



Telemedicine PA Interactive Visit – PEDS Grading Packet

PA /Evaluators Name _____ PA Student Name _____

Date of Visit _____ Time of Visit _____ max 30 minutes

Exam

Technique.....

..... • Please consider both kinesthetic skill and communication of patient

instructions. Comments:

Organization and Flow of

Exam.....

Comments:

Exam Appropriateness.....

- Please note that class discussion taught that heart, lungs and abdomen are always appropriate as precursory exams

Comments:

Student is prepared for competency demonstrated by having all of their required equipment and being ready to go on time for their scheduled Zoom meeting..... yes no

Student is considered competent by virtue of your clinical Assessment for this case. Yes

NO Comments:

Case 6:
5-year-old with rash on face and trunk- Student Scenario

CHARACTER: Parent of 5-year-old child

DRESS: Casual, you are at home

SETTING: At your home, connecting to your physician assistant via telemedicine from your home device to your clinic. Please make certain you provide diagnosis and discuss treatment plan and management.

Affect of child: Child appears ill and irritable

OPENING LINE: "Jason has had a fever of 103 F for 7 days, sore throat and now has a rash". **CHIEF COMPLAINT:** Rash

Description from mother:

"Rash started 4 days ago. Started on his legs and now entire body. It does not seem itchy since he does not scratch at it. It looks like a bunch of red spots all over his body."

Other symptoms:

"He seems tired and irritable. His eyes have been red and watery over the past few days. He hasn't been eating much lately and does not want to do much. Just wants to be held. He is complaining his mouth hurts and I noticed his tongue looks red".

Instructions: Place a check in front of each task that the student accomplished correctly. Do not place a check for any tasks that were forgotten, done partially or incorrectly.

Telemedicine Required Identification/Consent/Documentation:

The student:

_____ 1. Introduce yourself to the patient, confirm your identification and credentials, notes

your affiliation,, and your location.

_____ 2. Confirm the identity of the patient with 2 unique identifiers and note their location and address.

_____ 3. Explain the procedural aspects of the telemedicine visit and that it will be conducted in a similar but modified fashion from a clinic-based visit.

_____ 4. Explain the benefits and drawbacks of completing a virtual visit. Offering a future face to face alternative if the patient desires.

_____ 5. Assess equipment being used by the patient (including hardware/software and home medical equipment and document it.

_____ 6. Explain the cost of the telemedicine visit (for this visit none).

_____ 7. Explain the patients right to privacy and explain HIPAA changes in regard to ZOOM conferencing due to CoVid-19.

_____ 8. Ask the patient if they can see and hear with the technology they are utilizing (before you begin).

_____ 9. Makes any necessary adjustments for technologic issues (coach the patient to move camera when and if needed).

_____ 10. Verbalize that you will document the start time and the end time of the encounter. _____ 11. Obtain verbal consent to proceed with the encounter.

Interpersonal and Communication Skills, Includes the Four Habits.

The student:

_____ 1. Builds the relationship (not rushed, introduction, eye contact, attention, empathy, asks how to address)

_____ 2. Establishes the agenda (elicits concerns, agrees upon agenda)

_____ 3. Facilitates understanding (speaks clearly, avoids medical jargon, high priority information)

_____ 4. Summarize and confirm understanding (summarizes plan, elicits questions, uses teach back)

_____ 5. Showed listening body language (leaning forward, looking at patient) _____ 6. Used empathetic techniques (repeat feelings, legitimize

concerns)



_____7. Appropriately admitted uncertainty, and, if applicable, offered to get more information for patient

_____8. Voices understanding of patient's context (cost, transportation)

Case 6- 5-year-old with rash on face and trunk

Actor Script

CHARACTER: Parent of 4-year-old child

DRESS: Casual, you are at home

SETTING: At your home, connecting to your physician assistant via telemedicine from your home device to your clinic.

Affect of child: Child appears ill and irritable

OPENING LINE: "Jason has had a fever of 103 F for 7 days, sore throat and now has a rash". **CHIEF COMPLAINT:** Rash

Description from mother:

"Rash started 4 days ago. Started on his legs and now entire body. It does not seem itching since he does not scratch at it. It looks like a bunch of red spots all over his body."

Other symptoms:

"He seems tired and irritable. His eyes have been red and watery over the past few days. He hasn't been eating much lately and wants to lay around most of the day. He just wants to be held. He is complaining his mouth hurts and I noticed his tongue looks red".

PAST MEDICAL HISTORY: Past medical history is unremarkable. Diagnosed with acute otitis media at 18 months of age, resolved appropriately with oral antibiotics. Not past surgeries. Growth and development are normal, and immunizations are current. Flu vaccine, October 2019.

