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Compiled and Typed by Furgan Haider Syed

# Preface

The most dreaded of USMLE exams for IMGs, the Step 2 CS, is also one of the most integral parts of your application for residency. There are many reasons for why IMGs find this exam difficult, and this work helps allay one of this aspects, "What question should I be asking my patient?" We are very glad to present you with the notes that we compiled during our preparation for USMLE STEP 2 CS Exam. We would especially like to thank Dr. Majid Aized, Dr. Waqas Ahmed Khan, Dr. Sajeel Anwar, and Dr. Usama Ahmad without whose guidance and support we could not have completed this work. We would be very happy if it can help anyone during the preparation and in pursuit of their post graduate medical training in US, of which USMLE step 2 CS is a core part.

We would also like to provide few suggestions to ensure optimum utilization of these notes:

- These notes <u>should be</u> complimented with CS notes by Dr. Majid Toseef Aized. We followed the
  general outline of how a patient encounter should be as detailed in Dr. Majid's Notes. (There are
  a number of other options such as Iqbalian and Neeraj notes, however we cannot vouch for
  them as strongly as we can for Dr. Majid's.
- Some medical conditions do not have very specific questions, however pertinent clinical
  features can be very easily picked up in the history or review of systems (ROS) and linked to
  arrive at a diagnosis. Hence in these cases we only mention the features opposite the diagnosis
  in brackets.
- The questions have been framed for a person with an average English proficiency, however if you feel the need do reframe the question so that its easier for you, albeit ensuring it makes good literary sense
- As part of compilation we decided to include much less common diagnosis as part of our
  differential as well. We felt it was better to have a longer differential in mind to start your prep
  with, but in the later stages when you begin to time your encounters, if you have arrived at a
  diagnosis, less common causes can be skipped.
- Do not time your encounters or patient notes the first time around you practice them. However to start timing them in your second round aiming for 15 min for the encounter and 11 min for the note. By your third and hopefully final round aim for 13 min for encounter and 10 min for patient note.
- We made mnemonics that we felt would be easy for us to recall, however if you need to come up with your own that would definitely be very helpful.
- These notes **do not replace** texts like First Aid to CS and U. World and we feel that these texts should also be reviewed alongside these notes, especially for writing Patient Note.
- Start typing patient notes from the very first day of preparation of USMLE STEP 2 CS Exam.
- Don't be shy!!Improve your notes by discussing and showing it to others, as it is a very important component of the exam.
- Usually 2 examinations should be done during patient encounter, we recommend doing cardiovascular exam as it can be done in a very short time interval.

• Try practicing the cases multiple times and at least a few times with someone other than your regular study partner as this will significantly help improve confidence. This also helps attempt unexpected cases as the general pattern used is the same.

We wish all of you best of luck for the exams.

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Fundoscopy Rectal exam pelvic exam Jaw Pain MTB DANDA

MI

Tooth ace

Bruxikum: (does your partner notice that you grind

your teeth, any mouth ulcer)
D: Dislocation (popping sound)

A: Arthritis

N: trigeminal neuralgia

D: Dysfunction

A: abuse

SAFEGUARD

ALWAYS OPEN THE BANDAGE FUNDOSCOPY

FULL SKELETAL SURVEY TMJ XRAY

Violence doesn't end on its on, its only increases in severity. The only way to end violence is to get away from your partner necessary supply to a friend and family

# Adult Cases

PAM HUG FOSS PMDC Flu SHOT

#### CLosure:

Thanks for your patience. From the information i have gathered so far from quetsions and examination, i am considering couple of possibilites... But To GET THE BOTTOM OF THIS problem i want to run some tests "WITH YOUR PERMISSION"

meanwhile i would like to keep you under observation and don't indulge in activities that will worsen your condition

# **Upper Abdominal Pain**

Mnemonic: TRYS DHIBE

# **Differential Diagnosis:**

- Stomach: Gastritis, GERD, Gastric cancer
   Pancreas: Pancreatitis, Pancreatic cancer
- RUQ: Hepatitis, Cholecystitis
- MI

#### Questions

- 1. What **T**ype of food aggravates the pain?
- 2. Is there any Relationship between pain and timing of your food intake?
- 3. Have you noticed any Yellowness of your eyes or skin?
- 4. Have you noticed any Distension of your belly?
- 5. Have you noticed any burning sensation in your chest (<u>H</u>eart Burn) or change in taste of your mouth?
- 6. Have you ever been exposed to anybody with similar complaints (Infections)?
- 7. Have you noticed any change in color of your stools or any Blood in the stools?
- 8. Have you **Eaten anything from outside recently?**
- 9. Have you noticed any shortness of breath? Any sweating?

#### Exam

- 1. HEENT
- 2. GIT exam (including Murphy's sign)
- 3. CVS

- 1. Rectal & Pelvic Exam
- 2. EKG
- 3. Stool for occult blood
- 4. ALT/AST/Bilirubin/ALP
- 5. U/S Abdomen
- 6. Upper GI Endoscopy
- 7. HIDA scan
- 8. Noninvasive H. Pylori testing

# Diarrhea

# Differential Diagnosis: Watery, Bloody, Malabsorption

<u>Watery:</u> **GC PHAIL.** Gastroenteritis/Travelers, **C**rohn's Disease, **P**seudomembranous Colitis, **H**yperthyroidism, **A**IDS, **IBS**, **L**actose Intolerance.

Bloody: Ulcerative Colitis, Dysentery, Cancer.

Malabsorption: Pancreatitis, Giardiasis, Celiac Disease.

OFDPAA questions onset,frequency,duration,previous episode,progression,aggravating/relieving factors,associated symptom What do you mean by diarrhea? (You want to find out ---Do you mean increased frequency or increased volume?)

What do your stools look like? (You want to find out --- Are they watery or bloody or fatty? Are your stools abnormally foul smelling?)

# For Watery Diarrhea:

- 1. For Gastroenteritis/Travelers' Diarrhea:
  - a. Have you eaten outside recently?
  - b. Have you travelled recently?
- 2. For **C**rohn's Disease:
  - a. Have you noticed a sense of incomplete evacuation after passing stools?
  - b. Have you noticed a pain in your belly?
- 3. For **P**seudomembranous Colitis:
  - a. Have you been taking antibiotics recently?
- 4. For Hyperthyroidism: (Temp intolerance, Bowel movement)
  - a. Have you noticed racing of heart?
  - b. Have you noticed any skin changes?
  - c. Have you noticed any tremors of hands?
- 5. For AIDS: (IV drug abuse, low grade fever, lymphadenopathy (lumps or bumps) in the body)
- 6. For <u>IBS</u>: (>3 months)
  - a. Have you noticed any relationship of belly pain to bowel movements?
  - b. Have you noticed any alternating diarrhea and constipation?
- 7. For **L**actose Intolerance:
  - a. Have you noticed any relationship of diarrhea with any milk products?

## For Bloody Diarrhea:

- 1. For **U**lcerative Colitis:
  - a. Have you noticed a sense of incomplete evacuation after passing stools?
  - b. Have you noticed a pain in your belly?
  - c. Do you have to rush to defecate?
  - d. Have you noticed skin rash or joint pain?
- 2. For **D**ysentery: (fever, pain abdomen, nausea, eaten outside)
- 3. For **C**ancer: (weight loss, reduced appetite, may have belly pain also )

#### For Malabsorption:

# Are your stools difficult to flush?

# Have you noticed any change in your weight?

- 1. For Pancreatitis: (Alcoholic)
  - a. Do you have a Hx of gallstones?
  - b. Have you noticed belly pain going to the back?
- 2. For Giardiasis:
  - a. Have you been on a hiking trip recently? Or drank from fresh water lake?
- 3. For Celiac Disease:
  - a. Have you noticed any relationship to wheat products or any specific food?

# **Exam**

- 1. HEENT + Thyroid exam
- 2. GIT exam (including Murphy's)
- 3. CVS

- 1. Rectal & Pelvic Exam
- 2. Stool exam for ova and parasites & fecal leukocytes
- 3. TSH, T<sub>3</sub> & T<sub>4</sub>
- 4. ALT/AST/Bilirubin/ALP
- 5. U/S Abdomen
- 6. Colonoscopy
- 7. Serum immunoglobins

# **Blood** in Stools

# Differential Diagnosis: CHAD UF (Lower GI) LPG (Upper GI).

Colon **C**A, **H**emorrhoids, **A**ngiodysplasia, **D**iverticulosis, **U**lcerative colitis, Anal **F**issure, Chronic **L**iver Disease, **P**UD, **G**astritis.

## **Questions**

#### **OFDPAA**

Have you noticed any change in bowel movements?

Is the blood before, mixed or after passing stools?

What is the color of blood? (What you want to find out --Bright red or dark)

Have you vomited ever since? Does it contain blood? (Go to upper GI questions first)

Have you noticed any pain on passing stools? (Go to lower GI questions first)

- 1. For Colorectal CA: (weight and appetite changes, family Hx, changes in bowel movement)
  - a. Have you noticed any change in caliber/thickness of stools?
- 2. For Hemorrhoids: (Fresh blood)
  - a. Have you noticed anything coming out of /protruding from the anus?
- 3. For Angiodysplasia: (Age, Painless heavy bleeding)
- 4. For **D**iverticulosis: (Age, Painless heavy bleeding, constipation)
  - a. What does your primary diet comprise of? (lack of fiber)
- 5. For **U**lcerative colitis: (Abdominal Pain)
  - a. Have you noticed a sense of incomplete evacuation even after passing stools?
  - b. Do you have to rush to defecate?
  - c. Have you noticed joint pain? Or redness of eyes?
- 6. For Anal Fissure: (Painful bleeding, constipation)
- 7. For Chronic Liver Disease: (N/V, Alcohol use, skin changes)
  - a. Have you noticed any distension of your belly?
  - b. Have you noticed enlargement of breasts?
- 8. For **PUD**: (Epigastric pain)
  - a. Is there any relationship between pain and timing of your food intake?
- 9. For **G**astritis: (GERD, NSAIDs)

# <u>Exam</u>

- 1. HEENT
- 2. GIT Exam
- 3. CVS Exam

- 1. Rectal & Pelvic Exam
- 2. Stool for occult blood
- 3. ALT/AST/Bilirubin/ALP
- 4. U/S Abdomen

- 5. Upper GI Endoscopy & Colonoscopy6. Noninvasive H. Pylori testing

# Lower Abdominal Pain

Mnemonic: LMP RT CVS PAP & NV BB DIE

**Differential Diagnosis: RAPED GANDI** 

Pain + multiple partners

abnormal implanatation

Genitourinary: Ruptured ovarian cyst, Adnexal torsion, PID, Ectopic pregnancy, Endometriosis and **D**ysfunctional Uterine Bleeding.

infx of ur genital tract

Gastrointestinal: Gastroenteritis, Appendicitis, Nephrolithiasis, Diverticulitis, IBS/IBD.

# **Questions**

# **Gastrointestinal**

- 1. Do you feel Nauseated?
- 2. Have you **V**omited ever since this illness?
- 3. Have you noticed any change in **B**owel habits?
  - a. If yes, the **EFI** 
    - i. Have you **Eaten outside?**
    - ii. Do you have Fever?
    - iii. Have you ever been exposed to anybody with similar complains (Infection)?
- 4. Have you noticed any Blood in stools?
  - a. If yes, then ABCO
    - i. Amount
    - ii. Color & Clots
    - iii. Before, After or mixed with stools
    - iv. Odour
- 5. What sort of your **D**iet do you usually eat?
- 6. What is the relationship of pain with bowel movement? Any pain during the sleep? (IBS)
- 7. Have you noticed a sense of incomplete Evacuation? Joint pains or oral ulcers?

