

CANDIDATES INSTRUCTIONS

You are seeing Ms Maxwell, a 42 year old woman, who delivered a stillborn baby 1 day ago. This is her first pregnancy and she is very distressed and confused by the death of her baby. She had been admitted at 38 weeks with reduced fetal movements, which continued to decrease in frequency over three days. A stillborn girl was delivered yesterday by induction weighing 2.4kg.

Nurses have reported that Ms Maxwell has refused to eat or see any relatives since the death of her baby. Her partner is not here at the moment but is very angry about the medical care she has received.

Your task is to answer any questions Ms Maxwell may have and discuss further plans for her baby's funeral.

ACTOR'S INSTRUCTIONS

- Express how confused and upset you are by the death of your baby
- Vent your feelings only when asked – you are very emotional. You have been wanting a baby for over 15 years and this was your first successful pregnancy with a new partner. You are now very concerned about whether you will ever have a child again. You also blame yourself because you had been very stressed in the days before your baby's death because you had been fighting with your partner.
- You should express your concern over your partner's behaviour and explain why you don't want to see your family. Explain that he is saying he wants to 'sue the doctors'.
- When questioned about seeing your baby you become very upset and don't know if it is a good idea. You ask lots of questions about this?
- You do not like the idea of a post-mortem and are even more overwhelmed by the prospect of arranging a funeral.

MARKING SCHEME

Interaction with the patient: (6marks)

- Appropriate introduction – name, DOB
- Sympathetic approach, dealing with emotional responses well
- Ensures she does not blame herself
- Appropriate eye contact and positioning
- Leaving time to listen

- Offers encouragement and options for help – counselling e.g Stillbirth and Neonatal Deaths Society

Elucidating the patient's ideas, concerns and expectations (5marks)

- Determines how the patient is feeling both physically and emotionally
- Realises the patient is concerned about not having another child
- Realises the patient's concern about causing the death of her child due to stress
- Determines the patient's concern about her partner's behaviour
- Realises the patient is not ready to discuss funeral plans/post-mortem at this time

Explanation & Advice (5marks)

- Encourages the patient to eat well and to talk to people – relatives and counsellors
- Offers to allow the patient to see her baby and answers the questions about this effectively
- Discusses post-mortem and funeral plans sensitively
- Discusses breast milk suppression and a follow-up appointment
- Offers to speak to her partner and also to return to discuss plans for a funeral later

General fluency, sympathy and rapport (4marks)

TOTAL – 20 MARKS

Author: Kerrie J Stevenson (University of Edinburgh)

Sources: Royal College of Obstetrics and Gynaecology Undergraduate Curriculum

https://www.rcog.org.uk/globalassets/documents/careers-and-training/undergraduate-curriculum/undergraduatecurriculum_og.pdf

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