



OSCE



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A few cases

So you are in the emergency room and have patients with different complaints like :

- Abdominal pain
- Back pain
- Altered mental status
So if you have elderly patient with altered mental status you have to check their urine because elderly people with urinary tract infections or have uremia or kidney failure are common for them to get altered mental status
- ...
- No symptoms at all (but you have abnormal laboratory values)

People present with variety of ways when they have problems in urinary system

****the most common presentation with patient of urinary disease is no symptoms at all**

Considerations

Remember that patients with pain we have to use socrates(history with pain),use open close questions,verbal and non verbal cues ,signposting ,summarizing

Loin pain (dull ache of the mid back)

Other names: renal angle pain, costovertebral angle (CVA) tenderness

Located in the area of the 12th rib near the spine

Due to stretching of the renal capsule or renal pelvis

Occurs due to infection of the kidney (pyelonephritis) either from hematogenous spread or from bacteria spreading from the bladder

This pain also can be from polycystic disease ,tumor , abscess that can be stretch the capsule ((non-specific pain))

Ureteric colic ("restless pain")((ureter))

This pain like they don't want to sit because it exacerbates the pain

Other name: renal colic

Located from the renal angle to the flank, can radiate to groin

Due to obstruction and dissension of the ureter ((urinary stones ,nephrothialisis)) this pain happens due to spasm of the smooth muscles

Note :biliary colic that gall stones obstructs in your biliary duct is distinct from peritonitis that they don't want to move in order not to exacerbate their pain

Dysuria (voiding pain)((pain with urination))

Often associated with increased urinary frequency ((to go to the bathroom more frequently and a lot with the same volume)) and hesitancy((difficulty in starting and continuing urination))

Located in lower abdomen or at urethral meatus (at the tip of the penis or at the end of the urethra of the female)

Due to inflammation of the bladder and urethra ((associated with lower abdominal pain))

Also consider Pain localized to penis and testicles indicates pathology in these areas.((this is a specific pain due to problem at this site, localized pain maybe due to infection of the penis,tumor))

Also in the testicles may be there is torsion (sever pain) and older people may have orchitis and epididymitis

In young men may have sexual transmitted diseases

Voiding symptoms

• **Storage Symptoms** related to the bladder

- Frequency (micturating more often with no increase in total volume) because of infection ,when they can't complete their urinate
- Urgency (sudden strong need to pass urine)
- Nocturia (waking more than twice in the night to urinate)

• **Voiding Symptoms**

- Hesitancy (difficulty or delay in starting urine flow)
- Slow flow (due to obstruction, are often result from prostatic enlargement (men),urethral obstruction (women))
- Incomplete emptying (hesitancy lead to incomplete emptying)

• **Post-voiding Symptoms** after voiding

- Dribbling (inability to stop the flow after voiding tend to degree of residual volume of the bladder ((obstruction)))

• **Incontinence** (inability to retain urine ,leakage of urine)

- Urge incontinence

strong urge ((urgency to go to the bathroom so urgency followed by bladder contraction and the urine leaks out))

- **Stress incontinence**

pressure is applied to the bladder and you can't hold the urine in for example : a woman after they have born children the muscles of the pelvic floor somewhat weakened ,when you cough ,when you sneeze so sometimes it requires surgery to tighten up the pelvic floor muscles

certain time before school age many kids wet the bed so there you have to ask if they have continence at night and then they lose it this is called secondary incontinence and it is usually differ that they never have continence in night ((usually kids till age 6 will have bedwetting)) is called primary incontinence// the secondary incontinence you have to ask about the stressors in their life

urine abnormalities

Polyuria (high volume of urinating for example in diabetes), **oliguria** (when urine volume is below 800 ml for example in renal failure) , **anuria** (when you don't urinate at all for example: in obstruction or the kidney can't make urine at all)

Pneumaturia (air in the urine when there is fistula in the intestines or vaginal fistula) , **faecuria** (feces in the urine due to fistula or crohn's disease ,inflammation) , **hematuria** (blood in the urine due to infection ,kidney stones)

Proteinuria (foamy urine and it will manifest other symptoms like edema because of changes in oncotic pressure)

Urinary System ((THE HISTORY))

Get the Chief Complaint (pain, voiding and storage problems, urine abnormalities)

HPI – when started, associated problems, aggravating/alleviating factors, etc.

ROS - Ask about pain, voiding changes, urine character

PMH – HTN, DM, vascular disease (secondary hypertension), UTI, stones, surgery

Medications – those metabolized abnormally in renal disease (decline in kidney function) , those associated with causing renal disease((for example: vancomycin ,macrolides))

Family History – genetic conditions leading to renal failure, (APKD (adult onset polycystic disease) , Alport's Syndrome)

SH – smoking, occupation, alcohol intake, diet ((because kidney metabolize toxic materials))

**if they have infection of course you have to ask about fever ,diabetes ((polyuria ;weight loss))

**if diabetic smokes they will develop kidney failure much more faster than non-diabetec

**patients with kidney stones have to drink a lot of water and reduce their salt intake

Genital System

بهاد الفيديو الدكتور ما حكا عن الهستوري لل genital system عشان رح نحكي عنهم بالفيديوهات الثانية

Menarche

Last menstrual period (LMP)

Length of cycles (first day of one to first day of next)

Abnormal bleeding

Pregnancy

Prolapse

Vaginal discharge

Pelvic pain

Structural abnormalities

Swelling

Discharge

Skin changes

Sexual function

Genital System

Chief Complaint

HPI

ROS – include menstrual hx, sexual history

PMH – prior Pap smears, infections, surgeries, pregnancies

Medication Hx – adverse reactions causing symptoms

FH – cancer involving genital system

SH – smoking, alcohol use, illicit drug use

Good luck 😊