OSCE History Taking – Notes for Actor

Patient demographics:

21-year-old male presenting with abdominal pain

Location: Surgical Assessment Unit

Presenting Complaint:

Abdominal pain

History of Presenting Complaint:

S - Right sided pain

Q - sharp pain

I - 9 out of 10

T – started 6 hours ago

A – coughing makes worse

R - none, tired paracetamol but not helped

S – fever, vomited once only a little bit but no blood

If asked about radiation then say started in centre then moved to the right.

Other history:

No red flags such as weight loss, blood or any other symptoms Never had anything similar

ICE

No idea what it is but afraid it could be cancer as family history with granddad having bowel cancer in 40s. Just wants the pain to go away.

PMH + Surgical History

Asthmatic but well controlled with inhalers No surgical history

Drug History

Just inhalers – SABA and ICS Allergic to penicillin – rash No substance misuse

Family History

Bowel cancer – grandad in his 40s No other

Social History

Student that drinks socially Never smoked Healthy diet and exercises regularly at gym

Diagnosis

Acute Appendicitis

OSCE History Taking – Notes for Candidate Template

Role: Junior doctor on surgical assessments unit

Presenting complaint: 21-year-old male presenting with abdominal pain

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
- ICE
- Uses clear language and avoids jargon
- Asks about radiation
- Askes about upper GI symptoms
- Reassures patient

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?

Acute appendicitis – reasonable explanation

2. What initial investigations/examinations would you order for this patient?

FBC, U&Es, CRP, ESR Ultrasound, CT

3. What is your initial management plan?

Surgery

Global Impression:

Patient Impression/comments:

- Excellent
- Good
- Pass
- Borderline
- Fail