

# COMLEX Level 2 PE Exam

**A 72 years old man brought to ER by his sons as he fell from the porch fourth time since last month.**



# Patient Data Sheet

- **Patient Name** : Mr. Johnson
- **Clinical Settings** : ER
- **CC** : A 72 years old man is brought in by his sons as he fell from the porch of their house this morning.

## **Vital Signs :**

- **Blood Pressure** : 130/70 mm Hg
- **Respirations** : 12 per minute
- **Temperature** : 98.6 °F
- **Pulse** : 96 bpm, regular
- **Height** : 69 inches
- **Weight** : 185 lbs.
- **BMI** : 27.3 kg/m<sup>2</sup>



# **Differential Diagnosis Frequent falls in an elderly patient**

- Postural hypotension.
- Poly-pharmacy, first drug effects etc.
- Gait and postural instability, e.g. Hyperkinetic syndromes like Parkinson disease.
- Seizure disorder.
- TIA / Stroke.
- Failing vision.
- Vertigo.

# Key points to remember

- The etiology of frequent falls in the elderly is very varied.
- Many factors can overlap and contribute to this presentation.
- The general condition on admission may not be stable. Patient may not be the best historian. Family / care providers are heavily relied upon for a good history in most cases.
- Poly-pharmacy is a culprit in a large number of cases and must always be considered in the differential.



# Subjective

- **Hello Mr. Johnson, my name is Dr. Denes. I am a physician in this hospital. I will take care of you today. What brings you to the hospital ?**
- *I think I dozed off doc. My son here tells me I fell off the porch. The last thing I remember was sitting out in the porch this morning and next thing I am in the hospital.*
- **I see. Do you remember what led to your fall?**
- *No doc I don't know what happened.*

Contd...

## Subjective (Contd...)

- **I see. Did you pass out in between ?**
- *I must have doc.*
- **Were you a little groggy or confused on waking up?**
- *I still don't feel very clear headed doc.*
- **I see. Do you remember hurting yourself anywhere ?**
- *I don't think so doc.*
- **Can you walk on your own or do you need a walker or cane?**
- *I use a cane doctor.*



## Subjective (Contd...)

- **Your son told us that you have passed out this way and fallen four times last month. Was this similar to those episodes ?**
- *Well not really doc, the last three times I was standing, once I was in the bathroom when I passed out.*
- **Oh that is pretty concerning. I hope you did not hurt yourself anywhere.**
- *No thankfully I didn't break any bones doc. But I feel anxious to know what's going on.*
- **I understand your anxiety, Mr. Johnson. I will do my best to find out the cause and we will discuss how to treat it.**
- *Thank you doc.*

## Subjective (Contd...)

- **So Mr. Johnson, do you remember anything that precedes these episodes ? Any sound, smell, any feeling that its coming ?**
- *Not really doc. I don't think so.*
- **I see. Have you ever lost control of your bladder or bowel during these episodes?**
- *Doc, my son told me once I had peed in my pants. But other than that no.*
- **I see. Did you ever have up rolling of your eyes?**
- *I don't think so. (family also denies it).*
- **Did you ever bite your tongue during such an episode?**
- *Yes this time, my family said I had bitten my tongue.*



## Subjective (Contd...)

- **Has your family noticed any jerky movements of your body during such episodes ?**
- *Yes doc, we noticed he was like throwing a fit this time (the family answers).*
- **I see. Does your arm or leg feel weak ?**
- *No doc.*
- **How about your face, is it numb or tingly at all?**
- *No doc.*

## Subjective (Contd...)

- **Has your voice changed in any way recently?**
- *No doc.*
- **Do you have any headaches ?**
- *No doc.*
- **What would you say about your vision in this past month or so, has it changed?**
- *Not really doc. I still use the same glasses and I see as I used to in the past.*
- **Ok good. Does your head spin at all before these episodes?**
- *Not really doc.*
- **Have you ever felt sick or thrown up?**
- *No doc.*



# PAM HUGS FOSS

- **Ok Mr. Johnson. Now I would like to go over your medical problems, the list of meds you are on, your family's health and your social problems.**
- *Sure doctor.*
- **What medical problems do you have?**
- *I have blood pressure. I have an irregular heart beat. I had two heart attacks in the past, those were 4 and 6 years ago. I take pills for constipation.*

Contd...

