**Physical Assessment of the Adult**

National Midwifery Institute, Inc.

Study Group Coursework

*Syllabus*

Description:

This module explores the initial examination of a pregnant person. It includes recommended reading materials in print and online, and asks students to complete short answer questions for assessment, long answer questions for deeper reflection, and learning activities/projects to deepen your hands-on direct application of key concepts.

Learning Objectives:

* In the greater context of health care, understand how a midwife can serve clients by performing various physical assessments.
* Identify the steps to basic physical assessment for well-person, prenatal, postpartum, pelvic and breast/chest exams.
* Identify the examination tools needed for providing physical exams.
* Become familiar with normal findings and abnormal findings.
* Practice the physical assessment skills.
* Practice charting your physical assessments.
* Review community and consultation resources for follow up on abnormal findings.
* Review the Well Person Care module.
* Draft practice guidelines for physical assessment in your own practice.
* Demonstrate sensitive, understanding, and empowering counseling for clients and respectful, consensual touch.

Learning Activities:

* Research and read appropriate study sources, seeking out additional study sources where needed
* Complete short answer questions in attached module document for assessment
* Complete long answer questions for deeper reflection in attached module document for assessment
* Complete learning activities listed in attached module document for assessment
  + Create or adapt physical assessment forms
  + Perform and chart a well-person or prenatal physical assessment and chart it
  + Draft practice guidelines for physical assessments
* Submit work to Study Group Course Coordinator
* Reflect on feedback from Study Group Course Coordinator and re-submit work as needed

Study Sources (print):

The following texts are recommended for completion of this module. Use them to cross reference and build a more comprehensive understanding.

Using keywords from the Learning Objectives, search the index. Read those pages listed, and read the chapter in which they are found. Establish a context for the information so that you understand how other topics are related. In addition, read the chapter headings in the Table of Contents, and flip through each text to familiarize yourself with the content of chapters. As you work through Study Group modules, you will eventually read each text in its entirety.

* Holistic Midwifery, Vol. I, II, Frye
* Varney’s Midwifery
* Bates’ Guide to Physical Examination and History Taking, Bickley
* Skills for Midwifery Practice, Johnson, Taylor
* Practical Skills Guide To Midwifery, Evans
* Heart and Hands, Davis

Study Sources (online):

See NMI website Physical Assessment of the Adult module web resources section for current online study sources for this module.

Related Modules:

* Labwork and Other Clinical Assessments
* Gender and Sexuality
* Herpes
* Renal System
* First Stage of Labor
* Second Stage of Labor
* UTI
* Postpartum Care
* Lifelong Reproductive Healthcare
* Breastfeeding/Chestfeeding
* Physical, Sexual, and Other Abuse

Submitting Module for Assessment:

Study Group modules are accepted electronically in PDF format *only*. We encourage you to submit modules as you complete them throughout each quarter of enrollment.

Please e-mail your completed Study Group module to:

Study Group Course Work Instructor nmistudygroup@nationalmidwiferyinstitute.com

Once your module has been e-mailed to us, you will receive an e-mail confirmation that we have received it. Study Group modules are reviewed and returned in digital format as PDF documents. Modules can take up to 1 month from submission to be reviewed and returned to you. We will return your module as an e-mail attachment. Each module includes an Evaluation Sheet at the end of the pdf. The module’s page on the student portal also includes a link to a fillable online module evaluation sheet. Please take the time to fill out the module evaluation sheet and return it to us for each module, it helps us to improve our course work.

Please follow these formatting guidelines when submitting modules:

* Your first initial and last name in title of PDF, along with name of module. Example: “ERyanFirstStage.pdf”
* Title of module on the document’s front page
* Your name on the document’s front page
* Provide the text of each question, followed by a blank line and then your thoughtful answer (without the question, you have commentary without context)
* Blank line between the answer for a question and the next question: question, blank line, answer, blank line, question, blank line, answer…
* Please leave margin space for our comments!
* Don’t use script or cursive writing style text
* Font size not smaller than 12
* Credit sources of direct quotes

Completion Requirements and Feedback:

