MiniCEX: Acute Presentation: Abdominal pain

Trainee:

Trainee GMC number:

Assessor:

Assessor GMC number:

Grade of assessor:

○ Consultant ○ SASG ○ ST4-6 ○ Other

Assessor email:

Date:

04/09/2019

Case discussed (brief description):

	Expected behaviour	Successful / Unsuccessful
Initial approach	• Ensures appropriate monitoring in place and iv access • Establishes that vital signs measured	○ **Successful** ○ **Unsuccessful**

History and information gathering	• Takes focused history of abdominal pain including
	  ○ site
	  ○ severity
	  ○ onset
	  ○ nature
	  ○ radiation
	  ○ duration
	  ○ frequency
	  ○ precipitating and relieving factors
	  ○ previous similar pains and associated symptoms
	• Systematically explores for symptoms of life threatening abdominal pain
	• Specifically asks about previous abdominal operations
	• Considers non abdominal causes- MI, pneumonia, DKA, hypercalcaemia, sickle, porphyria
	• Seeks information from paramedics, relatives and past medical notes
		○ **Successful**
		○ **Unsuccessful**

Examination	Able to undertake detailed examination for abdominal pain (ensuring adequate exposure and examining for the respiratory causes of abdominal pain) including • Inspection, palpation, auscultation and percussion of the abdomen • Looks for herniae and scars • Examines loins, genitalia and back • Undertakes appropriate rectal examination	○ **Successful** ○ **Unsuccessful**
Investigation	Ensures appropriate investigation • ECG • ABG • FBC • U&Es • LFTs • amylase • erect chest x-ray • and abdominal x-rays if obstruction or perforation suspected	○ **Successful** ○ **Unsuccessful**
Clinical decision making and judgment	Able to formulate a full differential diagnosis and the most likely cause in this case	○ **Successful** ○ **Unsuccessful**
Communication with patient, relatives, staff	Effectively communicates with both patient and colleagues	○ **Successful** ○ **Unsuccessful**
Overall plan	Able to relieve pain by appropriate prescription	○ **Successful** ○ **Unsuccessful**
Professionalism	Stabilises (if appropriate) and safely prepares the patient for further treatment and investigation	○ **Successful** ○ **Unsuccessful**
Overall	*Auto-calculated from above outcomes.* *If all items are marked as Successful, this will rate Successful. Otherwise, will be rated as Unsuccessful.*	○ **Successful** ○ **Unsuccessful**

Things done particularly well:

[ ]

Learning points:

Action points:

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