

**Scripted Role Play #1 – English**

Anxiety

Background: A patient visited the ER for an anxiety attack and is speaking with a mental health social worker to help with follow-up care.

**Provider:** So, Mr. Smith, I got a report from the ER doctor about what happened, but I'd like to hear it directly from you in your own words. What happened this morning that brought you in to the ER?

**Patient:** Well, I had just been feeling very anxious.

**Provider:** When did it all start?

**Patient:** I started feeling worse a few days ago, but last night it got really bad.

**Provider:** What happened last night?

**Patient:** The thing is that all night long, I was feeling nervous and jittery. I just couldn't relax. My wife was really worried. I tried to go to bed and fall asleep, but I couldn't. Then, all of a sudden, I felt short of breath. I was gasping for air as if I were drowning...

**Provider:** Did you have any other physical symptoms like pain?

**Patient:** Yeah, I had a terrible headache back here in the nape of my neck.

**Provider:** You said, Mr. Smith, that you had been feeling bad for several days. What had you been feeling?

**Patient:** At work, I couldn't concentrate at all. I was irritable with everyone. My nerves were shot. Every little thing would startle me. I didn't have any appetite. Whenever I would eat it would make me nauseous. But the worst thing is that I couldn't sleep at all. I think it's been like four nights now that I've hardly gotten any sleep.

**Provider:** Now, I see from your chart that you had been seen by a psychiatrist for anxiety in the past. Were you ever prescribed any medications for anxiety or depression?

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**Patient:** Yeah, he gave me two pills, one was for a depression. I think it was called Zoloft.

**Provider:** And the other one?

**Patient:** It was a little round one that was called loraza-something...

**Provider:** Lorazepam?

**Patient:** Yeah, that's it.

**Provider:** Did they seem to help?

**Patient:** A little bit. The lorazepam one, the doctor took away. The other one I just stopped taking.

**Provider:** Lorazepam is usually just taken short-term because it can cause dependency. What about the anti-depressant? Why did you stop taking that one?

**Patient:** The thing is that I took it for several days and it really didn't seem like it was helping much. It just made me feel tired and numb all the time. I don't know how to describe it. It was hard to concentrate at work. I was scared that I was going to get fired and I really can't afford to lose my job, so I just decided not to take it anymore.

**Provider:** Well, anti-depressants can take several weeks to have an effect, so you really need to stick with it. I think it would be good for you to follow up with your psychiatrist again. There are many kinds of anti-depressants out there; maybe he can try a different one to see if helps you better. The thing is, though, that sometimes when people start taking medicine for depression, at the beginning they can feel worse, even suicidal, for which reason you'll need to stay in touch with the doctor and not miss your follow-up appointments.

**Patient:** OK.

**Provider:** Now, they gave you a dose of Valium or diazepam here in the ER for your anxiety. But they don't like to give you a prescription for that in the ER, so you'll need

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to see your psychiatrist on an outpatient-basis within a day or two, so he can give you the prescriptions that you need, OK?

**Patient:** The problem is that because I missed a few appointments, supposedly that psychiatrist doesn't want to see me anymore.

**Provider:** If you give me a couple minutes I can make some calls and see if you can be seen again in that clinic. At this point, Mr. Smith, the most important thing for you is to get regular outpatient care to get your anxiety under control. Give me a few minutes to make some calls and I'll come back and let you know what I find. Sound good?

[Provider leaves the room and then returns]

**Provider:** I called them and they are not able to see you again at that clinic. We have a clinic associated with our hospital. I will make you an appointment at that clinic if that is OK with you. We use interpreters at that clinic too. All right?

**Patient:** That should be OK. I will try to do better this time getting to my appointments. Thanks for everything.