FAMILY HISTORY

Maternal grandfather with type 2 diabetes
Arthritis in paternal grandfather's family

SOCIAL HISTORY

Lives with parents and sister

No recent travel

No animals or smokers at home

Attends kindergarten -prior to stay at home orders

MEDS: Multi- vitamin

ALLERGIES: None

Performs General Inspection: Show the student the picture.

Face:



Extremities



Trunk



Physical Exam:

DDx Must include –

Modified Vital Signs based on patient equipment:

Obtains:

Physical Exam:

Temperature: 103.5.F (temporal)

Heart rate: 150 bpm

Respiratory rate: 24 breaths/minute

Height: 43 inches

Weight: 42 lbs.



_____ O2 sat if equipment is available and appropriate *NA*

Visual Observation Findings

Assess Cognitive status using a screen:

_____ CAOx5, MOCA, ETC. (wnl)

On General inspection: (Child frequently bending over holding stomach knees bent), the home is clean

General Appearance: appears ill and irritable

Modified HEENT Exam: (see below)

Eye: conjunctival injection bilaterally; non-purulent drainage, pupils appear equal in size (student will have picture)

Ear: no external abnormality observed bilaterally

Nose: no external abnormality observed

Mouth\Throat: red, cracked lips. Tongue is erythematous with prominent papillae. **Neck:** full ROM without discomfort. Palpation of the neck reveals a single enlarged right anterior cervical lymph node. It is mobile, non-fluctuant, and nontender

Asks patient to assess mucous membranes

_____ *Moistness of mucus membranes appreciated.*

Cardiopulmonary Exam: (respiration non-labored without any retractions or nasal flaring)

_____ Auscultates heart and lungs if equipment is available. If not, “asks the patient to take a deep breath in and out” while observing and listening.

Modified Abdominal Exam: (WNL)

___ **Auscultation (if available)**

___ **light and deep palpation**

Asks patient to listen to abdominal sounds, reports gurgling associated with hunger.

Asks patient to press on abdomen- patient able to do so without guarding and reports some relief with compression.

(Use parent to assist if possible). Student needs to instruct the Patient and Parent through

the maneuvers.

_____ Unable to jump or stand on one foot, unable to hop causes pain.

_____ Contour normal

_____ Hyperactive bowel sounds can be heard audibly if listening. Can instruct with stethoscope if someone has one.

_____ Instruct the parent through palpation. + RLQ tenderness, + rebound

Neuromuscular Exam: **(erythema and swelling of hands and feet. No apparent pain in the joints.**

Full ROM Neurologic: no focal defects noted)

Skin: **(diffuse erythematous macular rash (student will have pictures) – also student should ask parent to press on rash to see if blanches)**

Management: Kawasaki

How would you manage this patient?

Explain your differential diagnosis to the parent and your plan to have the patient evaluated further.

- _____ 1. Provides possible diagnosis of Kawasaki Disease and why Jason fits the criteria for this. Explains need for patient to go to Emergency Room immediately. He will need to be admitted for further monitoring.
- _____ 2. Explains what will be monitored. An echocardiogram will be needed. Cardiology will need to be consulted. Vasculitis has risk of morbidity and treatment is needed to minimize the risk. Complications can include aseptic meningitis, coronary artery aneurysm, vasculitis, liver dysfunction, arthritis.
- _____ 3. The providers at the hospital will explain the treatment. However, student can discuss the basics. Typically, IVIG is given over 8-12 hours. Children will typically stay for at least 24 hours after it is given to make sure a fever does not return and other symptoms are improving. Additional treatments might be needed if Jason does not respond to IVIG, the fever returns, or abnormal findings are noted on the first echocardiogram.
- _____ 4. They may decide to provide aspirin but this is only given at the discretion of the hospital team as aspirin can cause Reye Syndrome in young children.
- _____ 5. Follow up care- you will need to follow up with specialists you see in the hospital to make sure Jason is improving and to check for the development of coronary aneurysms. Jason may seem tired or “off” for several weeks. Rest is very important. Peeling of skin of the hands and feet are expected and is not cause for alarm.

Advise the patient that: (Circle any noted)

1. _____ You recommend calling 911 with transport to the ER. If family declines 911, document it, and explain that it is against medical advice.
2. _____ Explain the diagnosis and your concerns.
3. _____ Explain that diagnosis requires further investigation.
4. _____ **Gives ER precautions:** The patient should not be left alone and must go to a hospital at once because they are experiencing: signs and symptoms of acute systemic infection.

- The PA student can offer to assist by calling 911 and giving report to first

responders. • Can assist by calling ahead to the closest medical facility for

report.

5. _____ Plan for F/u next telemedicine visit or clinic visit scheduled

for: _____ At which time, post-surgical management and transitions of care



will be discussed. 6. _____ Notes Ending time of Call

7. _____ Mentions post-call survey of both provider and patient.