# Print Date: 9/4/13 Course Objectives/Course Outline Spokane Community College

### Course Title: Patient Assessment Prefix and Course Number: EMS 208-New as of Fall 2010

# Learning/Performance Expectations (e.g., outcomes, performance objectives, competencies, etc.)

### By the end of this course, a student should:

Be able to use the appropriate techniques to obtain a medical history from a patient, explain the pathophysiological significance of physical exam findings, integrate those principles of history taking and techniques of physical exam to complete a patient assessment and apply the process of clinical decision making to form a field impression.

# **Course Outline: Patient Assessment**

3-1.1 Describe the techniques of history taking. (C-1)

3-1.2 Discuss the importance of using open ended questions. (C-1)

3-1.3 Describe the use of facilitation, reflection, clarification, empathetic responses, confrontation, and interpretation. (C-1)

3-1.4 Differentiate between facilitation, reflection, clarification, sympathetic responses, confrontation, and interpretation. (C-3)

3-1.5 Describe the structure and purpose of a health history. (C-1)

3-1.6 Describe how to obtain a comprehensive health history. (C-1)

3-1.7 List the components of a comprehensive history of an adult patient. (C-1)

- 3-1.8 Demonstrate the importance of empathy when obtaining a health history. (A-1)
- 3-1.9 Demonstrate the importance of confidentiality when obtaining a health history. (A-1
- 3-2.1 Define the terms inspection, palpation, percussion, auscultation. (C-1)
- 3-2.2 Describe the techniques of inspection, palpation, percussion, and auscultation. (C-1)

3-2.3 Describe the evaluation of mental status. (C-1)

- 3-2.4 Evaluate the importance of a general survey. (C-3)
- 3-2.5 Describe the examination of skin, hair and nails. (C-1)
- 3-2.6 Differentiate normal and abnormal findings of the assessment of the skin. (C-3)
- 3-2.7 Distinguish the importance of abnormal findings of the assessment of the skin. (C-3)
- 3-2.8 Describe the examination of the head and neck. (C-1)
- 3-2.9 Differentiate normal and abnormal findings of the scalp examination. (C-3)
- 3-2.10 Describe the normal and abnormal assessment findings of the skull. (C-1)
- 3-2.11 Describe the assessment of visual acuity. (C-1)
- 3-2.12 Explain the rationale for the use of an ophthalmoscope. (C-1)
- 3-2.13 Describe the examination of the eyes. (C-1)
- 3-2.14 Distinguish between normal and abnormal assessment findings of the eyes. (C-3)
- 3-2.15 Explain the rationale for the use of an otoscope. (C-1)
- 3-2.16 Describe the examination of the ears. (C-1)
- 3-2.17 Differentiate normal and abnormal assessment findings of the ears. (C-3)
- 3-2.18 Describe the examination of the nose. (C-1)
- 3-2.19 Differentiate normal and abnormal assessment findings of the nose. (C-3)
- 3-2.20 Describe the examination of the mouth and pharynx. (C-1)
- 3-2.21 Differentiate normal and abnormal assessment findings of the mouth and pharynx. (C-3)
- 3-2.22 Describe the examination of the neck. (C-1)
- 3-2.23 Differentiate normal and abnormal assessment findings the neck. (C-3)
- 3-2.24 Describe the survey of the thorax and respiration. (C-1)
- 3-2.25 Describe the examination of the posterior chest. (C-1)
- 3-2.26 Describe percussion of the chest. (C-1)
- 3-2.27 Differentiate the percussion notes and their characteristics. (C-3)
- 3-2.28 Differentiate the characteristics of breath sounds. (C-3)

#### Print Date: 9/4/13

3-2.29 Describe the examination of the anterior chest. (C-1)

3-2.30 Differentiate normal and abnormal assessment findings of the chest examination. (C-3)

3-2.31 Describe special examination techniques related to the assessment of the chest. (C-1)

3-2.32 Describe the examination of the arterial pulse including rate, rhythm, and amplitude. (C-1)

3-2.33 Distinguish normal and abnormal findings of arterial pulse. (C-3)

3-2.34 Describe the assessment of jugular venous pressure and pulsations. (C-1)

