Physical Exam

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Disclosures

Husband works as employee for Genomic Health

Overview

- Review key components of physical exam
- Review strategies to improve patient comfort

Key Systems of Physical Exam

Remember Bio-Psycho-Social Model

Gender

Disability

Physical illness

Genetic vulnerability

Immune function

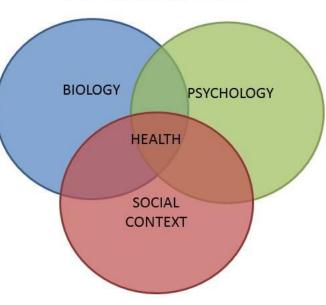
Neurochemistry

Stress reactivity

Medication effects

- o General
- o Psych
- Neuro
- o MSK
- o Gyn

BIOPSYCHOSOCIAL APPROACH TO UNDERSTANDING HEALTH



Learning/memory Attitudes/beliefs Personality Behaviours Emotions Coping skills Past trauma

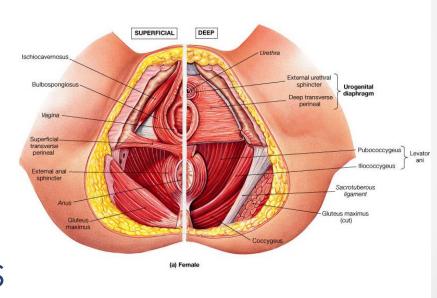
Social supports
Family background
Cultural traditions
Social/economic status
Education

General

- Assessment of energy level
- Assessment of interaction with provider
- Important to take into account who is in room
 - Partner
 - Chaperone
 - Trainee
- Make sure patient understands reasons for any extra people and that you allow for joint decision making on who is present for exam

Some Principals for Exam

- The "Layered Approach"
 - Surface Layer
 - Nerve Layer
 - Myofascial Layer
 - Orthopedic Layer
 - o Organ Layer
 - Body wide systems



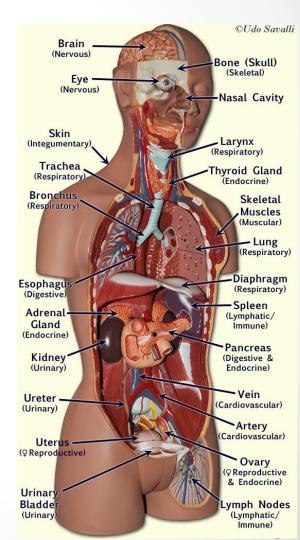
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What Does this Mean?

- Anatomy!
- Most Important Sex organ=Brain!

However you must always do a complete physical exam that includes the genitals

Most women with sexual complaints have a physical findings



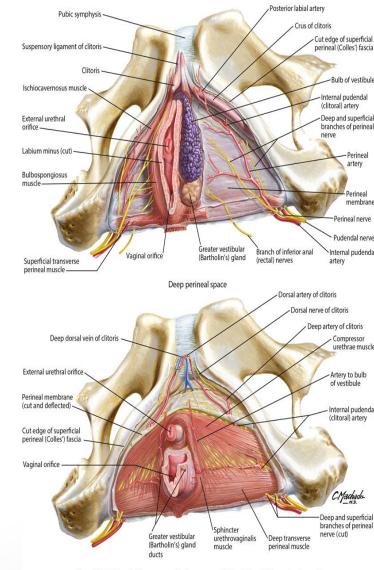
Layered Approach

- History is not everything
- Need to exam the superficial skin
- Examine the nervous system
- Examine the pelvic floor muscles
- Consider the role of bones and joints
- Feel the internal organs
- Look for systemic signs of biologic causes of female sexual dysfunction

Low Testosterone

Low Estrogen

But remember hormones are not everything



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Key Principles for Comfort During Physical Exam

- Need to carefully examine vulvar surface from above the mons pubis to behind to the anus.
- Think about lithotomy stirrups that support the patient's knees if you have access in your exam room
- Use a handheld magnifier or colposcope

Principals of GU Exam

- The patient can be your best assistant:
- She can point out her painful areas and feel in control as she participates in and observes your exam
- Have her open her labia and retract her clitoral hood herself
- All skin and mucosa should be inspected for abnormalities and pain
- Use vulvar diagrams to record findings
- Can also take pictures (with permission)

Role of Bimanual Exam

- Important to determine if BME will add info
- Even if sx external PFMD will often be a trigger
- Do not necessarily need to feel the uterus/adnexa
- However palpation of pelvic floor is important if sx include pain
- If complaint is related only to desire and thorough hx does no suggest a pain component at all, if may be reasonable to defer internal exam if all external findings are nml

Thanks for Your Attention



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