

## **STATION: Surgery. Standardized patient**

### **Situational task 1**

**Briefing.** You are a surgeon. Patient C., 28 years old, came to you with complaints of high body temperature up to 39 ° C. He was operated on in the surgical department 12 days ago due to gangrenous appendicitis. Discharged home on the seventh day without complaint. Last night, the patient noted dysuric phenomena, moderate pain in the suprapubic area, an increase in body temperature to 39 ° C.

#### **Task:**

Find out the patient's complaints, collect a history of the disease.

2. Conduct a general examination and examination of the abdomen and determine all pathological symptoms. Sound all actions and name the symptoms you are testing.

3. Formulate the most likely diagnosis, voice and justify it to the patient.

Determine the tactics of the patient.

#### **Full task:**

Male C, 28 years old, came to the clinic with complaints of mild pain in the lower abdomen, dysuric phenomena, high temperature up to 39 ° C. It was operated 12 days later for gangrenous-perforative appendicitis - an appendectomy was performed. In the postoperative period, I felt good. After removal of the seams discharged home in satisfactory condition. Yesterday, the patient had moderate pain in the suprapubic area, dysuric phenomena, the temperature rose to 39 ° C. Objectively, the pulse is rhythmic, frequent 110 in 1 min, temperature is 38.5 ° C. The abdomen is of the usual form, in the right iliac region a fresh scar of red color is up to 10 cm long. Palpation is determined by moderate tension and tenderness in the suprapubic area. Symptoms of peritoneal irritation are questionable. Leukocytosis 15 g / l. Urine without pathology.

#### **Tasks:**

1. Find out the patient's complaints and collect anamnesis.

2. Conduct a general examination and examination of the patient's abdomen and identify all pathological symptoms. Sound all actions and name the symptoms you are testing.

3. Formulate the most likely diagnosis, voice and justify it to the patient.

Determine the tactics of the patient.

### **Algorithm of student's actions:**

1. Go to the station and say hello
2. Find out the patient's complaints.
3. Collect history according to the above scheme.

What worries you?
How did you feel immediately after the operation?
When did the pain in the postoperative period?
Pain, fever and dysuric events appeared simultaneously or not?
I have to examine you. Please remove the shirt, unbutton and lower the pants and lie down on the couch.
Inspect the patient and check the symptom Shchetkina-Blumberg.
Tell the patient your diagnosis and further treatment tactics.

## Situational task 2

**Briefing:** You are a surgeon clinic. A 26-year-old patient approached you with complaints of pain in the lower right abdomen. Body temperature 37.6 C. Complete blood count - leukocytosis of 16.0 g / l.

### Tasks:

1. Find out the patient's complaints and collect a history of the disease.
2. Inspect the patient's abdomen and determine all pathological symptoms. Sound all actions and name the symptoms that you check.
3. Formulate the most likely diagnosis, voice and justify it.

### Full task:

The patient is 26 years old. In the morning I felt a nagging pain in the epigastric region, which by lunchtime moved to the right lower abdomen, the intensity of the pain increased. There were dysuric disorders, body temperature rose to 37.6 0 C, there was a single vomiting lined, dry. The belly in the lower right is tense, sharply painful. The symptom of Shchetkin-Blumberg on the right is sharply positive. Positive symptoms Rovzinga, Sitkovsky. Symptom of Pasternack negative. In the analysis of urine there are no changes. Blood leukocytosis - 16.0 g / l.

### Tasks:

1. Find out the patient's complaints and collect a history of the disease.
2. Inspect the patient's abdomen and determine all pathological symptoms. Sound all actions and name the symptoms that you check.
3. Formulate the most likely diagnosis and voice it to the patient.

### Algorithm of student's actions:

1. Go to the station and say hello
2. Find out the patient's complaints
- H. Collect anamnesis according to the above scheme.  
When did pain come first?  
Was pain exchanged for a day?  
Were you sick or nauseous?  
Do you have any urine problems now?  
Have you ever had an abdominal pain?  
I have to examine you. Please take off your T-shirt and lie down.
4. Inspect the patient and check Kocher's symptoms  
ShchetkinaBlumberga, Rovzinga and Sitkovsky.
5. Inform the patient of your diagnosis and further treatment tactics.

### Situational task 3

**Briefing:** You are a surgeon clinic. A 65-year-old patient approached you with complaints of pain in the right hypochondrium, as well as complaints of yellowing of the skin, darkening of the urine and white feces.

