Performance Overview for Jessica Szymanski on case Vijay Rao....

The following table summarizes your performance on each section of the case, whether you completed that section or not.

Time spent: 2hr 33min 32sec
Status: Submitted

Case Section	Status	Your Score	Time spent	Performance Details
Total Score		84%		
History	Done	89%	28min 12sec	43 questions asked, 23 correct, 3 missed relative to the case's list
Physical exams	Done	81%	22min 24sec	41 exams performed, 10 correct, 2 partially correct, 1 missed relative to the case's list
Key findings organization	Done		1min 48sec	5 findings listed; 11 listed by the case
Problem statement	Done		6min 43sec	97 words long; the case's was 87 words
Differentials	Done	100%	1min 16sec	6 items in the DDx, 3 correct, 0 missed relative to the case's list
Differentials ranking	Done	100% (lead/alt score) 100% (must not miss score)	41sec	
Tests	Done	17%	4min 39sec	1 correct test ordered, 3 extraneous, 5 missed relative to the case's list
Diagnosis	Done	100%	11sec	
Management plan	Done		9min 26sec	344 words long; the case's was 217 words
Exercises	Done	100% (of scored items only)	4min 18sec	2 of 2 correct (of scored items only)

History Notecard by Jessica Szymanski on case Vijay Rao

Use this worksheet to organize your thoughts before developing a differential diagnosis list.

1. **Indicate key symptoms (Sx) you have identified from the history. Start with the patient's reason(s) for the encounter and add additional symptoms obtained from further questioning.**
2. **Characterize the attributes of each symptom using "OLDCARTS". Capture the details in the appropriate column and row.**
3. **Review your findings and consider possible diagnoses that may correlate with these symptoms. (Remember to consider the patient's age and risk factors.) Use your ideas to help guide your physical examination in the next section of the case.**

HPI	Sx = abdominal pain	Sx = weight loss	Sx = heartburn	Sx = black stools
Onset	6-8 months ago	**past few months**	**unknown, chronic**	**3 weeks ago**
Location	**epigatric, sometimes radiates to back**	**generalized**	**chest, epigastric**	**stool**
Duration	**ongoing,** usually happens an hour after eating, pain comes and goes	**ongoing**	**ongoing, chronic**	**twice in 3 weeks**
Characteristics	awakens him at night, feels like burning, occasionally stabbing	**poor appetite, does not feellike eating much**	**"worse than usual"**	**black tarry stool, "stinky"**
Aggravating	more often after he drinks beer	**unknown**	**unknown**	**unknown**
Relieving	TUMS, not eating, not drinking beer	**unknown**	**TUMS**	**unknown**
Timing / Treatments	Antacids used to help the pain but lately are not working as well	**unknown**	**antacids**	**unknown**
Severity	**Severe,**	**Mild,**	**Moderate,**	**Moderate,**

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