

How to Conduct a Physical Exam Via Telemedicine

Transcript of the Video

Hi, I'm Dr. Tania Elliott, and I'm going to walk you through how to do a physical examination through telemedicine.

It was William Osier that said that medicine is all about the art of observation, so the first thing I do after I connect with the patient and consent them to do the video consultation is evaluate their general appearance. Are they ill appearing? Do they have pallor? Are they diaphoretic? Are they flushed? Then, if I feel like I need vital signs, I ask them if they have a thermometer at home, and just to go ahead and take their temperature and to show me what the reading is. Then, I can document what the result is. Some patients also have a home blood pressure cuff, so that's another thing I'll ask them to go ahead and get to take their blood pressure and pulse if it's relevant. If patients don't have one, and there's somebody that you see chronically and you'd like to have that as a regular vital sign, you can just ask them to go ahead and pick up a straightforward blood pressure cuff and then show you the results on the reading and you can document that. Respiratory rate is something that you can count as the patient is speaking with you.

Next, let's do the head, ears, eyes, nose and throat examination. Is the head normocephalic and atraumatic? Next, look at the eyes. Are the pupils equal and reactive to light? You can ask them to look up, down, to their left, to their right, and diagonally. With that, you're also documenting aspects of the neurologic exam. You can actually do a cranial nerve exam as well, with the exception of the olfactory nerve, which is often also deferred in the office. If you want to look in the back of the throat, have them open their mouth, stick out their tongue, and do a big "ah" into the camera. If for some reason you can't see, you can ask them if they're on their smartphone to just adjust their angle. I also sometimes will ask patients to grab a flashlight or use a flashlight on their smartphone to be able to see down into the back of their throat.

We can also evaluate the sinuses. I tell my patients, "Okay, now you are going to be my hands for me. Take two fingers, tap here and here, and let me know if there's any pain. Use a moderate amount of pressure. Same thing here and here, let me know if there's any pain or any difference on either side." Then, I can document whether or not there's any maxillary or frontal sinus tenderness. Now again, the only difference then, when they're in the office with you, is the patient is being your hands for you, but the response is still subjective, and you can document that on your physical examination.

The next thing I ask patients to do if I'm concerned and I need to evaluate for lymphadenopathy, is I teach them where the sternocleidomastoid is on either side of the neck, take two fingers, or one finger depending on the how big their hand is, and feel for something that's pea sized or greater. Down the anterior and posterior chain. Now, sometimes patients get this; sometimes they don't. However, if it is a large lymph node, they should be able to feel it, and then they can actually show you exactly where it is and whether or not they can grab on to it, and whether it appears to be mobile or fixed. I also will ask them to feel here and here to evaluate whether or not there's any submandibular tenderness.

The next piece is the respiratory exam. Now, a lot of times doctors will say to me, "Well, you can't do the respiratory exam because you don't have a stethoscope." Well, there are aspects of the respiratory exam that you can do through a video visit without a stethoscope. The first thing I do is ask my patients

to take a big, deep breath. Now I see whether or not they're coughing. In the middle of that I see whether or not there's an expiratory wheeze, whether or not that's relevant for you and in the context of the patient. I also evaluate whether or not the patient is using any accessory respiratory muscles for breathing: nasal flaring, use of any neck muscles, any paradoxical breathing where the abdomen is moving differently from the way that the chest is moving, and then all of that can be documented.

In the next part of this video series, I'll walk you through how to do an abdominal exam, extremity exam, and musculoskeletal exam all through video. The last piece I'll say is with regard to a skin exam, when you're thinking about using a telemedicine platform, make sure that you're able to upload a photo during the visit. That's what I found to be most effective. If a patient has a rash that they'd like to show you, they can switch over to the camera mode, take a photo, and upload the photo. If you're using a non-HIPAA compliant software now during this time of COVID-19, that's fine. They can take a photo on their camera and then send it to you via text message. Then you can zoom in to see whether or not there's any pathology there. If you're concerned about hives or whether the rash is blanching, you can have them do that in real time via video. Ask them to press down on the lesion, hold up the area close to the camera, and then see whether or not it's blanching.

That's all for now. Thanks for watching.