


MINISTRY OF EDUCATION AND SCIENCE OF THE KYRGYZ REPUBLIC
OSH INTERNATIONAL MEDICAL UNIVERSITY
DEPARTMENT OF CLINICAL DISCIPLINES
Department of Surgical Specialties Programs

REVIEWED

At the department meeting, protocol No. _____


From "17" 11 2024

Head of Department, Nurlanova N.N. 

APPROVED

Chair of the UMS OMMU

Pr. No. 3 dated 20/11 2024

Toktonazarova N.T. 

EXAMINATION STATION PASSPORT

"Acute appendicitis"

Discipline: Surgery

Compiled by: Rakhat Ali Abbas

2024

Surgery Station

Materials and equipment for the station:

- Couch
- Dummy
- Thermometer
- Stethoscope
- Tonometer
- Antiseptic

Clinical case. A 25-year-old man came to his family doctor complaining of pain in the right iliac region. He did not vomit, but felt nauseous. The pain was constant, without irradiation, and his body temperature was 37.5 °C. The patient had been feeling this way for several hours.

You have 15 minutes to collect the patient's medical history, conduct a focused examination, and determine the treatment plan.

1. Standardized patient assessment sheet.

Student _____ course _____ group _____

№	Stages	Mark of completion		Patient response and action
		Points	Points	
Real medical history. Examiner.				
1	Did the examiner ask what symptoms the patient had?	0-1		Pain in the right iliac region, no vomiting, but feeling nauseous, general weakness, malaise, elevated body temperature of 37.5 °C.
2	Did the examiner ask when the patient became ill?	0-1		The patient has been feeling this way for several hours.
3	Did the examiner ask what kind of pain the patient was experiencing?	0-1		The pain is constant, without radiation.
4	Did the examiner ask what the patient thought was causing the illness?	0-1		Does not know.
5	Did the examinee ask if there was vomiting or diarrhea?	0-1		No.
6	Did the examinee ask if the patient was taking any medication?	0-1		No.
Physical examination. Examiner.				
7	Did the examiner wash their hands before and after the examination?	0-1		Yes Yes
8	Did the examiner assess the patient's general condition?	0-2		Yes, general condition is moderately severe
9	Did the examiner examine the skin?	0-2		Yes, clean, pale, hot to the touch
10	Does the examiner give the patient a thermometer to measure their body temperature?	0-2		Yes, temperature is 37.5 C

11	Did the examinee assess the condition of the respiratory organs? Did they listen to the lungs with a stethoscope and count the respiratory rate?	0-2		Yes, vesicular breathing in the lungs, no rales, respiratory rate is 26 per minute.
12	Did the examinee assess the condition of the circulatory organs? Did they listen to the heart sounds with a stethoscope, count the pulse, and measure blood pressure?	0-2		Yes. Heart sounds are muffled, rhythmic. Pulse rate is 98 per minute (rapid). Blood pressure is 110/80 mm Hg.
13	Did the examinee examine the oral cavity?	0-2		Yes. Tongue is slightly coated, dry.
14	Did the examinee check for symptoms of peritoneal irritation (manipulation performed on a mannequin/standardized patient)?	0-2		Palpation of the abdomen in the right iliac region reveals tenderness, muscle tension, and symptoms of peritoneal irritation.
15	Abdominal palpation (manipulation performed on a mannequin/standardized patient)? Shchetkin-Blumberg's symptom.	0-3		When slowly pressing with your fingers on the anterior abdominal wall, and then after 3-5 seconds, quickly releasing your hand, you will feel a sharp pain in the abdomen (positive Shchetkin-Blumberg symptom).
16	Sitkovsky's symptom	0-3		When the patient is asked to lie on their left side, the pain on the right side intensifies (Sitkovsky's symptom).
17	Voskresensky's symptom (shirt symptom)	0-3		When moving your hand from top to bottom along the abdominal wall on the right side through the shirt, you can determine the presence of a painful area (Voskresensky's symptom, or shirt symptom).
Laboratory test				
18	Complete blood count (CBC)	0-3		In a complete blood count: 1. Increased ESR (erythrocyte sedimentation rate); 2. Band shift, or left shift in the leukocyte formula, an increase in the number of immature (band) neutrophils in the blood. 3. increased white blood cell count (leukocytosis 12-15 x 10/L).
Communication skills. Examined.				
19	Did they greet and introduce themselves? Did they say goodbye?	0-1		Yes Yes
20	Did the examinee ask permission to examine the patient?	0-1		Yes, the patient agreed
21	Did the examinee communicate a preliminary diagnosis, possibly acute appendicitis?	0-5		Yes. Acute appendicitis. Treatment is surgical only – appendectomy

