

Breaking bad news

Debbie Turlington, 29, received 13 stitches to her ear four days ago following a dog bite. She has now presented to A&E at a different hospital because the wound has become increasingly tender. She has been told that the wound will need cleaning and has been referred to the Ear, Nose and Throat department for treatment. Ms Smithson (ENT specialist) arrives to interview the patient.

Pre-watching

- 1a** Read the synopsis above and draw up a list of points you might need to consider when interviewing this patient.
- 1b** Could there be any problems with the wound that the patient is not expecting?

Global observations

- 2a** Watch the whole clip and choose one of the following tasks:
- EITHER decide to what extent Ms Smithson reassures the patient and shows empathy through appropriate voice management (pausing / speed of delivery / tone) and body language.
 - OR number the stages of the SPIKES model employed by Ms Smithson as you hear them. Which does she not cover?
- ☐ Setting
- ☐ Perception
- ☐ Invitation
- ☐ Knowledge
- ☐ Emotion
- ☐ Strategy

- 2b** Compare your findings with the rest of the group.
- 2c** Think back to this quote from Unit 9: *Bad news is any information that changes a person's future in a negative way.* To what extent is Debbie's life likely to change? Explain why.

Watching for detail

Part 1: from Start to ... *painkillers to sort out the pain.* (00:00>02:50)

- 3a** Watch Part 1 of the clip and pause on ... *come down and see you* (00:31). In pairs, look at the scene and discuss the body language employed by each of the people.

- 3b** What language does the patient use to describe the degree of pain she is in? Why would this make the news more difficult to deliver?

Part 2: from *Alright, so ... to ... a bit more treatment than that.* (02:50>03:08)

- 4a** Watch Part 2 of the clip and complete this dialogue.

Ms Smithson: Alright, so what are _____
about what's _____ on?

Patient: I don't know. I guess it just needs re-stitching and cleaning up a bit, probably.

Ms Smithson: Yeah, so that's what _____
_____?

Patient: Yeah.

Ms Smithson: OK, well I'm really sorry to have to _____
it's _____
_____ a bit more treatment than that.

- 4b** Looking at the exchange above, analyse the way Ms Smithson checks Debbie's perception of the situation and how she prepares her before breaking the bad news.

- 4c** Look at the way both the patient and Ms Smithson use the quantifier *a bit*. Why do they do this?

Part 3: from ... *a bit more treatment than that* to ... *few phone calls? Yeah, yeah.* (03:08>05:30)

- 5a** Watch Part 3 of the clip and circle the correct responses (YES or NO).

Ms Smithson

- 1** invites the patient to indicate how much information (*I* in the SPIKES model) she would like. YES/NO
- 2** explains the procedure in a patronising manner. YES/NO
- 3** considers the patient's level of anxiety. YES / NO
- 4** uses validating language (language to reassure the patient that what they are feeling is normal) to confirm the patient's feelings. YES/NO

- 5b** Watch Part 3 again and find examples to support your answers to Exercise 5a.

- 5c** Write a question that Ms Smithson could have asked for the *I – information* stage (remember to soften your question).
- 5d** What evidence is there that Ms Smithson is possibly trying to minimise the gravity of the situation? Watch Part 3 again and decide if you agree or disagree with her approach.
- 5e** How might Ms Smithson improve the final stage of the SPIKES model: *S – summary*? Write a short summary. Use a slash (/) to indicate a pause to ensure the summary is delivered in manageable chunks. Hand it to a partner to deliver. Feed back to your partner on his/her delivery.
- Part 4:** from ... *few phone calls? Yeah, yeah* to ... *lesson for Jo*. (05:30>06:52)
- 6a** Watch Part 4 of the clip and note any language that would not have been used with the patient. Why?
- 6b** Transcribe the language Ms Smithson uses to signify to the patient the beginning and end of the dialogue with her student, and then discuss the following questions.
- 1 What purpose does this serve?
 - 2 Why did Ms Smithson choose this point to discuss the wound with the student rather than having this discussion as soon as they entered the room?

Part 5: from ... *lesson for Jo* to End. (06:52>07:36)

- 7a** Watch Part 5 of the clip. In your experience, or in your country, would the consultant be concerned with the practical details of a patient's admission into hospital?

Post-watching

- 8** Imagine you have just been shadowing Ms Smithson with Jo. What would *you* take away from this experience?

Over to you

You are faced with a similar situation. This time the patient presents three days later and the cellulitis has spread considerably; it may be difficult to save the patient's ear. Choose one of the scenarios below. Compile some appropriate language/questions for each stage of the SPIKES model and devise a checklist for an observer to enable him/her to give constructive feedback.

Scenario 1: Role-play the dialogue with the patient, explaining the situation.

Scenario 2: The patient has had the operation and has been left with cauliflower ear (a deformity of the outer ear). Role-play a dialogue with the patient's partner over the phone, giving the news.