

Patient Centered Medicine 2

BASIC SCREENING PHYSICAL EXAMINATION (Outline)

1. WASH HANDS.

PATIENT SITTING, FACING THE EXAMINER

- Describe general appearance.
- Inspect & palpate fingers (nails, joints) hands (palms), wrists, elbows, and arms (muscles, joints, and skin).
- Test ROM in fingers, wrists, and elbows and test muscle strength in hand/fingers, wrists, forearms and arms.
- Palpate radial pulses.
- Check blood pressure in both arms (palpation 1 arm, auscultation both arms).
- Inspect head and neck (configuration, scalp, and skin).
- Inspect eyelids, conjunctivae and sclerae.
- Test visual Acuity (II) with pocket screener and test visual fields (II).
- Check extra-ocular muscles by examining for 6 cardinal positions of gaze (III, IV, VI) and accommodation.
- Test pupillary reaction to light (direct and consensual - II, III).
- Perform funduscopic examinations (right and left).
- Test light touch of face (V).
- Ask patient to wrinkle forehead or raise both eyebrows and then to smile and show teeth (VII).
- Test hearing (VIII).
- Inspect mouth (teeth, gums, tongue, mucosa, ducts, tonsillar fossa, pharynx), ask patient to say "aah" and cough (X), and finally protrude his/her tongue (XII).
- Ask patient to shrug shoulders against resistance (checking trapezius muscles) and laterally rotate his/her head against resistance (checking sternocleidomastoid muscles) XI.
- Inspect external ears (right and left).
- Perform otoscopic examinations (right and left).
- Inspect nose and nasal cavities (mucosa, septum, turbinates).
- Inspect, palpate, and test shoulder ROM.
- Check full ROM of neck including flexion, extension, lateral rotation, and head tilt.

MOVE TO POSITION BEHIND PATIENT

- Palpate the salivary glands and the head and neck lymph nodes.
- Palpate trachea in the sternal notch.
- While patient swallows, palpate for the thyroid gland.
- Inspect the chest wall and skin. During patient's deep breathing, observe chest posteriorly for symmetry and check for respiratory excursion.
- Inspect spine; percuss spine and costovertebral angle.
- Percuss and palpate the posterior lung fields. Always begin at the apices and alternate bilaterally comparing right and left sides.
- Auscultate the lung. Always begin at the apices and alternate bilaterally comparing right and left sides.

MOVE TO FRONT OF PATIENT

- (Female patient) Inspect breasts and nipples while patient's:
 - arms are relaxed at sides
 - arms are above head
 - hands are pressed against hips
 - hands are pressed against hips and patient is leaning forward
- Palpate axillary nodes (against chest, laterally, anterior and posterior).

ASK PATIENT TO LIE FLAT

- Standing at patient's right, palpate both breasts, using vertical stripe method.

RAISE PATIENT TO 30°

- Identify and inspect internal and external jugular neck veins. Estimate Central Venous Pressure (CVP) by measuring for the maximum height of the internal jugular vein from the sternal angle.

LAY PATIENT FLAT – STAND ON PATIENT'S RIGHT SIDE

- Palpate carotid arteries (one at a time).
- Auscultate carotid arteries.
- Palpate suprasternal notch for abnormal pulsations or thrills.
- Inspect precordium for parasternal and apical impulses. Inspect anterior chest wall and skin.
- Palpate precordium for lifts, heaves, thrills and pulsations. Identify and measure the size of the PMI.
- Auscultate heart in five locations, using both bell and diaphragm.
- Inspect abdomen and abdominal skin.
- Auscultate abdomen.
- Palpate abdomen superficially in all four quadrants.
- Palpate abdomen deeply in all four quadrants.
- Palpate for liver edge and spleen tip.
- Percuss liver span in right MCL.
- Palpate for kidneys.
- With patient in right lateral decubitus position, palpate for spleen.

STAND BESIDE PATIENT'S LEG, ADJUST DRAPING SHEET

- Palpate superficial inguinal nodes, horizontal and vertical.
- Palpate femoral pulses.
- Auscultate femoral arteries.
- Inspect, palpate, test ROM, and muscle strength in lower extremities - muscles, joints, and skin including feet, ankles, knees and hips.
- Check for edema in lower extremities.
- Palpate dorsalis pedis and posterior tibial pulses.
- Perform sensory examination in all four extremities (light touch, sharp/pain, vibration, and position sense).
- Elicit deep tendon reflexes in all four extremities (biceps, triceps, brachioradialis, knees, and ankle).
- Elicit plantar reflex bilaterally.
- Ask patient to extend arms and check finger-to-nose-to-finger and fine finger movements. Check heel-to-knee-to-shin in both legs.

ASK PATIENT TO STAND

- Observe patient's gait and tandem walking. Perform Romberg test.
- Inspect spine and evaluate ROM including flexion, extension, and lateral bending – include lateral rotation (stand behind patient).

MALE PATIENT, WHILE STANDING

- Inspect external genitalia and perineum.
- Palpate penis: meatus, glans, and shaft.
- Inspect scrotum.
- Palpate scrotum and contents.
- Palpate for inguinal hernias.
Ask him to bend at the hips over the exam table with upper body resting across the table or (if patient is not mobile) ask patient to lie on left side with left leg extended and right leg flexed.
- Inspect anus.
- Perform digital rectal examination.
- Retain stool sample for occult blood.
- WASH HANDS

FEMALE PATIENT, ASK PATIENT TO ASSUME LITHOTOMY POSITION. DRAPE PATIENT APPROPRIATELY

- Inspect external genitalia and perineum.
- Insert speculum and inspect cervix.
- Perform Pap smear.
- Withdrawing speculum, inspect vaginal mucosa.
- Perform bimanual exam of cervix, uterus, and adnexa.
- Perform recto-vaginal examination.
- Inspect anus.
- Retain stool sample for occult blood.
- WASH HANDS