



History Taking Scenarios

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Scenario A1 - Tinker Tobin

Information given prior to scenario

Mr or Mrs Tobin has come along to the surgery with Tinker their 6 year old DLH neutered male cat. Appointments are running late due to an emergency operation that had to be done earlier in the afternoon. As a third year student doing EMS at the practice, you have been asked to help out by taking a history from Mr or Mrs Tobin before they go in to see the veterinary surgeon. The appointment is flagged as "worried about excessive drinking." The only other information that you have is that Tinker had his routine vaccination 8 months ago.

Background information for client

You have made an appointment to see the vet about Tinker, your much-loved longhaired ginger cat. For the past month or so, you have noticed that he has frequently been drinking from his water bowl – certainly more than usual. Unfortunately you have three other cats, so can't be sure how much he is drinking. All four cats are fed on IAMS complete dried food. They have been on this for two years now, since you got the latest addition to the family, a Siamese, and his breeder recommended IAMS.

Tinker is 6 years old (approximately) – you got him four years ago from a local cat rescue centre, and they estimated him to be about two years of age then. He was already neutered, and you have kept his vaccinations up to date every year, as you do with your other three cats. The four cats get on really well together. Oscar and Snowflake are brothers who you have had since they were six weeks old (they are now nine), and Simba the Siamese is the baby of the bunch at two. You have no other pets. The whole family joke that the cats are your "children". Tinker has lost a bit of weight recently – you noticed this a few days ago when you picked him up to give him a bit of fuss. As he is longhaired, you hadn't noticed the weight loss before this. His appetite still seems to be good; in fact, he is looking for food all the time. This is normal for Tinker, however, he has always been a greedy cat! As the cats have dried food (IAMS) available constantly, you are not sure if he is eating more than normal. You just fill the bowl up when it looks empty.

You have remarked to your partner that Tinker now seems to be more energetic than he used to be – he is on the go constantly. Maybe that's just because he has lost some weight and feels fitter? Or perhaps he's taking over as top cat now that the two brothers are getting on in years?

The only other thing that you may remember is that your partner found some very runny cat poo in the garden the other day. It must have been one of your cats that did it, as no other cats dare to come into your garden! The other three cats are perfectly healthy.

You will be asked into the consulting room by a vet student, who should explain why they are going to talk to you first. You will not mind this at all, in fact, anything that will speed things up is welcome – you have already waited for half an hour. You are particularly anxious that they should tell the vet that you are in a hurry – you have an important meeting to attend in forty minutes' time! If things are going to take longer than that, you may have to leave it and rebook the appointment.



Owner style

Friendly and outgoing. Totally devoted to the cats. Both Mr and Mrs Tobin have high pressure careers, and life is a mad whirl sometimes. The cats are the calming influence on both partners. Mobile phones may be answered constantly during the scenario!



Scenario A2 - Sandpiper Burns

Information given prior to scenario

Sandpiper Burns is an 18 year old Exmoor mare, kept at livery. You are a 3rd year vet student who is on EMS at the practice that deals with the livery yard. As usual, a visit to two horses is turning into a visit to 6 horses, and the vet has asked you to find out about Sandpiper, who is apparently lame, while she vaccinates three horses in the yard. You walk into the office to meet Mr or Mrs Burns, Sandpiper's owner.

Background information for actor

You have owned Sandpiper for 16 years, and she has been used by each of your three children to learn to ride. They take her to shows in the summer, and she is a perfect schoolmistress for them. She is kept at the local livery stables, as you do not have room at your house. You look after her yourself, although the children do help when they are nagged about it!

Sandpiper is turned out during the day into a large paddock, and then brought into a stable at night. She is bedded on straw. She has never had any problems with her legs or feet before.

She gets a mixture of hay and pony nuts in the stable, and grazes ad lib during the day in the paddock. She is usually turned out with a couple of horses belonging to a friend, who is very knowledgeable about horses. The three horses get on well.

Sandpiper is fully up to date with worming and vaccinations, as she gets treated along with the other horses at livery. She is vaccinated once a year and wormed every 6 weeks.

