

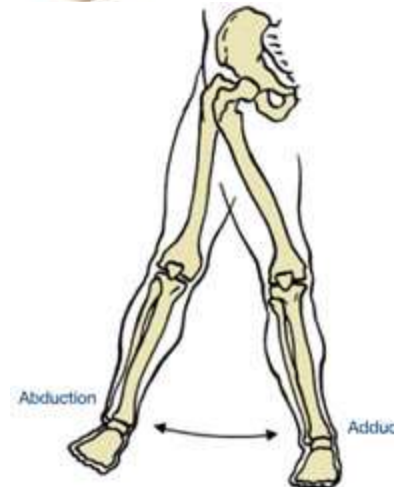
Physical examination

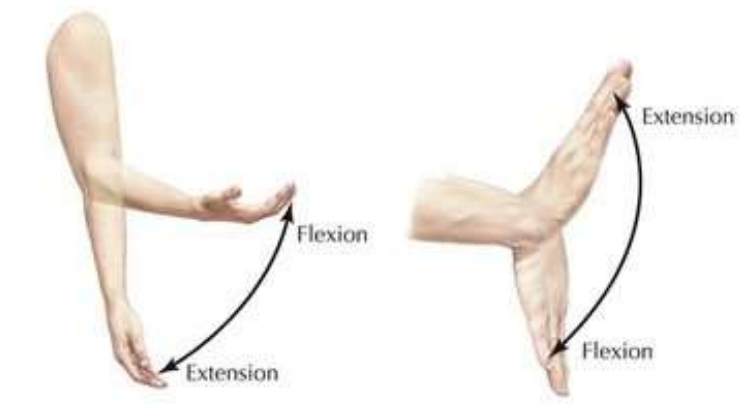
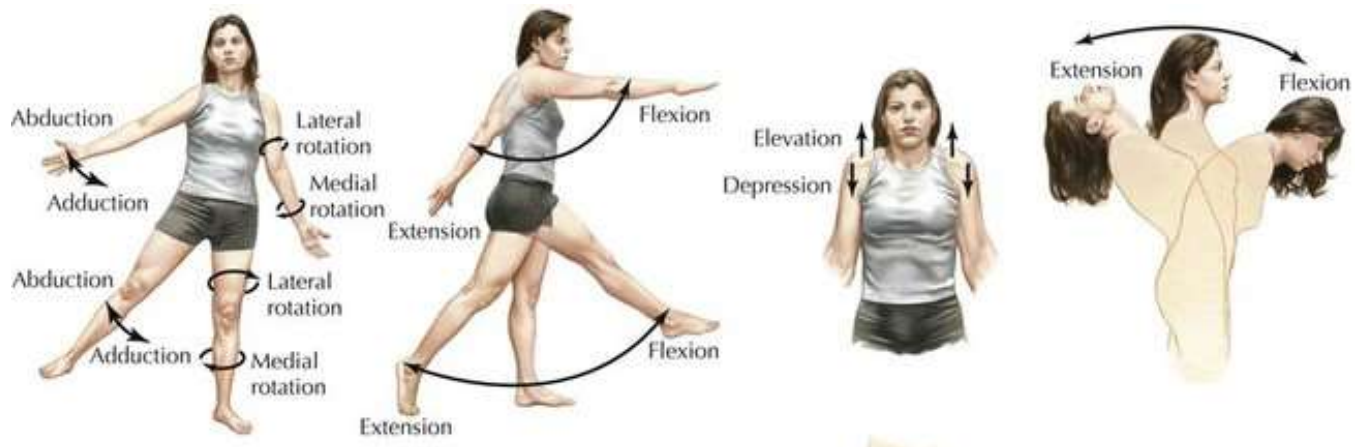
- 1) Examine the patient's overall appearance for features such :
 - Pallor, rash, skin tightening and hair changes.
 - Special postures

- 2) Use Look , Feel and move method

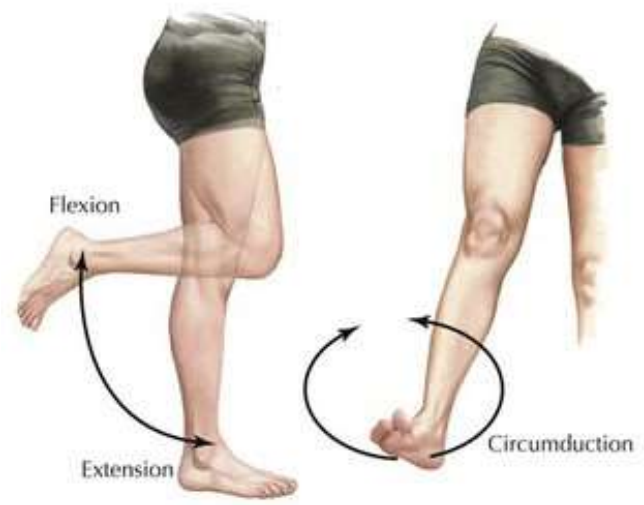
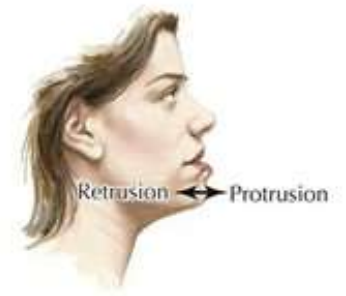
Physical examination

- Look (inspect for any deformity and abnormality)
- Feel (palpate each structure)
- Move (active and passive)