**Tasks:**

1. Find out the patient's complaints and collect a history of the disease.
2. Inspect the patient's abdomen and determine all pathological symptoms. Sound all actions and name the symptoms you are testing.
3. Formulate the most likely diagnosis, voice and justify it to the patient.
4. Determine the plan of examination of the patient.

**Full task:**

A 65-year-old man turned to the emergency room with complaints of pain in the right hypochondrium, which had arisen a week ago. The pain came unexpectedly after taking fatty foods. There was vomiting twice. The pain after taking no-shpy decreased, but did not go away completely. After four days, yellowing of the skin, darkening of the urine and white feces appeared. Body temperature up to 37.1°C. Similar attacks were before. Skin and sclera are yellow. Tongue laid dry. The abdomen in the right hypochondrium strains, moderately painful. symptoms of Kerah, Ortner, Myssi are positive. In the analysis of urine bile pigments were found. Leukocytes in the blood - 9.5 g / l.

**Tasks:**

1. Find out the patient's complaints and collect a history of the disease.
2. Inspect the patient's abdomen and determine all pathological symptoms. Sound all actions and name the symptoms you are testing.
3. Formulate the most likely diagnosis, voice and justify it to the patient.
4. Determine the plan of examination of the patient.

#### Algorithm of student's actions:

1. Go to the station and say hello
2. Find out the patient's complaints
3. Collect history according to the above scheme:  
When did the pain first appear?  
Did the pain change over time?  
Have you had nausea or vomiting?  
Do you now have urination or stool problems?  
Have you had any abdominal pain before?  
I have to examine you. Please remove the T-shirt and lie down on the couch.
4. Inspect the patient and check the symptoms of Kerr, Ortner, Mussi.
5. Inform the patient of the preliminary diagnosis and further management tactics.

## Situational task 4

**Briefing.** You are a surgeon clinic. A 32-year-old patient approached you after a traffic accident complaining of pain in the left hypochondrium. Body temperature is 37.1 ° C. Complete blood count - leukocytosis 9 g / l, hemoglobin 57 g/l.

### Task:

1. Find out the patient's complaints, collect a history of a traffic accident.
2. Inspect the victim's abdomen and identify all pathological symptoms. Sound all actions and name the symptoms you are testing.
3. Formulate the most likely diagnosis, voice and justify it to the patient. Determine the tactics of the patient.

### Full task:

Male P, 32 years old, went to the polyclinic after a traffic accident with complaints of abdominal pain in the projection of the left hypochondrium, weakness, nausea, dizziness. Objectively - the patient is pale, breathing is frequent, shallow. Pulse rhythmic, 120 in 1 min, weak filling. Blood pressure 100/50 mm When examining the abdomen in the left subcostal area on the skin is determined by fresh hematoma up to 8 cm in diameter. Palpation in this area is determined by pain. The patient cannot lie down due to severe pain, which is significantly reduced in the upright position of the patient. Hemoglobin 57 g / l, Erythrocytes  $1.8 \times 10^{12}$  g / l. Leukocytosis 9 g / l.

### Task:

1. Find out the patient's complaints and collect a history of accidents.
2. Inspect the patient's abdomen and identify all pathological symptoms. Sound all actions and name the symptoms you are testing.
3. Formulate the most likely diagnosis, voice, and justify it to the patient. Determine the tactics of the patient.

### Algorithm of student's actions:

1. Go to the station and say hello
2. Find out the patient's complaints.
3. Collect history according to the above scheme.  
What happened to you?  
Has the nature of pain changed after an injury?  
Did you have vomiting?  
Do you have urination or stool problems now?  
I have to examine you. Please remove the T-shirt, unbutton and lower the pants and lie down on the couch.  
Inspect the patient and check the symptoms of Shchetkin-Blumberg, "Vanka-vstanka"  
Tell the patient your diagnosis and further management tactics.

## Situational Task 5

**Briefing:** You are a surgeon clinic. A 70-year-old patient approached you with “complaints for the presence of blood in the feces, chronic pain in the lower part abdomen, feeling of incomplete emptying during bowel movements, weight loss.

**Task:**

1. Find out the patient's complaints and collect a history of the disease.
2. Inspect the patient's abdomen and determine all pathological symptoms. Sound all actions and name the symptoms that you check.
- Z. Formulate the most likely diagnosis, voice and justify it. to the patient.
6. Determine the tactics of the patient.

