



# ABDOMINAL EXAMINATION



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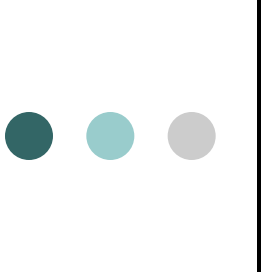




# **REMEMBER BEFORE STARTING...**

## **ALWAYS**

- Introduce your self
- Take permission
- Wash your hands



# **GASTROINTESTINAL EXAMINATION VS. ABDOMINAL EXAM**

## **○ General examination**

- General inspection (ABCDE)
- VS
- Growth parameters
- Hands and arms
- Face, eyes and mouth
- Neck
- Lower limbs

## **○ Abdominal examination**

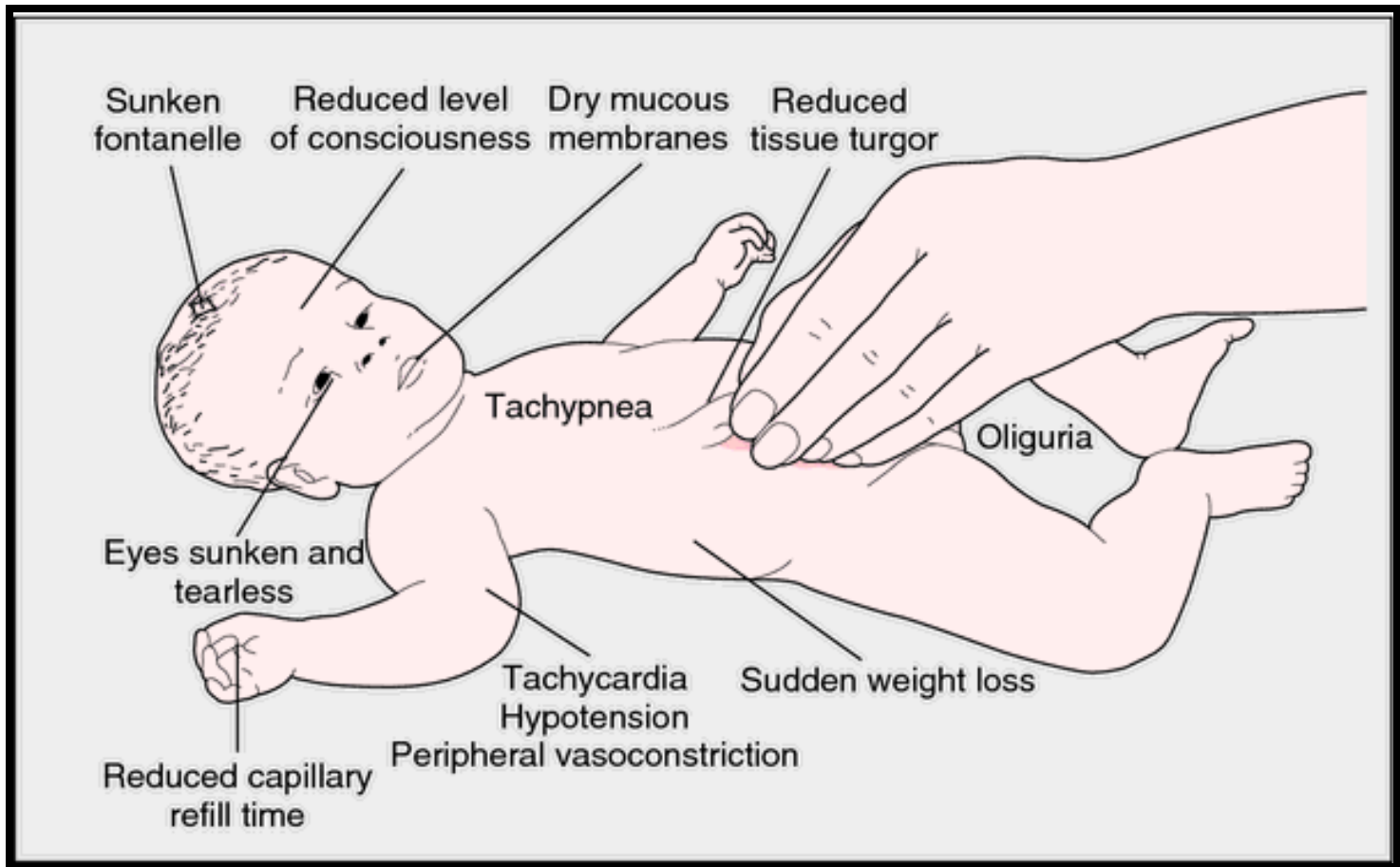
- Inspection
- Palpation
- Percussion
- Auscultation

