

2022-02 Trial Exam

SAQ 11

You are evaluating a patient with vertigo.

State 5 historical elements that would favour a central cause over peripheral.

ACEM is prioritising assessment of physical examination skills at Fellowship written and OSCE level. You should know relevant physical examinations to a high degree of expertise. Examinations where two or more diagnoses may be differentiated are more likely to be assessed.

The stem- Vertigo is a common presentation but there is little in the way of demographics in the stem. So think broadly and answer based on all populations. NB In general, if there are patient demographics in the stem then your answers should be specific to that patient/scenario unless explicitly asked to give an answer for "any patient".

Answer the question asked. in this case, you must give history elements (not exam or investigation).

You must give factors favouring CENTRAL causes.

Avoid giving too similar answers (e.g. multiple individual CVS risk factors, multiple focal neurology symptoms)

You are evaluating a patient with vertigo.

State 5 historical elements that would favour a central cause over peripheral.

Accepted answers included (but not limited to)

Older age, CVS risks, Past Hx (CVA, AF etc)

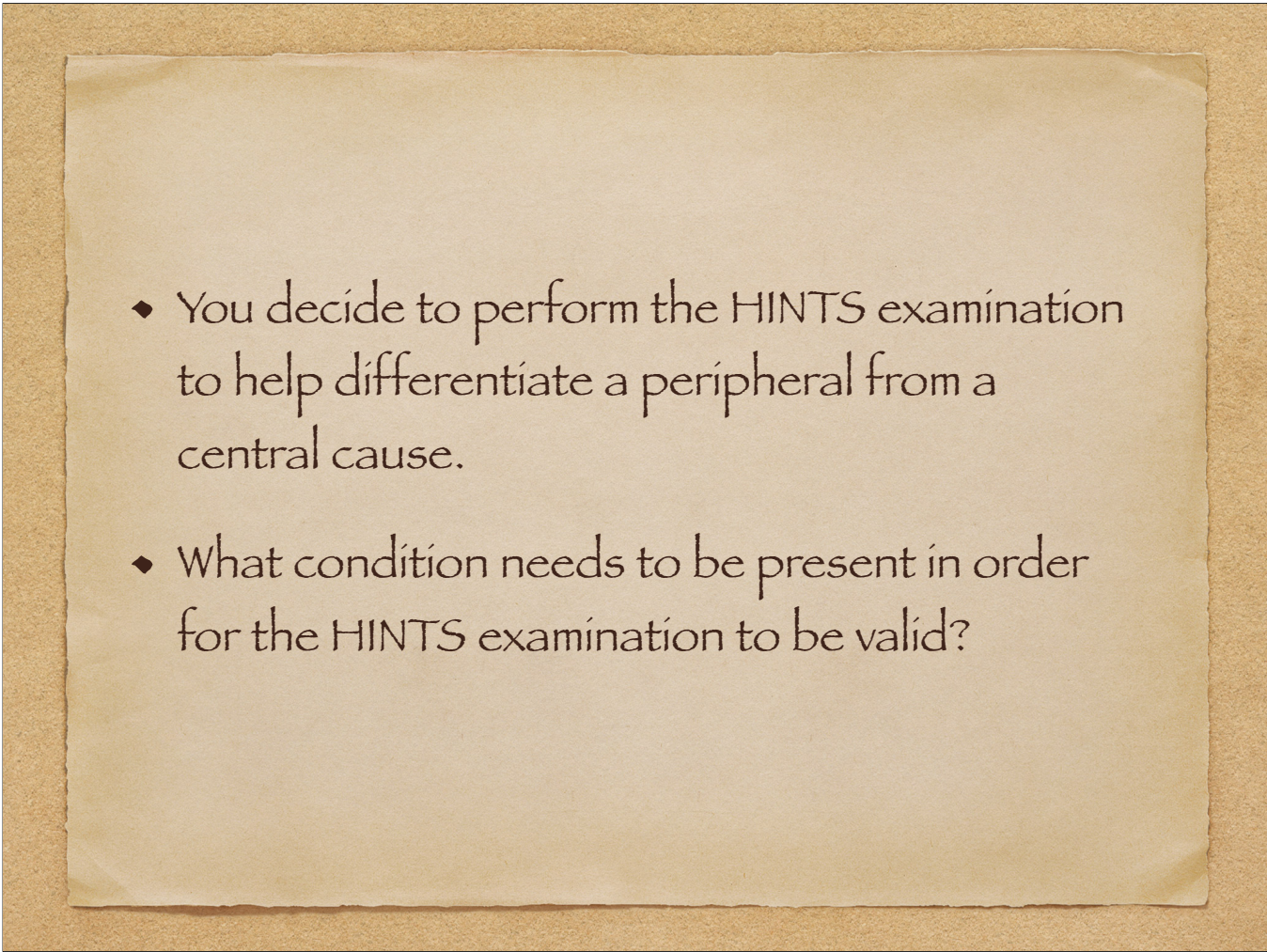
Associated altered conscious state, Associated focal neurology.

Slow onset, longer lasting, associated headache or neck pain.

