

## **OSCE Note Grading**

The tapes you are about to watch and/or the notes you are about to grade involve a student physician evaluating a simulated patient. The patient has been instructed to behave according to the printed instructions and consistently give a history that is consistent with the enclosed printed instructions. Your responsibility will be to grade the interaction that the student has with the simulated patient (if viewing a tape) and/or also to grade the SOAP note the student will write regarding that interaction.

While grading the interaction and treatment, obtaining the exact correct diagnosis is less important than the completeness of the process the student goes through in arriving at an eventual management decision. If a student does not arrive at the diagnosis that the simulated patient was given according to his script, this should not be counted against the student if his/her evaluation and treatment included the elements upon which he/she is being evaluated here. Conversely, if the student arrives perfectly at the diagnosis the simulated patient was given, but does so without a complete evaluation, he/she should not be rewarded solely for his/her clinical guesswork.

## **SOAP Note Grading**

The total number of points possible on a SOAP note is 26. These are broken down as follows:

### **Subjective (8 points):**

One point should be given for each item up to 8 points: (half point may be given if you feel the element is included but not adequately described)

Chief complaint

History of Chief complaint

Past medical history

Past surgical history

Family history

Social history

Allergies

Current Medications

Immunizations

Review of systems (pertinent systems, about 5 for full credit)

### **Objective (8 points):**

One point should be given for each item up to 8 points: (half point may be given if you feel the element is included but not adequately described)

Vital Signs

General/constitutional

HEENT

Heart

Lungs

Abdomen

Extremities

Neurological

GYN/GU

Skin

Musculoskeletal

Structural: A specific somatic dysfunction, listed by nomenclature or description of TART/STAR findings is an objective finding-no different than describing heart or lung sounds

**Assessment (3 points):**

Three rational assessments justified by the elements of the SOAP note above are required. These may take the form of DIFFERENTIAL diagnoses or medical problems pertinent to the case." (For OMM Case, at least 1 diagnosis should clearly state "Somatic Dysfunction" and related region or regions)

Medical diagnoses or symptoms are listed before the diagnosis of somatic dysfunction (which usually relates to the medical diagnosis). Somatic dysfunctions are listed by region (body area) not the name of the specific finding.

**There are 10 standard somatic dysfunction areas:** Head, Cervical, Thoracic, Lumbar, Sacrum, Pelvis, Ribs, Upper Extremity, Lower Extremity, Abdomen/Other

**Plan (3 points):**

Three elements of plan are required. These may include, but are not limited to, patient education, further testing, medication, physical therapy, osteopathic manipulative treatment, follow up, home care and first aid, or home exercise.

List OMM performed as part of plan. List treatment type used, the region treated, and patient response to treatment

**Legibility (2 points):**

The notes clearly readable (2 points)

The notes readable with some difficulty (1 point)

The notes illegible (0 points)

**Organization (2 points):**

The notes organized with subjective, objective, assessment, and plan elements correctly identified (2 points)

The notes largely correct in their organization with no more than 2 errors in elemental division (1 point)

There are more than 2 errors in elemental division (0 points)

**Note: Naming Somatic Dysfunctions**

Use segmental definition (regional or local) to name the dysfunction

Remember, somatic dysfunctions are named in position of ease

Although this name is referred to as the diagnosis, in a written soap note it is actually an objective finding: it is the identifying descriptor for a structural finding