

CARDIAC/RESPIRATORY CHECK-OFF

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

<p>7. Auscultates 5 areas of Heart with diaphragm & bell, several cardiac cycles per area:</p> <ul style="list-style-type: none"> • Aortic, 2nd ICS, RSB ($S2 > S1$) • Pulmonic, 2nd ICS, LSB ($S2 > S1$) • Erbs Point – 3rd ICS LSB ($S2 = S1$) <p><u>Instructs patient to lift breast if necessary</u></p> <ul style="list-style-type: none"> • Tricuspid – 4th ICS LSB ($S1 > S2$) • Mitral (Apical) - 5th ICS MCL ($S1 > S2$) <p>Comments on:</p> <ul style="list-style-type: none"> • Rate • Rhythm • Murmur, presence or absence, location, characteristics 	
<p>8. Auscultates Apical Heart Rate at Mitral area for one full minute, comments on:</p> <ul style="list-style-type: none"> • Rate 	
<p>9. Auscultates for Aortic Regurgitation & Mitral Stenosis</p> <ul style="list-style-type: none"> • Instructs patient to lean forward, exhale, & hold breath • Listens with diaphragm at LSB at apex/base • Instruct patient to lie in the left lateral decubitus position • Listens with bell at apical impulse • Palpates carotid impulse to identify systole and diastole <p>Comments on:</p> <ul style="list-style-type: none"> • Murmur, presence or absence • Systolic or diastolic 	
<p>10. Inspects Thorax, comments on:</p> <ul style="list-style-type: none"> • Skin characteristics • Respiratory rate & pattern • Symmetric or paradoxical chest rise, retractions • Use of accessory muscles • Symmetry of shoulders & clavicles • Anterior-Posterior to transverse diameter ratio 	
<p>11. Palpates Thorax, comments on:</p> <ul style="list-style-type: none"> • Pulsations, tenderness, masses, or depressions • Rigidity, crepitus, or rubs 	
<p>12. Auscultates Anterior Thorax with diaphragm</p> <ul style="list-style-type: none"> • Instructs patient to breathe deep with mouth open • Systematic progression side to side, from apex to base, at intercostal spaces <p><u>Instructs patient to lift breast if necessary</u></p> <p>Comments on:</p> <ul style="list-style-type: none"> • Clarity of lung sounds, adventitious sounds (location, quality, grade) 	

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