

Instructions to candidate

You are a foundation doctor currently in your acute medicine rotation.

Susan Sim has come to the hospital complaining of chest pain.

Take a history from Susan.

At 6 minutes, the examiner will ask you questions.

You have 8 minutes to complete this station.

SP script

Name: Susan Sim

Age: 36 years old

You thanked your doctor for seeing you. Since yesterday, you have been experiencing sudden onset central chest pain. You described this pain as sharp, on a scale of 7 out of 10. You do not think there is anything that makes it worse or better. If specifically asked, you find the pain becomes very severe on deep breath. The pain does not radiate anywhere and has not changed much since its onset.

You feel this pain has made you cough a little but there is no phlegm. In addition, you have become slightly breathless. Prior to this, you have no issue with breathing. There is no wheeze and no temperature.

If specifically asked, there is no pain nor swelling of the legs. Your legs don't look red or warm to touch. You have no headache. No weight loss, no loss of appetite.

PMH – Nil

DH – oral combined contraceptive pill (you are very compliant with this medication and you have recently started taking it 6 months ago). NKDA.

FH – Nil

SH – you work as a teacher. You live with your friends in a house.

You are a non-smoker and rarely drink alcohol.

If specifically asked, you and your friends have just come back from a trip in Australia. You remember the flight being so long; you were bored in the plane.

ICE

- I – you feel you have a chest infection.
- C – you are concerned that this is going to affect your daily activities. You love cycling and this is going to stop you from doing so.
- E – you hope the doctor can give you something to ease the pain.

Questions

- 1) Name three or four differentials
 - a. Pulmonary embolism
 - b. Upper/Lower respiratory tract infection
 - c. Musculoskeletal chest pain
 - d. Angina

- 2) What is the most likely differential and why?
 - a. Pulmonary embolism – patient is presenting with acute onset of pleuritic chest pain, associated with cough and SOB. No red flag symptoms. However, patient was recently started on contraceptive pill and had just returned from a long flight

- 3) How are you going to manage this patient if she has a pulmonary embolism?
 - a. Provide appropriate analgesia, and record a new set of observation – if desaturating make sure to provide oxygen.
 - b. Bloods (FBC, U&E, CRP, coagulation screen)
 - c. ABG
 - d. ECG
 - e. CXR
 - f. Well's score and V/Q scan / CTPA
 - g. Commence patient on treatment dose anticoagulation if blood tests are acceptable
 - h. Senior review

Feedback

Did the candidate	Y/N
Adequately take a history from the patient, including red flag symptoms	
Explore the supporting factors for a PE diagnosis in history taking	
Explore patient's ICE in a patient-centered manner	
Provide relevant differentials	
Adequately apply clinical reasoning in providing a most likely differential	
Demonstrate knowledge in the investigation and management of VTE	

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