

## Performance Overview for [REDACTED] on case Stefon Owens



The following table summarizes your performance on each section of the case, whether you completed that section or not.

**Time spent: 4hr 46min 44sec Status: Submitted**

Case Section	Status	Your Score	Time spent	Performance Details
Total Score		78%		
History	Done	73%	13min 25sec	44 questions asked, 8 correct, 3 missed relative to the case's list
Physical exams	Done	64%	2hr 17min 9sec	36 exams performed, 10 correct, 2 partially correct, 6 missed relative to the case's list
Key findings organization	Done		12min 5sec	7 findings listed; 11 listed by the case
Problem Statement	Done		5min 58sec	101 words long; the case's was 100 words
Differentials	Done	100%	1min 28sec	5 items in the DDX, 3 correct, 0 missed relative to the case's list
Differentials ranking	Done	100% (lead/alt score) 100% (must not miss score)	1min 6sec	
Tests	Done	100%	4min 49sec	7 tests ordered, 0 correct, 0 harmful to patient, 0 missed relative to the case's list
Diagnosis	Done	100%	4sec	
Management Plan	Done		39min 14sec	290 words long; the case's was 244 words
Exercises	Done	100% (of scored items only)	36sec	1 of 1 correct (of scored items only)

## Problem Statement by Alexis Clermont on case Stefon Owens



S.O. is a 4 year old male who presents to the office, with his father, complaining of leaking stool x3 weeks. His father reports hard, pebble-like stool x2 years with intermittent abdominal pain after eating. Father also reports patient's bowel movements have been every 2-3 days and describes them as "hard balls." Over the past 3 weeks, patient tells father "he can't help it" and "it just comes out" regarding the recent watery stools. His dietary habits are poor with a diet of mostly chicken nuggets, crackers, and milk. Physical exam is significant for diffuse tenderness upon palpation of his abdomen.

Attempt: 3429644

Report generated on 2/15/2025, 12:14:53 PM America/New\_York

# Management Plan by Alexis Clermont on case Stefon Owens



## Diagnostic tests

TSH, FT4, tTG, IgA, IgE, IgG, abdominal x-ray

## Medications

Enema would be considered for initial bowel cleansing to relieve constipation.

For initial bowel cleaning (if enema is not indicated), polyethylene glycol 3350 17 g/dose - 1 dose mixed in 6-8oz of water or juice over 3 hours. If patient does not have bowel movement, repeat same dose tomorrow (Yilanli & Gokarakonda, 2020).

For bowel maintenance, give polyethylene glycol 3350 17g/dose, 1/2 dose mixed in 6-8 oz water or juice daily to encourage normal bowel patterns (Yilanli & Gokarakonda, 2020).

## Suggested Consults

Nutritionist - if diet cannot be successfully managed

Counseling - if poor bowel habits could be due to recent stress of parents divorcing

## Client Education

Maintenance therapy may take 6-24 months.

Include more fruits and vegetables in his diet. Increase fiber intake such as whole-grain breads, popcorn, and bran cereals.

Increase water intake and decrease milk intake. Initially, water down milk slowly in order to gain the child's compliance.

Start toilet training by having him sit on the toilet for 5-10 minutes at the same time each day. Begin with having him sit for 1 minute and continue increasing the time. Try to schedule the time after eating. Use a reward system, but do not punish for not having a bowel movement.

Include daily physical activity as exercise aids in digestion. (*Encopresis*, 2023)

## Follow-up

Return to office in 2 weeks to evaluate treatment effectiveness.

If patient does not have a bowel movement in 2 days, return to office immediately. Go to ER if patient begins vomiting, fever, or pain increases.

## References

*Encopresis*. (2023). [Www.nationwidechildrens.org](http://www.nationwidechildrens.org). <https://www.nationwidechildrens.org/conditions/health-library/encopresis>

Yilanli, M., & Gokarakonda, S. B. (2020). *Encopresis*. PubMed; StatPearls Publishing. <https://www.ncbi.nlm.nih.gov/books/NBK560560/>

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