#### **Genitourinary**

Insert transitional statement for Gynae/ Obs questions.

- 1. When was your LMP?
- 2. When was your first Menstrual period (Menarche)?
- 3. Do you feel Pain during intercourse or defecation?
- 4. Are your cycles Regular?
- 5. How many **Tampons/Pads** do you use on a heavy day?
- 6. Have you noticed **C**rampy pain during menses?
- 7. Have you noticed any Vaginal discharge?
- 8. Have you noticed any **S**potting in between periods?
- 9. Are you Pregnant?

- 10. Have you ever had **A**bortions?
- 11. When was your **L**ast Pap smear?

# <u>Exam</u>

- 1. HEENT
- 2. GIT exam (Rebound Tenderness)
- 3. CVS

- 1. Rectal & Pelvic Exam
- 2. β-HCG
- 3. CBC with Differential, S/E
- 4. Stool for occult blood
- 5. ALT/AST/Bilirubin/ALP
- 6. U/S Abdomen & CT scan Abdomen
- 7. Upper GI Endoscopy
- 8. Colonoscopy
- 9. Laparoscopy

# Testicular Pain

# **Differential Diagnosis: THE OT**

Trauma, Hernia, Epididymitis, Orchitis, Torsion.

onset,frequency,duration,progression,PREVIOUS episode,location,intensity on scale of 10,quality,radiation,aggravating/relieving factors,associated symptoms OFDPLIORAA Questions.

Have you noticed any warmth, redness or swelling of the testicle?

- 1. For Trauma:
- 2. For **H**ernia:
  - a. Have you noticed anything coming into your scrotum?
  - b. Have you noticed any change in bowel habits?
  - c. Have you noticed any relationship of swelling to position or lying down?
- 3. For Epididymitis:
  - a. Have you noticed burning sensation while passing urine?
  - b. Do you have to urinate more frequently than usual?
  - c. Do you have to rush to urinate?
- 4. For **O**rchitis: (Fever)
- hx of viral infx
- a. Have you noticed swelling elsewhere in the body? (Parotid)
- b. Have you noticed any rash on your body?
- 5. For **T**orsion: (Nausea)
  - a. Have you noticed pain in your belly?
  - b. Have you noticed your testicle in an abnormal position?

#### Exam

- 1. HEENT
- 2. GIT exam
- 3. CVS

- 1. Rectal & Pelvic Exam
- 2. CBC with Differential, S/E
- 3. Urinalysis, Urine culture
- 4. U/S testes and abdomen.

# **Knee Pain**

# Mnemonic: WRSS WNT CHOPPF + CITRUS

<u>Differential Diagnosis:</u> Osteoarthritis, Gout, Pseudo gout, Septic Arthritis (Gonococcal and Non Gonococcal), SLE, RA.

IVDU... Travel/trauma/tick bite..rash..Ulcer/urinary discharge../ uveitis... STIFFNESS/SORE THROAT

# **Questions**

- 1. Have you noticed any **W**armth of your joint?
- 2. Have you noticed any Redness of your joint?
- 3. Have you noticed any Stiffness of your joint?
- 4. Have you noticed any Swelling of your joint?
- 5. Have you noticed any Weakness of your joint?
- 6. Have you noticed any **N**umbness or **T**ingling of your joint?
- 7. Have you noticed any dis**C**oloration of your fingers in cold?
- 8. Have you noticed any Hair loss recently?
- 9. Do you have pain in any **Other** joint?
- 10. Have you noticed any discomfort on Exposure to sunlight? (Photosensitivity)
- 11. Have you noticed any Popping sound from knee?
- 12. Do you feel more tired than usual (Fatigue)?

# **Exam**

- 1. HEENT
- 2. Inspect, Palpate, ROM, Motor, Reflexes, Sensations, Pulses, Gait-Compare to the other side.
- 3. CVS MRSP

## I will LIKE TO DO SPECIAL MANUVEURS.

# **Investigations**

Mcmurey... Drawer test

citrus: chest

pain ,cough ,conjuctivitis,insect ,trauma

travel ,rash ,ulcer in the mouth ,urinary

discoloration, stiffness

- 1. CBC with differential, S/E
- 2. ESR
- 3. Arthrocentesis and analysis
- 4. X-ray Knee AP & Lat. view
- 5. CT scan Knee
- 6. MRI Knee
- 7. DEXA scan
- 8. Ca<sup>++</sup> & Vitamin-D levels

# Arm Pain

# Mnemonic: WRSS WNT + CITRUS

## **Differential Diagnosis: MAR FEST**

Muscle strain, Angina/MI, Rotator cuff tear, Fracture, Elder Abuse, Shoulder Dislocation, Tendinitis.

## Questions

- 1. Have you noticed any Warmth of your joint?
- 2. Have you noticed any Redness of your joint?
- 3. Have you noticed any Stiffness of your joint?
- 4. Have you noticed any **S**welling of your joint?
- 5. Have you noticed any **W**eakness of your joint?
- 6. Have you noticed any **N**umbness or **T**ingling of your joint?
- 7. Rule out MI by asking following questions. Text
  - a. Have you noticed any chest pain? If yes, does this pain go to any other part of body?
  - b. Have you noticed any shortness of pain?
  - c. Have you noticed any sweating?
  - d. Have you noticed racing of heart?
- 8. If patient seems quite, afraid and injury seems not consistent with Hx, ask SAFE GARD question.
  - a. Do you feel **S**afe at home?
  - b. Are you **AF**raid of ? F:do ur Family know abt it?
  - c. Do you have any Emergency (Exit) plan?
  - d. Do you have a **G**un at home?
  - e. Is your \_\_\_\_\_\_ <u>A</u>lcoholic?
  - f. How is the **R**elationship of your \_\_\_\_\_ with others?
  - g. Do you feel **D**epressed (Suicidal ideation)?

#### Exam

- 1 HEENT
- 2. Inspect, Palpate, ROM, Motor, Reflexes, Sensations, Pulses Compare to the other side.
- 3. CVS

# **Investigations**

- 1. CBC with differential, S/E
- 2. ESR
- 3. X-ray Shoulder/Arm AP & Lat view
- 4. CT scan Arm
- 5. MRI Shoulder

ARM SLING, rest, pain medication

- 6. Arthrocentesis and analysis
- 7. DEXA scan
- 8. Ca<sup>++</sup> & Vitamin-D levels

# **Back Pain**

Mnemonic: WRSS WNT GLIP + CITRUS

LIM COTS... / MOTIVE

**Differential Diagnosis:** 

Lumber spinal stenosis: improves on bending WOrse on standing MM: bone pain; multiple bone pains... Fatigue/ chest pain/ anemia

**FODS** 

With WNT: Osteoarthritis, Disc Herniation, Fracture, Spondylosis.

Without WNT: Muscle Strain, Metastatic Cancer, Multiple Myeloma, Meningitis, SLE, RA.

## Questions

1. Have you noticed any Warmth of your joint?

BACK PAin with pyelonephritis & hx of stone. Fever

- 2. Have you noticed any Redness of your joint?
- 3. Have you noticed any Stiffness of your joint?
- 4. Have you noticed any Swelling of your joint?
- 5. Have you noticed any **W**eakness of your joint?
- 6. Have you noticed any Numbness or Tingling of your joint?
- 7. Have you noticed any changes in your Gait?
- 8. Have you been Lifting any heavy weight recently?
- 9. Have you ever passes Urine/Stools without your knowledge/intention? (Incompetence)
- 10. Have you noticed any effect of **P**osition on pain?

11 ask abt impotence

Exam

**SLRRRRRRRRRR** SLRRRRRRRRRR !!!!!!

1. HEENT

2. Inspect, Palpate, ROM, Motor, Reflexes, Sensations, Pulses, Gait

- 1. Rectal and Pelvic exam
- 2. CBC with differential, S/E
- 3. ESR
- 4. X-ray spine AP & Lat view
- 5. CT scan
- 6. MRI
- 7. DEXA scan
- 8. Ca<sup>++</sup> & Vitamin-D levels
- 9. RA factor, ANA

# Neck Pain

Mnemonic: WRSS WNT GLIPBP + CITRUS

**MOTIVE** MM, Muscle strain, meningitis, mets osteoprosis & osteoarthritis Trauma, TB IV: IVDisk herniation

## **Differential Diagnosis:**

**With WNT:** Osteoarthritis, Disc Herniation, Fracture, Cervical Spondylosis.

Without WNT: Muscle Strain, Metastatic Cancer, Multiple Myeloma, Meningitis, RA.

## **Questions**

- 1. Have you noticed any Warmth of your joint?
- 2. Have you noticed any Redness of your joint?
- 3. Have you noticed any **S**tiffness of your joint?
- 4. Have you noticed any Swelling of your joint?
- 5. Have you noticed any **W**eakness of your joint?
- 6. Have you noticed any Numbness or Tingling of your joint?
- 7. Have you noticed any changes in your Gait?
- 8. Have you been Lifting any heavy weight recently?
- 9. Have you ever passed Urine/Stools without your knowledge/intention? (Incompetence)
- 10. Have you noticed any effect of **P**osition on pain?
- 11. Have you noticed any trouble Breathing?
- 12. Have you noticed any trouble in bright light? (Photosensitivity)

# Exam

- 1. HEENT
- 2. Inspect, Palpate, ROM, Motor, Reflexes, Sensations, Pulses, Gait

#### **Investigations**

- 1. CBC with differential, S/E
- 2. ESR
- 3. LP and CSF analysis
- 4. BUN:Cr
- 5. SPEC
- 6. X-ray Neck AP & Lat view
- 7. CT scan
- 8. MRI
- 9. DEXA scan
- 10. Ca<sup>++</sup> & Vitamin-D levels
- 11. RA factor, ANA

rest & NECK BRACE Pain medication

# Heel Pain

## Mnemonic: WRSS WNT TWO FFP + CITRUS

**Differential Diagnosis: PAC R FAT** 

<u>Plantar fasciitis, Ankylosing spondylitis, Calcaneal stress fracture, Retrocalcaneal bursitis, Foreign body, Ankle sprain, Tarsal tunnel syndrome.</u>

# Questions

plantar fascitis: increased in sports ,jumping, and morning tarsal tunnel syndrome: evening and aggravates on walking cellulitis: fever

- 1. Have you noticed any Warmth of your joint?
- 2. Have you noticed any Redness of your joint?
- 3. Have you noticed any **S**tiffness of your joint?
- 4. Have you noticed any **S**welling of your joint?
- 5. Have you noticed any Weakness of your joint?
- 6. Have you noticed any Numbness or Tingling of your joint?
- 7. What **T**ime does it hurt the most? (morning or evening)
- 8. Have you noticed any difficulty Walking?
- 9. What precipitates your pain? Walking or Jumping? (Overuse)
- 10. Have you ever had any Fracture?
- 11. Have you stepped on any pointed object? (Foreign Body)
- 12. Have you noticed any **Popping** sound?

#### Exam

1. HEENT Can you push the gas pedal

2. Inspect, Palpate, ROM, Motor, Reflexes, Sensations, Pulses, Gait

- 1. CBC with differential, S/E
- 2. ESR
- 3. Arthrocentesis and analysis
- 4. X-ray Heel AP & Lat view
- 5. CT scan
- 6. MRI
- 7. DEXA scan
- 8. Ca<sup>++</sup> & Vitamin-D levels

# Hip Pain

# Mnemonic: WRSS WNT + CITRUS

# Differential Diagnosis: BRASSS OF.

Bursitis, Referred Pain, Arterial Insufficiency, Steroid Abuse, Muscle Strain, Septic Arthritis, Osteoarthritis/Osteoporosis, Fractures.

