

Instruction to Candidates

You are a Foundation doctor on your GP placement.

Sarah Smith is presenting with earache.

You have 6 minutes to take a history from Sarah and to perform an ear examination. The examiner will then provide you with examination findings, after which they will ask you some questions.

Patient name: Sarah Smith

Age: 25 years

PC: Earache

HPC

You have been experiencing pain in your left ear for the past 4-5 days.

The pain feels dull and constant inside your ear. You realise you have been pulling your ear. The pain doesn't radiate to anywhere.

There has been some discharge since yesterday. It trickles constantly out of your ear and looks yellowish in colour.

You feel as though your hearing on your left ear has been affected since this pain started.

No tinnitus, no vertigo, no pain at the back of the ear, no trauma to the ear, no redness around the ear.

You are not experiencing any problems with your right ear.

No throat and nasal issues.

No temperature.

No facial weakness

This is your first time having this presentation.

PMH

Eczema

Hayfever

You don't normally have any ear issues

DH

NKDA

Emollient and steroid cream for your eczema

FH – nil significant

SH

You are a university student studying engineering course.

You are not a smoker and consume alcohol within weekly limit

If asked specifically, your hobby includes swimming, for which you swim at least once a week

I – you are surprised to have these symptoms as you are generally fit and well

C – no concern

E – you are looking for some reassurance that it is not a big issue

Examining student proceeds to examine patient's/dummy's left ear, including inspection, palpation and the use of otoscope)

Examination findings

(please provide a picture of an ear canal with otitis externa to student. They should be able to comment on the swollen auditory canal, discharge and unable to visualise the tympanic membrane)

Questions

Give one most likely differential in this case and why.

Otitis externa – acute presentation of ear symptoms, no red flag, has predisposing medical histories and co-founding factor such as swimming. Examination finding in line with OE.

What would you like to do next for this patient?

Ear swab

Antibiotic and steroid drops

Aural advice – avoid swimming until recover, avoid traumatising the ear

Safety net

Feedback

Did the candidate	Y/N
Establish a relevant ear history from the patient	
Explore red flags from the patient (e.g. mastoiditis and facial palsy)	
Explore ICE in a patient-centered manner	
Perform a relevant ear examination	
Able to list a differential and provide a clinical reasoning for it	
Provide an appropriate management plan	