

PHYSICAL ASSESSMENT FOR PHARMACISTS

At the completion of the course, the student will demonstrate the ability to assess physical abnormalities and monitor drug therapy by satisfactorily performing a physical examination on a simulated patient.

BASIC PRINCIPLES OF COMMUNICATION; BASIC PATIENT INTERVIEWING

The pharmacist shall be able to:

1. Use open-ended questions to gather unbiased, patient-centered information from patients.
2. Use closed-ended questions to clarify and/or confirm information.
3. Demonstrate active-listening skills.
4. Properly introduce self to patient and provide comfortable setting that promotes respect, empathy, and confidentiality in interviewing.
5. Use proper dress, professional mannerism, voice tone, language, "body language," and recording techniques to promote patient communication.
6. Screen systems quickly and redirect interview using directed and closed-ended questions.
7. Demonstrate sensitivity in dealing with sensitive topics such as: death & dying, sexual activity & history, domestic violence, psychiatric illness, alcohol and/or drug abuse.
8. List techniques for dealing with patients with special needs (e.g. geriatrics, pediatrics, inebriated patients, adolescents, hostile patients, schizophrenics, attractive or seductive patients, AIDS patients, patients of different cultures, blind patients).

THE HEALTH HISTORY; MEDICATION HISTORY

The pharmacist shall be able to:

1. Describe the components, content and organization of the health history (e.g. chief complaint, history of present illness, past medical history, etc.).
2. Obtain complete, descriptive data of the history of present illness by use of the "Basic Seven."
3. Perform and record a health history, up to the Review of Systems, on a real or simulated patient.
4. Perform a medication history including a) appropriate medication history documentation, b) drug allergies, c) use of OTC products or herbal therapies, d) an assessment of the patient's compliance with treatment, e) response to therapy, f) presence or lack of adverse reactions, and g) a plan for any indicated interventions or other corrective action, if indicated.

REVIEW OF SYSTEMS; APPROACH TO SYMPTOMS

The pharmacist shall be able to:

1. List appropriate questions to screen for abnormalities of the various body systems.
2. Obtain and record a Review of Systems on a real or simulated patient, using open-ended questions for screening, and directed, closed-ended questions to clarify problems.
3. Obtain complete, descriptive data by use of the "Basic Seven."
4. Interpret patient symptoms and describe in medical terminology that facilitates a differential diagnosis or presentation to a physician for a differential diagnosis.
5. Apply the information obtained from a health history, complete with review of systems, to monitor a real or simulated patient's response to a given drug for a general condition (e.g. pain) and identification of any adverse drug reactions.

DOCUMENTATION & SOAP/SOAR FORMAT

The pharmacist shall be able to:

1. Classify all findings as subjective or objective.
2. Given a patient interview, history, physical findings and laboratory data, decide which findings are most appropriate to include in your note.
3. Write assessments and plans that are accurate, clear, and concise.

PHYSICAL ASSESSMENT TECHNIQUES, VITAL SIGNS

The pharmacist shall be able to:

1. Describe room environment and positioning of the patient during the physical exam.
2. Demonstrate appropriate technique for measuring vital signs in adult patients.
3. List the normal ranges of vital signs in adult patients.

EXAMINATION OF THE HEAD, EYES, EARS, NOSE, THROAT AND SKIN

The pharmacist shall be able to:

1. Name the structures of the head, eye, ears, nose and throat.
2. Examine the head and neck, describing the possible abnormalities using the correct terminology.
3. Know how to palpate the lymph nodes and be familiar with reasons attributable to enlarged lymph nodes.
4. Discuss expected facial/neck findings in inadequately treated hypo- or hyperthyroidism.
5. Demonstrate how to test for visual acuity, visual fields, the external eye structures, and ocular movements, describing normal and possible abnormal findings.

6. Examine extraocular movements, and name the eye muscles and cranial nerves involved in each direction tested.
7. Describe the different parts and appropriate use of the ophthalmoscope and otoscope.
8. Examine papillary response, accommodation, the iris, lacrimal apparatus, and the anterior chamber, explaining possible abnormalities.
9. List drugs that have adverse ocular effects and the techniques for assessing such effects.
10. Perform a fundoscopic exam, describing structures examined.
11. Describe fundoscopic monitoring for glaucoma, increased intraocular pressure, or adverse ocular effects caused by poorly controlled hypertension or diabetes.
12. Examine the ear, describing the structures of the external and inner ear and discuss findings one might find in otitis externa and/or otitis media.
13. Describe how the performance of an ear exam on a child is different from that of an adult.
14. Test hearing, lateralization, and auditory air and bone condition.
15. Examine the nose and mouth, describing structures. Discuss potential abnormalities.
16. List objective terms used to describe the qualities of the hair, skin, and nails.
17. Use appropriate terms to describe the color, shape, size, structure, and distribution of abnormal dermatological lesions.
18. Use appropriate documentation to document the physical findings of the head, eyes, ears, nose, throat, and skin.

