

PRESENTATIONS

Patient Presentations are **THE MOST IMPORTANT SKILL** you can develop as a med student.

The 8 Steps

1) Summary Statement

Demographics

Risk Factors/PMH

Chief Complaint

2) History (OPQRST)

3) Pertinent Pos/Neg

(Approximately 5)

4) Vitals

5) Physical Exam

(Approximately 3)

6) Differential Diagnosis

Be sure to briefly argue for and against each one

7) Workup Plan

8) Treatment Plan

*For me, treatment plan is the easiest to forget. RUN IT PAST A RESIDENT FIRST IF POSSIBLE.

Approach to Your Presentation

Stay FOCUSED, THOROUGH, and ORGANIZED

(I recommend outlining your 8 point presentation on your scratch paper. It keeps you from getting lost, disorganized, and forgetful)

Here is how it sounds...

- 1) I have a 40 year old male with a PMH of diabetes, hypertension, and tobacco use who presents with chest pain
- 2) It started suddenly, 2 hours ago, and is described as worsening pressure that is severe, radiates to the shoulder, and is worse when laying flat
- 3) He has nausea and vomiting, but denies fever, cough, and difficulty breathing
- 4) He is tachycardic and afebrile
- 5) On exam, there are no abnormal heart sounds. The lungs are clear bilaterally, and there is good peripheral perfusion without edema
- 6) ****THIS IS THE REAL GRADE BOOSTER!!!!**** I think he may have **ACS**, because of the radiating pain. But I also considered **Pulmonary Embolism** because of the tachycardia, **Pericarditis** because of the positional component, and **GI causes** because of the nausea. I highly doubt **Pneumonia, Aortic Dissection, and Pneumothorax**
- 7) I want an EKG, Chest X-Ray, and Troponin
- 8) And for treatment- I want to start by giving him aspirin and morphine.

Finally: BE CONFIDENT, STOP TALKING, and END YOUR PRESENTATION