



COMPLEX LEVEL 2 PE EXAM

FEVER IN A PEDIATRIC PATIENT






Patient Data Sheet

- **Patient Name** : Ms. Kayla
- **Clinical Settings** : Medicine Office
- **CC** : Jeanne Brown, mother of a 2 years old Kayla calls your office as her daughter has been running a temperature.
- Enter the room, dial the number provided next to the phone and obtain appropriate history.



Differential diagnoses

- URTI e.g. pharyngitis, laryngitis
 - LRTI e.g. bronchitis, bronchiolitis
 - Acute otitis media
 - Acute gastroenteritis
 - Meningitis
 - UTI
 - Cellulitis
 - Post-vaccination fever esp. after DPT vaccine
- 



Key information to remember

- Patient is not available for examination.
- Parent might be very concerned, it is important to reassure them and obtain accurate history.
- Ask for birth, developmental and immunization history in all pediatric patients.
- Always ask for child to be brought in for exam.
- Do not prescribe medications on phone.



Subjective

- Good morning Ms. Brown, my name is Dr. Singh. I have a message from my nurse this morning about your daughter Kayla. How may I help you?
- Hello doctor, yes I called in earlier this morning. My daughter feels warm since morning. I am concerned.
- I understand , Ms. Brown. Allow me to ask you a few questions to have a better assessment of the situation.
- Sure doc.



Subjective

- How long has Kayla felt warm ?
- Since she woke up this morning.
- Did you take her temperature Ms. Brown?
- No I didn't.
- Have you noticed any shivering or jitteriness?
- No doc.




Subjective

- Does she have a cough?
- Yes doc since 2 days.
- Does she bring up any gunk?
- Its mostly whitish stuff.
- What is it like?
- Its watery like saliva. Doesn't smell or anything.



Subjective

- I see. Is her breathing faster or does she seem like gasping?
 - Sometimes doctor.
-
- I see. Has she been able to keep food down?
 - Yes doc.
-
- That's good.
- 



Subjective

- Does she have a rash?
 - No doc.
-
- Are her lips or skin very dry or parched?
 - Lips seem dry doc.
-
- Is she thirsty all the time?
 - Yes doc she is.



Subjective

- Is she awake and playful as usual ?
- No doc she looks very tired.
- Are her eyes sunken?
- Yes doc somewhat.
- How are her bowel movements ?did she have loose stool?
- No doc it was as usual.




Subjective

- I see. Is her stool foul smelling?
 - No doc.
-
- What is the color of stools?
 - They are golden brown, no change.
-
- How much has she peed?
 - I didn't pay attention to that.



PMH

- Thank you for all that information, Ms. Brown. I would now like to ask about her health in general.
 - Sure doc.
 - Does she have any medical problems ?
 - None doc, she is a healthy child.
 - Good.
- 



BIRTH AND DEVELOPMENTAL HISTORY

- Now lets talk a little bit about her birth, growth and development.
- Was she born at full term?
- Yes doc.
- Was this a normal vaginal delivery?
- Yes doctor.



CONTD.

- How many other children do you have Ms. Brown?
- Kayla is my only daughter so far , doctor.
- I see. Did Kayla have any medical problems soon after birth ?
- No doc.
- Great, now I will ask you about her immunization.



IMMUNIZATION HISTORY

- Has she been vaccinated regularly?
- Yes doc, we have a pediatrician and she keeps track of everything. She is very thorough. We visited her just 2 months ago for vaccination.
- That's great. I am glad to hear that you are being taken care of.
- Thank you doctor.




SOCIAL AND SICK CONTACT HISTORY

- Is anyone in the home sick or did she come in contact with anyone who was sick in the last week or so?
- No doc I don't think so.
- Okay. Who takes care of her all day?
- I do doc, I have left my job so I can be with her.
- I see.



CONTD.

- Does anyone smoke around her?
 - No doc, we are both very health conscious and we keep our house very clean.
 - That is great. Thanks for all the information Ms. Brown. Now lets talk about what to do next.
 - Sure doc.
- 




Objective

- Ms. Brown, from what you described, it sounds like Kayla has a respiratory tract infection, like bronchitis or may be pneumonia. All these symptoms are seen in these conditions. She also sounds like she might be a little dehydrated. I would like you to bring her to the hospital as soon as you can.
- Only after examining her we would be able to get a fair assessment of her condition. Then we can start treatment right away.




CLOSURE: ASSESSMENT AND PLAN

DISCUSSION

- Okay doc, but I don't have a car and my husband might not be able to take off from work right now.
 - I understand, Ms. Brown. I would like you to take a cab if you can. If not, I can arrange for an ambulance to pick you up.
 - Sure doc, that would be wonderful.
 - Alright I will arrange for it. Please give me your street address.
- 



CONTD.

- So should I ask for your office right away doctor?
 - Well , she will be brought to the ED first, Ms. Brown. As soon as you get there, a nurse and a doc will start taking care of her. You may then let them know you spoke with me and ask for me to be paged. I will be there as soon as I can.
 - Thank you doc. What is your last name?
- 

CONTD.

- Its Dr. Singh,(spell if she wants) please ask for me to be paged and I will be with you soon.
- Thanks doc.
- Can I answer any more questions?
- No doc, I will see you soon.
- Sure Ms. Brown. please take care and please keep giving her fluids till you reach here.



CONTD.

- Sure doctor, I will do that. Any other protective measures?
- Yes, please keep her body well covered.
- Sure doctor.
- Thank you Ms. Brown. See you soon.
- Thank you doctor.

ASSESSMENT AND PLAN

- **Assessment:**

1. Bronchitis
2. Pneumonia
3. Upper respiratory tract infection
4. Acute Otitis media

- **Plan:**

1. Physical examination of child
2. Antibiotics if bacterial infection suspected
3. Oxygen therapy via high-flow via nasal cannula, Inhaled bronchodilators, IV hydration
4. CBC with differential, CMP, X-ray chest
5. Admit to hospital and Transportation assistance via ambulance
6. Counseling and education to care-giver

Happy Reading