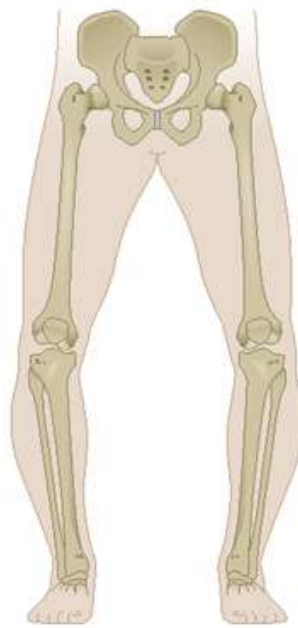


C. Machado
— M.D.





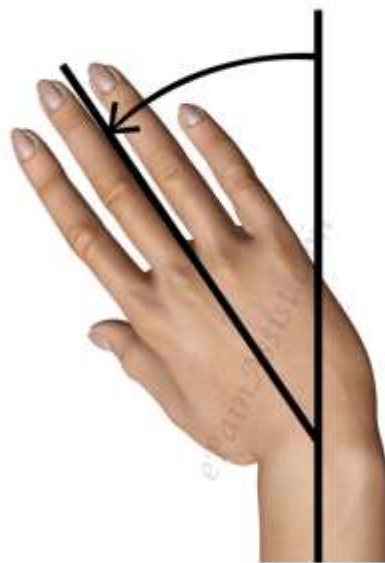
Normal



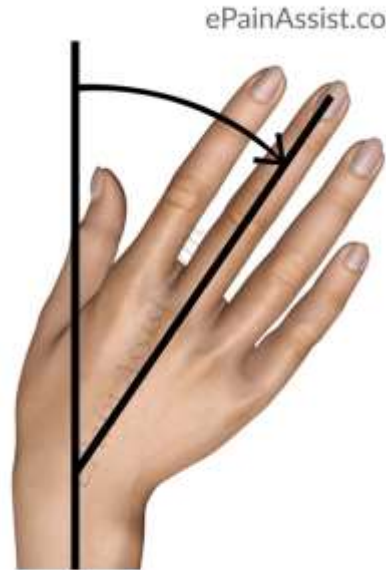
Varus



Knock knees (valgus)



Radial Deviation



Ulnar Deviation

ePainAssist.com

Common findings !

Skin, nail and soft tissues :

General hints

Psoriasis :



- Systemic sclerosis:

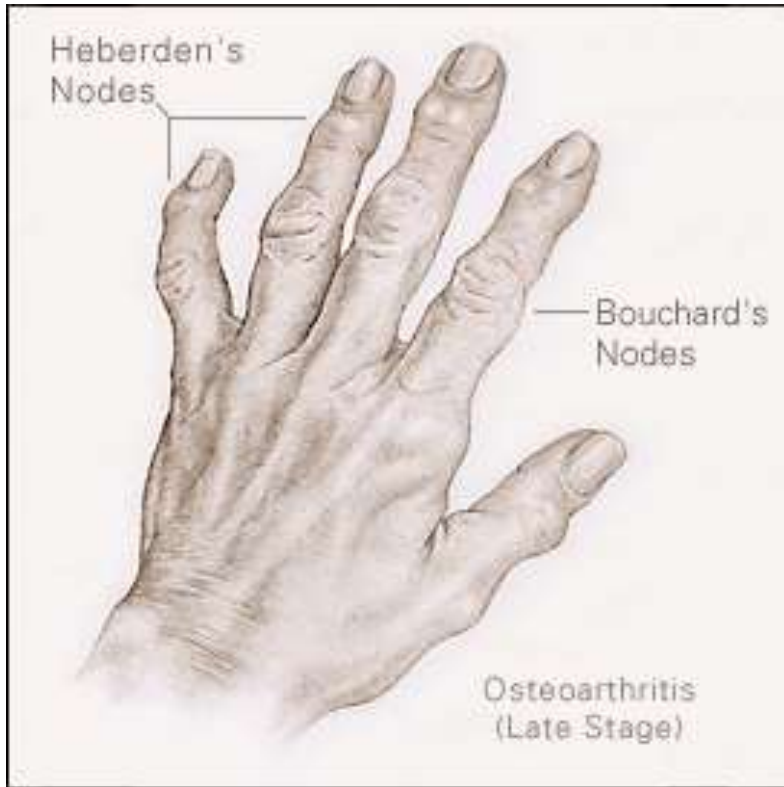


Systemic lupus erythematosus:



Nodules

Osteoarthritis



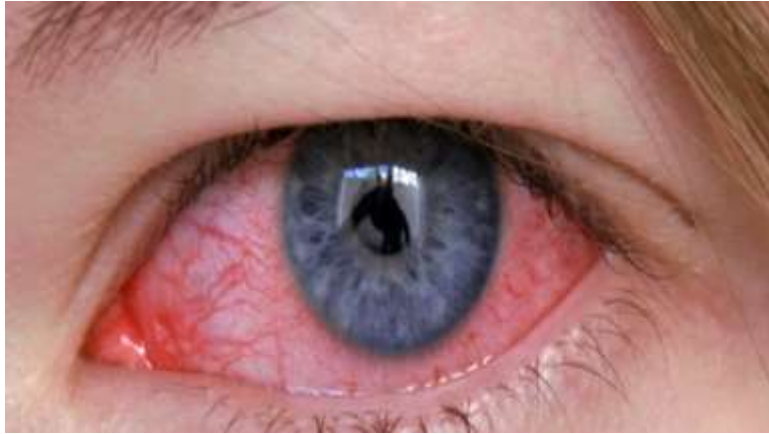
Rheumatoid arthritis



- Gout Tophi (Monosodium urate monohydrate)



- Eye presentations:



