

Post-operative Management- Notes for Actor

Patient demographics:

You are Alex Williams, a 52 year old male recovering on the post-operative ward 2 days after a Tibial Fracture Repair, when you notice your right leg looking redder than the other.

Presenting Complaint: Red Leg

History of Presenting Complaint:

- First noticed a red 'rash' last night while inspecting his cast on right leg
- In the morning it seems to have spread and the margins look irregular

Additional symptoms and Negative History (ONLY IF ASKED)

- Skin feels Warm in the area + when touching forehead
- No Pain, No Shortness of Breath

ICE

I: None

C: Worried about a Clot

E: Want to know what's going on

PMH + Surgical History:

- None

Drug History

- None, No Allergies

Family History

- None

Diagnosis: Cellulitis

Post-operative Management- Notes for Candidate

Role: Foundation Year 1 doctor on the post-operative ward

Presenting complaint: Red Leg

This Alex Williams, a 52-year-old male who is on the post-operative ward complaining of a Red Leg

Please take a brief history from this patient, you have 3 minutes to do so.

Then briefly outline to the examiner the physical exam you would do and what you would look for, you will have 2 minutes.

Then you will be asked to interpret some investigations for 3 minutes.

There will be 2-minutes of further questions from examiner at the end

Post-operative Management- Examiner Marksheet

History:

“Please take a brief history from the patient”

- Student takes a brief and focused history, SQITARS for Leg Pain
- Asks about relevant symptoms such as Fever and Shortness of Breath
- Quick scan of relevant PMHx, DHx (including allergies) and FHx
- Asks about what surgery the patient had

Examination:

“Please briefly state what examination you would do and what you would look for”

- Observations to check for haemodynamic instability
- Examination of the leg after Cast removal to Assess for: Rash, Swelling, Colour change, Warmth
- Neurovascular exam:- Bilaterally assess: Temperature, Lower Limb Pulses, Distal Sensation
- Cardiovascular exam: Pulse, Auscultation
- Respiratory exam: Respiratory Rate, Air entry, Breath sounds, Percussion

“On examination, the patient has a Warm, Red Right Leg without any Swelling. No wounds seen”
Respiratory and Cardiovascular exams are completely normal”

Investigation interpretation:

“Please interpret the following investigations” (hand them interpretation page)

- FBC, CRP: High WCC, High CRP
- U&Es, LFT: Normal
- Blood Culture: Staph aureus

Follow-up Questions:

Q1: What is your top differential?

Cellulitis

Q2: List another Differential?

DVT/ Necrotising Fasciitis/ Sepsis

Q3: How would you manage Jason?

Mark border, Analgesia, Elevation, Antipyretic, Oral Flucloxacillin, Can consider MRSA cover

Global Impression

- Excellent
- Good
- Pass
- Borderline
- Fail

Patient Impression/ Comments:

Post-operative Management- Investigations for Interpretation

Hb (135 – 180 g/L)	143
Platelets (150 – 400 * 10 ⁹ /L)	223
WCC (4 – 11 * 10 ⁹ /L)	15
Lymphocytes (1.0 – 4.0 x 10 ⁹ /L)	6
Neutrophils (1.8 – 7.5 x 10 ⁹ /L)	9
CRP (<5 mg/L)	71
Serum Sodium (135-145 mmol/l)	139
Serum Potassium (3.5 - 5.0 mmol/l)	4.2
Serum Urea (2 - 7 mmol/l)	5.3
Serum Creatinine (55-120 umol/l)	88

Culture shows: Gram Positive Cocci in Clusters