

GUIDELINES FOR ASSESSMENT OF HISTORY-TAKING AND PHYSICAL EXAMINATION SKILLS IN ADULT CARDIOLOGY TRAINING PROGRAMS

Introduction:

Effective 2005 the format of the Royal College examination in Adult Cardiology will change to meet the guidelines set by the Evaluation Committee. The new examination format will eliminate the traditional "long" and "short" case clinical encounters, which will be replaced by a new OSCE examination containing multiple stations. These stations will include structured orals ("case scenarios") and standardized patients. Trainees will be required to perform a satisfactory observed history and physical examination during a patient encounter in the final year of their training. Certification by the Program Director that this has been accomplished is necessary in order for the trainee to be eligible for the examination. This certification forms part of the completed trainee FITER and will be forwarded to the College as part of the FITER document.

Requirements and process:

1. The assessment is to be performed during the final year of training. Trainees who fail to demonstrate a satisfactory level of performance must repeat the procedure until this has been attained.
2. The assessment is to be conducted by a faculty member selected by the Program Director. The Program Director must not perform the assessment personally. Where feasible, Program Directors are encouraged to employ visiting cardiology faculty from other universities/programs for this purpose.
3. The patient chosen should be clinically stable, able to give informed consent and be reasonably representative of a common cardiovascular disease process. The Program Director should either select or approve the patient to be used for the assessment process.
4. The trainee will be allocated up to 45 minutes to obtain the history and perform a physical examination. A further 15-30 minutes will be devoted to case presentation by the trainee, synthesis, analysis and development of initial management plan. The examiner will observe and evaluate the skills demonstrated using the standardized scoring sheet provided.
5. At the completion of the assessment the trainee will be asked to review and sign the evaluation form. The Program Director will retain a copy for the trainee's file and forward the complete original along with the remainder of the completed FITER to the Royal College.

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IN-TRAINING ASSESSMENT OF HISTORY-TAKING and PHYSICAL EXAMINATION
SKILLS
ADULT CARDIOLOGY

TRAINEE'S NAME: _____

PROGRAM/UNIVERSITY: _____

This trainee has completed a standardized observed assessment of history-taking and physical examination skills, including a synthesis and analysis of the patient's clinical problem(s), during the last 12 months. The following is a summary of the trainee's performance with comments on strengths and weaknesses compiled by the Program Director.

OVERALL PERFORMANCE: below expectations meets expectations exceeds expectations

COMMENTS:

Strengths:

Weaknesses:

Date	Name of Program Director	Signature
Date	Name of Trainee	Signature

<p style="text-align: center;"><u>HISTORY-TAKING</u></p> <p>The trainee obtained an appropriate history which included:</p>	*Fails to meet expectations	Meets expectations	Exceeds expectations
• The patient's personal, social and risk factor profile			
• The chief (presenting) complaint			
• A thorough description of the chief complaint			
• Inquiry about symptoms associated with the chief complaint			
• Inquiry about other cardiovascular symptoms (chest pain/discomfort, dyspnea, palpitations, fatigue, dizziness/syncope, claudication, edema)			
• Past cardiovascular history (including rheumatic fever, MI, heart failure and cardiovascular surgery)			
• Relevant other past medical history			
• Relevant family history of cardiovascular problems/disease			
• Relevant review of other organ systems			
• Medication history including allergies			
• Overall history-taking skills			
<p>* Explanatory comments required:</p>			

<p align="center"><u>PHYSICAL EXAMINATION</u></p> <p align="center">The trainee performed an appropriate physical examination which included:</p>	*Fails to meet expectations	Meets expectations	Exceeds expectations
<ul style="list-style-type: none"> Overall general assessment 			
<ul style="list-style-type: none"> Pulse (rate/rhythm/character), BP (both arms, appropriately sized cuff) 			
<ul style="list-style-type: none"> Carotid & peripheral pulses, auscultation for bruits 			
<ul style="list-style-type: none"> JVP height, waveform, hepato-jugular reflux 			
<ul style="list-style-type: none"> Inspection and palpation of the precordium (apex beat, parasternal lift, thrills, abnormal impulses) 			
<ul style="list-style-type: none"> Evaluation of first and second heart sounds (intensity, splitting) and any added sounds (S3 or S4, clicks, opening sounds etc) 			
<ul style="list-style-type: none"> Evaluation of systolic and diastolic murmurs (location, shape, intensity, radiation, pitch) 			
<ul style="list-style-type: none"> Dynamic auscultation (positional change, respiration, Valsalva strain, exercise, isometrics - as appropriate) 			
<ul style="list-style-type: none"> Palpation, percussion and auscultation of chest 			
<ul style="list-style-type: none"> Abdominal examination for bruits, hepato-splenomegaly, aneurysm, ascites 			
<ul style="list-style-type: none"> Examination of the extremities for cyanosis, clubbing, vascular insufficiency, edema 			
<ul style="list-style-type: none"> Overall physical examination skills 			
<p>* Explanatory comments required:</p>			



<p align="center"><u>CASE PRESENTATION, SYNTHESIS and ANALYSIS</u></p> <p align="center">The trainee demonstrated the following:</p>	*Fails to meet expectations	Meets expectations	Exceeds expectations
<ul style="list-style-type: none"> An appropriately lucid, succinct and organized summary of the case 			
<ul style="list-style-type: none"> An assessment of the patient’s functional capacity (NYHA, CCS) 			
<ul style="list-style-type: none"> Accurate interpretation of physical examination findings 			
<ul style="list-style-type: none"> Appropriate emphasis on important positive and negative findings 			
<ul style="list-style-type: none"> An appropriately detailed and prioritized cardiovascular differential diagnosis 			
<ul style="list-style-type: none"> An initial plan for patient management and follow-up 			
<ul style="list-style-type: none"> Overall presentation, synthesis and analysis skills 			
<p>* Explanatory comments required:</p>			

OVERALL PERFORMANCE

Adult Cardiology In-Training History and Physical Examination (HPE) Assessment*.

Name: _____ University: _____

This resident completed the standardized assessment of history-taking, physical examination and synthesis of a patient's problems. A complete record is in the resident's file. The following is a summary of the overall performance with comments on strengths and weaknesses summarized by the program director.

Overall Performance: **Satisfactory**** **Below Expectations**

Strengths: _____

Weaknesses: _____

 (Print Name of Program Director)

 Date

 Program Director's signature

 Resident's signature

**** Passing marks 70%**