**Full task:**

A 70 year old man turned to a family doctor with complaints about blood in the feces, but not always; chronic pain in the lower part abdomen, feeling of incomplete emptying during stool. Indicated the symptoms periodically disturb the patient for half a year already, but the last month have become stronger. There is also a decrease in body weight of about 10 kg over the past six months. According to the patient, his mother was operated on in age 60 about colon cancer. In the blood test – anemia (hemoglobin 91 g / l).

**Task:**

1. Find out the patient's complaints and collect a history of the disease.
2. Inspect the patient's abdomen and determine all pathological SYMPTOMS.
4. Formulate the most probable diagnosis, voice and reenact it. to the patient.
4. Determine the tactics of the patient.

### Algorithm of student's actions:

1. Go to the station and say hello
2. Find out the patient's complaints.
3. Collect history according to the above scheme.
4. Tell the patient your diagnosis and further management tactics.

## Situational task 6

**Briefing.** You are a surgeon clinic. A 34-year-old patient approached you with complaints about vomiting of the color of “coffee grounds”, weakness, dizziness. Complete blood count - leukocytosis of 8.0 g / l, hemoglobin 80 g / l.

### Task:

Find out the patient's complaints, collect a history of the disease.

2. Conduct a general examination and examination of the abdomen and determine all pathological symptoms. Sound all actions and name the symptoms you are testing.

3. Formulate the most likely diagnosis, voice and justify it to the patient.

Determine the tactics of the patient.

### Full task:

Patient T., 34 years old, a builder by profession, complained of vomiting of the color of the “coffee grounds”, weakness, dizziness, and dog-like feces. Ill yesterday, did not seek medical care. Over the past two years, he has noted heartburn, belching, nausea, especially after ingestion of spicy and fried foods. Father died 10 years ago from perforated ulcers.

Objectively: The patient is pale, the pulse is rhythmic, frequent 108 beats per 1 minute, weak filling and tension. Blood pressure 90/50 mm Hemoglobin 80 g / l. Body temperature is 36.8 ° C.

### Task:

1. Find out the patient's complaints and collect a history of the disease.

2. Conduct a general examination of the patient and conduct a study of the abdomen; identify all pathological symptoms. Sound all actions and name the symptoms you are testing.

3. Formulate the most likely diagnosis, voice, and justify it to the patient. List the patient's disease, with which it is necessary to differentiate the diagnosis.

### Algorithm of student's actions:

1. Go to the station and say hello
2. Find out the patient's complaints.
3. Collect history according to the above scheme.

When I first came hematemesis?
When I first came tarry stools?
Have you had heartburn, belching, hunger in the past?
Have you taken any treatment in the past?
I have to examine you. Please remove the T-shirt and lie down on the couch.
Inspect the patient and check the symptom Shchetkina-Blumberg.
Tell the patient your diagnosis and further treatment tactics.

## Situational task 7

**Briefing:** You are a surgeon in a polyclinic. A 66-year-old patient with a complaint about pain in the navel area, where before it had hernial protrusion, turned to you. Body temperature 36.6°C. Total blood count - leukocytosis 8.0 g / l.

### Task:

1. Find complaints of the patient and collect the history of the disease.
2. Conduct a review of the belly of the patient and palpation, identify all pathological symptoms. Speak all the actions and name the symptoms that you are testing.
3. Formulate the most likely diagnosis, voice and justify it to the patient. Determine the tactics of patient management.

### Full task:

The patient 66 rubles a day before, after lifting a heavy load, felt a sharp pain in the navel area, where before it was hernial protrusion. In the upright position, the hernial protrusion of 4 \* 4 cm does not fit into the abdominal cavity, abruptly painful with palpation. The symptom of "Kashlovoe tovchka" is negative. Superficial and deep palpation without features. Body temperature is normal, leukocytosis - 8.0 T / l

### Task:

1. Find complaints of the patient and collect the history of the disease.
2. Conduct an examination of the belly of the patient, palpation and identify all pathological symptoms. Speak all the actions and name the symptoms that you are testing.
3. From the wording of the most likely diagnosis, justify and voice it to the patient. List the patient with whom the diagnose is to be differentiated.