Absence of vomiting, Absence of ear Sx (Hearing loss, tinnitus etc)

Common errors- "Sudden onset"- actually more likely to be peripheral and did not score a mark.

Inability to walk- Non specific and common in peripheral. It did not score a mark. Truncal ataxia or inability to sit/stand are more likely central and scored.

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- ◆ You decide to perform the HINTS examination to help differentiate a peripheral from a central cause.
 - ◆ What condition needs to be present in order for the HINTS examination to be valid?

The only accepted answer was - Vertigo needs to be present at the time.

This is a question about the HINTS exam and its results. So your answer should be specific to this- especially when only a single answer is requested. A few people stated things like - Pt needs to understand, or be conscious. I did not accept them as they are non-specific.

- ◆ Complete the table below giving the three elements of the HINTS exam, and the finding favouring a central cause of the vertigo.

Element of the HINTS exam	Result favouring a central cause
Head Impulse test	No corrective saccade
Nystagmus	Bidirectional nystagmus/ Torsional, or vertical nystagmus
Test of Skew	Vertical ocular misalignment. (Seen as correction with cover and uncover)

The table above lists the acceptable answers.

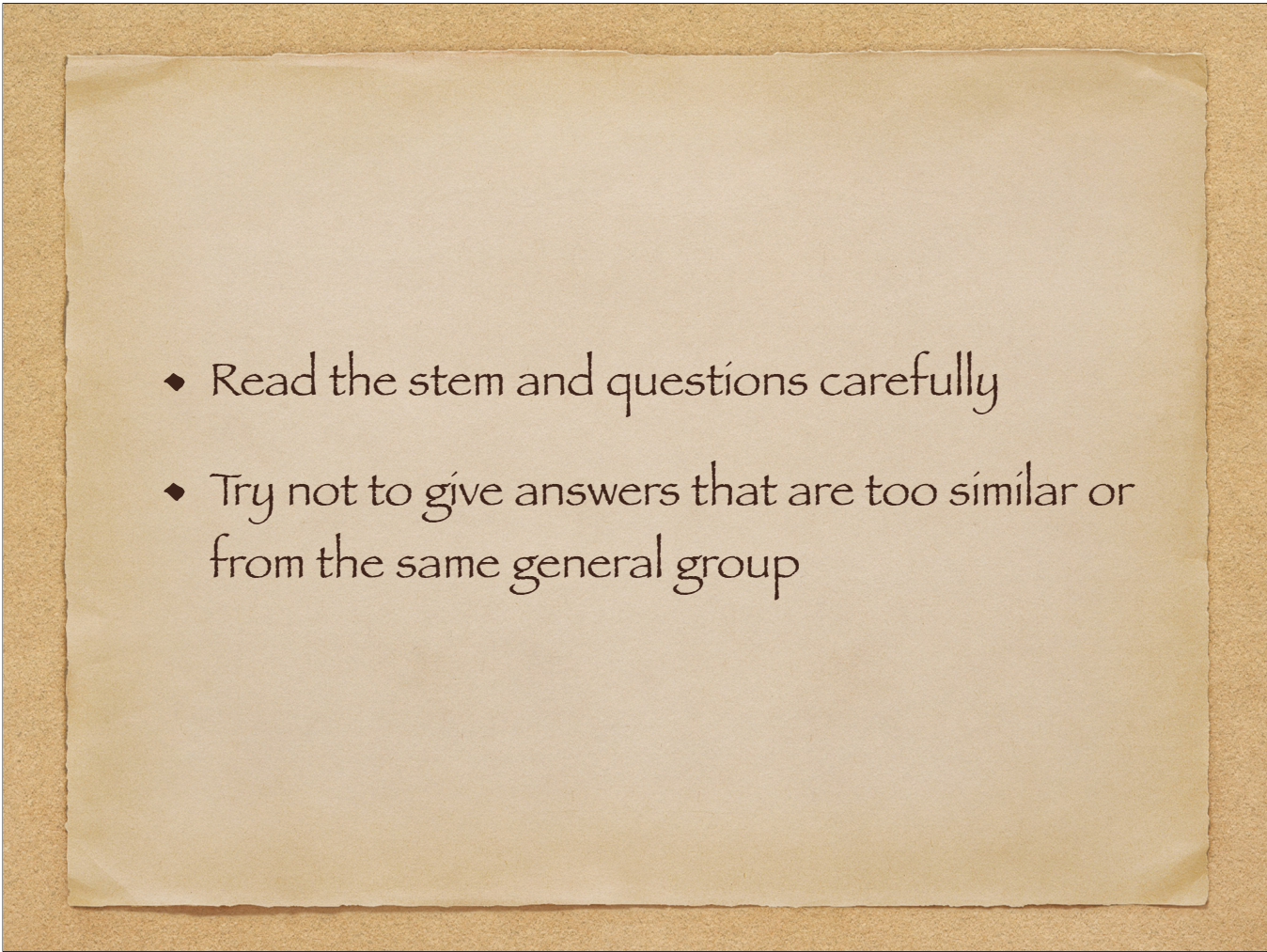
Be specific and exact. This is a speciality exam. I did not accept "Skew" on its own, nor "head test".

