

# Psychiatry Logbook 2011

Student Name \_\_\_\_\_ Student ID \_\_\_\_\_ Unit \_\_\_\_\_

## Checklist of Tasks

1. Course Requirements ( a – f submitted at the end of the run)
  - a. Logbook, signed by the supervisor ( see page 5 of logbook for instructions)
  - b. Case histories
  - c. Clinical Supervisor Form
  - d. CAT marks
  - e. Self Care Project essay (optional)
  - f. Course Feedback Form
2. Have I practiced with the Psychiatry Assessment Teaching Software (best done on the 2<sup>nd</sup> week)?  
Yes                      No
3. Have I discussed my clinical performance with my supervisor on the 3<sup>rd</sup> week of the run?  
Yes                      No
4. Have I presented my CAT to my team and or my consultant (best done 5<sup>th</sup> or 6<sup>th</sup> week)?  
Yes                      No
5. Case Histories
  - a. Have I followed the instructions on how to write case histories in the Student Notes?  
Yes                      No
  - b. Have I discussed/ reviewed it with my consultant/ registrar?  
Yes                      No
6. On Call nights  
Date \_\_\_\_\_ Name of Registrar \_\_\_\_\_ Location \_\_\_\_\_  
Date \_\_\_\_\_ Name of Registrar \_\_\_\_\_ Location \_\_\_\_\_
7. Self Care Project (optional)
  - a. Am I doing the recommended tasks for my Self Care Project? ( logs in diary, readings)  
Yes                      No
8. Patient Confidentiality
  - a. Have I changed the initials, identifying information of my patients for the case history and log book? Yes                      No
  - b. Have I deleted all electronic and hard copy data pertaining to my patients at the end of the run? Yes                      No

Signature \_\_\_\_\_ Date \_\_\_\_\_

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**NOTE: TO BE SIGNED AT THE END OF THE RUN**

STATEMENT OF AUTHENTICITY AND SUPERVISION

I declare that the work completed in this logbook and case histories have been from my own clinical observations and experiences. The discussion is original and has not been copied from another source. Where I have quoted from another source this is clearly referenced to the original document (i.e. medical file, journal article, book etc). I have also discussed and reviewed this work with my supervisor.

Student Name \_\_\_\_\_

Student Signature \_\_\_\_\_

Date: \_\_\_\_\_

Student ID \_\_\_\_\_

I have reviewed this logbook and case histories to the best of my knowledge it is a reflection of this medical students' work.

Supervisor Signature \_\_\_\_\_

Date: \_\_\_\_\_

## Overview of the Logbook

- 1) The Logbook is a self-directed guide that provides a framework on how to approach different clinical scenarios with respect to
  - a) Diagnosis and Differential diagnosis
  - b) Safety management
  - c) Bio psychosocial interventions
  - d) Family and cultural issues
  - e) Impact of illness on patient and family
  
- 2) To help you answer the 'Comments' section for certain tasks, it helps to refer to your lecture notes or other standard texts in Psychiatry. The aim of this section is to facilitate critical thinking and self reflection. Please see "References" list in your student notes.
  
- 3) Expectations on the Student
  - a) All tasks are accomplished
  - b) If you are having difficulty finding a particular case/task, ask the assistance of your consultant, registrar or local 4<sup>th</sup> year coordinator
  - c) **Failure to fulfil a clinical task should be justified in writing and (countersigned) dated by the consultant; this will be assessed by the coordinator if acceptable.**
  - d) Entries on the logbook should be based on actual contact with a patient. Contact can be in a form of a new assessment or a follow up of a patient. Do not use a patient/case in more than one task.
  - e) Mental Status reporting **should be complete**. If a particular finding (i.e. orientation) is not assessed, please enter as "not assessed".
  - f) Your comments on the cases are scrutinized. We want you to reflect on cases and not just agree all the time that "diagnosis and management are appropriate".
  - g) Entries in logbook should be legible otherwise it will be returned for rewriting.
  - h) If you want an electronic copy of the Logbook for ease of entry, please contact Saira Khan (s.khan@auckland.ac.nz).
  