# 1. For Bursitis:

- a. Have you noticed pain when you lie on that side?
- 2. For Referred Pain:
  - a. Have you noticed pain elsewhere in the body?
- 3. For Arterial Insufficiency:
  - a. Have you noticed any problem maintaining an erection?
  - b. Do you feel any improvement in pain if you rest after walking some distance?
- 4. For Sprain:
  - a. Have you lifted any heavy weights recently?
- 5. For Steroid/Drugs:
- 6. For Osteoarthritis:
  - a. Have you noticed any stiffness of joints?
  - b. Have you noticed any scratching sensations in your joint?
- 7. For Osteoporosis: (Menstrual Hx, Age, No HRT)
- 8. For Fractures:
  - a. Have you noticed nay trauma recently?
  - b. Have you been following a vigorous exercise plan recently?

## Exam

1. HEENT

EXPOSE THE HIP... always check for tenderness

2. Inspect, Palpate, ROM, Motor, Reflexes, Sensations, Pulses, Gait

- 1. CBC with differential, S/E
- 2. ESR
- 3. Arthrocentesis and analysis
- 4. X-ray Hip AP & Lat view
- 5. CT scan
- 6. MRI
- 7. DEXA scan
- 8. Ca<sup>++</sup> & Vitamin-D levels

# Calf Pain

# Mnemonic: WRSS VOIS

# Differential Diagnosis: Decrease B-HCG Slowly

<u>D</u>√T, <u>B</u>aker's Cyst, <u>H</u>ematoma, <u>C</u>ellulitis/Myositis, <u>G</u>astrocnemius tendon rupture, Muscle <u>S</u>train

# Questions

- Have you noticed any <u>W</u>armth of your joint?
- Have you noticed any  $\underline{\mathbf{R}}$ edness of your joint? ٦.
- Have you noticed any <u>S</u>tiffness of your joint? .ε
- Have you noticed any <u>S</u>welling of your joint? ٦.
- .č
- Have you noticed any <u>V</u>isible veins/pulsations?
- Have you been Immobilized recently? .9
- Are you using Oral Contraceptive Pills recently? ۲.
- Have you noticed any <u>S</u>hortness of breath? Any Chest pain?

# Exam

- J. HEENT
- Inspect, Palpate, ROM (at both knee and ankle), Homan's sign, Pulses,
- Motor, Reflexes, Sensations of Ankle and Knee Joint
- CVS and Pulmonary exam

# <u>Investigations</u>

- 1. CBC with differential, S/E
- ٦.
- D-dimer and FDPs .ε
- Doppler U/S
- 5. Arteriography and Venography

# Chest pain

# Differential Diagnosis: MP4GC DC

MI, Pneumonia, Pericarditis, Pulmonary embolism, Pleuritis, GERD, Chostochondritis, Aortic Dissection, **C**ocaine Abuse

# **Questions**

Any relationship of pain to breathing or position?

- 1. For <u>M</u>I:
  - a. Have you noticed any Shortness of breath?
  - b. Is the pain associated with sweating? Racing of heart?
  - c. Has the pain improved after resting?
- 2. For **P**ericarditis: (pain related to position)
  - a. Have you recently suffered from flu (runny nose, watery eyes, sore throat, fever, fatigue)?
- 3. For **P**neumonia:
  - a. Have you ever been exposed to anybody with similar complaints?
  - b. Have you suffered from cough recently?
- 4. For **P**E:
  - a. Have you noticed calf pain or swelling?
  - b. Have you been immobilized recently?
  - c. Are you using Oral Contraceptive Pills recently?
- 5. For Pleuritis: (pain related to breathing)
- 6. For **G**ERD:
  - a. Have you noticed any burning sensation in your chest or change in taste of your mouth?
- 7. For **C**hostochondritis: (pain related to touching or pressing)
- 8. For Aortic Dissection: (HTN)
- 9. For Cocaine Abuse:

#### Exam

- 1. HEENT
- 2. Inspect, Palpate, ROM, Homan's sign, Pulses,
- 3. CVS and Pulmonary exam

#### **Investigations**

- 1. CBC with differential, S/E
- 2. EKG, Cardiac Enzymes
- 3. CXR
- 4. D-dimer and FDPs, Doppler U/S
- 5. Arteriography and Venography

DO you have pain when you walk

Are you anxious about anything

Any problem breathing?

# **Palpitations**

# Differential Diagnosis: CC FAGAT or 2C A FAT PG.

Cardiac Arrhythmia, Caffeine, Fever, Anxiety/Panic Disorder, HypoGlycemia, Anemia, HyperThyroidism.

#### OFDPAA Questions.

- 1. For **C**ardiac Arrhythmia:
  - a. Have you noticed any chest pain? SOB? Racing of heart? Skipped beats? Sweating?
- 2. For **C**affeine:
  - a. Do you consume caffeinated beverages? If yes, then ask how much?
- 3. For **F**ever:
- 4. For Anxiety/Panic Disorder:
  - a. Is there any event associated with the racing of heart?
  - b. Does your breathing rate increase or feel shortness of breath during the episode?
  - c. Do you feel dizzy during the episode?
- 5. For Hypo**G**lycemia:
  - a. Do you have a Hx of High blood sugar level?
  - b. Have you skipped meals? Or changed any dose or medications recently?
- 6. For Anemia: Have you noticed any change in your stool color.... 2. what is your diet consist of 3. craving for ice
  - a. Have you noticed any change of skin color?
  - b. Have you noticed SOB on exertion?
  - c. Have you noticed bleeding (excessive-for menses) from any site of the body?
- 7. For Hyper**T**hyroidism: (Temp intolerance, Bowel movement)
  - a. Have you noticed racing of heart?
  - b. Have you noticed any skin changes?
  - c. Have you noticed any tremors of hands?

#### Exam

- 1. HEENT
- 2. Inspect, Palpate, ROM, Homan's sign, Pulses,
- 3. CVS and Pulmonary exam

- 1. CBC with differential, S/E
- 2. EKG, Cardiac Enzymes
- 3. Holter Monitoring
- 4. BSL
- 5. TSH, T<sub>3</sub> & T<sub>4</sub>.

# **Anxiety**

# Differential Diagnosis: PAPA HCG ST.

Panic Disorder, Acute stress & PTSD, Adjustment, Hypochondriasis, Caffeine, GAD, Substance Abuse, HyperThyroidism. cardiac arythmia

#### OFDPAA Questions.

- 1. For **P**anic Disorder:
  - a. Is there any particular event associated with the racing of heart?
  - b. Does your breathing rate increase during the episode?
  - c. Do you feel dizzy during the episode?
- 2. For Acute stress: (<1 months)
  - a. Have you experienced any tragic event/accident in the past? When?
  - b. Have you experienced nightmares recently?
  - c. Have you experienced flashbacks?
- 3. For PTSD: (>1 month) any recent trauma
  - a. Have you experienced nightmares recently?
  - b. Have you experienced flashbacks?
- 4. For Adjustment: (Stress, Time more than 1 month)
- 5. For <u>Hypochondriasis</u>: (excessive preoccupation with disease)
- 6. For **C**affeine:
  - a. Do you consume caffeinated beverages? If yes, then ask how much?
- 7. For **G**AD:
  - a. Do you feel worried about something in particular or generally about everything?
- 8. For **S**ubstance Abuse:
- 9. For HyperThyroidism: (Temp intolerance, Bowel movement)
  - a. Have you noticed racing of heart?
  - b. Have you noticed any skin changes?
  - c. Have you noticed any tremors of hands?

# <u>Exam</u>

- 1. HEENT
- 2. CVS and Pulmonary exam

# **Investigations**

#### EKG, Holter monitoring

- 1. CBC with differential, S/E
- 2. TSH, T<sub>3</sub> & T<sub>4</sub>.
- 3. Urine toxicology screen.

# Cough

## Differential Diagnosis: ABAy FMG, C<sub>2</sub>A P, T.B, CA, Bronchiectasis

Non-Productive: Atypical Pneumonia, Acute Bronchitis, Asthma Fibrosis, Medications, GERD.

<u>Productive without Blood:</u> **COPD, CCF, A**spiration, **P**neumonia (typical).

Productive with Blood: T.B (PENT Qs), CA Lung, Bronchiectasis.

# Questions

Is the cough associated with Phlegm production? If yes, then ABCO

Do you bring anything up with your cough

• Amount

Blood present or Not

• Color of Phlegm

Odor

1) Non-Productive Cough:

- a) For Atypical Pneumonia: (Fever +) Also ask about grade, continuous/intermittent, chills etc.
- b) For Acute **B**ronchitis: (Fever -)
  - i) Have you recently suffered from flu (runny nose, watery eyes, sore throat, fever, fatigue)?
- c) For **A**sthma: (Night time awakening for asthma is at Dawn)
  - i) Is there any relationship with exercise or weather?

Seasonal, weather, cold, exercise

Any dripping sensation in your throat

runny nose

facial pain

- ii) Do you have any pets at home?
- iii) Do you have to wake up at night to catch breath? (If yes, timing at night)
- d) For Fibrosis:
  - i) What do you do for living? (Occupation)
  - ii) Have you ever been exposed to radiation or cancer drugs?
- e) For Medications: (ACEi/ARBs)
- f) For **G**ERD:
  - i) Have you noticed any burning sensation in your chest (<u>H</u>eart Burn) or change in taste of your mouth?

# 2) Productive, Non Bloody Cough:

- a) For **COPD**:
  - i) Have you noticed any Shortness of breath?
  - ii) Have you noticed any abnormal sound while breathing?
- b) For <u>CCF</u>: (Night time awakening for asthma is after few hours of Sleep)
  - i) Do you have to use more pillows than usual?
  - ii) Do you have to wake up at night to catch breath? (If yes, timing at night)
  - iii) Have you noticed any swelling of your feet?
- c) For Aspiration: (Alcoholic person is a risk factor)
  - i) Have you experienced any loss of consciousness recently?
  - ii) Have you noticed any difficulty swallowing (Stroke)?

<sup>\*</sup> Since Asthma and Bronchitis can present in any for so it is prudent to ask their related questions in all types of cough.

- d) For **P**neumonia: (Fever)
  - i) Have you ever been exposed to anybody with similar complaints?
  - ii) If sputum +, then ABCO.

# 3) For Productive, Bloody Cough:

- a) For <u>T</u>.B: (PENT Questions)
  - i) When was your last **PPD/Monteux?** If yes, then result.
  - ii) Have you ever been Exposed to anybody with similar complaints?
  - iii) Have you experienced Night sweats?
  - iv) Have you **T**ravelled recently (to endemic areas)?
- b) For **C**A Lung: (Smoking, Weight loss, Appetite)
- c) For **B**ronchiectasis:
  - i) DO you have to assume a specific position to produce phlegm?

# <u>Exam</u>

- 1. HEENT
- 2. CVS and Pulmonary Exam

# **Investigations**

- 1. Sputum stain, and culture.
- 2. CBC with Differential, S/E.
- 3. Blood Culture
- 4. CXR
- 5. CT scan Chest.
- 6. BAL.

