

LEARNER HANDOUT

2-month old OSCE CASE SCENARIO

Today you will see a 2 month old female infant for a routine well child care visit.

You will need to obtain a complete history from the mother.

The mother does not speak any languages that you speak so a professional medical interpreter has been provided for you.

Assume that your physical examination of the patient reveals a normal infant. The details of the infant's exam is below:

Physical Examination

Temp: 37.5°C, Pulse: 116 bpm, Resp rate: 20 bpm, BP: 84/44,

Wt: 4815g (~50th percentile); Length: 57cm (~50th percentile); HC: 38.5 cm (~50th percentile)

General: Well appearing 2 month old infant. There are no dysmorphic features.

HEENT: Head is atraumatic. Anterior and posterior fontanelle are open and flat and normal in size and shape. The head is normocephalic. The cranial sutures are not fused. Sclera are clear b/l. Red reflex is present b/l. Tympanic membranes are clear and translucent bilaterally. Nares are clear with no sign of discharge. Mouth is clear with moist mucous membranes.

Neck: supple, no masses or defects noted

Lungs: clear to auscultation bilaterally with excellent air entry throughout all lung fields

Heart: regular rate and rhythm, normal s1 and split s2, no murmurs, rubs or gallops.

Abdomen: soft, non-tender, non-distended, normoactive bowel sounds, no hepatosplenomegaly, no masses.

Skin: no rashes or lesions

Hips: intact, no clicks or clunks.

Neuromuscular: normal muscle tone centrally and in all 4 extremities; all normal newborn reflexes (grasping, moro, sucking, rooting, etc.) are present; cranial nerves are all grossly intact.