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附件4

2021年中医全科医生转岗培训结业临床

实践能力考核备考指引

本次结业临床实践能力考核形式为客观结构化临床试，设置4个考站，考站1（时长为15分钟）、考站2（时长为15分钟）、考站3（时长为6分钟）和考站4（时长为3分钟）模拟日常诊疗场景，考生通过对标准病人进行全科沟通和处理，以达到对该病人病情的正确判断与处理。考官通过观察考生全科诊疗过程，对该考生的相关技能进行评分。考生需根据考试指引完成每个考站的考核。考站2为笔试，共15分钟。

1. 考站1：中医四诊和体格检查站。中医四诊重点考核中医望、闻、问、切四诊临床技能，体格检查重点考核体格检查技能。考生根据采集的病史完成针对性的中医“切诊”及西医体格检查。本考站不要求做出诊断和处理，但可以向考官索要相关辅助检查结果（注意不能过度检查）。

（2）考站2：门诊病历书写和辅助检查及影像学判读站。考生根据考站1采集的病史和体格检查结果完成门诊病历书写（包括四诊合参、辩证施治、全人照顾等）；完成3个心电图的判读。

（3）考站3：常用中医操作手法站。本站考核内容为针灸、推拿、拔罐中的某项操作技能。

（4）考站4：心肺复苏术站。本站考核内容为单人徒手心肺复苏。

请考生参考《中医四诊和体格检查考核要点》《门诊病历书写考核要点》和《心肺复苏考核要点》内容进行考前准备。

中医四诊和体格检查考核要点

中医四诊和体格检查考核主要涉及以下系统疾病为：心血管、内分泌、消化以及眼、耳鼻喉等。

考官对考生的现场表现给出相应的评分，主要包括：

**1.专业态度**

* + 仪表整洁、举止大方。
* 正确地介绍自己，恰当地称呼病人，核对病人身份，征得病人同意。
* 在做体格检查及其他操作前洗手，解释所做检查或操作并告知结果。
* 在病人改变体位时提供恰当的帮助。
* 诊疗结束时表达谢意。

**2.沟通技巧**

* 有逻辑性、系统性的进行询问。
* 根据病人的文化水平程度进行合适的提问和解答。
* 使用开放--封闭式的问话技巧。
* 尽量不要使用未经解释的医学术语。

**3.病史采集**

1. 现病史
* 主要临床表现：起因和诱因；加重、缓解因素；性质；部位/放射部位；严重程度；时间；伴随症状。
* 鉴别诊断所需排除的临床表现：严重的疾病，容易漏诊误诊的疾病。
* 之前的诊疗情况、心理情况、一般情况等。
* 病人对疾病的理解和担忧、病人期望。
1. 既往史、过敏史、月经史、婚育史（必要时）、个人史、家族史等。

**4.体格检查**

* 根据初步诊断，进行针对性的重点体格检查。
* 中医望、闻、切诊，与患者病症十分关联的切诊需体现。
* 一般按视、触、叩、听的顺序进行体检，腹部体检按视、听、叩、触的顺序。
* 手法正确、规范、熟练。
* 查体中注意与病人沟通。
* 诊疗过程符合院感要求。

**5.中医全科诊断（不必告诉考官）**

5.1现患问题的正确中、西医诊断。

5.2 全面评估健康状况。

门诊病历书写考核要点

主诉：

现病史：

既往史：

药食过敏史:

个人史：

月经婚育史：

家族史：

体格检查：

诊断：1、主要诊断

（1）中医：

　　　 （2）西医：

2、其他健康评价：

治疗方案：

中医：

治则：

方药：

西医：

注意事项及随访：

心肺复苏考核要点

一、操作前准备

操作者：衣帽整洁，评估环境安全，看表，记录时间。

二、操作

（一）跪于患者右侧，位置正确。

（二）判断意识。

（三）大声呼救。

（四）判断颈动脉搏动和呼吸是否停止，注意判断时间。

（五）胸外按压：注意患者体位，按压部位，按压方法，按压力度和深度，按压频率等。

（六）人工呼吸：打开和清理呼吸道（清理口腔分泌物，正确开放气道）；口对口人工呼吸（注意覆盖保护隔膜，吹气动作要领正确，吹气和按压比例适当，紧凑流畅。）

（七）评估复苏效果。

（八）摆放体位、转运、垃圾分类处置。

三、评价

（一）操作分明、准确，动作敏捷熟练。

（二）体现人文关怀和医患沟通情况。