- 4) Marking is PASS or FAIL. Failures can result from the following
  - a) Fictitious entries
  - b) Incomplete tasks without justification from the supervising consultant/registrar
  - c) Incomplete entries
  - d) Lack of self reflection
  - e) Poor understanding of concepts (i.e. ethical issues, barriers to care).

## TASKS

### 1. A person with a major depressive episode

Goals:

- 1.To interview a person with a major depressive episode
- 2.To identify the signs and symptoms of depression
- 3.To appreciate the multiple components of management

#### Demographic data and setting

Initials: \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Setting: \_\_\_\_\_

Date of patient contact: \_\_\_\_\_ Seen with Dr. \_\_\_\_\_

What are the signs and symptoms of depression that this person presents or presented with?

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Describe your current mental state examination. (Please include all the headings)

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List your main diagnosis and differential diagnosis. What is your basis? (Refer To reference and or DSM IV)

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What are the vulnerability factors that may have predisposed this person to depression?

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What is the impact of depression on this person's life?

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Management

How have safety issues been assessed and managed in this case?

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What are the biological interventions that have been used? What were the effects? (positive and negative effects)

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Please describe the psychological strategies or interventions that have been used.

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What are the cultural and social factors that need addressing in this case?

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Comments: Would you have diagnosed or managed this case differently? Why or why not?

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**A person with an alcohol or drug abuse or dependence disorder**

Goals:

1. To interview a person with an alcohol or drug disorder
2. To differentiate between abuse and dependence (DSM-IV definitions)
3. To develop a knowledge of different models of prevention and treatment
4. To attend a local Alcoholics Anonymous open group. Check alcoholics-anonymous.org.nz for meeting and locations. Make sure it is an "open" group. In Auckland, the 9AM Saturday meetings in Grey Lynn are recommended. Maximum of 4 students per meeting.

Demographic data and setting:

Initials: \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Setting: \_\_\_\_\_

Date of patient contact: \_\_\_\_\_ Seen with Dr. \_\_\_\_\_

What are the signs or symptoms of abuse or dependence that this person presents or presented with?

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Please specify the drug or substance, amount used, when the substance was last used, frequency and duration of use.

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Describe your current mental state examination (Please include all the headings)

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What are the vulnerability factors that may have predisposed this person to this disorder?

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What is the impact of the disorder on this person's life?

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## Management

What is the management that this person has received or is receiving for their disorder?

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Reflections/thoughts on the Alcoholics and Anonymous group you have attended.

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### **3. A person who has a diagnosis of schizophrenia**

Goals:

1. To interview a person who has schizophrenia
2. To learn about positive and negative symptoms of schizophrenia

3. To understand the role of rehabilitation in working with someone who has a diagnosis of schizophrenia

Demographic data and setting:

Initials: \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Setting: \_\_\_\_\_

Date of patient contact: \_\_\_\_\_ Seen with Dr. \_\_\_\_\_

What are the signs and symptoms of schizophrenia that this person presents/presented with?

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Describe your current mental state examination (Please include all the headings)

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Discuss two differential diagnosis that may be considered for this person. What is your basis?

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What was the age of onset that this person developed schizophrenia?

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What is the impact of the illness on this person's life?

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Management

Are there safety issues that need to be addressed?

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What are the pharmacological strategies that are being used? What are the therapeutic effects?

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Does the person have side effects from this?

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What are the rehabilitation issues that face this person?

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What are the family and cultural issues of importance?

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Comments: Would you have diagnosed or managed this case differently? Why or why not?

