



# Abdominal Examination

## 1. Introduction

- Wash Your hands
- Introduce yourself by name and role
- Check their Identity – name and DOB
- Explain the procedure - why you need to do it and what does it involve
- Ask for consent
- Expose the patient appropriately
- Check if the patient is currently in any pain

e.g. Good morning, my name is .. and I am a medical student. Can I check your name and date of birth? I have been asked to do an abdominal examination on you, which would involve me having a look at your hands, face and chest, and then having a feel of your tummy. Is that ok?

- For this examination I will start by positioning the bed at 45 degrees, but then I'll make it flat.
- Would you mind removing your shirt for me please?
- And can I just check whether you are in any pain?

## 2. Bedside Inspection

- Observe the patient: Patient is **A – Alert**      **B – (normal) Body habitus**      **C – Comfortable at rest**
- Observe the surroundings: "paraphernalia of abdominal disease"

## 3. Hands

Action	Sign	What it can indicate
Look at nails	Tar stains	History of smoking
	Leukonychia	Hypoalbuminemia in liver cirrhosis
	Koilonychia	Iron, B12, folate deficiency.
Ask patient to put nails together	Clubbing	Liver cirrhosis Irritable bowel disease Coeliac disease
Hands outstretched, check back of hands	Tendon Xanthomata	Hyperlipidemia
Turn hands over and look at palms	Palmar erythema	Pregnancy Hyperdynamic circulation due to increased oestrogen in liver disease
	Dupuytren's contracture	Familial Liver disease (alcoholism)
	Pigmentation of palmar creases	Addison's disease
	Finger glucose monitoring marks	Diabetes

## 4. Wrists

- Inspect for needle marks, bruising and muscle wasting up the arm
- Assess Radial Pulse: Look for rate (bpm) + character (thready, normal, bounding) + rhythm (regular, irregular)
- Check for renal fistulae
- Ask for patient's blood pressure

## 5. Head

- Eyes

Action	Sign	What it may indicate
Ask patient to hold down one eyelid	Conjunctival pallor	Anaemia
Ask patient to look at you	Corneal arcus	Hyperlipidemia
	Kayser-Fleischer rings	Wilson's disease
	Scleral icterus	Jaundice
Ask patient to close their eyes	Xanthelasma	Hyperlipidemia Primary biliary cirrhosis

- Face

Action	Sign	What it may indicate
Ask patient to open their mouth	<b>Hypertrophied gums</b>	Phenytoin Tacrolimus Nifedipine
	<b>Poor dentition</b>	Gives route for bacteria to enter causing IE
	<b>Spongy and bleeding gums</b>	Scurvy Leukaemia
	<b>Ulcers</b>	IBD Coeliac disease
	<b>Pigmentation</b>	Addison's disease
Ask them to stick Out tongue	<b>Glossitis</b>	B12 deficiency
	<b>Oral candidiasis</b>	Immunocompromised Steroid use
Close mouth	<b>Angular stomatitis</b>	Thiamine/B12/Folate deficiency
	<b>Cheilosis</b>	Infection

### 6. Neck (JVP and Lymph nodes)

- Check the JVP: Place the patient at 45 degrees and ask them to look to the left
- a) Mention height above sternum (>3-4 cm abnormal)
- b) Offer hepatojugular reflux with open mouth
- Feel the lymph nodes
- a) Around the head
- b) Virchow's node in the left supraclavicular triangle

### 7. Chest and back

- Sit patient forward: check the back for scars and spider naevi (>5 significant)
- Sit patient back: Assess for gynecomastia and spider naevi
- Assess hair on chest and the axilla
- Check for acanthosis nigricans

### 8. Abdomen

**OBSERVE:** Lie the patient flat and expose from xiphisternum to pubis

- Assess the **shape of abdomen, stomas, scars, pulsation, umbilicus** and **skin for striae**.
- Cullen's sign: bruising around the umbilicus
- Grey-Turner sign: bruising in the flank

**PALPATE**

- **Superficial palpation:** go level with the abdomen and palpate the 9 regions, assessing for tenderness
- **Deep palpation:** re-palpate the 9 areas and assess for masses
- Palpate the **liver, spleen** and **kidneys**
- Offer to check for an abdominal aortic aneurysm

**PERCUSS**

- Percuss for the liver and spleen
- Bladder: percuss suprapubic region
- Ascites (shifting dullness)

**AUSCULTATE**

- Listen for **bowel sounds, aortic bruits, and renal bruits**

### 9. Legs

- Ask if patient has tenderness --> Assess for peripheral pitting edema and DVT

**Thank the patient and wash your hands again.**

"To complete the examination, I would do a number of steps..."

**Bedside – (History)** Take a full history

- (**Observations**) Full set of observations including blood pressure
- (**Corresponding examination**) Conduct a digital rectal examination and examine the external genitalia
- (**Bedside tests**) Urine dipstick

**Bloods –** Would take a full blood count + U&Es