**PRACTICAL SKILL ASSESSMENT SHEET (DOPS)**

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| **Discipline/module** | **Simulation course "Emergency Care"** |
| **Specialty**  | **№ of the group**  |
| **Student’s name**  | **Date of assessment** |
| **Name of the practical skill** | **Diagnosis and emergency care in acute cerebrovascular accident**  |

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| **№** | **Steps** | **Algorithm for actions** |
|
| 1  | Established contact with the patient. | Greeted the patient, introduced him/herself, asked patient’s name and established eye contact.  |
| 2  | Clarified the patient's complaints. | Asked about patient’s complaints: - general mental symptoms (headache, nausea, vomiting, dizziness, heart palpitations, consciousness disorders, etc.)- focal neurological symptoms (slurred speech, face numbness, visual impairment, (hemianopsia, diplopia), impaired motor and sensitive function in the limbs.)  |
| 3  | Set the time (hours and minutes) of the symptoms appearance. | Set the time (hours and minutes) of the symptoms appearance or last time, when patient had no symptoms.  |
| 4  | Clarified the anamnesis morbi. | Clarified the presence of paroxysmal disorders of previously suffered stroke, arterial hypertension, diabetes mellitus, CHD, heart rate disturbance ( presence of atrial fibrillation); stenosis or occlusive damage of the main cerebral vessels, diseases of the blood, connective tissue.  |
| 5  | Clarified the anamnesis vitae.  | Clarified heredity, suffered injuries, surgical interventions, bad habits.  |
| 6  | Conducted and evaluated the FAS- test.  | **F - Face Drooping**Does one side of the face droop or is it numb? Ask the patient to smile. **A - Arm Weakness**Is one arm weak or numb? Ask the patient to raise both arms. Does one arm drift downward? **S - Speech Difficulty**Is speech slurred, are they unable to speak, or are they hard to understand? Ask the patient to repeat a simple sentence like, “The sky is blue.” Is the sentence repeated correctly?  |
| 7  | Measured the arterial pulse on both hands. | Measured the arterial pulse on both hands, following the rules and technique of measuring arterial pulse. |
| 8.  | Measured the blood pressure on both hands.  | Measured the blood pressure on both hands, [alternately](https://context.reverso.net/%D0%BF%D0%B5%D1%80%D0%B5%D0%B2%D0%BE%D0%B4/%D0%B0%D0%BD%D0%B3%D0%BB%D0%B8%D0%B9%D1%81%D0%BA%D0%B8%D0%B9-%D1%80%D1%83%D1%81%D1%81%D0%BA%D0%B8%D0%B9/alternately), following the rules and technique of measuring BP.  |
| 9  | Determined the peripheral blood glucose.  | 1. Put on sterile gloves. 2. Treated the patient’s finger with an antiseptic ( 70% ethyl alcohol solution). 3. Installed a sterile lancet. 4. Pricked the finger pad at a 90-degree angle.5. Applied a drop of the blood to the test strip. 6. Turned on glucose meter and applied test strip.  |
| 10  | Performed pulse oximetry. | Put a pulse oximeter on the patient’s finger, determined the SaO2 level.  |
| 11 | Measured body temperature. | Placed the tip of the thermometer in the patient’s armpit. |
| 12 | Provided oxygen therapy according to the indications.  | At SaO2, less than 95% oxygen therapy with an initial oxygen supply rate of 2-4 l/min.  |
| 13 | Provided venous access.  | Provided venous access.  |
| 14 | Made a preliminary diagnosis | Made and explained preliminary diagnosis.  |
| 15 | Carried out control and correction of blood pressure.  | Captopril 6.25- 12.5 mg under the tongue, Metoprolol 5-10 mg, Alpha-blocker: Urapidil 10 or 12.5 mg separated doses by intravenous doses in a lying position under BP control every 5 min in stages intravenously. Reduce BP by not more than 15-20% of the initial values. Do not reduce less than 180/100 mm.rt.  |
| 16 | Notified the hospital | Called to the Emergency Room about the arrival of the patient with a possible stroke, indicating the time ( hours and minutes ) of the symptoms onset.  |
| 17 | Determined the patient's further route  | Immediate delivery of the patient to the nearest multidisciplinary hospital with a specialized department for the treatment of stroke (stroke center). In the absence of a specialized department, immediate delivery to the nearest of the most suitable medical organizations.  |
| 18 | Carried out the transportation of the patient. | Strictly on a stretcher in a lying position with a raised head end up to 30 degrees.  |
| 19 | Provided monitoring and control of blood pressure, heart rate, oxygen saturation.  | Provided monitoring and control of blood pressure, heart rate, oxygen saturation.  |
| 20 | Used the appropriate nonverbal behavior and finished an interview.  | Used posture, tone of voice, facial expressions, gestures, tactile support. Explained the patient’s route and said goodbye.  |
|  | TOTAL: |  |

Note:

If the intern completes all steps, the score is 100 points; if the sequence and correctness of the skill are not accurate, the intern will retake the skill, up to a maximum of 3 retakes.

A REPEAT of the skill is scored 80 points and a tertiary is scored 60 points.

Name and surname of the clinical tutor Signed \_\_\_\_\_\_\_\_\_\_\_\_

Trainee's name and surname Signed\_\_\_\_\_\_\_\_\_\_\_\_