Child Health - Student Instructions

Child Health Station (20 minutes)

Patient:

Callie Dunne

24 Queens Road, Leicester, LE8 9XX

DOB: 14/10/23 S number: S2795073

You are a foundation doctor working in the children's emergency department.

Callie Dunne, 4 months old has been brought in by the paramedics, accompanied by her mother Beth, with Vomiting.

The child will <u>not</u> be present in the station. You will be consulting with Lizzie.

You will be expected to:

0-10 minutes:

- 1. Make an assessment of the child (8 minutes) by:
- a) Reviewing any clinical assessment data present in the station.
- b) Plotting Callie's height and weight on a growth chart
- c) Taking a history from Beth (mother). You should spend most of the 8 minutes doing this.
- **2.** Answer the examiner's questions about the case (2 minutes).

10-20 minutes:

The examiner will show you some test results and give you some further information.

Manage the case by:

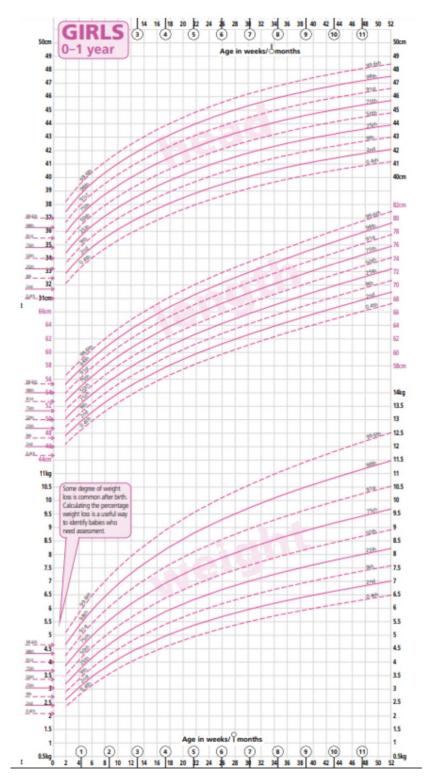
- a) Writing a prescription for Callie
- b) Having a discussion with Beth

If you have not completed your prescription by 15 minutes, the examiner will move you on to the discussion with the caregiver.

Child Health - Patient Instructions

- Patient Diagnosis: GORD

- Weight & Height: 6.5kg & 62cm



- Patient history:
 - o PC: Vomiting
 - o HPC:
 - 1.5 week history of vomiting after breastfeeding
 - Vomit appears milky and in moderate amounts

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- Seen by GP one week ago, who recommended trial of a thickened formula, but no benefit
- Other symptoms
 - Cries after feeding
 - Sometimes bends her back and brings her knees upto her chest
- Systems review
 - No fever, rash, bruise, bleeding, lumps
 - Producing wet nappies, no behavioural change (e.g drowsiness, lethargy)
- o PMHx
 - Uncomplicated vaginal delivery at term
 - No issues in pregnancy
 - Meeting milestones and upto date with immunisations
- DHx + Allergies: No allergies
- o FHx: None
- \circ SHx
 - Lives with both parents, No siblings
 - No smokers in the house
 - Never needed the attention of child services
 - No one ill at home
- o ICE
 - Ideas: Am I over-feeding?
 - Concerns: Worried she won't grow healthily
 - Expectations: To know what is going on
- Patient questions:
 - What does Callie have and is it the same as heartburn in adults?
 - o Why does she keep vomiting?
 - o Will this go away on its own and when?
 - o Is there anything I can do other than give her what you've prescribed?

Child Health - Examiner Marksheet

Markin	g Criteria	Tick ()
1.	Correct plotting of Growth Chart	
2.	Introduction	
3.	Professional attitude and patient friendly manner maintained throughout the history	
4.	PC PC	
5.	HPC	
-	Asks open questions, makes use of a structure	
-	Asks if patient has tried anything else so far	
6.	Other relevant symptoms + appropriate systems review	
7.	PMHx	
-	Asks about Birth & Pregnancy history	
-	Asks about Milestones & Immunisations	
8.	DHx + Allergies	
9.	FHx	
10.	SHx	
-	Asks about safeguarding	
-	Asks if anyone ill at home	
11.	ICE	
12.	Examiner questions correctly answered	
13.	Appropriate medication correctly prescribed.	
-	Patient details correctly recorded, allergies, correct medication in	
	capitals, correct dose, correct route, written in the correct place,	
	signed and dated. Move them on after 5 minutes.	
See bel	ow	
14.	Answers patient's questions with factually correct information and in a	
	sensitive way. Chunks and checks information. Correct signposting and safety-netting.	
_	Explains what GORD in children is	
_	Explains pathophysiology without using jargon	
_	Offers factually correct conservative management strategies	

Question 1: What is the most likely diagnosis?

Paediatric GORD

Question 2: List two Differentials? Gastroenteritis, Pyloric Stenosis

Question 3: What would your next management steps be?

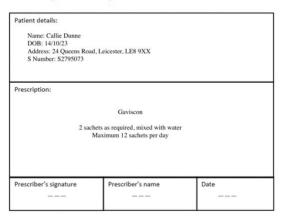
Trial Alginate (Gaviscon)

Conservative management options (Smaller more frequent feeds, Upright feeding)

Question 4: How would this condition be managed surgically, if refractory to pharmacological care? Fundoplication

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Outpatient prescription



Global Impression:

Patient Impression/comments:

- Excellent
- Good
- Pass
- Borderline
- Fail