### Algorithm of the student's actions:

1. Go to the station and say hello
2. Find out the patient's complaints
3. Collect the history for the chart below  
When was the first pain?  
What do you associate with pain?  
Have you had nausea, vomiting, or chest pain?  
When was the first hernial protrusion in the navel region?  
Have you ever had abdominal pain?  
I have to inspect you. Please remove the T-shirt and lie down on the couch
4. Conduct an overview of the patient and superficial and deep palpation, and determine the symptom of "Cough Tufts".
5. Tell your patient your diagnosis and follow-up tactics.



## Situational task 8

**Briefing:** You are a surgeon in a polyclinic. A 30 year old patient complained to you about complaints of intense pain in the upper abdomen of a protective character. Body temperature 37.1°C. Total blood count - leukocytosis 10.0 g / l, a-amylase - 200 units / liter

### Task:

1. Find complaints of the patient and collect the history of the disease.
2. Conduct an examination of the belly of the patient and identify any pathological symptoms. Speak all the actions and name the symptoms that you are testing.
3. Formulate the most likely diagnosis, voice and justify it to the patient. Determine the tactics of patient management.

**Full task:** The patient was 30 years old. He complained of intense pain in the upper abdomen of the protective skin and repeated vomiting, which appeared on the day following the feast. The general condition of the patient is severe. Pulse frequent. The tongue is dry, covered. There is a bit of stress in the epigastrium, where it is sharply painful. Symptom Schetken - Blumberg negative. In the analysis of urine there are no changes. Blood leukocytosis - 10.0 g / l, a-Amylase 200 g / l  
Body temperature 37.1°C

### Task:

1. Find complaints of the patient and collect the history of the disease.
2. Conduct an examination of the belly of the patient and identify any pathological symptoms. Speak all the actions and name the symptoms that you are testing.
3. Formulate the most likely diagnosis and voice it to the patient, justify it. List the patient with whom the diagnose is to be differentiated.

Tasks for a standardized patient

### Algorithm of the student's actions:

1. Go to the station and say hello
2. Find out the patient's complaints
3. Collect the history for the chart below  
When was the first time there was pain and nausea?  
The pain has changed somewhat over time?  
How do you connect the beginnings of complaints?  
Do you have any problems with urination or stool?  
Have you ever had abdominal pain?  
I have to inspect you. Please remove the T-shirt and lie down on the couch
4. Review the patient and check the Shchotkina-Blumberg symptom, superficial and deep palpation.
5. Tell your patient your diagnosis and follow-up tactics.

## Situational task 9

**Briefing:** You are a surgeon in a polyclinic. The patient, who was 60 years old, complained about pain in the right upper part of the abdomen, nausea and vomiting. Body temperature 37.5°C. Total blood count - leukocytosis 13.0 g / l.

### Task:

1. Find complaints of the patient and collect the history of the disease.
2. Conduct an examination of the belly of the patient and identify any pathological symptoms. Speak all the actions and name the symptoms that you are testing.
3. Formulate the most likely diagnosis, voice and justify it to the patient. Determine the tactics of patient management.

### Full task:

A 60-year-old patient felt intensive pain in the hypochondrial area from the right, intensified pain, and vomiting also appeared quickly several times, nausea and weakness. The temperature of the body increased to 37.5 ° C,. In the history of 10 years, the illness of the gastroenterologist. Tongue covered, dry. The abdomen in the right hypochondrium is slightly painful. The symptom of Shchotkin-Blumberg's case is weakly positive. Positive Ortner Symptoms, Murphy. . In the analysis of urine there are no changes. Blood leukocytosis - 13.0 g / l. In the ultrasound study: The gall bladder is enlarged in size with thickening of the walls, in the neck can see a stone 15mm in diameter

### Task:

1. Find complaints of the patient and collect the history of the disease.
2. Conduct an examination of the belly of the patient and identify any pathological symptoms. Speak all the actions and name the symptoms that you are testing.
3. From the wording of the most probable diagnosis and voice it to the patient, justify it. List the patient with whom the diagnose is to be differentiated.

### Algorithm of the student's actions:

1. Go to the station and say hello
2. Find out the patient's complaints
3. Collect the history for the chart below  
When was the first pain?  
The pain has changed somewhat over time?  
Did you have nausea or vomit?  
Are there any chronic diseases?  
Have you ever had abdominal pain?  
I have to inspect you. Please remove the T-shirt and lie down on the couch
4. Review the patient and check the symptoms of Shchotkina-Blumberg, Ortner and Murphy.
5. Tell your patient your diagnosis and follow-up tactics.