

# COMLEX Level 2 PE Exam

A 60 year old man came to clinic with coughing up blood for a week.



# Patient Data Sheet

- **Patient Name** : Herman Anthony
- **Clinical Settings** : Family Medicine Office
- **CC** : A 60 year old very concerned male complaints of coughing up blood

## Vital Signs:

- **Blood Pressure** : 120/84 mm Hg
- **Respirations** : 14 per minute
- **Temperature** : 99.2 °F
- **Pulse** : 100 bpm, irregular
- **Height** : 70 inches
- **Weight** : 160 lbs.
- **BMI** : 23 kg/m<sup>2</sup>





# Differential Diagnosis

- Chronic bronchitis.
- Medication induced e.g. Warfarin, Heparin, etc.
- CA larynx/ Bronchogenic CA.
- Pulmonary embolus.
- TB



# Key information to remember

- Doorway information.
- Patient and his wife are very anxious, try to reassure every few minutes.
- Learn to give a bad diagnosis like CA in an acceptable way, always provide reassurance and enough support.
- In an elderly man, CA is more likely than other diagnoses. Also, they are usually on multiple medications, so medication induced hemoptysis is also likely.
- Keep the diagnosis of Mitral Stenosis at the back of your mind, esp. in middle aged/younger patients, and females.





# Subjective

- **Good morning Mr. Anthony, my name is Dr. Shah. I am a physician in this hospital, I will take care of you today. What brings you here today ?**
- *Good morning doctor. I am coughing up blood (patient is in tears at this point, his wife also looks very concerned).*
- **I understand your concerns, sir. It is indeed frightening to see blood. (Offer tissues, offer some water. Let him relax and then resume).**
- Okay lets talk more about it, then I would have a better idea of what we are dealing with. It would make it easier to decide the further plan.



**Contd...**

# Subjective (Contd...)

- *Okay doctor.*
- **Okay Mr. Anthony, I will ask you some questions about your current problem and related symptoms first. Then we will go over your other medical problems, your medication list, habits, family history and the like. Then I will examine you. After I am done seeing you, we will go over what my impressions are, and then we will discuss the plan. At any point if you have any questions or concerns, please feel free to ask me.**
- *Sure doctor.*





# Subjective (Contd...)

- **So Mr. Anthony, how long has this coughing up blood being going on ?**
- *About a week now doctor.*
- **I see, do you remember how it started?**
- *Well nothing in particular doc. I was just at the breakfast table last Saturday morning, and I had a bad fit of cough. I used a tissue as I thought I was bringing up some gunk. I was shocked to see blood in it. Since then I have coughed up blood thrice.*
- **I see.**



# Subjective (Contd...)

- **So how long has this cough been there sir?**
- *Well doctor, I wont lie to you. I was a smoker, I quit 2 years ago. I get this cough every year, in fact most months of the year its there, but its worse in winter. Usually I bring up greenish or yellowish mucus. But I never coughed blood.*
- **I see. Its good that you gave up smoking sir. I understand you must be very concerned. Lets try to get to the bottom of it.**





# Subjective (Contd...)

- **So Mr. Anthony do you also get short of breath?**
- *Yes doc, its been getting worse over the years.*
- **I see. Have you noticed any changes in your voice recently?**
- *Yes it sounds hoarse.*
- **Have you lost weight recently ?**
- *I don't think so doc.*



# Subjective (Contd...)

- **Does your chest hurt anywhere?**
- *No doc.*
- **Any trouble swallowing?**
- *No doc.*
- **Any fever?**
- *No doc.*
- **Any night sweats?**
- *No doc.*
- **Is anyone around you sick? Do they have TB ?**
- *No doc.*





# PAM HUGS FOSS

- **Ok lets go over your other medical problems, your med list and other history.**
- **Do you have other medical problems?**
- *Yes doc, I am a hypertensive, I have irregular heart beat, I had a heart attack 4 yrs ago, I also have glaucoma in both my eyes.*
- **What medications are you on?**
- *I take 2 pills for the blood pressure, one for the heart, a baby aspirin, a nitroglycerin, and drops for my eyes. My wife has the list.*



**Contd...**

# PAM HUGS FOSS (Contd...)

- **Do you take any blood thinners like coumadin?**
- *No doc.*
- **Very good, I will go over the list once I am done seeing you.**
- **Are you allergic to any medication or other substance?**
- *None that I know of.*
- **Have you been hospitalized in the past ?**
- *Yes doc, for my heart attack and before that for my irregular heart beat.*
- **Have you had any surgeries in past?**
- *Yes doc, this procedure where they shocked my heart to control the beat.*