In order to complete this module for graduation purposes from National Midwifery Institute you must review all resources, complete the attached short answer questions for assessment, long answer questions for deeper reflection, and learning activities/projects, and submit them as detailed above. Upon return to you, your coursework may have feedback or ask for additional information or exploration on certain topics. Your work will be evaluated in the following Rubric (pasted below). You must achieve a minimum score of **7.5** in order to move on to your next module, though we encourage all students to strive for a **10.**

|  | **Level 1**  **(0 Points)**  **Not Adequate** | **Level 2**  **(1 Point) Developing Adequacy** | **Level 3**  **(1.5 points)**  **Meets Basic Expectations** | **Level 3**  **(2 points) Exceeds Expectations** | **Student Score** |
| --- | --- | --- | --- | --- | --- |
| **Completion of module prompts and elements** | -Module not completed | -Major Elements of module are missing | -All aspects of module elements present, with some minor questions unanswered or missing | -All aspects of module elements present and answered completely |  |
| **Demonstrates Comprehension of module content and concepts** | - Lack of comprehension | - Responses are unclear and do not reflect basic comprehension of module concepts | - Responses are clear and reflect basic comprehension of module content and concepts | - Responses are clear, well written, and reflect in-depth comprehension of module content and concepts. Added subpoints and additional reflections demonstrate a deeper knowledge and curiosity. |  |
| **Analysis** | - Key terms not defined | -Inaccurate definitions of key items  -Limited connections made between evidence, subtopics and clinical experience | -Accurate definitions of key items  -Connections made between evidence, subtopics and clinical experience -Incorporation of original ideas and incorporates some clinical experience  in responses where possible | - Accurate definitions of key items  -Strong connections made between evidence, subtopics and clinical experience |  |
| **Evidence** | - No research evidence used | -Research not used  -Research not clearly connected to questions asked in module | -Research is present but limited -Research presented is weak or not relevant to communities served by midwives | -Research is abundant -Research is compelling and relevant to communities served by midwives |  |
| **Engagement with Learning Resources** | -Evident study sources were not utilized | -Evident study sources were partially utilized | -Evident that study sources were fully utilized | -Evident that study sources were fully utilized and independent research was undertaken -Full incorporation of original ideas, personal analysis and incorporates relevant clinical experience in all areas possible |  |

Skills

Following are excerpts from the NMI forms for assessment of midwifery skills, which include all skills identified and required by NARM. Review the following skills and consider how they each relate to the content of this module. If you are currently working with a preceptor, take this opportunity to focus on these areas. During Supervised Primary Care you will formally evaluate these skills together using the NMI forms *Form 52 - Assessment of Student’s Midwifery Skills* and *Form 53 - Student Self-Assessment of Midwifery Skills.*

2. General Health care Skills:

D. Demonstrates the use of instruments and equipment including:

3. Blood pressure cuff

14. Newborn and adult scale

20. Stethoscope

22. Tape measure

23. Thermometer

K. Administers the following pharmacologic (prescriptive) agents:

4. Prescriptive ophthalmic prophylaxis ointment (e.g., erythromycin)

3. Maternal Health Assessment:

B. Performs an initial history and physical examination including vital signs

1. General appearance

2. Baseline weight and height

3. Vital signs

4. HEENT (Head, eyes, ears, nose and throat) including:

a) Hair and scalp,

b)Eyes, pupils, whites, conjunctiva,

c) The thyroid by palpation,

d) Enlarged lymph glands of neck, chest and under arms,

e) mouth, teeth, mucous membrane, tongue

5. Breast condition, by examination:

a) evaluates mother’s knowledge of self-breast exam techniques

b) implications for breastfeeding

6. Torso, extremities for bruising, abrasions, moles, unusual growths

7. Baseline reflexes

8. Heart and lungs

9. The abdomen, by palpation and observation for scars

10. Kidney pain (CVAT)

11. The spine

12. Pelvic landmarks 13. Pelvic measurements

14. The condition of the uterus, ovaries and cervix (by speculum)

a) Performs a Papanicolaou (Pap) test

b) Obtains gyn cultures

15. The size of the uterus and fetal age (by bimanual exam), the condition

of the vulva, vagina, cervix, and anus

C. Estimates due date based upon:

1. Date of mother’s last menstrual period

4. Changes in mucus condition or ovulation history

D. Assesses general condition of mother by:

1. Assessing bladder distention

3. Assessing lochia

5. Assessing condition of vagina, cervix and perineum for:

a) cystocele,

b) rectocele,

c) hematoma,

d) tears,

e) lacerations,

f) hemorrhoids,

g) bruising

7. Providing instruction for care and treatment of the perineum

K. Recognizes and responds to potential prenatal complications by:

9. Assessing and evaluating a post-date pregnancy by monitoring

/assessing:

