LUTS Consultation

(Standard model consultation used in test can be found here: https://youtu.be/lKXbeTB3kRY?si=zvVYzTE9A3wcbNPW)

NABLA

Chief complaint
- Frequent urination
- Urgency to urinate
- Slow urine stream
- Nocturia

History of present illness
- Patient reports frequent urination for a few months
- Experiences urgency to urinate
- Describes slow urine stream
- Reports nocturia, disturbing his wife's sleep
- No blood in urine, weight loss, bone pain, fever, or discharge
- No symptoms of diabetes such as thirst, tiredness, or blurred vision
- Drinks coffee and alcohol, does not smoke

Family history
No family history of diabetes

Social history
- Drinks coffee and alcohol, does not smoke
- Works with colleagues who tease him about frequent urination
- Wife works a lot and travels frequently

Physical exam
ABDOMEN: Plan to examine abdomen.
GENITOURINARY: Plan to examine kidneys and prostate. Plan to perform a PSA test.

Assessment & Plan
Frequent urination, urgency, slow stream, nocturia
- Symptoms may be due to prostate issues, possibly benign prostatic hyperplasia. No signs of prostate cancer or diabetes.
- Perform PSA test and physical examination of prostate. Check kidneys and screen for diabetes. Provide urine bottle for dip test. Discuss results in a follow-up appointment. If results are normal and symptoms persist, consider medication to improve symptoms.
- Risks and side effects: PSA test may give false positives or negatives. Prostate examination may be uncomfortable.

Appointments
- Blood test appointment with healthcare assistant
- Physical examination of prostate and abdomen
- Follow-up appointment to discuss results (can be a phone call)

Generation Time 19s

Price: £95/month

Osler

Patient: Alright

Gender: Male

Subjective:

- HPI: Patient reports increased frequency of urination, urgency, weak urine stream, and nocturia for the past few months. No impact on day-to-day activities but has been noticed by colleagues and is disturbing his wife's sleep. Concerned about prostate cancer after watching a TV program.

- Past medical history: No history of blood in urine, weight loss, bone pain, burning sensation during urination, fever, sexually related infections, or symptoms of diabetes.

Drinks one beer daily and more on weekends, also consumes coffee. No smoking history.

Objective:

Assessment / Problem List:

- Assessment: Male patient with urinary symptoms suggestive of possible prostate issues, concerned about prostate cancer.

- Problem list:

  - Increased urinary frequency [Active]

  - Urinary urgency [Active]

  - Weak urine stream [Active]

  - Nocturia [Active]

Plan:

- Conduct PSA blood test, kidney function test, diabetes screening, and urine test for blood, infection, and diabetes.

- Physical examination of the prostate and abdomen.

- Patient to reduce alcohol and coffee intake.

- Discuss results and potential treatment options in a follow-up appointment.

Follow-up:

- Patient to book an appointment for a physical examination of the prostate and abdomen.

- Patient to return a week later for a telephone or face-to-face appointment to discuss test results.

- Provide patient with informational resource about the prostate, PSA test, potential treatments, and hospital referrals.

Generation Time 93s

Price: £For primary care it's £100/month/ full time user (10 sessions a week) so if a practice had 2 full time and 1 part time clinician the monthly license would be £250 for example.

With the annual license we also supply recommended microphones as part of the package (RRP £250) as this really boosts quality and usability.
Monthly license is £200/month same deal.

Heidi

Patient Medical Background

- No previous care plan details provided

- Wife experiencing anxiety and frustration due to patient nocturia

Clinical History

- No medications mentioned

- No allergies reported

- No family history provided

- Social History: Consumes alcohol, specifically beer on weekends

- Current Progress Notes: Presenting with urinary frequency, urgency, poor stream, and nocturia for a few months without dysuria, haematuria, fever, or urethral discharge

GP Management Plan (GPMP):

- Lower urinary tract symptoms suggestive of benign prostatic hyperplasia

- Goals - Changes to be Achieved: Improvement in urinary symptoms and exclusion of prostate cancer

- Required Treatments and Services (Including Patient Actions): Trial of reduced alcohol intake, switching to decaffeinated drinks, patient education on prostate anatomy and pathophysiology

- Arrangements for Treatment/Services: PSA test (no ejaculation or heavy exercise for 48hrs prior), U&E, FBC, HbA1c, MSU; review in 1 week

Other Problems: None reported

Date Service was Completed: 04/05/2024

Review Date: 11/05/2024

Generation Time 21s

Price: £49/month