**Going Beyond Brief Encounters**

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# **Case Presentation**

We report a 67y/o patient with a complex renal history who presented to ambulatory care with multiple discharging erythematous nodules on his left forearm. A chance discussion of this case with one of the renal physicians who recalled that the patient was in fact a tropical fish aficionado. They had previously had a discussion about his hobby when the doctor came across the patient reading a tropical fish magazine during an inpatient episode. With this information to hand the oatmeal was correctly diagnosed as suffering from Fish tank granuloma.

# **Discussion**

A good history taking can lead to the definitive diagnosis in 76%. However, given the lack of resources and the heavy workload, doctors often replace detailed history taking with brief encounters to arrive to more common differential diagnoses. If a social history was taken, it is usually limited to smoking habits, alcohol intake and drug use. It is also easy to rely on the plethora of investigation modalities available to us to diagnose a patient. This can easily lead to rarer cases being mismanaged as in the case of diagnosing fish tank granuloma. This has been cited in literature to have a high likelihood of misdiagnosis. Furthermore, patients who have fully shared their perspective are found to have favourable outcomes.

By giving our patients more attention, particularly to their social history, we gain a better picture of the entire patient. The time devoted can give vital clues which can guide us towards an accurate differential diagnosis without the aid of modern technology.