# GENERAL INSPECTION (ABCDE)

- **A: APPEARANCE;** well, ill, irritable, toxic
- **B; BODY BUILT:** (weight, height, waist circumference)  
**BREATHING:** resp. Distress, grunting, wheezing
- **C: COLOUR:** pale, jaundice, cyanosis
- **D: DEHYDRATION/DYSMORPHIC FEATHURES**
- **E: EXTENSIONS:** Ox tubes, IV lines, cardiac monitors



# Signs of dehydration



# HANDS

- Nails
  - Clubbing
  - Koilonychia
  - Leuconychia
- Palmar erythema
- Dupuytren's contractures
- Hepatic flap



# HANDS



Palmar erythema



Dupuytren's contractures

# ARMS

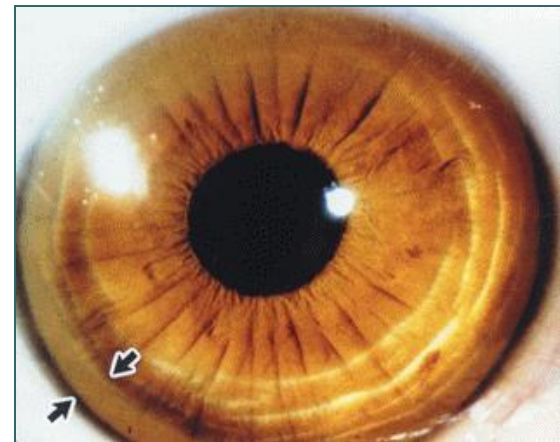
- Spider naevi (telangiectatic lesions)
- Bruising
- Wasting
- Scratch marks (chronic cholestasis)





# FACE, EYES ...

- Conjunctival pallor (anaemia)
- Sclera: jaundice
- Cornea: Kaiser Fleischer's rings (Wilson's disease)
- Xanthelasma (chronic cholestasis)



# MOUTH

- **Breath** (fetor hepaticus, DKA)
- **Lips**
  - Angular stomatitis
  - Cheilitis
  - Ulceration
  - Peutz-Jeghers syndrome
- **Gums**
  - Gingivitis, bleeding
  - *Candida albicans*
  - Pigmentation
- **Tongue**
  - Atrophic glossitis (B12, FA def)
  - Furring





# NECK AND CHEST

- Cervical lymphadenopathy
- Left supraclavicular fossa (Virchow's node=lymphoma)
- Gynaecomastia
- Spider nevi

# ● ● ● | **NLOWER LIMBS**

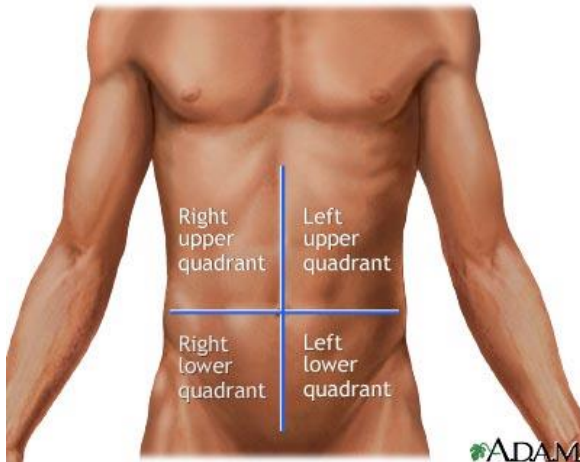
- VASCULAITIS
- EDEMA (pitting, non-pitting)



