

Mark as done

The students should be able to

Remember

- **List** the anatomical landmarks used to assess JVP.
- **Define** the normal range of JVP measurement.

Understand

- **Describe** the physiological basis of JVP and its clinical significance.
- **Explain** the steps involved in performing a JVP examination.

Apply

- **Demonstrate** the correct technique for measuring JVP in a clinical setting.
- **Use** JVP findings to identify potential underlying cardiac conditions.

Analyze

- **Differentiate** between normal and abnormal JVP waveforms.
- **Analyze** the relationship between JVP and right atrial pressure.

Evaluate

- **Critique** the accuracy and reliability of JVP measurement techniques.
- **Evaluate** the clinical implications of elevated JVP in various cardiac conditions.

Create

- **Design** a clinical scenario where JVP measurement is crucial for diagnosis.
- **Develop** a comprehensive patient assessment plan that includes JVP examination.

✦✦ Summarise

OSCE Station: Examination of Jugular Venous Pressure (JVP)

Overview:

This station will test the student's ability to examine and interpret Jugular Venous Pressure (JVP) in a standardized patient.

Instructions for the Examiner:

- The candidate will have 5 minutes to complete the examination of JVP.
- Observe if the candidate follows the correct steps of the physical examination and can interpret the findings accurately.
- Provide the candidate with an appropriate history if asked.

Instructions for the Candidate:

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Scenario:

You are a junior doctor in the medical ward. Your task is to examine the Jugular Venous Pressure (JVP) in this patient. The patient has been complaining of breathlessness for the past two months.

- Perform the examination of JVP.
- Report your findings and offer a potential diagnosis based on the JVP measurement.

Patient Information:

- Age: 60 years
- Gender: Male
- Presenting Symptoms: Chronic breathlessness, occasional orthopnea.
- Relevant History (if asked): History of heart failure and hypertension, no history of chest pain.

Key Steps and Marking Scheme:

Step	Description	Marks
Introduction and Consent	Greets the patient, introduces themselves, and explains the examination clearly, asking for consent.	1
Patient Positioning	Positions the patient correctly (at 45° angle) on the examination couch.	1
Inspection of JVP	Inspects both sides of the neck for visible jugular venous distension with the patient lying at 45°.	2
Differentiation of JVP and Carotid Pulse	Correctly identifies the difference between JVP and carotid pulse by using palpation (non-palpable JVP).	2
Measurement of JVP	Measures JVP correctly, using the sternal angle as a reference, noting normal range (3-4 cm above sternal angle).	2
Hepatojugular Reflux	Checks for hepatojugular reflux if JVP is elevated or if clinically relevant (optional).	1

Interpretation of Findings	Reports JVP findings clearly, identifies raised JVP (>4 cm), and correlates it with heart failure or other causes.	3
Communication with Patient	Communicates findings and reassures the patient appropriately.	1

Additional Examiner Notes:

The candidate should consider other causes of raised JVP such as tricuspid regurgitation, constrictive pericarditis, or superior vena cava obstruction. If the candidate does not inspect for JVP at the correct angle or uses improper technique in measurement, deduct points accordingly.

Total Marks:

12

Expected Findings for this Station:

Elevated JVP (>4 cm above the sternal angle) indicating likely right-sided heart failure.

Potential Follow-up Questions for the Examiner:

- What are the causes of elevated JVP?
- How do you differentiate JVP from carotid pulse?
- What does a positive hepatjugular reflux indicate?

Last modified: Friday, 14 March 2025, 9:22 PM