Use tissue when you cough

# **SOB**

# Differential Diagnosis: (CAP)<sub>2</sub> FAT.

COPD, CCF, Aspiration, Asthma, Pneumonia, Pulmonary Embolism, Fibrosis, Anemia, TB OFDPAA questions

- 1. For **COPD**:
  - a. Have you noticed any Shortness of breath?
  - b. Have you noticed any abnormal sound while breathing?
- 2. For **CCF**: (Night time awakening for asthma is after few hours of Sleep)
  - a. Do you have to use more pillows than usual?
  - b. Do you have to wake up at night to catch breath? (If yes, timing at night)
  - c. Have you noticed any swelling of your feet?
- 3. For Aspiration: (Alcoholic person is a risk factor)
  - a. Have you experienced any loss of consciousness recently?
  - b. Have you noticed any difficulty swallowing (Stroke)?
- 4. For **A**sthma: (Night time awakening for asthma is at Dawn)
  - a. Is there any relationship with exercise or weather?
  - b. Do you have any pets at home?
  - c. Do you have to wake up at night to catch breath? (If yes, timing at night)
- 5. For Pneumonia: (Fever+) Also ask about grade, continuous/intermittent, chills etc.
  - a. Have you ever been exposed to anybody with similar complaints?
  - b. If sputum +, then ABCO.
- 6. For **P**ulmonary Embolism:
  - a. Have you noticed calf pain or swelling?
  - b. Have you been immobilized recently?
  - c. Are you using Oral Contraceptive Pills recently?
- 7. For Fibrosis:
  - d. What do you do for living? (Occupation)
  - e. Have you ever been exposed to radiation or chemotherapeutic drugs?
- 8. For **A**nemia:
  - a. Have you noticed any change of skin color?
  - b. Have you noticed SOB on exertion?
  - c. Have you noticed excessive bleeding from any site of the body?
- 9. For **T.**B:
  - a. When was your last PPD/Monteux? If yes, then result.
  - b. Have you ever been Exposed to anybody with similar complaints?
  - c. Have you experienced **N**ight sweats?
  - d. Have you Travelled recently (to endemic areas)?

#### Exam

- 1. HEENT
- 2. CVS and Pulmonary Exam

- 1. Sputum stain, and culture.
- 2. CBC with Differential, S/E.
- 3. PEFR.
- 4. Sputum stain and culture.
- 5. Blood Culture
- 6. CXR
- 7. Spiral CT scan Chest.

# Sore Throat

## **Differential Diagnosis: PHIGNS**

Pharyngitis, HIV, Infectious Mononucleosis, GERD, Post Nasal Discharge, Scarlet Fever.

# **Questions**

Have you noticed any pain on swallowing? Have you noticed any swellings in neck? Do you have to clear your throat frequently?

1. For **P**haryngitis:

- Facial pain. swelling in neck, dysphagia, rheumatic: change in urine color, joint pain and rash
- a. Have you noticed any pain or fullness in ear?
- b. Have you noticed any redness or discharge from eyes?
- 2. For HIV: (IV drug abuse, Fatigue, Sexual behavior)
- 3. For **IM**:
  - a. Have you ever been exposed to anybody with similar complaints?
  - b. Do you feel more tired than usual?
  - c. Have you noticed any fullness or pain in belly?
- 4. For **G**ERD:
  - a. Have you noticed any burning sensation in your chest? Or change in taste of your mouth?
- 5. For Post **N**asal Drip:
  - a. Have you noticed nasal stiffness?
  - b. Have you noticed recurrent cough?
- 6. For **S**carlet Fever:
  - a. Have you noticed any rash on the body?

# <u>Exam</u>

- 1. HEENT
- 2. Inspect, Palpate, (Sinus Tenderness)
- 3. CVS and Pulmonary exam
- 4. Abdominal Exam (for Splenomegaly)

#### **Investigations**

- 1. CBC with differential, S/E<sup>for mononucleosis: peripheral smear</sup>
- 2. ESR
- 3. Rapid Strep Test

SEXUAL HISTORY IS VERY IMP.

- 4. Monospot Test
- 5. ELISA

Closure: always advise safe sex & avoid contact sport

- 6. Western Blot
- 7. Endoscopy

# Ask: hospitalization: any procedure undergoing involving yur food pipe or wind pipe Hoarseness

# Differential Diagnosis: PM leaves CAP in LGH.

Pharyngitis, Mitral Stenosis, Cancer, Abuse/over use, Polyp, Laryngitis, GERD, Hypothyroidism.

Have you noticed pain while speaking?

- 1. For **P**haryngitis: (Painful)
  - a. Have you noticed any pain or fullness in ear?
  - b. Have you noticed any redness or discharge from eyes?
- 2. For <u>M</u>itral Stenosis: (Painless)
  - a. Have you noticed any Shortness of Breath?
  - b. Have you noticed any difficulty in swallowing?
  - c. Do you have a Hx of rheumatic fever?
- 3. For Laryngeal **C**A: (Painful)-Smoking and Alcohol use.
- 4. For Abuse/overuse: (Painful)-Profession
- 5. For **P**olyp: (Painless)
- 6. For Laryngitis: (Painful)
  - a. Have you recently suffered from flu (runny nose, watery eyes, sore throat)?
- 7. For **G**ERD: (Painful):
  - a. Have you noticed any burning sensation in your chest (<u>H</u>eart Burn) or change in taste of your mouth?
- 8. For **H**ypothyroidism (Painless): (Cold Intolerance)
  - a. Have you noticed any changes in skin?
  - b. Have you noticed any changes in bowel movement?

#### Exam

- 1. HEENT + Thyroid
- 2. CVS Exam

- 1. CBC with differential, S/E.
- 2. TSH, T<sub>3</sub> & T<sub>4.</sub>
- 3. ECHO, EKG.
- 4. Throat swab.
- 5. CT scan chest.

# **Jaundice**

# **Differential Diagnosis: O CAVA**

Obstructive Jaundice, Cholangitis, Alcohol, Viral Hepatitis, Autoimmune. Qs are JETR.

# Questions

- 1. What is the **C**olour of your stools?(Dark or Light)
- 2. What is the **C**olour of your urine?(Dark or Light)
- 3. Have you noticed any Itching of the body?
- 4. Have you noticed any Pain/distension of your belly?
- 5. Have you noticed any pain in Joints?
- 6. Have you **E**aten out recently?
- 7. Have you noticed any Traveled recently?
- 8. Have you noticed any **R**elationship of pain to meals?

# Exam

- 1. HEENT
- 2. GIT exam (Murphy's)
- 3. CVS

- 1. Rectal & Pelvic Exam
- 2. Stool for occult blood
- 3. ALT/AST/Bilirubin/ALP
- 4. U/S Abdomen
- 5. Anti HAV, HBsAg, Anti-HCV.
- 6. ERCP
- 7. HIDA scan

# Hematuria

F BUN SHIP

# Differential Diagnosis: HITTERS.

Hematologic causes, Infections, Trauma, Tumor (including BPH), Exercise, Renal, Stone.

## Questions

Is the blood before, mixed or after urination?

Have you experienced any sore throat recently?

Have you started any medications recently? (Cyclophosphamide etc)

- 1. For <u>H</u>ematologic Causes:
  - a. Have you noticed bleeding from any other site of the body?
  - b. Do you have any history of easy bruising?
- 2. For Infection/UTI:
  - a. Do you have to pass urine more frequently than usual?
  - b. Have you noticed any trouble holding urine or do you have to rush to urinate?
  - c. Have you noticed any burning sensation while urinating?
  - d. Have you noticed any pain in your belly? If yes, then ask OFDPLIQRAA.
- 3. For Tumor (including BPH): (Smoking)
  - a. Do you have to strain during micturition?
  - b. Have you noticed any change in urinary stream?
  - c. Do you have to wake up at night to urinate?
  - d. Do you feel a sense of bladder fullness even after passing urine?
- 4. For Trauma:
- 5. For Exercise: (What aggravates?)
- 6. For Renal (Glomerulonephritis):
  - a. Have you noticed any swelling on your body?
  - b. Have you noticed any Joint pain or rash on your body?
- 7. For Renal Stones:
  - a. Do you have any History of kidney stones?

# <u>Exam</u>

- 1. HEENT
- 2. GIT exam + Renal Punch for CVA tenderness
- 3. CVS

**BACK FOR RENAL PUNCH** 

- 1. Rectal Exam
- 2. Urinalysis, Urine stain and Culture
- 3. U/S and CT Abdomen
- 4. BUN: Cr
- 5. CBC with Differential, PT and APTT
- 6. Cystoscopy

# **Burning Micturition**

#### Differential Diagnosis: PAPU on CTV.

CUPID: F2 PUB.??

Pyelonephritis, Allergic/Irritational, Prostatitis, Urethritis, Cystitis, Trauma, Vulvovaginitis.

# OFDP questions,

Do you have to urinate more frequently than usual?

Do you have to rush to urinate?

- 1. For Pyelonephritis: (Fever with chills, Nausea)
  - a. Have you noticed any pain in your flanks/belly? If + OFDPLIQRAA
- 2. For Allergic/Irritational:
  - a. Have you recently changed your contraceptive method?
- 3. For **P**rostatitis:
  - a. Do you have a Hx of recurrent urinary symptoms?
  - b. Have you noticed pain around your genital region?
- 4. For **U**rethritis:
  - a. Have you noticed any discharge in urine, If yes ABCO.
- 5. For **C**ystitis:
  - a. Have you noticed pain in your (lower) belly?
- 6. For **T**rauma:
- 7. For **V**ulvovaginitis:
  - a. Have you noticed any discharge from vagina?
  - b. Have you noticed any pain during intercourse?

#### Exam

- 1. HEENT
- 2. GIT exam + Renal Punch for CVA tenderness
- 3. CVS

# **Investigations**

- 1. Rectal Exam
- 2. Urinalysis, Urine stain and Culture
- 3. CT Abdomen
- 4. U/S Abdomen
- 5. BUN: Cr
- 6. CBC with Differential.
- 7. Cystoscopy

if latex allergy -> use latex free condom

SOUND S: stress O: over flow U: urge

# **Urinary Incontinence**

<u>Differential Diagnosis:</u> Motor Incontinence, Overflow incontinence, Stress incontinence, Urge Incontinence.

**OFDPAA** questions

Do you consume excessive fluids?

Has it impaired performance of your daily activities?

Are you consuming more fluids than usual?

- 1. For Motor Incontinence:
  - a. Do you have to urinate more frequently than usual?
  - b. Do you have to rush to urinate?
- 2. For **O**verflow incontinence: (DM)
  - a. Have you ever suffered a trauma to your back?
  - b. Have you noticed any **W**eakness of your body?
  - c. Have you noticed any <u>Numbness or <u>Tingling of your body?</u></u>
- 3. For Stress incontinence: (Hx of multiple SVDs, or Hx of pelvic surgeries)
  - a. Have you noticed problem holding urine while laughing, coughing, and sneezing?
- 4. For Urge Incontinence:
  - a. Have you noticed leakage of urine, which follows a sudden strong urge?

### <u>Exam</u>

- 1. HEENT
- 2. GIT exam
- 3. CVS

- 1. Rectal Exam
- 2. Urinalysis, Urine stain and Culture
- 3. Q-Tip
- 4. Urodynamic Studies
- 5. Cystoscopy

# **Fatigue**

in OPDaa An M3 Pg Delivered A Speech on Fatigue by Hypothyroidism

### Differential Diagnosis: I<sub>3</sub>M<sub>2</sub>P A<sub>3</sub>DHD & Sheehan's Syndrome.

Infections (T.B, HIV, IM), Malignancy, Myasthenia Gravis, Adjustment Disorder, Anemia, Apnea, DM, Hypothyroidism, Depression.

### Questions

### **OFDP** Questions

Have you noticed any problem performing your daily activities e.g. bathing, dressing, cooking etc.? Any event that is associated to the problem?

- 1. For Infections:
  - a. T.B: (PENT Questions)
  - b. I.M: (Ill contact, Pain Abdomen)

Mononucleosis

- c. HIV: (Ill contact, IV drug abuse, Irresponsible sexual behavior)
- 2. For **M**yasthenia Gravis:
  - a. How does it progress during the day?
  - b. Have you noticed weakness of muscles or double vision?
- 3. For (occult) Malignancy: (Weigh loss)
  - a. Have you noticed any pain in your belly?
- 4. For PTSD: (Sleep changes, Stress/ Trauma)
  - a. Have you experienced nightmares recently?
- 5. For Apnea:
  - a. Do you snore at night? Or has someone told you? feel sleepy during the day
  - b. Do you feel restless at night? Or has someone told you?
- 6. For Anemia:
  - a. Have you noticed any change of skin color?
  - b. Have you noticed SOB on exertion?
  - c. Have you noticed excessive bleeding from any site of the body?
- 7. For Adjustment: (Stress, Time more than 1 month)
- 8. For Depression: (Mood + SIGECAPS)
- 9. For Hypothyroidism: (Temp Intolerance, Skin Changes, Bowel changes)
- 10. For **D**iabetes Mellitus:
  - a. Do you feel more thirsty than usual?
  - b. Do you have to urinate more frequently than usual?
- 11. For **S**heehan's Syndrome:
  - a. Was the delivery normal? Or there was any excessive bleeding?
  - b. Have you been able to breastfeed your child? (inability to breast feed)

Text Exam

- 1. HEENT + Thyroid Exam
- 2. Orientation

1st Pelvis and breast exam

Prolactin, FSH:LH.... MRI Brain...

Counselling: MEANWHILE I WILL KEEP U UNDER **OBSERVATION** 

- 1. CBC with differential.
- 2. TSH,  $T_3$  and  $T_4$ .
- 3. Monospot
- 4. ELISA
- 5. CXR
- 6. BSL
- 7. Acetylcholine receptor antibody.
- 8. CT scan Brain.
- 9. MRI Brain.

# DM and HTN follow- up

Ask about symptoms in following systems. Eye, Heart, Stomach, Kidney, Perineum, Legs, Foot; Neuro, If Erectile Dysfunction, then ask: Psychological causes, Vascular, Depression, Drugs.

For how long? Taking Meds? Compliant? Side effects? Check BSL regularly? Under control? Last reading? Last visit to doctor? What was your last HBA<sub>1c</sub>?

- 1. For Eyes:
  - a. Have you noticed any changes in your vision?
  - b. When was you last eye checkup?
- 2. For Heart: (Past Hx of MI, SOB, Pacing of heart, Chest pain, Sweating)
- 3. For Pulmonary: (SOB)
- 4. For GIT: (Bowel habits, Polyphagia, Abnormal Discomfort-GERD)
- 5. For Genitourinary: (Polyuria, Polydipsia)
- 6. For Neuro: (Past Hx of Stroke or TIA, WNT, Speech or swallowing difficulty) **ALSO DEPRESSION**
- 7. For Sexual:
  - a. Have you noticed any change in your sexual **Desire?**
  - b. Have you noticed any change in your sexual **Performance**? If yes, then ask;
  - c. Psychological causes
    - i. When did it start?
    - ii. How is the relationship with your spouse?
    - iii. Do you have morning erections?
    - iv. On a scale of 1 to 10, where 1 being flaccid & 6 being adequate for penetration, How do you grade your erection?
    - v. Are you under any sort of excessive stress these days?
  - d. Vascular causes:
    - i. Have you noticed any pain in your legs?
    - ii. Have you noticed any Weakness of your body?
    - iii. Have you noticed any Numbness or Tingling of your body?
  - e. Depression (Mood + SIGECAPS)
  - f. Medications (are you taking any drugs?)
  - g. Hypogonadism: (desire issue)
    - i. Do you have normal pubic and axillary hair?

### Exam

1. HEENT + Fundoscopy

Carotid bruit fundoscopy

2. CVS Exam

Cranial nerve

### **Investigations**

1. CBC with differential.

Walk on even ground, keep foot

2. CXR

also Cardiac..: EKG & Enzyme clean Dynamic cavernography

regular checkup regular labs

BSL and HBA<sub>1c</sub>

4. Urine for Micro albumin, Urinalysis.

# Pre-Employment Exam

Ask about symptoms in following systems: Head, Eye, Ear, Nose, Mouth, Neck, Heart, Stomach, Kidney, Perineum, Extremities, Foot, Psychiatric, Skin.

For how long? Taking Meds? Compliant? Side effects? Check BSL regularly? Under control? Last reading? Last visit to doctor? What was your last HBA<sub>1c</sub>?

- 1. For **H**ead:
  - a. Do you have a Hx of head trauma?
  - b. Do you have a Hx of Dizziness, LOC/ fainting spells?
  - c. Do you have a Hx of Stroke or TIA?
  - d. Do you have a Hx of seizures?
- 2. For **E**yes:
  - a. Have you noticed any changes in your vision?
- 3. For **E**ar:
  - a. Have you noticed any changes in your hearing?
  - b. Have you noticed any problem with your balance or gait?
- 4. For **S**inus:
  - a. Have you noticed chronic facial pain or nasal stuffiness?
- 5. For Neck:
  - a. Have you noticed any pain or swellings in your neck?
- 6. For Heart: (Past Hx of MI, SOB, Pacing of heart, Chest pain, Sweating)
- 7. For **P**ulmonary: (SOB, Cough)
- 8. For GIT: (Pain, distension, Bowel habits, Polyphagia, Abnormal Discomfort-GERD)
- 9. For **G**enitourinary: (Polyuria, Polydipsia)
- 10. For Obs/Gnae: (LMP RT CVS PAP)
- 11. For **P**sychiatric:
  - a. Do you have a Hx of psychiatric illness or admission?
- 12. For **S**kin:
  - a. Have you noticed rash or any other skin problems?

### Exam

- 1. HEENT
- 2. CVS Exam

- 1. CBC with differential + S/E.
- 2. CXR
- 3. Urinalysis.

# Headache

### Differential Diagnosis: M2CB R S2T4D GC. (MCB owner had Resistant STDs in GC)

Migraine, Meningitis, Cluster Headache, Benign Intracranial HTN, Refractive errors, SAH, Sinusitis, Trauma, TIA, Tumor, Tension Headache, Depression.

### **Questions**

- 1. For Migraine: (ANP)
  - a. Have you noticed any unusual symptoms before the onset of headache (Aura)?
  - b. Do you feel Nauseated or like vomiting?
  - c. Are you abnormally sensitive to light/sound?
  - d. Any relationship of headache to menses?
- 2. For Meningitis/Encephalitis:
  - a. Have you noticed any pain or stiffness in neck?
  - b. Have you noticed any rash on your body?
- 3. For **C**luster Headache:
  - a. Do you have a runny nose?
  - b. Have you noticed any redness or discharge from eyes? Or pain in the back of eyes?
- 4. For **B**enign Intracranial HTN:
- Pseudotumor cereberi
- a. Have you noticed any changes in your vision?b. Are you using Oral Contraceptive Pills recently?
- 5. For **R**efractive Errors: (Vision Changes)
  - a. Have you noticed any pain with reading or concentrating?
- 6. For <u>Sinusitis</u>: (Runny nose, Sore throat)
  - a. Have you noticed any in face?
  - b. Have you noticed any relationship of timing to the pain? (Morning or Evening)
- 7. For Subarachnoid Hemorrhage: (Neck Stiffness, Vision Changes, Nausea/Vomiting)
- 8. For **T**emporal Arteritis: (Vision Changes, Fatigue)
  - a. Have you noticed any pain while chewing or combing hair?
  - b. Have you noticed any muscle stiffness?
- 9. For <u>TIA</u>: (WNT, Gait, Vision)
  - a. Have you noticed any problem swallowing?
  - b. Have you ever lost consciousness?
- 10. For **T**rauma/Subdural Hematoma:
- 11. For **T**umor: (Weight loss, Appetite, Family Hx, Night headache)
- 12. For Tension Headache: (Excessive Stress, Vase like tightening)
- 13. For **G**laucoma: (Vision Changes, Pain in eye, predisposing factor)
- 14. For Cocaine Abuse:

### Exam

- 1. HEENT
- 2. Inspect, Palpate, (Sinus Tenderness)
- 3. CNS with cranial Nerves
- 4. Fundoscopy

### **Investigations**

- 1. CBC with differential, S/E
- 2. ESR
- 3. CT Scan
- 4. LP and Analysis
- 5. Visual Acuity

First let me learn as much as i can about your pain and then i will prescribe you the best medication i can for the pain

# Forgetfulness

### **Differential Diagnosis:** AN SVD in H<sub>2</sub>BL.

Neurosp

Alzheimer's, Normal Pressure Hydrocephalus, Subdural hematoma, Vascular, Depression, Hypothyroidism, Huntington's chorea, Vitamin B<sub>12</sub> Deficiency, Lewy Body Dementia.

ABCD + Hair and Voice change

### **Questions**

**OFDP,** in case of Delirium, ask A,A, if Dementia, then ask;

Have you noticed any problem performing your daily activities e.g. bathing, dressing, cooking etc.?

- 1. For Alzheimer's Dementia: (Age, Family Hx)
- 2. For Normal Pressure Hydrocephalus:
  - a. Have you noticed any changes in your gait?
  - b. Have you ever passed urine unintentionally?
- 3. For **S**ubdural Hematoma:
  - a. Do you have any recent Hx of fall or trauma to head?
- 4. For **V**ascular Dementia:
  - a. Have you noticed any **W**eakness of your body?
  - b. Have you noticed any **N**umbness or **T**ingling of your body?
  - c. Have you noticed any difficulty with speech?
- 5. For <u>Depression</u>: (Mood + SIGECAPS)
  - a. How is your mood these days?
  - b. Have you noticed any changes in your <u>S</u>leep? If yes, ask about early morning awakening? Trouble falling sleep? Staying Sleep?
  - c. Do you enjoy the activities that you used to enjoy previously? (Interest)
  - d. Do you feel **G**uilty about anything?
  - e. Do you feel as Energetic as before?
  - f. **C**oncentration Qs? Serial 7s or spell backwards.
  - g. Have you noticed any change in your Appetite?
  - h. **P**sychomotor retardation?
  - i. Have you ever thought about Suicide? Have you ever planned or attempted suicide?
- 6. For Hypothyroidism? (Cold Intolerance)
  - a. Have you noticed any changes in skin?
  - b. Have you noticed any changes in bowel movement?
- 7. For Huntington's Chorea: (Family Hx)
  - a. Have you noticed any involuntary jerking or writhing movements (chorea)?
  - b. Have you noticed any impaired gait, posture and balance?
  - c. Have you noticed any problems or difficulty with speech?
- 8. For Vitamin  $\mathbf{B}_{12}$  Deficiency:
  - a. What does your primary diet comprises of?
  - b. Have you noticed any abnormal sensation in your hands or feet?
- 9. For Lewy Body Dementia: stiffness
  - a. Have you noticed any tremors in your hands?

