

CHAPTER 25

THE PHYSICAL EXAMINATION

Overview

Medical assistants perform a vital function when assisting the provider with patients' physical examinations. Medical assisting students discover the methods, components, and sequence of routine physical examinations. The basic examination positions are covered, as well as draping techniques. Students learn the importance of accurately assessing the potential requirements of the provider during a physical examination and preparing the patient and examination room to meet those requirements. Observance of aseptic techniques and Standard Precautions is reinforced. Empathy and respect for the patient must also be shown by all health care professionals.

Lesson Plan

I. LEARNING OUTCOMES	ABHES	CAAHEP
A. Define, spell, and pronounce the key terms as presented in the glossary.		
B. Describe the six methods used in physical examinations.	MA.A.1.9.1.m	I.P.10.
C. Name and describe seven positions used for physical examinations.	MA.A.1.9.1.m	I.P.10.
D. Discuss the purpose of draping and demonstrate appropriate draping for each position.		
E. Identify at least 10 instruments and supplies used for examination of various parts of the body.		
F. Identify eight basic components of a physical examination.	MA.A.1.9.1.m	I.P.10.
G. Describe the sequence followed during a physical examination.	MA.A.1.9.m	I.P.10.
H. Recall method of examination, instrument used, and position for examination of at least eight body parts.		I.P.10.
I. Analyze the professionalism questions and apply them to this chapter's content.		

II. PROFESSIONALISM QUESTIONS

- A. Communication
 1. Did you introduce yourself? Did you identify the patient through name and birth date or other identifying feature?
 2. Did you listen to and acknowledge the patient?
 3. Did you speak at the patient's level of understanding?
 4. Did you allay patients' fears regarding the procedure being performed and help them feel safe and comfortable?
 5. Did you respond honestly and diplomatically to the patient's concerns?
 6. Did you apply active listening skills?
 7. Did you accurately and concisely update the provider on any aspect of the patient's care?
- B. Presentation
 1. Did you do something to bond with the patient?
 2. Did you attend to any special needs of the patient? Did you first ask if assistance was needed, rather than taking charge?
 3. Were you courteous, patient, and respectful to the patient?
 4. Did you display a calm, professional, and caring manner?
- C. Competency
 1. Did you pay attention to detail?
 2. Did you ask questions if you were out of your comfort zone or did not have the experience to carry out tasks?
 3. Were you knowledgeable and accountable?

- D. Initiative
 - 1. Were you flexible and dependable?
 - 2. Did you assist coworkers when appropriate?
- E. Integrity
 - 1. Did you work within your scope of practice?
 - 2. Did you demonstrate sensitivity to patient's rights?
 - 3. Did you protect personal boundaries?
 - 4. Did you demonstrate respect for individual diversity?
 - 5. Did you protect and maintain confidentiality?
 - 6. Did you do "the right thing" even when no one was observing?

III. REFERENCES

- A. Lindh, Wilburta Q., Pooler, Marilyn S., Tamparo, Carol D., Dahl, Barbara M., & Morris, Julie A., *Delmar's Comprehensive Medical Assisting: Administrative and Clinical Competencies*, 5e
- B. See text Chapter 25, References/Bibliography
- C. Any other teacher-preferred reference material
- D. CDC body measurements, <http://www.cdc.gov/nchs/fastats/bodymeas.htm>
- E. Information on the physical exam in order to prepare a patient, <http://my.clevelandclinic.org/heart/services/tests/exam.aspx>

IV. VISUAL AIDS

- A. Computer access to identified Internet resources.
- B. Internet media resources depicting physical exams per instructor preference.
- C. Any other teacher-preferred visual aids (PowerPoint, etc.).

V. EQUIPMENT AND MATERIALS

- A. Computer, TV monitor, and Internet access
- B. Catalog of medical equipment and furniture
- C. Actual examination table (with table paper)
- D. Instruments utilized for physical exam—stethoscope, ophthalmoscope, otoscope, and reflex hammer
- E. See IV: Visual Aids

VI. SAFETY

- A. Basic classroom procedures
- B. Stress use of proper body mechanics to avoid self-injury
- C. Request help of a peer as needed in lifting to avoid injury to self and patient
- D. Practice proper sanitation and disinfection of equipment to avoid disease transmission

VII. PREPARATION

- A. Arrange for visual aids equipment.
- B. Collect materials.
- C. Review Chapter 25 in the text, the Study Guide, the Competency Manual, and the Instructor's Manual.
- D. Utilize an employment or externship provider to visit the classroom and give a guest lecture on physical exam technique.
- E. Invite guest speakers as outlined in Classroom Activities.

VIII. INTRODUCTORY REMARKS/ACTIONS

- A. Read Learning Outcomes in the text with students to introduce the chapter.
- B. Ask students to do a short writing assignment regarding their experiences with physical examination as a patient. Allow time for voluntary sharing of these experiences.
- C. Ask, "Why are there different positions for examining patients?"
- D. Outline upcoming laboratory activities that will involve student participation in patient positioning.

