

COMLEX Level 2 PE Exam

A 65 years old woman sent to the hospital from her nursing home as she keeps wetting her bed.



Patient Data Sheet

- **Patient Name** : Mrs. Sternberg
- **Clinical Settings** : Emergency Room
- **CC** : A 65 years old female presents with complaining of wetting her bed frequently.

➤ **Vital Signs:**

- **Blood Pressure** : 128/74 mm Hg
- **Respirations** : 14 per minute
- **Temperature** : 100.4 °F
- **Pulse** : 78 bpm, irregular
- **Height** : 64 inches
- **Weight** : 124 lbs.
- **BMI** : 21.3 kg/m²

Differential Diagnosis

- Urinary tract infection *.
- Autonomic neuropathy affecting bladder / Hyperactive bladder / Detrusor over activity or instability.
- Urinary incontinence.
- Stroke / TIA.
- Diuretics.
- Nephrolithiasis.
- * BPH (in case of a male patient).

Opening Scenario

- An elderly white female lying in bed. Looks somewhat untidy and has poor personal hygiene. Her clothes smell of urine.
- Patient looks weak and debilitated.

Subjective

- **Good morning Mrs. Sternberg. My name is Dr. Lee , I am a physician here in this hospital. I will take care of you.**
- **What brings you to the hospital today ?**
- *Doc my nurse says I keep going in the bed. I often wake up wet. Its so embarrassing sometimes. I cant dine with everyone else in the hall, they think I stink.*
- **I am sorry to hear that. I can understand it is an embarrassing situation. Let us try to find out what is going on and treat the problem.**

Contd...

Subjective (Contd...)

- *Sure doc, I want to get rid of this.*
- **I will help you. Let me ask you a few questions about the problem and then your other medical history, family history etc. Then I will examine you and then we will discuss what are the possibilities?**
- *Sounds okay doc.*
- **Good.**
- **So, Mrs. Sternberg, how long has this been happening ?**
- *About a week now doc.*

Subjective (Contd...)

- **I see. So do you not realize when your bladder is full and you want to go ?**
- *Sometimes I do realize, and by the time I can make it to the toilet, I go. Sometimes at night, I don't realize. I guess I am getting really old. Do I need to retrain for toilet ?*
- **I see. Well, lets find out more about your problem, then I can suggest a solution. I understand your concern and I will do my best to help you.**

Subjective (Contd...)

- **Do you have any burning sensation when you urinate ?**
- *Yes, I do.*
- **Okay.**
- **Does your belly hurt ?**
- *No doc.*
- **Is the toilet easily accessible from your room ?**
- *Its in my room doctor.*
- **Do you have any trouble walking to the toilet ?**
- *I haven't had any such problem so far. If I need help I call for a nurse and usually they come.*

Subjective (Contd...)

- **Do you have a fever ? / Do you feel warm ?**
- *Yes doc, I have been feeling warm for the last 2-3 days now.*
- **Have you been drinking a lot of water lately?**
- *Not really doc.*
- **I see. Do you have any problems with your bowel movements ? Like you soil your clothes or bed without knowing ?**
- *No doc, I don't have any such trouble.*
- **Does your arm or leg or face feel weak or numb?**
- *Not really doc.*

Pam Hugs Foss

- **Okay great. Now I would like to go over your other medical problems and medications.**
- *Sure doc.*
- **So what other medical problems do you have, Mrs. Sternberg ?**
- *I have blood pressure, and the irregular heart rate. I had a mini-stroke 5 months ago. That is why I am doing rehab in the nursing home. My sugars are a little off, but the doctor says its not diabetes. I have some trouble with my knees so I have to use a cane.*

Contd...

Pam Hugs Foss (Contd...)

- **I see. What medications are you currently on ?**
- *I take a water pill for BP, I have a pill for my heart. I take a baby aspirin every day. I take pills for my knees, calcium and vitamin D and a fosamax every Sunday. I think that is pretty much it, doctor.*
- **Great.**
- **Are you allergic to any medication or other substance?**
- *No doc.*

Pam Hugs Foss (Contd...)