You noticed that she was extremely lame, in fact, reluctant to move, when being led back from the field yesterday evening. She was last ridden 2 days ago. Your youngest daughter took her for a gentle trot round the woods. You suspect that she may have laminitis. Her feet feel hot, and you can feel her pulse quite easily just above her hoof. She was treated for mild colic two months ago, and made a full recovery.

Your friend has criticised the livery yard for not having suitable turnout for ponies – the grass seems to be quite green and long in the paddocks. She also thinks that one of the drugs she was given to treat the colic may have caused the laminitis. You are worried that Sandpiper may not be able to be ridden any more. You can't afford another horse, and she is not insured.

Owner style

Although you seem to be very matter-of-fact about things, you are actually very fond of Sandpiper, as she has been a part of your life for so long. You will try to conceal any emotional attachment by asking a lot of questions about her condition. Even though you have been told that this person is a 3rd year student, you will keep asking them if it's laminitis, and what can be done for it, and whether it's the livery yard's fault that she's got it, and if it might have something to do with the colic, and whether she'll be any use for riding after this, and will you need to find more suitable grazing for her.....

Scenario A3 - Meg Bramley

Information given prior to scenario

Mr or Mrs Bramley has rushed into the surgery with an injured dog. The family's 2 bearded collies, Meg and Polly, have been fighting with each other. Meg has been admitted with several deep lacerations, which the vet, Mrs Wheeler, is now stitching up. She has asked you to talk to the owner to find out exactly what happened. Background information about the two dogs involved, and the exact circumstances of the incident, may be important in deciding a way forward.

Background information for actor

The household consists of you, your partner and your 2 young daughters (aged 4 and 6). You bought Meg and Polly straight from their breeder, as the vet advised, when they were only 10 weeks of age. They are now three years old. The dogs have been wonderful family pets, and have always got on well with each other until the last 2 weeks, when, out of the blue, the dogs have been growling at each other. The fight this morning was terrifying – the two dogs were snarling, biting and snapping at each other's heads and unresponsive to any commands. You had to separate them from each other physically and have bite wounds on your arm that need attending to. First, though, you wanted to bring Meg to have her injuries treated. Your partner has stayed at home with the girls and Polly, the other dog. You are physically and emotionally shocked by the experience. On questioning, you are able to describe episodes over the last few weeks when the dogs have growled over food and toys, which is unusual. They also have jostled with each other as you come in the door to greet them. This morning you had just finished the playgroup/school run and as you came through the door, the dogs came up to greet you, then growled and attacked each other. You believe that Meg may have started it. Both dogs are fit and healthy and were on heat 2 months ago – this is significant as, unknown to you, Meg has developed a false pregnancy, and this has sparked the feelings of aggression between the 2 dogs. You are distressed about what has happened, worried about Meg's injuries, and about your own injuries. However, mainly you are trying to work out what you can do about this. You have already decided that one of the dogs will have to be rehomed, but it will be impossible to decide which one, as each of your daughters has her "own" dog.

Owner style

You are generally very distressed, and keep going over how good the dogs have been with your daughters, how much they are part of the family, how you can't bear the idea of having to part with one of them, how they are going to kill each other... you are also worried that they might turn on one of the children, so it is difficult for the student to keep you focused on answering the questions...

There's also the question of your own injuries. You have not had them seen to yet, and your arm is now swollen and painful.

Scenario A4 - Mr Bentley's Calf

Information given prior to scenario

You are a third year student on a farm visit to Mr Bentley's dairy farm with one of the veterinary surgeons from the practice where you are doing your EMS. Mrs Farrell, the vet, knows Mr Bentley very well, and does most of his work. Today, she has visited the farm to routinely pd some heifers, but has also been asked to have a look at a calf with diarrhoea. The vet asks Mr Bentley if he'd mind if you asked him about the calf. He agrees, so the two of you have gone off to look at the calf, which has been isolated in a straw pen. Mrs Farrell, the vet, will join you when she's finished.