# ABDOMINAL EXAMINATION

## POSITIONING

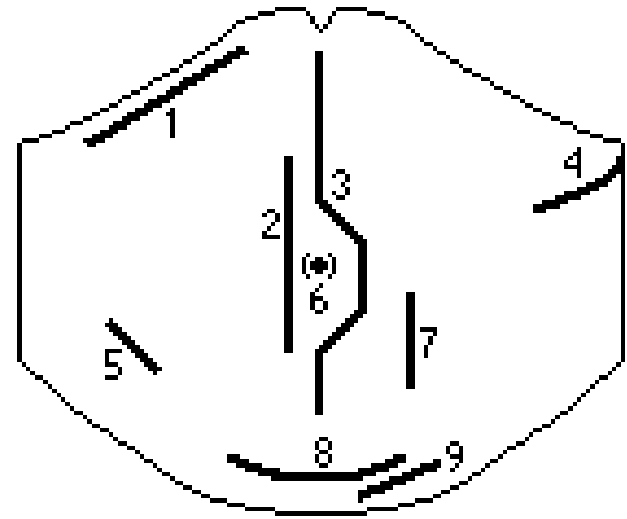
- Your position???
- Patient position (supine) & exposure
- Abdomen can be divided in four quadrants

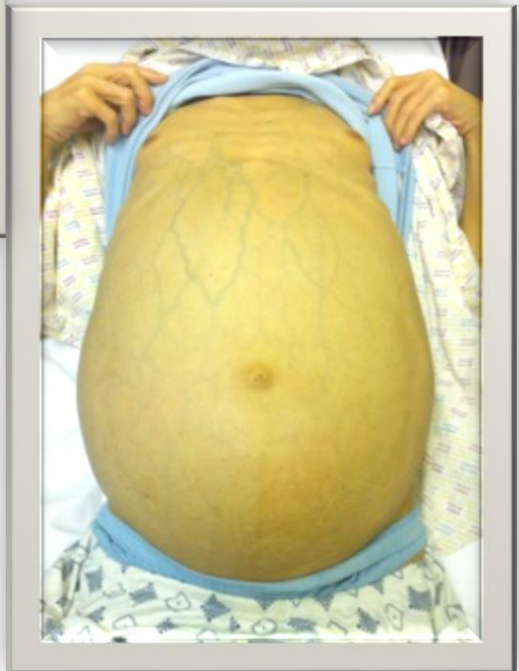


# ABDOMINAL EXAMINATION

## INSPECTION

- Shape
- Movements
- Scars
- Distension
  - Localised: mass, organomegaly
  - Generalized: 5 F's
- Prominent veins (*caput medusae*)
- Striae, Bruises, Pigmentation
- Visible peristalsis

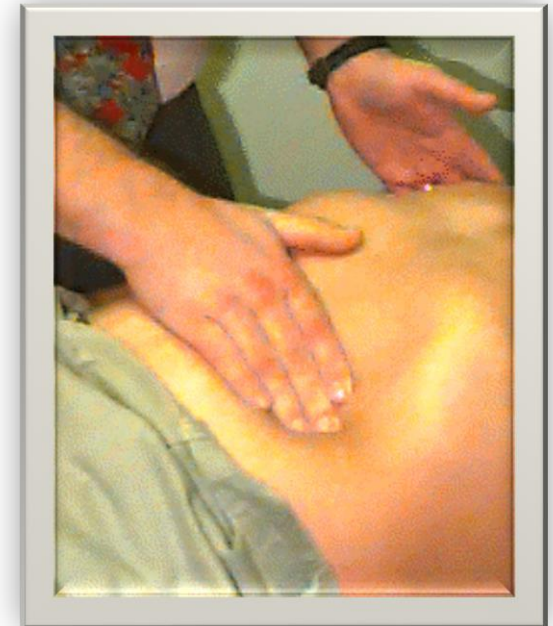
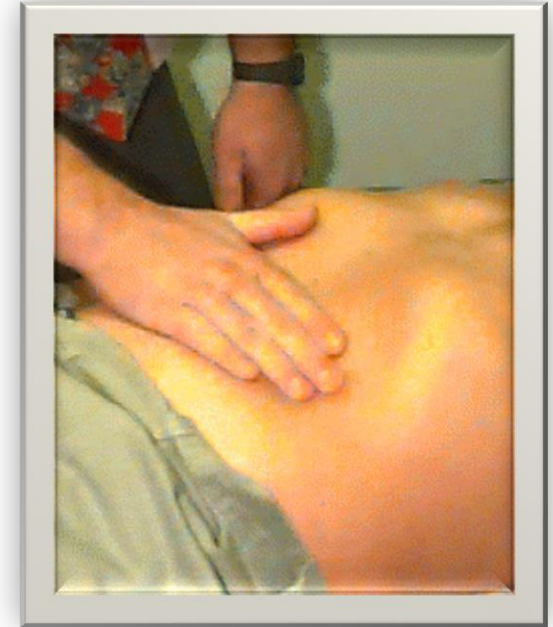




