



# Certifying Exam

## Case Materials

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## CLINICAL DECISION-MAKING

### CASE SAMPLE VIDEO

Use of the case materials in this document are demonstrated [here](#).



### CASE SUMMARY

Emergency physicians see patients with undifferentiated presentations. Clinical Decision-Making (CDM) cases are structured discussions designed to assess a candidate's ability to evaluate and treat such patients. A successful candidate will be able to explain their thought processes behind certain decisions made during the various phases of a clinical encounter.

### SCORING

Information on how this case will be scored can be found [here](#).



## CLINICAL DECISION-MAKING TASK SHEET

ROOM #

### CASE PARAMETERS

- This is a 15-minute case.
- You will interact with two examiners.
- This is an interview style without role playing; you should simply reply to the questions asked.
- You may be interrupted to move you through the case; this is not a reflection of your performance.

### PATIENT INFORMATION

14-year-old female presenting with her mother after a fainting episode.

### VITAL SIGNS

BP: 108/54, P: 88, R: 16, T: 37.0, O<sub>2</sub>Sat: 97%

### TASK STATEMENT

Your tasks are as follows:

1. List pertinent elements of a focused history and physical exam
2. Develop an appropriate differential and/or provisional diagnosis
3. Select and interpret appropriate studies
4. Articulate appropriate patient management including discharge instructions



STIMULUS 1. EMERGENCY DEPARTMENT ADMITTING FORM		ROOM #
PATIENT INFORMATION		
<b>Patient Name</b>	Emma McCarty	
<b>Age</b>	14-year-old	
<b>Gender</b>	Female	
<b>Method of Arrival</b>	Private vehicle	
<b>Presenting Complaint</b>	Fainting	
<b>General Appearance / History of Present Illness</b>	Presenting with her mother after a fainting episode.	
<b>Vital Signs on ED Arrival</b>	BP: 108/54 P: 88 R: 16 T: 37.0 O2 sat: 97%	



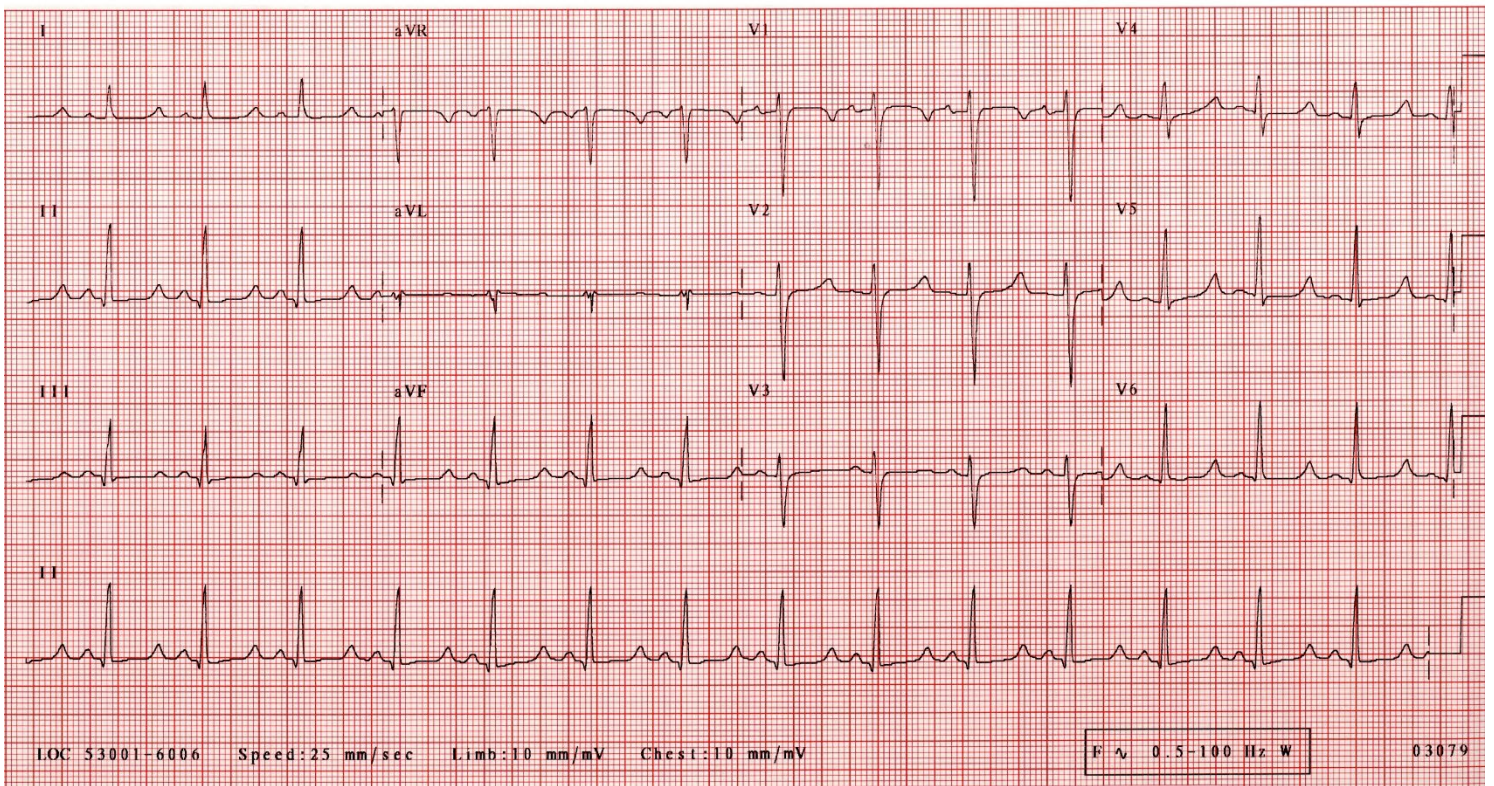
STIMULUS 2. HISTORICAL & PHYSICAL EXAM FINDINGS		ROOM #
<b>HISTORY OF PRESENT ILLNESS/ DESCRIPTION OF EVENT</b>		
<ul style="list-style-type: none"> <li>• Patient was participating in a track and field event.</li> <li>• She fainted and collapsed while running a 400-meter race.</li> <li>• There was no head trauma.</li> <li>• She reports no prodromal symptoms.</li> <li>• She had no CP or significant shortness of breath prior to her syncope.</li> <li>• She has never fainted previously.</li> <li>• She takes no meds and has no significant PMH.</li> <li>• Mother was watching from the stands and reports no seizure activity; it looked like she just collapsed.</li> <li>• Currently, she has no complaints and is neurologically intact.</li> </ul>		
<b>HISTORY</b>		
<b>Past Medical History</b>	Never fainted previously.	
<b>Medication</b>	None; no significant PMH	
<b>Allergies</b>	None	
<b>PHYSICAL EXAM FINDINGS</b>		
<b>Dermatologic</b>	Normal	
<b>HEENT</b>	Normal	
<b>Neck</b>	Normal	
<b>Respiratory</b>	Normal	
<b>Cardiac</b>	Normal; no murmur	
<b>Abdominal</b>	Normal	
<b>Extremities</b>	Normal	
<b>Neurologic</b>	Normal	



**STIMULUS 3. ECG**

**ROOM #**

Ventricular rate: 90 bpm  
PR interval: 140 ms  
QRS duration: 80 ms  
QTc: 539 ms





<b>STIMULUS 4. DIAGNOSTIC STUDIES</b>		<b>ROOM #</b>
<b>PREGNANCY TEST</b>	Negative	
<b>CBC</b>	Normal	
<b>CMP</b>	Normal	
<b>GLUCOSE</b>	Normal	
<b>CARDIAC POCUS</b>	Normal; No Pericardial Effusion, Good Contractility	