

## Example of GPs script:

### Patient contribution

*Silence* - this permits the patient's opening gambit to come out without invitation. In the CSA it may be necessary to ask the patient what they would like to talk about.

Okay, apart from this swelling, was there some other issue that you'd like to raise today?

Yeah please do, we may not get time to deal with everything, but yeah.

### ICE

Okay, any theories?

Alright, okay, what's your worst fear, guys - and obviously it was your idea that he came in. What was your worst fear?

It's hard to put a name to it - something nasty? Okay, and in reality, what do you think it probably is?

Okay, so we want to rule that one out (cancer).

Is there anything else that we need to urgently tackle today? I know you had a big agenda.

### PSO

Okay, your relationship's a relatively new one isn't it?

How long have you been seeing each other?

Good, alright good, and things are going okay between you?

Okay, and you've never been a smoker at all?

...and you're not a big drinker or anything? Any other habits I need to know about?

### Red flags

No blood in your pee at all?

How much weight have you lost?

How do you feel in yourself?

You don't feel out of breath, no pain in your chest at all?

### Focussed history

When did you first notice that swelling?

Your waterworks have been okay?

Breathing's okay?

Yeah, preoccupied then, worried about this. Are you depressed?

Any pain in your tummy at all?

How are your bowels at the moment?

How often do you go to the toilet? With your bowels.

Twice a day.

No blood there at all?

No change in the habit with that at all?

Good, and your waterworks, you've already mentioned are working fine aren't they.

And your testes are fine?

You've not found any lumps in your neck at all?

### **Focussed examination**

Right, let's check your weight, slip your jacket off, check your weight and then let's have a look at his swelling if we can, and then we'll take things from there if that's okay? And that sounds like I might need to listen to your chest as well at some stage. So, 71 kilos, that's lovely.

Right, you just slip your trousers down for me. Well some reassuring news for you is that compared to the weight that we had for you a couple of months ago, you've not lost any weight.

And I can't feel anything when you're lying down, which is wonderful. Turn yourself on to your side, and with your permission, I just want to check your back passage.

Knees up towards your tummy. Prostate feels fine, great. Pop your trousers and your pants back on, and then I'll need to listen to your chest in a minute if that's okay.

Hitch your shirt up, shirt up just at the back and we'll listen in to the back of your chest.

### **Identify problem**

So we're going to have a look at this swelling, we're going to try and figure out between us what this swelling could be – and you've lost about a half a stone of weight. You've also got this problem with your cough as well, and sneezing.

Yeah, there's a bit of a bulge there, okay.

Might be a hernia, mightn't it? And it doesn't come down to your scrotum at all?

Great. Lie yourself flat on the couch if you wouldn't mind, with your legs up. When you lie down, it goes away, doesn't it?

Yeah, well I don't think it's cancer, but you do have a hernia in your abdominal wall. So what that is, is a weakness in the muscle at the front of the tummy wall which is allowing the guts to protrude a little bit.

I think we can reassure you about the cancer.

All right, let's see if you look up hernias - remember this is different from most hernias, okay, but this is an abdominal wall hernia. It's not so dangerous as the other type of hernias that we've talked about. For more information, patient.info will give you decent information, if it doesn't give you adequate information just to help you decide what to do, then come back to me.

### **Check understanding**

Do you want to read anything more about abdominal hernias at all?

All right?

Well if it's not causing any bother...

### **Develops management plan / shares management plan**

Now, that could be fixed with an operation, but where it is at the moment, it might not be the most urgent thing for you to do.

Yeah, and those types of bulges don't necessarily cause problems. You've obviously noticed that it's been there for a wee while already, so it might never cause you any problems. But if it does cause problems, sometimes the bowel can get caught when it bulges through, and it can get caught on its own blood supply. That's the danger of it.

But the risk of that is probably pretty small in that particular type of hernia. It's not an inguinal hernia, it's not a femoral hernia, it's an abdominal wall hernia and the chances of it causing problems are relatively slim because of that. And surgery can be a bit more complicated because of that, so you'd probably need a special gauze to be put in there, and the surgeon might give you an opinion about that. So think on it - if you want me to refer you for an opinion from a surgeon, but it's not cancer.

### **Safety net and follow up**

Things that would make me think of cancer are continued weight loss, so let me know about that. If you're breathless, I need to know about that too; but if you find that that swelling becomes very painful and you can't open your bowels or pass wind, then we need to know about that straight away. That is a matter of a medical emergency, just in case it gets caught against the blood supply - we need to see you immediately if that happens. But I think it's reasonable to think on whether or not you want to see a surgeon and to decide whether or not you want to think about an operation, but it's reasonable to leave it alone if you want to.

So I don't expect to find anything on this but do keep an eye on your weight, and if you're worried about him losing weight and there's no explanation for that, let me see him again.

And if that ever causes you a lot of pain, vomiting, can't open your bowels, can't pass wind then we need to see you immediately.

If it's out of hours, then you need to see the out of hours doctor straight away. If in doubt, casualty.

Good luck, and let me know if you decide that you want to see a surgeon to think about an operation for the hernia, let me know. A telephone call would be fine.