Reactive arthritis

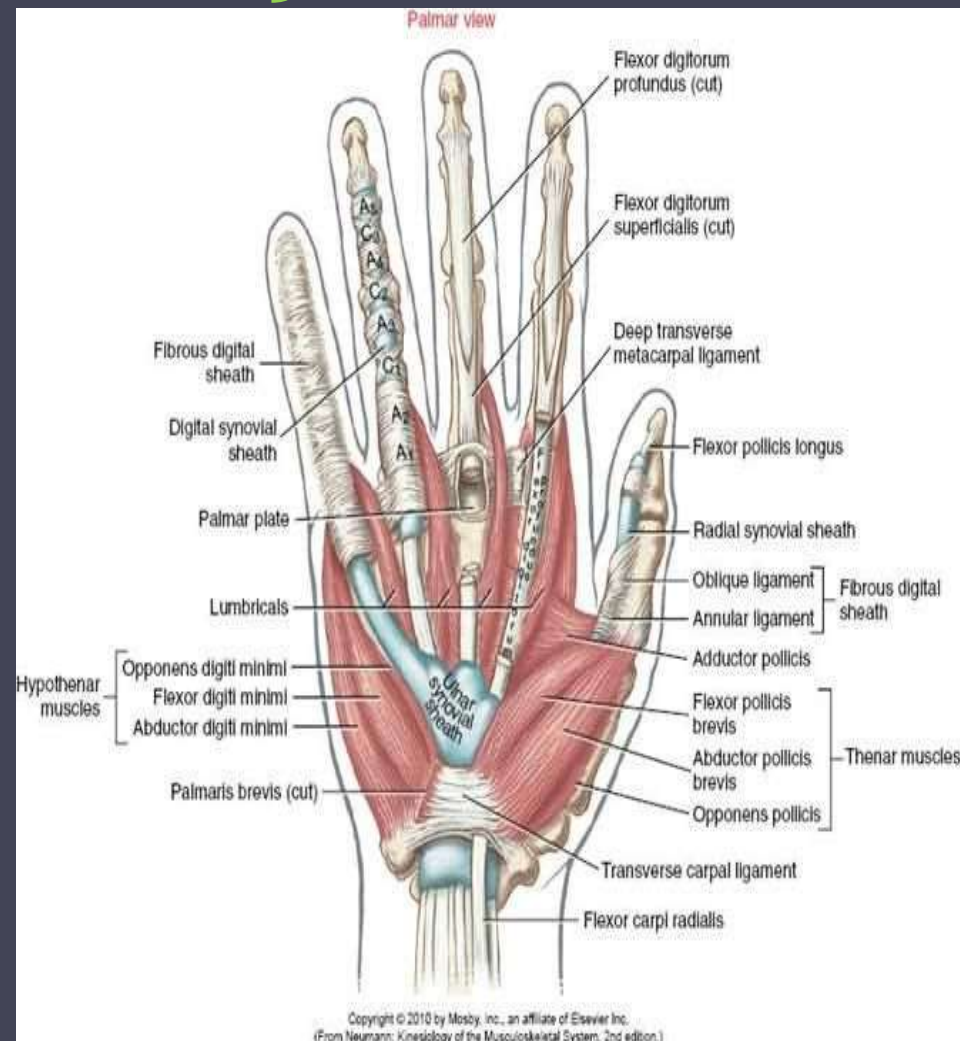


Osteogenesis imperfecta

Hand and Wrist

Hand and wrist joint

- Wrist joint: metacarpocarpal, intercarpal, ulnocarpal, radiocarpal
- PIP and DIP hinge joints
- MCP joint allow adduction and abduction in addition to flexion/ extension

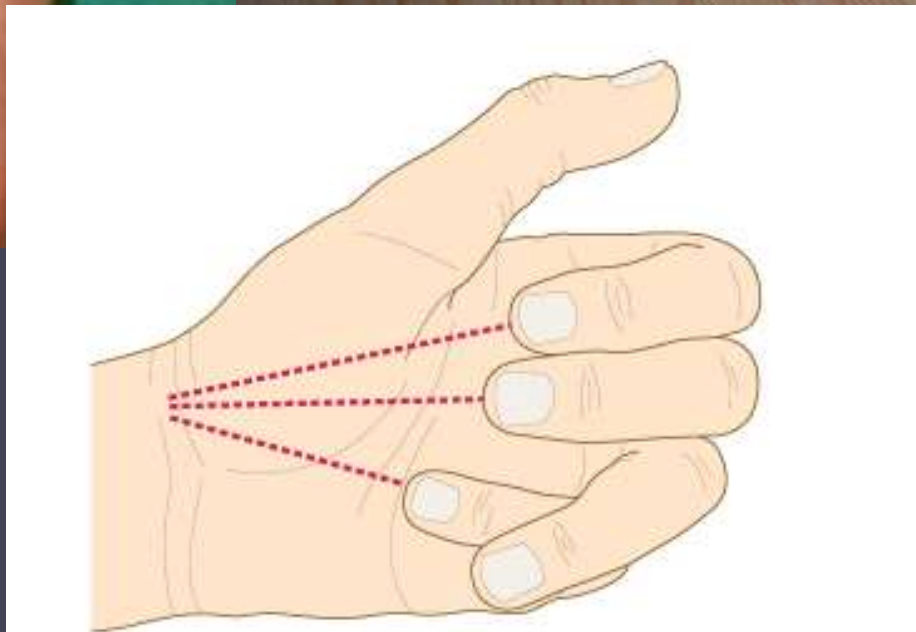
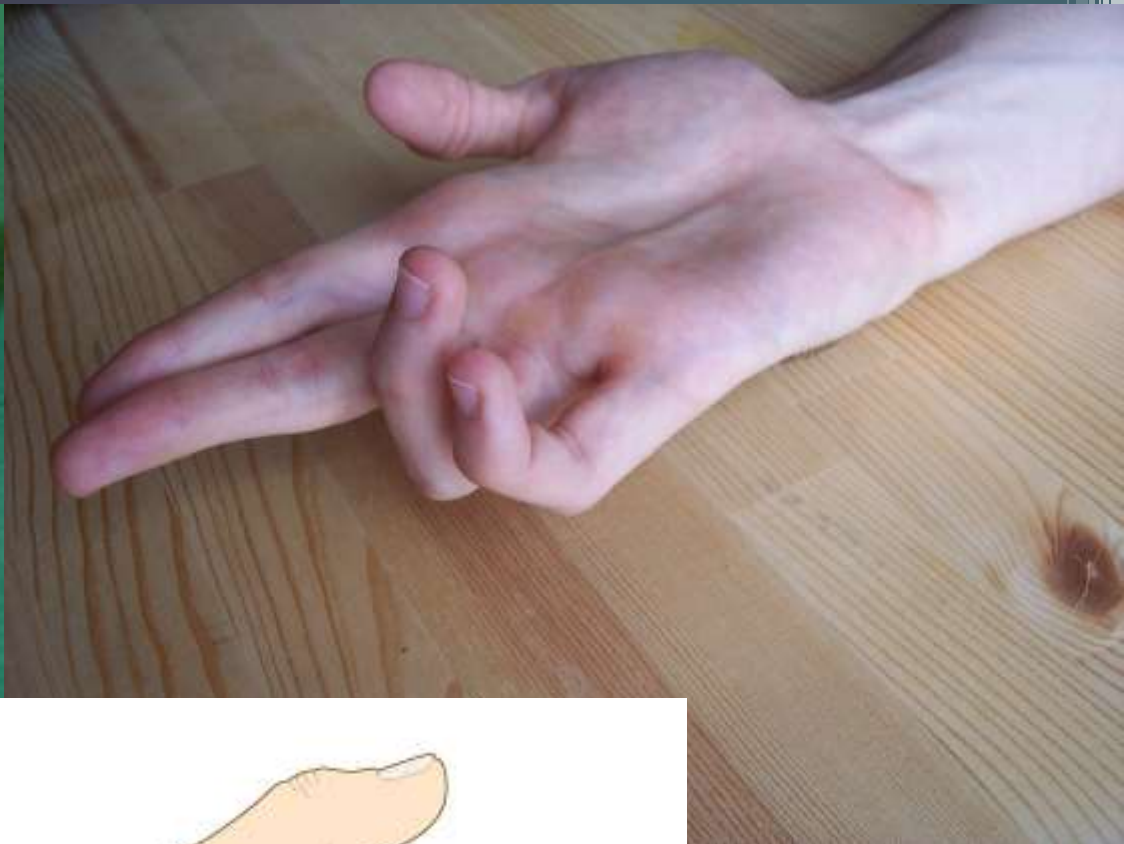


