

### Case for Breakouts

# Presentation Day 2 – 1<sup>st</sup> to Primary Care

- Noticed lump on forehead one day ago
- The lesion had a clear fluid form centre of lump
- Site nurses considered this to be a pressure sore from hard hat
- Patient well tender, no pain. No burning, no itch.
- Cornea clear VA 6/6 R&L
- Provsional Dx cellulitis Tx Diclox 500mg
  4 times a day for five days.
- Review tomorrow

#### Day 1 from site nurse





## Case for Breakouts cont

## Presentation Day 3 – 2<sup>nd</sup> to Primary Care

- Review from yesterday
- Worsening ++
- Unable to open RE due to fluid in right upper eyelid
- Cellulitis from the forehead is now confluent with the cellulitis in right eyebrow.
- No pain, burning or itch
- VA 6/6 R&L holding RE open
- Full ocular excursions with no pain

### Day 3





## Case for Breakouts – slide for breakout

### **Key points**

- Worsening cellulitis
- No pain, burning or itch
- VA 6/6 R&L holding RE open



#### **Breakout Discussion**

- You can perform any test and prescribe anything a GP can
- What do you do now (you are on an island literally)
  - What further assessments do you want to perform bearing in mind cost and access?
  - What do you want to prescribe and why?
  - What is your plan and why?