22	Did the examinee explain the consequences of taking painkillers?	0-1		Yes, painkillers should not be administered so as not to obscure the clinical picture
23	Did the examinee discuss further treatment options (emergency hospitalization for surgical treatment)?	0-5		Yes, emergency hospitalization in the surgical department accompanied by an emergency medical team is necessary
24	Did the examinee explain the consequences of not treating the patient?	0-4		Yes, as peritonitis is a serious complication
TOTAL:				
If the examinee scored:				
45-50 points – “excellent”				
36-44 points – “good”				
26-35 points – “satisfactory”				
25 points – “failed”				

Observer's full name and signature _____

Date and time _____

1. Legend for the patient

You are a 25-year-old man who came to your family doctor complaining of pain in the right iliac region. There was no vomiting, but you feel nauseous. The pain is constant, without radiation. Body temperature is 37.5°C. The patient has been feeling this way for several hours.

On examination: the tongue is slightly coated and dry.

Palpation of the right iliac region reveals tenderness, muscle tension, and symptoms of peritoneal irritation.

When slowly pressing with your fingers on the anterior abdominal wall, and then after 3-5 seconds, quickly releasing your hand, you will feel a sharp pain in the abdomen (positive Shchetkin-Blumberg symptom).

When asked to lie on your left side, the pain on the right side intensifies (Sitkovsky symptom).

When moving your hand from top to bottom along the abdominal wall on the right side through your shirt, the presence of a painful area is determined (Voskresensky's symptom (shirt symptom)).

Your doctor has informed you that you may have acute appendicitis and need to be rushed to the surgical ward by ambulance, as there is a risk of a serious complication—peritonitis.

2. Educational questions for a clinical case

A 25-year-old man came to his family doctor complaining of pain in the right iliac region. He did not vomit, but felt nauseous. The pain was constant, without irradiation, and his body temperature was 37.5°C. The patient had been feeling this way for several hours.

Objectively: General condition is moderate. Temperature is 37.5°C. Skin is pale and hot to the touch. Breathing is vesicular, no rales. Respiratory rate is 26 per minute. Heart sounds are muffled, rhythmic. Pulse 98 per minute. Blood pressure 110/80 mm Hg.

tongue is slightly coated, dry.

palpation of the abdomen in the right iliac region reveals tenderness, muscle tension, and symptoms of peritoneal irritation.

When pressing slowly with your fingers on the anterior abdominal wall and then quickly releasing your hand after 3-5 seconds, you will feel a sharp pain in the abdomen (positive Shchetkin-Blumberg symptom).

When you are asked to lie on your left side, the pain on the right side intensifies (Sitkovsky's symptom). When moving your hand from top to bottom along the abdominal wall on the right side through your shirt, the presence of a painful area is determined (Voskresensky's symptom (shirt symptom)).

The doctor said that the patient may have acute appendicitis and needs to be rushed to the surgical ward by ambulance, as there is a risk of serious complications such as peritonitis. Painkillers should not be administered so as not to obscure the clinical picture.

A complete blood count and urinalysis are performed at the clinic.

The only treatment for a patient with acute appendicitis is surgery. The operation is an appendectomy.

2. Examination plan (check the appropriate box):

- 1) Interview
 - 2) Medical history
 - 3) Examination of the patient
 - 4) Objective data: palpation, auscultation
 - 5) Demonstration of practical skills for symptoms of peritoneal irritation on a model/on a SP
 - 6) Laboratory data
 - 7) Discussion of the diagnosis, treatment tactics, etc.
 - 8) _____
 - 9) _____
- Doctor (full name, legible) _____