3-2.35 Distinguish normal and abnormal examination findings of jugular venous pressure and pulsations. (C-3)

3-2.36 Describe the examination of the heart and blood vessels. (C-1)

3-2.37 Differentiate normal and abnormal assessment findings of the heart and blood vessels. (C-3)

3-2.38 Describe the auscultation of the heart. (C-1)

3-2.39 Differentiate the characteristics of normal and abnormal findings associated with the auscultation of the heart. (C-3)

3-2.40 Describe special examination techniques of the cardiovascular examination. (C-1)

3-2.41 Describe the examination of the abdomen. (C-1)

3-2.42 Differentiate normal and abnormal assessment findings of the abdomen. (C-3)

3-2.43 Describe auscultation of the abdomen. (C-1)

3-2.44 Distinguish normal and abnormal findings of the auscultation of the abdomen. (C-3)

3-2.45 Describe the examination of the female genitalia. (C-1)

3-2.46 Differentiate normal and abnormal assessment findings of the female genitalia. (C-3)

3-2.47 Describe the examination of the male genitalia. (C-1)

3-2.48 Differentiate normal and abnormal findings of the male genitalia. (C-3)

3-2.49 Describe the examination of the anus and rectum. (C-3)

3-2.50 Distinguish between normal and abnormal findings of the anus and rectum. (C-3)

3-2.51 Describe the examination of the peripheral vascular system. (C-1)

3-2.52 Differentiate normal and abnormal findings of the peripheral vascular system. (C-3)

3-2.53 Describe the examination of the musculoskeletal system. (C-1)

3-2.54 Differentiate normal and abnormal findings of the musculoskeletal system. (C-3)

3-2.55 Describe the examination of the nervous system. (C-1)

3-2.56 Differentiate normal and abnormal findings of the nervous system. (C-3)

3-2.57 Describe the assessment of the cranial nerves. (C-1)

3-2.58 Differentiate normal and abnormal findings of the cranial nerves. (C-3)

3-2.59 Describe the general guidelines of recording examination information. (C-1)

3-2.60 Discuss the considerations of examination of an infant or child. (C-1)

3-2.61 Demonstrate a caring attitude when performing physical examination skills. (A-3)

3-2.62 Discuss the importance of a professional appearance and demeanor when performing physical examination skills. (A-1)

3-2.63 Appreciate the limitations of conducting a physical exam in the out-of-hospital environment. (A-2)

3-2.64 Demonstrate the examination of skin, hair and nails. (P-2)

3-2.65 Demonstrate the examination of the head and neck. (P-2)

3-2.66 Demonstrate the examination of the eyes. (P-2)

3-2.67 Demonstrate the examination of the ears. (P-2)

3-2.68 Demonstrate the assessment of visual acuity. (P-2)

3-2.69 Demonstrate the examination of the nose. (P-2)

3-2.70 Demonstrate the examination of the mouth and pharynx. (P-2)

3-2.71 Demonstrate the examination of the neck. (P-2)

3-2.72 Demonstrate the examination of the thorax and ventilation. (P-2)

3-2.73 Demonstrate the examination of the posterior chest. (P-2)

3-2.74 Demonstrate auscultation of the chest. (P-2)

3-2.75 Demonstrate percussion of the chest. (P-2)

3-2.76 Demonstrate the examination of the anterior chest. (P-2)

3-2.77 Demonstrate special examination techniques related to the assessment of the chest. (P-2)

3-2.78 Demonstrate the examination of the arterial pulse including location, rate, rhythm, and amplitude. (P-2)

3-2.79 Demonstrate the assessment of jugular venous pressure and pulsations. (P-2)

3-2.80 Demonstrate the examination of the heart and blood vessels. (P-2)

3-2.81 Demonstrate special examination techniques of the cardiovascular examination. (P-2)

3-2.82 Demonstrate the examination of the abdomen. (P-2)

3-2.83 Demonstrate auscultation of the abdomen. (P-2)

3-2.84 Demonstrate the external visual examination of the female genitalia. (P-2)

3-2.85 Demonstrate the examination of the male genitalia. (P-2)

3-2.86 Demonstrate the examination of the peripheral vascular system. (P-2)