- **Have you been hospitalized in the past ?**
- *Yes for my stroke 6 months ago. Never before that.*
- **Have you had any surgery in the past ?**
- *Well as a kid I had my appendix done. Other than that, none.*
- **Do you still have any weakness or numbness after your stroke ?**
- *I have some weakness of the left hand, doc. It was not a very big stroke doc, just my left arm and face were very weak.*

Pam Hugs Foss (Contd...)

- **Is there any history of medical problems in your family?**
- *My father died of a huge heart attack. My mother had blood pressure. Two of my three brothers have diabetes. I think that's it doc.*
- **Okay. Now I would like to ask you about your habits.**
- **Do you smoke ?**
- *No doc, I gave up years ago. I smoked when I was young. Not a lot, just 2-3 cigarettes a day for 5-6 years.*

Pam Hugs Foss (Contd...)

- **Okay. Do you drink any alcohol ?**
- *Not any more. I used to when I was younger. When you are old, you cant afford to do such things.*
- **Have you ever used recreational drugs ?**
- *No doc.*
- **What kind of work did you do ?**
- *I was a home maker. I never worked.*
- **Okay thank you for all the information, Mrs. Sternberg. Now I will wash my hands and examine you.**

Objective

- Wash your hands.
- Drape the patient.
- Examine : general, HEENT, Abdo in this order.
- Auscultate CVS and RS.
- Do a quick CNS exam for strength and reflexes in this case, as pt had stroke not too long ago.
- Do a CV angle tenderness in this case.
- Explain need of doing genital examination
- Explains, offers and performs OMM if indicated.

Closure: Assessment and Plan discussion

- **Thank you for your co-operation, Mrs. Sternberg. Let me go over my impressions of your problem now.**
- **The first thing that comes to my mind is a urinary tract infection, that is some bugs somewhere in your urinary system. Since you also have a fever, and since its common to get it from others in the rehab, I would suspect that being the top possibility.**
- *I see doc. Could it be from my stroke ?*
- **Yes, that is also a concern. That stoke might have weakened your bladder control.**

Contd...

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

- **A third possibility is that it might be your sugars. When you have a lot of sugar in your blood, it draws water with it. That way you feel more thirsty and you go more often. So we would also like to check for that.**
- *Okay.*
- **A last thing that I would keep in mind would be your water pill.**
- *I have been on the same pill for years doc, never had this problem.*
- **I see. I would still keep that at the back of my mind, just in case we cant find any other cause.**

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

- Okay.
- **I would like to run a couple of blood tests and a test of your urine. I would also like to get an X-ray of your belly, to see if there's anything there.**
- **After all the results are back, we will be in a better position to say what your problem is.**
- *Okay doc. Till then what should I do ?*
- **Till then we can offer you a toilet close to your bed, if you feel comfortable. If not, we can offer you a catheter or diapers, so you wont soil yourself.**

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

- Doc I think I would like to use the toilet.
- **Sure, I will make sure there's someone to help you get to the toilet, if you need help. You can always call for the nurse.**
- *That would be great, doctor.*
- **Meanwhile, I would start Tylenol for your temperature, I would also start an antibiotic, to take care of any bugs. Once I have the urine labs back, depending on which bug it is, we might need to change the antibiotic.**

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

- *Great doc.*
- **We will meet again once all the labs are back. Then I will be in a better position to tell you what the problem is. I will let you know if anything needs to be changed.**
- *Okay.*
- **Do you have any more questions or concerns for me Mrs. Sternberg ?**
- *No doc. I think you answered everything well.*
- **Thank you, Mrs. Sternberg. Take care and we will meet again.**

Assessment and Plan

➤ **Assessment**

- 1.UTI
- 2.Cystitis
- 3.Pyelonephritis
- 4.Nephrolithiasis
- 5.Detrusor instability
- 6.Autonomic bladder
- 7.DM

➤ **Plan**

- 1.Genital Examination.
- 2.Ceftriaxone 1 gm IV every 24 hours X 7 days, Acetaminophen 650 mg PO every 6 hours PRN for fever.
- 3.UA and microscopy, Urine and Blood culture, CBC with differential, CMP, HbA1c
- 4.X-ray KUB, CT scan with contrast.
- 5.Admit to hospital.

Happy Reading