<u>Instruction to Candidates</u> – Aim for 8 minutes

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

Layla Raees has been experiencing problems with her vision.

You have 7 minutes to take a history and appropriate examination focused on her clinical presentation. At 7 minutes the examiner will ask you some questions.

Name: Layla Raees

Age: 54 years

PC & HPC

"Since this morning I have been having problems with my vision, it suddenly completely went and has not come back."

This morning you woke up and noticed some blurring in your vision; affecting only the right eye. You initially ignored this and it remained stable during most hours. It was only mild blurring and you could go about your everyday activities.

You wear glasses, unsure of the lens strength, but you know you are short-sighted. You last had your eyes checked about 3 years ago and assumed you just needed an eye test and to upgrade the strength of your glasses lens.

By mid-afternoon you were losing your vision and 1 hour ago complete visual loss in the right eye that lasted about 30 minutes. Your husband rushed you to A&E.

No problems with vision from the left eye.

You have a history of migraines but have not had any recent headaches, your last migraine was 3 years ago.

No pain or discomfort when chewing food or combing hair – never experienced such a problem before.

No recent or past head injury.

No itching or discharge from either eye.

You have not noticed any erythema or pain in either eye. At this time you do not have any pain in your left eye.

No double vision throughout the course of the day.

No limb weakness.

No facial droop.

No slurring of speech.

If student specifically asks:

As you were losing your vision earlier this afternoon it was like a curtain coming down and slowly taking away your vision.

PMH

Newly diagnosed hypertension

MH

- Ramipril 5mg OD

NKDA

ICE

I – "I don't know what happened."

C – "I was scared I was to become permanently blind."

E – "I want to get to the bottom of this to make sure it doesn't happen again."

FΗ

Father had type 2 diabetes and used insulin to control his blood sugars.

SH

- Lives with husband
- Smoker smoking 20 roll-up cigarettes per day. Smoking for at least 30 years.
- Primary school teacher
- Shares two bottles of wine with partner per week.
- No recreational drug use

Examination

Pupils equal and reactive to light.

Accommodation normal.

On checking visual fields in both eyes normal.

On performing H test no nystagmus or double vision.

No facial droop or asymmetry.

No pain elicited when palpating the temporal areas of the skull.

If time for ophthalmoscope – no abnormal pathology seen within eye.

Questions

- 1. Tell me three of your differentials?
- Amaurosis fugax
- Acute angle-closure glaucoma
- Multiple Sclerosis (MS)
- 2. How are you going to manage this patient?
- Discussion with on-call ophthalmologist for urgent review
- FBC, U&Es, Lipid profile, HbA1c, glucose, ECG, carotid Doppler
- Check BP and optimise
- Consider inpatient MRI to check for radiological evidence of MS if warranted

- 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		•			•