

MODULE SPECIFICATION

Part 1: Basic Data					
Module Title	Physical Assessment and Clinical Reasoning of the presenting Child				
Module Code	UZUSWE-20-3	3	Level	3 Version 1	
Owning Faculty	Health and Applied Sciences		Field	Maternal and Child Health	
Department	Nursing and Midwifery				
Contributes towards	BSc (Hons) Professional Studies BSc (Hons) Specialist Practice MSc Advanced Practice MSc Specialist Practice				
UWE Credit Rating	20	ECTS Credit Rating	10	Module Type	Professional Practicestandard
Pre-requisites	None		Co- requisites	None	
Excluded Combinations	UZUSWD-20-M Physical Assessment and Clinical Reasoning of the presenting Child		Module Entry requirements	Registered Practitioner in a position of Advanced Practice or aspiring to such a position with clinical responsibility for children or working within children and young peoples field of practice	
Valid From	Sept 15		Valid to	September 2021	

CAP Approval	2 June 2015
Date	

Part 2: Learning and Teaching			
Learning Outcomes	On successful completion of this module students will be able to:		
	 Demonstrate knowledge and understanding of the evidence base underpinning physical assessment and clinical reasoning (Component B) Differentiate between normal and abnormal variants of physical assessment and their clinical significance in children and young people (Component B) 		
	 Demonstrate knowledge and understanding of concepts related to anatomy, physiology and clinical reasoning that supports recognition of common illnesses in children and young people. (Component A) Safely and effectively conduct a clinical examination within the practitioners 		

chosen field, according to universally accepted standards, and demonstrate accurate documentation (Component A and B) Use clinical reasoning to enhance analysis of diagnostic findings in children and young people while working in partnership with child and family (Component B) Identify and evaluate outcomes from a physical and developmental assessment in children and young people (Component A) Exercise clinical judgement and formulate an action plan based on the findings of the clinical examination (Component B) Apply the process of physical assessment and clinical reasoning to the students own clinical practice (Component B) Skills **Syllabus** Outline Systematic history taking including developmental assessment Use of assessment tools for recognising normal and abnormal findings in children and young people Introduction to the use of frameworks for clinical reasoning Introduction to differential diagnosis and patient risk assessment Introduction to investigations and relevance to practice Scientific Knowledge Foundations of relevant anatomy and pathophysiology Introduction to clinical findings related to head to toe physical assessment with application to related disease processes. Respiratory examination in children Cardiovascular examination in children Abdominal examination in children Neurological examination in children Musculoskeletal examination in children (Paediatric Gait Arms Legs Spine pGALS) Examination of the newborn. Head, Neck, Skin, Ears, Eyes, Nose and throat examination Rationale for diagnostic investigations and relevance to practice Adolescent consultation skills Context of physical assessment and clinical reasoning Legal/ethical principles in children's and young peoples practice (inc. consent, confidentiality and partnership working) Clinical governance and safeguarding in children's practice Evidence based practice National and local initiatives for changing roles in Children's advanced practice **Health Promotion** Red Flags and safety netting in Children's practice Commnuciating and building rapport with child or young person and their Contact Hours 48 contact hours. These will take the form of lectures, group activities, case study presentations and practical practice sessions Teaching and A variety of approaches will be used which may include Learning E-learning including Blackboard, Methods Lectures. Practical sessions. Seminars. Master-classes, Analysis of case studies. Formative OSCEs undertaken throughout the module will contribute to use as

	part of the student learning strategy for physical assessment.
Reading Strategy	Core readings It is essential that students read one of the many texts on research methods available through the Library. Module guides will also reflect the range of reading to be carried out.
	Further readings
	Students are expected to identify all other reading relevant to their chosen research topic for themselves. They will be encouraged to read widely using the library search, a variety of bibliographic and full text databases, and Internet resources. Many resources can be accessed remotely.
	Access and skills
	These level three skills will build upon skills gained by the student whilst studying at levels one and two. Additional support is available through the Library Services web pages, including interactive tutorials on finding books and journals, evaluating information and referencing. Sign-up workshops are also offered by the Library.
Indicative Reading List	Indicative reading list
reading List	The following list is offered to provide validation panels/accrediting bodies with an indication of the type and level of information students may be expected to consult. As such, its currency may wane during the life span of the module specification. However, as indicated above, current advice on readings will be available via the module guide.
	Barnes, K. (2003)., <i>Paediatrics a Clinical Guide for Nurse Practitioners</i> . Edinburgh: Butterworth Heinemann.
	Douglas, G, Nicol, F, and Robertson, C. (2009)., <i>Macleods Clinical</i> Examination: Churchill Livingstone. Available from: https://www.dawsonera.com/abstract/9780702053375 [accessed on 18/05/2015]
	Lissauer, T & Clayden, G (2007)., <i>Illustrated textbook of Paediatrics</i> , 3 rd edition. Mosby Elsevier.
	Miall, L., Rufolf, M, and Smith, D (2012)., <i>Paediatrics at a Glance</i> , 3 rd edition. Wiley~Blackwell: Chichester. Available from: https://www.dawsonera.com/abstract/9781118306437 [accessed on 18/05/2015]
	Peate, I and Gormley-Fleming, E.,(2014) Fundamentals of Children's Anatomy and Physiology. Wiley~Blackwell: Chichester.
	Schelven, C, Copeman, A, Davis, J, Jeanes, A and Young, J (2010)., Paediatric Radiology for MRCPCH AND FRCR. 2 nd ed.The Royal Society of

Medicine Press limited.

Part 3: Assessment			
Assessment Strategy	Component A- Observed Structured Clinical Examination (OSCE). Component B is a 2000 word critical analysis and evaluation of an eclectic log of clinical examinations		
	Component A- (OSCE) Students are required to independently conduct an advanced clinical examination under controlled conditions in the form of an Observed Structured Clinical Examination (OSCE). To include history taking station plus one system station.		
	Component B is a 2000 word critical analysis and evaluation of an eclectic log of clinical examinations undertaken by the student in practice. This is an opportunity for students to critically evaluate their practice and clinical examination techniques with supporting research.		

Identify final assessment component and element	В		
% weighting between components A and B ((Standard modules only)	A: 50%	B: 50%
First Sit			
Component A (controlled conditions) Description of each element		Element v (as % compo	% of
1. OSCE		50	%
Component B Description of each element		Element v (as % compo	% of
2000 word critical analysis of an eclectic log of	clinical examinations.	50	%

Resit (further attendance at taught classes is not required)	
Component A (controlled conditions)	Element weighting
Description of each element	(as % of
	component)
1. OSCE	Pass/fail

Component B Description of each element	Element weighting (as % of component)
2000 word critical analysis of an eclectic log of clinical examinations.	50%

If a student is permitted an **EXCEPTIONAL RETAKE** of the module the assessment will be that indicated by the Module Description at the time that retake commences.