



Telemedicine PA Interactive Visit – Internal Medicine/Family Medicine- Case #12

PA /Evaluators Name _____ PA Student Name _____

Date of Visit _____ Time of Visit _____ max 30 minutes

Differential Diagnosis..... _____

- Must name a minimum of 3 possible diagnoses and then note #1/"working" diagnosis

- 1.
- 2.
- 3.

Comments:

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:

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 incorrect.

Telemedicine Required Identification/Consent/Documentation:

The student:

- _____ 1. Introduces themselves to the patient, confirms their identification and credentials, notes their affiliation (Duquesne University), and their location.
- _____ 2. Confirms the identity of the patient with 2 unique identifiers and notes their location and address.
- _____ 3. Explains 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. Explains the benefits and drawbacks of completing a virtual visit. Offers an alternative face to face visit as a future time if the patient desires.
- _____ 5. Assesses equipment being used by the patient (including hardware/software and home medical equipment and documents it.
- _____ 6. Explains the cost of the telemedicine visit.
- _____ 7. Explains that they have a right to privacy and explains HIPPA changes in regard to ZOOM conferencing.
- _____ 8. Asked the patient if he could see and hear with the technology (before asked by the patient).
- _____ 9. Makes any necessary adjustments for technologic issues (coaches the patient to move camera if needed).
- _____ 10. Makes any necessary adjustments for technologic issues (coaches the patient to move camera if needed).
- _____ 11. Verbalizes that they will document the start time and the end time of the encounter.
- _____ 12. Obtains verbal consent to proceed with the encounter.

Interpersonal and Communication Skills

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. Summarizes and confirms understanding (summarizes plan, elicits questions, uses teach back)
- _____ 5. Shows listening body language (leaning forward, looking at patient)
- _____ 6. Uses empathetic techniques (repeat feelings, legitimize concerns)
- _____ 7. Appropriately admits uncertainty, and, if applicable, offers to get more information for patient
- _____ 8. Voices understanding of patient's context (cost, transportation)

Medical knowledge.

The student:

- _____ 15. If applicable- Avoids prescribing antibiotics for the patient's viral symptoms and provides a clear accurate explanation of why antibiotics are not recommended
- _____ 16. Got to the correct diagnosis
- _____ 17. Accessed medical history

Use of Technology.

The student

- _____ 18 . Remained patient-centered despite distractions (Keeps the focus of the visit on the patient rather than the technology)
- _____ 19. Was able to use technology to properly get a patient history and physical exam (prompt patient to move forward, or move screen for better visualization)

Comments for the student:

Case 12 – IM/FM

Student Scenario

You are doing a telemedicine consult. Your clinic implemented telemedicine to better serve patients without consistent transportation as well as to decrease non-emergent/urgent care office visits. You have been asked to complete a telemedicine encounter on this patient to assess her medical status and to develop a plan of care for the patient.

Scenario – Ms Moondaner: A Native American woman, 45 years of age, who is 5 feet 4 inches tall and weighs 205 pounds, with a body mass index of 35.3 kg/m². She was seen previously by her PCP has been concerned because of her family history of type 2 diabetes, heart disease, and stroke. A diagnosis of type 2 diabetes was previously confirmed by blood work.

PMH- hypertension and hyperlipidemia.

Her blood work reveals an HbA_{1c} of 8.0% (estimated average glucose: 183 mg/dL) and a fasting blood glucose level of 173 mg/dL.

She is reluctant to take medications and more interested in alternative therapies.

Meds- She is taking metformin 500mg once daily and recently her provider has added a sulfonylurea. to the patient's therapy to increase insulin production. She is taking glipizide 2.5 mg twice per day.

Today you are asked to contact the patient regarding treatment changes to eliminate the need to make an office visit during the time of the pandemic.

CC: Today

She reports she was working out in the yard and became dizzy, shaky, sweaty, and confused.

Work through the case to reach a diagnosis and appropriately manage the patient.

Actor Script Case 12

The Scenario:

CHARACTER: Ms. Moondancer, 45 y/o

DRESS: Casual, you are at home

SETTING: At your home, connecting to your provider (student) via telemedicine from your home device to their home device.

