



Trainees as simulated patients in family medicine/ general practice OSCE stations for undergraduate students: Unintended (positive) consequences

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Dear Editor

In our medical school, an OSCE was recently introduced as a high-stakes exam in the 4th year. For the first time, Family Medicine/General Practice (FM/GP) faculty members were involved in such a complex undertaking, being responsible for two of the ten five-minute stations.

Facing limited resources, we decided to invite FM/GP trainees as simulated patients (SP). They were provided with a ninety minute training session prior to the OSCE.

In our debriefing session, examiners and SP felt confident in the aftermath. Examiners praised the trainees' participation for the level of standardisation achieved. On the other hand, SP practitioners felt training was hugely facilitated because of the trainees' thorough knowledge of 'typical' patients. Trainees confided they saw their participation as an opportunity to feel like a patient, enabling the development of empathy, and recognise the impact of different communication skills in the doctor-patient relationship. This was vastly unforeseen for the faculty members and perceived as a silver lining.

To the best of our knowledge, reports of trainees as SP are non-existent. Nonetheless, several authors describe the potent effect of role-play on learning empathy Rasasingam

et al. (2017) or the use of SP in the form of learning by embodiment Bank et al. (2021). We question if this could be another way to achieve the same results, albeit simultaneously providing the participation of trainees as SP for undergraduate assessment.

We hope that this collaboration between Faculty and trainees in FM/GP will continue and soon transpires beyond the scope of the OSCE.

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