



**Family medicine**

**Archive Rouh**

**8<sup>th</sup> group**

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**Prepared By**

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# Intro

mention 3 skill that a family medicine physician

should have :

communication

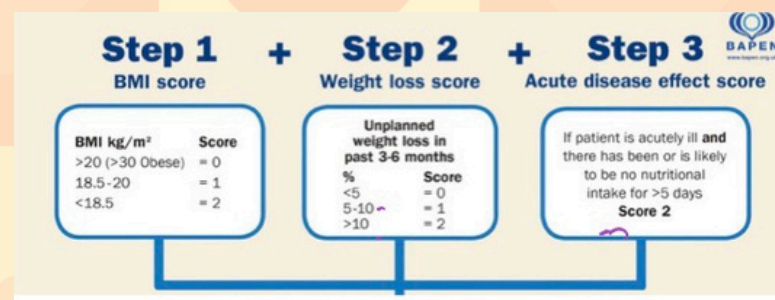
preventive

therapeutic

# Geriatric health

Name the score :

Must score



if score was 3,whats your interpretation:

She is at high risk ..  
so treatment is:

## 2 or more High Risk

### Treat\*

- Refer to dietitian, Nutritional Support Team or implement local policy
- Set goals, improve and increase overall nutritional intake
- Monitor and review care plan  
Hospital - weekly  
Care Home - monthly  
Community - monthly

\* Unless detrimental or no benefit is expected from nutritional support e.g. imminent death.

# Chest pain

Name the score :

Wells

if result was 1.5,whats your next step :

D-dimer

Clinical signs and symptoms of DVT <input checked="" type="checkbox"/>	No 0	Yes +3
PE is the #1 diagnosis OR equally likely <input checked="" type="checkbox"/>	No 0	Yes +3
Heart rate > 100	No 0	Yes +1.5
Immobilization at least three days OR surgery in the previous four weeks <input checked="" type="checkbox"/>	No 0	Yes +1.5
Previous, objectively diagnosed PE or DVT <input checked="" type="checkbox"/>	No 0	Yes +1.5
Hemoptysis.	No 0	Yes +1
Malignancy w/ treatment within six months or palliative. <input checked="" type="checkbox"/>	No 0	Yes +1

# HTN

A 50-YEAR-OLD MAN HAS NORMAL BLOOD PRESSURE READINGS IN THE CLINIC BUT HOME MEASUREMENTS SHOW ELEVATED BLOOD PRESSURE. WHAT IS THE MOST LIKELY DIAGNOSIS?

Masked HTN

HOW TO CONFIRM YOUR DIAGNOSIS?

Ambulatory blood pressure monitoring



# Dyspepsia

patient with postprandial fullness and early satiety for 6 months and has no improvement on PPI (she uses it only when needed) what is your diagnosis?



Functional dyspepsia

Next step for treatment ?

PPI (4-8w) if fail TCA (8-12w) if fail prokinetic (4w)

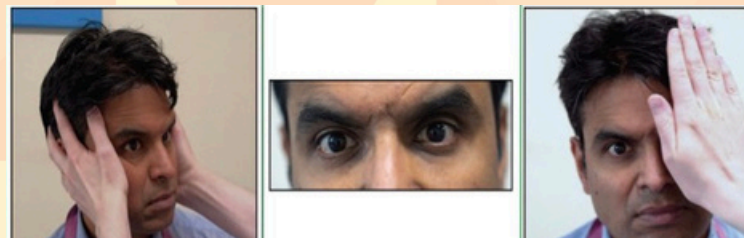
# Dizziness

patient tested for spontaneous continuous vertigo, name of this test?

HINTS test

-If test were normal, next step?

MRI



# DM

**what is your diagnosis ?**

Neuropathic diabetic ulcers



**-Periodically test to prevent it?**

- **Temperature discrimination or pinprick sensation (for small-fiber function)**
- **Vibration sensation using a 128 hertz (Hz) tuning fork (for large-fiber function).**
- **Light touch perception with 10-g monofilament testing to identify risk of ulceration and amputation**

# Abdominal pain

**Male with supra pupic pain ,**

**3 differential ?**

Inguinal hernia

PID

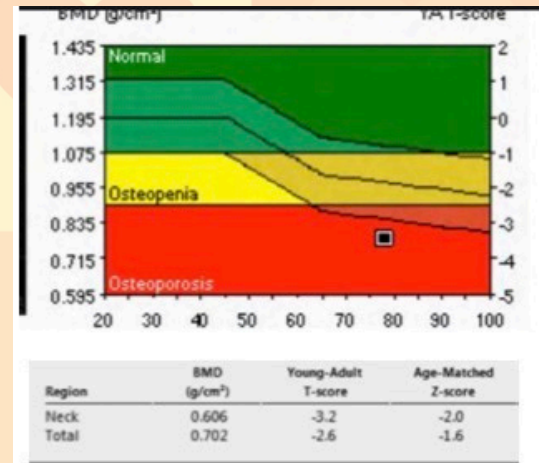
UTI



# Osteoporosis

## What is the diagnosis?

### Osteoporosis



## Advic patient that will use bisphosphanate:

- o Take first thing in the morning on an empty stomach
- o Swallow the tablet whole with a large glass of tap water
- o Do not take any other medication, eat or drink anything except tap water for at least 30 minutes
- o Stay upright for 30 minutes
- o Wait 4 hours before taking your calcium supplement

# Lung cancer

## When to screening ?

tomography (LDCT) in adults aged 50 to 80 years who have a 20 pack-year smoking history and currently smoke or have quit within the past 15 years. دتن دکتی اول

# Headache

Pt with severe headach ,neck rigidity,fever,  
diagnosis ?

Meningitis

Mention another 2 red flag :

start after 50 of age

sudden onset severe headache



# Fatigue

Mention 4symp of CFS ?

multijoint pain without swelling

muscle pain

sore throat

unrefreshing sleep



# URTI

Child with tem 38.7, tonsils exudate, swollen submandibular LN , what's the score ?

4!

Diagnosis?

strep pharyngitis

# Dyslipidemia

Case ٣ علامات

45 old man diabetic

LDL 195 , TGs 350, ASCVD risk score of 10%

how to manage ?

