

Nova Southeastern University – Ft. Lauderdale Physician Assistant Program Diagnostic Equipment Checklist Summer 2024

| Student Name: | |
|---|----------|
| EQUIPMENT – (No substitutions) | COMMENTS |
| Cardiology-grade stethoscope | COMMENTS |
| • | |
| (must have a separate bell & diaphragm) | |
| Sphygmomanometer adult size cuffs required AND | |
| pediatric size cuffs | |
| Oral thermometer | |
| (digital-should give audible signal after 1 minute) | |
| Disposable thermometer shields | |
| Watch (digital or analog - must display seconds) | |
| 3.5v otoscope/ophthalmoscope set (with rechargeable handle) | |
| Disposable otoscope speculums | |
| Pocket eye chart (Rosenbaum chart) | |
| Pen light | |
| Tongue depressors (individually wrapped) | |
| Tape measure (standard & metric increments) | |
| Ruler (standard & metric increments) (*Can use eye chart ruler) | |
| Reflex hammer | |
| Tuning forks (128 Hz and 512 Hz) | |
| Paper clips | |
| Cotton balls | |
| 2 non-alcohol based, distinctive scents (individually contained | |
| in a test tube or other re-sealable device) | |
| Personal Patient examination gloves | |
| 4 x 4 gauze pads | |
| Goniometer | |
| Equipment Bag | |
| | |

| I understand that it is my responsibility to ensure that the equipment listed above is |
|--|
| maintained in working order and brought to all physical diagnosis lab sessions and |
| practical exams. |
| |
| |

Student Signature: _____

FACULTY INITIALS _____