



## Year 3 Formative OSCE 2019

# Reading for Station 5

## Candidate Instructions

### Clinical Scenario

You are a 4<sup>th</sup> year medical student in the emergency department. 50-year-old Darryl/Dana Cornwell has come in with abdominal pain. He/she has dyslipidaemia, ischemic heart disease and drinks 20 units of eTOH a week.

Temperature: 37.8oC

Blood pressure: 112/72mmHg

Heart rate: 106 bpm

Respiration rate: 24 bpm

BMI: 30

### Task

In a total of eight (8) minutes:

- Perform a focussed abdominal examination in 5 minutes
- **At 5 minutes:**
  - You will be given a set of results. Please interpret them and provide two differential diagnoses with the rationale to the registrar
  - Also provide an initial management plan to the registrar

You do not need to take a history from the patient. However, the patient will answer any questions you may have.

[The examiner in the room will assume the role of the ED registrar]

## Simulated Patient Information

The candidate has the following scenario and task

### Clinical Scenario

You are a 4<sup>th</sup> year medical student in the emergency department. 50-year-old Darryl/Dana Cornwell has come in with abdominal pain. He/she has dyslipidaemia, ischemic heart disease and drinks 20 units of eTOH a week.

Temperature: 37.8oC; Blood pressure: 112/72mmHg; Heart rate: 106 bpm; Respiration rate: 24 bpm; BMI: 30kg/m<sup>2</sup>

### Task

In a total of eight (8) minutes:

- Perform a focussed abdominal examination in 5 minutes
- At 5 minutes:
  - You will be given a set of results. Please interpret them and provide two differential diagnoses with the rationale to the registrar
  - Also provide an initial management plan to the registrar

You do not need to take a history from the patient. However, the patient will answer any questions you may have.

### Instructions for simulated patient

- Your name is Darryl/Dana Cornwell and your DOB is 05/05/1969 (aged 50)
- You are wearing casual clothes and you are sitting hunched forward on the side of the bed
- You may be asked to remove your shirt

### Examination instructions

- Act as if you have 3/10 abdominal pain in the epigastric region, but it has significantly improved after you were given IV morphine
- If asked where the pain is, point to the epigastric region.
- If asked whether it radiates, say it radiates to the back
- When asked to lie down on the bed, do as instructed and then state that the pain has gotten worse.
- When the abdomen is palpated, there is mild tenderness all around, but it is significantly worse in the epigastric region

## 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.

### The candidate has the following scenario and task

#### Clinical Scenario

You are a 4<sup>th</sup> year medical student in the emergency department. 50-year-old Darryl/Dana Cornwell has come in with abdominal pain. He/she has dyslipidaemia, ischemic heart disease and drinks 20 units of eTOH a week.

Temperature: 37.8oC; Blood pressure: 112/72mmHg; Heart rate: 106 bpm; Respiration rate: 24 bpm; BMI: 30kg/m<sup>2</sup>

#### Task

In a total of eight (8) minutes:

- Perform a focussed abdominal examination in 5 minutes
  - Note: You do not need to examine the peripheries
- At 5 minutes:
  - You will be given a set of results. Please interpret them and provide three differential diagnoses with the rationale to the registrar
  - Also provide an initial management plan to the registrar

You do not need to take a history from the patient. However, the patient will answer any questions you may have.

[The examiner in the room will assume the role of the ED registrar]

#### Instructions

- You are playing the role of the ED registrar in this exam. Please address the student as an ED registrar 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, give the blood test results (FBC and LFTs) and state the following:**
  - "Using the information you obtained in the abdominal examination and the blood test results, explain your top three differential diagnoses and initial management plan for this patient"
- You have two minutes between candidates to finalise your scoring and 'reset' the station.

#### Aim of this station:

- Performing an appropriate abdominal examination
- Interpreting blood test results
- Understanding the management for an acute pancreatitis

#### Props and Sundries

- Simulated patient
- Handwash
- Blood test results (FBC and LFTs)

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Lab results –

Electrolytes – all normal

Hb 140 (135-175)

WCC 15 (4-11)

ALT 150 (20-40)

AST 238 (10-50)

ALP 113 (20-70)

GGT 200 (10-50)

Bilirubin 25 (5-17)

Albumin 37 (35-50)

Lipase 380 (5-20)

**OSCE Score Sheet**

**Station 5 – Abdominal exam**

**ID Check**  
(please tick)

Student Name/Number.....

Examiners Name: .....

SP: .....

No.	Assessment Item (details)	PLEASE MAKE ONE TICK IN EVERY ROW						
1	<b>Infection Control and Introduces self</b> Appropriately washes hands before, Introduces self, Appropriately washes hands after, Correctly positions patient, Appropriately gains consent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	
2	<b>General inspection (max 6 marks)</b> Distress/Pain, Breathing, Jaundice, Cachexia, Generalised skin pigmentation, Consciousness, Other appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	6
3	<b>Abdomen inspection (max 6 marks)</b> Scars, Striae, Pulsations, Peristalsis, Masses, Hernias, Distention, Caput medusa, Altered hair pattern	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	6
4	<b>Abdomen palpation</b> Light palpation of 9 regions, Deep palpation of 9 regions, Checks for rebound tenderness/guarding/rigidity, Palpates liver edge, Palpates spleen edge, Ballots kidneys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	6
5	<b>Abdomen special tests</b> Assesses fluid thrill/shifting dullness, Murphy's sign, McBurney's sign, Assesses abdominal aorta,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4		
6	<b>Abdomen Percussion and Auscultation</b> Percusses liver, Percusses spleen, Attempt to percuss bladder Auscultates bowel sounds, Abdominal bruits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	
9	<b>Provisional diagnosis (max 3 marks)</b> Pancreatitis, Cholecystitis, Choledocholithiasis, Pancreatic cancer, Aortic dissection, Other appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3			
8	<b>Reasoning</b> Correct interpretation of blood test results, Includes examination findings and/or vitals to assist with reasoning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2				
9	<b>Management (max 6 marks)</b> Admit to hospital, Fluid resuscitation, Analgesia, Nil by mouth, Nutrition, Antibiotics, Imaging, Observation, Surgical referral, Other appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		0	1	2	3	4	5	6
10	<b>CLARITY</b> (organisation, appropriate confidence)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		1	2	3	4	5	6	7
		Confused, disorganised, unclear		Below expected		Above expected		Outstanding
11	<b>WARMTH</b> (engagement, compassion, care for patient)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		1	2	3	4	5	6	7
		Cold, uncaring, brusque		Below expected		Above expected		Outstanding

**Comments:**