

## Example of GPs script:

### Patient contribution

Hi there Sandra, nice to see you, how are you? Can I just check your date of birth?

Perfect, great. Okay. How can I help you, today?

Before we go any further, is it okay if I just check – is there anything else that you were hoping to discuss?

Okay, and that lump's been there for a wee while?

Nothing else we need to concentrate on, apart from this lump?

### ICE

Yeah. So, when you first found it, you weren't particularly anxious; why today?

What do you think it might be?

So, you want to rule cancer out, don't you?

Okay. Realistically, what do you think it is?

You're not sure, you're not sure. You've not spoken to anybody or read anything or anything like that?

Was there anything in particular that you were hoping I would do today for you?

### PSO

And you don't smoke either?

Who's at home with you?

In other respects, you've already mentioned you're not a smoker; no other bad habits I need to know about – you're not a big drinker or anything like that?

### Red flags

And your weight is okay, you're okay in yourself?

No, okay. So, no lumps or bumps anywhere else. Any symptoms that make you worried at all? Sweats at night or...

No lumps anywhere else? No lumps in your armpits, no new lumps in your breasts at all, they feel the same as usual?

### Focussed history

Okay. Just so that we can get a better feel for what might be going on, I'm just going to ask you some questions in that regard, if that's okay? Nothing in your family, thyroid-wise?

Have you gained weight?

So, it bounces up and down, okay. Any lumps or bumps anywhere else at all?

Is there anything in the family? In terms of...

Cancers or anything? Just lumps.

Do you get hot flushes with that?

So, not quite right, but your general health otherwise, and health - we don't see a lot of you, do we?

You had a mini-stroke back in February of 2016?

No further episodes like that, at all?

And no changes in your medication recently?

And the medication that you're on at the moment includes a statin and a medicine to stop your blood from being sticky. Your blood pressure's always been okay, hasn't it?

Oh, okay. Did they suit you, or was it just down to the liver function test?

There's no goitres in the family, there's no thyroid swellings in the family that you're aware of?

### **Focussed examination**

So, I'm just going to have a wee look from the front and then I'm going to have a look around the back.

I'm just going to come around the side. Can you swallow for me? And that swelling moves with the swallow doesn't it? Can you feel it as well, just to check that I'm feeling the same thing?

Yeah, so it moves when you swallow, doesn't it?

### **Identify problem and explain diagnosis**

We need to talk to you about your fears of the statin and decide with you if statins are right for you, if that's okay? I've got a number of considerations for that, but because you've had a mini-stroke, we want to do everything possible to keep the risk of future strokes to a minimum. Your priority is the lump in your neck, so let's do that today, and can we do the statin thing next time, if that's okay?

I suspect you might want to take a statin again at a lower dose, because it doesn't sound like it was causing you any major harm, and the liver function test is probably a side-show.

But we'll come back to that. Okay, let's focus on the neck, if that's all right. So, been there for about six months, got a little bit bigger, decided very recently to come and talk to me about it to rule out cancer.

So, that's your thyroid gland.

And it's not a sinister or worrying looking lump.

Which is good news for you; and it's diffuse, which means that the whole of the thyroid is - I can feel the whole of the thyroid gland. So, again, that's a reassuring thing that makes me think that it's not something that we need to worry about.

### **Check understanding**

Does that make sense?

Any questions?

### **Develops management plan / shares management plan**

Having said all of that, you'll probably be more comfortable if I just scan the neck and confirm that that's what it is.

I'm guessing, from what you've said already.

We don't need to scan it, because in about a quarter of women, I'll be able to feel their thyroid gland anyway, and it may just be incidental that you can now notice it. But you don't, from what you've already told me, have any symptoms that make me think that your thyroid function has changed significantly. So, underactive thyroids and overactive thyroids are sometime linked with swellings.

So, why don't you touch base with your husband and now you can share that we've decided that you appear to have a swelling of your gland, your thyroid gland in your neck, and that Dr Birrell says he sees them all the time. It doesn't feel like a worrying thyroid gland at all, but if it's changing we scan it.

If it stays as it is, then we don't scan it.

Do we need to do any other blood tests at the same time?

It looks like a goitre, I see goitres all the time, and they're not necessarily linked with an abnormality of the way that the thyroid works. Some people we can see them, sometimes you can't.

So, we'll arrange the blood test within the next - well, you had your thyroid checked last year, and that was fine.

We'll do it again now, and that antibody test, you'll have a chat with your husband, and give me a call if you decide that you want to scan.

#### **Safety net and follow up**

Otherwise, keep an eye on your neck, and if you're finding that there's any change in the appearance of it, and usually if you find that there's more of a lump on one side, we'll do the scan.

And if you get any of those - for future reference, if you get any of those symptoms that suggest that your thyroid is overactive or underactive, then we're very happy to see you again. Do you want any more written information about your thyroid gland?

(And the sort of symptoms that you'd expect to find with an overactive thyroid is weight loss and tremors, feeling anxious, some other things related to that, some diarrhoea, potentially. An underactive thyroid - tiredness, constipation, dryness of the skin, can all be linked with underactive thyroid.)

Okay. Patient.info.

Usually just a telephone consultation would be more than enough to address any concerns, but if you'd prefer to see me face-to-face, then I'd be happy to do that, too.

They'll say if they're normal and if they're abnormal - let's talk.

I suspect you might want to take a statin again, because it doesn't sound like it was causing you any major harm, and the liver function test is probably a side-show.