3-2.87 Demonstrate the examination of the musculoskeletal system. (P-2)

#### Print Date: 9/4/13

3-2.88 Demonstrate the examination of the nervous system. (P-2)

3-3.1 Recognize hazards/ potential hazards. (C-1)

3-3.2 Describe common hazards found at the scene of a trauma and a medical patient. (C-1)

3-3.3 Determine hazards found at the scene of a medical or trauma patient. (C-2)

3-3.4 Differentiate safe from unsafe scenes. (C-3)

3-3.5 Describe methods to making an unsafe scene safe. (C-1)

3-3.6 Discuss common mechanisms of injury/ nature of illness. (C-1)

3-3.7 Predict patterns of injury based on mechanism of injury. (C-2)

3-3.8 Discuss the reason for identifying the total number of patients at the scene. (C-1)

3-3.9 Organize the management of a scene following size-up. (C-3)

3-3.10 Explain the reasons for identifying the need for additional help or assistance. (C-1)

3-3.11 Summarize the reasons for forming a general impression of the patient. (C-1)

3-3.12 Discuss methods of assessing mental status. (C-1)

3-3.13 Categorize levels of consciousness in the adult, infant and child. (C-3)

3-3.14 Differentiate between assessing the altered mental status in the adult, child and infant patient. (C-3)

3-3.15 Discuss methods of assessing the airway in the adult, child and infant patient. (C-1)

3-3.16 State reasons for management of the cervical spine once the patient has been determined to be a trauma patient. (C-1)

3-3.17 Analyze a scene to determine if spinal precautions are required. (C-3)

3-3.18 Describe methods used for assessing if a patient is breathing. (C-1)

3-3.19 Differentiate between a patient with adequate and inadequate minute ventilation. (C-3)

3-3.20 Distinguish between methods of assessing breathing in the adult, child and infant patient. (C-3)

3-3.21 Compare the methods of providing airway care to the adult, child and infant patient. (C-3)

3-3.22 Describe the methods used to locate and assess a pulse. (C-1)

3-3.23 Differentiate between locating and assessing a pulse in an adult, child and infant patient. (C-3)

3-3.24 Discuss the need for assessing the patient for external bleeding. (C-1)

3-3.25 Describe normal and abnormal findings when assessing skin color. (C-1)

3-3.26 Describe normal and abnormal findings when assessing skin temperature. (C-1)

3-3.27 Describe normal and abnormal findings when assessing skin condition. (C-1)

3-3.28 Explain the reason for prioritizing a patient for care and transport. (C-1)

3-3.29 Identify patients who require expeditious transport. (C-3)

3-3.30 Describe the evaluation of patient=s perfusion status based on findings in the initial assessment. (C-1)

3-3.31 Describe orthostatic vital signs and evaluate their usefulness in assessing a patient in shock. (C-1)

3-3.32 Apply the techniques of physical examination to the medical patient. (C-1)

3-3.33 Differentiate between the assessment that is performed for a patient who is unresponsive or has an altered mental status and other medical patients requiring assessment. (C-3)

3-3.34 Discuss the reasons for reconsidering the mechanism of injury. (C-1)

3-3.35 State the reasons for performing a rapid trauma assessment. (C-1)

3-3.36 Recite examples and explain why patients should receive a rapid trauma assessment. (C-1)

3-3.37 Apply the techniques of physical examination to the trauma patient. (C-1)

3-3.38 Describe the areas included in the rapid trauma assessment and discuss what should be evaluated. (C-1)

3-3.39 Differentiate cases when the rapid assessment may be altered in order to provide patient care. (C-3)

3-3.40 Discuss the reason for performing a focused history and physical exam. (C-1)

3-3.41 Describe when and why a detailed physical examination is necessary. (C-1)

3-3.42 Discuss the components of the detailed physical exam in relation to the techniques of examination. (C-1)

3-3.43 State the areas of the body that are evaluated during the detailed physical exam. (C-1)

3-3.44 Explain what additional care should be provided while performing the detailed physical exam. (C-1)

3-3.45 Distinguish between the detailed physical exam that is performed on a trauma patient and that of the medical patient. (C-3)

3-3.46 Differentiate patients requiring a detailed physical exam from those who do not. (C-3)

