Abdominal Assessment
Breast Exam
Testicular Exam

Structure and Function
Subjective Data—Health History Questions
Objective Data—The Physical Exam
Abnormal Findings

Structure and Function
Surface landmarks
  - Borders of abdominal cavity
  - Abdominal muscles
Internal anatomy (viscera)
  - Solid viscera
    • Liver
    • Pancreas
    • Spleen
    • Adrenal glands
    • Kidneys
    • Ovaries
    • Uterus

Structure and Function, cont.
Internal anatomy (viscera), cont.
  - Hollow viscera
    • Stomach
    • Gallbladder
    • Small intestine
    • Colon
    • Bladder

Abdominal wall divided into four quadrants
  - Right upper (RUQ)
  - Left upper (LUQ)
  - Right lower (RLQ)
  - Left lower (LLQ)

Subjective Data—Health History Questions
Appetite
Dysphagia
Food intolerance
Abdominal pain
Nausea/vomiting
Bowel habits
Past abdominal history
Medications
Nutritional assessment

Objective Data—The Physical Exam
Preparation
  - Lighting and draping
  - Measures to enhance abdominal wall relaxation

Equipment needed
Stethoscope
Small centimeter ruler
Skin-marking pen
Alcohol swab

8 Objective Data—The Physical Exam, cont.
Inspect the Abdomen
- Contour
- Symmetry
- Umbilicus
- Skin
- Pulsation or movement
- Hair distribution
- Demeanor

9 Objective Data—The Physical Exam, cont.
Auscultate the Abdomen
- Bowel sounds
- Vascular sounds (bruits)

10 Objective Data—The Physical Exam, cont.
Percuss the Abdomen
- General tympany
- Liver span
  - Usual technique
  - Scratch test

11 Objective Data—The Physical Exam, cont.
Palpate the Abdomen
- Measures to enhance muscle relaxation
- Light palpation
- Deep palpation
- Bimanual palpation
- Normally palpable structures
- Liver
  - Usual technique
  - Hooking technique
- Special procedures
  - Rebound tenderness (Blumberg sign)

12 Structure and Function
- Surface anatomy
  - Location of breasts on chest wall
  - Axillary tail of Spence
  - Nipple and areola
- Internal anatomy
  - Glandular tissue
    - Lobes, lobules, and alveoli
    - Lactiferous ducts and sinuses
  - Fibrous tissue
    - Suspensory ligaments or Cooper’s ligaments
    - Adipose tissue
- Four quadrants of the breast

13 Subjective Data—Health History Questions
Breast
- Pain
- Lump
- Discharge
Objective Data—
The Clinical Breast Exam (CBE)

- Rash
- Swelling
- Trauma
- History of breast disease
- Surgery
- Self-care behaviors
  - Perform breast self-examination
  - Last mammogram

- Axilla
  - Tenderness, lump, or swelling
  - Rash

Objective Data—
The Clinical Breast Exam (CBE), cont.

Breasts—Inspect
- General appearance
- Skin
- Nipple
- Maneuvers to screen for retraction

Objective Data—
The Clinical Breast Exam (CBE), cont.

Breasts—Palpate
- Position
- Technique of palpation
- Expected breast tissue findings among various age groups
- Nipple
- Bimanual palpation
- If a lump is present, note
  - Location
  - Size
  - Shape
  - Consistency
  - Mobility
  - Distinctness
  - Nipple retraction
  - Overlying skin
  - Tenderness
  - Lymphadenopathy

Teach Breast Self-Examination (BSE)
- American Cancer Society Handout
- Be familiar with normal breast tissue
- Best time
  - Start in 20s
  - Nontender breasts
- Report breast changes
- Describe correct technique
- Return demonstration
18 Structure and Function
Scrotum
● Testis
● Rugae
● Cremaster muscle
● Epididymis
● Vas deferens

19 Subjective Data—
Health History Questions
● Scrotum and Testes
  – TSE
  – Lump or swelling on testes
  – Change in size of scrotum
  – Bulge or swelling in the scrotum

20 Objective Data—
The Physical Exam
● Preparation
  – Position
  – Apprehension regarding exam
● Equipment needed
  – Gloves
  – Flashlight

21 Objective Data—
The Physical Exam, cont.
● Scrotum—inspect and palpate
● Skin
● Testis
● Epididymis
● Spermatic cord
● Any mass
  – Note characteristics
  – Transillumination

22 Objective Data—
The Physical Exam, cont.
● American Cancer Society recommendations
  – TSE not recommended
  – Testicular exam part of routine cancer-related checkup
● Teach testicular self-examination
  T = Timing
  S = Shower
  E = Examination points