

Example of GPs script:

Patient contribution

Good morning, nice to see you.

Okay.

No problem at all, okay. All right. All about your chest then today?

Was there anything else that you were hoping that we would talk about, apart from your chest?

Quite happy with that, alright, good.

Aside from that, is there anything else that we need to talk about?

ICE

Sounds like you might have picked this up from your husband, is that right?

Is that what you were thinking?

What were your thoughts—you thought that possibly your husband passed this onto you, did you have any thoughts as to what it was?

Worst case scenario for yourself? Any particular thoughts about what you were hoping I would do for you today?

We're not due to do your blood pressure today, are we? We've been keeping an eye on that, haven't we?

PSO

And you're not a smoker?

And it's you and your husband living together; is there anyone else in the house?

Do you have any bad habits – you've mentioned that you're not a smoker – are there any bad habits that I need to know about?

You're not a big drinker or anything like that?

Red flags

Okay, and your general health has been pretty good apart from the waterworks issue.

Focussed history

Right, so you're sweaty?

From your point of view, your symptoms have started yesterday?

And you've been chesty. Are you prone to this sort of thing?

Okay, any other symptoms at all, apart from the sweating?

You're not asthmatic at all?

And you've never had pneumonia yourself at all?

Your blood pressure's been under control?

Are you using anything to help you control the fever?

Focussed examination

Okay, so if you slip your coat off and we're just going to examine your chest for you today.

You've lost your voice a little bit there, haven't you, a little bit croaky?

Breathe away through your mouth. Lovely – turn around. That's great, okay. Can I get you to give me a good, hard blow through this, which is to check how tight your airways are – so a good, hard blow. Make sure you take a deep breath in first and then put your lips around the outside of this plastic tube and then blow as hard and fast as you can. Try and blow that off the end of the scale.

Rubbish. So, I want you to blow harder and faster, so your lips are right round there, and you're going to go like this... hard and fast. Can you do that?

Get your fingers out of the way, make sure that they're not in the way of the pointer. Deep breath... go.

Excellent, that was much better. Almost 350, that's lovely, great. That's great. So, you're not breathing faster than usual; your lungs sound fine. I'm just going to check your temperature and your pulse as well, if I may. I'll also have a look at your nose and your throat at the same time, all right? So, your temperature's normal.

Yeah, open your mouth. Breathe in. Close your mouth. Great, so your pulse is 90 and regular, and your oxygen numbers are good at 98. Take yourself a seat.

Identify problem and explain diagnosis

Well this is spreading in your house like wildfire, isn't it?

You don't have any underlying problems with your chest.

And your airways are fine, you're not particularly tight in your chest.

And your lung tissue yourself is fine, so there's no suggestion that you've got pneumonia or anything like that.

But I suspect that the underlying problem is a viral infection that's making you feel dreadful.

Check understanding

Do you need anything else clarifying?

Develops management plan / shares management plan

Now your question was 'do we need anything for it'? Well, probably not at this stage for you.

Paracetamol - Well that's sensible, and it's pretty safe as well, so you can take two of those four times a day to help control the fever.

Safety net and follow up

Have you - just to check - have you already received a leaflet from us advising that if you're poorly with a fever, diarrhoea or vomiting for 24 hours or longer, you need to skip your Ramipril.

Okay. So, I'm going to give you that as a guidance leaflet today, just to make sure you're aware of that.

It's unlikely to be anything sinister or worrying because you're not a smoker, but if that voice isn't getting any better after this, then we ought to think about that as well.

But if you do find that it's painful to breathe or that you're breathing much faster...

Yeah, or if you're coughing up blood or brown spit, then we could always see you again. So, let's see you urgently if you're finding that you're particularly breathless with this, or it hurts in the side of your chest when you're breathing. But if you're finding that—this cough may linger for a week or two, it's quite normal for these cold-like things to linger around for about a week, two weeks, possibly three weeks. If, after about two weeks, you're not

improving, we probably ought to see you, no matter what. If you've got a persistent fever, we're going to have to see you again urgently.

If you've got persistent fever, you need to be skipping your ramipril.

So, skip the Ramipril when you've got a fever, so that's the one thing that you need to watch out for. So, Ramipril, if you've got a fever, skip it for 24 hours until the fever settles. Does that make sense?

And I'm happy to see you again if that cough isn't improving after three weeks or if you're particularly out of breath.