IX. PRESENTATION

- A. Methods of Examination
 - 1. Observation or Inspection
 - a. General health
 - b. Posture
 - c. Body movements

- d. Skin
 - e. Mannerisms
 - f. Care in grooming
 - g. Body symmetry and contour
 - h. Skin rashes and color
 - i. Deformities
 - 2. Palpation
 - a. Examination of body using touch
 - b. Abdominal masses
 - c. Skin texture, moisture, and temperature
 - 3. Percussion
 - a. Eliciting sounds from body by tapping
 - b. Vibrations and sounds from underlying organs and cavities
 - c. Presence of air or solid material
 - d. Dull and hollow sounds
 - e. Direct and indirect methods
 - 4. Auscultation
 - a. Listening directly to body sounds
 - b. Stethoscope normally used by provider
 - c. Lungs, heart, abdomen, bowels
 - 5. Mensuration
 - a. Measuring process
 - b. Height, weight, length of limb, amount of flexion and extension, and so on
 - c. Use of tape measure
 - 6. Manipulation
 - a. Checks degree of flexion and extension of joints
 - b. Range of motion of joints
 - B. Positioning and Draping (discuss the Critical Thinking box)
 - 1. Examination Positions
 - a. Supine (horizontal recumbent)
 - b. Dorsal recumbent
 - c. Lithotomy
 - d. Fowler's
 - e. Knee-chest
 - f. Proctologic
 - g. Prone
 - h. Sims' (lateral)
 - i. Trendelenburg
 - C. Equipment and Supplies for the Physical Examination
 - D. Basic Components of a Routine Physical Examination
 - 1. Patient Appearance
 - 2. Gait
 - 3. Stature
 - 4. Posture
 - 5. Body Movements
 - 6. Speech
 - 7. Breath odors
 - 8. Weight
 - 9. Skin and Appendages
 - E. The Physical Examination Sequence from Head to Toe (discuss the Critical Thinking box)
 - F. Assisting with a Complete Physical Examination (see Procedure 25–1 in the textbook)
- X. APPLICATION
- A. Use the Learning Outcomes at the beginning of Chapter 25 in the text as questions to assess comprehension.
 - B. See the Classroom Activities section below for numerous application activities.

- C. Assign students to complete Chapter 25 in the Study Guide.
- D. Complete the Procedure in Chapter 25, using the Competency Manual to evaluate.
- E. Divide the class into teams of three. Assign the roles of provider, medical assistant, and patient. Assign demonstration of assessment of individual systems to each team. Allow time for demonstration to the class of each person's role and the equipment utilized.

XI. EVALUATION

- A. Evaluate any assigned application activities.
- B. Evaluate student participation during presentation.
- C. Grade responses to Chapter 25 in the Study Guide.
- D. Evaluate student performance in the Chapter 25 Procedure.
- E. Assign credit for group participation activities.

Classroom Activities

1. Provide time in class to view online physical exam videos. Allow time for discussion of content.
2. Have students practice using a tuning fork to check hearing acuity.
3. Have students determine distance, near, and color vision acuity with each other and record results, including observations made.
4. Have students examine the eyes and ears of each other using the otoscope and ophthalmoscope.
5. Have students make and use spelling and definition flash cards for the key terms.
6. Invite an ophthalmic assistant to speak about procedures of the eye, and an ear, nose, and throat (ENT) specialist to speak about hearing and procedures of the ear.
7. Have students complete physical examination forms on classmates. A student patient may make up a common complaint.
8. The "medical assistant" completing the history form should write a short description on the bottom or reverse of the form outlining examining positions that would be used for the specified illness/disease and why they would be used.
9. Ask students to write the methods of examination that are commonly used and to state reasons for each.
10. Have students cut out pictures of instruments and items used in the physical examination and attach them to index cards. Use as flash cards to drill each other on spelling, usage, and care of the instruments and items.
11. Have students set up examination trays of instruments or other items for various types of examinations.
12. Place many instruments used in the physical examination in a large box. Have each student draw an instrument from the box without looking at it (so they cannot make a visual selection of a known instrument). Have each student identify the instrument, tell its use, and spell its name correctly. Use as an oral quiz or as a review for the entire class.
13. Ask a clinical supervisor or provider to speak to the class on the importance of efficient assisting, proper preparation of patients for examinations, or other related topics. This gives students firsthand information about their role in patient care.
14. Arrange to take a tour of a clinic that offers comprehensive health care. Ask the tour guide if it is possible to allow students to see the equipment and supplies used in that facility for the gynecologic examinations and procedures.
15. Using the Web, look for information about the following conditions and their possible causes:
 - a. Changes in retinal blood vessels
 - b. Vertigo
 - c. Varicose veins

Answers to Critical Thinking Boxes

Describe a type of examination that may be performed while the patient is placed in each of the following positions: (1) lithotomy, (2) Sims', (3) knee-chest, and (4) supine. Decide in what position you should place a patient and what manner of draping you would use for a Pap smear, examining a patient with shortness of breath, obtaining a rectal temperature, and an examination of the spine.

With a patient placed in the lithotomy position, a pelvic and rectal exam can be performed; in the Sims' position, a rectal examination, a rectal temperature, and a pelvic examination for someone unable to assume the lithotomy position; in the knee-chest position, a proctosigmoidoscopy; and in the supine position, everything on the anterior surface of the body from head to toe.

