

## UW School of Medicine: Foundations of Clinical Medicine Physical Examination Checklist

Medical students will be required to perform a comprehensive physical examination. The Checklist below provides an overview of the physical examination tasks.

Student: Examiner: \_

Steps	Yes/No	Notes
<b>General appearance, skin, &amp; vital signs</b>		
<b>General appearance</b>	Observe general appearance	
<b>Skin</b>	Perform an integrated skin exam during entire exam	
<b>Vital Signs</b>	Pulse: measure radial pulse for 15 seconds	
	Measure systolic and diastolic blood pressure by auscultation	
	Respiratory rate: count the respirations for 30 seconds	
<b>HEENT</b>		
<b>General Impression</b>	Inspect size and shape of the head and the scalp	
	Inspect for symmetry, masses, and signs of trauma	
	Inspect the skin as you perform the HEENT exam	
	Note any difficulty with breathing or speech	
<b>Eyes</b>	Measure visual acuity	
	Inspect the eyelids, lashes, bulbar & palpebral conjunctiva, sclera, cornea, anterior chamber, and iris	
	Assess pupils	
	Perform ophthalmoscopy*	
<b>Ears</b>	Inspect auricle and mastoid	
	Examine auditory canals, TMs, and middle ear structures*	
	Assess hearing with finger rubbing	
<b>Nose</b>	Examine the external nose, nares, septum, and nasal cavities*	
<b>Mouth</b>	Inspect the lips, buccal mucosa, tongue, floor of mouth, palate, palatine tonsils, and posterior pharyngeal wall	
	Inspect the teeth and gums	
	Palpate parotid glands	
	Palpate temporomandibular joints (TMJ)	
<b>Neck</b>	Inspect the neck	
	Palpate the neck, including lymph nodes (anterior cervical, posterior cervical, and supraclavicular)	
	Palpate thyroid	
<b>Chest</b>		
<b>Inspection</b>	Observe respiratory effort and note any signs of respiratory distress	
	Inspect the skin of the posterior chest	
<b>Palpation</b>	Assess symmetry of respiratory excursion	

Steps	Yes/No	Notes
<b>Percussion</b>	Assess tactile fremitus	
	Percuss the chest posteriorly	
	Percuss the spine and the costovertebral angles	
<b>Auscultation</b>	Auscultate the chest using the diaphragm of the stethoscope posteriorly, laterally, and anteriorly	
<b>Cardiovascular</b>		
<b>Inspection</b>	Inspect and measure JVP	
	Inspect the precordium	
	Inspect the skin of the anterior chest and neck as you perform the CV exam	
<b>Palpation</b>	Palpate the apical impulse	
	Palpate LLSB for lifts	
	Palpate the carotid arteries	
<b>Auscultation</b>	Listen at each location with the diaphragm: RUSB, LUSB, LLSB, apex	
	Listen with the bell at the cardiac apex	
	Listen for bruits over each carotid artery	
<b>Peripheral Circulation</b>	Palpate each of the following pulses on each side: radial, femoral, DP, PT	
<b>Edema</b>	Inspect for pedal edema	
<b>Abdomen</b>		
<b>Inspection</b>	Observe the patient for discomfort	
	Inspect the abdominal contour	
	Inspect skin as you examine the abdomen	
<b>Auscultation</b>	Listen in one place with the diaphragm of the stethoscope	
<b>Percussion &amp; Palpation</b>	Percuss all four quadrants	
	Palpate all 4 quadrants	
	Percuss the liver	
	Palpate the lower liver edge	
	Palpate for an enlarged spleen	
	Palpate for inguinal LAD	
<b>Neurologic</b>		
<b>Mental Status</b>	Observe the level of consciousness	
	Observe speech and language	
	Assess orientation to person, place, and time	
	Assess short term memory	
<b>Cranial Nerves</b>	If not done in the HEENT exam, test visual acuity & visual fields for each eye (CN II)	
	If not done in the HEENT exam, test pupillary reaction (CN II and III)	
	Test eyelid opening (CN III)	
	Test extra-ocular movements (CN III, IV, VI), observing for nystagmus (CN VIII)	
	Test facial sensation & muscles of mastication (CN V)	
	Test muscles of facial expression (CN VII)	
	Test hearing (CN VIII)	
Test palatal rise to phonation (CN IX and X)		

Steps		Yes/No	Notes
	Test sternocleidomastoid & upper trapezius muscle strength (CN XI)		
	Test tongue symmetry and protrusion (CN XII)		
<b>Motor</b>	Assess bulk, tone, and strength: <ul style="list-style-type: none"> <li>● Upper extremities: Shoulder abductors, arm flexors &amp; extensors, wrist flexors &amp; extensors, finger abductors and flexors</li> <li>● Lower extremities: Hip flexors, abductors &amp; adductors; knee flexors &amp; extensors, foot dorsiflexors &amp; plantar flexors</li> <li>● Pronator drift</li> </ul>		
<b>Reflexes</b>	Upper extremity: biceps, triceps, & brachioradialis		
	Lower extremity: patellar & Achilles		
	Plantar reflex		
<b>Sensation</b>	Romberg test		
<b>Cerebellum</b>	Finger-to-nose test		
	Heel-to-shin test		
	Gait		

\*This portion of the exam may be deferred until after Immersion. Check with your FCM faculty at your site for details.