Background information for actor

Diarrhoea is a common cause of illness and death in young calves. It is preventable by ensuring the area where the calves are born is clean and that they get given their mother's first milk (colostrum) within six hours of birth- this is very important. If asked about this, you make sure that you see the calf sucking its mother once it can stand. If asked where the calf was born, you have a big shed with straw on the floor where all the cows calve when they are ready. You have 100 cows altogether and there could be up to 10 cows in this shed at any one time. You put fresh straw down once a day and muck the whole building out every six weeks. You have had 10 calves affected with diarrhoea so far over the last two months and 2 have died. You have some white antibiotic tablets from when you had trouble last year that you have given to all of them. You also sometimes use powder sachets that you mix with water and give to the calf, 2 litres at a time, twice a day (like dioralyte). You haven't had any testing done on diarrhoea samples from the calves. This calf, a 4 week old dairy replacement heifer calf, has been ill for 2 days. It was still drinking milk until yesterday, and you have put it in a pen by itself today as it couldn't stand this morning. You gave a powder sachet and an antibiotic tablet to it this morning. The diarrhoea is yellow and watery.

By coincidence, your wife and daughter both had diarrhoea for a few days last week. They like to help out with the calves. Your wife is fine now, but your daughter (6 years old) is still a bit under the weather. You will only mention this if asked about your family's health.

Farmer style

You are quite concerned that you've had so many affected, and worried that you're going to get more and more will die. They just don't pick up very well after they've been ill even if they get over it. You probably should have got the vet to look at this calf sooner but it wasn't too bad yesterday and it's quite expensive to just get the vet out to look at one calf so you decided to wait until she was coming on another visit (and it'll probably die anyway). And the treatments are really expensive! You ask the student what he/she thinks it might be, you've heard about this rotavirus, your neighbour down the road had a really bad do with it, there's a vaccine for that isn't there? In fact, you bought a calf from him about three months ago, does the student think it could have brought something in? You are also concerned about your daughter, but haven't linked her illness with the calf yet.

Scenario A5 - Cassie Barker

Information given prior to scenario

Mr or Mrs Barker has brought in Cassie their eight year old Golden Retriever to see the vet. Cassie has been coughing for about a week. The vet has asked you to take a history so that you can practise this. You have been on EMS for a week at the practice, and have not yet been left on your own with a client.

Background information for actor

You live on your own, with just Cassie for company. You are an active person, with a lot of friends, and you like to keep busy. You go on holiday several times a year with a group of like-minded people. You have recently returned from a walking tour of Cyprus.

Cassie was in kennels for a fortnight. Since she came out, she has developed a cough. The cough is quite deep, but she doesn't seem to bring anything up. She is not keen to go for walks, but you have put that down to the hot weather, and the fact that she has a very thick coat. She occasionally lies down and refuses to move when you take her too far. She has also been a little unsteady on her legs when she first gets up. You suspect that she may be getting a bit arthritic in her old age (you know that 8 is quite old for a large dog). You are upset that you are no longer able to take her for long walks in the countryside.

She sleeps in your bedroom at night, and you have noticed over the past few months that she seems unable to get comfortable in her bed, constantly moving around and occasionally panting and wheezing. You have not noticed any wheezing during the day.

Cassie otherwise seemed fine before she went into kennels. She was vaccinated against everything possible about a month before she went into kennels. This included a kennel cough vaccination. You remember that one because she sneezed it out all over you (this vaccine is given as drops up the nostrils!) A friend that you meet while dog walking has told you that it's probably kennel cough, so you are slightly annoyed that the vaccine obviously hasn't worked – it was expensive enough, so you may mention this to the student – you could be due a refund?

Cassie is fed tinned dog food and mixer (Pedigree in both cases). She eats her meal gradually during the day. When she was younger she used to eat everything that was in her bowl immediately, but her eating has slowed down over the years. She drinks a reasonable amount of water – you fill her bowl up once or twice a day, but you haven't noticed any increase in thirst recently.

You are wondering if you should get a new dog. Perhaps it would give Cassie a new lease of life.

Owner style

Normal, but a little bit impatient. When you are called into the consulting room, you have already been waiting for twenty minutes, so when the vet student asks if you mind if they take a history from you, so that they can practise, you will be a little bit annoyed, but will agree to it as you are basically a nice helpful person. You are concerned about Cassie, and will want reassurance that you will see the vet soon.