

Instruction to candidates

You are a Foundation doctor in A&E.

Paul Angus has been brought to A&E with pyrexia.

You have 6 minutes to take a history, after 6 minutes the examiner will ask you to interpret pathology results and ask you for differentials (total time: 8 minutes).

Patient name: Paul Angus

Age: 28 years old

PC: Began to feel unwell yesterday, since last night developed a fever and shakes.

HPC

- Yesterday morning felt tired despite a good night sleep.
- Throughout yesterday felt quite weak.
- Slight neck and shoulder stiffness since yesterday morning and through the day worsened. Currently feels as though neck is quite stiff.
- Developed a temperature yesterday evening – 37.8°C. Had paracetamol.
- This morning woke up feeling very cold and shivering. Needed to be in a dark room, felt like a headache would come when exposed to light. Temperature 38.6°C, had paracetamol but did not help. Later during the day temperature increased to 38.8°C.
- Not able to eat or drink since yesterday afternoon due to having no appetite – feeling nauseous.
- No vomiting.
- No rash.

PMH

- None.

MH

- None.
- No allergies

Surgical history

- None.

ICE

- Idea & concern – I really feel unwell, I think this may be a bad infection.
- Expectation – Maybe antibiotics will help.

FH

Unknown.

SH

- Lives with partner
- Builder
- Smoker – 1 pack per day for the last 5 years
- Consumes 18 units of alcohol per week
- No known use of recreational drugs

Lumbar puncture results

Colour: slightly cloudy yellow

WCC: 1,000 (predominantly Neutrophils)

Red cells: 3

Protein: 1.5

Glucose (CSF:Glucose ratio): 34%

Opening CSF pressure: 24 cmH₂O

What are your differentials?

- Bacterial Meningitis

Management

- Blood cultures
- IV antibiotics as per Trust guidelines

Area	Clear Fail	Fail	Satisfactory	Good	Excellent
PC & HPC: Good range of open and closed questions asked.					
PMH & DH					
SH					
FH					
ICE					
Differential dx					
Investigations					
Rapport/communication skill					
Overall					

Feedback

In the event the patient experience signs of increased intracranial pressure such as focal neurological signs, uncontrolled seizures, papilloedema, GCS 12 or less: then request advise from ICU. Patient may require:

- Dexamethasone 10mg IV
- Airway support
- Fluid resuscitation
- Neurological observation every 30 minutes

Once the organism has been identified make sure to change or adjust the antibiotic regime as appropriate to treat the infection.