## **PAM HUGS FOSS (Contd...)**

- **I see. Do you remember the meds that you are on?**
- *Lets see, doc . I take 2 pills for the BP, one for the heart beat, a baby aspirin, one blood thinner for which they check my numbers every month, I have a pill to put under my tongue when I get a chest pain. I told you about the constipation meds. I take a vitamin. I don't think there's anything else. You may check the list with my family or call my pharmacy to find out if I covered everything.*
- **Has any medication been recently changed to your knowledge?**
- *No doc*
- **Anything new added ?**
- *No doc*
- **Do you know of any doses that were changed ?**
- *No doc I am on the same medicines for many years now.*



## **PAM HUGS FOSS (Contd...)**

- **Good Mr. Johnson. I will check with your family to see if we covered everything.**
- **Are you allergic to any medication or other substance ?**
- *No doc.*
- **Have you been hospitalized for the same problem before?**
- *No doc, once I came to the ER, they didn't find anything, and sent me home. Other times I was alone at home, my sons came to know of my fall later. But I was ok by the time they came home. So they didn't bring me here.*

## **PAM HUGS FOSS (Contd...)**

- **Have you been hospitalized for other reasons in the past?**
- *Yes doc for both my heart attacks. I had the bypass once.*
- **Have you had any other surgeries, Mr. Johnson?**
- *No doc.*
- **Do you have any problems peeing?**
- *No doc.*
- **You said you are constipated. With the meds how are your bowel movements ?**
- *I move them once a day with the pills.*
- **Good to know that.**



## **PAM HUGS FOSS (Contd...)**

- **Is there any history of medical problems in your family ?**
- *My father died of a heart attack. He had high cholesterol too. So do I and my wife. My mother died naturally. My sons both have blood pressure.*
- **Okay Mr. Johnson, I would now like to ask you about your habits.**
- **Do you smoke ?**
- *No I don't smoke anymore. I smoked as a young man. About a pack a day for many years. I quit soon after retirement.*

## **PAM HUGS FOSS (Contd...)**

- **Do you drink alcohol ?**
- *No I don't.*
- **What kind of work did you do ?**
- *I worked in the stock exchange.*
- **Do you still drive ?**
- *I used to until 2 months ago. But after these falls my kids said daddy we don't think its safe. And I agree with them.*



# Physical Examination

- **Okay Mr. Johnson, I would now like to examine you. Let me wash my hands first.**
- Wash your hands.
- Drape the patient.
- Do a good general exam and HEENT.
- Examine CNS first.
- Examine other systems esp. CV.
- Do not miss doing fundus examination.
- Explains, offers and performs OMM if indicated.

# Closure: Assessment and Plan discussion

- **Thank you Mr. Johnson, let me help you get back into a comfortable position.**
- **Help the patient. Drape them appropriately again.**
- **Now lets go over my impressions. I will tell you what the possibilities are . We will need some tests to confirm the diagnosis. Once we have those results, I will be in a better position to say what is going on. I will go over all results and their meaning with you and we will come up with a further plan. Does that sound right?**
- *Yes doc.*



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

- **I know these falls are pretty concerning to you and your family and as a physician I am also concerned. I would like to find out what is going on.**
- **The very first possibility is you might be having a seizure during these episodes. Your history sounds pretty close to the description of seizure. So that's the first possibility.**

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

- **Another possibility is that there might be something, some mass or lesion inside the brain that is compressing some structures. Since you are on a blood thinner, my biggest concern is you might have bled somewhere inside your head. That mass of blood collection may be affecting your balance and gait.**
- **Another possibility which we cannot rule out at this time is that of a stroke, a silent one, which has affected your sense of balance and motion.**



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

- **A last possibility which I would like to keep in mind would be that of medications causing this. You are on a number of medications and they may be causing you to lose balance or feel dizzy and drop. You said you have been on the same medications for years, I would still like to review the whole list and see if there's anything there.**
- *Sure doc*

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

- **In case all of these turn out to be normal, I would just say it was a fainting episode, to which no cause was found.**
- **But before I confirm any diagnosis, we need to run basic blood tests. We would also need a CT scan of your head.**
- They already did that in ER doc.
- **Very well. I will go and look at it then.**



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

- **Once all results are back, I will come and go over the plan with you. I would also like to admit you for monitoring and further treatment.**
- Sure doc. Do you think I need some brain doctor ?
- **We might need a neurologist to see you. But lets not judge anything before all results are back. I assure you if you need to be seen by a neurologist, we will get them on board. We have fine neurologists in this hospital.**
- Thank you doc.

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

- **Do you have any other questions or concerns at this point, Mr. Johnson?**
- I guess no doc.
- **Thank you Mr. Johnson. I will go and review the CAT scan and arrange for other blood tests. We will meet again. Please take care.**
- **Shake hands and leave**



# Assessment and Plan

## ➤ **Assessment:**

1. Seizure disorder
2. Vaso-vagal syncope
3. Postural hypotension
4. TIA / Stroke
5. Medication Induced poly-pharmacy

## ➤ **Plan:**

1. Admit to ICU
2. ASA if CT head negative for hemorrhage, Ativan IVP prn for seizures
3. CBC with differential, CMP, Urine toxicology, CT head–non contrast, EKG- 12 lead, EEG, Echocardiogram, Carotid doppler
4. Consult Neurologist and Physical therapy
5. Patient education and counseling

# Happy Reading