- b. Have you noticed any stiffness of your body?
- c. Have you noticed any slowing of your body movements?
- 10. For **D**elirium: Ask Dehydration Qs (Heat stroke or Diarrhea)

### Exam

- HEENT + Fundoscopy

  CAROTID BRUIT AND fundo
- 2. CVS exam + Orthostatic signs + Auscultation
- 3. CNS exam (Motor, Reflexes, Sensory, Gait, MMSE)
- 4. In MMSE:
  - a. General Questions (AAO x 3)
    - i. What is your full name?
    - ii. What is the date today?
    - iii. Where are you right now?
  - b. Immediate Memory:
    - i. Now I will name 3 objects e.g. Bat, Mat, and Hat.
    - ii. Can you please repeat that?
    - iii. Please remember and I will ask you later on.
  - c. Short Term Memory:
    - i. What did you have in your last meal
  - d. Long Term Memory:
    - i. When did you graduate/ married?
  - e. Recall:
    - i. Can you please recall those 3 objects for me?
  - Concentration:
    - i. Can you please spell "CAR" backwards?
  - g. Judgment:
    - i. If there is a fire in that corner, what will you do?

### **Investigations**

- 1. CBC with differential.
- 2. TSH,  $T_3$  and  $T_4$ .
- 3. CT scan Brain.

**VDRL/RPR** 

- 4. MRI Brain.
- 5. Vitamin B12 level.

# **Hearing Loss**

### Differential Diagnosis: PD of IPL in COMA.

**POOD PALM** 

With Balance Problems; Perilymphatic Fistula, Acoustic Neuroma, Labyrinthitis, Meniere's disease.

Without Balance Problems; Presbycusis, Drugs, Infections, Cochlear Nerve Damage, Otosclerosis.

### **OFDPLAA** questions

Do you have any problems maintaining balance?

- 1. For **P**erilymphatic Fistula: (Trauma + Balance)
- 2. For Acoustic Neuroma:
  - a. Have you noticed any problem in localizing sounds?
  - b. Have you noticed any lesions on your skins?
  - c. Have you noticed any problem with your gait or balance?
- 3. For Labyrinthitis: (URI + Hearing loss + Balance)
- 4. For Meniere's disease:
  - a. Have you noticed any pain or fullness in ear?
  - b. Have you noticed any ringing sounds in your ears?
  - c. Have you noticed any problem with you balance?
- 5. For Presbycusis: (Age)
  - a. Is the hearing lost for all sounds or for any specific sounds? Or hearing with background noise?
  - b. Have you noticed any problem understanding speech?
  - c. Do the word sound jumbled or distorted?
- 6. For Drugs:
- 7. For Infections:
  - a. Have you noticed any ear pain or discharge?
- 8. For **C**ochlear Nerve Damage:
  - a. Are you exposed to loud sounds at home or work?
- 9. For Otosclerosis: (Age, starts from one ear and progresses to other)
  - a. Have you noticed any problem hearing a whisper?

### Exam

- 1. HEENT + Whisper, Weber & Rhine's test + Otoscopy
- 2. CNS Exam (Cerebellar exam MRSPG)

- 1. CBC with differential + S/E.
- 2. Audiometry & Tympanometry.
- 3. CT scan Brain.
- 4. MRI Brain.
- 5. Brainstem Auditory evoked potential

6. VDRL.

# Dizziness (Vertigo)

**BV PALM** 

### Differential Diagnosis: BV on My LAP

Without Hearing Loss: Benign Positional Vertigo, Vestibular Neuronitis

With Hearing Loss: Meniere's disease, Labyrinthitis, Acoustic Neuroma, Perilymphatic Fistula

### **Questions**

What do you mean by dizziness? Have you noticed any problem in hearing?

Have you ever lost consciousness? If yes, then go to LOC case on next page.

- 1. For **B**enign Positions Vertigo:
  - a. Have you noticed any relationship to position?
- 2. For <u>V</u>estibular Neuronitis: (Nausea + Vomiting)
  - a. Have you recently suffered from flu (runny nose, watery eyes, sore throat, fever, fatigue)?
- 3. For Meniere's Disease:
  - a. Have you noticed any ringing sounds in your ears?
  - b. Have you noticed fullness of your ears?
- 4. For Labyrinthitis: (Vestibular Neuronitis + Hearing loss)
- 5. For Acoustic Neuroma: (Family Hx + hearing loss + weight loss/appetite)
  - a. Have you noticed any problem with your gait?
  - b. Have you noticed any lesions on your skins?
- 6. For Perilymphatic Fistula:
  - a. Have you noticed or have any head trauma?

### Exam

- 1. HEENT + Weber & Rhine's test
- 2. CNS Exam (Cerebellar exam)

### **Investigations**

- 1. CBC with differential + S/E.
- 2. Audiometry.
- 3. CT scan Brain.
- 4. MRI Brain.

don't drive unaccompained fix for hearing aid

# Dizziness (LOC)

### Differential Diagnosis: HAD CAMPUS.

Hypoglycemia, Alcoholic Withdrawal, Dehydration/Orthostatic Hypotension, Cardiac Arrhythmias, Aortic Stenosis, Mass *e.g.*, *abscess*, *tumor*, Panic attack, Unexplained *e.g. Vasovagal*, Seizures.

### **Questions**

What do you mean by dizziness or LOC?

any waning sign did you smell anything unusual

Have you ever lost consciousness? If yes, then please tell me more about that. Who was with you? What were you doing when it happened? How long did it take to regain consciousness?

- 1. For <u>Hypoglycemia</u>: (sweating, Nausea, racing of heart)
  - a. Do you have a Hx of High blood sugar level?
  - b. Have you skipped meals? Or changed any dose or medications recently?
- 2. For Alcoholic withdrawal: (Ask about alcohol use)
  - a. When was you last drink?
- 3. For **D**ehydration: **(DMG)** 
  - a. Have you noticed any changes in bowel habits?
  - b. Have you noticed any meds or dosages?
  - c. How many pads do you use on a heavy day?
- 4. For **C**ardiac Arrhythmia:
  - a. Have you noticed any chest pain? SOB? Racing of heart? Skipped beats? Sweating?
- 5. For Aortic Stenosis: (SOB, Chest pain)
- 6. For **M**ass (Malignancy, Abscess, Lymphoma):
  - a. Have you noticed any Weakness of your body?
  - b. Have you noticed any **N**umbness or **T**ingling of your body?
  - c. Have you noticed any headache? If yes, what time of day?
- 7. For Panic Attack: (chest pain, SOB, racing of heart, Nausea, Vomiting)
  - a. How did this happen, please tell me more about it?
- 8. For **U**nexplained (Vasovagal Syncope): (Nausea, vomiting)
  - a. How did this happen, please tell me more about it?
- 9. For Seizures (AuSTIC):
  - a. Did you notice any warning signs or any unusual sensations before passing out? (Aura)
  - b. Did anyone notice jerky movements? (Shaking)
  - c. Did you bite your **T**ongue while shaking?
  - d. Did you pass urine without your knowledge?
  - e. Were you confused after you regained consciousness?
- 10. For Convulsive Syncope;
- 11. For Metabolic derangement (Electrolyte imbalance etc.):

### Exam

1. HEENT

- 2. CVS Exam
- 3. CNS Exam (MMSE)

### **Investigations**

- 1. CBC with differential + S/E.
- 2. EKG, ECHO
- 3. BSL
- 4. CT scan Brain.
- 5. MRI Brain.

Closure: don't drive, carry your id card with you, don't go out unaccompanied and void strenuous activities

# Menstrual Irregularities

### **Differential Diagnosis: PHATA PEEPA.**

Pregnancy, Hyperprolactinemia, Anorexia, Thyroid, Anxiety, Premature ovarian failure, Endometriosis, Exercise, Asherman Syndrome, PCOS.

### ODP, LMP RT CVS PAP.

- 1. For Pregnancy:
  - a. Have you noticed any fullness or tenderness of breast?
- 2. For Hyperprolactinemia:
  - a. Have you noticed any discharge from the nipples?
  - b. Have you noticed any change in your vision recently?
  - c. Have you noticed any headache recently?
  - d. Have you started any new medications recently?
- 3. For Anorexia: (weight/appetite changes)
  - a. How do you feel about this problem?
  - b. How do you feel about your physical appearance?
- 4. For Thyroid
  - a. Have you noticed any changes in your skin texture?
- 5. For **A**nxiety:
  - a. Are you under any sort of excessive stress these days?
- 6. For **P**remature ovarian failure:
  - a. Have you noticed sudden episodes of increased warmth or sweating of the body?
  - b. Have you noticed any itching/dryness of your genital region?
- 7. For Endometriosis:
  - a. Have you noticed any pain during menstruation?
  - b. Have you noticed any pain during intercourse?
  - c. Have you noticed any abnormal bleeding or bleeding in between periods?
- 8. For **E**xercise:
  - a. Are you following a vigorous exercise plan recently?
- 9. For Asherman Syndrome:
  - a. Have you ever had a gynecological procedure recently?
  - b. Have you ever had problems conceiving?
- 10. For **PCOS**:
  - a. Have you noticed any excessive hair growth recently?
  - b. Have you noticed any abnormal pigmentation of the body?

### <u>Exam</u>

- 1. HEENT
- 2. Abdominal Exam

### **Investigations**

1. Rectal & Pelvic Exam

2. β-HCG

3. CBC with differential, S/E

Transvaginal u/s.. for fibroid and adenomysosis

4. FSH:LH

5. U/S Abdomen

6. CT & MRI Brain.

Heavy menorrhagia—> Fibroids

# Post-Menopausal Bleeding

### Differential Diagnosis: ICE PACT.

Infections, CA Cervix, Endometrial Hyperplasia, Polyp, Atrophic Vaginitis, CA Endometrium, Trauma.

OFDPAA, when was your LMP?

- 1. For Infections: (fever + pain)
  - a. Have you noticed any discharge from vagina? If yes, then ABCO
- 2. For **C**A Cervix: (weight loss)
  - a. Have you noticed any bleeding after intercourse?
- 3. For **E**ndometrial Hyperplasia:
  - a. Are you taking HRT?
- 4. For **P**olyp:
  - a. Have you noticed anything coming out of vagina?
- 5. For <u>A</u>trophic Vaginitis:
  - a. Have you noticed any burning sensation?
  - b. Have you noticed any itching/dryness of your genital region?
- 6. For **C**A Endometrium:
  - a. Have you noticed any pain in your belly?
  - b. Are you taking any medication for menopause?
- 7. For **T**rauma:

### **Exam**

- 1. HEENT
- 2. Abdominal Exam

- 1. Rectal & Pelvic Exam
- 2. β-HCG
- 3. CBC with differential, S/E
- 4. Blood Culture
- 5. FSH:LH
- 6. U/S Abdomen
- 7. Pap smear
- 8. Endometrial Biopsy

# Vaginal Discharge

### Differential Diagnosis: PVCAT or ATV on PC.

LMP RT CVS PAL.. + antibiotic/ sterioid+ Hx of DM.

Atrophic Vaginitis, Trichomonas, Bacterial Vaginosis, PID, Candidial infection.

Have you noticed any redness or itching of your genital region? Ask following details about discharge:

- Amount
- Blood present or Not
- clot too!
- Color of discharge
- Odour
- 1. For Atrophic Vaginitis:
  - a. Have you noticed sudden episodes of increased warmth or sweating of the body?
  - b. Have you noticed any itching/drvness of your genital region?
- 2. For <u>Trichomonas:</u> (Multiple sexual partners, Greenish discharge, Treat male partner)
- 3. For Bacterial Vaginosis. (Gravish discharge)
  - a. Have you been taking antibiotics recently?
- 4. For PID: (Fever)
  - a. Have you noticed any pain in your belly?
- 5. For **C**andidial infection: (curd like discharge)
  - a. Do you have a Hx of DM?
  - b. Have you been using steroids recently?

