

# ABDOMEN CHECK-OFF

EXAMINATION SKILLS	Satisfactory/ Unsatisfactory
<p>1. Do camera angles allow the instructor to view all elements of the physical exam?</p> <p>2. Is the recording completed in one take (no pauses or interruptions)?</p> <p>3. Is the student referencing the check off sheet only briefly, a few times?</p> <p>4. Is the student's physical examination technique correct for more than 80% of all of the exam elements?</p> <p><b>If the answer is "NO" to any of these questions, mark INCOMPLETE, students will need to repeat the examination per the syllabus</b></p>	
<p>1. Ensures Privacy</p> <ul style="list-style-type: none"> <li>• Introduces self &amp; explains role</li> <li>• Confirms Patient Identity</li> <li>• Informs patient they will be verbally describing the examination</li> </ul>	
<p>2. Performs Hand Hygiene</p>	
<p>3. Inspects Appearance, comments on:</p> <ul style="list-style-type: none"> <li>• Dress, posture, grooming, &amp; hygiene</li> <li>• Stature &amp; build</li> <li>• Nutritional state</li> <li>• Pallor or cyanosis</li> <li>• Pursed lips or flared nostrils</li> </ul>	
<p>4. Inspects Behavior, comments on:</p> <ul style="list-style-type: none"> <li>• Degree if Cooperativeness</li> <li>• State of distress</li> <li>• Affect</li> <li>• Eye Contact</li> <li>• Motor activity (normokinetic, bradykinetic, hyperkinetic)</li> </ul>	
<p>5. Prepares for Abdominal Exam</p> <ul style="list-style-type: none"> <li>• Instructs the patient to lay supine &amp; <i>inquires about painful areas</i></li> <li>• Positions patient arms at side or across chest, table extended, with knees flexed</li> <li>• Positions drape, exposing area from xiphoid to symphysis pubis</li> </ul>	
<p>6. Inspects Abdomen using tangential lighting, comments on:</p> <ul style="list-style-type: none"> <li>• Skin &amp; hair characteristics</li> <li>• Contour</li> <li>• Symmetry</li> <li>• Pulsations/movements</li> <li>• Umbilicus</li> </ul>	

<p>7. Auscultates all 4 quadrants for <b>Bowel Sounds</b> with diaphragm clockwise, starting at RLQ, comments on:</p> <ul style="list-style-type: none"> <li>• Rate</li> <li>• Interpretation, significance</li> </ul>	
<p>8. Auscultates for <b>Vascular Sounds</b> with bell</p> <ul style="list-style-type: none"> <li>• <b>Epigastric &amp; Umbilical area</b></li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Venous hum, presence or absence</li> <li>• <b>Aorta</b></li> <li>• <b>Bilateral Renal Arteries</b></li> <li>• <b>Bilateral Iliac Arteries</b></li> <li>• <b>Bilateral Femoral Arteries</b></li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Bruits, presence or absence, quality</li> </ul>	
<p>9. Palpates bilateral <b>Femoral Pulses</b>, comments on:</p> <ul style="list-style-type: none"> <li>• Symmetry</li> <li>• Grade</li> </ul>	
<p>10. Palpates bilateral horizontal &amp; vertical <b>Inguinal Lymph Nodes</b></p> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Size</li> <li>• Consistency</li> <li>• Mobility</li> </ul>	
<p>11. Percusses all 4 quadrants of <b>Abdomen</b> clockwise, starting at RLQ, comments on:</p> <ul style="list-style-type: none"> <li>• Tympany or dullness</li> <li>• Interpretation, significance</li> </ul>	
<p>12. Percusses <b>Liver Borders</b></p> <ul style="list-style-type: none"> <li>• Upper border: percuss intercostal spaces along the right midclavicular line starting from an area of lung resonance down, marking the first area of dullness</li> <li>• Lower border: percuss along the right midclavicular line starting from an area of intestinal tympany up (just below umbilicus), marking the first area of dullness</li> <li>• Measure liver span in cm</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	
<p>13. Percusses <b>Spleen</b></p> <ul style="list-style-type: none"> <li>• Use Castell's Method</li> <li>• Follow anterior axillary line to last intercostal space (approximately 9<sup>th</sup> or 10<sup>th</sup> intercostal space)</li> <li>• Instruct patient to exhale completely and percuss for tympany</li> <li>• Instruct patient to inhale and percuss for change to dullness</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	

<p><b>14.</b> Performs <b>Light Palpation</b> of abdomen clockwise, starting at RLQ, comments on:</p> <ul style="list-style-type: none"> <li>• Rigidity, guarding</li> <li>• Tenderness</li> <li>• Masses</li> </ul>	
<p><b>15.</b> Performs <b>Deep Palpation</b> of abdomen clockwise, starting at RLQ, comments on:</p> <ul style="list-style-type: none"> <li>• Rigidity, guarding</li> <li>• Tenderness</li> <li>• Masses</li> </ul>	
<p><b>16.</b> Palpates <b>Liver</b></p> <ul style="list-style-type: none"> <li>• Places left hand under thorax parallel to 11-12<sup>th</sup> ribs</li> <li>• Places right fingertips lightly below costal margin at MCL</li> <li>• Instructs patient to take a deep breath &amp; blow it out completely</li> <li>• On exhale, palpates with right fingertips &amp; applies upward pressure with left</li> <li>• Holds position as patient inhales</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	
<p><b>17.</b> Palpates <b>Epigastric, Umbilical &amp; Incision Areas</b> for hernias</p> <ul style="list-style-type: none"> <li>• Instructs patient to cough or strain while palpating with palmer surface of hand</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	
<p><b>18.</b> Tests for <b>Cholecystitis</b> with <b>Murphy's sign</b></p> <ul style="list-style-type: none"> <li>• Instructs patient to exhale completely</li> <li>• Deeply palpates below right costal margin at mid-clavicular line with upward pressure &amp; instructs patient to inhale</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	
<p><b>19.</b> Tests for <b>Peritonitis</b> with <b>Rebound Tenderness</b></p> <ul style="list-style-type: none"> <li>• <b>Palpates McBurney's point slowly &amp; deeply, releasing pressure suddenly</b></li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	
<p><b>20.</b> Tests for <b>RLQ Peritonitis</b> with <b>Rovsing Sign</b></p> <ul style="list-style-type: none"> <li>• <b>Palpates LLQ slowly &amp; deeply, releasing pressure suddenly</b></li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	
<p><b>21.</b> Tests for <b>Retrocecal Appendicitis</b> with <b>Psoas sign</b></p> <ul style="list-style-type: none"> <li>• Instructs patient to actively flex leg at hip against resistance with knee flexed</li> <li>• Instruct patient to lie on left side and hyperflex right hip</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	

<p><b>22. Tests for Pelvic Appendicitis with Obturator sign</b></p> <ul style="list-style-type: none"> <li>• Position patient with hip &amp; knee flexed at 90 degrees, supporting ankle &amp; knee</li> <li>• Passively internally rotate leg at hip</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	
<p><b>23. Percusses bilateral Kidneys for CVA Tenderness</b></p> <ul style="list-style-type: none"> <li>• Places palmar surface of hand at costovertebral angle</li> <li>• Make fist with other hand, strikes first hand</li> <li>• Observes patient for signs of tenderness or pain</li> </ul> <p>Comments on:</p> <ul style="list-style-type: none"> <li>• Interpretation, significance</li> </ul>	
<p><b>24. Appropriately concludes the exam with the patient</b></p>	