a) The need for consultation,

b) Fetal movement, growth, and heart tone variability,

c) Estimated due date calculation,

d) Previous birth patterns,

e) Amniotic fluid volume,

f) Maternal tracking of fetal movements,

g) Referral for ultrasound,

h) Referral for non-stress test

i) Referral for contraction stress test,

j) Referral and collaboration for biophysical profile

4. Well-Women Care

B. Performs a general physical examination including assessment of:

1. General appearance,

2. General symptoms,

3. Skin condition,

4. Torso, extremities for bruising, abrasions, moles, unusual growths,

5. HEENT (head, eyes, ears, nose, throat) including:

a)hair and scalp,

b) eyes:pupils, whites, conjunctiva,

c)thyroid by palpation,

d)lymph glands of neck, chest and under arms,

e)mouth, teeth, mucous membranes and tongue,

6. Weight and height,

7. vital signs,

8. breast condition by examination,

9. heart and lungs (auscultate),

10. Abdomen (palpate and auscultate),

11. (CVAT) Costovertebral Angle Tenderness,

12. Deep tendon reflexes of the knee,

13. lower extremities for varicosities,

14. extremities for edema

D. Provides gynecological examination including assessment of:

1. External genitalia

2. The cervix by speculum (observe)

**Physical Assessment of the Adult**

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*Short Answer Questions*

Short Answer Questions:

1. Why do midwives perform physical assessments with their clients?

2. List the components of a physical assessment in the following circumstances:

1. a client seeing you for a well-person exam/visit
2. a pregnant client initial physical exam
3. a pregnant client with a routine visit in the first trimester
4. a pregnant client with a routine visit in the second trimester
5. a pregnant client with a routine visit in the third trimester
6. a postpartum client

3. What are some ways you establish trust and rapport with clients before undertaking physical assessments?

4. Why is it important to take a verbal health history prior to beginning the exam?

5. Given the knowledge that many of your clients will have experienced physical, sexual, medical, and/or obstetrical traumas or assault at some point in their life, what measures do you as a midwife take to help your client feel comfortable and in control during physical assessments? What specific phrasing do you use and not use for different components of the exam? Do you ask before you touch clients?

6. Do you give your clients verbal and non-verbal signals to pause or stop an exam at any time? Can you see why this might be helpful?

7. How do you communicate to clients throughout the exam? Do you narrate as you go? Do you ask if they prefer narration or silence?

8. If there are any abnormal findings, or findings you don’t recognize or have experience with, during a client physical exam, how do you approach talking to the client about it? Where do you refer them for follow-up?

9. How do you elicit feedback from clients throughout and after your exams?

10. What tools do you use for physical assessments?

11. Discuss blood pressure cuffs:

1. How do you choose the right blood pressure cuff for somebody?
2. What range of sizes do you carry?
3. What may happen if you are using the wrong size?

12. Discuss speculums:

1. What styles of speculums are you familiar with? Which additional styles are out there?
2. How do you choose the right speculum for somebody?
3. What range of sizes do you carry?
4. Do you and your clients prefer plastic or metal speculums? Why?

13. Discuss vital signs assessments:

1. which vital signs are assessed during a routine well-person examination?
2. which vital signs are assessed during a routine prenatal visit?
3. which vital signs are assessed during labor? How often?
4. which vital signs are assessed during immediate postpartum? How often?
5. which vital signs are assessed during a routine postpartum visit?
6. what are normal values for each of these vital signs? What variations of normal have you seen? When do you intervene, refer, or further investigate?

14. Discuss reflex assessments:

1. what reflexes do you assess during a physical examination? Why?
2. how do you assess these reflexes? What tools do you use?
3. how often do you assess these reflexes?
4. what do you do about unusual or abnormal findings?

15. Discuss body-mass-index (BMI)

1. what is it measuring?
2. how is it calculated?
3. do you routinely calculate BMI for clients? why or why not?
4. is there an “average” or “optimal” weight gain for clients in pregnancy?
5. what is the community standard for people with a high BMI?
6. are certain aspects of a physical exam more challenging with clients of higher BMI? How do you navigate this respectfully?

16. What sorts of skin changes are common in pregnancy and postpartum?

1. list three common benign rashes or skin changes and how you identify them
2. list three common pathological rashes or skin changes and how you identify them

17. How do you evaluate someone’s thyroid? Why might it be enlarged?

18. Describe ear assessments.

1. do you/your preceptor perform these as a part of physical assessment?
2. what tool do you use for assessment?
3. what are you looking for?

19. Describe eye assessments.

1. do you/your preceptor perform these as a part of physical assessment?
2. what tool do you use for assessment?
3. what are you looking for?
4. what changes might you see in labour or early postpartum?
5. why might someone have signs of pallor or jaundice?

20. What are you listening for when you listen to someone’s heart?

1. what different sounds might you hear?
2. what is a heart murmur and what does it sound like?
3. describe cardiac flow.