### <u>Exam</u>

- 1. HEENT
- 2. Abdominal Exam

- 1. Rectal & Pelvic Exam
- 2. Discharge exam and Culture
- 3. CBC with differential, S/E
- 4. Blood Culture
- 5. U/S Abdomen
- 6. Pap smear

# Dyspareunia

*Mnemonic:* LMP RT CVS PAP & DAC-Desire, Abuse, Conflict (*if + SAFE GARD*).

### **Differential Diagnosis:** PV<sub>3</sub> A<sub>2</sub>CE.

Pelvic tumor, Vaginismus, Vulvodynia, Vulvovaginitis, Atrophic Vaginitis, Abuse, Cervicitis, Endometriosis.

### Questions

Insert transitional statement for Gynae/ Obs questions.

- 1. When was your LMP?
- 2. When was your first **M**enstrual period (**M**enarche)?
- 3. Do you feel **P**ain during intercourse or defecation?
- 4. Are your cycles Regular?
- 5. How many **T**ampons/Pads do you use on a heavy day?
- 6. Have you noticed Crampy pain during menses?
- 7. Have you noticed any Vaginal discharge? If yes ABCO
- 8. Have you noticed any **S**potting in between periods?
- 9. Are you Pregnant?
- 10. Have you ever had **A**bortions?
- 11. When was your Last Pap smear?
- 12. Have you noticed any change in your sexual **D**esire?
- 13. Have you ever been Abused?
- 14. Do you have any Conflict with your partner/husband? If yes, then SAFE GARD
  - a. Do you feel Safe at home?
  - b. Are you **AF**raid of ?
  - c. Do you have any Emergency (Exit) plan?
  - d. Do you have a **G**un at home?
  - e. Is your Alcoholic?
  - f. How is the **R**elationship of your with others?
  - g. Do you feel **D**epressed (Suicidal ideation)?

### Exam

- 1. HEENT
- 2. GIT and CVS Exam

- 1. Rectal & Pelvic Exam.
- 2. CBC with Differential, S/E.
- 3. Stain and Culture of Discharge.
- 4. U/S Abdomen & CT scan Abdomen.
- 5. Laparoscopy.

# Sleep Problems/Insomnia

### Differential Diagnosis: SADICCH.

SAD INSOMNICs

Stress/Adjustment, OSA, Drugs, Illicit Drug use, Caffeine, Circadian Rhythm, Hyperthyroidism.

What do you do before you go to sleep?

What time do you usually go to bed?

Have you noticed any trouble falling sleep?

Do you wake up at night during sleep? if yes than WHY

What time you wake up in the morning? and do you feel awake

Do you feel sleepy or take naps during the days?

- 1. For **Stress/Adjustment**:
- 2. For **O**SA:
  - a. Do you snore at night? Or has someone told you?
  - b. Do you feel restless at night? Or has someone told you?
- 3. For Illicit **D**rugs:
- 4. For Caffeine:
  - a. Do you consume caffeinated beverages? If yes, then ask how much?
  - b. Do you take tea/Coffee/energy drinks before going to bed?
- 5. For Circadian Rhythm problems: If sleep duration is adequate then
  - a. Advanced Sleep Syndrome; sleeps at 2:00am
  - b. Delayed Sleep Syndrome; sleeps at 6:00pm
  - c. Jet Lag; History of recent Travel.
- 6. For Hyperthyroidism: (Temp intolerance, Bowel movement)
  - a. Have you noticed racing of heart?
  - b. Have you noticed any skin changes?
  - c. Have you noticed any tremors of hands?

### Exam

- 1. HEENT
- 2. CVS Exam

### **Investigations**

### 1st POLYSOMNOGRAOPHY.

- 1. CBC with differential, S/E
- 2. TSH, T<sub>3</sub> & T<sub>4</sub>
- 3. Urine Toxicology screen.
- 4. Cortisol levels.

# Weight Gain

### Differential Diagnosis: DPT Qs in FCPS.

Depression, Pregnancy, HypoThyroidism, Familial tendency, Cushing's, PCOS, Smoking Cessation.

### ODP questions,

How much weight have you gained? Over how much time? Intentional or unintentional?

- 1. For Depression: (Mood + SIGECAPS)
- 2. For Pregnancy: (LMP + Morning sickness)
- 3. For HypoThyroidism: (Temp intolerance, skin changes, bowel habits)
- 4. For Familial tendency:
  - a. Any family Hx of obesity?
- 5. For <u>Cushing's:</u>
  - a. Have you noticed any stria on your body?
- 6. For PCOS:
  - a. Have you noticed any excessive hair growth recently?
  - b. Have you noticed any abnormal pigmentation of the body?
- 7. For **Smoking Cessation**: (Normal weight gain is 2kg)

### <u>Exam</u>

- 1. HEENT + Thyroid Exam
- 2. GIT Exam

- 1. CBC with differential, S/E
- 2. TSH, T<sub>3</sub> & T<sub>4</sub>
- 3. Glucose, Cholesterol, Triglyceride levels.
- 4. Cortisol levels.
- 5. Urine  $\beta$ -HCG.

# Weight Loss

### Differential Diagnosis: Dear HAMID MD.

Diabetes Mellitus, Hyperthyroidism, Anorexia Nervosa, Malignancy, Infections e.g., TB, HIV, Depression, Drugs, Malabsorption.

### ODP questions,

How much weight have you lost? Over how much time? Intentional or unintentional?

- 1. For <u>Diabetes Mellitus</u>: (Excessive thirst, urinary frequency)
- 2. For Hyperthyroidism: (Temp intolerance, tremors, Palpitations, Bowel habits)
- 3. For Anorexia Nervosa: (weight/appetite changes)
  - a. How do you feel about this problem?
  - b. How do you feel about your physical appearance?
- 4. For Malignancy: (Fatigue, smoking, Alcoholic)
- 5. For Infections:
  - a. T.B: PENT Questions
  - b. HIV: Ill contact, low grade fever, IV drug abuse.
- 6. For Depression (Mood + SIGECAPS)
- 7. For **D**rugs: (Laxatives, Thyroxine)
- 8. For Malabsorption:
  - a. Are your stools difficult to flush?
  - b. Are your stools foul smelling?
  - c. Have you noticed a sense of incomplete evacuation after passing stools?

### Exam

- 1. HEENT + Thyroid Exam
- 2. GIT Exam

- 1. CBC with differential, S/E
- 2. TSH, T<sub>3</sub> & T<sub>4</sub>
- 3. PCR or ELISA for HIV
- 4. Sputum for AFB
- 5. Urinalysis
- 6. CXR

## **Tremors**

### Differential Diagnosis: In PC we learnt that PE has high LDH.

Physiological, Cerebellar, Parkinsonism, Essential Tremors, Liver Disease, Drugs, Hyperthyroidism.

**OFDPLAA** questions

DoC WILSON Please HELP my

Are the tremors at rest?

tremors.

- 1. For Physiological:
  - a. Is the tremor associated with any event?
- 2. For **C**erebellar Disease:
  - a. Have you noticed any abnormal eye movements?
  - b. Have you noticed any problems with movements/complex movements?
- 3. For Parkinsonism:
  - a. Have you noticed any slowing of your movement?
  - b. Have you noticed any stiffness of body?
  - c. Have you noticed any changes in your writing?
- 4. For Essential Tremors: (Family Hx, Relived by Alcohol or Propranolol)
- 5. For Liver Disease:
  - a. Have you noticed any distension of your belly?
  - b. Have you noticed enlargement of breasts?
  - c. Have you noticed any change in your skin?
- 6. For **D**rugs: (caffeine, nicotine, β-agonists, TCA, Lithium, Valproate etc.)
- 7. For <u>Hyperthyroidism</u>: (Temp intolerance, Bowel movement)
  - a. Have you noticed racing of heart?
  - b. Have you noticed any skin changes?
  - c. Have you noticed any tremors of hands?

Cerebellar

### **Exam**

- 1. HEENT + Thyroid Exam
- 2. CNS Exam, Romberg's
- 3. GIT exam for liver disease

- 1. CBC with differential, S/E
- 2. TSH, T<sub>3</sub> & T<sub>4</sub>
- 3. ALT/AST/ALP/Bilirubin

## Muscle Weakness

### **Differential Diagnosis:**

<u>With Stiffness;</u> Funny PM has PTSD. <u>Muscle.</u> Fibromyalgia, PMR, Muscle Strain, Myotonic Dystrophy. **Neuro.** TIA/Stroke, Parkinsonism, Multiple Sclerosis. **Drugs.** Anti-Dopamine & Anti-Psychotics.

<u>Without Stiffness;</u> <u>Muscle.</u> Polymyositis, <u>Dermatomyositis</u>. <u>Neuro.</u> GBS, Myasthenia Gravis. <u>Drugs.</u> Steroids, Statins. <u>Electrolytes;</u> Hypokalemia. HyperThyroidism.

### With stiffness:

- 1. For Fibromyalgia: (Sleep problems or Depressions)
  - a. Have you noticed tender points in the body?
- 2. For PMR:
  - a. Have you noticed any difficulty on standing from sitting position?
  - b. Have you noticed any changes in vision or headaches?
  - c. Have you noticed any problems while chewing?
- 3. For Muscle Strain (Trauma):
  - a. Have you lifted a heavy weight recently?
- 4. For Myotonic Dystrophy: (Family Hx)
  - a. Have you noticed any hair loss from head?
  - b. Have you noticed any difficulty releasing hand grip?
- 5. For <u>TIA/Stroke</u>: (WNT, Gait, Vision)
  - a. Have you noticed any problem swallowing?
- 6. For **Parkinsonism**:
  - a. Have you noticed any slowing of your movement? Changes in gait?
  - b. Have you noticed any stiffness of body? tremors
  - c. Have you noticed any changes in your writing?
- 7. For Multiple Sclerosis: (Female, Age)
  - a. Have you noticed any change in your vision?
- 8. For **Drugs**: (Anti-Dopamine & Anti-Psychotics).

### Without Stiffness:

- 1. For Polymyositis:
  - a. Have you noticed any difficulty combing head or standing from sitting position
- 2. For **Dermatomyositis:** 
  - a. Have you noticed any rash on your body?
- 3. For **G**BS:
  - a. Do you have any Hx of Diarrhea or sore throat?
  - b. How did the weakness progress?
- 4. For **M**yasthenia Gravis:
  - a. Have you noticed any problem swallowing?
  - b. Have you noticed any problem in vision or double vision?
- 5. For **D**rugs(**S**teroids, **S**tatins.)

- 6. For <u>E</u>lectrolytes; (Hypokalemia)
  - a. Do you have a recent Hx of Diarrhea?
- 8. For HyperThyroidism (Temp intolerance, Bowel movement)
  - a. Have you noticed racing of heart?
  - b. Have you noticed any skin changes?
  - c. Have you noticed any tremors of hands?

### <u>Exam</u>

- 1. HEENT + Thyroid Exam
- 2. CNS Exam
- 3. Extremities exam

- 1. CBC with differential, S/E (K<sup>+</sup>)
- 2. TSH, T<sub>3</sub> & T<sub>4</sub>
- 3. Nerve Conduction study
- 4. MRI Brain
- 5. ANA, Anti-Ro, Anti-LA

# Hallucinations

### **Differential Diagnosis:**

<u>Auditory Hallucination</u>; Brief Psychotic disorder, Schizophreniform, Schizophrenia.