# ABDOMINAL EXAMINATION

## PALPATION

1. **Warm hands**
2. **Your position:** right side of the patient, at the patient's level
3. **Is there a pain?**
4. Begin with **superficial** examination
5. **Move** in a **systematic** manner through the abdominal quadrants
6. Repeat palpation **deeply**.
7. ?? **Tenderness, rebound tenderness, rigidity+/- tenderness**

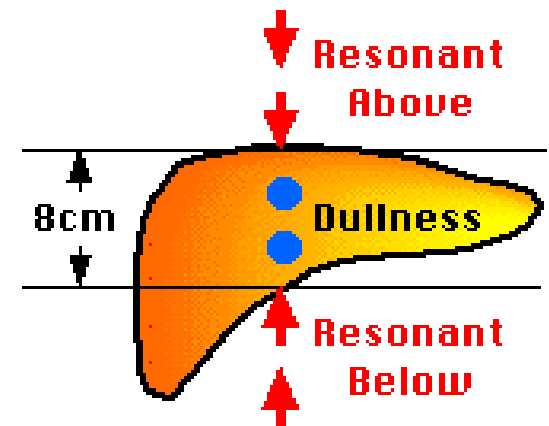




# ABDOMINAL EXAMINATION

## PALPATION OF THE LIVER

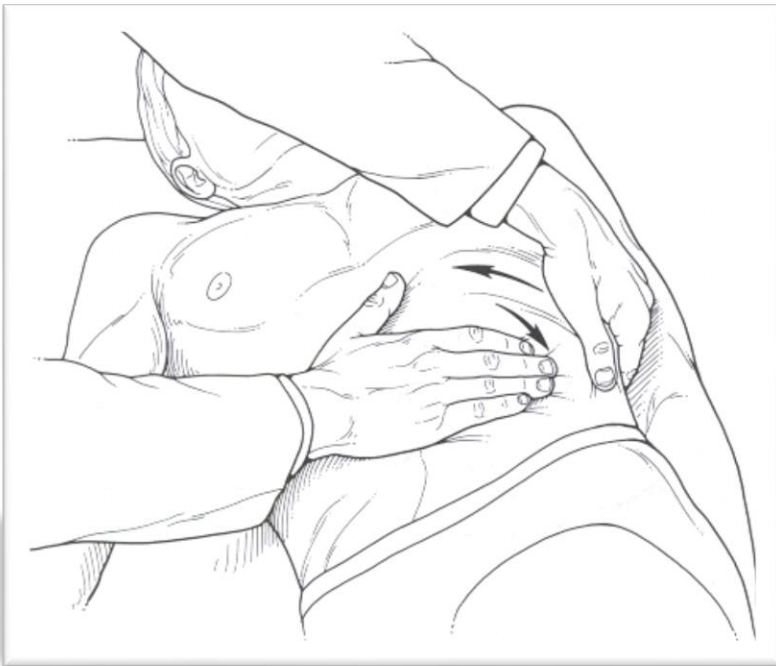
1. Start palpating in the right iliac fossa
2. Ask the patient to take a deep breath in
3. Move your hand progressively further up the abdomen
4. Try to feel the liver edge (softness)
5. Liver span (normal 7-8 cm in older kids, 5 cm in infants)