I accepted any of bidirectional or torsional or vertical nystagmus (or any combo of them).

I accepted any correct explanation of "test of skew"

"Doll's eye" test is for brain death not HINTS.

I did not accept "negative" or "positive" on their own. An explanation was required. Many people get confused by what is neg or pos. You need to show the examiner you know what you are looking for (Anyone can guess at positive or negative without knowledge)

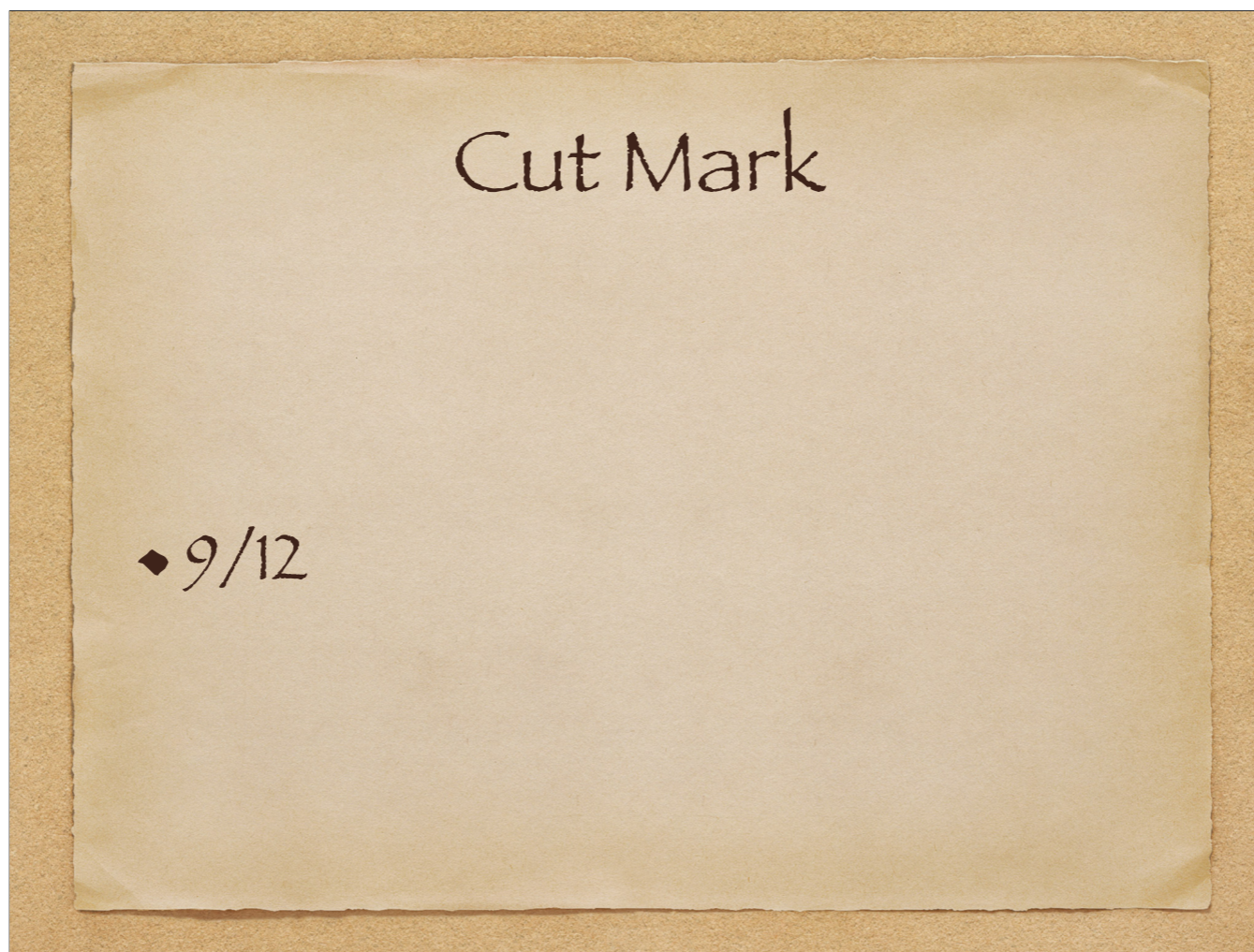
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- ◆ Read the stem and questions carefully
 - ◆ Try not to give answers that are too similar or from the same general group

Final Summary

Answer the questions asked. Be careful in your reading to avoid simple errors that could cost lots of marks E.g. central rather than peripheral, history rather than exam

Be specific in your answers. Don't give multiple answers from the same group or classification.

Only give the number of answers requested. Any above that will be ignored (Was not an issue in this trial exam)



This was a high cut-score question due to straightforward nature.

Breakdown of cut score calculation $A=4$, $b=1$, $c=4$

Most did well in Test elements, and risk factors.

Wide range of marks from 5-12.

The mean score was 8.8 & median 9.

22 out of 39 scored ≥ 8.5