Griffith UNIVERSITY
School of Medicine

GUMS

Year 4 Formative OSCE #1 (July) 2019

Reading for Station 1

Candidate Instructions

Clinical Scenario

You are a 4th year medical student on GP placement. 50 year old Robert Barrett presents with a 3-day history of dysuria. The GP has performed a urine dipstick and has asked you to take a focussed history to determine the cause of his symptoms.

Urinalysis: positive for protein, leucocytes, nitrites and blood. Negative for everything else.

Vitals:
Temp: 37.6°C
BP: 135/85mmHg
HR: 80bpm
RR: 14bpm

Task

In a total of eight (8) minutes:

- Take an appropriate history
- At five (5) minutes:
    - Please provide your top 2 differential diagnoses and rationale
    - Please list further investigations you would perform

You do not need to examine the patient.

[The examiner in the room will assume the role of the GP]

Simulated Patient Information

The candidate has the following scenario and task

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Instructions for simulated patient

- Your name is Robert Barrett and your DOB is 01/01/1969 (aged 50)
- You are wearing casual clothes and you are sitting on a chair in front of a table.

Presenting complaint: UTI

<u>History of presenting complaint</u>

- Increase frequency feels like you're going every few minutes
- Some discomfort on urination
- Volume only small amounts
- Smells horrible and is much darker than usual
- Nothing makes it better has tried Panadol, but it didn't help
- Nothing makes it worse
- Nil previous episodes.
- Has been feeling a bit unwell, some hot and cold feeling and shaking a bit
- No back pain
- Has not had this before
- Impact: has not been able to work, feeling tired due to lack of sleep

<u>Urogenital history</u>

- For the last 18 months:
- <u>Difficulty starting</u>: needs to stand for 20 minutes over a toilet bowl before urine finally comes out

- Poor stream: slow and with straining
- Dribbling: Some dribbling at the end
- Volume: It does not feel like you have completely emptied your bladder. Less volume of urine and more frequently with an urge to go to the bathroom
- Frequency: Every few hours – overall 12 times/day
- Nocturia 3-4 times/day
- Nil incontinence, Nil retention
- Nil haematuria, Nil discharge, Nil catheter use

Sexual history
- One long term partner, wife of 25 years
- No discharge
- No previous STIs

Past medical history
- Mild COPD – diagnosed 2 years ago. Managed well
- No UTIs ever, Nil prostate issues, Nil renal failure, Nil previous stones/kidney infections
- Nil diabetes

Medication history
- Salbutamol (PRN) and Seretide (2 puffs BD) inhalers
- Nil known drug allergies

Social history
- Smoking: Ex-smoker (one pack for 20 years) – quit 2 years ago
- Alcohol: Drinks a can of beer per night
- Recreational drugs: Nil
- Occupation: Electrician
- Lives at home with wife

Family history
- Nil

At 5 minutes the examiner will stop the student and ask her/him to:
- "What are your top 2 differential diagnoses?"
- "What further investigations would you like to perform?"

Examiner Instructions

Please verify that you are examining the correct student by checking the name on the student's ID card against the name on the score sheet, as the student enters the room.

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- Take an appropriate history
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    - Please provide further investigations you would perform

You do not need to examine the patient.

[The examiner in the room will assume the role of the GP]

Instructions

- You are playing the role of the GP in this exam. Please address the student as a GP would, after you have checked ID. Please do not provide prompts on the station content.
- Stay out of the line of sight between the candidate and the patient during the physical exam. Do not provide any positive or negative feedback to the candidate.
- Please record your observations on the scoresheet **as you go**, as discussed in the briefing.
- The candidate has 5 minutes to complete a history**. At 5 minutes, stop the candidate and state the following:**
    - "What are your top 2 differential diagnoses?"
    - "What further investigations would you like to perform?"
- You have two minutes between candidates to finalise your scoring and 'reset' the station.

Aim of this station:

- Understanding genito-urological history taking

Props and Sundries

- Simulated patient
- Handwash

Author – Hiroki Hayashi and Grace Low

ID Check
(please tick)
☐

OSCE Score Sheet

Station 1- Dysuria history

Student Name/Number……..

Examiners Name: …… SP: ……

No.	Assessment Item (details)	PLEASE MAKE ONE TICK IN EVERY ROW
1	**Infection Control and Introduces self** appropriately washes hands before, introduces self, appropriately washes hands after	0 1 2 3
2	**History of Presenting Complaint** Onset, Duration/Timeline, Exacerbating/Relieving, Severity, Previous episodes	0 1 2 3 4 5
3	**Associated symptoms (General)** Fever, Nausea/Vomiting, Weight loss/Night sweats, Pain along urinary tract/back, Sexual dysfunction, Sexual contacts	0 1 2 3 4 5 6
4	**Associated symptoms (Urological)** Voiding: Hesitancy, Dribbling, Poor stream, Incontinence Storage: Volume of urine, Frequency, Urgency, Nocturia, Retention Infection: Dysuria, Haematuria, Discharge, Catheter use	0 1 2 3 4 5 6 7 8 9 10
5	**Past medical history** No previous UTIs, Prostate issues, Renal failure, Previous stones/kidney infections, Diabetes	0 1 2 3 4 5
6	**Other history (max 6 marks)** Previous urological surgeries, Family history of urological conditions (Cancers), Medications history, Allergies, Social history (Smoking, Alcohol), Occupation), Other appropriate	0 1 2 3 4 5 6
7	**Provides appropriate differential diagnosis (max 2 marks)** Cystitis, urethritis (e.g. gonorrhoea, chlamydia), pyelonephritis, epididymitis, prostatitis, BPH, urethral syndrome, interstitial cystitis, genital herpes, reactive arthritis (Reiter's syndrome), malignancy	0 1 2
8	**Communication** Clear explanation for differential diagnoses (2 marks)	0 1 2
9	**Further investigations (max 6 marks)** Examination abdomen, genitalia and prostate, Urine culture, Ultrasound KUB/prostate, CT of abdomen and pelvis, PSA level, Serum FBC, U&Es, Referral to urologist, Follow up	0 1 2 3 4 5 6
10	**CLARITY** (organisation, appropriate confidence)	**1 2 3 4 5 6 7** Confused, disorganised, unclear — Below expected — Above expected — Outstanding
11	**WARMTH** (engagement, compassion, care for patient)	**1 2 3 4 5 6 7** Cold, uncaring, brusque — Below expected — Above expected — Outstanding

Comments: