

SICK CALL SCREENER COURSE



PERFORMANCE TEST 4
ADMINISTRATOR'S GUIDE

FOR

SICK CALL SCREENER
CARDIOVASCULAR SYSTEM EXAMINATION

SEPTEMBER 2018

INSTRUCTIONS TO THE ADMINISTRATOR:

Overview – Cardiovascular System Performance Test (Week-1, Day 4)

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 cardiovascular history and conduct a cardiovascular 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.
5. Trainees will follow universal precautions and wear proper PPE.

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. Exam Room
3. Stethoscope
4. Sphygmomanometer
5. BP Cuff Manual
6. Non sterile gloves
7. Black Pen
8. SF 600

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).

PERFORMANCE TEST 4
CARDIOVASCULAR SYSTEM

A. INTRODUCTION

Upon successful completion of this lesson the trainee will be able to obtain a cardiovascular history and conduct a cardiovascular 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. Exam Room
3. Stethoscope
4. Sphygmomanometer
5. BP Cuff Manual
6. Non sterile gloves
7. Black Pen
8. SF 600

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. Szilagyi, 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.
6. Trainees will follow universal precautions and wear proper PPE.

PERFORMANCE TEST 4
CARDIOVASCULAR SYSTEM (CONT.)

E. JOB STEPS

Trainee Instructions:

1. The purpose of this performance test is to evaluate the trainee's ability to perform a heart and blood vessel examination.
2. The trainee must attempt to perform and describe or explain each step as they are performing it.
3. The trainee has 20 minutes to complete this examination.
4. The trainee is not allowed to use the references in the performance of this Performance Test.
5. The trainee will wear appropriate attire during the practice and actual Performance Test evaluation per Instructor's guidance.

Evaluator Instructions:

1. 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.
2. 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

SATISFACTORY PERFORMANCE: The trainee must achieve a minimum passing score of 70% (68 points).

UNSATISFACTORY PERFORMANCE: Failure to achieve a minimum passing grade of 70% (68 points). Trainees who demonstrate unsatisfactory performance on their second attempt will be counseled and remediated.

G. DIRECTIONS FOR SCORING

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 score of 1 point if the event is not a CRITICAL event (Partial Points will be blacked out). The trainee will

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CARDIOVASCULAR SYSTEM (CONT.)

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).

Rubric

Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
PHYSICAL EXAMINATION OF THE CARDIOVASCULAR SYSTEM					
HISTORY					
Patient's Information	2	Obtains Patient's information	1	Prompt required	0
Vital Signs	2	Obtain Vital signs (BP,T, P, R, SpO2)			0
General Appearance	2	Note General Appearance			0
HPI	2	Obtain History of Present Illness (HPI) OLDCARTS			0
Associated Symptoms	2	Obtain Symptoms Associated: shortness of breath, nausea, vomiting, numbness/tingling in upper extremities, shoulder pain, coughing, dizziness, syncope, palpitations.			0
Past Medical and Surgical	2	Obtain Past Medical & Surgical History	1	Prompt required	0
Family History	2	Obtain Family History	1	Prompt required	0
Social History	2	Obtain Social History	1	Prompt required	0
ROS	2	Conduct Review of Systems Minimum: Constitutional and one system above and one below.	1	Prompt required	0
INSPECTION (HEART)					
Chest Wall	2	Check the chest wall	1	Prompt required	0
Precordium	2	Inspect Precordium – apical impulse	1	Prompt required	0
Skin	2	Inspect Skin – cyanosis, venous distension			0

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CARDIOVASCULAR SYSTEM (CONT.)

Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
Nails	2	Inspect Nails – cyanosis, capillary refilltime			0
Inspect for JVD	2	Position the patient at a 45 degree angle on the examination table and inspect for jugular venous pulsations or distension	1	Prompt required	0
INSPECTION (BLOOD VESSELS)					
Skin	2	Inspect Skin – pallor, cyanosis, mottling			0
Hair Loss	2	Inspect Hair loss	1	Prompt required	0
Muscular atrophy	2	Inspect Skin or muscular atrophy	1	Prompt required	0
Skin Texture	2	Inspect Changes in skin texture	1	Prompt required	0
Edema or Swelling	2	Inspect Edema or swelling	1	Prompt required	0
Jugular Venous	2	Inspect for Jugular venous pulsations or distention			0
Extremities	2	Inspect extremities for: a. Thrombosis b. Pitting Edema c. Varicose Veins			0
PALPATION (CHEST)					
Palpate Apical Impulse	2	Palpate apical impulse for chest wall Abnormalities, thrills, or murmurs.	1	Prompt required	0
Left Sternal Border	2	Palpate Left sternal border for chest wall abnormalities, thrills, or murmurs.	1	Prompt required	0
Base	2	Palpate Base for chest wall Abnormalities, thrills, or murmurs.	1	Prompt required	0
Right Sternal Border	2	Palpate Right sternal border for chest wall Abnormalities, thrills, or murmurs.	1	Prompt required	0
Epigastrium or Axillae	2	Palpate Epigastrium or axillae for chest wall Abnormalities, thrills, or murmurs.	1	Prompt required	0

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CARDIOVASCULAR SYSTEM (CONT.)

Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
PMI	2	Identify the point of maximal impulse (PMI) and estimate its diameter.	1	Prompt required	0
Document	2	Document findings			0
PALPATION (BLOOD VESSELS)					
Carotid Arteries	2	Palpate Carotid arteries for: rate, rhythm, pulse contour, amplitude, symmetry, or any obstructions to flow			0
Radial Arteries	2	Palpate Radial arteries for: rate, rhythm, pulse contour, amplitude, symmetry, or any obstructions to flow			0
Femoral Arteries	2	Palpate Femoral arteries for: rate, rhythm, pulse contour, amplitude, symmetry, or any obstructions to flow	1	Prompt required	0
Dorsalis Pedis Arteries	2	Palpate Dorsalis Pedis arteries for: rate, rhythm, pulse contour, amplitude, symmetry, or any obstructions to flow	1	Prompt required	0
Posterior Tibialis Arteries	2	Palpate Posterior tibialis arteries for: rate, rhythm, pulse contour, amplitude, symmetry, or any obstructions to flow	1	Prompt required	0
Document	2	Document findings			0
AUSCULTATION (HEART)					
Aortic Valve	2	Auscultate Aortic valve area	1	Prompt required	0
Pulmonic Valve	2	Auscultate Pulmonic valve area	1	Prompt required	0
Second Pulmonic	2	Auscultate Second pulmonic area	1	Prompt required	0
Tricuspid Valve	2	Auscultate Tricuspid valve	1	Prompt required	0
Mitral	2	Auscultate Mitral (or apical) area	1	Prompt required	0

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CARDIOVASCULAR SYSTEM (CONT.)

Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
Document	2	Auscultate above locations for: S1, S2, Rate, rhythm, splitting sounds, murmurs, or any extra sounds like S3, S4, gallops, or rubs.			0
AUSCULTATION (BLOOD VESSELS)					
Temporal	2	Auscultate Temporal	1	Prompt required	0
Carotid	2	Auscultate Carotid	1	Prompt required	0
Renal	2	Auscultate Renal	1	Prompt required	0
Abdominal Aorta	2	Auscultate Abdominal aorta	1	Prompt required	0
Femoral	2	Auscultate Femoral	1	Prompt required	0
Document	2	Auscultate above arteries for: rate, rhythm, pulse contour, amplitude, symmetry, bruits, or obstructions to flow			0
PATIENT PRESENTATION					
Present Findings	2	Present findings to provider			0
Document Encounter	2	Document all history, findings interventions and procedures			0

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CARDIOVASCULAR SYSTEM (CONT.)

