

Instruction to Candidates – Aim for 8 minutes

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

Maria Turner has had been having problems with her right eye.

You have 7 minutes to take an appropriate history and examine her eye, the examiner will then ask you some questions.

Name: Maria Turner

Age: 67 years

PC & HPC

“I’ve developed this redness in my right eye, I noticed it this afternoon.”

“This morning I felt as though my right eye was gritty, I’m not sure how else to describe it. It was really uncomfortable so I was itching my eye a lot all day. I guess the grittiness is coupled with a dull pain in my right eye.”

The dull pain does not spread anywhere.

“I’ve had some blurring of my vision in the right eye, but it lasts for about 3 seconds and I only notice it after scratching my right eye.”

“This afternoon I looked in the mirror and saw that my right eye was very red, almost as if there’s been a bleed inside my eye. I don’t know how this could have happened.”

No problems with her left eye.

No trauma to the eyes or face.

No loss of vision.

No contact lenses or glasses used.

No known or previous history of cataract or glaucoma.

No temporal tenderness.

No discharge from either eye. Watering in right eye after prolonged itching.

No recent fever.

ICE:

“I think my eyes were really dry and I’ve scratched it so much that it’s caused a bleed. I’m worried whether this will get better or whether I’ll have long-term problems with my vision because of this. I just want to know what’s happening.”

PMH

- Hypertension
- Atrial fibrillation
- Previous Myocardial Infarction 3 years ago

MH

- Ramipril 10mg OD

If specifically asks: You have not been taking your hypertension medication for the last 5 months because you feel that you are well in yourself.

- Amlodipine 5mg OD
- Warfarin 2mg OD (dose reduced one week ago) – **If asked:** INR range 2-3. Last INR from over a week ago was 3.4, dose was 4mg OD prior to one week ago.

NKDA

No FH of

SH

Lives alone.

Works as secretary in law firm.

Smoker – 10 cigarettes per day, smoking for 30 years

No alcohol consumption

No recreational drug use

Image of eye:



Examination findings:

- Visual acuity 6/6
- Visual fields fully intact in both eyes

- No concerns from H test. No double vision, no evidence of nystagmus
- Ophthalmoscope shows no evidence of papilloedema

Questions

1. What is your likely diagnosis:
Subconjunctival haemorrhage (secondary to hypertension and Warfarin use)
2. What is your plan?
 - Bloods to check INR and whether INR requires correcting
 - Check blood pressure – may need acute treatment pending systolic levels
 - Discuss with on-call ophthalmology for assessment
 - If ophthalmology provides reassurance and/or nil acute findings from examination or bloods then can be discharged with advice to immediately restart her anti-hypertensive medication, use appropriate lubrication to help with the ‘gritty’ sensation and for GP to follow-up on her blood pressure.

- 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					

Eye image reference:

https://en.wikipedia.org/wiki/Subconjunctival_bleeding#/media/File:Human_eye_showing_subconjunctival_hemorrhage.jpg