



**Longitudinal Group Abdominal Examination**

**Directions**

The following are necessary to:

- perform a comprehensive, competent physical examination of all organ systems: optimal patient and examiner position, appropriate patient draping, and not performing techniques through clothing.
- provide an effective patient-centered explanation: use of plain language to describe inspection, palpation, percussion, auscultation, and physical examination findings.

<b>Abdominal Examination</b>	<b>Omitted</b>	<b>Incorrect</b>	<b>Correct</b>
<b>Position &amp; drape patient appropriately</b>			
• Supine, on exam table with footrest extended	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Abdomen visible, chest & pelvis covered	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Inspect abdomen</b>			
• Abdomen surface, contour, & movement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Auscultate abdomen with stethoscope DIAPHRAGM</b>			
• Bowel sounds in at least one area	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Abdominal aorta	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Renal arteries bilaterally	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Palpate abdomen with light palpation (1-handed technique)</b>			
• Right upper quadrant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Left upper quadrant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Left lower quadrant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Right lower quadrant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Palpate abdomen with deep palpation (2-handed technique)</b>			
• Right upper quadrant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Left upper quadrant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Left lower quadrant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Right lower quadrant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Palpate abdominal structures (2-handed technique)</b>			
• Abdominal aorta	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Liver edge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Spleen tip	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Percuss abdomen</b>			
• Right upper quadrant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Left upper quadrant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Left lower quadrant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Right lower quadrant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Liver span in right midclavicular line	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Costovertebral angles bilaterally	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>