

Topic: Acute diarrhea

Subject: Pediatrics

ID: 422

What The Candidate Reads

Candidate's Instructions

This is exactly what is posted by the patient's room door.

You will have 1.5 - 2 minutes to read these instructions, before entering the room.

OPENING STEM: A 6-week-old girl is brought by her mother to your office because of the progressively worsening diarrhea.

CANDIDATE'S TASK: In the next 5 minutes, obtain a focused and relevant history from the parent.

At the next station, you will be asked to answer questions about this patient.

PATIENT INFORMATION

This information is what the standardized patient (SP) has memorized.

You will not receive this information on the actual MCCQE Part 2 Exam.

This information is presented in this QBank to assist you in your preparation for the exam.

PATIENT STARTING POSITION: The child is lying on the examination table looking drowsy and lethargic. Her mother is standing by her side stroking her forehead.

CLOTHING: Child is wearing a diaper and a dress.

MAKE-UP: Make up showing dry lips.

PATIENT'S OPENING STATEMENT: Doctor, my baby has diarrhea. It started yesterday and has become worse. This has never happened before. I am worried.

PATIENT BEHAVIOR, AFFECT AND MANNERISMS: Tired.

QUESTIONS PATIENT MUST ASK: Is this an infection?

QUESTIONS PATIENT MAY ASK: How serious is it?

HISTORY OF PRESENT PROBLEM: Onset - yesterday at 1 p.m. Progression - getting worse. Frequency of bowel movements - eight since yesterday 1pm Description of bowel movements - Light brown, watery, large amounts. Blood in stool - No. Wet diapers - Only one since yesterday Associated symptoms - felt a little warm but did not check her temperature. No chills, abdominal pain, nausea or vomiting. Treatment tried - Tylenol for fever Alleviating Factors - None. Aggravating Factors - None. Previous regular bowel movement - yes Not related to oral intake No food intolerance No daycare centre visits. No recent water exposure, animal exposure, upper respiratory infection, travel Noticeable change in appetite No change in sleeping habits.

PATIENT ISSUES: Mother feels that this could be very serious.

RELEVANT MEDICAL HISTORY | ALLERGIES | MEDICATIONS: Uncomplicated spontaneous vaginal delivery.

RELEVANT SOCIAL / FAMILY HISTORY: SH and FS - Noncontributory.

REVIEW OF SYSTEMS: Positive for fever, oliguria, and change in appetite

PATIENT SIMULATION: The child must look drowsy with dry lips.

PHYSICAL FINDINGS: N/A

INFORMATION GIVING: Mother is attentive and maintains good eye contact while the child sleeps calmly throughout the session.

PERTINENT NEGATIVES: No abdominal pain, no melena, no nausea/vomiting, no excessive sleeping, no recent upper respiratory infections.

What the examiner completes

EXAMINER'S CHECKLIST

These are the exact items you need to complete satisfactorily for this case to score the points you need to pass.

During this period you will be observed by a physician examiner who will assess your performance using standardized scoring instruments.

The physician examiner will fill in the bubble for each item completed satisfactorily

- 1) When did the diarrhea start? [Answer: Diarrhea started yesterday at 1 P.M.]
- 2) How is the diarrhea progressing? (Has the diarrhea become worse, better or is it the same?) [Answer: Getting worse]
- 3) What is the frequency of bowel movements? [Answer: She usually goes about 3-4 times a day but since yesterday 1pm she has gone about 8 times.]
- 4) Can you describe the bowel movements? [Answer: Sometimes they appear normal but at worst they are watery and large in amounts. The colour is the usual light brown.]
- 5) Is there any blood in stool? [Answer: No]
- 6) Is the diarrhea related to oral intake? [Answer: No]
- 7) Were there previous regular bowel movements? [Answer: Yes.]
- 8) Does she attend a day care center? [Answer: No.]
- 9) How many wet diapers has she had since the onset of diarrhea? [Answer: Just one since yesterday.]

