**Table.** Telemedicine Simulation Case Example and Rubric – Cough/Shortness of Breath/Possible Covid-19

**CC:** Cough and SOB for 3 days

|  |  |  |
| --- | --- | --- |
| Component of Patient Visit | Question/Response from Student (each worth 1 point) | Response of Standardized SP |
| **History of Present Illness** | Onset or clarifies from cc | 3 days |
|  | Location | Mostly in chest all day/constant |
|  |  |  |
|  | Duration | All day, worse when lay down |
|  | Characteristics | Noticed wheezing, cough moist |
|  | History | Never had before, no asthma, no travel |
|  | Aggravating/Alleviating factors | Rest helps, drinking water helps |
|  | Response to aggravating/alleviating | Answer as related |
|  | Timing | Constant all day |
|  | Fever or chills? | No thermometer but feels hot, occasional chills |
|  | Other URI symptoms  | Such as sore throat (yes), ear pain (no), swollen glands (no) |
|  | Ageusia/loss of taste and anosmia/loss of smell | Yes, a little bit |
|  | Medication use | Tried one dose of Ibuprofen 600 mg by mouth and one dose -last dose yesterday if asked |
|  | Allergies | Penicillin |
|  | Reaction to Penicillin | Gives a rash |
|  | Last menstrual period | States date 3 weeks prior |
|  | Social | Denies all such as smoking, vaping, drugs |
|  | Alcohol use/abuse | Denies |
|  | Others sick | Denies family/household members |
|  | Occupation | Nursing student/aide in LTC facility |
|  | Has ever had Covid-19 test | Denies |
| **Physical Exam**  | Notes patient expressions | Cough/grimacing/apparent discomfort |
|  | Notes patient color | Pale |
|  | Notes breathing/RR | Slightly faster RR |
|  | Ask to visualize throat | Follows direction in sticking out tongue, saying “ah” |
| **Communication Skills/Possible Diagnoses/Acceptable student considerations** | Discuss initial impression with SP | URI, possible COVID-19 |
|  | Appropriate differential diagnoses | Streptococcal Pharyngitis, Mononucleosis, Bronchitis, Common cold, Influenza, Seasonal Allergies |
|  | Discussed plan/appropriate | Such as Covid-19 test, Rapid Streptococcal or Mononucleosis testing, Rest, Sleep, warm salt gargles, referral for evaluation in office or urgent care |
|  | Recommend over the counter symptomatic treatment including exact doses/timing | Acetaminophen or Ibuprofen, Throat spray, Antihistamine if diagnosis-appropriate above |
|  | Recommends fluid intake | Student may or may not quantify |
|  | Return to telemedicine or follow up care is specific | Telemedicine, office, urgent care |
|  | Supportive, kind, professional | Throughout visit |
|  | Responses are succinct, clear, no more than 20 minutes | Throughout visit |
| Total Score | if 26 of these 32 student responses were completed, the student passes simulation |

Abbreviations: COVID-19, Coronavirus Disease 2019; CC, Chief Complaint; SOB, Shortness of breath; SP, Simulated Patient; URI, Upper Respiratory Infection; LTC, Long Term Care; RR, Respiratory Rate