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**4. A person who has a diagnosis of bipolar affective disorder**

Goals:

1. To interview a person with bipolar affective disorder
2. To understand the symptoms and signs of mania and depression
3. To appreciate the different strategies between acute and prophylactic treatment

Demographic data and setting:

Initials: \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Setting: \_\_\_\_\_

Date of patient contact: \_\_\_\_\_ Seen with Dr. \_\_\_\_\_

What are the signs and symptoms of mood disorder that the person has now or if euthymic what do they describe as happening to them when unwell?

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Describe your current mental state examination (Please include all the headings)

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What are other differential diagnoses that could be considered? What is your basis?

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Are there vulnerability factors that predispose this person to having a mood disorder?

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What is the impact of the disorder on this person's life?

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Management

Are there safety issues that need to be addressed in this person's management?

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What are the biological strategies that have been used acutely and prophylactically?

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What is the role of psycho education for this person and their family?

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Comments: Would you have diagnosed or managed this case differently?  
Why or why not?

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**5.A person with a diagnosis of a personality disorder**

Goals:

1. To understand the difference between a dimensional and categorical conceptualization of personality
2. To think about whether the diagnosis of a personality disorder has influenced the type of health care the individual has received
3. To be aware of specific therapies for commonly diagnosed personality disorders such as borderline disorder
4. Watch Youtube.com - "What borderline personality disorder feels like" by a perfectingangel.

Demographic data and setting:

Initials: \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Setting: \_\_\_\_\_

Date of patient contact: \_\_\_\_\_ Seen with Dr. \_\_\_\_\_

What are the symptoms and signs that this person presents/presented with?

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Describe your current mental state exam (Please include all the headings)

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Are there any other co-morbid conditions present?

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What is the main diagnosis for this person? What is your basis? Discuss two other differential diagnosis that are relevant of this person. What is your basis?

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How does this person understand their condition?

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What are the vulnerabilities that may have predisposed them to personality difficulties?

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Management

Are there safety issues that need consideration?

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What is the treatment that the person is currently receiving?

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Does this treatment use psychological strategies for the person's personality difficulties? If yes, please describe. If none, Why?

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What are the social and cultural factors that should be considered?

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Comments: Would you have diagnosed or managed this case differently?  
Why or why not?

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**6. A person with a diagnosis of an anxiety disorder**

Goals:

1. To interview a person with an anxiety disorder
2. To know the differences between the anxiety disorders
3. To be familiar with a range of treatment strategies for anxiety disorders
4. Watch on Youtube. "Anxiety Disorders: Primary care Management", UC Television.

Demographic data and setting:

Initials: \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Setting: \_\_\_\_\_

Date of patient contact: \_\_\_\_\_ Seen with Dr. \_\_\_\_\_

What are the anxiety symptoms and signs that this person presents or presented with?

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Describe your current mental state examination (Please include all the headings)

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What are differential diagnoses to consider in this person? What is your basis?

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Are there vulnerability factors that may have predisposed this person to having an anxiety disorder?

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What is the impact of this disorder on their life?

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Management

What are the biological strategies that are being used for this person? What are the effects?

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Describe the psychological treatments or strategies used for this person?

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What are the social and cultural factors that need to be considered?

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Comments: Would you have diagnosed or managed this case differently?  
Why or why not?

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### **7. A Person with a diagnosis of Dementia or Delirium**

Goals:

1. To interview a person who has either dementia or delirium
2. To identify the signs and symptoms of these conditions
3. To understand basic management principles in both conditions
4. Watch: Youtube.com "Going Home (A short film on Dementia)" by HP Bsg.

Demographic data and setting:

Initials: \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Setting: \_\_\_\_\_

Date of patient contact: \_\_\_\_\_ Seen with Dr. \_\_\_\_\_

What are the signs and symptoms of dementia or delirium that this person presents or presented with?

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Describe your current mental state examination. Please include a Mini Mental State exam. (Please include all the headings)

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List two differential diagnosis that apply to this person. Please state your basis.