# ABDOMINAL EXAMINATION

## PALPATION OF THE SPLEEN

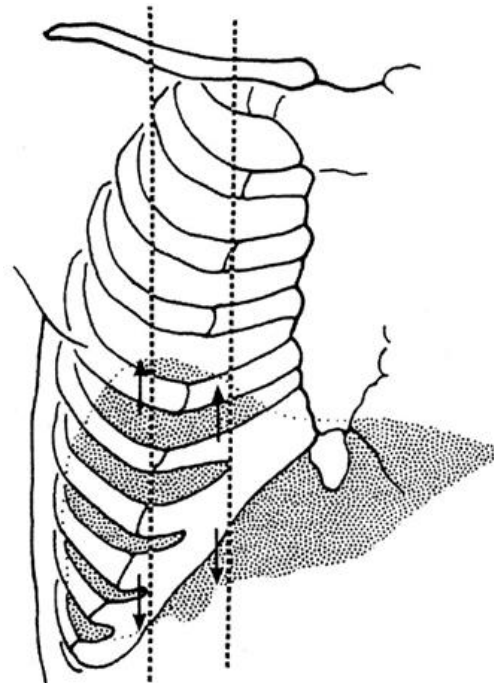
1. Start from **Rt iliac fossa**



# ABDOMINAL EXAMINATION

## PERCUSSION

- **Dull sounds:** solid or fluid-filled structures
- **Resonant sounds:** structures containing air or gas

