

# CARDIAC/RESPIRATORY CHECK-OFF

EXAMINATION SKILLS	Satisfactory/ Unsatisfactory
<p>1. Do camera angles allow the instructor to view all elements of the physical exam?</p> <p>2. Is the recording completed in one take (no pauses or interruptions)?</p> <p>3. Is the student referencing the check off sheet only briefly, a few times?</p> <p>4. Is the student's physical examination technique correct for more than 80% of all of the exam elements?</p> <p><b>If the answer is "NO" to any of these questions, mark INCOMPLETE, students will need to repeat the examination per the syllabus</b></p>	
<p>1. Ensures <b>Privacy</b></p> <ul style="list-style-type: none"> <li>• <b>Introduces self</b> &amp; explains role</li> <li>• <b>Confirms Patient Identity</b></li> <li>• <b>Informs patient</b> they will be verbally describing the examination</li> </ul>	
<p>2. Performs <b>Hand Hygiene</b></p>	
<p>3. Inspects <b>Appearance</b>, comments on:</p> <ul style="list-style-type: none"> <li>• Dress, posture, grooming, &amp; hygiene</li> <li>• Stature &amp; build</li> <li>• Nutritional state</li> <li>• Pallor or cyanosis</li> <li>• Pursed lips or flared nostrils</li> </ul>	
<p>4. Inspects <b>Behavior</b>, comments on:</p> <ul style="list-style-type: none"> <li>• Degree if Cooperativeness</li> <li>• State of distress</li> <li>• Affect</li> <li>• Eye Contact</li> <li>• Motor activity (normokinetic, bradykinetic, hyperkinetic)</li> </ul>	
<p>5. Inspects <b>Precordium</b>, comments on:</p> <ul style="list-style-type: none"> <li>• Heaves &amp; lifts</li> </ul>	
<p>6. Palpates <b>Precordium</b>, comments on:</p> <ul style="list-style-type: none"> <li>• Identifies location of PMI</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Size</li> </ul>	

<p>7. Auscultates 5 areas of <b>Heart</b> with diaphragm &amp; bell, several cardiac cycles per area:</p> <ul style="list-style-type: none"> <li>• <b>Aortic</b>, 2nd ICS, RSB (<math>S_2 &gt; S_1</math>)</li> <li>• <b>Pulmonic</b>, 2nd ICS, LSB (<math>S_2 &gt; S_1</math>)</li> <li>• <b>Erbs Point</b> – 3rd ICS LSB (<math>S_2 = S_1</math>)</li> </ul> <p><u>Instructs patient to lift breast if necessary</u></p> <ul style="list-style-type: none"> <li>• <b>Tricuspid</b> – 4th ICS LSB (<math>S_1 &gt; S_2</math>)</li> <li>• <b>Mitral (Apical)</b> - 5th ICS MCL (<math>S_1 &gt; S_2</math>)</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Rate</li> <li>• Rhythm</li> <li>• Murmur, presence or absence, location, characteristics</li> </ul>	
<p>8. Auscultates <b>Apical Heart Rate</b> at Mitral area for one full minute, comments on:</p> <ul style="list-style-type: none"> <li>• Rate</li> </ul>	
<p>9. Auscultates for <b>Aortic Regurgitation &amp; Mitral Stenosis</b></p> <ul style="list-style-type: none"> <li>• Instructs patient to lean forward, exhale, &amp; hold breath</li> <li>• Listens with diaphragm at LSB at apex/base</li> <li>• Instruct patient to lie in the left lateral decubitus position</li> <li>• Listens with bell at apical impulse</li> <li>• Palpates carotid impulse to identify systole and diastole</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Murmur, presence or absence</li> <li>• Systolic or diastolic</li> </ul>	
<p>10. Inspects <b>Thorax</b>, comments on:</p> <ul style="list-style-type: none"> <li>• Skin characteristics</li> <li>• Respiratory rate &amp; pattern</li> <li>• Symmetric or paradoxical chest rise, retractions</li> <li>• Use of accessory muscles</li> <li>• Symmetry of shoulders &amp; clavicles</li> <li>• Anterior-Posterior to transverse diameter ratio</li> </ul>	
<p>11. Palpates <b>Thorax</b>, comments on:</p> <ul style="list-style-type: none"> <li>• Pulsations, tenderness, masses, or depressions</li> <li>• Rigidity, crepitus, or rubs</li> </ul>	
<p>12. Auscultates <b>Anterior Thorax</b> with diaphragm</p> <ul style="list-style-type: none"> <li>• Instructs patient to breathe deep with mouth open</li> <li>• Systematic progression side to side, from apex to base, at intercostal spaces</li> </ul> <p><u>Instructs patient to lift breast if necessary</u></p> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Clarity of lung sounds, adventitious sounds (location, quality, grade)</li> </ul>	

<p><b>13.</b> Auscultates <b>Posterior Thorax</b> with diaphragm</p> <ul style="list-style-type: none"> <li>• Instructs patient to breathe through mouth, cross arms at waist, head forward</li> <li>• Systematic progression side to side, from apex to base, at intercostal spaces</li> <li>• Includes lateral fields</li> <li>• At least 1 full cycle at each point</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Clarity of lung sounds, adventitious sounds (location, quality, grade)</li> </ul>	
<p><b>14.</b> Auscultates for <b>Bronchophony</b>:</p> <ul style="list-style-type: none"> <li>• Instructs patient to repeat “99” while auscultating posterior lung fields</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	
<p><b>15.</b> Auscultates for <b>Egophony</b>:</p> <ul style="list-style-type: none"> <li>• Instructs patient to repeat “eeee” while auscultating posterior lung fields</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	
<p><b>16.</b> Auscultates for <b>Whisper Pectoriloquy</b>:</p> <ul style="list-style-type: none"> <li>• Instructs patient to whisper “123” while auscultating posterior lung fields</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	
<b>17.</b> Appropriately <b>concludes</b> the exam with the patient	