Trainee: _____ Instructor: _____

Date: _____ Signature: _____

Actual Time Started: _____ Possible Points Points Awarded

HISTORY		
Obtains Patient's information	2	
*Obtain vital signs and history	2	
*Note patient's general appearance	2	
*Obtain History of present illness (HPI) OLDCARTS	2	
*Obtain Symptoms Associated	2	
Obtain Past Medical & Surgical History	2	
Obtain Family History	2	
Obtain Social History	2	
Conduct Review of Systems	2	
SUBTOTAL	18	
INSPECTION (HEART)		
Check the chest wall	2	
Inspect Precordium – apical impulse	2	
*Inspect Skin – cyanosis, venous distension	2	
*Inspect Nails – cyanosis, capillary refill time	2	
Position the patient at a 45 degree angle on the examination table and inspect for jugular venous pulsations or distension	2	
SUBTOTAL	10	
INSPECTION (BLOOD VESSELS)		
*Inspect Skin – pallor, cyanosis, mottling	2	
Inspect Hair loss	2	
Inspect Skin or muscular atrophy	2	
Inspect Changes in skin texture	2	
Inspect Edema or swelling	2	
*Inspect for Jugular venous pulsations or distention	2	
*Inspect extremities for Thrombosis, Pitting edema, and Varicose veins.	2	
SUBTOTAL	14	
PALPATION (CHEST)		
Palpate apical impulse for chest wall Abnormalities, thrills, or murmurs.	2	
Palpate Left sternal border for chest wall Abnormalities, thrills, or murmurs.	2	

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CARDIOVASCULAR SYSTEM (CONT.)

Palpate Base for chest wall Abnormalities, thrills, or murmurs.	2	
Palpate Right sternal border for chest wall Abnormalities, thrills, or murmurs.	2	
Palpate Epigastrium or axillae for chest wall Abnormalities, thrills, or murmurs.	2	
Identify the point of maximal impulse (PMI) and estimate its diameter.	2	
*Document	2	
SUBTOTAL	14	
PALPATION (BLOOD VESSELS)		
*Palpate Carotid arteries for: rate, rhythm, pulse contour, amplitude, symmetry, or any obstructions to flow	2	
*Palpate Radial arteries for: rate, rhythm, pulse contour, amplitude, symmetry, or any obstructions to flow	2	
Palpate Femoral arteries for: rate, rhythm, pulse contour, amplitude, symmetry, or any obstructions to flow	2	
Palpate Dorsalis Pedis arteries for: rate, rhythm, pulse contour, amplitude, symmetry, or any obstructions to flow	2	
Palpate Posterior tibialis arteries for: rate, rhythm, pulse contour, amplitude, symmetry, or any obstructions to flow	2	
*Document	2	
SUBTOTAL	12	
AUSCULTATION (HEART)		
Auscultate Aortic valve area	2	
Auscultate Pulmonic valve area	2	
Auscultate Second pulmonic area	2	
Auscultate Tricuspid valve	2	
Auscultate Mitral (or apical) area	2	
*Document: Auscultate above locations for: S1, S2, Rate, rhythm, splitting sounds, murmurs, or any extra sounds like S3, S4, gallops, or rubs.	2	
SUBTOTAL	12	
AUSCULTATION (BLOOD VESSELS)		
Auscultate Temporal	2	
Auscultate Carotid	2	
Auscultate Renal	2	
Auscultate Abdominal aorta	2	
Auscultate Femoral	2	
*Document: Auscultate above arteries for: rate, rhythm, pulse contour, amplitude, symmetry, bruits, or obstructions to flow	2	
SUBTOTAL	12	
PATIENT PRESENTATION		

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 CARDIOVASCULAR SYSTEM (CONT.)

*Present findings to provider	2	
*Document all history, findings interventions and procedures	2	
SUBTOTAL	4	

PERFORMANCE TEST TOTAL SCORE	Possible Points	Points Awarded
HISTORY	18	
INSPECTION (HEART)	10	
INSPECTION (BLOOD VESSELS)	14	
PALPATION (HEART)	14	
PALPATION (BLOOD VESSELS)	12	
AUSCULTATION (HEART)	12	
AUSCULTATION (BLOOD VESSELS)	12	
PATIENT PRESENTATION	4	
SUBTOTAL	96	
TOTAL POINTS SCORED BY TRAINEE		

Signature: _____ Date: _____ PASS / FAIL