PHYSICAL EXAM

SOAP Card: Subjective

What can I do for you today? OR What is your reason for coming to the hospital today? Is this a routine follow-up or acute visit? If acute visit, quickly assess for urgent care needs, if stable, proceed

- Airway/breathing
- Circulation
- Unconscious/Convulsing
- Pain
- Fever

Age, marital status, employment, social support

Pregnant or last menstrual period, date of last pap smear and results

Obstetric history (previous pregnancies and miscarriages, children alive and their ages)

HIV status of client, partner and children

• Last CD4 count or WHO stage?

Sexual history: Unprotected sex in past few months, number of partners

TB status

Review of systems

Medications

- Including ARVs or TB meds
- Including adherence

Past medical history

- Recently sick or admitted
- History of serious illness or surgery

Habits (smoking, drinking alcohol or abusing drugs)

Nutrition assessment

SOAP Card: Objective

General

- Alert or unconscious
- Dehydrated or well hydrated
- Emaciated or underweight or malnourished
- Record weight, height and BMI
- Check for JACCOL (Jaundice, Anaemia, Cyanosis, Clubbing, Oedema and Lymphadenopathy)
- Check skin rashes and lesions

Vital signs

- Respiratory rate
- Heart rate
- Blood pressure
- Temperature
- Oxygen saturation

Do a systemic examination

- HEENT (Head, eyes, ears, nose, throat)
- Cardiovascular
- Pulmonary
- Gastrointestinal
- Genito-urinary
- Musculoskeletal

Skin/Dermatological

• Neurological

Note: Pay particular attention to the system for which patient reports symptoms.

What is the patient's diagnosis?

- List all the medical problems you found under "Objective" e.g. Anaemia, jaundice, dehydration, wasting, central cyanosis, etc
- Consider differential diagnosis
- Conclude probable diagnosis

Assess Risk

- Multiple partners
- Substance use
- Cultural/religious practices
- Unprotected sex
- Adherence to medications

What is the patient's willingness to change?

What are you planning to recommend?

- Investigations (e.g. urine, sputum and blood tests, x-rays, lumbar puncture, scan, etc.)
- Treatment and prophylaxis
- Patient education and risk reduction plan
 - Family planning
 - Condom use and distribution
 - Partner notification/counselling
 - Partner and family testing
 - Transmission reduction
 - ART Readiness Counselling
 - Adherence counselling
 - Nutrition
 - Substance Use
- Infection control (IPT, contact screening)
- Admission or referral to specialist or other facility
- Referral to community organisation/support group

Feel scalp and head for any abnormalities.

• Assess for rashes, check external ears for rashes, and drainage

Examine the face.

- Assess for rashes or skin lesions on face
- Assess for facial lipoatrophy
- Check sensation to touch on face
- Have patient raise eyebrows, wrinkle forehead, close their eyes and smile

Examine the eyes.

- · Examine pupillary size and response to light and visual fields
- Look for extra ocular movements

Examine conjunctiva and inside the eyelids of both eyes.

 Assess for anaemia, jaundice, redness, discharge, lesions, swelling or discolouration

Examine the ears.

- Conduct the quick finger rub hearing test
- Assess for pain, ringing in ears and hearing loss

Examine the nose and sinuses.

Examine the mouth.

- Examine tongue, under tongue, palate, mucosal tissues, and pharynx
- Assess for lesions, sores, discolouration, exudate, skin or tissue abnormalities in the mouth
- Assess for oral candidiasis, oral hairy leukoplakia, pigmented oral lesions such as KS, HSV ulceration, and angular cheilitis.

Continued

Examine the mouth. (cont.)

- Assess for tonsil enlargement, redness or discharge in posterior oropharynx
- Assess breath for halitosis or any odour

Examine dentition and gingiva.

- · Assess for ulcerative gingivitis and periodontitis
- Ask patient to show their teeth and stick out their tongue

Examine the neck.

