

Instructions to candidate – Aim for 8 minutes

You are a foundation doctor currently in your GP placement.

Sarah Smith has come to you presenting with shortness of breath.

Take a history from Sarah.

At 6 minutes, the examiner will ask you questions.

Name: Sarah Smith

Age: 19 years old

During this past few weeks, you have been experiencing shortness of breath. You don't seem to be aware if there are any triggers. This SOB happens during exertion such as when you go for a jog. Prior to this, you have no breathing difficulties. Now, you get quite breathless after walking for approximately 500 meters. It has not got any worse during these few weeks but you are finding it uncomfortable. You have also been having cough, which is dry in nature and worsens especially during night time. There is also some chest tightness during night time. You notice a bit of wheeze at some occasion, especially after walking for 500 meters. No weight loss, loss of appetite, night sweats, temperature, orthopnea, PND, swelling of the legs.

PMH – Eczema, hay fever especially during summer time

DH - Emollient and steroid creams for eczema, cyclizine for hay fever when needed, NKDA

FH - Nil

SH - You are non-smoker, nobody close to you smoke. You occasionally drink a bottle of wine during the weekend. You work as a teacher and you have been teaching Maths for many years in the same school. You live with your partner since last year. You recently have a pet cat (name is Kathy) and a pet bunny (name is Bunny) from an animal shelter about a month ago. Your partner has no symptoms. You also have no new furniture and carpets

ICE

- I – You think this is a chest infection which has persisted for a long time
- C - You are quite bothered by how uncomfortable it can be, you can't do much running with these symptoms but it is something that you enjoy doing
- E – You want some antibiotics for it

Questions

1) Give one differential and why?

- a. Asthma

2) What investigations would you do for asthma?

- a. Peak expiratory flow rate, do it three times and document the highest reading
- b. Spirometry (FEV1/FVC ratio of less than 70% indicates an obstructive airway disease)
- c. Trial of bronchodilator (an improvement in FEV1 of 12% or more, together with an increase in volume of 200ml or more, is a positive test)
- d. FeNO test (more than 40 parts per billion is a positive test)

Feedback

Did the candidate	Y/N
Take a complete history of presenting complaint	
Establish patient's baseline of breathing	
Rule in/out red flags	
Establish relevant PMH from the history	
Establish a possible causation for her asthma from her SH	
Explore patient's ICE in a patient-centered manner	
Appropriately answer examiner's questions	