

CASES FOR STUDENT 1

RESP

Student prompt: Mr Smith has presented to the GP with shortness of breath, you have been asked to take a history before they see the GP.

Name and DOB	Harry Smith, 13/11/1952, 68 years old
PC	Feeling out of breath which has been worse over the past 2 weeks but has been ongoing for months
HPC	<ul style="list-style-type: none">- Feeling tired all the time- Breathlessness is worse on exertion- Legs have been getting more swollen- Breathlessness persists when lying down, sleeps with 2 or 3 pillows- Wakes up at night gasping to air 3-4 times per week- Also has a productive cough- sputum is clear and frothy- No fever, recent travel, chest pain, wheeze, pleuritic pain, palpitations, no appetite loss, no weight loss, no night sweats
ICE	<ul style="list-style-type: none">- I: No idea what the cause might be- C: Can't look after my wife in this state- E: I want a quick fix for this, cannot go on like this
Past Medical History	<ul style="list-style-type: none">- Hypertension, hypercholesterolaemia, heart valve problem, AF and COPD
Drug History	<ul style="list-style-type: none">- Only if asked if there have been any changes to medication: Stopped water tablets recently because he thought it was affecting his kidneys.- Amlodipine, warfarin, atorvastatin, aspirin, Symbicort, salbutamol- Allergies: codeine- Not sure how much or how often she takes these
Family History	<ul style="list-style-type: none">- Parents had hypertension
Social History	<ul style="list-style-type: none">- Lives with wife who has Alzheimer's.- He is a retired book shop owner.- Quit smoking 10 years ago, used to smoke 2 packs a day for 20 years.- Doesn't drink.- No recreational drugs

Top Differentials:

- Heart failure- secondary to LV dysfunction causing pulmonary oedema.
- Lung fibrosis- long history of progressive shortness of breath, but productive cough and lack of triggers makes this unlikely.
- Lung cancer- progressive SOB, history of smoking but no B symptoms
- Pneumonia

CARDIO

Student prompt: You have been asked to take a history from Mr Singh who has presented at his GP practice with chest pain.

Name, DOB	Siddarth 'Sid' Singh, DOB 26/06/1974, 45 years old
PC	2 days of central chest pain

HPC	<ul style="list-style-type: none"> - Chest pain is achey all the time, sometimes sharp, worse when lying flat and better when leaning forward. - Getting more breathless over the past 2 days - Been feeling hot and cold for several days. - Pain is a 7/10 - None of the following: radiation, pleuritic chest pain, sweats, nausea, PND, trauma to chest, tenderness, cough, sputum
ICE	<ul style="list-style-type: none"> - I: I go to the gym a lot, maybe I just pushed myself too hard? - C: Work in construction, don't want to have to take time off work because of this - E: Just want to get to the bottom of what's happening
Past Medical History	- Dislocated shoulder and torn ACL from rugby
Drug History	- Nil, No allergies
Family History	- Father passed away from a heart attack at 78
Social History	<ul style="list-style-type: none"> - Don't smoke, drink occasionally: some beer when I meet with friends every week. - Work in construction - No recreational drugs

Top 3 differentials:

- Pericarditis
- Stable angina
- Costochondritis

NEURO

Student prompt: You have been asked to take a history from Mr Hodgson who presented to A&E with a headache

Name, DOB	Reece Hodgson, 12/02/1981, 40 years old
PC	Severe headache for the last 6 hours, patient is visibly distressed
HPC	<ul style="list-style-type: none"> - Initially frontal headache but has spread to the back and neck. - Sudden onset, worst headache he's ever had. - Came on when exercising at the gym. - Also experienced nausea and dizziness - No limb weakness, no LOC or loss of vision
ICE	<p>I: I have no idea I just want this sorted.</p> <p>C: Feel like my head is going to explode</p> <p>E: Get this treated asap</p>
Past Medical History	- If asked about kidney problems: Polycystic kidney disease, but not under any kind of follow up at the moment
Drug History	<ul style="list-style-type: none"> - Tried paracetamol today but didn't work. - No allergies
Family History	- Father died of intracerebral bleed at 64
Social History	<ul style="list-style-type: none"> - Works as an investment banker in the city, really stressful job, just more difficult when working from home. - Drinks scotch occasionally at the weekends. - Lives alone

Top 3 Differentials:

- Subarachnoid Haemorrhage
- Cluster headache
- Tension headache

ABDO

Student prompt: You have been asked to take a history from Mrs Patel who has presented to A&E with abdominal pain.

Name, DOB	Sofia Patel, 21/1/1964, 57 years old
PC	Abdominal pain that started 3 hours ago
HPC	<ul style="list-style-type: none"> - Pain started after dinner- ate take away and chips. - Pain is in the top middle and right of the tummy. - Pain 7/10, sometimes comes and goes in waves but is quite constant. - Nothing helps the pain. - She has experienced this before after meals for the past year. - Felt sweaty today with nausea, no fevers. - Skin is more yellow. - No fevers, weight loss, lethargy, diarrhoea, vomiting, dysphagia, change in bowel habit, blood in stool, abdominal distension, previous liver disease
ICE	<p>I: Is it my liver because? Because if I'm honest I do drink a fair bit</p> <p>C: It feels like the pain has gotten a lot worse recently, worried what it could be</p> <p>E: Just get some tests done to find out what it is</p>
Past Medical History	<ul style="list-style-type: none"> - Type 2 diabetes - Obese- BMI 43 - Osteoarthritis
Drug History	Metformin, paracetamol, no allergies
Family History	Mother had diabetes and hysterectomy; Father has diabetes
Social History	<p>Work as a receptionist at a dentist's</p> <ul style="list-style-type: none"> - Smokes ½ pack a day for the last 20 years. - One glass of wine a day

Top Differentials:

- Biliary colic on background of cholecystitis
- Acute pancreatitis
- GORD/ peptic ulcer disease