

Station Vignette

You are a third-year student on GP rotation.

The GP has asked you to take a brief history from Josephine Broadbeach, a 25-year-old man who has come into the practice with severe abdominal pain.

Vital signs:

- **Temperature:** 37.1 degrees Celsius.

- **Blood pressure:** 110/60 mmHg.

Heart rate: 95/minute.Respirations: 16/minute.

- **BMI:** 24 kg/m².

TASK

You have a total of **7 minutes** to take a history.

This includes:

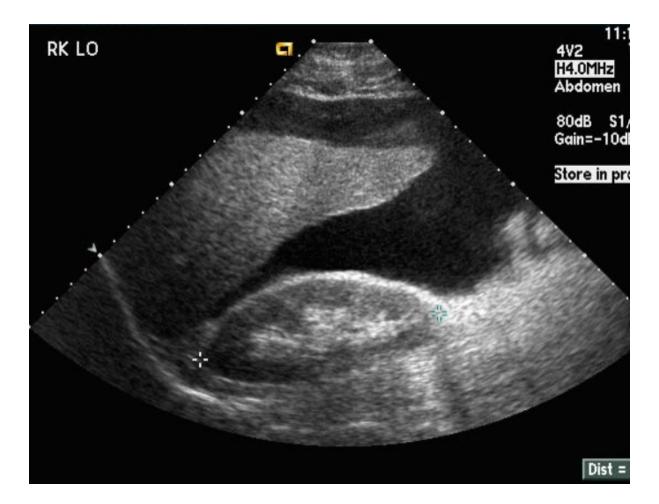
- History of presenting complaint
- Constitutional history
- Past medical history
- Medications history
- Social history
- Family history
- Focussed systems review.

At the end of the allotted time, you will have **1 minute** to answer the examiner's questions.

You do **NOT** need to complete a physical examination.

EXAMINER QUESTIONS

- 1. List three (3) initial investigations that you would order for this patient?
- 2. Briefly interpret this transabdominal ultrasound.



3. State the **agent of choice** for the medical management of an ectopic pregnancy and the **type of surgery** performed for the management of an ectopic pregnancy in a haemodynamically unstable patient.

	Question	Patient Information	Mark
Introduction			
Presenting complaint		Severe pain on the right lower side of the abdomen.	/1
Pain history	Site Onset Character Radiation Associated symptoms Timing Exacerbating/relieving factors Severity General health	 S - Right lower abdomen. − 2 days. C - Sharp. R - No radiation. A - Associated with vomiting. T - Constant. E - Exacerbated by any movement, some relief with vomiting. S - 8 out of 10. 	17
General/constitutional history	Rashes Energy levels Weight changes Appetite Diet Night sweats, fevers, and chills	 □ Generally been well but has been almost bedridden for the past 2 days. □ No rashes. □ Decreased energy due to pain. □ No weight changes recently. □ Greatly decreased appetite. □ Diet normally includes all food groups. □ Night sweats or chills not present. Has been feeling a little cold over the past day but has not measured temperature. □ Sleep has been good overall, but pain has greatly impacted it over the past 2 days. 	/8
Systems review	 Menstrual Duration and amount. Menarche. Intermenstrual bleeding. Post-coital bleeding. Dysmenorrhoea. 	Menstrual □ Typically 4 to 6 days of bleeding with 25 days in between. Periods are regular. □ Bleeds through four tampons per day. □ Menarche at the age of 14. □ No bleeding between periods. □ No post-coital bleeding. □ Periods are painful for the first 2 to 3 days, but this settles.	/16
	Sexual Activity.	Sexual	

	Type of sex.	☐ Sexually active, practices
	 Partners. 	vaginal sex.
		☐ Has one regular partner.
		Have been practicing sex
	History of sexually	for the past 3 months.
	transmitted infections	☐ Has been tested for STIs
	(STIs).	in the past but has never
	,	actually had one.
	Dyspareunia.	- I
		□ No pain on sexual
	Discharge.	intercourse.
		□ Normal clear vaginal
	 Contraceptive use. 	discharge.
		□ On the combined oral
		contraceptive pill, and
		intermittently uses
		condoms.
	Obstetric	Obstetric
	 Past pregnancies. 	□ Never been pregnant.
	 Current pregnancy. 	☐ Has not taken a
	Current programoy.	pregnancy test since
		symptoms arose.
		Symptoms arose.
	Urinary	Urinary
	Officery	No urinary symptoms.
		No utiliary symptoms.
	Gastrointestinal	Gastrointestinal
	Pain.	☐ Pain is confined to the
		right lower abdomen.
	 Nausea and vomiting. 	☐ Has vomited around three
		times per day in the last 2
		days. Vomitus was clear
		initially but has now turned
		green. No blood can be
		seen.
Medications history	Prescribed, over the	□ No other medication other /2
and allergies	counter, and herbal	than the combined oral
_	remedies	contraceptive pill.
		□ No allergies.
	Allergies	
Medical history	Past and current medical	□ No past medical /1
	conditions	conditions.
Surgical history	Surgical procedures	□ No past surgical /1
		procedures.
Social history	Home situation	☐ Things are well at home. /6
	Occupation	☐ Hairdresser (not too
		stressful).
	Immunisations	
		Up to date with immunisations.
	Substance use (smoking,	
	alcohol, and recreational	□ Never smoked, consumes
	drugs)	2 standard drinks per night
	urugs <i>)</i>	on the weekends. Never
	Travel	taken any recreational
	i i avei	drugs.
	Data	□ Not travelled anywhere
	Pets	recently.
		-

		□ No pets at home.	
Family history	Parents' health Conditions that run in the family	 Both parents alive and well. Mother suffered from endometriosis. No conditions run in family. 	/2
Questions	□□□ Q1 – 3 of: Bedside: ECG, urine beta-hCG, and urinalysis. Blood investigations: FBC, LFTs, UCEs, and serum beta-hCG. Imaging: Pelvic and/or transvaginal ultrasound. □ Q2 – There is the presence of free fluid in Morrison's pouch (hepatorenal recess). The liver and kidneys themselves appear normal. □□ Q3 – Methotrexate is the medical agent of choice. A salpingectomy is usually performed if the patient is haemodynamically unstable.		/6
Communication skills	 □ Appropriate questioning style □ Actively listens to patient □ Systematic approach to history taking □ Appropriate conclusion and summary 		/4
Global score	Overall impression of candidate based on warmth, clarity and competence: 1 = fail 2 = borderline 3 = pass/expected 4 = good 5 = excellent		/5
Total score			/59
Comments:			