TIPS ON HOW TO JUSTIFY YOUR DIAGNOSIS

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1. WHAT IS THE DIAGNOSTIC JUSTIFICATION FOR?
   o It is about your ability to:
     • Logically think through a case presentation and clearly describe your train of thought
     • Identify flaws in reasoning and make adjustments to a skill that’s difficult to acquire in a classroom.
     • Have a mental algorithm to follow in order to make the process easier
     • Improve your handoffs in the future and decrease errors by allowing the other provider to understand your reasoning
     • Avoid ordering tests multiple times
   o It is not about your ability to immediately identify the correct diagnosis

2. MAP FOR YOUR JUSTIFICATION
   o Chief Complaint:
     • It is a good idea to list the differentials you immediately think of when reading the chief complaint on the door
     • This can help drive your history and physical
     • Useful to list at the beginning of your justification
   o History:
     • Use the pertinent positives to narrow down your diagnosis and to support your final
     • Use pertinent negatives to rule out other differential dx
     • Present all major differentials!
   o Physical Exam:
     • Again discuss how positive findings help support your diagnosis
     • Describe how the findings help rule out other differentials
   o Labs/Tests/Imaging:
     • Select your final diagnosis and describe how tests support it and inform treatment strategy
     • Describe how the results rule out any remaining differentials

3. VINDICATE – MNEMONIC FOR DIFFERENTIALS
   o Use this if you are stuck or as a check to make sure you are not neglecting an entire system
   o Danger of relying on this = broad non-prioritized differential
     • V - Vascular
     • I – Iatrogenic
     • N- Neoplasm
     • D – Drugs
     • I – Inflammatory/infectious/autoimmune
     • C- Congenital-malformation or deficiency
     • A – Anatomical
     • T – Trauma
     • E – Environmental-toxins, exposure and Endocrine

4. WHAT HISTORY QUESTIONS WOULD YOU ASK?
   o Use your differentials to drive your history

5. BASED ON HISTORY, WHAT HYPOTHESES ARE MORE LIKELY? WHAT ARE LESS LIKELY?
   o Pertinent positives?
   o Pertinent negatives?
   o Interpretation of findings?
6. WHAT PHYSICAL EXAM NEEDS TO BE DONE?
   o What systems are affected?
   o What are your pertinent positive and negative findings on PE?

7. NEXT STEPS
   o What are your leading diagnoses going into the test section?
   o What differentials do you still need to rule down?

8. WHAT LAB TESTS AND IMAGING DO YOU WANT TO ORDER?
   o How do the lab results affect each item on your differential diagnosis?

9. FINAL STEPS
   o Leading diagnosis is ______________
   o Because ______________

10. SUMMARY/OUTLINE
    o Generate differentials based on chief complaint
    o History: narrows the differential to these differentials... and rules down these because...
    o Physical exam: rules in this because....... and rules out this because......
    o Labs/tests: rule in a leading diagnosis because... and rule out remaining diagnoses because...

11. COMMON ERRORS
    o Holding firmly to a diagnosis and not presenting or discussing other differentials
    o Neglecting the pertinent negatives (on history and PE)