### COMLEX Level 2 PE Exam

A 33 year old man came to clinic with a headache and slight fever.



### Patient Data Sheet

- Patient Name: Mr. Dyler
- Clinical Settings: Family Practice Office
- **CC:** A 33 y/o male presents with headache and fever

#### Vital Signs:

- Blood pressure: 130/70 mm Hg
- Respirations: 14 per minute
- Temperature: 100 °F
- Pulse: 80 bpm
- **Height**: 69 inches
- Weight: 160.6 lbs.
- **BMI**: 23.7 kg/m2



### Differential Diagnosis

- Acute viral sinusitis
- Acute bacterial sinusitis
- Acute Rhinitis
- Influenza



### Opening Scenario

- A healthy-looking young man seated in the office, looks comfortable.
- Speaks in a nasal tone.
- Uses tissues for his runny nose.



# Subjective

- Hello Mr. Dyler, my name is Dr. Berland. What brings you to the hospital today?
- Hi doc, I have this headache and feel feverish. My nose won't stop watering for a week now.
- · I see. Could you tell me more about it?
- Yes doc, I have this strange headache. I am fine in the morning, as soon as I start work, I get a headache. It gets worse when I am at work, its the worst by lunch and then it slowly dies down. When I go back to home, I feel ok. My boss thinks I am trying to cut corners at work.



- Well that must be an odd feeling, I am sure. So where does it hurt?
- Well doc it hurts right here above my nose and in the front of my head (points to frontal and temporal regions).
- Ok. How bad is the pain if 1 is the least and 10 is the most?
- I would say 3 or 4, most days I can ignore it, pop an aspirin and work. For the last week or so its been a 5 or 6 most days.



- How would you describe the pain?
- Its like this ache that's always there. sometimes I feel empty up there, as if some vacuum was created.
- Does it stay in one place or does the pain move elsewhere?
- It stays pretty much in this area doc.
- I also see you have a bad cold, how long has that been there?
- Doc I keep getting these colds all year, mostly during winter. That's when the headache is the worst.



- I see. What kind of fluid or gunk comes out from your nose? Is it watery thin, or is it mucous?
- Its greenish, smelly gunk. I tried Nyquil's, Sudafed and other stuff from the pharmacy but it just wont go away.
- I understand. Do you feel like some of the gunk may be trickling to the back of your throat?
- Yes sometimes doc.
- Any problems with seeing?
- No doc.



- How about hearing?
- That's fine too doc
- You said you had a temperature this morning. Tell me more about that.
- Yes doc, I did. I felt warm last evening but I ignored it, this morning I was kinda shivering. I popped a couple of Tylenols and went to work anyway, but I just couldn't sit through it.
- Do you have a body ache?
- Well not really doc, I feel tired with this cold and headache now. but it doesn't really ache.
- · I see. any problems breathing?
- *No.*



### Pam Hugs Foss

- Ok Mr. Dyler, let me ask you about your other medical problems and medications.
- Sure doc.
- Do you have any medical illnesses or problems?
- No doc, none that I know of.
- Are you on any meds currently?
- Well I take vitamins and fish liver oil of course.
   I have a bottle of Aspirins and Tylenols and I keep using Sudafed, Nyquil and stuff from pharmacy for my cold. But I am not on any prescription meds.





### Pam Hugs Foss (Contd...)

- How are your bowel movements?
- They are fine.
- Any trouble with bladder?
- No doc.
- Any trouble sleeping at all?
- No doc.



#### Pam Hugs Foss (Contd...)

- · What kind of work do you do?
- I work at a hotel, I am the housekeeping manager. Can't complain its mostly executive desk work.

I see. Now I would like to ask you about your habits. I assure you that this information is confidential.

- Do you smoke?
- · No doc. I have never smoked.
- Do you drink alcohol?
- Only socially or sometimes on weekends when my friends are over.



#### Pam Hugs Foss (Contd...)

- · Do you do any drugs?
- No.
- Are you currently sexually active?
- · Yes only with my wife.



## Objective

- Ok. Mr. Dyler, thanks for all that information. I would now like to examine you. Let me wash my hands real quick before that. As soon as I am done, we will go over what I think.
- · Ok doc.
- Wash your hands.
- Drape the patient.
- Do a good general exam.
- Do RS exam first.
- Do a good HEENT exam.
- Check for frontal and maxillary tenderness. Frontal will be positive in this case.
- Quickly auscultate the heart and examine abdomen.
- Explains, offers and performs OMM if indicated.

# Closure: Assessment and Plan discussion

- Mr. Dyler, thank you for your co-operation. I would now go over my impressions and further plan with you.
- From what you described and from your examination, I think you have sinusitis, that's an infection of your sinuses around the nose. That is what gives you a runny nose and all that gunk, a fever and that typical headache.
- I would like to run some blood tests and get an X-ray of sinuses, to confirm the diagnosis though. I would start you on antibiotics and give you some meds for fever and the runny nose. That should take care of it. We will talk after the results come back and also 3 days after we start treatment, to see how you are doing and if anything needs to be changed.



Closure: Assessment and Plan discussion (Contd...)

- Do you have any questions at this point?
- Why do I get this vacuum like headache? Could it be something bad like a tumor?
- Well, the headache you described and your other symptoms are pretty characteristic of frontal sinusitis, that affects the sinuses right here, above your nose on your forehead. We are getting an X-ray to see if that really is the case. I understand your concern, but I would hope its not something serious like that. You would probably have many more symptoms and be sicker if you had a tumor. I hope not.
- Thanks doc. I think I am all set.



Closure: Assessment and Plan discussion (Contd...)

- · Nice to see you, Mr. Dyler. Take care.
- Shake hands and leave the room.



### Assessment and Plan

#### • Assessment:

- 1. Acute viral sinusitis
- 2. Acute bacterial sinusitis
- 3. Acute Rhinitis
- 4. Influenza

#### • Plan:

- 1. Amoxicillin 500 mg three times daily for 10 days.
- 2. OMM sinus drainage technique applied.
- 3. CBC with differential.
- 4. X-ray of sinuses.
- 5. X-ray maxillary sinuses (Water's view).
- 6. Return to office in 3 days.

# Happy Reading

