

# MASTER GUIDE: GENERAL EXAMINATION (Clinical Medicine)

Compiled exhaustive reference for ward rounds, OSCE preparation, and MD Medicine clinical examinations.

## 1. Appearance of the Patient

- Assessment begins the moment the patient comes under observation.
- Evaluate severity of illness: very ill / ill / comfortable.
- Look for distress (pain, dyspnea), posture, hygiene, body language.

## 2. Consciousness and Cooperation

- Assess level of consciousness: alert, drowsy, confused, unconscious.
- Check orientation to time, place, person.
- Assess cooperation during questioning and examination.

## 3. Build

- Evaluate skeletal structure relative to age and sex.
- Categories: lean, muscular, obese, asthenic.

## 4. Height and Body Proportions

- Height measured using stadiometer.
- If abnormal proportions suspected measure:
  - Arm span (middle finger to middle finger with arms outstretched).
  - Upper segment (vertex to pubic symphysis).
  - Lower segment (pubic symphysis to heel).
- Normal adult: arm span  $\approx$  height and upper segment  $\approx$  lower segment.

## Clinical Associations of Abnormal Proportions

- Infantile proportions (upper segment  $>$  lower segment): achondroplasia, cretinism, juvenile myxoedema.
- Arm span  $>$  height: Marfan syndrome.

## 5. Weight

- Measured preferably in the morning, empty stomach, minimal clothing.
- Used to calculate Ideal Body Weight (IBW) and nutritional status.

## **6. Nutrition**

- Assess muscle mass and subcutaneous fat.
- Categories: emaciated, obese, average nutrition.

## **7. Temperature**

- Measured orally, axillary, or rectal.
- Normal approximately 37°C.

## **8. Pulse**

- Examine radial pulse first.
- Assess: rate, rhythm, volume, character, arterial wall condition.
- Normal adult pulse: 60–80/min.
- Other pulses to examine: carotid, brachial, femoral, popliteal, dorsalis pedis.

## **9. Respiration**

- Observe rate, rhythm, and type of respiration.
- Normal adult respiration ~18/min.
- Types: thoracic and abdominal.

## **10. Blood Pressure**

- Measure using palpatory then auscultatory method.
- If radial pulses unequal measure BP in both arms.

## **11. Anaemia**

- Look for pallor in lower palpebral conjunctiva, tongue, soft palate, palm, nail beds.

## **12. Jaundice**

- Best seen in natural light.
- Sites: sclera, bulbar conjunctiva, soft palate, skin.
- Clinically visible when serum bilirubin > 2 mg/dL.

### **13. Cyanosis**

- Bluish discoloration due to reduced hemoglobin.
- Central cyanosis: tongue, lips, mucosa (e.g., congenital heart disease, COPD).
- Peripheral cyanosis: nail beds, nose, ear lobes (e.g., heart failure, circulatory failure).

### **14. Lymph Nodes**

- Common sites: cervical, supraclavicular, axillary, epitrochlear, inguinal.
- Assess size, shape, consistency, tenderness, mobility, matting, fixation.

### **Important Lymph Node Clues**

- Tuberculosis: matted nodes.
- Malignancy: hard irregular nodes.
- Syphilis: shotty nodes.
- Virchow's node (left supraclavicular): gastric carcinoma.

### **15. Jugular Venous Pressure**

- Patient positioned at 45°.
- Observe internal jugular vein.
- Normal JVP  $\leq 3-4$  cm above sternal angle.
- Raised JVP seen in right heart failure, SVC obstruction.

### **16. Thyroid Examination**

- Inspect neck during swallowing.
- Palpate from behind the patient.
- Assess size, nodules, consistency, tenderness.
- Thrill or bruit may suggest hyperthyroidism.

### **17. Clubbing**

- Bulbous enlargement of terminal phalanx.
- Signs: increased nail curvature, loss of nail bed angle, spongy nail bed, Schamroth sign.

### **18. Edema**

- Excess interstitial fluid accumulation.
- Test by pressing over bony prominence (e.g., medial malleolus) for 5 seconds.

- Types: pitting and non-pitting.
- Common causes: heart failure, nephrotic syndrome, cirrhosis, hypoproteinemia.
- Edema often occurs when albumin <2.5–3 g/dL.

## **19. Skin Examination**

- Observe color: pallor, jaundice, cyanosis, hyperpigmentation.
- Pigmentation disorders: vitiligo, albinism, Addison disease.

## **Common Skin Lesions**

- Macule – flat discoloration.
- Papule – raised solid lesion.
- Vesicle – small fluid filled lesion.
- Pustule – pus filled lesion.
- Ulcer – loss of skin tissue.
- Scar – fibrous tissue replacing normal skin.

## **20. Secondary Sexual Characters**

- Assess hair distribution, breast development, body proportions, voice.

## **Important Endocrine Disorders**

- Klinefelter syndrome: gynecomastia, eunuchoid body habitus.
- Turner syndrome: short stature, webbed neck, amenorrhea.
- Kallmann syndrome: hypogonadism with anosmia.

## STANDARD ORDER FOR GENERAL EXAMINATION PRESENTATION

Step	Examination Component
1	Appearance
2	Consciousness
3	Build
4	Height
5	Weight
6	Nutrition
7	Temperature
8	Pulse
9	Respiration
10	Blood Pressure
11	Pallor (Anaemia)
12	Icterus
13	Cyanosis
14	Clubbing
15	Lymph Nodes
16	Edema
17	Jugular Venous Pressure
18	Thyroid
19	Skin
20	Secondary Sexual Characters