

## **Managing uncertainty 2**

Managing Uncertainty Station 11 - Notes for candidates

Patient: Sylvia Jackson

Setting: GP surgery

You are Working as a foundation doctor in General Practice and you are about to see Sylvia who has been losing weight the past few months.

You will need to:

- 0-5 minutes - take a focused history from the patient. You will then be told the examination findings.
- 5-10 minutes - explain your differential diagnosis and your suggested management to the patient

## Managing Uncertainty 2 - Information for the actor

### Sylvia Jackson - 74 years old female

#### History of presenting complaint

- She has been losing weight for the past 3 months. Started when she moved with husband to a new locality as they had to sell their house for a bungalow.

#### Presenting information/ Questions to ask

- She has not measured herself but has gone down three clothing sizes.
- Intentional / Unintentional - unintentional due to feeling like she has no appetite any longer.
- Feels nauseous every time she looks at food. She has been trying to force herself to eat but can only ever manage a little before getting tired again.
- Denies abdominal pain or swallowing difficulties.
- Has been passing urine well.
- Not noticed any changes to her bowel habits - normally alternates between constipation and diarrhea. No blood or mucus in stool.
- Systems review: No haemoptysis, no SOB, no issues with aches and pains in the body.

#### PMH + Surgical History

- Had a hysterectomy and bilateral salpingo-oophorectomy 5 years ago for endometrial cancer 5 years ago.
- Diabetes

#### Drugs History

- Metformin.

#### Family History

- Mother also had ovarian cancer.

#### Social History:

- Lives at home with husband
- Husband has dementia so she is his full time carer
- Ex - smoker, quit 3 years ago, had smoked for 40 years prior.
- Socially drinks alcohol

#### Mood:

- Feels very sad and has had continuous thoughts about worst case scenarios.
- Has become very impatient with her husband and friends. Feels very irritable when doing shopping / household chores.
- No longer wants to go out of the house and see people as she is partly tired and partly cannot be motivated to go.

#### ICE:

- I - no idea what is going on but feels like she felt similar to this when she got diagnosed with cancer
- C - Mainly concerned that it is the cancer coming back and worried about care of the husband as sons live in Australia.
- E - She would like an answer today about what is going on as she has spent the last few months thinking about this and it's making her very poorly. If it is something and she would like to put things into place so her husband is cared for.

### Examination Findings:

#### Observations:

- RR: 18
- O2: 98 % RA
- Temp: 36.7
- HR: 99
- Bp: 120/77

#### Examination:

- Pulse: Regular, fast
- HS 1+2 +0
- Abdomen soft non-tender
- Breath sounds clear, bilateral air entry
- Calves soft non-tender
- No palpable lymph nodes

#### Differential List:

- Haematological: Anaemia (FBC) (Could be leading to tiredness, could be that she is losing microcytic amounts of blood in her stools, lack of iron in diet)
- Endocrine: Hyperthyroidism ( TFT) - restlessness, agitation
- GI: Malignancy ( Stress management, urgent blood tests, OGD referral under 2 WW) - Weight loss, early satiety, nausea and vomiting, previous history of cancer.
- Psychiatric: Depression, Anxiety (GP practice can send questionnaires) - all symptoms can be explained by anxiety/ depression + full time career = carer burden + new area to navigate recently.

Most likely diagnosis is a malignancy. A lot of the symptoms fit in with the possibility of a malignancy. Explain will rule out some of the more common other differentials such as anaemia with FBC, Thyroid conditions with TFTs. CRP and autoantibody screen to rule out other systemic conditions. As for the concerns regarding it being cancer : there are features that are highly suspicious of a cancer. So will do OGD under 2 week wait in order to rule this out.

Give advice on how to manage stress, exercise, diet - as symptoms can also be explained by chronic levels of anxiety with the addition of a new change in life with moving houses. But this is mainly a diagnosis of exclusion.

Apologize that cannot give an answer in this consultation as there are a few different possibilities and investigations will help aid diagnosis.

Give safety netting advice.

## Managing Uncertainty 2 - Examiner Marksheet

<b>Marking Rubric</b>	
<b>Opening</b> <ul style="list-style-type: none"><li>• Introduces themselves</li><li>• Confirms Patient Demographics</li><li>• Explains and gains consent from patient about consultation</li></ul>	
<b>Communication and consultation skills</b> <ul style="list-style-type: none"><li>• Demonstrates sensitivity and empathy in questioning</li><li>• Explains differential diagnosis clearly avoiding jargon</li><li>• Explains management plans with empathy and sensitivity</li><li>• Achieves a shared understanding of the nature of the problem</li></ul>	
<b>Data Gathering</b> <ul style="list-style-type: none"><li>• Establishes focused presenting complaint and associated supporting history</li><li>• Explores symptoms in adequate depth</li><li>• Asks specifically about relevant red flag symptoms</li><li>• Is well - organized / systematic in approach to data - gathering</li></ul>	
<b>Management of patient</b> <ul style="list-style-type: none"><li>• Investigations to consider (FBC, CRP, TFT), stool sample (calprotectin),</li><li>• Possibly also sigmoidoscopy/ colonoscopy</li><li>• Discuss appropriate treatment to include diet</li><li>• Discuss management of stress</li></ul>	
<b>Patient centered care</b> <ul style="list-style-type: none"><li>• Effectively explores patients ideas, concerns, expectations</li><li>• Acknowledges patients agenda - demonstrates understanding of issues and challenges of patient</li><li>• Effectively negotiates an acceptable and appropriate management plan with patient</li></ul>	
<b>Professionalism</b> <ul style="list-style-type: none"><li>• Demonstrates professionalism during the consultation</li><li>• Demonstrates good time management skills</li><li>• Identifies and advices for patient safety issues</li></ul>	

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