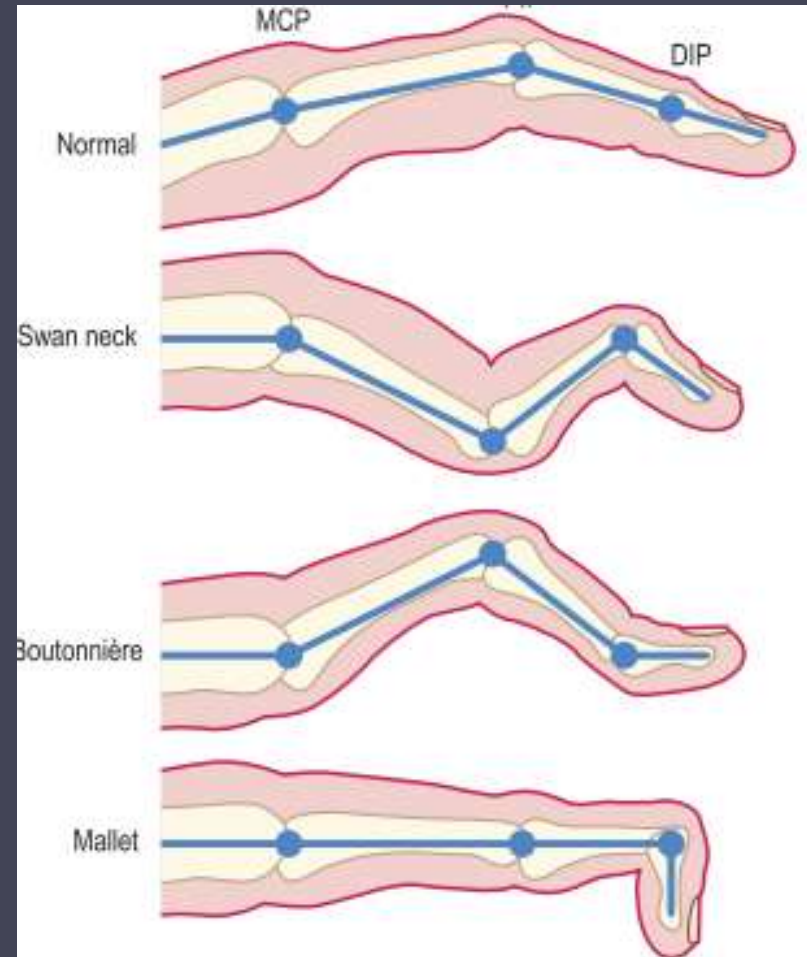
- The patient will often localize complaints of pain, stiffness, loss of function, contractures, disfigurement and trauma.
- If symptoms are more vague or diffuse, then consider referred pain or a compressive neuropathy (e.g. median nerve in carpal tunnel syndrome).
- Functionality is very important

Look:

- *Colour change*
- *Swelling*
- *Deformity*
- *Small muscle wasting*
- *Vasculitis of the fingers*
- *Palmar erythema*
- *Nail changes*
- *Ulnar deviation*