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Management

How have safety issues been managed in this case?

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What investigations or assessments have been performed to clarify diagnosis?

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What biological strategies have been used?

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What are the psychosocial needs of this person?

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Comments: Would you have diagnosed or managed this case differently?  
Why or why not?

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**8. A child or adolescent with a mental disorder (could be a video session observed during Child & Adolescent workshop)**

Goals:

1. To participate in an interview with a young person and their family presenting for mental health care
2. To understand the impact of the development stage of the young person on the presentation
3. To understand the presentation and management within a family context

Demographic data and setting:

Initials: \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Setting: \_\_\_\_\_

Date of patient contact: \_\_\_\_\_ Seen with Dr. \_\_\_\_\_

What are the symptoms and signs that this person presents or presented with?

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How is this person's developmental stage relevant to the presentation?

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Describe your current mental state examination (Please include all the headings)

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How has the family been involved in the assessment?

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Management

How has this person's developmental stage affected management?

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Are any biological interventions appropriate?

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How have the psychosocial needs of the individual and family been addressed?

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Comments: Would you have diagnosed or managed this case differently?  
Why or why not?

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**9. Attending electroconvulsive therapy (highly recommended but occasionally unavailable )**

Please view: <http://www.ted.com/index.php/talks/view/id/189>  
A surgeon's own experience of ECT.

Demographic data and setting:

Initials: \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Setting: \_\_\_\_\_

Date of patient contact: \_\_\_\_\_ Seen with Dr. \_\_\_\_\_

What are the indications for this person being treated with ECT?

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In what other conditions is ECT indicated?

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What are the contraindications for ECT?

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What would you say to patients or family members who ask you about the use of ECT?

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**10. Participating in an assessment with a Maori whanau and tangata whaiora or Participating in a family meeting**

In this task, we expect the student to attend a meeting with a Whanau/Tangata Whaiora and or a family meeting.

Demographic data and setting:

Initials: \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Setting: \_\_\_\_\_

Date of patient contact: \_\_\_\_\_ Seen with Dr. \_\_\_\_\_

What is the person's iwi and hapu? (If pertinent)

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What are the circumstances leading to the assessment?

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Whanau

How does the whanau and tangata whaiora understand the situation?

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What do they believe will be helpful in this situation?

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How do the whanau, tangata whaiora and clinical team work together?

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Te Taha Wairua

What are the beliefs, lifestyle patterns and customs of the whanau and tangata whaiora?

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How can these be included in management?

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Are there any differences between your culture and spirituality and that of the whanau and tangata whaiora?

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How will you respond to these differences?

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Treatment

What management plan was developed?

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How did this incorporate whanau and hapu strengths?

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Discuss the importance of a cultural understanding in providing health care to whanau and tangata whaiora?

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Participating in a family meeting

Describe the setting and participants in the meeting

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What were the identified issues from the family's perspective and the patient's perspective?

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How were these issues dealt with?

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What is the importance of clinicians communicating with the families of people with mental illness?

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**11. Participating after hours "on call" with a psychiatric registrar**

This may include participating in a variety of psychiatric assessments however the assessment of suicidality and dangerousness to others are core competencies that any medical practitioner must have. It is useful to have these experiences in an on call setting with a registrar, as the decisions that have to be made are more "acute". They are also situations that are experienced by house officers in emergency department.

Date: \_\_\_\_\_

Time Call Started: \_\_\_\_\_

Time Call Ended: \_\_\_\_\_

On Call with Dr. \_\_\_\_\_

Describe the urgent case:

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What were the safety issues? How were the issues addressed?

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Describe the Mental State of the Patient. (Please include all the headings)

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What were the diagnosis and differential diagnosis? What is your basis?

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What was the management plan regarding the urgent issues?

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How would you have managed the case differently?