# PAM HUGS FOSS (Contd...)

- **I see. Do you have any other heart conditions like mitral stenosis, that is any narrowing of the valves of your heart ?**
- *No I don't believe I do.*
- **Any medical problems in your family ?**
- *My father died of heart attack, my mother is diabetic. They both have blood pressure.*
- **Ok Mr. Anthony, let me ask you about your habits now.**
- **You already told me about your smoking. How much did you smoke before quitting ?**
- *About 2 packs a day for 40 years.*



# PAM HUGS FOSS (Contd...)

- **I see. Do you drink alcohol?**
- *Not now, but I used to as a youngster, only six pegs on the weekend*
- **Have you ever used recreational drugs ?**
- *No doc*
- **What work did you do sir ?**
- *I worked as a pharmacist*
- **Are you currently sexually active?**
- *No*





# Objective

- **Very well sir, now let me wash my hands and then I will examine you. Then we will go over what the possibilities are and what we would do next. Does that sound good ?**
- *Yes doctor. Sounds ok to me.*
- Wash your hands.
- Drape the patient.
- Do a good general and HEENT exam.
- Do an RS, CVS and abdo. exam. No need of CNS exam in this case.
- Explains, offers and performs OMM if indicated.



# Closure : Assessment and Plan discussion

- **Thank you for your cooperation, Mr. Anthony. Lets talk about my impressions now.**
- *Sure doc, I am eager to know.*
- **Well there are a number of possibilities that I am considering right now. We would need some basic blood tests and an X-ray of your chest. After that I would be in a better position to say for sure what it is.**
- **Right now the possibility number one is chronic bronchitis ,which is a type of lung disease, a COPD. Since you have been a smoker, and you have this cough for years, and it gets worse in winter, I believe lung disease is the first possibility.**





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

- **What might be happening now is that some parts of the lung are so worn out that the blood vessels close to them burst when you cough and that's why you cough up blood.**
- **Another possibility is the meds you are taking. You are on aspirin, which is also a type of blood thinner. It may be causing smaller erosions especially in your food pipe. And they bleed small amounts, and its possible that that blood gets mixed with your sputum, so it looks like you are coughing up blood.**



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

- **Mr. Anthony, I would also like to tell you one serious possibility. Since you are a smoker, and you also mentioned that you noticed change in your voice, there's a small possibility that it might be throat cancer.**
- **(Patient may appear sad or anxious).**
- **I don't mean to scare you by any means, I know you are already anxious. But I have to mention that this might be a possibility. Until we have done all the tests, its hard to tell what is the true diagnosis.**





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

- *Ok doc.*
- **Do you have any concerns sir?**
- *Doc will I die ? (pt starts weeping, reassure, let them regain composure and then talk).*
- **Mr. Anthony, I understand your concerns. Its very natural that most people think of cancer as being a killer. However, it would be very premature to say anything in your case just yet. We still don't know if it really is cancer. Even if it is, we don't know how far and wide it has spread and what tissues are affected. Once we know all that, we would be in a better position to make a treatment plan.**



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

- **I can only hope you have come in early enough. Most cancers today have treatment and people do recover. So until we get our results , I would encourage you to think of it only as a possibility, not as a final diagnosis.**
- *Thank you doctor.*
- **Mr. Anthony, lets just hope its not cancer, for now. We will know for sure only with the tests.**
- *Sure doctor.*
- **Please be assured, I will be with you in every step. Once we get the lab tests back, we will meet again. Then we will discuss what is the exact diagnosis, and how we plan to treat it.**





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

- **I will tell you all treatment options and discuss at every stage with you. I would also like to admit you for further work up. Does that sound right ?**
- *Yes it does doctor.*
- **Good. Is there any other question or concern that I can answer at this point ?**
- *No doctor I think we are good.*



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

- **Okay. We will talk again after having blood tests and X-ray.**
- *Ok doctor.*
- **Thank you sir.**
- Shake hands and leave.





# Assessment and Plan

- **Assessment:**

1. Chronic bronchitis
2. TB
3. Pulmonary Embolism
4. CA Larynx
5. CA lung
6. Medication induced hemoptysis e.g. Warfarin, ASA

- **Plan:**

1. Admit to hospital and air-borne isolation
2. CBC with differential, CMP
3. Sputum culture, sensitivity and microscopy, Sputum AFB, Sputum Cytology
4. X-ray chest Pa and lateral, CT chest
5. Consult pulmonary team
6. Counseling and education of patient



Happy Reading

