

Abdominal Physical Exam

Procedure:

1. **Expose the Patient's Abdomen:** Ensure the patient's abdomen is fully exposed for proper examination.
2. **Observation:** Look for surgical scars, skin changes, stomas, distention, and visible peristalsis. Note specific signs like periumbilical ecchymosis (Cullen's sign) and flank ecchymosis (Grey Turner's sign).
3. **Inquire About Pain:** Ask the patient about any pain or tenderness in the abdomen.
4. **Palpation Sequence:** If pain is present in a specific area, palpate this area last. Instruct the patient to alternate between inflating and sucking in their abdomen to detect peritonism with minimal discomfort.
5. **Patient Positioning:** Kneel next to the patient and examine from bedside height.
6. **Light Palpation:** Gently palpate the abdomen in 9 areas, observing the patient's face for signs of discomfort.
7. **Deep Palpation:** Repeat palpation in the same 9 areas more deeply, continuing to observe the patient's facial expressions.
8. **Percussion Tenderness:** Assess for tenderness by percussing the abdomen.
9. **Auscultation for Bowel Sounds:** Listen for bowel sounds, typically starting in the right iliac fossa.
10. **Liver Examination:**
 1. Start palpation in the right lower quadrant (RLQ).
 2. Have the patient breathe out, place your hand on the abdomen, and feel for the liver edge as the patient breathes in.
 3. Gradually move your hand up to the right upper quadrant (RUQ) with each expired breath.
 4. Percuss from the RLQ to the RUQ to assess liver size.
 5. Auscultate over the liver for any bruits.
11. **Spleen Examination:**
 1. Similar to liver palpation, start in the RLQ.
 2. Feel for the spleen edge as the patient breathes in, moving your hand up to the left upper quadrant (LUQ).
 3. Percuss for spleen size.
12. **Kidney Palpation (Ballottement):**
 1. Place one hand under the patient's flank and press the fingertips of your other hand into the same flank from above.
 2. Feel for any enlarged kidney between your fingers.
 3. Repeat on the opposite side.
13. **Abdominal Aorta Assessment:** Press gently above the umbilicus on either side of the midline to feel for the abdominal aorta. Check for any pulsatile, expansile mass indicative of an aneurysm.

14. **Bladder Palpation:** Press gently into the abdomen from the umbilicus towards the pubic symphysis to palpate the bladder. If enlarged, percuss downward from the umbilicus to assess its size.

15. **Ascites Examination:**

1. If there's suspicion of ascites, perform the 'shifting dullness' test.
2. Percuss from the midline outwards, noting any dullness.
3. Have the patient roll onto their side, wait 30 seconds, then re-percuss. A change in percussion tone suggests the presence of peritoneal fluid.

This sequence provides a comprehensive approach to abdominal examination, ensuring a thorough assessment while minimizing discomfort for the patient.

Abdominal Examination Report

Patient Information

- Name: _____
- Age: _____
- Date of Examination: _____
- Examiner: _____

1. Observation

- Surgical Scars: _____
- Skin Changes: _____
- Stomas: _____
- Distention: _____
- Visible Peristalsis: _____
- Periumbilical Ecchymosis (Cullen's Sign):

- Flank Ecchymosis (Grey Turner's Sign):

2. Inquiry About Pain

- Reported Pain/Tenderness: _____
- Location of Pain: _____

3. Palpation

Light Palpation

Findings in 9 Abdominal Areas:

Right Upper Quadrant: _____

Epigastric Region: _____

Left Lateral Region: _____

Left Upper Quadrant: _____

Right Lower Quadrant: _____

Right Lateral Region: _____

Suprapubic Region: _____

Umbilical Region: _____

Left Lower Quadrant: _____

Patient's Facial Expressions: _____

Deep Palpation

Findings in 9 Abdominal Areas: Right Upper Quadrant: _____

Epigastric Region: _____

Left Lateral Region: _____

Left Upper Quadrant: _____

Right Lower Quadrant: _____

Right Lateral Region: _____

Suprapubic Region: _____

Umbilical Region: _____

Left Lower Quadrant: _____

Patient's Facial Expressions: _____

4. Percussion Tenderness

- Findings: _____

5. Auscultation for Bowel Sounds

- Bowel Sounds (Right Iliac Fossa): _____

6. Liver Examination

- Edge Detection: _____
- Size (Percussion): _____
- Bruits (Auscultation): _____

7. Spleen Examination

- Edge Detection: _____
- Size (Percussion): _____

8. Kidney Palpation (Ballottement)

- Right Kidney: _____
- Left Kidney: _____

9. Abdominal Aorta Assessment

- Pulsatile Mass: _____
- Expansile Mass: _____

10. Bladder Palpation

- Enlargement: _____

- Size (Percussion): _____

11. Ascites Examination (Shifting Dullness)

- Initial Percussion Findings: _____
Findings After Patient Repositioning: _____

Conclusion

- Overall Findings:

- Recommendations:


- Follow-Up Plan:

Examiner's Notes


(Additional observations, patient's reactions, or specific concerns)

Signatures

Examiner

- Name: _____
- Signature:  _____
- Date: _____

Patient (or Guardian)

- Name: _____
- Signature:  _____
- Date: _____
- Relationship to Patient (if applicable): _____