

## Preparing for the Head to Toe Examination 2020-2021.

*Practice the examination steps as much as you can, do not only talk through the steps. Practice will help you to not only recall steps without prompting but will also help you to solidify moving through the steps logically, smoothly and with attention to patient (mannequin) positioning and draping.*

**Please review the “Head to Toe, Female” video on the PCM2 webpage.** This video was put together specifically for PCM2 students by Dr. Michael Koller, a prior Stritch School of Medicine Assistant Dean and beloved teacher of the physical exam. This video will show you how the steps are done on a real person.

You can see how he fluidly walks through the entire Head to Toe examination on a standardized patient (except for the Breast, GU exams). Recall that this is a screening exam.

*Note--You will continue to learn specific maneuvers this year for patients who have particular symptoms. These additional maneuvers are not included in this Head to Toe screening examination OSCE. This Head to Toe exam provides you with a “toolbox” of skills. In all likelihood, you will not be performing all steps on all patients, rather you learn which steps to perform through experience.*

**See the Head to Toe examination grading checklist and use it to guide your practice. Note that slight alterations in order of steps is acceptable. Marked deviation that puts a patient through an awkward and non-fluid exam, or other signs of a disorganized examination, as determined by the grader, is not acceptable and may be a cause for a failing grade.**

Specific points about the video:

1. Add in the steps of **percussion of the spine and costovertebral angle**, which is on your checklist. You may talk through this step, since there is no back to the mannequin, demonstrating hand motions.
2. **Cardiac auscultation:** You may have noted that we are asking you to auscultate **5 specific** locations on the chest. These include the 2<sup>nd</sup> intercostal space on both the right and left side of the sternum, the left lower sternal border and the apex, i.e., the mid-clavicular line at about the 5<sup>th</sup> intercostal space on the left side of the chest. The fifth location is the epigastric area (to listen for bruits from the vasculature). Not all textbooks or videos will include this.
3. Notice how Dr. Koller **percusses the liver**—he starts low in the abdomen, finds the change in percussion note—the lower edge of the liver, then he goes to the upper chest and percusses down to find the upper edge of the liver.
4. Dr. Koller does not specifically test active ROM of the lower extremity in this video but rather seems to combine the active ROM and muscles strength testing of the lower extremity. Separate these steps out, as on the checklist, for the OSCE.
5. **Part 4 of the video** includes the Neuro examination, which is not on this OSCE.
  - a. The Neuro runs from approximately the **3:48 minute marker to 9:05 minute marker**.
  - b. **From 9:05 to 9:39 minutes**, the examination of spine range of motion is demonstrated. Include lateral rotation for the OSCE.
6. **Do remember to wash your hands before and after the examination!**

## How to do this remotely and on mannequins for a graded OSCE?

PCM2 students will create a video on Panopto of your examination steps. You can practice this several times until you are satisfied the video shows you know the steps.

Doing this as a recorded session, hopefully, lowers the stress of needing to know all the steps AND the additional worry of repositioning mannequins, cameras, adjusting surroundings and simply not having a real person in front of you for your first OSCE of PCM2.

First, even though you can re-record a session, **do memorize the steps**, as you would need to do if you were working with an SP or a real patient.

Become familiar with Panopto. See the Loyola IT site:

<https://www.luc.edu/its/itrs/teachingwithtechnology/panopto/>

Gather all your equipment, plan your positioning of mannequins and lighting.

Wear professional clothing, white coat too if available.

Fluidly demonstrate the physical exam steps, talking through the steps, briefly mentioning what you are doing and how you are doing the steps while demonstrating.

We have updated the grade sheet so that you may see recommended methods of demonstrating the skills.

There are essentially three methods to demonstrate the skills as noted on the grid. The **green shaded boxes** indicate which method will most likely work best for the particular step.

- a. Either demonstrate on yourself, Or
- b. Demonstrate on the mannequins (most steps), Or
- c. Instruct the viewer (your patient, if a telemedicine visit) while you face the camera. You would instruct them what to do and usually ask them to copy your movements/gestures, similar to what you might do at the bedside, face to face for many exam steps.

We have included rows in the grid **(in purple)** that divide the exam. These are natural points where you might shift positioning of yourself, the mannequin or the camera, or change the method of demonstration of exam steps. You may use one or more of these points, if needed, to pause the recording. *Ideally you should be able to complete the entire exam without pause or checking notes. When we are live with SPs, this will be expected.*

However, we recognize inserting technology, using mannequins, etc. makes this process less fluid, therefore, we will allow pauses, so that you do not feel like you need to keep recording *from the beginning* over and over again to get it perfect. However, **it should be clear to us from the video that you know the steps well, are organized and do not need to refer to notes/cue cards nor have other people in the background giving you prompts, especially since you are doing this at home and have the opportunity to repeat the recording if needed.**

**Keep the total recording to 45 minutes maximum.**

**In fairness to all, each student should record this video independently, without assistance from friends or family.**

**Your Head to Toe recording is due as a Panopto assignment (under the PCM2 AY 2020-2021 Course) under Browse by Friday, September 4, 2020, regardless of the review date scheduled with your facilitator.**

**Do not wait until the last minute, allow for time for unexpected emergencies or technology issues that may arise.**

Grading will be done by your facilitators in real time with you. You will be scheduled to review the video with your facilitator on the set dates. You shall watch it together, discuss technique, fluidity and organization.

(Also, if at any time you are “instructing” the patient, try to demonstrate to your facilitator how you might use some phrases that are courteous and show interest in patient comfort. Example, for the fundoscopic exam: “Next, I will be checking the back of your eye, the retina. I am going to dim the lights a bit and I would like you to look straight ahead. Please focus on that light switch on the opposite wall. My head may get in the way a bit, so just pretend like you are looking through me. Let me know if the light becomes too bright or uncomfortable for you.”)

Facilitators will check off the exam steps completed. (95% of steps must be completed to pass. The steps must be executed correctly with only minor tweaks needed to receive credit). The facilitators’ overall impression of your skill, organization and preparedness also counts toward the grade and may supersede the checklist itself to obtain a passing grade, i.e. just completing all the steps is not an automatic pass.

**We anticipate you will all pass!**

Any student, however, who struggles with technique, preparedness, or other concerns may need to remediate the exam. The course directors may view the videos, change the grade of the facilitator, and have final say on the grade.

***Remember, most of all, we want you to be skilled in the physical examination and eventually be able to master these skills. You will continue to improve upon many of these steps during the next several years, even well into your career as you develop expertise in certain areas of practice. This OSCE is just the first step towards proficiency, particularly during these times of a pandemic.***

*A resource (example) for a telemedicine exam:*

*Note this site is only ONE example if you are doing a Neuro exam. It is beyond the scope of this OSCE, so there is no need to view the entire video, however, it has a few useful tips: See the very beginning to about 4:30 min, up to mental status, for some introductory ideas; then at the 11:03 marker for Cranial nerves VIII through XII.*

<https://americanheadachesociety.org/news/telemedicine-neurologic-examination/>