

OSCE History Taking – Notes for Actor

Patient demographics:

57-Year-Old female presenting weight gain and abdominal distension
Location: Medical assessment unit

Presenting Complaint:

Weight gain and abdominal distension

History of Presenting Complaint:

Noticed put on weight in last couple of months and don't know why because eating the same. Used to be 60 kg now 68kg

If asked to express further: say arms look a bit thin and abdomen looks bigger

Deny any GI symptoms – such as vomiting, diarrhoea and constipation, bowel and urine normal. But do have some lines that are purple on my lower stomach

Friends say my face is different – looks more round

Feeling tired all the time too

Other history:

Flu like symptoms last week

ICE

Concerned about weight and appearance

PMH + Surgical History

Hypothyroid – well controlled

Crohn's disease – on high dose steroids as is severe

Drug History

On steroid but can't remember name started about 6 months ago

Levothyroxine

No over the counter or substance misuse

Family History

None

Social History

Smokes – 15 a day for 30 years

Doesn't drink

Lives with husband – no children

Independent

Diet isn't the best and exercises when gets the chance

Works as teacher

Diagnosis

Cushing's disease

OSCE History Taking – Notes for Candidate Template

Role: Junior doctor on medical assessment unit

Presenting complaint: 57-Year-Old female presenting with weight gain and abdominal distension

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
- Empathetic about concerns and reassures
- Asks about GI causes
- Gets changes to arm and face

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 happen 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?**
Cushing disease/syndrome – reasonable explanation
Eating disorder
Hypothyroidism/ constipation

- 2. What are the two tests used for diagnosis of this condition?**
Overnight dexamethasone suppression test
24hr urinary free cortisol

- 3. What is your initial management plan as a FY1?**
Referral to endocrinology
Treatment depends on cause

Global Impression:

- Excellent
- Good
- Pass
- Borderline
- Fail

Patient Impression/comments: