

2019-01 Trial Exam

SAQ2

A 45 year old woman presents with sudden loss of hearing in her left ear. There is no history of trauma.

- ◆ Read the stem carefully. Take note of all information
- ◆ Look at the patient's age, gender, side of lesion, extra information.
- ◆ It states there was no trauma, so don't put that in an answer.

- ◆ Apart from idiopathic sudden sensorineural hearing loss, list five (5) likely differential diagnoses for this patient.

Note the question asks about “THIS” patient. Your answer should be appropriate to the patient in the stem. e.g. don’t give traumatic differentials when the stem says there has been no trauma. Clearly don’t write “idiopathic sensori-neural hearing loss”.

Don’t give male only/ paediatric only/ geriatric only differentials.

- ◆ Infectious e.g. mumps, measles, influenza, zoster, HSV, CMV, EBV, syphilis
- ◆ Vascular e.g. macroglobulinaemia, sickle cell, leukaemia, polycythaemia, embolic, hypercoagulable state, autoimmune e.g. SLE, CVA only if appropriately localised in answer
- ◆ Metabolic e.g. DM, pregnancy, hyperlipoproteinaemia
- ◆ Conductive e.g. cerumen, FB, otitis externa or media, cholesteatoma
- ◆ Medication e.g. aminoglycosides, loop diuretics, chemo, salicylates
- ◆ Neoplasm e.g. acoustic neuroma
- ◆ Other- Labyrinthitis, Meniere's dis, sarcoid

- ◆ The above list is not definitive. All correct answers will score.
- ◆ Think in categories. Try to put one example only from each category- too similar answers may not score more than once.
- ◆ You do not need to write the category title in the answer (Unless specifically requested). But, thinking like this => better answers in general.
- ◆ Prioritisation- Give the most important/most life threatening/most likely first. Some answers will be mandatory (that answer is required to score full marks)- So your best chance for full marks if give most imp etc
- ◆ This is a fellowship level exam. Answers should be specific and high level. e.g. Stroke is too non-specific. Rather say “brainstem stroke” or “stroke affecting the vestibular nuclei”. Non-specific ICB (e.g. “SAH”) or “tumour” is not enough, whereas “acoustic neuroma” is good. Also, “cochlear disease” or “nerve disease” are NOT fellowship level. “Diabetes induced vestibular neuronitis” is appropriate.

- ◆ Complete the following table with regard to the examination of a person with hearing loss

	Brief description of the test	Findings in conductive hearing loss	Findings in sensori-neural hearing loss
Rinne's Test	Uses a tuning fork to compare bone with air conduction. Mastoid vs EAM	Bone > air	Air > bone OR both lost (either correct)
Weber's test	Localisation of sound with tuning fork in middle of forehead	Localises to the affected side	Localises to the unaffected side

- ◆ Its not enough to just describe placing the fork on the mastoid and in front of the meatus (Rinne) or on the forehead (Weber). To score the marks, you must state that you ask the pt which is louder or equivalent (Rinne) or where it localises (Weber) - This is the important finding you will use diagnostically, and the reason for performing the examination.
- ◆ (The correct tuning fork frequency is 512Hz but was not marked up or down in this question)

- ◆ You decide the patient has idiopathic sudden sensorineural hearing loss. List one drug and dose that you would prescribe for this patient.

- ◆ Prescribe = drug, dose, frequency AND duration
- ◆ e.g. Prednisolone 60mg daily for 5 days then taper by 5mg / day to zero.
- ◆ To get full mark you needed a duration of > 5 days total.
- ◆ Other equivalent steroids were fine.

Cut mark

- ◆ part “a” $3/5$, part “b” $4/6$, part “c” $1/1$
- ◆ $8/12$

Tips

- ◆ ACEM has flagged Physical examination as a skill to be tested. It will appear in SAQ and OSCEs. Know and be able to perform ED appropriate physical examinations.
- ◆ Carefully read the stem. Every piece of information is important.
- ◆ Categorise your answers to avoid too similar responses or missing important responses. Show prioritisation.
- ◆ Consultant level answer. Be specific, appropriate to the question's patient/situation. Justify your responses.
- ◆ Poor writing = Take advantage of the online option