At the conclusion of the physical examination, the provider will have an impression of the patient's general health. What specific information can the provider obtain from the examination? From what sources other than the physical examination does the provider gain information to help in making a diagnosis?

The provider can obtain a significant amount of information about the patient's general health, such as: the posture, size of body parts, deformities, and skin texture; moisture and temperature can be felt; the size and position of organs can be felt; heart sounds can be heard; the bowel sounds can be examined; and limb and chest measurements help determine if size is appropriate. This is some of the information that the provider can obtain. Other sources the provider uses to gain information include laboratory tests and diagnostic imaging results. The provider will put together all of this information and will include a health history to help form a diagnosis.

Answers to Case Studies

Case Study 25-1

Refer to the scenario at the beginning of the chapter.

1. Why do Wanda and Bruce prepare and assist for physical exams with patients of their own gender?

Wanda and Bruce prepare and assist physical examinations with patients of their own gender simply to relieve patients of any embarrassment. However, if the provider requests it and the patient of the opposite gender agrees to allow you to be present during the physical examination, remember that the examination is of a clinical nature and the situation is handled in a professional manner.

Case Study 25-2

At Inner City Health Care, clinical medical assistant Wanda Slawson, CMA (AAMA), is helping Liz Corbin, a part-time administrative/clinical medical assistant, to learn to prepare the examination room and patients for the physical examination. In addition to alerting Liz to provider preferences, Wanda wants to be sure that Liz has a solid understanding of the methods of examination, positions and draping, and the components of the physical examination.

1. In reviewing with Liz the methods of examination used by the providers, what six primary methods would Wanda have Liz describe?

- a. Observation or inspection
- b. Palpation
- c. Percussion
- d. Auscultation
- e. Mensuration
- f. Manipulation

2. What patient positions would Liz need to know?

Liz should know at least seven common positions that may be required of the patient during the physical examination: supine or horizontal recumbent; dorsal recumbent; lithotomy; Fowler's; knee-chest; prone; and Sims'.

3. Wanda asks Liz to recall the various examination components and their significance. How should Liz respond? Liz should know the basic components of an exam as observed by the provider and how each is an indicator of patient well-being:

- a. Patient appearance, including skin color, grooming, and behavior: Patient appearance is also observed by the medical assistant during the patient history.
- b. Gait, including limp; dragging of one leg; balance; or a wide-based walk: Gait can indicate a problem with neurological functioning.
- c. Stature, including height, trunk, and limb proportion
- d. Posture: A person in pain may have postural abnormalities.
- e. Body movements, including both voluntary and involuntary movements
- f. Speech, including loss of voice, difficulty speaking, using wrong speech patterns, and using words in the wrong order
- g. Breath odors, which can indicate specific diseases such as diabetes or liver disease
- h. Nutrition, to discover the cause of overweight or underweight conditions or edema
- i. Skin and appendages, including abnormal skin color or skin conditions

Case Study 25-3

Mrs. Mason, a 72-year-old somewhat frail woman with arthritis and hypertensive heart disease, has an appointment today for a complete physical examination. It will include a basic physical examination and an examination of the pelvis because she has had bright red vaginal spotting.

1. Discuss positions and draping for the physical examination, including pelvic examination for this patient.

Positioning and draping Mrs. Mason for a complete physical exam will not be different from that of any other patient who has a complete basic physical exam. Keep in mind Mrs. Mason's age and assist as necessary with positioning and draping. Protect her privacy while helping her to undress in preparation for the exam. Because Mrs. Mason has arthritis, she has limited mobility and needs assistance. Remain with her throughout and assist her onto the examination table and into the various positions for the exam.

To position Mrs. Mason for the pelvic examination, she may not be able to assume the lithotomy position due to her arthritic knees. The pelvic exam can be done with Mrs. Mason in either the dorsal recumbent or Sims' position.

Be certain she is covered with a drape for warmth and privacy. A diamond shape placement of the drape for either dorsal recumbent or Sims' will facilitate viewing the pelvic area without undue patient exposure.

2. Discuss any special safety needs for Mrs. Mason.

Because of Mrs. Mason's age and frail condition, special consideration should be given to her safety. Assist her on and off the table, being certain at the conclusion of the exam that she remain seated on the edge of the exam table while you assess her readiness to get down from the table. Check blood pressure, pulse, and skin color before allowing her to step down. Help her to get dressed, remain with her throughout, and assist her into the provider's office and later out to the reception area to her waiting niece.

3. What additional supplies and equipment should be available for the provider?

Since Mrs. Mason is experiencing vaginal spotting, Dr. King will perform a pelvic examination. Prepare the appropriate equipment and supplies necessary to do the pelvic exam.

Answers to Certification Review

1. c. auscultation
2. a. horizontal recumbent
3. c. body movement
4. c. answer questions to the extent of knowledge; refer others to the provider
5. a. supine position
6. b. Cephalad to caudal
7. d. all of the above
8. c. Lithotomy
9. d. Inspection
10. d. both a and b

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