

Lump Examination

Done By: Khalid Alshehri Osce Team Leaders: Abdulrahman Bahkley & Sarah Habis

Lump examination (Lump = any mass in the body)			
Lump= Breast lump = Hernia = Thyroid = Lymph node.			
#	Subject steps	Pictures	Notes
Α	Pre-exam Checklist: WIPE	Be the one.	Very important.
1	Wash your hands.		✓ (Wash your hands in
2	Introduce yourself to the patient, explain the examination & take consent.		front of the examiner or bring a sanitizer with you).
3	Positioning of the patient and his/her Privacy.	1 2	✓ Always examine from the right side of the patient (and tell the
4	Exposure.	3 4	examiner if you are left handed). ✓ Ask the patient if there is any tenderness before touching him/her.
В	General appearance (ABC2DEVs):	A B C D E	
1	Appearance: young, middle aged, or old, and looks generally ill or well.	<u>+ then go to the</u> For the findings, you should say the negatives: "There's no clubbing, no splinter hemorrhage, no leukonychia" and the same applies to the rest of the body	
2	Body built: normal, thin, or obese	Ex: Cachectic W/F in her 40's having respiratory	
3	Connections: such as nasal cannula (mention the medications), nasogastric tube, oxygen mask, canals or nebulizer, Holter monitor, I.V. line or cannula (mention the medications).	distress, sitting bolt upright in bed and speaking in 2- and 3-word sentences. The patient is held on nebulizer for #.	
4	Color: jaundiced, pale, or cyanosed.	Vital signs: Temperature 38.0°C, pulse 110 beats	
5	Distress: in pain, respiratory (using accessory muscles), or neurological (abnormal movements) distress.	per minute, blood pressure 100/60, respiratory rate 30 breaths per minute, oxygen saturation of 98% on room air.	
6	Else: mental functions: consciousness, alertness, and orientation.		
7	Vital signs: 1) Pulse rate 2) Blood pressure (BP) 3) Temperature 4) Respiratory rate	Rate: counting over 30 seconds, normally 60-100. Rhythm: regular or irregular. Synchronization by comparing with the other side (radio radial or radio femoral delay). Character and volume: determined from the carotid. Blood pressure (BP) Normal BP defined as a systolic reading less the 140, and diastolic reading less than 90. Temperature: Normal body temperature ranges from 36.6-37.20C. Respiratory rate: It is traditional to count it while taking the pulse. The normal rate at rest should not exceed 25 beat per minute (range 16-25).	

Examination of the lump

A: Inspection

1. Site

- Also, single vs. multiple.
- Distance from a bony prominence landmark.
- 2. Size
- 3. Shape

4. Surrounds

- Remote surrounds first, then local surrounds.
- Also, surrounding neurological or motor deficits.

5. Surface

- Smooth vs. rough vs. indurated.
- Skin, scars.

6. Edge

Clear vs. poorly defined.

7. Transillumination, if applicable.

- Whether a torch behind lump will allow light to shine through.
- Esp. used in testicular mass.



Branchial Cleft Cyst



Lymph Node

Metastasis



Submandibular

Abscess

Mnemonic

4 Students and 3
Teachers around

the **CAMPFIRE**:

- / Site
- Size
- ✓ **S**hape
- ✓ Surface
- Juliace
- ✓ Tenderness
- ✓ Temperature
 - Transillumination
- ✓ Consistency
- ✓ Appearance of patient
- ✓ Mobility
- ✓ Pulsation
 - Fluctuation
- ✓ **I**rreducibility
- ✓ Regional lymph nodes
- Edge

B: Palpation

Deep Cervical

Abscess

1 Temperature

• Feel with back of fingers on surface, surrounds.

2 Tenderness

- Ask to tell when feel pain.
- Nerve: can cause pins and needles.

3 Consistency

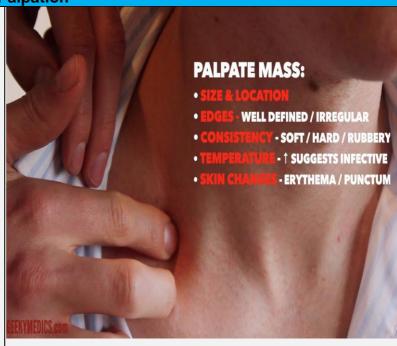
• Soft, spongy, firm.

4 Mobility and attachment

- Move lump in two directions, right-angled to each other. Then repeat exam when muscle contracted:
- Bone: immobile.
- Muscle: contraction reduces lump mobility.
- Subcutaneous: skin can move over lump.
- Skin: moves with skin.

5 Pulsatile

• Assess with 2 fingers on mass:



- Transmitted pulsation: both fingers pushed same direction.
- Expansile: fingers diverge (esp for AAA).

6 Fluctuation [fluid-containing]

- Assess by placing 2 fingers in "peace sign" on either edge of lump, then tapping lump center with index finger of other hand: fluctuant lump will displace peace sign fingers.
- Very large masses can be assessed by a fluid thrill.

7 Irreducible

- Compressible: mass decreases with pressure, but reappears immediately upon release.
- Reducible: mass reappears only on cough, etc.

Hard Painless Irregular Fixation to skin/chest wall Skin dimpling Discharge bloody/unilateral Nipple retraction

Benign Firm/rubbery Painful Regular/smooth Mobile/not fixed No skin dimpling Discharge more likely green/yellow

C+D: Percussion and auscultation

1 Percussion:

- Dullness.
- Resonance.

2 Auscultation:

• Bruit.





Examination of a breast lump: https://www.youtube.com/watch?v=cAUF4KonFJ4

Examination of hernia: https://www.youtube.com/watch?v=L9e9PA6otvw

After the examination:

- ✓ Ensure that the patient is comfortable.
- ✓ Make explanations to the patient, answer his/her questions and discuss management plan.
- ✓ If necessary, order diagnostic investigations.
- Dispose of sharps and waste material according to infection control standards.
- ✓ Wash hands.
- ✓ Document the procedure.



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