# CLASS 1 — WHEN THE DIAGNOSIS IS NOT CLEAR

## A patient presenting with chest pain




A 56-year-old man was admitted to the emergency department with central chest pain, mild nausea and shortness of breath. He described the pain as a persistent pressure sensation radiating towards his left shoulder.

His medical history included hypertension and dyslipidaemia. His initial ECG showed sinus rhythm, with no clear signs of acute ischaemia. His first high-sensitivity troponin result was within the reference range.

Although the initial findings were reassuring, the physician decided that acute coronary syndrome could not be ruled out. Given the recent onset of symptoms, serial ECGs and repeat troponin measurements were arranged.

Other possible explanations included gastro-oesophageal reflux disease and musculoskeletal chest pain. At this stage, the underlying cause remained uncertain.

### Reading comprehension - choose the correct option.

1. The symptoms are less typical / more typical of exertional angina.

2. A normal initial troponin does not rule out / rules out acute coronary syndrome.

3. The ECG findings are insufficient to exclude / sufficient to exclude a cardiac cause.

4. Symptom improvement necessarily indicates / does not necessarily indicate clinical recovery.

5. Repeat testing allows the team to monitor for changes / confirm the diagnosis immediately.

6. Alternative diagnoses are mentioned because they remain possible / have been confirmed.

7. Cardiovascular risk factors support considering / confirm a cardiac diagnosis.

8. The team has reached a diagnosis / identified possibilities requiring further evaluation.

LIVEWORKSHEETS

# LANGUAGE FOCUS — EXPRESSING UNCERTAINTY

Doctors frequently need to discuss possible diagnoses without presenting assumptions as established facts.

**Introducing possible explanations**

- The symptoms may be due to...
- This could be related to...
- The findings are suggestive of...
- The clinical presentation is consistent with...
- One possible explanation is...



**Expressing uncertainty**

- It remains unclear whether...
- We cannot rule out...
- There is insufficient evidence to...
- The findings do not necessarily indicate...
- Further investigations are required to determine whether...

**Asking relevant questions**

- Have we considered...?
- Could this be related to...?
- What further investigations would be indicated?
- Is there sufficient evidence to support this diagnosis?
- What makes this diagnosis more likely than the alternatives?

## PRACTICE – Choose the correct option.

1. The symptoms may be due to / may due to a gastrointestinal condition.
2. The initial ECG does not rule away / does not rule out acute coronary syndrome.
3. The findings are suggestive of / suggestive for a possible respiratory infection.
4. It remains unclear if whether / whether the symptoms are medication-related.
5. We cannot to exclude / cannot exclude pulmonary embolism at this stage.
6. The clinical presentation could be consistent to / could be consistent with HF.
7. There is insufficient evidence for establish / to establish the diagnosis.
8. Further investigations are required determining whether / to determine whether the patient has an infection.

LIVEWORKSHEETS

# LISTENING — Reporting investigation results

**Listen to a doctor leaving a telephone message for a colleague, and choose the correct option.**



1. The patient was investigated because of **suspected / confirmed** pulmonary embolism.

2. The D-dimer result was **within / above** the reference range.

3. The CT pulmonary angiogram showed **no evidence of / clear evidence of** a central pulmonary embolism.

4. The scan was **partially limited by / completely unaffected by** respiratory movement.

5. The additional finding was **a small area of opacity / a large area of consolidation** in the right lower lobe.

6. The imaging findings **confirm bacterial pneumonia / may be related to infection.**

7. Despite the CT findings, the doctor **considers further clinical assessment necessary / believes no further assessment is required.**

8. The results **provide a definitive explanation for / do not fully explain** the patient's symptoms.

## Complete each sentence using an appropriate expression

1. The CT scan showed no evidence of central or segmental pulmonary embolism; however, we _____ completely exclude smaller peripheral emboli.

2. The opacity in the right lower lobe _____ an underlying respiratory infection.

3. _____ the patient's symptoms are related to an infection or another respiratory condition.

4. The imaging findings _____ bacterial pneumonia, as they are not diagnostic on their own.

5. _____ correlate the imaging findings with the patient's clinical condition before deciding on further management.

**may be related to** **it remains unclear whether** **cannot rule out**

**further investigations are required to** **do not necessarily indicate**

LIVEWORKSHEETS