

Pre-Health Advising

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Handouts from Multiple Mini Interview Practice Session

You are a genetic counselor. One of your clients, Linda, had a child with a genetic defect that has a high recurrence risk, meaning that subsequent pregnancies have a high chance of being affected by the same defect. You recommended genetic testing of Linda, her husband, and their son to find out more about the disease, to which everyone agreed. The result showed that neither Linda nor her husband carry the mutation. The boy inherited the mutation on a paternal chromosome that did not come from Linda's husband. In other words, the boy's biological father is someone else, who may be unaware that he carries the mutation. You suspect that neither Linda nor her husband is aware of his non-paternity. How would you disclose the results of this genetic analysis to Linda and her family? What principles and who do you have to take into consideration in this case?

You are a genetic counselor. One of your clients, Linda, had a child with a genetic defect that has a high recurrence risk, meaning that subsequent pregnancies have a high chance of being affected by the same defect. You suggested genetic testing of Linda, her husband, and their son to find out more about the disease, to which everyone agreed. The result showed that neither Linda nor her husband carry the mutation. The boy inherited the mutation on a paternal chromosome that did not come from Linda's husband. In other words, the boy's biological father is someone else, who may be unaware that he carries the mutation. You suspect that neither Linda nor her husband is aware of his non-paternity. How would you disclose the results of this genetic analysis to Linda and her family? What principles and who do you have to take into consideration in this case?

$\sqrt{=}$ Yes	Evaluation Rubric	Comments:
	Did the candidate ask clarifying questions?	
	Did the candidate consider the issue from multiple perspectives, identifying the various stakeholders?	
	Candidate may bring up considerations such as:	
	Linda and her husband should know the truth about their low risk of future occurrences of that defect in future pregnancies	
	• The biological father of the child would be best served by being informed of his genetic issue so that he can make an educated choice about fathering additional children who would be likely to suffer from the same problem. (Not telling him could open the door to the suffering of future children.)	
	• It is not the practitioner's place to divulge to the husband that his wife was unfaithful.	
	The husband may know that the wife was unfaithful.	
	The child would benefit from knowing his biological father's medical history	
	Does the candidate identify some of the ethical principles that must be taken into consideration in this case?	
	Autonomy of individuals to make their own decisions about whether or not to divulge personal information (or to receive troubling information)	
	Justice/Autonomy: Every individual involved should be able to make informed decisions that impact their health	
	Nonmaleficence: Divulging painful personal information could have a negative impact on the relationship between Linda and her husband	
	Beneficence: Responsibility to contribute to the welfare of as-yet-unborn children and to allow the biological father to make informed choices in the future	
	Did the candidate identify multiple possible approaches to responding to this situation?	
	Did the candidate provide justification for their suggested course of action?	
	Did the candidate express an open, non-judgmental attitude toward the situation?	
	Did the answer indicate that the candidate is comfortable grappling with difficult topics?	

You are an emergency room physician at a local hospital. A patient comes in requesting painkillers for his back. Upon reviewing his file, you realize that he frequently comes to the hospital requesting painkillers and he has already capped his prescription for the month. Upon examination, you notice no new injuries to indicate an increase in painkillers. You politely tell patient that you will not increase his dosage or re-fill out another prescription for him. He tells you that he will go and inject himself with heroin right now if he does not get the pain killers.

What do you say next? What do you do?

You are an emergency room physician at a local hospital. A patient comes in requesting painkillers for his back. Upon reviewing his file, you realize that he frequently comes to the hospital requesting painkillers and he has already capped his prescription for the month. Upon examination, you notice no new injuries to indicate an increase in painkillers. You politely tell patient that you will not increase his dosage or write another prescription for him. He tells you that he will go and inject himself with heroin right now if he does not get the painkillers. What do you say next? What do you do?

Additional prompts, if needed:

- What would you say if the patient immediately backtracked and said they were joking about getting heroin?
- How would you handle it if the patient is emphatic that he really does have a new injury?

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	 Did the candidate ask clarifying questions, such as the following? How long has the patient been dealing with back pain? Days, weeks, years? How debilitating is the pain, in terms of its impact on his regular activities? What makes the pain worse and what (other than taking painkillers) helps reduce the pain? Is the patient aware of lifestyle changes and alternative therapies (i.e., physical therapy, acupuncture, yoga) that could address his pain in a less-risky manner? Does he have a support system to help him with the physical and emotional challenges of his injury? If not, might he want a referral to other (potentially low-cost) clinics that could help him address and cope with the pain non-medically? 	
	 Did the candidate consider the issue from multiple perspectives, such as: The patient truly may have experienced a new injury that you missed when you conducted your physical exam. Chronic, intense pain can lead to depression and risk of suicide. The patient may be addicted to opioids and know it, but feel reluctant to find another solution. His experience may have been that the painkillers are the only intervention that have allowed him to resume his daily activities. He may fear the withdrawal process. If the patient is addicted to opioids, referral to an opioid addiction treatment center or harm reduction center can help him mitigate certain risks relevant to opioid use. 	
	 Did the candidate identify some of the ethical principles that must be taken into consideration in this case? Beneficence: If the patient is truly experiencing debilitating, chronic pain, it is the responsibility of the clinician to contribute to his welfare. Nonmaleficence: The use of opioid painkillers comes with significant risks, including the strong potential for addiction as well as unpleasant side effects. Did the candidate identify multiple possible approaches to responding to this situation? Did the candidate provide justification for their suggested course of 	
	action? Did the candidate express empathy for the patient, respect for the patient (even when confronted), and ability to remain non-judgmental? Did the answer indicate that the candidate is comfortable grappling with difficult topics?	