21. Describe how you listen to someone’s lungs.

22. What is CVAT? How and why might you include it in a physical assessment?

23. Discuss abdominal assessment:

1. what do you include in abdominal assessment during a well-person exam?
2. what do you include in abdominal assessment during first trimester of pregnancy?
3. what do you include in abdominal assessment during second and third trimester of pregnancy?
4. what do you include in abdominal assessment postpartum? How often do you assess postpartum?

24. Describe Leopold’s maneuvers.

25. Describe 2+ different techniques for performing a chest/breast exam. What is your preference?

26. What common changes do people experience in their chest/breasts during pregnancy?

27. Discuss “lumps” felt in the chest/breast during an exam.

1. what are chest/breast cysts?
2. what are benign chest/breast lumps?
3. when would these findings concern you?
4. do you feel differently if they are detected during a well-person exam vs. during pregnancy?

28. Discuss nipple variations.

1. describe everted or protruding nipples
2. describe flat, inverted, and retracted nipples
3. describe montgomery’s glands
4. describe various nipple discharges and what they may mean
5. when in pregnancy might someone start expressing colostrum?

29. Under what circumstances might you perform a pelvic exam as a part of a physical assessment at these different types of appointments?

1. during a well-person exam
2. during pregnancy
3. postpartum

30. Many clients will have had challenging or less-than-respectful pelvic exams at some point in their life. What specific measure so you take to offer safe, comfortable, and respectful pelvic exams?

31. Describe the placement of your thumb while performing a internal pelvic exam.

32. Describe what you might see or feel during an internal pelvic exam if a client had the following:

1. cystocele
2. cystourethrocele
3. enterocele
4. rectocele
5. describe 1st, 2nd, and 3rd degree classifications
6. what other signs and symptoms might a person describe that would make you suspect these protrusions?

33. What is a bimanual exam? Why might you perform a bimanual exam?

34. Describe what you might feel during a bimanual exam if a client had the following:

1. retroverted/retroflexed uterus
2. an anteverted/anteflexed uterus
3. uterine prolapse
4. fibroids
5. ovarian cysts

35. When might you perform a speculum exam as a part of physical assessment?

36. Describe the difference in appearance between the cervix of a primiparous and nulliparous client?

37. When visualizing a cervix, describe differences you may see in:

1. color
2. texture
3. position
4. scar tissue
5. strings protruding from cervical os
6. nabothian cysts
7. polyps

38. Why is it important that the client empty their bladder prior to a pelvic exam?

39. Describe hemorrhoids.

40. Describe the difference between normal and pathological edema in pregnancy, especially of the arms and legs.

41. Describe varicose veins. How and why should they be monitored?

42. How do you exercise universal precautions for the safety of you and your client during physical assessments? What measures are you taking for infection prevention?

Continued…..

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*Long Answer Questions for Deeper Reflection*

Questions Requiring Longer, More Thoughtful Answers:

(number continued from previous section).

43. After practicing several well-person exams, describe the order in which you find you best observe and examine your client. Write out a detailed script of how you talk to clients about exams, and a step-by-step of a well-person exam. As an alternative, you can film yourself performing a well-person exam (with counseling) on a friend and submit it as a part of your module work. Note you cannot provide any medical care or advice to your model unless your preceptor is present.

44. Give detailed instructions for performing a pelvic exam, from set-up to clean-up, including the counseling you give clients.

45. Give detailed instructions for performing a chest/breast exam, including the counseling you give clients.

46. Do you counsel clients about regular self-exam of any aspects of your physical exam? How do you discuss this with clients? How do you teach clients about self-assessments when they ask for instruction?

47. How do you discuss weight gain, BMI, and body image in pregnancy and postpartum with clients?

Continued…..

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*Projects/Learning Activities*

Projects(send completed projects with the rest of your course work for this module)

(number continued from previous section).

48. Create or adapt physical assessment forms for use in your midwifery practice. Include prenatal physical assessments for visits (vitals, fundal height, etc.), head to toe exam, postpartum exam, well person visit. Or review and discuss the flow of the electronic chart you use. Is there anything you would want to add?

Submit this draft along with this module, and include it later with your projects in the Charting and Practice Guidelines Module.

49. Perform a well-person or prenatal physical assessment and chart it using your own form or the form used by your preceptor or electronically. Include chest/breast and pelvic exams (may be part of physical assessment or separate exams).

50. Draft practice guidelines for physical assessments in your own practice. Include reference to your schedule of exams within visits, well-person, prenatal, postpartum, pelvic and chest/breast exams, and subsequent assessments. Include consultation and referral resources for your own practice. Submit this draft and include it later in your Practice Guidelines projects (in the Charting and Practice Guidelines Module.)