

## Abdominal Exam

- Introduce yourself. Wash your hands. Lay the patient flat with one pillow under their head.

### General appearance

- Consciousness, comfort colour, posture
- Jaundice, pigmentation (eg haemochromatosis), xanthomata.
- Weight and wasting (weigh them). Mental state: hepatic encephalopathy.
- TPN/special drinks, IV lines, oxygen etc

### Hands:

- Nails: Leuconychia, clubbing. Fingers: Dupuytren's contracture. Xanthomata
- Palms: Palmar erythema, anaemia.
- Arthropathy. Hepatic flap (extend wrists and separate fingers for 15secs)

### Arms:

- Bruising, scratch marks, spider naevi, muscle wasting
- Blood pressure
- Axillae: acanthosis nigrans (GI Ca, lymphoma, endocrinopathies), lymphadenopathy.

### Face:

- Eyes: xanthomata, jaundice, anaemia, episcleritis/iritis, Kayser-Fleischer rings (occur very late).
- Mouth: breath (alcohol, fetor hepaticus), angular stomatitis (B6, B12, folate and Fe def),
- Peutz-Jeghers Syndrome, hereditary haemorrhagic telangiectasia, ulceration or candida.
- Tongue: coating (esp smokers), leucoplakia, glossitis, macroglossia.
- Parotids (swell due to fatty infiltration with alcohol, or tumour)

### Neck and Chest:

- Cervical lymph nodes and supraclavicular (esp on left in gastric ca).
- Gynaecomastia (liver disease, alcohol effect on Leydig cells, drugs (spironolactone, digoxin)),
- spider naevi (>1 is likely to be abnormal), body hair (loss of in men)

### Inspection

- Colour, scars, swelling, wasting deformity, movement (pulsation)
- Scars, veins (check flow direction), striae (ascites, preg, weight loss, Cushing's) Skin lesions/pigmentation (eg Shingles causes strange pains until it erupts)
- Distension
- Hernias (umbilical, inguinal, femoral). Visible lumps/organs
- Abdomen moves with respiration (look from side on to view asymmetry ? mass)
- Pulsations: abdominal aorta, pulsatile liver.

### Palpation and Percussion

- Warm hands. Ask if patient has abdo pain. Bend knees up to relax muscles if necessary.
- Light palpation: look at face. Feel for tenderness/peritonism, lumps. If tense can use their hand.
- Deep palpation for masses. Aorta, uterus, bladder (dullness on suprapubic percussion if enlarged).
- Percuss then palpate liver (span, hard/firm/soft, regular/irregular, tender/non-tender, pulsatile/non-pulsatile). Know Murphy's sign (cholecystitis) and Courvoisier's law (enlarged GB).
- Percuss then palpate spleen: enlarged 3-4X to palpate. Start inf to the umbilicus. Use both hands.
- Ballot kidneys (tumour or obstructed). Be able to distinguish between spleen and kidney.
- Percuss for shifting dullness in suspected ascites.

### Auscultation

- Bowel sounds: just below umbilicus - present, absent or tinkling
- Liver, spleen, renal, epigastrium (superior mesenteric a.) areas for rubs and bruits

Other

- Inguinal lymph nodes, hernial orifices, testicular exam, rectal exam.
- Legs: bruising, muscle wasting, oedema (check sacral as well)