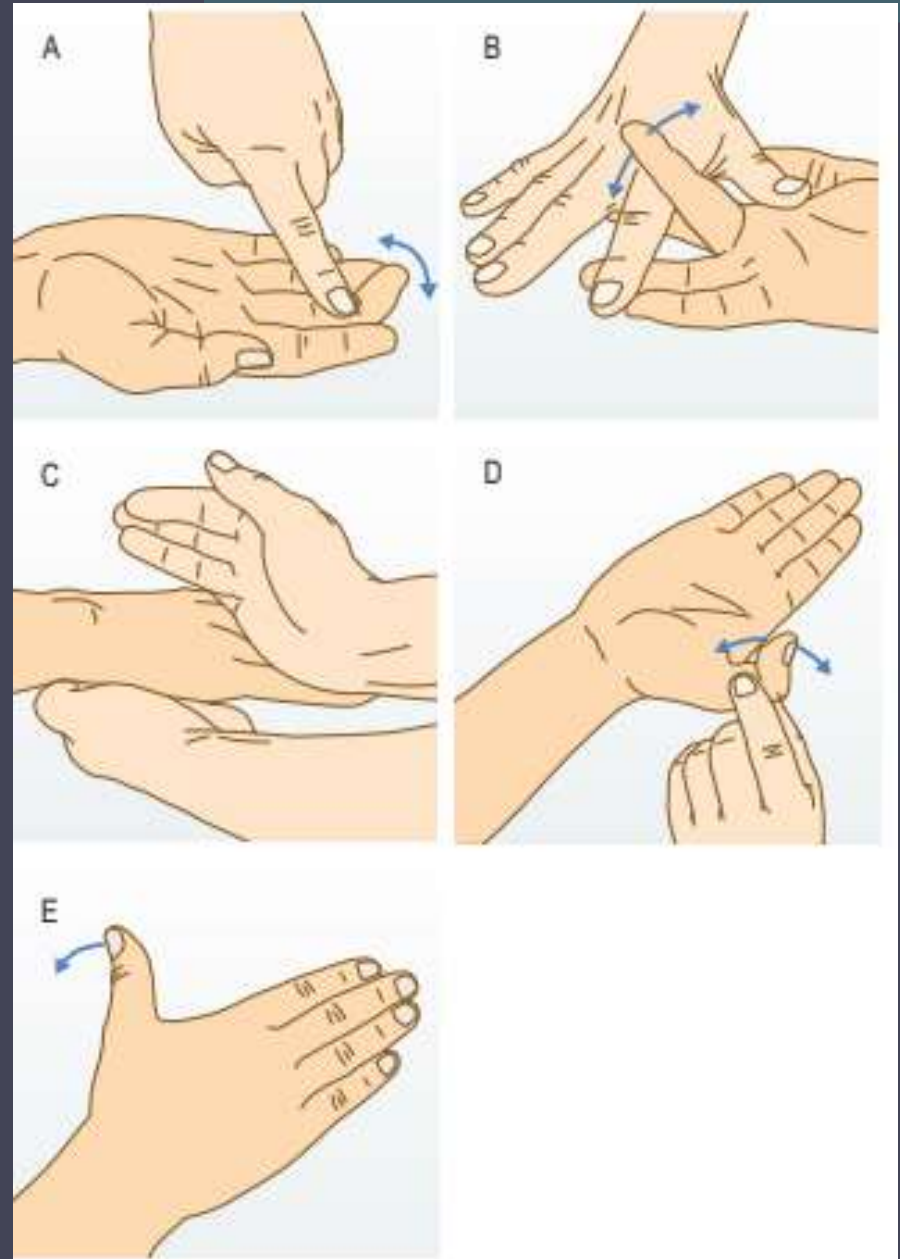


Feel

- *Temperature*
- *Tenderness along joints and tendons*
- *Hard swellings: Heberden's and Bouchard's nodes of OA.*
- *Soft spongy swellings suggesting synovitis, palpate joints and flexor tendon sheaths (swelling and tenderness).*
 - Trigger fingers.
 - De Quervain's tenosynovitis. >> Finkelestein test.

Move

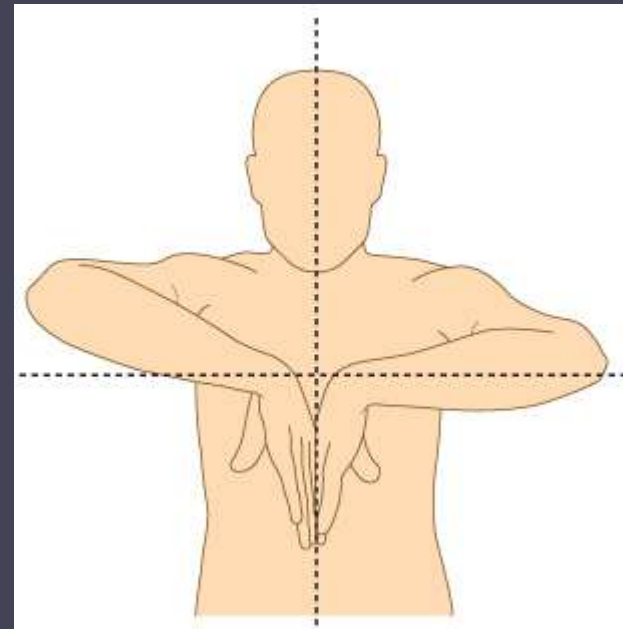
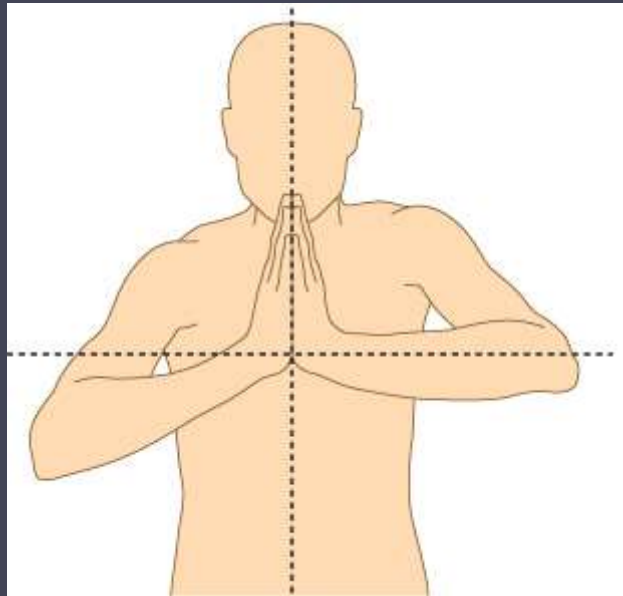
- Wrist and small joints.
- Don't forget to test grip.
- Assess function of each tendon alone in patients with cut wounds.
- Thumb on tabel?



