**Conference Room Cheat Sheet**

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| **Checklist Item** | **Definition and Examples** |
| Time patient discussion/presentation begins |  |
| New patient admission? | Generally identifiable by complete history and physical being presented |
| The patient’s physical examination was discussed or presented  | Exclude vital signs or general comments like “physical exam was unremarkable/unchanged.”Include general appearance or observations. Examples:1. “Patient was overall very lethargic and minimally arousable.”
2. “The patient was not using any accessory muscles to breath.”
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| The teacher asked a **clarifying question** about the learner’s physical examination. | Questions may include questions on omitted elements, relevance of findings, or any other question by teacher that forces learner to expound on reported physical exam. |
| If so, 🡪 | Teacher asks about **technique(s)** used by learner. | Questions should be probing learner about how they performed the exam. Examples:1. “Did you lay the patient in the lateral decubitus position?”
2. “Were you using your reflex hammer to get the reflexes?”
3. “How do you check for tactile fremitus?”
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| If so, 🡪 | Teacher asks learner for an **interpretation** of the finding(s). | Questions should focus on what the physical finding means. Examples:1. “Why do you think his lungs are dull to percussion at both bases?”
2. “What does an S3 signify?”
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| The team discussed the **clinical significance** of physical examination findings in making patient care decisions. | Patient care decisions include the following:1. Medication changes
2. Disposition planning
3. Follow-up testing or imaging

To get credit, the team should directly relate the physical exam findings to the decision. Examples:1. “The patient’s JVD was elevated today, so I increased the dose of his furosemide.”
2. “She isn’t wheezing, so I think we can stop the nebulizers and send him home.”
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| The team noted an important physical finding that they **wished to** **subsequently verify** at the bedside. | Give credit if learner asks teacher for corroboration. Examples:1. “I thought I heard some crackles in the left base. Can you listen too?”
2. “Let’s make sure we re-assess the wound with the bandage off today.”
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| Planned patient discharge? | Give credit if team at least believes that discharge will occur today. |
| Time patient discussion/presentation ends |  |