

Skills practice scenario 2 – COPD (also video scenario)

Remember the 'patient' and 'professional' scripts need to be presented on separate folded sheets for the trio group work. It doesn't matter if details are changed, e.g. gender or age of 'patient' or title of 'professional', if that works better for the group.

'Patient' – Mr William Nichol

You're 68 years old with severe chest problems. You were given early retirement on health grounds, you'd had 40 years of factory work in a dusty environment. Now you have increasing breathlessness and can do less and less – you can't walk more than 15 yards and you've had to give up your garden. You spend most of the day in a chair – you've an oxygen concentrator at home – supposed to use it for 15+ hours – but you're not sure it does much good. Your appetite is poor and you're uncomfortable – it's not really pain – and weary all the time. You recently came home from the third hospital stay this winter, you'd had another bad spell. After each admission, you get a bit better but you know your condition is steadily getting worse. Now they've given you even more drugs to take – but you're not sure they're really helping.

You hated hospital, it was noisy; you couldn't sleep with the old chap in the next-door bed calling out all night. The nurses were kind but rushed off their feet. You had that non-invasive ventilation again and hated it. You've decided that you won't go into hospital again but you don't know what the alternatives are. If you refuse does that rule out all help? Will your doctor be angry or consider you an awkward patient? The District Nurse has mentioned a DS1500 form – you're not sure what this is. One of your mates has offered to take you to the football match next Saturday – you'd love to go – you've followed 'Town' all your life – it might be your last chance.

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'Professional' – Dr Weaver

Your District Nurse asks you to make a home visit to see Mr Nichol after his discharge from what sounds like a pretty stormy hospital stay. It will be useful to review his medications and see how he is getting on. He's had a pretty rotten winter, with three admissions since the autumn. You know how he hates the limitations his breathlessness place on him. Discharged on a lot of medication – for heart, chest, cholesterol, depression.

