



## CASE STUDIES

# Putting knowledge into practice

These case studies come from the GPs using our local pathways. Each case shows the way the use of HealthPathways enables clinicians to find care and management options as well as local services for their patients.

### What is HealthPathways?

HealthPathways Melbourne is a free, online, localised suite of pathways that is dedicated to giving GPs like you, the latest clinical and referral advice for over 800 conditions.

The clinical pathways are written by GP editors with support from local GPs, hospital specialists and other subject matter experts.

You'll find relevant and evidenced-based information on the assessment and management of common health conditions, including local referral guidance.

It's your immediate access to best practice to support you and your patients at the point of care.



## CASE STUDY 1:

### Overdiagnosis of benign murmurs

John Zaccardo, a very active 63-year-old retired accountant, is a new patient to the practice.

He visits a new GP for a “good check-up”, a service his previous GP would provide, as requested, annually. After taking his medical history, the GP notes that Mr Zaccardo:

- enjoys frequent bushwalking and occasional multi-day hiking holidays (although the frequency of this activity has less in recent years due to COVID-19)
- has no significant past medical history (various sports injuries only)

- no family history of concern (both parents died in their 90’s of old age).
- has always been a non-smoker and consumes 3-4 units of alcohol per week.

The GP completes a physical examination as part of this ‘work-up’ but without auscultating the heart. Please note: Auscultation is not supported as a screening test in the RACGP Red Book or elsewhere in the literature because of overdiagnosis of benign murmurs.

Mr Zaccardo raises his concerns about this omission as his previous GP’s “good check-up” always included this.

The GP explains why auscultation is not indicated in a “good evidence-based check-up”. However,

## CASE STUDY 1:

the GP agrees to listen to Mr Zaccardo's heart to build rapport with the new client. On auscultation, the GP identified a very soft pansystolic murmur, loudest in the mitral area. Or has he?

The GP's evidence-based reduction in heart auscultation over the years has led to loss of confidence in assessing incidental findings of heart murmurs in healthy patients.

To ensure the patient gets appropriate treatment, the GP uses the Heart Murmurs in Adults pathway to decide what to do next.

The GP explains this all to the patient and provides a patient information leaflet from the pathway.

Snapshot from the Heart Murmurs in Adults

This pathway describes important possible associated symptoms and examination findings to confirm, as well as a table describing murmur grading. Suggested investigations for a grade 1 pan systolic murmur are ECG and echocardiography.

Mr Zaccardo presents with no associated symptoms as described in the pathway which suggests that need for referral for cardiology opinion is dependent on the echocardiograph findings.

The GP explains this all to the patient and provides a patient information leaflet from the pathway:

In Mr Zaccardo's case, there are no significant findings on his ECG or echocardiogram (it shows mild mitral regurgitation only). Only GP monitoring is required at this stage.

If investigative results showed a cardiology assessment was required, the GP could find a suitable specialist and find information about cardiac monitoring through HealthPathways Cardiology or Heart Valve Disease pathway.

### Assessment

#### 1. History – Ask about:

- cardiac symptoms ▼.
- fatigue – without cardiac symptoms this is not a symptom of valvular disease.
- cardiac disease, e.g. congenital heart disease, rheumatic fever, heart failure.

#### 2. Examination:

- Listen to the heart sounds over chest and neck ▼.
- Check pulse and blood pressure.
- Look for signs of heart failure.
- Determine the type (systolic, diastolic, or continuous) and grade of murmur ▼.

#### 3. If the murmur was detected during a hyperdynamic state (e.g. anxiety, anaemia), reassess when the hyperdynamic state has resolved.

SEND FEEDBACK

### Information



For health professionals ▼



For patients ▲

Better Health Channel – Heart Murmur [🔗](#)

## Do you have a case study?

We are always looking for health professionals to be involved in pathway development and reviews. Case studies are also welcome.

If you would like to be involved, or for more information email [info@healthpathwaysmelbourne.org.au](mailto:info@healthpathwaysmelbourne.org.au)