

Medicine – Renal System

Physical Examination

A. Start the examination with: (WIP³E)

1. **Wash hands:** Wash your hands in front of the examiner or bring (sanitizer with you)
2. **Introduce yourself:** My name is (your name), I'm a third year medical student
3. **Explain the examination:** I'm going to do physical examination for your genitourinary system which involve look, feel and listen to your abdomen by stethoscope
4. **Permission:** Explain what are you going to do and take his permission
5. **Position:** The position should be **flat**
6. **Privacy:** I Should maintain patient privacy
7. **Exposure:** from **the nipple** to the **mid-thigh** and for patient's privacy cover the genitalia

DON'T MISS THE ROOM LIGHTING

B. General Appearance (ABC²DE)

“Always stand in front of the patient when you are doing general inspection”

1. **Appearance:** The patient is e.g. (young, middle aged or old) and looks well
2. **Body built:** He looks (normal, thin or obese)
3. **Connections:** Around bed e.g. I can't see any medications or any equipment connecting to the patient
4. **Color:** He doesn't look pale or jaundiced
5. **Distress:** The patient look e.g. (comfortable and he doesn't appear short of breath and he doesn't use accessory muscles)
6. **ELSE:** (conscious - pigmentation - thickening of the skin)

***Example:** The patient looks well, he is lying comfortably on the bed, not distressed, the patient is having good body shape, and he is obviously not jaundiced , not connected to I.V lines nor oxygen mask.

-Ask the patient to sit down and start inspecting at the back side

-Do costo-vertebral angle tap (to assess pyelonephritis)

C. Local examination of the abdomen:

“When you are standing at the right side of the patient”

Inspection

1. Look for scars, erythema, abdominal distension or ascitis
2. Local swelling
3. Prominent veins, pulsations or peristalsis
4. Skin lesion: Like scratch mark, striae
5. Skin discoloration: Jaundice, Cullen’s sign or Grey-Turner’s sign
6. Look for the umbilicus is it inverted or bulged out
7. Look for stomas
8. Obvious hernia: **Ask the patient to cough**
9. Chest: Gynecomastia, Spider nevi, virchow’s node - “At the left side supraclavicular lymph node indication of gastric Ca or TB”

D. Peripheral Examination

Face

Eyes: pallor in conjunctiva, Jaundice in the sclera, Xantholasma, iritis

Lips: angular stomatitis, peripheral cyanosis

Mouth: Candidiasis, glossitis, aphthos ulcer, sublingual cyanosis, oral dental hyagine, foul smelling or ketone smelling mouth

Hand

Hands: symmetrical warm, muscle wasting, signs of anemia, palmar erythema, dupuytren’s contracture

Nails: Cyanosis, Clubbing, Capillary refill, Splinter hemorrhage, leukonychia, koilonychias nicotine staining

Tendon or palmar xanthomata

Tremors: fine tremor, flapping tremor

Arm & axilla

Bruising – petechiae - scratch marks - Acanthosis nigricans

Palpation

“Ask the patient about any pain, if the pain is there start from the opposite side and keep the painful area at the end”

1. **Superficial palpation:** we should cover all the 9 quadrant areas of the abdomen looking for guarding and the rigidity
2. **Deep palpation:** press more deep, looking for masses, organomegaly
3. **Check for the 3 organs: liver – spleen – kidney:**
 - ✓ **Liver:** start from right iliac fossa to the lower edge of the liver, and then do percussion to assess the upper edge of the liver “normal size is 8-13 cm”. Check for Murphy’s sign
 - ✓ **Spleen:** start from right iliac fossa
 - ✓ **Kidneys:** bimanual maneuver - (Right hand on top of the left hand)
4. **expansile pulsation** over the abdominal aorta

Percussion:

1. hepatomegaly
2. splenomegaly
3. Urinary bladder - (start from xepheid reaching down to the bladder)
4. Shifting dullness
5. Fluid thrill

Auscultation:

1. Gurgling sound of bowel “for quadrants area of the abdomen, the best at ileocaecal area, tell the examiner that ideally we should wait for 2 minutes
2. Aortic and renal bruit - “Do it bilaterally”

E. End the examination with:

1. Thank you
2. Now you can wear your shirt

F. To complete the examination:

1. Perform a Per rectal examination: per vaginal in a female
2. Perform an examination of the external genitalia
3. Check hernial orifices
4. Urine dipstick

Done by: Hossam AlAwaad

Revised by: Dr.Mohammed AlRowais

OSCE Team Leaders: Shaimaa AlRefaie & Roqaih AlDouaib