3-3.47 Discuss the reasons for repeating the initial assessment as part of the on-going assessment. (C-1)

3-3.48 Describe the components of the on-going assessment. (C-1)

3-3.49 Describe trending of assessment components. (C-1)

3-3.50 Discuss medical identification devices/ systems. (C-1)

3-3.51 Explain the rationale for crew members to evaluate scene safety prior to entering. (A-2)

3-3.52 Serve as a model for others explaining how patient situations affect your evaluation of mechanism of injury or illness. (A-3)

3-3.53 Explain the importance of forming a general impression of the patient. (A-1)

3-3.54 Explain the value of performing an initial assessment. (A-2)

3-3.55 Demonstrate a caring attitude when performing an initial assessment. (A-3)

3-3.56 Attend to the feelings that patients with medical conditions might be experiencing. (A-1)

# Print Date: 9/4/13

3-3.57 Value the need for maintaining a professional caring attitude when performing a focused history and physical examination. (A-3)

3-3.58 Explain the rationale for the feelings that these patients might be experiencing. (A-3)

3-3.59 Demonstrate a caring attitude when performing a detailed physical examination. (A-3)

3-3.60 Explain the value of performing an on-going assessment. (A-2)

3-3.61 Recognize and respect the feelings that patients might experience during assessment. (A-1)

3-3.62 Explain the value of trending assessment components to other health professionals who assume care of the patient (A-2)

3-3.63 Observe various scenarios and identify potential hazards. (P-1)

3-3.64 Demonstrate the scene-size-up. (P-2)

3-3.65 Demonstrate the techniques for assessing mental status. (P-2)

3-3.66 Demonstrate the techniques for assessing the airway. (P-2)

3-3.67 Demonstrate the techniques for assessing if the patient is breathing. (P-2)

3-3.68 Demonstrate the techniques for assessing if the patient has a pulse. (P-2)

3-3.69 Demonstrate the techniques for assessing the patient for external bleeding. (P-2)

3-3.70 Demonstrate the techniques for assessing the patient's skin color, temperature, and condition. (P-2)

3-3.71 Demonstrate the ability to prioritize patients. (P-2)

3-3.72 Using the techniques of examination, demonstrate the assessment of a medical patient. (P-2)

3-3.73 Demonstrate the patient care skills that should be used to assist with a patient who is responsive with no known history. (P-2)

3-3.74 Demonstrate the patient care skills that should be used to assist with a patient who is unresponsive or has an altered mental status. (P-2)

3-3.75 Perform a rapid medical assessment. (P-2)

3-3.76 Perform a focused history and physical exam of the medical patient. (P-2)

3-3.77 Using the techniques of physical examination, demonstrate the assessment of a trauma patient. (P-2)

3-3.78 Demonstrate the rapid trauma assessment used to assess a patient based on mechanism of injury. (P-2)

3-3.79 Perform a focused history and physical exam on a non-critically injured patient. (P-2)

3-3.80 Perform a focused history and physical exam on a patient with life-threatening injuries. (P-2)

3-3.81 Perform a detailed physical examination. (P-2)

3-3.82 Demonstrate the skills involved in performing the on-going assessment. (P-2)

3-4.1 Compare the factors influencing medical care in the out-of-hospital environment to other medical settings. (C-2)

3-4.2 Differentiate between critical life-threatening, potentially life-threatening, and non life-threatening patient presentations. (C-3)

3-4.3 Evaluate the benefits and shortfalls of protocols, standing orders and patient care algorithms. (C-3)

3-4.4 Define the components, stages and sequences of the critical thinking process for paramedics. (C-1)

3-4.5 Apply the fundamental elements of critical thinking for paramedics. (C-2)

3-4.6 Describe the effects of the Afight or flight@ response and the positive and negative effects on a paramedic=s decision making. (C-1)

3-4.7 Summarize the Asix Rs@ of putting it all together: Read the patient, Read the scene, React, Reevaluate, Revise the management plan, Review performance. (C-1)

3-4.8 Defend the position that clinical decision making is the cornerstone of effective paramedic practice. (A-3)

3-4.9 Practice facilitating behaviors when thinking under pressure. (A-1)