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**12. Suicidal or Homicidal Patient**

Initials: \_\_\_\_\_ Age : \_\_\_\_\_ Race : \_\_\_\_\_ Setting: \_\_\_\_\_

Date of patient contact: \_\_\_\_\_ Seen with Dr. \_\_\_\_\_

What were the factors leading to the assessment?

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How serious was the ideation, plan or intent? Please elaborate.

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Is there a past history of self harm or harm to others? Please describe this.

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Is there a pattern regarding the events leading to suicide/homicide attempt?

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Is there a family history of suicide/ homicide attempts?

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Does the person have a current psychiatric disorder? Which one? What is your basis?

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Is there a personality disorder? If yes, please discuss your basis.

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What degree of social support does the person have?

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For the homicidal/dangerous patient, is there a specific victim? Is the victim aware of the risk? If the victim is not aware of the risk, why?

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**13. Barriers to care (REQUIRED TASK)**

In psychiatry prejudice and ignorance about people who have mental illness adversely affect their ability to access care and their process of recovery. Relatives, health professionals and the community at large can all demonstrate prejudicial attitudes. This task challenges you to identify a person whose care has been influenced by negative attitudes.

Date of patient contact: \_\_\_\_\_ Seen with Dr. \_\_\_\_\_

Describe the demographic and clinical presentation of the person

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What were the prejudicial attitudes that you observed?

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How did this affect the person's care?

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How could this situation be changed to enhance the welfare and dignity of the person involved?

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**14. Ethical Issues (REQUIRED TASK)**

In all medical practice ethical decision making challenges clinicians. In psychiatry the ethical issues involving autonomy, beneficence, coercion, confidentiality, justice and others are prominent in daily practice.

Describe an ethical dilemma that you observed during your clinical experience

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What were the different points of view expressed?

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What were ethical principles that could have informed decision-making?

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What was the outcome and how did you feel about this?

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**15. Multidisciplinary Teams**

Working as a doctor involves utilising the skills and opinions of other health professionals to optimise patient care. Commonly psychiatric teams include a number of health professionals.

Who are the different health professionals that you have talked to during your clinical attachment? What were their roles within the team?

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## **16. Mental Health Act**

Serious mental illness may affect our ability to make sound judgments. This may limit the person's ability to engage in effective treatment of their illness. Untreated mental illness may result in dangerousness to self or others or seriously diminished ability to self-care. During your psychiatry attachment it is important for you to talk to your registrar and consultant about how they use the mental health act.

How does the New Zealand Mental Health Act define "mental disorder"?

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Describe the circumstances of a person you talked to who is under the Mental Health Act.

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What were their views on this?

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What were their clinicians views on its usefulness and limitations regarding the treatment of that person?

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What are your views about the case?

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Date of patient contact: \_\_\_\_\_

Seen with Dr. \_\_\_\_\_

### **17. Neurobiology of Psychiatric Illnesses**

What are the biological findings ( i.e. molecular genetics, neuroimaging, neurochemistry ) that attempt to explain the clinical presentation of Schizophrenia? Please use the latest references. Please cite your references. Journal articles are preferred rather than textbooks.

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What are the biological findings ( i.e. molecular genetics, neuroimaging, neurochemistry ) that attempt to explain the clinical presentation of OCD? Please use the latest references. Please cite your references. Journal articles are preferred rather than textbooks.

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What are the biological findings ( i.e. molecular genetics, neuroimaging, neurochemistry ) that attempt to explain the clinical presentation of mood disorders ? Please use the latest references. Please cite your references. Journal articles are preferred rather than textbooks.

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What are the biological findings (i.e. molecular genetics, neuroimaging Neurochemistry) that attempt to explain the clinical presentation of Dementia? Please use the latest references. Please cite your references. Journal articles are preferred rather than textbooks.

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Please comment on this journal article: Gabbard GO. **Mind, brain, and personality disorders.** [Journal Article. Review] *American Journal of Psychiatry.* 162(4):648-55, 2005 Apr.

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