Affect: You feel a bit worried about an episode of dizziness you are currently experiencing.

Presentation: Feeling dizzy.

CHIEF COMPLAINT:

“I feel a little dizzy..”

HPI:

She has had these dizzy episodes several times over the past two weeks.

She gets her test kit out and is fumbling with the box. After having difficulty setting up the glucometer, you report that you have readings from the last week. Share with the student.

Date	am	pm
4/1/20	80	90
4/2/20	65	80
4/3/20	60	110
4/4/20	75	80
4/5/20	70	80
4/6/20	75	100

- **This morning you ate: two scrambled eggs, one slice of whole-wheat toast with butter, half of a banana, 8 ounces of fat-free milk, and a cup of tea. This was approximately 5 hours ago.**
- **You ask about any use of holistic or herbal remedies. She becomes quiet and is hesitant to answer, but finally reveals she has continued to take her herbal supplements even though**

she has been told to stop them. The patient indicates she did not share this with her primary care provider because she did not feel it was important.

- **You continue to feel “dizzy”.** You are unable to take your blood sugar. The student should instruct you to get something to eat that is a carbohydrate and a protein. They should explain the 15:15 rule and should continue to monitor your status throughout the visit.

Patient consumes 6 ounces of orange juice; the blood glucose is rechecked in 15 minutes. The result is 87 mg/dL. On recheck in 15 minutes your sugar is now 100 if you are able to check it. If you are unable to check it, it would not be irregular for the student to consider calling 911 to have an immediate assessment by first responders.

1. _____How often have you been feeling dizzy?

Well at least a couple of times this week. It is usually around mid-afternoon.

2. _____Did you check your glucose this am?

Well, no.... my daughter usually helps me. I have a hard time sticking my own finger and she helps me. But she has been writing them down.

3. _____What have you done when you were feeling dizzy?

Well, if my daughter is here, she will make me a sandwich and gives me something to drink. She says I shouldn't work outside in the heat. I tell her it is “just my hot flashes”.

4. _____Have you lost consciousness or fallen when you were dizzy?

Oh my heavens no! I just come inside and sit down for a spell.

5. _____What is your diet normally?

Well I eat pretty good. But you know if I get busy in the day out in the yard, then I don't like to stop and come in. If I sit down, then I usually don't want to go back outside. I am one of those people who just has to finish a task until I am through... Are you that way?

6. _____Have you been taking your medications as prescribed?

Oh yes, I try to always follow the instructions that I am given..I want to do my best.

7. _____ Does the patient have any weakness or sensory disturbance when you are having a dizzy spell?

No, I just start to feel “shakey” and like I need to eat in a hurry...

8. _____ Does the patient have any balance problems?

I haven’t had any balance trouble normally I am steady on my feet!

9. _____ Is the patient orientated in time, place and person?

They should ask the questions.

You then answer “*I’ve not felt confused at any point*”.

10. _____ Is there any history of head trauma?

I haven’t experienced any trauma.

11. _____ Is there any history of loss of consciousness?

I haven’t had any loss of consciousness.

12. _____ Is there any recent history of illness?

I haven’t had any infections recently, well I had a UTI about a week ago... does that matter?

13. _____ Has the patient ever experienced anything similar in the past?

NO, I’ve never experienced anything like this before!

Past medical history

- _____ Previous similar episodes (**only since I started my new medications, glipizide**)
- _____ Any recent infections (**yes, I had a UTI treated with bactrim x3 d**)
- _____ History of stroke or transient ischemic attack
- _____ Neurological conditions
- _____ Thromboembolic disease
- _____ Cardiovascular risk factors:
- _____ Hypertension (**Pt has a hx of HTN- lisinopril**)

- _____ Diabetes (**well, I have had prediabetes for about 2 years, then they told me to start medication. I have been taking metformin for about 6 months, then I was started on glipizide).**)
- _____ Hypercholesterolemia (yes, simvastatin)
- _____ Smoking

I take a tablet for high cholesterol and blood pressure; well I am supposed to... Sometimes I forget those.