Carpal tunnel syndrome

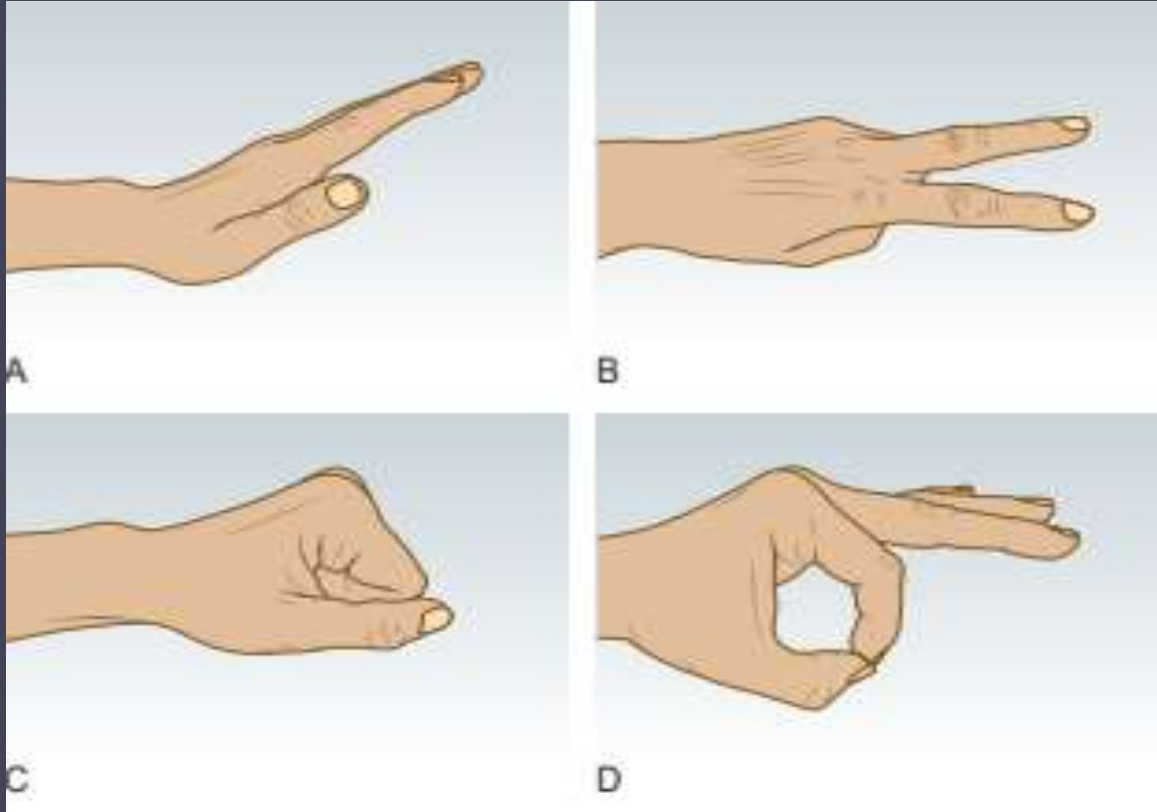
3 tests?

