

## HISTORY TAKING AND PHYSICAL EXAMINATION STATION

### Communication Skills

1. Uses helpful non-verbal communication (looks patient in the eyes, smiles, positions his/herself at eye level with the patient, shakes patient's hand, doesn't cross her/his arms..)
2. Asks open questions (e.g., "Can you describe the pain to me?")
3. Shows interest and reflects back (nods during the conversation, repeats patient's words)
4. Empathises (shows concern for patient, offers support)
5. Uses suitable, lay language (avoids medical terms and complicated words)

### History Taking Skills

1. Introduces him/herself, check's the patient's full name, age
2. Asks the patient why they've come today (presenting complaint).
3. Asks about the history of the presenting complaint (using SOCRATES, if appropriate)
4. Asks about past history, including medication, allergies and reproductive history (in women).
5. Asks about social history and family history.

### Physical Examination Skills

1. Explains what the examination will involve; obtains the patient's consent; offers a chaperone and washes hands before the examination.
2. Assesses the patient's hands (colour, warmth, turgor, nails, capillary return, muscle tone, palmar creases, contractures, pulse)
3. Examines the patient's head and neck
4. Chest wall/abdominal wall (inspection, palpation,
5. Chest wall/abdominal wall (percussion, auscultation)

### For cardio scenario

- Hands: As above plus BP
- Face: upper eyelids for xanthelasma, lower eyelids for pallor; tongue for central cyanosis
- Neck: carotids (palpation and auscultation)
- Chest: inspection for scars, rashes, deformities; palpation of apex and chest wall for tenderness; auscultation of heart sounds and base of lungs
- Peripheral pulses and ankles (should mention but not expected to do)

### For respiratory scenario

- Hands: as above but instead of BP they should count respirations
- Face: eyes for pallor, tap sinuses, check nostrils, tragus, pharynx, tonsils, tongue, floor of mouth
- Neck: lymph nodes, trachea, thyroid
- Chest: inspection for shape of thorax, breathing, scars, rashes; palpation of chest wall for tenderness and symmetrical expansion; percussion (ant. and post.); auscultation ant. and posterior)

### For abdominal scenario

- Hands: as above plus flapping tremor and palmar erythema
- Face: eyes for jaundice, xanthelasma, pallor of lower eyelids; mouth for breath, dentition, tongue, parotid
- Neck: lymph nodes
- Abdomen: inspection for distension, scars, rashes, blood vessels; superficial palpation in a clockwise direction or furthest away from the pain, deep palpation to determine any masses, percussion, auscultation
- Inguinal and rectal examination (say, not do)

### Grading

Maximum of 15 points (5 points communication skills, 5 points history taking, 5 points physical examination)

- 8-9 points = 2
- 10-11 points = 3
- 12-13 points = 4
- 14-15 points = 5