- 10) Any changes in her appetite since the onset of diarrhea? [Answer: Not as hungry since the onset]
- 11) Has she received all her vaccinations? [Answer: Yes, her vaccinations are up to date.]
- 12) Are there any past medical problems that I should know about? (Past Medical History) [Answer: No.]
- 13) Has she ever had any surgeries? (Past Surgical History) [Answer: No.]
- 14) Have to tried any at home remedies? [Answer: Tried over the counter Tylenol for fever without relief]
- 15) Is she allergic to any medications? [Answer: No.]
- 16) Any food intolerance? [Answer: None so far.]
- 17) Is there any relevant family history? [Answer: No.]
- 18) Tell me about her birth history. (What type of delivery was it? Any complications?) [Answer: Uncomplicated spontaneous vaginal delivery.]
- 19) What are her usual eating habits? [Answer: Breastmilk, Iron fortified formula]
- 20) Does she have any associated symptoms? (fever, chills, nausea or vomiting?) [Answer: She was feeling a little warm but I did not check the temperature. I gave her some Tylenol without relief. No other symptoms.]
- 21) Does she have any abdominal pain when she is having a bowel movement? [Answer: Not that I have noticed]
- 22) Have you travelled with her recently? [Answer: No.]
- 23) Has there been any recent water exposure such as swimming? [Answer: No.]
- 24) Has there been any recent animal exposure? [Answer: No.]
- 25) Any change in her sleeping habits? [Answer: No.]
- 26) Any history of recent upper respiratory infection? [Answer: No.]

27) Tell me about your use of alcohol and tobacco. (Mother's Social History) [Answer: I drink beer occasionally but I avoid breastfeeding until alcohol has cleared from my system.]

SCORING TABLE

The physician examiner will complete this scoring table after your encounter with the patient

If UNSATISFACTORY, please specify why:	
<input type="checkbox"/>	Inadequate medical knowledge and / or provided misinformation
<input type="checkbox"/>	Could not focus in on this patient's problem
<input type="checkbox"/>	Demonstrated poor communication and / or interpersonal skills
<input type="checkbox"/>	Actions taken may harm this patient
<input type="checkbox"/>	Actions taken may be imminently dangerous to this patient
<input type="checkbox"/>	Other: _____
Did this candidate demonstrate a lapse in professional behaviour? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	Disrespectful to others (e.g., to patient, nurse)
<input type="checkbox"/>	Over-investigated / over-managed the patient
<input type="checkbox"/>	Actions raised ethical and / or legal concern
<input type="checkbox"/>	Briefly describe the behaviour for any of the above reasons or any other observed lapse: _____

PATIENT INTERACTION RATING SCALES

Up to a total of seven interaction items may be added to a 10 minute case, depending on the task that candidates are asked to complete. One or two interaction items may be added to a 5 minute case.

Individual interaction items are weighted on their relative importance to each other for a specific station. The weight for the combined items ranges from 10% to 50% of the total score for any one station. The MCC OSCE interaction rating scales are here:

[PATIENT INTERACTION RATING SCALE ITEMS](#)

Look through the Rating Scale file above and select the Patient Interaction items that are relevant to this case.

FOR THIS 5 MINUTE CASE, YOU MAY BE EVALUATED ON ONE OR TWO OF THE

FOLLOWING PATIENT INTERACTION ITEMS:

3, 17

What the candidate receives

POST-ENCOUNTER PROBE (PEP)

These are the sample questions that you will need to answer for this case. The correct answers are included here.

Q1. What is on your differential diagnosis list?

Q2. What is the most appropriate next step in patient care in terms of diagnostic testing?

Q3. What should you advise the mother to do before test results come back?

What the post-encounter probe marker receives

ANSWER KEY		
Q1.	What is on your differential diagnosis list?	Score
A1	Viral gastroenteritis	2
	Bacterial diarrhea	1
	Malabsorption, Overfeeding	1
	Maximum	4
Q2.	What is the most appropriate next step in patient care in terms of diagnostic testing?	Score
A2	Serum Electrolytes	2
	Viral antigen tests of stool (i.e. Rotavirus)	1
	Stool leukocytes, culture, ova, parasitology and pH	1
	Maximum	4
Q3.	What should you advise the mother to do before test results come back?	Score
A3	Replace lost fluids (e.g. Pedialyte)	2
	Drink few sips every few minutes	2
	Continue breastfeeding	2
	Maximum	6