OSCE

Candidate information

Your RMO has been seeing Emilia Calibri, a 22 year old female who is normally fit and well and presented with back pain and fever. She was sent by her GP after he assessed her and referred in for management of her pain.

Your RMO is unsure how to manage her pain, and has asked for your advice.

Please take a focused history, review the GP referral, and advise your RMO on management.

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

Epidural abscess

Actor (RMO) information

You have been seeing Emilia Calibri, a 22 year old female who presented with back pain. Emilia gave birth one week ago by NVD and attended her GP today with lower back pain and fever. She also has right sided mastitis, but is continuing to breastfeed. She has no past medical history.

Her GP ordered an MRI and the report is included in his referral letter, as is an image from the MRI scan.

If you feel the candidate is struggling, you may mention either of the following:

****The GP letter is actually for a patient with a similar name to Emilia!**

**** Emilia had an L2 epidural for her delivery**

Prompts:

- Are there any abnormalities on the MRI scan?
- Could this be related to her recent delivery?
- How should we manage Emilia's back pain?

Marking:

- There is a high T2 and mildly isointense TI collection within the epidural space predominately within the anterior sacral space. This collection extends from the base of L5 to S3 and demonstrates peripheral enhancement. The maximum measurement is 62 mm in length and 9 mm in width. This is favoured reflect an epidural abscess. This collection is causing moderate mass effect on the thecal sac. There is no evidence of mass effect on the neural foramina.
- There is no associated osteomyelitis or discitis. The site of previous epidural at the level of the L2 is unremarkable. There is evidence of enhancement in the interspinous ligament at the level of L2/L3 which is likely at this site of recent epidural anaesthesia procedure.

	Mark
Correctly identifies epidural abscess on MRI scan, describes well	2
Asks appropriate questions – history of epidural, etc	2
Management of epidural abscess – Abx, neurosurgery	2
Realises GP letter has wrong results/name/info	1
Acknowledges pregnancy category classification of drugs	1
Management of mastitis	1
Approach	1

Seaford Meadows Medical Centre
201 Seaford Road
Seaford Meadows 5051

To whom it may concern,

Thank you for reviewing Emilia CHARBONE (DOB 20/06/1964), who presented to my surgery with back pain.
An MRI scan was normal, and I suspect she has lumbago on a background of chronic back pain.
Please manage her pain appropriately.

Regards,

Dr James Finchley

Medical History

2011 Diabetes type 2

2011 Hysterectomy

2012 PCOS - counselling

2012 Chronic back pain – analgesia

2014 Diabetic foot ulcer review

2014 Chronic back pain – referral to Chronic pain service

2015 NSTEMI

Medications

Lyrica 2 tabs nocte

Diazepam 10mg tds prn

Atorvastatin 40mg nocte

Aspirin 100mg mane

Oxycodone 5mg Q4H PRN

Panadol PRN

Allergies

Nil