

**Marking Sheet: Difficult history - Haematemesis**

Examiner \_\_\_\_\_ Candidate \_\_\_\_\_

0= Not attempted, 1=partially completed, 2=fully completed

The candidate:	0	1	2
Introduces themselves, confirms patient identity			
Confirms nature of problem			
Ensure patient comfort, offers analgesia			
Is the vomit bright red or dark?			
Have you been vomiting repeatedly ? (Mallory Weiss Tear)			
When did it start? How many times? How Much?			
Have you felt faint or collapsed?			
Are you passing black tarry stool or lots of fresh red blood?			
Have you had any abdominal pain			
PMH: previous GI bleeding, Liver disease, , bleeding disorders			
Alcohol intake – verifies excessive alcohol intake			
DH: NSAID's, steroids, anticoagulants, antithrombolytics			
Mentions would perform physical examination			
Provide simple summary			
Use some form of risk score (Glasgow Blatchford or Rockall)			
Explains: low risk (Pre-endoscopy Rockall score 3 or less)			
Identifies NSAID use as possible cause. Recommend to stop NSAID.			
Outpatient follow up / Upper GI endoscopy			
Considers adding liver function tests to blood investigations in light of excessive alcohol intake			
Checks understanding			
Asks patient if he would like help to reduce alcohol intake			
Offers referral to local Alcohol Liaison team / service			
Invites questions			
Closes consultation appropriately			

Examiner's global score (1-5)

Actor's global score (1-5)

**Examiner's Impression:**  
**Comments**

**Pass      Borderline      Clear Fail**