

## OSCE History Taking – Notes for Actor

### **Patient demographics:**

56-Year-Old presenting with chest pain

Location: Medical assessment unit

### **Presenting Complaint:**

Central chest pain

### **History of Presenting Complaint:**

**S** – Central

**Q** – sharp

**I** – 8/10

**T** – started days ago but gradually got worse

**A** – standing up

**R** – when tying shoelaces (sitting forwards)

**S** – bit short of breath

### **Other history:**

Flu like symptoms last week

### **ICE**

Concerned it might be something sinister as has history of heart problems in family and wants to rule this out.

### **PMH + Surgical History**

Obese

Hypertension

Appendectomy when younger

### **Drug History**

Ramipril

Vitamin tablets

No over the counter or substance misuse

### **Family History**

Dad had heart attack aged 65

Diabetes in both grandparents

### **Social History**

Smokes – 20 a day for 20 years

Doesn't drink

Lives with wife and has 2 children at university

Independent

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

Works as a builder

### **Diagnosis**

Acute Pericarditis

## **OSCE History Taking – Notes for Candidate Template**

**Role:** Junior doctor on medical assessment unit

**Presenting complaint:** 56-Year-Old presenting with chest 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
- Empathetic about concerns and reassures
- Gets that pain relieved by leaning forward

### **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?**  
Acute pericarditis – with reasonably explanation
- 2. What initial investigations/examinations would you order for this patient?**  
ECG  
FBC, U&Es, ESR, Troponin,  
CXR, ECHO
- 3. What is your initial management plan?**  
NSAIDS or aspirin for 1-2 weeks with PPI and then review

**Global Impression:**

- Excellent
- Good
- Pass
- Borderline
- Fail

**Patient Impression/comments:**