In countries with a nationalized healthcare system, in which citizens can access all healthcare services at no cost to them, the success of the system as a whole is contingent upon containing health care costs at a reasonable level. It has been well-established that, when patients do not directly pay for the service they receive, they tend to undervalue the actual cost of the service. Accordingly, health care systems in which the patients do not pay a feefor-service tend to have higher rates of patients accessing non-essential services and higher rates of no-shows for scheduled appointments.

One such country has proposed instituting a nominal, non-refundable fee (\$10 or so) to be charged directly to the patient at the time an appointment is scheduled. The idea is that this small fee would dissuade patients from seeking non-essential services and would encourage patients to show up for scheduled appointments.

Consider the broad implications of this policy for health and health care costs. For example, do you think this approach will reduce health care costs? If so, at what expense? Discuss this issue with the interviewer.

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	Did the candidate ask clarifying questions?	
	Did the candidate consider the issue from multiple perspectives, identifying the various stakeholders?	
	Candidate may bring up considerations such as:	
	 An access fee will disproportionately impact people who have low incomes and/or chronic health conditions that require frequent care. Even a nominal access fee could be enough to prevent the most vulnerable patients from seeking the care they truly need. 	
	• If patients avoid seeking early interventions due to the access fee, the system may become burdened with an overall <i>increase</i> in expenditures if a significant number of patients wait to seek medical care until their conditions significantly worsen and then become more costly to treat.	
	Does the candidate identify some of the ethical principles that must be taken into consideration in this case?	
	• Justice and nonmaleficence: If an access fee disproportionately dissuades low-income patients from seeking medically-indicated care, then it is not only causing harm, but also is causing harm only to a subset of patients.	
	 Justice: If an access fee reduces the number of no-shows and dissuades people from scheduling appointments that they do not need, then it improves the availability of appointments for everyone. 	
	Did the candidate express critical thinking skills when grappling with this issue? (Although not prompted, some candidates may bring up alternative solutions to the problem.)	
	Did the candidate provide justification for their suggested course of action?	
	Did the answer indicate that the candidate is comfortable grappling with difficult topics?	

Role Play Scenario:

• The person in the Interviewer role is to play the part of the best friend.

You have just learned that you have been accepted into physical therapy school on your first try. You have worked long and hard to make this dream become a reality, and you are ecstatic! Your best friend is in her second year of applying to PT programs and has been rejected from all of her schools again this year. She recently told you if that were to happen, maybe she was "just meant to work at Target." You have promised to tell her whether or not you are accepted as soon as you find out. You are driving to her house. How would you approach this conversation?

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Backstory for person playing the part of the best friend:

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	 Does the candidate express empathy and support for his/her friend? In a situation like this, it can be useful to ask a question such as, "How can I best show up for you right now? Would you prefer that I offer emotional support or would you like help with identifying next steps?" 	
	If applicable, based on how the conversation unfolds: • Did the candidate demonstrate critical thinking skills by considering the situation from multiple angles and asking clarifying questions?	
	Does the candidate express communication skills that are well-suited for a clinical profession?	
	Did the answer indicate that the candidate is comfortable grappling with difficult topics?	

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	Did the example fit the prompt?	
	Did the candidate tell an illustrative story using the STAR format?	
	 Situation: Set the scene (a specific instance, not a generalized approach) Include details: who, what, when, where, and why Task: Identify your responsibilities in this scenario Action: Tell the story, describing the action you took Result/Reflect: State the outcome Direct impact of this approach or intervention Reflect upon the experience Why was this situation significant? What insight did you gain? -or- What lesson did you learn? 	

Tell me about yourself.

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	Did the candidate respond in a conversational way and build rapport with you?	
	Did you gain insight into what the candidate cares about most, personally and professionally?	
	Did you gain insight into what is motivating him or her to want to become a clinician?	
	Did the candidate provide examples from his or her life experiences to support his or her claims?	
	Commonly, a candidate will identify 3-4 central themes that have consistently emerged as motivators in multiple aspects of his/her life and that relate to his/her desire to become a clinician.	