

WISE Call

Patient: DA, Clinic Visit

1. **Summarize:** Identify the chief complaint (CC) and present pertinent facts only from the history of present illness (HPI), review of systems (ROS), past medical history (PMH), medications, family history (FH), social history (SH), mental status exam, and interview.
2. **Narrow the Differential Diagnosis:** Identify three (3) possible diagnoses related to the summary above using appropriate medical terms.
3. **Analyze:** Rank the selected diagnoses and provide a rationale for each.
4. **Probe the Preceptor/Instructor:** Identify learning gaps, points of confusion, or dilemmas by asking questions to tap into the preceptor or faculty member's knowledge base.
5. **Propose a Plan:** Propose a diagnostic plan to narrow the differential or confirm the diagnosis. Propose a therapeutic plan to manage the problem. Preceptors/instructors will provide feedback on what was done well and what requires improvement.
6. **Self-Directed Learning:** Reflect on your performance. What knowledge is needed to provide an accurate and comprehensive client presentation?

HISTORY OF PRESENT ILLNESS:

1. **Summarize:** The patient is a 72-year-old female who speaks Arabic, and her son is here to translate. she is here for dysuria/frequency and urgency. She has pain after voiding, 8/10, intermittent, lasting 10-15 minutes, radiating to bilateral groins and lower back. She doesn't take any medications to help the pain. She admits to using antiseptic soap for cleaning. The patient states that urine is yellow and clear without sediment, and there is no blood in the urine. She also says sometimes she feels she needs to go, but there is no urine. Also, she has some dryness and itching on her bilateral face. She drinks two bottles of water per day. she denied flank pain. she is here for a refill of amlodipine and losartan. The patient complains of having a hard time walking. due to pain bilateral knees 5/10 aching with walking, not radiating and but not while sitting.

-Patient has a history of

***Common: Essential Hypertension

***Musculoskeletal: Degenerative joint disease/Arthritis, Chronic bilateral knee pains

***Hysterectomy about 22 years ago

-Patient's current medications include

ACTIVE MEDICATIONS: