

SICK CALL SCREENER COURSE



PERFORMANCE TEST 3  
ADMINISTRATOR'S GUIDE

FOR

SICK CALL SCREENER  
RESPIRATORY SYSTEM EXAMINATION

SEPTEMBER 2018

## **INSTRUCTIONS TO THE ADMINISTRATOR:**

### **Overview – Respiratory System Performance Test (Week-1, Day 3)**

This practical application performance evaluation test will be administered to the entire class. The trainee will be introduced to a real or simulated patient (a person acting as a patient) that will require them to obtain a chest and lungs history and conduct a chest and lungs examination on a real or simulated patient (a person acting as a patient). Instructors will evaluate the decisions, behaviors, responses and actions of the trainee.

### **General Precautions:**

1. Instructors, trainees and visitors must comply with all general safety procedures that are posted in the MTF/Clinic/lab environment.

### **Safety Requirements:**

1. There are no skill specific safety hazards for this Performance Test.
2. Review Training-Time-Out (TTO) procedures.
3. Trainees will not practice if an instructor is not present.
4. Trainees may not take equipment out of the MTF/Clinic/lab environment.

### **Special Instructions (For Instructors):**

1. Ensure all trainees are briefed on “TTO” policy and procedures prior to each high or moderate-risk evolution or laboratory. For multi-day or all-day evolutions, “TTO” shall be re-briefed prior to the start of training following major breaks, such as mealtimes. Evolution-specific “TTO” procedures should be added where needed. These procedures should be standardized to conform with established fleet distress indicators where appropriate. Emphasis shall be placed on specific verbal and nonverbal signals to be used by trainees and instructors.
2. A “TTO” may be called in any training situation where a trainee or instructor expresses concern for personal safety or requests clarification of procedures or requirements. “TTO” is also an appropriate means for a trainee to obtain relief if he or she is experiencing fear, stress, extreme exhaustion, or lack of confidence.
3. Instructors are responsible for maintaining situational awareness and shall remain alert to signs of trainee panic, fear, extreme exhaustion, or lack of confidence that may impair safe completion of the training exercise. Instructors shall cease training immediately when they consider such action appropriate.
4. Following a “TTO”, the situation shall be examined and additional explanation and instruction shall be provided as needed to allow safe resumption of training. Once the lead instructor on scene is fully apprised of the problem, he/she shall direct all training to cease or training with unaffected trainees to continue, based on the situation.

5. If a trainee refuses to participate in training after being instructed or after an unsafe condition has been corrected, or uses “TTO” excessively to disrupt training, that trainee shall be removed from training and referred for further counseling.

### **Basic “TTO” Trainee Briefing:**

1. A Training-Time-Out (TTO) may be called by any trainee or instructor, in any training situation where they are concerned for their own or another's safety, or they request clarification of procedures or requirements. “TTO” is also an appropriate means for a trainee to obtain relief if he or she is experiencing fear, stress, extreme exhaustion, or lack of confidence. The purpose of the “TTO” is to correct the situation of concern, provide clarifying information, or remove the trainee or instructor from the possible hazardous environment. A “TTO” may be signaled by (Insert appropriate nonverbal, alarm, or hand signal). If the “TTO” signal is not acknowledged, the signaler shall shout "Time Out" (or other action as required by the training activity). The instructor shall attempt to relieve and remove the trainee from the possible hazardous environment. If an adequate number of instructors are available to allow training to continue safely, the lead instructor may elect to do so. However, if this is not practical, training will be stopped until the situation is corrected.

### **Equipment:**

1. Real or simulated patient (a person acting as a patient)
2. Pen, Black
3. Exam Table
4. Stethoscope
5. Electronic BP Machine
6. Blood Pressure Cuff, Manual
7. Gloves, Non-Sterile
8. SF 600 Forms

### **Lab Area/Training Area Set-Up:**

1. Lab Area – A training facility such as a hospital or clinic examination room, or training space with a mock examination room.

**STAFF:** Instructor(s) should lead by example and apply all safety and procedural measures taught to trainees each and every time they demonstrate them.

- a. The trainees will be equally separated into groups and assigned assessment stations (as determined appropriate by the lead instructor and based upon the number of available trainees/instructors).

**STAFF:** One instructor shall be assigned the duties of lead instructor and will receive all grading reports provided by each assessment station instructor. This lead instructor shall be responsible for oversight and control of all instructors and assessment stations.

- (1) An instructor shall be assigned to each of the assessment stations to evaluate the trainee using the performance checklist provided here-in.

**Performance Evaluation Procedures:**

1. The evaluation will be implemented utilizing the information contained in this performance test direction for scoring, rubric and checklist(s). Each assessment station will have a copy of this performance test to include the rubric and performance checklist and scenario information, as needed. Each trainee must obtain an overall cumulative passing grade of 70% on each evaluation checklist. The standard for this performance test is a grade of Satisfactory or Unsatisfactory (Pass/Fail), a grade of Satisfactory is obtained by achieving 70% or above on each applicable evaluation checklist. The instructor will observe and grade each trainee's performance utilizing the performance checklist(s) provided.
  - a. Use of real patients: Trainee will perform the skills and behaviors as trained in front of an assigned instructor. The instructor will document the trainee's performance by filling out the points awarded on the performance checklist and submit it to the lead instructor. If the trainee is also completing a PQS the assigned instructor can also complete the PQS entry.
  - b. Use of simulated patients: In the event a real patient is unavailable or the instructor prefers to execute the performance test on a simulated patient, this performance test will be done using a person acting as a patient (another trainee, staff or instructor) and an instructor to provide scenario based vital signs, information and answers to the trainee's examination questions.
  - c. To effectively evaluate the decisions, behaviors, and performance of this test and adequately assess each trainee's ability to apply learned skill sets, procedures, and techniques. The instructional staff shall make every effort to ensure that all enabling objectives outlined in the lesson topic are evaluated during the evaluation process.
  - d. Instructor(s) will provide the trainee with both positive and negative feedback, as appropriate regarding their performance.

**NOTE:** Safety is Paramount; Instructor's shall immediately take action and halt any evaluation on a real or simulated patient when a safety concern arises and the instructor has deemed it appropriate. This will be implemented by calling a Training-Time-Out (TTO).

2. Final Remediation and Re-Testing
  - a. Remediation – If a trainee fails to obtain a grade of satisfactory (70%) on this performance test, the trainee shall receive remedial training in the areas of deficiency and be afforded additional opportunities to demonstrate satisfactory proficiency in performing the assigned skills. The remedial evaluation will be done after a staff

instructor has conducted remedial instruction in the proper application of learned techniques and procedures.

- b. Any trainee unable or unwilling to properly perform the procedures will be counselled as deemed appropriate by the lead instructor and/or designated Command representative(s).

## SCSC PERFORMANCE TEST 3

### A. INTRODUCTION

Upon successful completion of this lesson the trainee will be able to obtain a chest and lungs history and conduct a chest and lungs examination on a real or simulated patient (a person acting as a patient).

B. EQUIPMENT LIST: The primary instructor is responsible for checking that all of the below equipment is available, functional and in the lab before the lab is scheduled to begin:

1. Real or simulated patient (a person acting as a patient)
2. Pen, Black
3. Exam Table
4. Stethoscope
5. Electronic BP Machine
6. Blood Pressure Cuff, Manual
7. Gloves, Non-Sterile
8. SF 600 Forms

### C. REFERENCES

1. Seidel's Guide to Physical Examination, 8th Ed., Jane W. Ball, Joyce E. Dains, John A. Flynn, Barry S. Soloman, Rosalyn W. Stewart, Mosby, an imprint of Elsevier Inc., 2015
2. Bates' Guide to Physical Examination and History Taking, 12th Ed., Lynn S. Bickley and Peter G. Szilagy, Wolters Kluwer, 2017, <https://STAT!Ref.com>

### D. SAFETY PRECAUTIONS

1. Instructors, trainees and visitors must comply with all general safety procedures that are posted in the lab environment or provided in the lesson plan.
2. There are no skill specific safety hazards for this Performance Test.
3. Review TTO procedures in the Safety/Hazard Awareness Notice.
4. Trainees will not practice if an instructor is not present.
5. Trainees may not take equipment out of the lab.

### E. JOB STEPS

1. Trainee Instructions:
  - a. The purpose of this Performance Test is to evaluate the trainee's ability to complete a Respiratory System examination.
  - b. The trainee must attempt to perform and describe or explain each step as they are performing it.
  - c. The trainee has 20 minutes to complete this examination.

### SCSC PERFORMANCE TEST 3

- d. The trainee is not allowed to use the reference in the performance of this Performance Test.
- e. The trainee will wear appropriate attire during the practice and actual Performance Test evaluation per Instructor's guidance.

#### 2. Evaluator Instructions:

- a. The contact ratio for this lab is 1:3. This implies that the instructor will assess 3 trainees in one hour. The primary instructor will ensure that all the instructors assigned to assess trainees in this lab have completed prerequisite qualifications, are notified of assignment, are instructed to re-familiarized themselves with the Performance Test and lab process (how to use the rubric), and are at their appointed stations during the lab.
- b. Before starting the test, answer trainees' questions and make sure they understand what they are supposed to do. Once readiness has been established, implement and evaluate the trainees' performance using the rubric provided below.

#### F. STANDARD

- 1. SATISFACTORY PERFORMANCE: The trainee must achieve a minimum passing score of 70% (80 points).
- 2. UNSATISFACTORY PERFORMANCE: Failure to achieve a minimum passing grade of 70% (80 points). Trainees who demonstrate unsatisfactory performance on their second attempt will be counseled and remediated.

#### G. DIRECTIONS FOR SCORING

- 1. Instructors will use the "Maximum Points Performance" description to determine if the trainee has successfully demonstrated the "Event" listed in the rubric below and should receive 2 points. Trainees that require prompting may receive a partial point's score of 1 point if the event is not a CRITICAL event (Partial Points will be blacked out). The trainee will receive 0 points if they do not successfully perform after instructor prompting. Trainees must pass all critical items listed and achieve a 70% overall to pass this lab (see Satisfactory Performance above).

SCSC PERFORMANCE TEST 3

Rubric

Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
<b>OBTAIN A PATIENT'S HISTORY</b>					
Chief Complaint	2	Ask patient's chief complaint			0
Onset	2	Ask patient about onset of symptoms and pain. Specific MOI.			0
Location	2	Ask about pain location, does it radiate or stay in place.			0
Duration	2	Ask about duration, does it come and go or is it constant.	1	Prompt required	0
Character	2	Ask about the character of the pain, constant or comes and goes.	1	Prompt required	0
Aggravating	2	Ask what makes it worse.	1	Prompt required	0
Relieves	2	Ask what makes it better.	1	Prompt required	0
Temporal Factors	2	Ask if there is a time of day that their symptoms are better or worse.	1	Prompt required	0
Severity	2	Ask about where their pain is on the pain scale of (1-10).			0
Associated Symptoms	2	Ask about any other symptoms they notice.	1	Prompt required	0
PMHx & Surg Hx	2	Gather patients past medical history, SAMPLE and Past Surgical History, Medications, Tobacco Use and Allergies	1	Prompt required	0
Family History	2	Ask if there is a family history of any diseases.	1	Prompt required	0
Social History	2	Ask about their social history.	1	Prompt required	0
ROS	2	Review of systems, minimum of constitutional questions, ENT, Cardiac, Gastro	1	Prompt Required	0
<b>GENERAL IMPRESSION</b>					
General Impression	2	Form a General Impression			0



SCSC PERFORMANCE TEST 3

Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
Obtain Vital Signs	2	Obtain Vital Signs			0
<b>RESPIRATORY FOCUSED PHYSICAL EXAM</b>					
<b>INSPECT THE THORAX</b>					
Position	2	Position patient	1	Prompt required	0
Remove	2	Remove clothing from the waist up	1	Prompt required	0
Shape and Symmetry	2	Note the shape and symmetry of the chest from the front, back, costal angle, angle of the ribs, and the intercostal spaces.	1	Prompt required	0
Clavicles	2	Inspect the clavicles for any abnormalities.	1	Prompt required	0
Chest diameter	2	Inspect the diameter of the chest anteriorly and posteriorly.	1	Prompt required	0
<b>OBSERVE RESPIRATIONS FOR THE FOLLOWING:</b>					
Respiratory rate	2	Determine the respiratory rate.			0
Pattern	2	Note the pattern or rhythm of respiration			0
Tachypnea	2	Check for signs of Tachypnea			0
Bradypnea	2	Check for signs of Bradypnea			0
Cheyne-Stokes	2	Check for signs of Cheyne-Stokes	1	Prompt required	0
Chest Wall movement	2	Check for signs of chest wall movement			0
Bulging	2	Check for signs of unilateral or bilateral bulging			0
<b>OBSERVE LIPS, NAILS, FINGERS AND NOSTRILS FOR THE FOLLOWING:</b>					
Cyanosis	2	Check lips and nails for signs of cyanosis			0
Pursing	2	Check lips for signs of pursing	1	Prompt required	0
Clubbing	2	Check fingers for signs of clubbing	1	Prompt required	0
Flaring	2	Check the alae nasi for signs of flaring	1	Prompt required	0

SCSC PERFORMANCE TEST 3

Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
<b>PALPATE THE CHEST</b>					
<b>PALPATE THE THORACIC MUSCLES AND SKELETON FOR THE FOLLOWING SIGNS:</b>					
Pulsations	2	Check for signs of pulsations			0
Tenderness	2	Check for signs of tenderness	1	Prompt required	0
Bulging	2	Check for signs of bulging	1	Prompt required	0
Depressions	2	Check for signs of depressions	1	Prompt required	0
Masses	2	Check for signs of masses	1	Prompt required	0
Unusual Movement	2	Check for signs of unusual movement			0
Crepitus	2	Check for signs of crepitus	1	Prompt required	0
Pleural friction Rub	2	Check for signs of pleural friction rub	1	Prompt required	0
Evaluate expansion	2	Evaluate thoracic expansion during respiration by checking the spinal processes	1	Prompt required	0
<b>PALPATE THE CHEST FOR TACTILE FREMITUS:</b>					
Recite	2	Ask the patient to recite a few numbers or say a few words. (e.g. 99)	1	Prompt required	0
Palpate simultaneously	2	Palpate both sides simultaneously and symmetrically.	1	Prompt required	0
Trachea position	2	Note the position of the trachea	1	Prompt required	0
<b>PERCUSS THE CHEST</b>					
<b>PERCUSS THE CHEST IN A LADDER-LIKE PATTERN AND LOOK FOR THE FOLLOWING:</b>					
Tympanic	2	Check for tympanic percussion tones	1	Prompt required	0
Hyperresonance	2	Check for hyperresonance tones	1	Prompt required	0
Resonance	2	Check for resonance tones	1	Prompt required	0
Dullness	2	Check for dullness tones	1	Prompt required	0

SCSC PERFORMANCE TEST 3

Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
Flatness	2	Check for flatness tones	1	Prompt required	0
Compare	2	Compare all areas bilaterally, using one side as a control for the other.			0
<b>AUSCULATE THE CHEST</b>					
<b>AUSCULATE THE CHEST ANTERIORLY AND POSTERIORLY LOOKING FOR THE FOLLOWING:</b>					
Adventitious sounds	2	Listen for signs of adventitious sounds			0
Wheezing	2	Listen for signs of wheezing			0
Crackles	2	Listen for signs of crackles			0
Rhonchi	2	Listen or signs of rhonchi			0
Pleural Friction Rub	2	Listen for signs of pleural friction rub			0
<b>PRESENT FINDINGS OF FOCUSED PHYSICAL EXAM</b>					
Present Findings	2	Present findings to provider			0
Document Findings	2	Document all history, findings interventions and procedures			0

SCSC PERFORMANCE TEST 3

Trainee: \_\_\_\_\_ Instructor: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Actual Time Started: \_\_\_\_\_

Possible Points      Points Awarded

<b>OBTAIN A PATIENT'S HISTORY</b>		
*Ask patient's chief complaint	2	
*Ask patient about onset of symptoms and pain. Specific MOI.	2	
*Ask about pain location, does it radiate or stay in place.	2	
Ask about duration, does it come and go or is it constant.	2	
Ask about the character of the pain, constant or comes and goes.	2	
Ask what makes it worse.	2	
Ask what makes it better.	2	
Ask if there is a time of day that their symptoms are better or worse.	2	
*Ask about where their pain is on the pain scale of (1-10).	2	
Ask about any other symptoms they notice.	2	
Gather patients past medical history, SAMPLE and Past Surgical History, Medications, Tobacco Use and Allergies	2	
Ask if there is a family history of any diseases.	2	
Ask about their social history.	2	
Review of systems, minimum of constitutional questions, ENT, Cardiac, and Gastro.	2	
<b>SUBTOTAL</b>	<b>28</b>	
<b>OBTAIN A GENERAL IMPRESSION OF THE PATIENT</b>		
*Form a General Impression	2	
*Obtain Vital Signs	2	
<b>SUBTOTAL</b>	<b>4</b>	
<b>RESPIRATORY FOCUSED PHYSICAL EXAM</b>		
<b>INSPECT THE THORAX</b>		
Position patient	2	
Remove clothing from the waist up	2	
Note the shape and symmetry of the chest from the front, back, costal angle, angle of the ribs, and the intercostal spaces.	2	
Inspect the clavicles for any abnormalities.	2	
Inspect the diameter of the chest anteriorly and posteriorly.	2	
<b>OBSERVE RESPIRATIONS FOR THE FOLLOWING:</b>		
*Determine the respiratory rate.	2	
*Note the pattern or rhythm of respiration	2	
*Check for signs of Tachypnea	2	

