

Instruction to Candidates – Aim for 8 minutes

You are a Foundation doctor in your A&E rotation.

Patrick Richardson has had been experiencing weakness.

You have 6 minutes to take an appropriate history from him, the examiner will then ask you some questions.

Name: Patrick Richardson

Age: 68 years

PC & HPC

“About 3 days ago I developed a sharp headache, it lasted a few minutes and then died down”

“The headache was very sharp, it was sudden and came about while I was driving home from my sister’s place. It lasted a few minutes then became very dull in nature. Best I can describe it is the pain was inside my head and it was as if it everywhere in my head was affected at once. Other than the pain being in my head it didn’t spread anywhere else, not even down my neck. I did feel nauseous, one episode of vomiting that happened an hour after the headache.”

If specifically asked: “When I got home my wife told me that my speech was slurred. I nor my wife noticed any drooping of my face. I only had a bit of weakness in my left hand that lasted less than a minutes, it came on when my headache started and I realised it because I struggled to use my left hand to change gears when driving. Other than that one episode I haven’t had any other episode of weakness. My slurred speech lasted until last night and I decided to call my GP who advised me to come to Hospital.”

No problem with sensation.

No loss of vision.

Right hand is dominant hand.

No unintentional weight loss.

No abdominal pain, urinary symptoms, or changes in bowel movements.

No swallowing difficulties.

If specifically asked: “I have had an episode like this before, not as severe as this – 1 years ago. My speech slurred and I had weakness that both lasted for a day. My doctor thought I had a TIA and was referred to a TIA clinic. I had a scan but I don’t think it showed much, I honestly don’t remember. I was started on some medication.”

PMH

- TIA
- Hypertension
- Type 2 diabetes

MH

- Metformin 1g BD
- Gliclazide 80mg OD
- Atorvastatin 80mg OD
- Ramipril 5mg OD
- NKDA

FH

Unknown. Adopted.

No past surgical history.

SH

Lives with wife, carer for his wife who has Multiple sclerosis. Manages daily activities independently.

Never smoker.

Consumes up to 3 units of alcohol per week.

No recreational drug use.

Observations:

- Oxygen saturation: 97% (on room air)
- PR: 87 bpm
- RR 15 bpm
- BP: 174/88 mmHg
- Alert
- GCS 15/15
- PEARL

CT brain without contrast:



Case courtesy of Assoc Prof Frank Gaillard, "<https://radiopaedia.org/>">Radiopaedia.org. From the case "<https://radiopaedia.org/cases/2764>".

Questions

1. What are your differentials?
 - Haemorrhage/ischaemic Stroke
 - Subarachnoid haemorrhage
 - Brain tumour
2. Based on this CT brain image what do you suspect has happened?
 - Haemorrhagic stroke
3. What is your plan for this patient?
 - Refer to neurosurgical team for advice
 - If there is no input from neurosurgery then to admit under stroke team
 - Control blood pressure to <160 mmHg

Topic	Clear Fail	Fail	Satisfactory	Good	Excellent
Adequate history taken covering PMH, MH, SH and allergies.					
Student Performs an appropriate ABCDE assessment					
Differential dx					
Investigations					
Rapport/communication skills					
Overall					