## **Patient Case**

I'll provide a detailed assessment based on the interaction transcript and rubric criteria.
Detailed Assessment:
1. History Taking: 3/5Strengths:
- Asked appropriate questions about chest pain characteristics
- Explored timing and aggravating/alleviating factors
- Inquired about associated symptoms
Areas for Improvement:
- Could have explored social history earlier given stress component
- Limited exploration of other systemic symptoms despite patient's underlying condition
- Missed opportunity to explore weight loss and difficulty swallowing in detail
1. Physical Examination: 4/5Strengths:
- Appropriate cardiac and pulmonary examination
- EKG ordered promptly
- Systematic approach to vital signs
Areas for Improvement:
- Could have included examination for skin changes/telangiectasias
- Missing examination of hands given Raynaud's symptoms

1. Diagnostic Impression and Communication: 2/5Strengths:

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- Ordered appropriate initial tests
Areas for Improvement:
- Limited discussion of diagnostic impressions with patien
- No clear communication about potential diagnoses
- Missing explanation of next steps
1. Clinical Orders: 3/5Strengths:
- Appropriate basic cardiac workup
- Vital signs checked
Areas for Improvement:
- Missing orders for:
- Esophageal motility studies
- ANA/other autoimmune workup
- Upper endoscopy consideration
1. Reviewing Results and Next Steps: 2/5Strengths:

- Basic test results obtained

Areas for Improvement:

- No clear discussion of results with patient

- No management plan discussed

- Missing explanation of further diagnostic steps

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1. Empathy and Patient Interaction: 3/5Strengths:
- Professional tone maintained
- Patient allowed to express concerns
Areas for Improvement:
- Limited acknowledgment of patient's anxiety
- Could have shown more empathy regarding stress and recent relationship issues
- Missing reassurance and support
Overall Assessment:
Final Score: 17/30 (57%)
Summary of Strengths:- Good basic history taking skills
- Appropriate initial cardiac workup
- Professional demeanor maintained
Areas Needing Improvement:1. Broader systems review needed given complex presentation
2. More comprehensive diagnostic workup planning
3. Better communication of findings and next steps
4. Enhanced empathetic response to patient's psychological state
Recommendations for Improvement:
Review the clinical features and workup of CREST syndrome

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- 2. Practice explaining complex medical conditions in simple terms
- 3. Work on incorporating empathetic statements into clinical interactions
- 4. Study the appropriate workup for esophageal motility disorders
- 5. Consider additional training in breaking down complex medical situations for patients

Learning Resources:- Case studies in rheumatology

- Communication skills workshops
- Clinical guidelines for esophageal motility disorders
- Patient-centered communication resources