Most sensitive test is the compression test



Median, ulnar and radial nerve exam

- Paper-scissors-stone
- OK sign for AIN



- AIN: anterior interosseous nerve

The Knee Joint

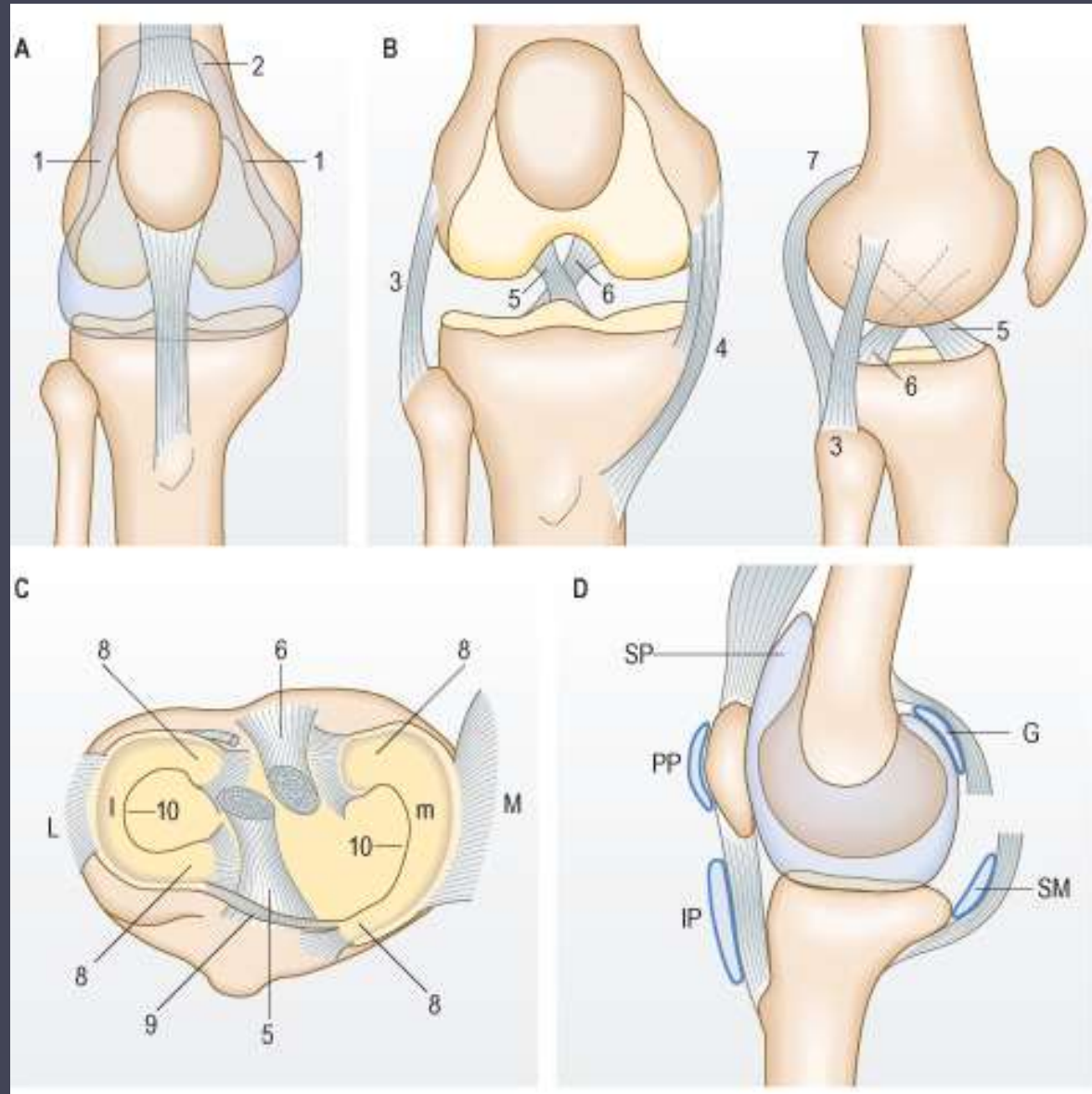
Hinge joint

Extensor apparatus

Capsule

Stability

Bursae





Knee Joint Anatomy

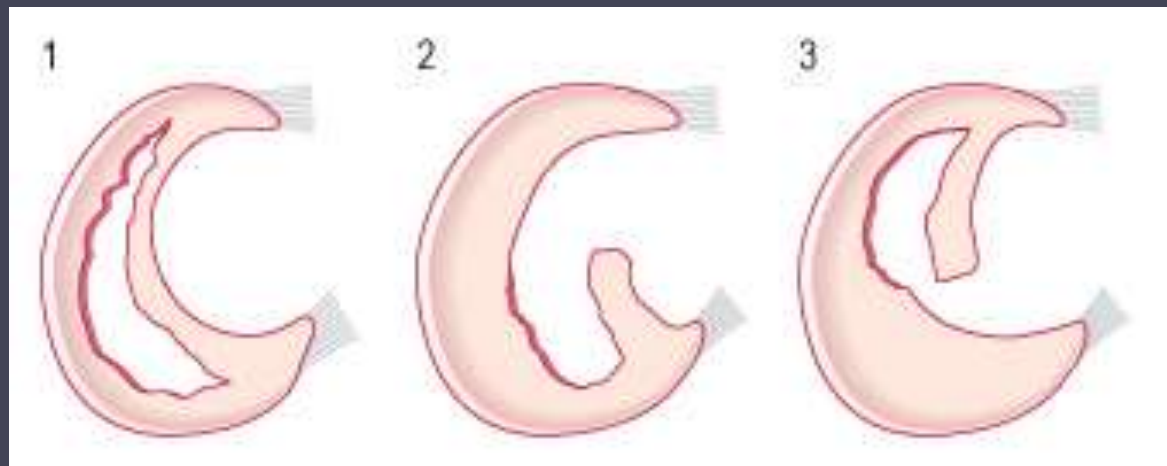
Abnormal Findings

Pain

Swelling

Locking

Giving way



Examination Sequence

Look:

- ❖ Gait
- ❖ Scars, sinuses, redness or rashes
- ❖ Deformities
- ❖ Muscle wasting (measure)
- ❖ Leg length discrepancy
- ❖ Flexion deformity
- ❖ Swelling: effusion, bursae
- ❖ Baker's cyst Vs. aneurysm







Examination Sequence

Feel:

Warmth

Joint lines, patella , tibial tuberosity

Patellar tendon

Effusion

Parapatellar hollow

The 'ripple test' (Bulge, Milking)

The patellar tap

Synovitis: sponginess

Joint lines



Move . . .

- Active flexion and extension:

