

Example of GPs script:

Patient contribution

Tell me a bit more about yourself, then.

Anything else that we need to talk about, apart from this?

ICE

So this referral, you probably want me to refer you probably through to Freeman service there?

Implicit in this presentation is the fear that this problem might run in the family - best practice might be to make that fear explicit (eg. It sounds like you are worried that this might affect you and others in your family?)

Apart from making the referral was there anything else that you were hoping I would do for you today?

PSO

Is he an athlete?

What do you normally do?

Work wise? And what does that involve?

I was going to say, it's physical isn't it?

Yeah, okay, alright. Home life?

How old are the kids?

Okay, and they're well?

You're not a smoker?

Okay. Habits that I need to know about?

Tell me more.

Tell me a bit more about that, if you don't mind?

To what extent would that go to? Some people have a binge and—because a binge for me is two and a half pints.

Red flags

You have no symptoms?

How's your dad?

Okay. You've been capable of doing that, clearly?

So, no chest pain when you're exerting yourself, from the sounds of things. Breathing's fine, and you can obviously exert yourself without too much difficulty. No ankle swelling, no breathlessness on a night?

Focussed history

Have we ever done an ECG on you, yet?

Have we checked your blood pressure?

Never suffered with asthma or anything like that?

Never aware of any palpitations, of your heart racing, or anything like that?

Focussed examination

So, normal, healthy sounding heart; not racing, normal rhythm, no added sounds.

Identify problem and explain diagnosis

A normal ECG will not quite rule it out completely, but it means that if it's completely normal, that you're probably fine....

So, there's nothing that's suggesting HOCM with you at the moment, and your blood pressure's perfect.

Check understanding

Does that sound okay? Is there anything else that you need any help with?

Any queries?

Develops management plan / shares management plan

And you're planning to moderate it anyway by the sounds of things, so that's probably a good thing.

That doesn't completely rule it out, but it does give us some reassurance. So, why don't we just crack on and dictate you a letter and send you off to see Julie and the team?

Yvonne does have a bit of a tendency to binge with her drinking, but we've talked about this and she's decided not to do any aggressive aerobic exercise until she's been screened by yourself.

I'm very grateful for your help in organising an echocardiogram and any further appropriate testing.

I think you can safely carry on with normal activities, but I think it's a sensible thing for you to not be running at the moment, particularly if it's more aggressive. But, you can gently—you can go to the gym, that's absolutely fine, but I don't think you should be doing any endurance running and I don't think you should be sprinting.

So you shouldn't be expecting more of your body than you're normally able to do. I don't see this causing you any difficulties.

Safety net and follow up

We'll do that ECG, if that's completely normal then you could probably carry on with your running, but let's wait for a couple of weeks until at least we know from Julie how long it's going to be until the ultrasound scan for your heart. But I think if your ECG's fine, then it's highly unlikely that you've got HOCM or anything significant at the moment.

But the echo will give you a bit more reassurance and you can probably get back to being a bit more aggressive with your exercise after that stage. Does that sound okay?

There's a remote, tiny risk of sudden cardiac death with HOCM, and that's why we're cautious about it, and that can be treated to reduce that risk.