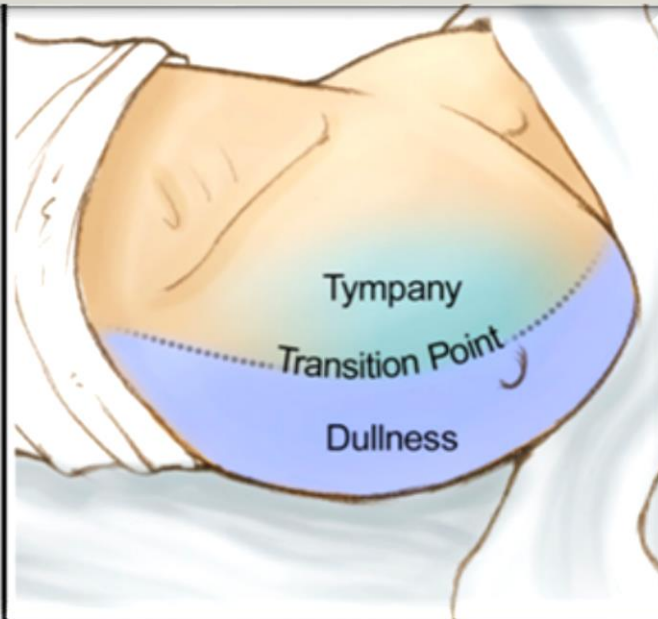
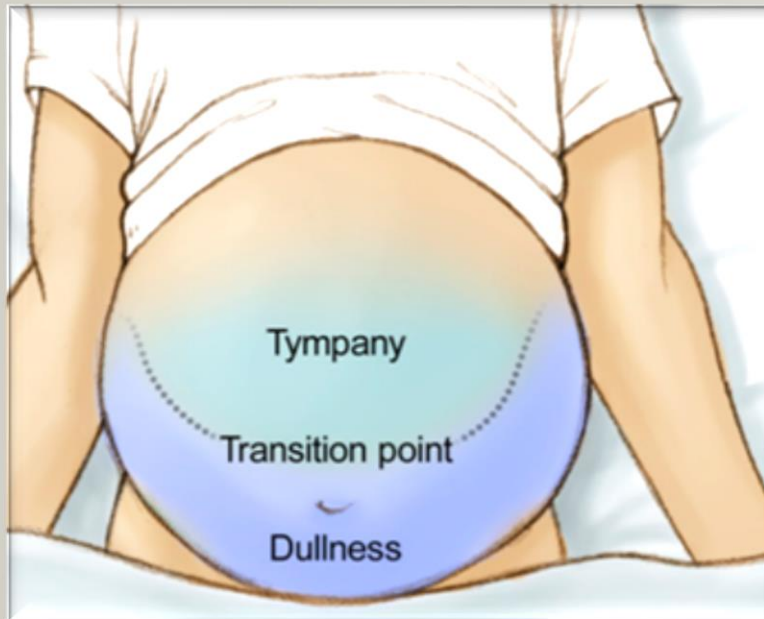
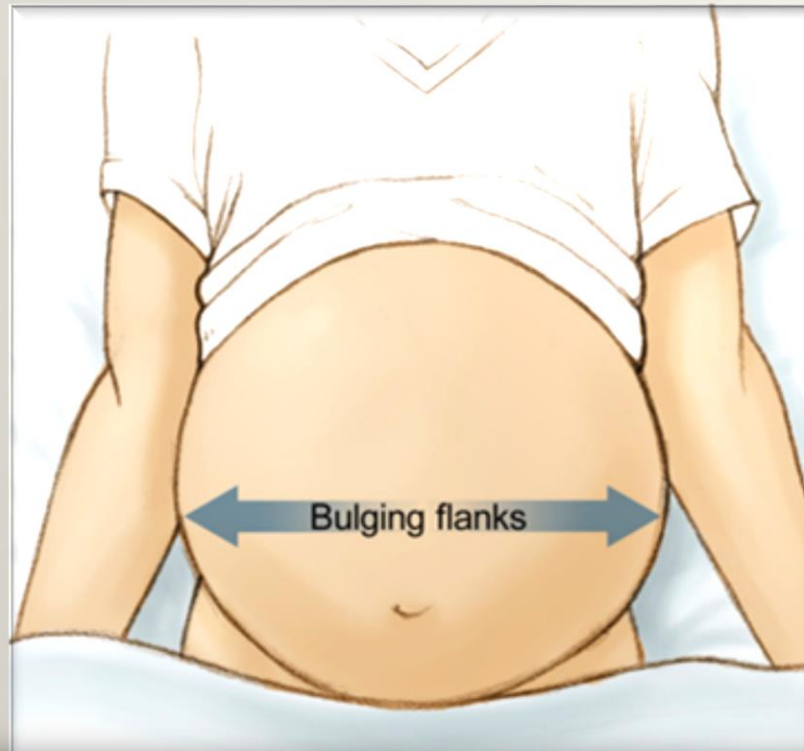


# ABDOMINAL EXAMINATION

## LOOKING FOR ASCITES FLUID THRILL



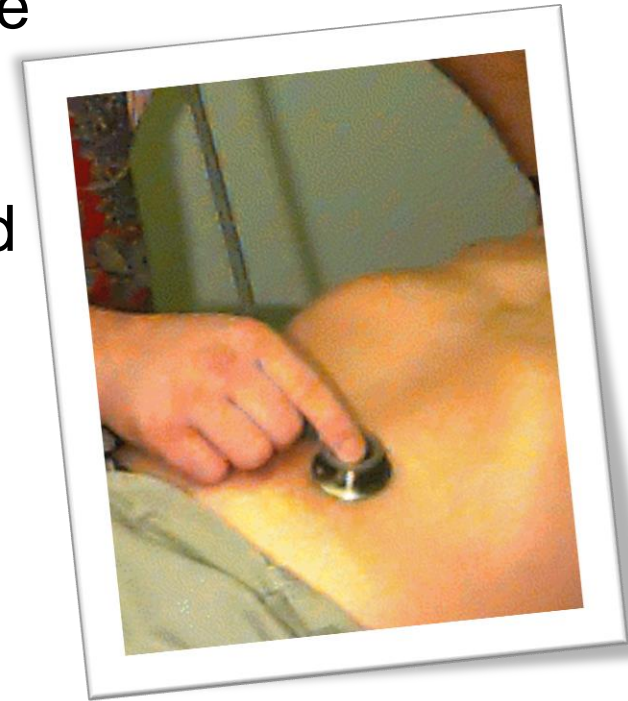
# Shifting dullness



# ABDOMINAL EXAMINATION

## AUSCULTATION

- Place the diaphragm of the stethoscope to the right of the umbilicus
- Bowel sounds (borborygmi) are caused by peristaltic movements
- Occur every 5-10 sec.
- **Absence: paralytic ileus or peritonitis**
- Bruits over aorta and renal a. could be a sign of an aneurysm and stenosis





# **VIDEO**

[https://www.youtube.com/  
watch?v=pwODhzhplHA](https://www.youtube.com/watch?v=pwODhzhplHA)



# Questions



# ABDOMINAL EXAMINATION

## MURPHY'S SIGN

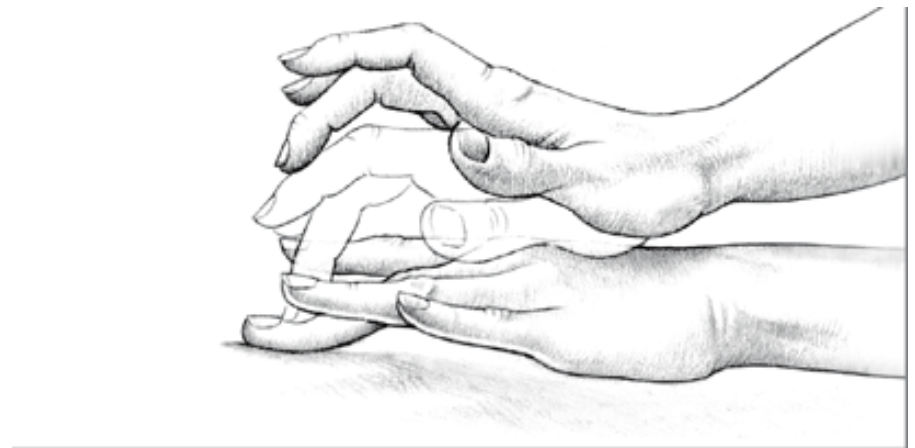
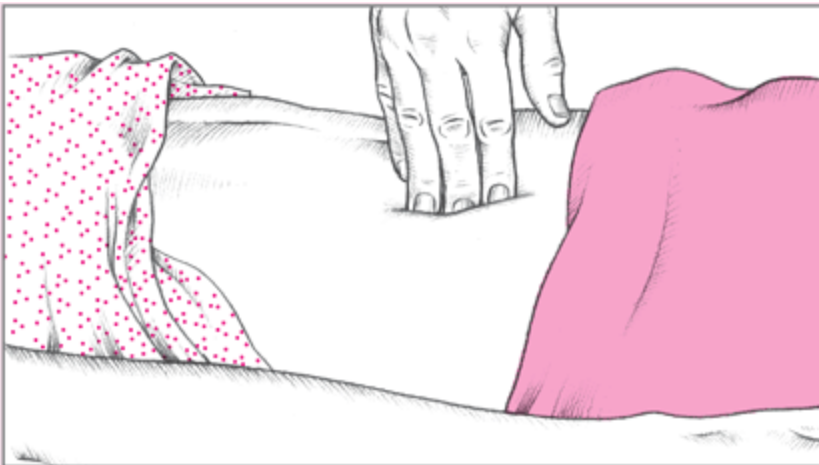
- Pain in RUQ
- Inflammation of gallbladder (cholecystitis)



# ABDOMINAL EXAMINATION

## BLUMBERG'S SIGN= rebound tenderness

- Pain upon removal of pressure rather than application of pressure to the abdomen
- Peritonitis and/ or appendicitis



# ABDOMINAL EXAMINATION

## MCBURNNEY'S POINT

- 1/3 ASIS to umbilicus
- Location of AV in retrocecal position
- Deep tenderness (= acute appendicitis)