<u>Visual Hallucinations</u>; Tumor, Substance Abuse, Seizures, Delirium and Dementia.

<u>Tactile & Gustatory Hallucinations</u>; Cocaine, Alcohol withdrawal.

Secondary to Medical disorder; Parathyroidism, Narcolepsy, Postpartum Psychosis.

OFDPAA questions.

Can you please tell me more about that?

Do you see, hear or feel things?

Do they control you?

Do they tell you to harm yourself or others?

Does anyone else experiences that or are you the only one?

Has it affected your daily life performance?

### For Auditory Hallucination:

- 1. For Brief Psychotic disorder: (stress, sleep, decreased functioning)
- 2. For Schizophreniform & Schizophrenia: (ideas of reference, classify according to time)

### For Visual Hallucinations:

- 1. For Bain Tumor: (weight loss, headache)
  - a. Have you noticed any changes in your vision?
- 2. For Substance Abuse:
- 3. For Seizures:
- 4. For Delirium and Dementia: (reversible Vs. Irreversible)

### For Tactile & Gustatory Hallucinations:

- 1. For Cocaine withdrawal:
- 2. For Alcohol withdrawal:

### For Secondary to Medical disorder:

- 1. For Parathyroidism:
  - a. Have you noticed any change in your bowel habits?
  - b. Have you noticed any pain in belly?
  - c. Do you have a Hx of kidney stones?
- 2. For Narcolepsy:
  - a. Have you noticed any problems with sleep?
- 3. For Postpartum Psychosis:
  - a. When was your LMP?

# <u>Exam</u>

- 1. HEENT
- 2. CNS Exam & MMSE.

- 1. CBC with differential, S/E (K<sup>+</sup>)
- 2. Urine Toxicology screen.

## Seizures

### Differential Diagnosis: VITAMINS D.

Vascular, Infections (*Meningitis, Encephalitis, Abscess*), Trauma, Autoimmune (*SLE*), Metabolic (*hypoglycemia, hyponatremia*), Idiopathic, Neoplasms, pSychiatric, Drug Abuse/Withdrawal.

### ODPAA questions.

What were you doing before that happened? Did you lose consciousness? Did anyone witnessed that? Did you bite your tongue, passed urine or stools without your knowledge? What happened after the episode?

- 1. For <u>V</u>ascular problem: (DM, HTN)
  - a. Have you noticed a weakness, numbness of tingling of your body?
- 2. For Infections: (Fever)
  - a. Meningitis: Neck stiffness
  - b. Encephalitis: Confusion, LOC
  - c. Abscess: WNT
- 3. For **T**rauma:
- 4. For **A**utoimmune:
  - a. SLE: Have you noticed any rash or joint pain?
- 5. For **M**etabolic derangement:
  - a. Hypoglycemia: (DM, changes in medication or dosages)
  - b. Hyponatremia:
    - i. Have you had diarrhea recently?
    - ii. Are you feeling more thirsty than usual?
- 6. For Idiopathic:
- 7. For Neoplasms: (weight loss)
  - a. Have you noticed any headache or changes in vision?
- 8. For pSychiatric (conversion disorder etc): (No Postictal confusion)
  - a. Are you under excessive stress these days?
- 9. For **D**rug Abuse/Withdrawal: (Alcohol, Benzodiazepine)

### Exam

- 1. HFFNT
- 2. CNS Exam & MMSE.

- 1. CBC with differential, S/E (K<sup>+</sup>)
- 2. Urine Toxicology screen
- 3. Blood Culture
- 4. Lumbar puncture & CSF analysis

# Pediatric Case

### Prerequisites for Pediatric cases:

- Can you please tell the name and age of the child?
- Are you legal guardian of the child?
- Do you need any help with your son/daughter/grandson/granddaughter etc?
- Instead of PAM HUG FOSS for adults, replace PAM F BIND.
- Birth Hx:
  - Did you take iron/multivitamins during pregnancy?
  - o Did you smoke or drink alcohol during pregnancy?
  - Was the baby delivered at term?
  - Was the delivery normal? What was the mode of delivery?
  - Any complications during or after pregnancy?
  - Did your child had any problem after delivery?
  - O When did your child passed first stool?
- Immunization:
  - o What is the immunization status of the baby? Can you please show me?
  - o If on the phone, please bring you immunization card to the hospital?
- **N**utrition:
  - How do you feed your child? (breast/formula)
  - O When was solid food added to the diet?
  - O What is the diet now?
- **D**evelopment Hx:
  - When did he/she started smiling?
  - O When did he/she started to sit?
  - O When did he/she started to walk?
  - O When did he speak his first word?
  - O How many words does he speak now?

## Fever

### **MULU GOV**

### **Differential Diagnosis: VO MUL GU**

Viral illness, Otitis Media, Meningitis, URI, LRI, Gastroenteritis, UTI.

What do you mean by "burning up"?

For how long? Continuous or intermittent? High grade or low grade? What is the reading? Oral or rectal?

How is the child's look? (Lethargic, irritated or playful)

Has the child come in contact with anybody with similar complaints?

- 1. For Viral illness:
  - a. Have you noticed any rash on the body?
  - b. Have you noticed any swelling of the body?
- 2. For Otitis Media:
  - a. Does he/she pulls the ear?
  - b. Have you noticed runny nose or redness of eyes?
  - c. Have you noticed any discharge from ear? If yes, then ABCO
- 3. For Meningitis/Encephalitis:
  - a. Have you noticed any stiffness in neck?
  - b. Did he/she lose consciousness?
  - c. Have you noticed any shaky movements?
  - d. Have you noticed bulging of fontanels or soft spots on head?
- 4. For <u>U</u>RI: (day care)
  - a. Croup:
    - i. Have you noticed any cough?
    - ii. Have you noticed any sound accompanying? (stridor)
  - b. Epiglottitis:
    - i. Have you noticed any difficulty swallowing?
    - ii. Have you noticed drooling of saliva?
- 5. For LRI: (Bronchiolitis)
  - a. Have you noticed any difficulty breathing?
  - b. Have you noticed fast breathing or abnormal sounds with breathing?
- 6. For Gastroenteritis:
  - a. Have you noticed any change in bowel habits?
  - b. Have you noticed nausea or vomiting?
  - c. Have you noticed any distension of the belly?
  - d. Do you have to use more diapers than usual?
- 7. For <u>**U</u>TI**:</u>
  - a. Have you noticed any change in urinary habits?
  - b. Does the baby cry while urinating?

### Exam

- 1. HEENT
- 2. CVS Exam.

Text

- 1. CBC with differential, S/E (K<sup>+</sup>)
- 2. CXR
- 3. Blood Culture
- 4. Lumbar puncture & CSF analysis
- 5. Urinalysis

## Seizures

## **Differential Diagnosis:** FM TH FMHH

Febrile, Meningitis, Trauma/hemorrhage, Hypo/Hypernatremia.

Please tell me more about that? Describe the event in detail?

What was the child doing before the fit?

Have you noticed any LOC? Tongue biting or frothing? Passed urine or stools without knowledge? What happened after the episode?

- 1. For <u>F</u>ebrile seizure: (Fever, Family Hx)
  - a. Do you have a Hx of recent illness?
- 2. For Meningitis:
  - a. Have you noticed any stiffness in neck?
  - b. Did he/she lose consciousness?
  - c. Have you noticed any shaky movements?
  - d. Have you noticed bulging of fontanels?
- 3. For **T**rauma/hemorrhage:
  - a. Are there any bleeding tendencies in the family?
- 4. For Hypo/Hypernatremia:
  - a. Have you noticed any change in bowel habits?
  - b. Have you noticed nausea or vomiting?
  - c. Have you diluted the formula feed?

### <u>Exam</u>

- 1. HEENT
- 2. CVS Exam.

- CBC with differential, S/E (K<sup>+</sup>)
- 2. CXR
- 3. Lumbar puncture & CSF analysis
- 4. CT scan brain
- 5. Urinalysis

# Diarrhea

### Differential Diagnosis: Infection, Malabsorption, Intussception, Overfeeding

- 1. For Infection:
  - a. Do you have to use more diapers than usual?
  - b. Have you noticed any dryness of mouth or tongue?
  - c. Have you noticed any dryness of skin?
  - d. Have you noticed sunken eyes?
- 2. For Malabsorption:
  - a. Have you noticed any abnormal smell from stools?
- 3. For Intussception:
  - a. Have you noticed crying spells or episodes relived by bending?
- 4. For **O**verfeeding:
  - a. How much and how frequently do you feed the child?

### Exam

- 1. HEENT
- 2. GIT Exam.

- 1. CBC with differential, S/E (K<sup>+</sup>)
- 2. Stool examination

# Cough

### Differential Diagnosis: LPC FERA Bai.

Laryngitis, Pertussis, Croup, Foreign Body, Epiglottitis, Retropharyngeal Abscess, Asthma, Bronchiolitis.

Can you please tell me more about it? How will you describe the cough?

- 1. For Laryngitis:
  - a. Have you noticed any change in the voice?
- 2. For **P**ertussis:
  - a. Have you noticed runny nose or watering from eyes before the cough appeared?
  - b. Have you noticed any additional sound along with cough?
  - c. Did the baby throw up?
- 3. For **C**roup:
  - a. Have you noticed any cough?
  - b. Have you noticed any sound accompanying? (stridor)
- 4. For Foreign Body:
  - a. What was he doing when cough started?
- 5. For **E**piglottitis:
  - a. Have you noticed any difficulty swallowing?
  - b. Have you noticed drooling of saliva?
- 6. For **R**etropharyngeal Abscess: (High grade fever + No stridor)
  - a. Have you noticed any drooling of the saliva?
  - b. Have you noticed any problem moving the neck?
- 7. For Asthma:
  - a. Does the baby have any allergies?
  - b. Have you noticed any relationship to the timings of the day?
- 8. For Bronchiolitis:
  - a. Have you noticed any difficulty breathing?
  - b. Have you noticed fast breathing or abnormal sounds with breathing?

### <u>Exam</u>

- 1. HEENT
- 2. CVS and Pulmonary Exam.

- 1. CBC with differential, S/E (K<sup>+</sup>)
- 2. X-Ray neck
- 3. CXR
- 4. Blood Culture

# Picky Eater

### Differential Diagnosis: OHIO ATA.

Organic disorder, Habitual Eating Disorder, Iron Deficiency, Oppositional Defiant disorder, Autism, HypoThyroidism, Adjustment disorder.

### **OFD Questions**

How is the child growing? Weight gained? Milestones achieved?

- 1. For **O**rganic disorder:
  - a. Have you noticed any change in bowel habits?
  - b. Have you noticed any blood in stools?
  - c. Have you noticed crying discomfort on passing stools?
- 2. For **H**abitual Eating Disorder:
  - a. Do you follow a set schedule of meals?
  - b. Does he drink a lot of high calorie drinks?
- 3. For Iron Deficiency:
  - a. Have you noticed a change in skin colour?
  - b. Have you noticed a bleeding from any site?
- 4. For **O**ppositional Defiant disorder:
  - a. How is his behavior towards others?
- 5. For **A**utism:
  - a. Does the child have problems playing with others?
- 6. For Hypo**T**hyroidism: (temp intolerance)
  - a. Have you noticed a change in bowel habits?
- 7. For <u>A</u>djustment disorder:
  - a. Have you recently moved?
  - b. Has the child suffered any trauma recently?

### Exam

- 1. HEENT
- 2. GIT Exam.

### **Investigations**

1. CBC with differential, S/E (K<sup>+</sup>)