SCSC PERFORMANCE TEST 3

*Check for signs of Bradypnea	2	
Check for signs of Cheyne-Stokes	2	
*Check for signs of chest wall movement	2	
*Check for signs of unilateral or bilateral bulging	2	
<b>OBSERVE LIPS, NAILS, FINGERS AND NOSTRILS FOR THE FOLLOWING SIGNS:</b>		
*Check lips and nails for signs of cyanosis	2	
Check lips for signs of pursing	2	
Check fingers for signs of clubbing	2	
Check the alae nasi for signs of flaring	2	
<b>SUBTOTAL</b>	<b>32</b>	
<b>PALPATE THE CHEST</b>		
<b>PALPATE THE THORACIC MUSCLES AND SKELETON FOR THE FOLLOWING SINGS:</b>		
*Check for signs of pulsations	2	
Check for signs of tenderness	2	
Check for signs of bulging	2	
Check for signs of depressions	2	
Check for signs of masses	2	
*Check for signs of unusual movement	2	
Check for signs of crepitus	2	
Check for signs of pleural friction rub	2	
Evaluate thoracic expansion during respiration by checking the spinal processes	2	
<b>PALPATE THE CHEST FOR TACTILE FREMITUS BY THE FOLLOWING:</b>		
Ask the patient to recite a few numbers or say a few words. (e.g. 99)	2	
Palpate both sides simultaneously and symmetrically.	2	
Note the position of the trachea	2	
<b>SUBTOTAL</b>	<b>24</b>	
<b>PERCUSS THE CHEST</b>		
<b>PERCUSS THE CHEST IN A LADDER-LIKE PATTERN AND LOOK FOR THE FOLLOWING:</b>		
Check for tympanic percussion tones	2	
Check for hyperresonance tones	2	
Check for resonance tones	2	
Check for dullness tones	2	
Check for flatness tones	2	
*Compare all areas bilaterally, using one side as a control for the other.	2	

SCSC PERFORMANCE TEST 3

<b>SUBTOTAL</b>	<b>12</b>	
<b>AUSCULTATE THE CHEST</b>		
<b>AUSCULTATE THE CHEST ANTERIORLY AND POSTERIORLY LOOKING FOR THE FOLLOWING:</b>		
*Listen for signs of adventitious sounds	2	
*Listen for signs of wheezing	2	
*Listen for signs of crackles	2	
*Listen or signs of rhonchi	2	
*Listen for signs of pleural friction rub	2	
<b>SUBTOTAL</b>	<b>10</b>	
<b>PRESENT FINDINGS OF THE FOCUSED PHYSICAL EXAM</b>		
*Present findings to provider	2	
*Document all history, findings interventions and procedures	2	
<b>SUBTOTAL</b>	<b>4</b>	

PERFORMANCE TEST TOTAL SCORE	Possible Points	Points Awarded
<b>OBTAIN A PATIENT'S HISTORY</b>	28	
<b>GENERAL IMPRESSION</b>	4	
<b>INSPECT THE THROAX</b>	32	
<b>PALPATE THE CHEST</b>	24	
<b>PERCUSS THE CHEST</b>	12	
<b>AUSCULTATE THE CHEST</b>	10	
<b>PRESENT FINDINGS OF THE FOCUSED PHYSICAL EXAM</b>	4	
<b>TOTAL</b>	<b>114</b>	
<b>TOTAL POINTS SCORED BY TRAINEE</b>		

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ PASS / FAIL