EXAMINATION OF THE NERVOUS SYSTEM AND THE MENTAL STATUS EXAM

The pharmacist shall be able to:

1. List the 12 cranial nerves and explain the function of each.
2. Examine the 12 cranial nerves and document findings.
3. Explain the motor and sensory pathways of the nervous system, examine each, and document findings.
4. Identify the dermatomes used in pain assessment.
5. Examine and grade the reflexes and document findings.
6. Examine and grade muscle strength and document findings.
7. Demonstrate techniques for evaluating and reporting level of consciousness, appearance, behavior, orientation, and affect in a patient.
8. Demonstrate techniques for evaluating and reporting speech and language that may be abnormal in a patient with a developmental, neurological, mental or emotional condition.
9. Asks appropriate questions to determine a patient's mood, affect, and attitude as a tool to determine a patient's probability of compliance with treatment, response to antidepressants, and identification of depressive adverse effects to medication (e.g., antihypertensives).

10. Determine a patient's orientation, memory, and higher cognitive functions using appropriate questioning and assessment tools (e.g., proverbs, serial 7 subtraction).
11. Perform a complete mental status exam on a real or simulated patient, and discuss drugs or drug classes, which are monitored by use of elements in the mental status exam.
12. Be able to incorporate your mental status findings into a SOAP format chart note.

EXAMINATION OF THE CARDIOVASCULAR SYSTEM

The student shall be able to:

1. Identify the point of maximal impulse by inspection and palpation.
2. Identify auscultation locations for the 4 heart valves.
3. Using proper auscultation techniques, identify SB_{1B} and SB_{2B} heart sounds as well as common "extra" heart sounds.
4. Describe the grading and attributes of murmurs.
5. Identify the valve and abnormality (stenosis or insufficiency) most likely associated with different murmurs based on location and timing of the murmur.
6. Measure the jugular venous pressure and discuss the significance of elevated pressure.
7. Palpate the following pulses: carotid, radial, ulnar, brachial, dorsalis pedis, posterior tibial, popliteal, and femoral.
8. Examine the lower extremities for edema.
9. Accurately measure blood pressure using a sphygmomanometer.
10. Appropriately document physical findings on a patient record.
11. Using proper interviewing technique, effectively obtain information from a patient regarding his or her disease (history, symptomatology, etc.) and drug history.
12. For a given patient with a given cardiovascular disease, utilize appropriate physical assessment techniques to assess disease severity, monitor drug efficacy and adverse effects.

EXAMINATION OF THE THORAX AND LUNGS

The pharmacist shall be able to:

1. Identify intercostals spaces, structures of the chest and back, and location of the lungs.
2. Inspect the thorax and describe retractions, and abnormalities found in COPD.
3. Percuss the lungs and excursion of the diaphragm in the correct locations.
4. Palpate the lungs and describe fremitus.
5. Auscultate the lungs and describe possible adventitious sounds and associate pathology.
6. Describe abnormal patterns of breathing and their significance.
7. Demonstrate appropriate documentation of pulmonary findings.

EXAMINATION OF THE MUSCULOSKELETAL SYSTEMS, ABDOMEN, RECTUM, ANUS, BREAST, AND PROSTATE

The pharmacist shall be able to:

1. Assess significant joints for range of motion, crepitus, inflammation, and deformities.
2. Examine, grade and report muscle strength.
3. Use appropriate documentation to document physical findings of the musculoskeletal system examination.
4. List the proper sequence of examination techniques for the abdomen.
5. Indicate where the internal organs are located with respect to the abdomen.
6. Auscultate the abdomen for bowel sounds and bruits (aorta, renal, iliac and femoral)
7. Perform light and deep palpation of the abdomen to examine for tenderness, landmarks of the liver or spleen, fluid, and masses.
8. Be able to determine liver size through percussion.
9. Be able to percuss for splenomegaly, and for costovertebral angle tenderness.
10. Describe possible findings in appendicitis and/or acute cholecystitis.
11. On lab model or through description, examine the anus, rectum, breast, and prostate.

EXAMINATION OF THE INFANT, CHILD AND ADOLESCENT

The pharmacist shall be able to:

1. Describe the normal vital signs for an infant and child.
2. Demonstrate special procedures for examining an infant or child.
3. Discuss special considerations in examining or counseling an adolescent.