

Instructions to Candidates – Aim for 8 minutes

You are a Foundation doctor in General Practice.

Darcy Madison has presented because she has been experiencing painful periods.

At 6 minutes the examiner will ask you questions.

Name: Darcy Madison

Age: 30

PC:

Opening statement: “My periods have become so painful recently, I can’t cope with them anymore.”

You have been experiencing painful periods over the past 6 months.

Your periods are regular on a 28 day cycle.

Your periods last 5 days.

You have severe pain while on your period, you have had to take time off work for the past few months.

You are sexually active with your male partner (Greg) who you have been with for 5 years. No other sexual partners recently. You use condoms.

You have noticed a deep pain on sexual intercourse – only mention this if specifically asked.

You have had one child, Henry, who is now 2 years old. It was an uncomplicated pregnancy and delivery. He was born by vaginal delivery in a birth centre. He is well and hitting developmental milestones.

PMH: Asthma

You had a termination when you were 18 – only mention this if specifically asked.

No history of STIs.

DH: Salbutamol inhaler

NKDA

SH: You live with your partner Greg and your 2 year old son Henry. You work as a primary school teacher however you have not been able to go into work during your period for the past few months. You don’t smoke and drink a couple of glasses of wine on the weekend.

FH: No family history of obstetric or gynaecology issues.

Ideas: I have no idea. Could it be something serious?

Concerns: I’m worried I’ll lose my job, I’m taking a week off every month

Expectations: I would like some help for the pain, it is unmanageable.

Mark Scheme for examiner:

8 MINUTE STATION: 6 MINS HISTORY FOLLOWED BY 2 MINS FOR QUESTIONS

Questions at 6 minutes:

1. What is your differential diagnosis?

Endometriosis, Pelvic Inflammatory Disease, Adenomyosis

2. Which is the most likely diagnosis?

Endometriosis

3. What investigations may help to confirm this diagnosis?

Laparoscopy with biopsy is the gold standard.

Area	Clear Fail	Fail	Satisfactory	Good	Excellent
PC & HPC					
PMH & DH					
SH					
FH					
Menstrual hx					
Obstetric hx					
Sexual hx					
Contraception hx					
Cervical smear hx					
ICE					
Differential dx					
Investigations					
Rapport/comms					
Overall					

Feedback

Dysmenorrhoea is a common presenting complaint in gynaecology. It can be debilitating for some women. Make sure to ask how it is affecting their daily life. This will come out if you remember to explore ICE.

You must ask in detail about her menstrual cycle, obstetric history and a brief sexual history. Remember with dysmenorrhoea to always ask about dyspareunia! This can point you to a diagnosis such as endometriosis.

Although this lady has only been sexually active with the same partner for years, you cannot assume she is telling the truth or that her partner is being exclusive! Remember to include STIs and pelvic inflammatory disease in your differential.