

## Case 1

- 46 YO Woman
- Asymptomatic
- BMI 31
- PB: 124/75
- FPG: 8.4 2HPP: 13.7 HbA1c:8.4%

### • Take history based on her results

- History of being diagnosed with DM?
- DM symptoms? Polydipsia – polyphagia .....etc
- Diabetic complications
  - Diabetic nephropathy : frothy urine .....
  - Diabetic retinopathy : vision change.....
- Risk factors of DM
  - History of HTN
  - Hx of dyslipidemia
  - Smoking
  - CVS events
  - Family history of chronic diseases: DM, HTN, premature CVD,
  - Diet and lifestyle
  - Medications?
- Start by Social History in OSCE
  - Occupation
  - Marital status
  - Alcohol
  -

### • How are you going to plan her management including education and prevention?

- Break the news to the patient.
- ICE.

- I for ideas
- C for concern
- E for expectations
- Non pharmacological
  - Dietary
    - No carbs
    - No refined
    - Low calorie ...
  - Exercise
    - 30 min for 5 days a week
    - Brisk walking
- Prevention
  - Referral to
    - Ophthalmology
    - Dietitian
    - **No nephro !!!!**
  - Education about foot care
- Follow up
  - Lipid profile
  - Albumen creatinine ratio.
  - FBG and HbA1c
- Pharmacological
  - Metformin.

## Case 2

- 44YO Man
- Want to quit smoking
- BMI: 27
- BP: 136/84

### What areas are you going to discuss regarding smoking history?

- How long
- Type of
- Quantity
- Did you try quit smoking ? how many times ?
- Attempts of quitting << **when** did he come back to smoking ? << **why** did you fail to quit ?
- Duration of quitting.
- Risks of CVD

- HTN
- Dyslipidemia
- Physical activity
- DM
- Asthma and chronic cough and COPDs
- Assess dependence
  - By asking the patient : when he wakes up ?
- ICE
  - I: Quit smoking
  - C: lung cancer
  - E: expectation of help.
- Family history

## Can you help him quite smoking ?

- Better to start by benefits and hopes
- 5 As
  - Ask
  - Advice
  - Assess
  - Assist
    - Don't sit with smokers
    - Try to stop.
  - Arrange
- Social support
- Quitting date
  - Write something like contract.
- Get rid of cigarettes
- Get rid of ashtray
- Don't sit with smokers
- Pharmacological :
  - Nicotine
    - 20 cig > 21 mg – 24 hrs – change site . 14→7→
    - Champix ? noo- Neevverrrr smoke with it
      - Max 3 months
- Follow up in smoking cessation clinic (Points in OSCE)
  - Appointment not less than 2 weeks

## Case 3

- 56 YO women.
- With left breast mass.

**How to take a focused history of her complaint and educate her regarding the recommendations of breast screening?**

- Location.
- Onset.
- How was it discovered.
- Pain?
- Discharge? (bloody or not).
- Growth rate.
- Trauma.

**Menstrual history:**

- Age of menarche.
- Number of children.
- OCP/ hormonal therapy.
- Breast feeding.
- Age of menopause.
- Age of first pregnancy.
- Number of abortions.

**Family history:**

- Similar in the family.
- Any member of family with history of malignancy.

**Social history:**

- Age of married.
- Smoking.

**Examination:**

- I would like to examine the patient to see the location and type and shape and if there is any associated lymph node.

**How to diagnose:**

- Mammography & ultra sound (always together)

**Follow up:**

- FNA (if needed).
- Surgery (if needed).

