

OSCE History Taking – Notes for Actor Template

Patient demographics:

43-year-old female presenting rash
Location: GP practice

Presenting Complaint:

Itchy rash

History of Presenting Complaint:

Red itchy rash on lower back that started 3 weeks ago gradually.
Rash is red in colour and has some white stuff over it.
It peels sometimes but not that much when scratching
Always been there, tried some lotion but didn't help
Had some joint pains but been happening for 2 year now

Other history:

No red flags change of colour or non-blanching
No other symptoms

ICE

Concerned because affecting job and doesn't know what it is. Wants some cream.

PMH + Surgical History

Obesity
Hypertension
IBD – Crohns

Drug History

Atorvastatin
Lisinopril

Family History

No significant

Social History

Smoker for last 10 years – 20 a day
Never had alcohol
Lives with wife and works as waiter which has him up on his feet a lot
Has 1 children that all live abroad

Diagnosis

Psoriasis

OSCE History Taking – Notes for Candidate Template

Role: FY1 in GP

Presenting complaint: Itchy rash

Please take a history in 8 minutes

There will be 2-minute further questions from examiner at the end

OSCE History Taking – Examiner marksheet

Opening:

- Introduces themselves
- Confirms Patient demographics
- Explains and gains consent from patient about consultation

Presenting complaint and History of presenting complaint:

- Open questioning to begin
- Structured approach e.g. SQITARS
- Red flags – growing rapidly, change in colour, pain and peeling skin, joint pains (psoriatic arthritis)
- ICE
- Uses clear language and avoids jargon

Systemic enquiry:

- Screens for relevant symptoms in other body systems

PMH/Surgical history

- Asks about any medical conditions
- Asks about relevant surgical procedures

Drug History, Social and Family History:

- Asks about both prescribed and over the counter medication
- Allergies and what happens during allergy
- Substance misuse
- Alcohol and Smoking history
- Occupation
- Support at home/mobility
- Relevant Family History

Ending consultation:

- Summaries and clarifies any points
- Thanks Patient
- Signposting

EXAMINER FOLLOW UP QUESTIONS:

- 1. What is your top differential diagnosis and why?**
Psoriasis – reasonably explanation
- 2. What initial investigations/examinations would you order for this patient?**
None required clinical diagnosis – may do biopsy
- 3. What is your initial management plan?**
Avoid stress
Emollients and vitamin D, steroids for flare ups

Global Impression:

- Excellent
- Good
- Pass
- Borderline
- Fail

Patient Impression/comments: