

Station #: N/A

**Patient Information:**

**Name:** Chris Randall

**Age:** as SP appears (range 18-50)

**Marital Status:** married heterosexual

**Children:** yes

**Occupation:** Warehouse floor manager and forklift driver

**Pain complaint:** acute right humeral pain after MVA 3 days' post op

**Setting:** The patient is a warehouse worker scheduled to see Ortho in follow up 3 days after ORIF of a right humeral fracture sustained in an MVA. You were not involved in the surgery but received and reviewed the records. He has no significant PMH, medications or medication allergies or family history. Urine drug screen done in the ED was negative for Opiates, Cocaine, THC, Benzodiazepines, amphetamines, Barbiturates.

Pt was admitted overnight after the surgery, there were no complications. Prescription Monitoring Program check on discharge was unremarkable and pt was discharged with oxycodone-acetaminophen tablets 5/325 mg # 30 with instructions to take "1-2 tabs every 4 hours as needed for pain." Physical exam is unremarkable with intact neurovascular and wound exams.

**Learner tasks:**

1. Assess current pain level, the impact of that pain, and the effectiveness of the current pain management plan.
2. Estimate level of risk in of opioid pain management, including screening for substance use and mental health disorders in the patient and his family. Use PHQ-2, PMP query, single-question screening tool
3. Counsel patient on the risks and benefits of opioid analgesics, and obtain verbal informed consent for their use.
4. Prescribe opioids and non-opiate treatment in the appropriate strength and quantity for managing this condition, with clear instructions about dosing and safety precautions (including storage/disposal)
5. Make a follow up plan to support this patient through his recovery from this injury.
6. Recognize and respond to implicit bias in this case

Use this space to record feedback to provide to interviewer and also collect points to support ongoing review and learning.

Notes/Observations:

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