

SICK CALL SCREENER COURSE



SCSC PERFORMANCE TEST 6
ADMINISTRATOR'S GUIDE

FOR

SICK CALL SCREENER
NEUROLOGIC SYSTEM EXAMINATION

SEPTEMBER 2018

INSTRUCTIONS TO THE ADMINISTRATOR:

Overview – Neurologic System Performance Test (Week-1, Day 5)

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 patient's neurological history and conduct a neurologic 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. Students will not practice if an instructor is not present
4. Students may not take equipment out of the MTF/Clinic/lab environment
5. Students 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. Penlight
3. Cotton wisp
4. Tuning fork
5. Cotton tipped applicator
6. Familiar objects (e.g., keys, coin)
7. Tongue blade
8. Reflex hammer
9. Sterile needles or paper clips

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 student'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 student, 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).

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PHYSICAL EXAMINATION OF THE NEUROLOGIC SYSTEM

A. INTRODUCTION

Upon successful completion of this lesson the trainee will be able to obtain a patient's neurological history and conduct a neurologic 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. Penlight
3. Cotton wisp
4. Tuning fork
5. Cotton tipped applicator
6. Familiar objects (e.g., keys, coin)
7. Tongue blade
8. Reflex hammer
9. Sterile needles or paper clips

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.

D. SAFETY PRECAUTIONS

1. Instructors, students and visitors must comply with all general safety procedures that are posted in the MTF/Clinic/lab environment
2. There are no skill specific safety hazards for this Performance Test
3. Review TTO procedures
4. Students will not practice if an instructor is not present
5. Students may not take equipment out of the MTF/Clinic/lab environment
6. Students will follow universal precautions and wear proper PPE

E. JOB STEPS

Student Instructions:

1. The purpose of this PCL is to evaluate the student's knowledge of the practical application of conducting a neurological examination.

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2. The student must perform a complete all parts of what constitutes a thorough neurological examination and explain each step as it is performed.
3. The student has 30 minutes to complete this examination.
4. The student is not allowed to use the reference in the performance of this PCL.
5. The student will wear appropriate attire during the practice and actual PCL evaluation.

Evaluator Instructions:

1. The contact ratio for this lab is 1:2. This implies that the instructor will assess 2 students in one hour. The primary instructor will ensure that all the instructors assigned to assess students 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 students' questions and make sure they understand what they are supposed to do. Once readiness has been established, implement and evaluate the students' performance using the rubric provided below.

F. STANDARD

1. SATISFACTORY PERFORMANCE: The student must achieve a minimum passing score of 70% (86 points).
2. UNSATISFACTORY PERFORMANCE: Failure to achieve a minimum passing grade of 70% (86 points). Students 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 student has successfully demonstrated the "Event" listed in the rubric below and should receive 2 points. Students 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 student will receive 0 points if they do not successfully perform after instructor prompting. Students must pass all critical items listed and achieve a 70% overall to pass this lab (see Satisfactory Performance above).

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Rubric:

Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
OBTAIN A PATIENT HISTORY					
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, what it feels like sharp, dull, ache etc	1	Prompt Required	0
Aggravating Factors	2	Ask what makes it worse.	1	Prompt Required	0
Relieving Factors	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
Pain severity	2	Ask about where their pain is on the pain scale of (1-10).			0
Other Symptoms	2	Ask about any other symptoms they notice.	1	Prompt Required	0
Affect on daily activities	2	Ask about affect to activities of daily living	1	Prompt Required	0
PMH	2	Gather patients past medical history, SAMPLE	1	Prompt Required	0
Surgical History	2	Gather Surgical History	1	Prompt Required	0
Family History	2	Gather Family History	1	Prompt Required	0
Social History	2	Gather Social History	1	Prompt Required	0
ROS	2	Review of systems, minimum of constitutional questions	1	Prompt Required	0
GENERAL IMPRESSION					

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Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
General Impression	2	Form General Impression			0
Obtain Vital Signs	2	Obtain Vital Signs			0
ANALYZE MENTAL STATUS					
Obtain General Observations	2	Obtain general observations related to a neurologic examination. <ul style="list-style-type: none"> • Balance • Coordination • Gait 			0
Assess Mental Status	2	Assess patients orientation <ul style="list-style-type: none"> • orientated to person • orientated to place • orientated to time and situation 			0
CRANIAL NERVE (CN) EXAMINATION					
Olfactory - CN I	2	Test sense of smell <ul style="list-style-type: none"> • one naris at a time 	1	Prompt Required	0
Optic - CN II	2	Test visual acuity <ul style="list-style-type: none"> • distant and near vision 	1	Prompt Required	0
Oculomotor, Trochlear & Abducens - CN III, IV, and VI	2	Test visual fields <ul style="list-style-type: none"> • Inspect eyelids • PERRL-A • Test extraocular eye movements 	1	Prompt Required	0
Trigeminal - CN V	2	Inspect the face for muscle atrophy <ul style="list-style-type: none"> • Palpate jaw muscles • Test superficial pain • Test touch sensation 	1	Prompt Required	0

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Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
Facial - CN VII	2	Inspect for symmetry of facial features and expressions <ul style="list-style-type: none"> • Raise both eyebrows • Frown • Muscle strength of eye lids • Show upper and lower teeth • Smile • Puffed cheeks 	1	Prompt Required	0
Acoustic - CN VIII	2	Test sense of hearing <ul style="list-style-type: none"> • Finger rub bilaterally 	1	Prompt Required	0
Glossopharyngeal and Vagus - CN IX and X	2	Test gag reflex and ability to swallow <ul style="list-style-type: none"> • Inspect symmetry of uvula • Evaluate speech, voice quality 	1	Prompt Required	0
Spinal Accessory - CN XI	2	Test muscles of neck and upper back <ul style="list-style-type: none"> • Shoulder shrug against resistance • Turn head, each side against resistance 	1	Prompt Required	0
Hypoglossal - CN XII	2	Inspect tongue movements <ul style="list-style-type: none"> • Symmetry, or atrophy • Movements side to side • Movements up and down • Movements during speech 	1	Prompt Required	0
CEREBELLAR FUNCTION TESTS					
RAMs	2	Perform Rapid Alternating Movements (RAMs) Test	1	Prompt Required	0
Point to Point Movement	2	Perform Point to Point Movement Test	1	Prompt Required	0

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Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
FTN	2	Perform Finger to Nose (FTN)	1	Prompt Required	0
Heel-to-Toe Walk	2	Perform Heel-to Toe Walk	1	Prompt Required	0
Hop in Place on Each Foot	2	Perform Hop in Place on Each Foot	1	Prompt Required	0
The Rhomberg Test	2	Perform The Rhomberg Test	1	Prompt Required	0
PRIMARY SENSORY TESTING					
Superficial Touch	2	Perform a superficial touch assessment	1	Prompt Required	0
Superficial Pain	2	Perform a superficial pain assessment	1	Prompt Required	0
Vibrations	2	Test vibratory sensations	1	Prompt Required	0
Position of Joints	2	Positions sense of joints (big toe)	1	Prompt Required	0
CORTICAL SENSORY FUNCTIONS TESTING					
Stereognosis	2	Perform Stereognosis test using items such as: <ul style="list-style-type: none"> • Keys • Coin • Paperclip 	1	Prompt Required	0
Two Point Discrimination	2	Perform two point discrimination test using paperclip ends	1	Prompt Required	0
Graphesthesia	2	Perform a graphesthesia test using a blunt pen or applicator stick	1	Prompt Required	0
SUPERFICIAL REFLEXES TESTING					
Plantar Reflexes	2	Perform a plantar reflex test using a reflex hammer			0
Cremasteric Reflexes	2	Perform a cremasteric reflex test on male patients			0
DEEP TENDON REFLEXES TESTING					
Biceps Reflex	2	Examine patients biceps reflex	1	Prompt Required	0
Triceps Reflex	2	Examine patients triceps reflex	1	Prompt Required	0

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Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
Supernator/ Branchioradialis Reflex	2	Examine patients supernator/ branchioradialis reflex	1	Prompt Required	0
Knee Reflex	2	Examine patients knee reflex	1	Prompt Required	0
Ankle Reflex	2	Examine patients ankle reflex	1	Prompt Required	0
Plantar Reflex	2	Examine patients plantar reflex	1	Prompt Required	0
Clonus	2	Examine patients Clonus	1	Prompt Required	0
SPECIAL TESTING					
Meningeal Irritation	2	Perform patients neck flexion while palpating the neck <ul style="list-style-type: none"> Annotate resistance or abnormalities 			0
Brudzinski's Sign	2	Perform Brudzinski's signs test while observing hips and knee reactions <ul style="list-style-type: none"> Annotate resistance or abnormalities 			0
Kernig's Sign	2	Perform Kernig's signs <ul style="list-style-type: none"> Annotate resistance and pain 			0
PRESENT FINDINGS					
Present Findings	2	Present findings to provider			0
Document Encounter	2	Document all history, findings interventions and procedures			0
PATIENT EDUCATION AND TREATMENT					
Distribute Medication	2	Distribute medication per provider's orders and with 5 rights			0
Provide Reassurance	2	Provide reassurance and answer patient questions	1	Prompt Required	0

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Event	Max Points	Maximum Points Performance	Partial Points	Partial Points Performance	Failing Points
Provide patient education	2	Provide patient education and home therapy handouts	1	Prompt Required	0
Document and provide paperwork.	2	Document and provide duty status determination paperwork			0
Ensure patient understands	2	Ensure patient understands need to follow up and/or referral procedures	1	Prompt Required	0

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Student: _____ Instructor: _____

Date: _____ Signature: _____

Actual Time Started: _____

Possible Points Points Awarded

OBTAIN A PATIENT HISTORY		
*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, what it feels like sharp, dull, ache etc	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	
Ask about affect to activities of daily living	2	
Gather patients past medical history, SAMPLE	2	
Gather Surgical History	2	
Gather Family History	2	
Gather Social History	2	
Review of systems, minimum of constitutional questions	2	
SUBTOTAL	32	
GENERAL IMPRESSION		
*Form General Impression	2	
*Obtain Vital Signs	2	
SUBTOTAL	4	
ANALYZE MENTAL STATUS		
*Inspect patients: • Balance • Coordination • Gait	2	
*Assess patients orientation: • Orientated to person • Orientated to place • Orientated to time and situation	2	
SUBTOTAL	4	
CRANIAL NERVE EXAMINATION		
Test sense of smell • One naris at a time	2	
Test visual acuity • Distant and near vision	2	
Test visual fields • Inspect eyelids • PEARRL-A	2	

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<ul style="list-style-type: none"> • Test extraocular eye movements 		
Inspect the face for muscle atrophy <ul style="list-style-type: none"> • Palpate jaw muscles • Test superficial pain • Test touch sensation 	2	
Inspect for symmetry of facial features and expressions <ul style="list-style-type: none"> • Raise both eyebrows • Frown • Muscle strength of eye lids • Show upper and lower teeth • Smile • Puffed cheeks 	2	
Test sense of hearing <ul style="list-style-type: none"> • Finger rub bilaterally 	2	
Test gag reflex and ability to swallow <ul style="list-style-type: none"> • Inspect symmetry of uvula • Evaluate speech, voice quality 	2	
Test muscles of neck and upper back <ul style="list-style-type: none"> • Shoulder shrug against resistance • Turn head, each side against resistance 	2	
Inspect tongue movements <ul style="list-style-type: none"> • Symmetry, or atrophy • Movements side to side • Movements up and down • Movements during speech 	2	
SUBTOTAL	18	
CEREBELLAR FUNCTION TESTS		
Perform Rapid Alternating Movements (RAMs) Test	2	
Perform Point to Point Movement Test	2	
Perform Finger to Nose (FTN)	2	
Perform Heel-to Toe Walk	2	
Perform Hop in Place on Each Foot	2	
Perform The Romberg Test	2	
SUBTOTAL	12	
PRIMARY SENSORY TESTING		
Perform a superficial touch assessment	2	
Perform a superficial pain assessment	2	
Test vibratory sensations	2	
Positions sense of joints (big toe)	2	
SUBTOTAL	8	
CORTICAL SENSORY FUNCTIONS TESTING		
Perform Stereognosis test using items such as: <ul style="list-style-type: none"> • Keys • Coin • Paperclip 	2	

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Perform two point discrimination test using either sterile needles or paperclip ends	2	
Perform a graphesthesia test using a blunt pen or applicator stick	2	
SUBTOTAL	6	
SUPERFICIAL REFLEXES TESTING		
*Perform a plantar reflex test using a reflex hammer	2	
*Perform a cremasteric reflex test on male patients	2	
SUBTOTAL	4	
DEEP TENDON REFLEXES TESTING		
Examine patients biceps reflex	2	
Examine patients triceps reflex	2	
Examine patients supernator/branchioradialis reflex	2	
Examine patients knee reflex	2	
Examine patients ankle reflex	2	
Examine patients plantar reflex	2	
Examine patients Clonus	2	
SUBTOTAL	14	
SPECIAL TESTING		
*Perform patients neck flexion while palpating the neck • Annotate resistance or abnormalities	2	
*Perform Brudzinski's signs test while observing hips and knee reactions • Annotate resistance or abnormalities	2	
*Perform Kerning's signs • Annotate resistance or abnormalities	2	
SUBTOTAL	6	
PRESENT FINDINGS		
*Present findings to provider	2	
*Document all history, findings interventions and procedures	2	
SUBTOTAL	4	
PATIENT EDUCATION AND TREATMENT		
*Distribute medication per provider's orders and with 5 rights.	2	
Provide reassurance and answer patient questions.	2	
Provide patient education and home therapy handouts.	2	
*Document and provide duty status determination paperwork.	2	
Ensure patient understands need to follow up and/or referral procedures	2	
SUBTOTAL	10	

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PERFORMANCE TEST TOTAL SCORE	Possible Points	Points Awarded
OBTAIN A PATIENT HISTORY	32	
GENERAL IMPRESSION	4	
ANALYZE MENTAL STATUS	4	
CRANIAL NERVE EXAMINATION	18	
CEREBELLAR FUNCTION TESTS	12	
PRIMARY SENSORY TESTING	8	
CORTICAL SENSORY FUNCTIONS TESTING	6	
SUPERFICIAL REFLEXES TESTING	4	
DEEP TENDON REFLEXES TESTING	14	
SPECIAL TESTING	6	
PRESENT FINDINGS	4	
PATIENT EDUCATION AND TREATMENT	10	
SUBTOTAL	122	
TOTAL POINTS SCORED BY STUDENT		

Signature: _____ Date: _____ PASS / FAIL