

## OSCE

### Candidate information

Your intern has been seeing a patient who presented feeling weak after a recent viral gastroenteritis. The patient states they have reduced exercise tolerance and feel generally weak.

The intern has come to present the patient and some initial results to you. They feel the patient is dry, as they have given three litres of normal saline with no improvement in the patient's tachycardia.

Please discuss the patient with the intern and advice on appropriate management.

| Domain                             | %  |
|------------------------------------|----|
| Medical expertise                  | 50 |
| Prioritisation and decision making | 20 |
| Communication                      |    |
| Teamwork and collaboration         |    |
| Leadership and management          |    |
| Health advocacy                    |    |
| Scholarship and teaching           | 30 |
| Professionalism                    |    |

## **Mx of acute cardiomyopathy**

### **Actor (intern) information**

You have been seeing Daniel, a 23 year old male with no past medical issues. Daniel had viral gastroenteritis earlier this week and now feels weak, with reduced exercise tolerance. You have given 3 litres of normal saline, but Daniel remains tachycardic. You feel he is dry and plan to admit him to short stay ward for rehydration.

You have approached your consultant to present the patient to him.

You have a CXR and an ECG to show your consultant.

Current obs: BP 100/60 HR 192 Sats 92% RA RR 28 Afebrile

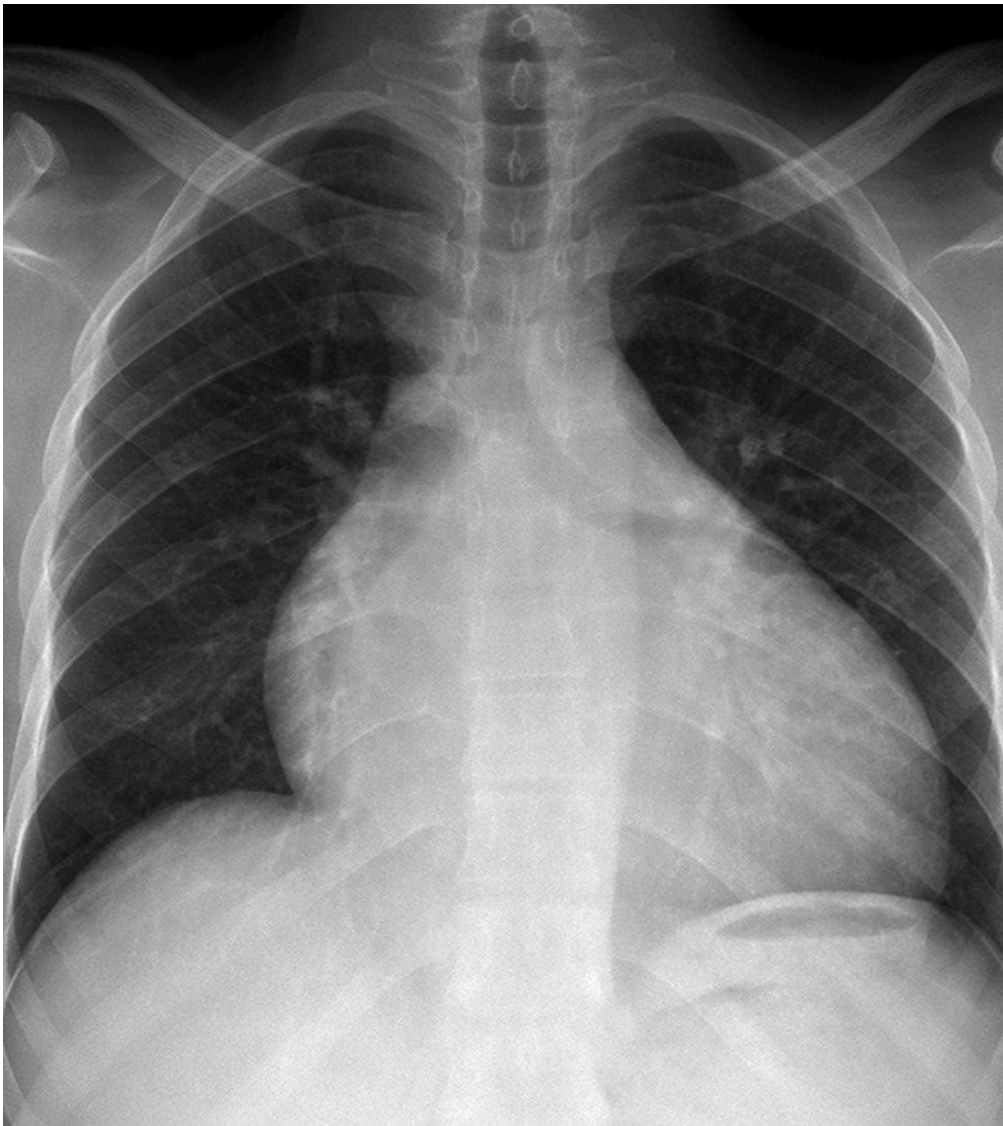
### **Prompts:**

- What does the CXR/ECG show?
- How is this condition managed acutely?

### **Marking:**

|                                                                              | Mark |
|------------------------------------------------------------------------------|------|
| <b>Identifies likely cardiomyopathy (DCM) based on history/exam/findings</b> | 2    |
| <b>Appropriate management – ICU, monitor, overdrive pacing etc</b>           | 2    |
| Interprets ECG (NSVT, abnormal in young patient)                             | 1    |
| Interprets CXR – overload, cardiomegaly                                      | 1    |
| Suggests appropriate medication (BB, ACEi, AT2R, spironolactone)             | 1    |
| Discusses other options – transplant/od pacing, ECMO                         | 2    |
| Approach to intern                                                           | 1    |

CXR



ECG