- Ask patient to patient shrug their shoulders and turn their head from side to side
- Assess for asymmetric or rapidly enlarging lymph nodes, note size and location and whether nodes are soft, hard, red, tender, mobile or fixed, draining
- Palpate lymph nodes: pre-auricular (in front of ear), post-auricular (behind the ear), occipital (base of skull), posterior cervical (from the level of the mastoid bone to the clavicle), tonsillar (below the angle of the mandible), sub-mandibular (under the jaw on either side of the midline), sub-mental (below the chin), supra-clavicular (in the hollow above the clavicle)
- Assess for thyroid enlargement
- Examine neck for stiffness
- Palpate the carotids

Physical Exam Checklist: Cardiovascular

Examine fingers and nail beds for cyanosis and clubbing

- Examine lower extremities and check for oedema
 - Assess for peripheral oedema, ulcers or discolouration
 - Check dorsalis pedis and posterior tibial pulses
- Palpate for apex beat
- Feel point of maximal cardiac impulse
- Auscultate heart
 - Assess rate, rhythm, arrhythmias, murmurs, extra heart sounds

Physical Exam Checklist: Pulmonary

Inspect anterior and posterior chest

- Palpate and percuss the posterior chest
- Auscultate the posterior lung fields as well as right middle lobe and the lingula
 - Note abnormal sounds including crackles or wheezes
 - Note absence of air movement (pleural effusion or pneumothorax)
- Ask patient to lie down and listen to anterior lung fields

Physical Exam Checklist: Gastrointestinal

Examine the abdomen for distension, scars

- Auscultate to assess for bowel sounds
- Palpate and percuss the abdomen:
 - Assess for pain, guarding, hepatosplenomegaly, abdominal masses, abnormal tenderness, rebound tenderness, and inguinal adenopathy, femoral and popliteal pulses

Physical Exam Checklist: Genito-Urinary

FEMALE

Examine the external genitalia and anal area

• Assess for ulcers, lesions, warts, sores, swelling or discharge

Palpate inguinal and femoural nodes

• Assess for enlarged nodes and/or tenderness

Conduct bi-manual exam

Assess for motion tenderness

Conduct internal speculum exam

- · Assess for any ulcers, lesions on vaginal walls or cervix
- If needed, obtain a Papanicolaou smear
- Screen for STIs: obtain endocervical swab for gonorrhoea and chlamydia and a posterior pool swab for wet mount trichomoniasis, candida and bacterial vaginosis

MALE

Examine the penis

 Assess for any ulcers, lesions, discharge or other abnormalities, note whether circumcised

Examine the testes

• Assess for masses, swelling or tenderness

Conduct rectal exam. Examine the anal area

- Assess for lesions, sores, fissures or warts
- If needed, obtain an anal Papanicolaou smear

Palpate inguinal and femoral nodes

· Assess for enlarged nodes and/or tenderness

Physical Exam Checklist: Musculoskeletal

Examine muscle bulk

- Assess for tone and evidence of fat atrophy
- Assess for strength

Examine the joints

Assess for enlargement, swelling, redness, warmth, deformity or tenderness

Examine for range of motion of hip and knees

• Assess for limited movement, pain or stiffness

Physical Exam Checklist: Skin/Derm

Examine entire body and scalp, axillae, palms and soles of feet, fingernails and toenails

- Assess for rashes or skin lesions on face such as seborrhoeic dermatitis
- Assess for lesions, scratches, seborrhoeic dermatitis, psoriasis, folliculitis, Kaposi's sarcoma, fungal infections, common warts, molluscum contagiosum, herpes zoster
- Assess skin turgor and note for signs of dehydration
- Assess temperature of skin
- Note any nail changes, clubbing, cyanosis or fungal infections

Physical Exam Checklist: Neuro

Examine upper and lower extremity peripheral nerve function.

- Assess extraocular movements and pupil dilation
- Check sensation to pin prick and light touch
- Check ankle, achilles, patellar and plantar reflexes
- Measure vibratory sensation in toes
- Have patient stand and walk
 - Assess gait
 - Check for Romberg's sign
 - Assess cerebellar function with finger to nose and heel to shin testing
- Assess speech. Note any unusual pattern or difficulties