

## SCENARIO 4      History

Sam Farrugia is a 45yo patient who presents to the emergency department with right upper quadrant pain. Please take a history and communicate an interim management plan to the patient.

You will not be required to examine your patient.

The patients vital signs are:

Temp                      39.2

Pulse                      115

BP                          105/50

RR                          16

O2 sats                    100%

Curriculum reference:

- Medical expertise
- Communication
- Professionalism
- Health advocacy

**Information for actor.** Can be male or female depending on available staff. (gender neutral name)

This is a patient with cholecystitis. All answers should be consistent with a classical presentation of this condition.

Patient is generally well with no significant comorbidities, significant allergy to penicillin. Taking perindopril for HT. Smoker 20cigs/day, daily alcohol.

Pain has been present for 48 hours. Has had niggles of pain over the past few months, but never prolonged. Pain constant and progressive, dull, worse with deep breathing. No resp symptoms. No back pain, no vomiting, some nausea. (ie no symptoms to suggest pancreatitis). No urinary symptoms or any other symptoms to suggest infection other than cholecystitis. No recent travel, has not sought any other medical advice since the onset of symptoms. Has had 2 or three rigors, feels hot and sweaty, a little dizzy standing up.

The patient was examined earlier and was tender in the RUQ.

**Information for examiner.**

Vital signs: T 39.2, P115, BP 105/50, R16

Tender in the right upper quadrant. No mass

Chest clear

Urinalysis NAD. Preg test (if female pt) – negative

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Domain	Criteria for high rating
<b>Medical expertise</b>	<p>Asks open ended questions</p> <p>Asks all questions to confirm diagnosis of cholecystitis</p> <p>Asks questions to exclude alternative diagnoses: pneumonia, pancreatitis, renal colic, pyelonephritis, pregnancy related conditions, perforated viscus</p> <p>Management plan includes cannulation, IV fluids and non-penicillin IV antibiotics, bloods, U/S, admission to hospital, analgesia, referral to surgical unit, possible CXR</p>
<b>Communication</b>	<p>Clarity of communication</p> <p>Offers patient opportunity to ask questions and clarify information</p> <p>Communicates a clear plan of management including IV access, blood tests, U/S, admission to hospital, referral to surgical unit</p>
<b>Professionalism</b>	<p>Shows respect</p> <p>Professional appearance, demeanor and conduct</p>
<b>Health Advocacy</b>	<p>Alcohol and smoking intervention</p>

**Candidate Name:**

**A. Component Assessment**

Select ONE option that best represents the candidate's performance in this OSCE. Use the 9-point graded scale, where 1 is poorest and 9 is best. TICK ONE CELL for each row below.

	1	2	3	4	5	6	7	8	9
<b>Medical Expertise</b>									
<b>Communication</b>									
<b>Health Advocacy</b>									
<b>Professionalism</b>									

**B. Station Difficulty (please circle):**      Low      Moderate      High

**C. Examiner Notes on Candidate Performance**

Positives

Areas for Improvement

Suggestions

**D. Global Rating for Standard Setting (please circle)**

Clear Fail      Marginal Fail      Borderline      Marginal Pass      Clear Pas