



Faculty of Forensic & Legal Medicine

General Forensic Medicine

Infection after bite (PEPSE)

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It is 22:00

You are the Forensic Practitioner on duty in the custody block and have been asked to examine PC James Stevens. During an arrest, a known intravenous drug user spat on the police officer's cheek and bit his forearm. This was 2 hours ago. The assailant has been taken to the local Emergency Department for injuries received prior to the arrest.

The police officer is very worried about contracting HIV.

Tasks:

- Please take a brief relevant history of PC Stevens's injury.
- Examine the injury (no need to measure or record your findings);
- Discuss the risk of infection and advise on your immediate management plan.

The candidate has been given the following instructions:

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Tasks:

- Please take a brief relevant history of PC Stevens's injury.
- Examine the injury (no need to measure or record your findings);
- Discuss the risk of infection and advise on your immediate management plan.

Construct: This station assesses candidates' ability to take a focused history from a police officer who has been bitten by an IV drug user, examine the injury and communicate a management plan to PC Stevens.

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Examiner Mark Sheet

A=Outstanding, B=Good, C=Adequate, D= Marginal, E = Inadequate

1. Initial approach to the officer	A	B	C	D	E
2. Information gathering: Clinical content	A	B	C	D	E
3. Information gathering: Communication	A	B	C	D	E
4. Physical Examination	A	B	C	D	E
5. Management	A	B	C	D	E
6. Explanation: communication	A	B	C	D	E
7. Rapport and Professionalism	A	B	C	D	E
8. SP Mark	A	B	C	D	E

GLOBAL RATING	1	2	3	4	5	6
	CLEAR FAIL	BORDERLINE FAIL	BORDERLINE PASS	CLEAR PASS	VERY GOOD	EXCELLENT

Examiner feedback to candidate

1. Initial approach

- Candidates should make an appropriate introduction to the police officer, and check their name. They should ask for consent to examine.

2. Information gathering: clinical content

- Candidates should check for the detail of what happened when he was injured and in particular if the wound has been washed yet. Then ask about the PC's tetanus and Hepatitis B status (including antibody checks).
- The candidate should also ask about the known IVDU status of the detainee and ask about blood testing of him.

3. Information gathering: communication

- Candidates should use an appropriate mix of open and closed questions and avoid asking leading questions (assuming the answer) and multiple questions. Language should be clear and jargon either avoided or explained.
- They should demonstrate active listening, picking up cues, responding appropriately to the patient's replies and not repeating questions.
- Good candidates should be organised and systematic in their approach.

4. Physical Examination

- Candidate should examine the wound using gloves and check for depth of injury, as well as check for complications.

5. Management

- Candidates should explain importance of washing arm and face immediately
- Candidates should explain that the degree of HIV risk is very low but there is a need for baseline testing and a 3 month repeat. This requires immediate referral to Sexual Health for HIV assessment for testing and the need for PEPSE.
- They should explain what PEP entails, and the need for a tetanus booster. They should also discuss relative risks of Hep B and C including Hep B immunisation, explaining that this will also be assessed at Sexual Health.
- They should discuss transmission risks and the use of barrier contraception until the situation is resolved.
- Candidates should demonstrate a systematic and organised approach to explaining these points.

6. Explanation: communication

- Candidates should give Information in a clear and well paced manner. The information should be explained in manageable amounts encouraging some dialogue with the police officer. Medical terms should be avoided or explained – candidates should adapt their explanations appropriately.
- Candidates should check that the officer has understood the main points (particularly proposed treatment) and the plan about what he needs to do next. They should check whether he has any final questions.

6. Rapport and professionalism

- Candidates should show interest in and respect for the person. They should demonstrate an understanding of the anxiety that this situation will induce in the officer.
- They should use appropriate non-verbal communication (eye contact, appropriate use of touch, maintains appropriate distance from the patient).

7. SP Mark

- I thought the candidate understood how I was feeling. I felt in safe hands. The candidate seemed careful, understanding and thorough.

- You are PC 149 James Stevens and you are aged 30. You are married with two young children.

This evening

- Earlier this evening you were called to a squat after reports of a fight. When you went into the building to break things up, you were spat on and bitten on your right forearm by one of the males. You have washed and dried your face and wound. You didn't know the male but one of your colleagues did and told you that he was a known intravenous drug user. You can give this information freely at the start to the candidate.
- You are now back at the station and are going to be seen by the Forensic Practitioner who will examine your arm. You have washed and dried your face and arm after it had bled.
- The candidate may ask whether you know if the assailant is HIV positive. You say you don't know, but he is a known IV drug user.
- If the candidate assumes the assailant is HIV positive, act shocked and ask the candidate how they know that.
- You have very little understanding about medical issues. You have never really had anything wrong with you other than colds and things. You are not allergic to anything. You started hepatitis B vaccination course a year ago but failed to complete it or have the antibody blood test. (The vaccine is not compulsory for police officers, but recommended).
- You cannot remember having a tetanus booster in the past.

Concerns

- You are extremely worried that you might now have caught HIV. You have two young children (can they catch anything? can you kiss them?). You are also worried about having intercourse as you and your wife are trying for another baby.

Questions for you to ask

- You have heard about immediate testing for HIV and ask if you can have that. Say at an appropriate point **"Why can't you just test him?"**
- Ask **"what sort of risk am I at? Can anything can be done to reduce risk? What about sex with my wife?"**
- When the candidate says to refer to hospital, say **"I can't go today, I'm on duty, but might be able to get there tomorrow. What's the rush?"**

You will be asked to mark the following domain using the scale:

A=Outstanding, B=Good, C=Adequate, D= Marginal, E = Inadequate

- I thought the candidate understood how I was feeling. I felt in safe hands. The candidate seemed careful, understanding and thorough.

Moulage: bite makeup on right forearm of PC Stevens with broken skin and fresh blood.