Family history

- _____ Stroke (**Yes, the patient has a positive hx of stroke on her mother's side.**)
- _____ DM (**yes, my mother and father both had sugar issues.**)
- _____ Other neurological conditions

Drug history

- _____ Antiplatelets or anticoagulants
- _____ Other regular medication
- _____ Recreational drug use
- _____ ETOH
- _____ **She is taking cinnamon, fenugreek, and bitter melon daily.**

I've never taken any recreational drugs and I don't smoke or drink. Well I have been taking my supplements for years. I didn't want to stop those. Maybe my sugar will get worse. Does that matter?

Physical Exam:

Show picture to student:



Modified Vital Signs based on patient equipment:

Obtains:

- _____ Temperature (*WNL*)
- _____ Pulse (*95*)
- _____ Respiratory rate (*WNL*)
- _____ Blood pressure (*139/72*)
- _____ Pain (*0/10*)
- _____ O2 sat if equipment is available and appropriate *NA*

Performs General Inspection: Show the student the picture. (*WNL*)

Assess Cognitive status using a screen:

- _____ CAOx5, MOCA, ETC.

Modified HEENT Exam:

Eyes: (*WNL*)

- _____ Inspects pupils for size and shape
- _____ Tests pupil reflexes and accommodation if an assistant is available (There appears to be a visual field defect on the right eye)
- _____ Performs extra-ocular movement testing
- _____ Assesses for nystagmus- HINTS exam

ENT: (*WNL*)

- _____ Inspects external ears for deformities if able
- _____ Can they hear normal speech?
- _____ Ear canal /TMs if patient has equipment available Tytocare or similar.
- _____ Inspects external nose and internal nares.
- _____ Inspects oral mucosa and posterior pharynx with camera if available
- _____ Assesses speech, "You can't teach an old dog new tricks".

Cardiopulmonary Exam:

_____ Auscultates heart and lungs if equipment is available. for rate, rhythm and heart sounds

Asks the patient to take a big breath in and out at a minimum.

Neuromuscular Exam: (WNL)

_____ Completes gross assessment of cranial nerves

_____ Assesses motor strength in UE and LE bilaterally by instructing the patient through routine maneuvers.

_____ Elicits DTRs in UE and LE bilaterally if assisted by a caregiver.

_____ Assesses ROMs and point-to-point testing

_____ Assesses for pronator drift, stretch arms out with palms up and eyes closed

_____ Performs Romberg test

_____ Assesses gait by instruction but only if the patient can do it safely.

_____ Can test position sense, discriminative sense, and/or vibratory sense if tools and an assistant are available.

_____ **Assesses sensation to light touch and simulates a filament test with a toothpick in the LE at a minimum.**

DX and Management: Hypoglycemia in context of DM Type 2

This patient is at risk for ongoing hypoglycemia and needs to have dizziness addressed with urgency during the encounter. See above. Instructions to consume a carbohydrate and protein with ongoing monitoring should have been undertaken.



A careful medical examination has been carried out and there appears to be signs which are concerning that she/he may have been having episodes of hypoglycemia.

How would you manage this patient?

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

Advise the patient that: (Circle any noted)

1. _____ You recommend calling 911 with transport to the ER if symptoms do not resolve or return.
2. _____ Explain the diagnosis and your concern over hypoglycemia, other differentials.
3. _____ Explain the dangers of hypoglycemia up to and including death.
4. _____ Explain the impact of supplements on blood glucose levels. Instruct holding the supplements until further notice. Or works with the patient on a suitable alternate intervention.
5. _____ Review the supplements the patient is taking and their mechanism of action if known.
6. _____ Review the steps for using a home glucometer and continuing to obtain values and log them twice daily.
7. _____ Determine the plan for follow-up. How will you handle the pharmaceutical medications? What is your plan for treatment? Continue as directed? Decrease dose of one or both medications? Continue current management for 1 week without using supplements and assuring a mid-afternoon snack? Will you order glucose tablets? Justify the decision making to the patient.

8. Gives ER precautions:

- The student should offer ER precautions in the event of similar symptoms.

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

10. _____ Notes Ending time of Call

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