refuge staff member accompanying her was not able to communicate with her while at ED and has had to return to the Refuge. Before leaving she told ED staff that a few hours ago Yasmin's speech and grasp of English seemed reasonable and they had not needed an interpreter. She described Yasmin as initially caring well for her children then becoming more withdrawn and complaining of a headache in the hours before coming to hospital, seeming confused, frightened and at times retching.

Refuge staff had been unable to obtain much personal history except that she is married and afraid to return to her husband's household as she says he beats her. On glancing into the cubicle you see Yasmin is huddled on a gurney wearing a hospital gown, with her hands over her eyes. A uniformed male security watch is sitting beside the door to her room.

Question 6.1 (6 marks)

Discuss the practical and ethical issues involved in using an Iranian interpreter in your assessment of Yasmin.

Question 6.2 (6 marks)

Outline (list and justify) the three most important differential diagnoses to consider in Yasmin's case.

end of MEQs