Supine

0-140

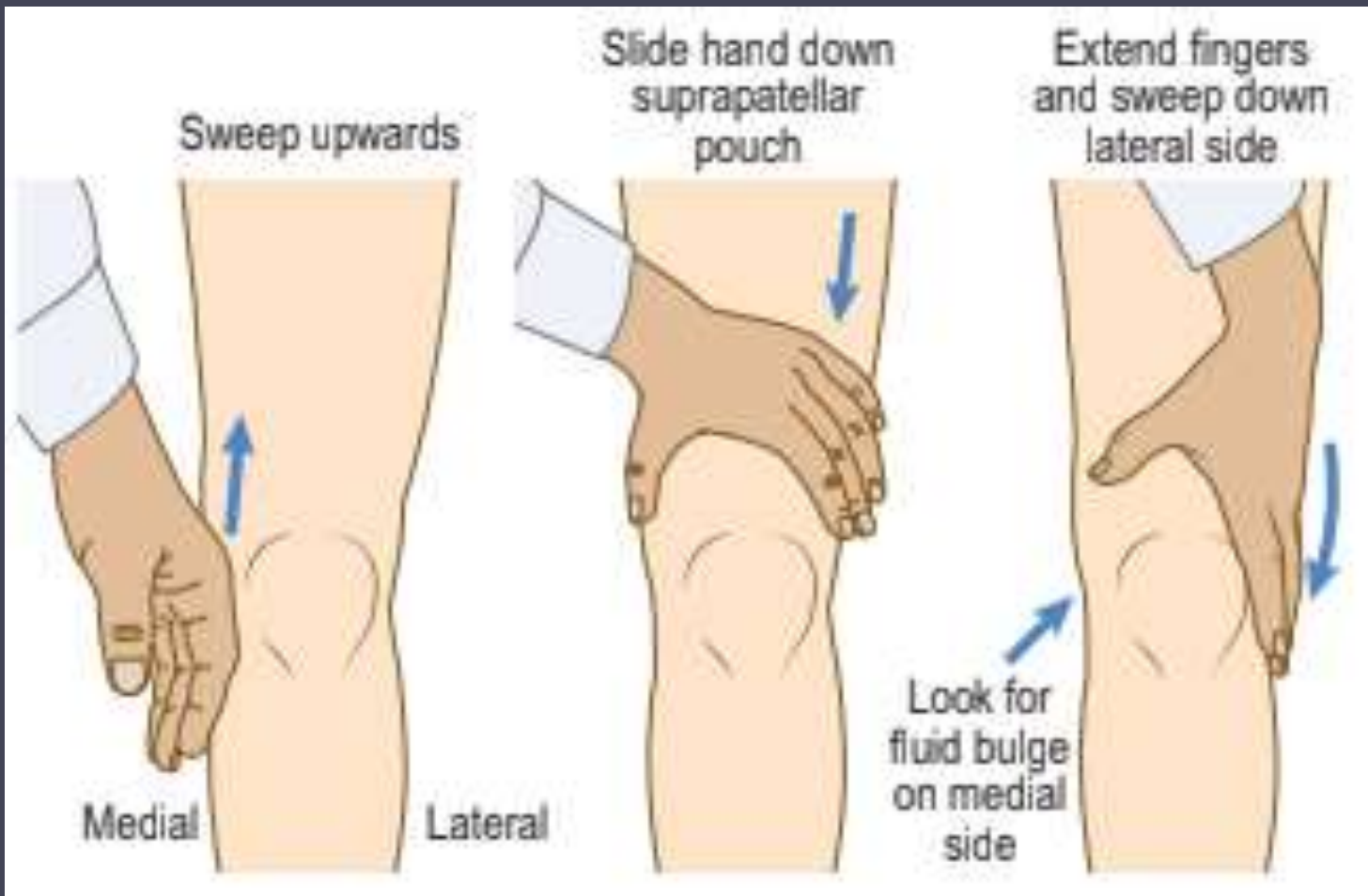
Feel for crepitus

- Extensor apparatus (SLR) Vs. Fixed flexion deformity

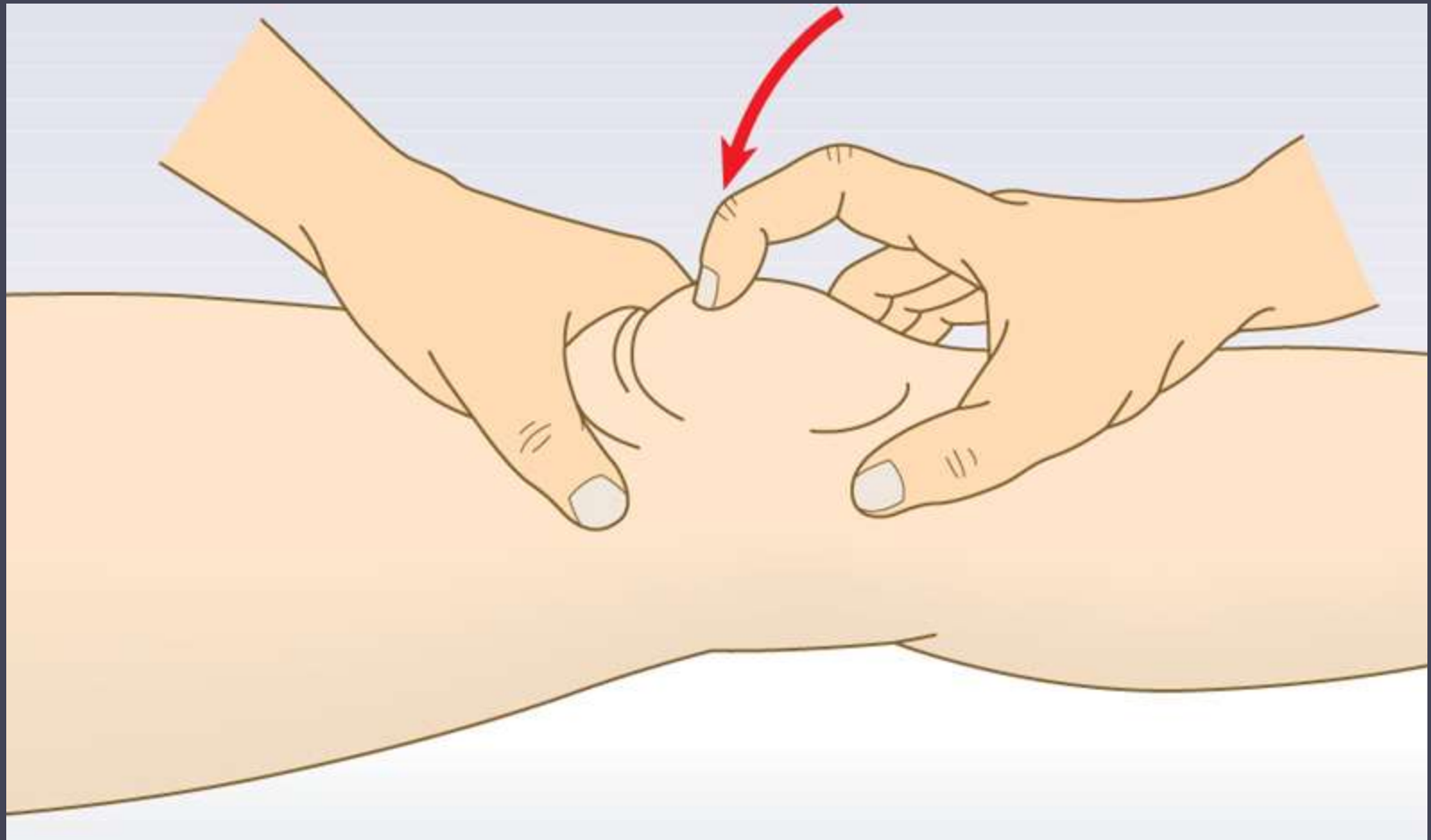
- Passive flexion and extension:

Genu recurvatum-10 is normal

Ripple Test



Patellar Tap



Special Tests:

Collateral Ligaments:

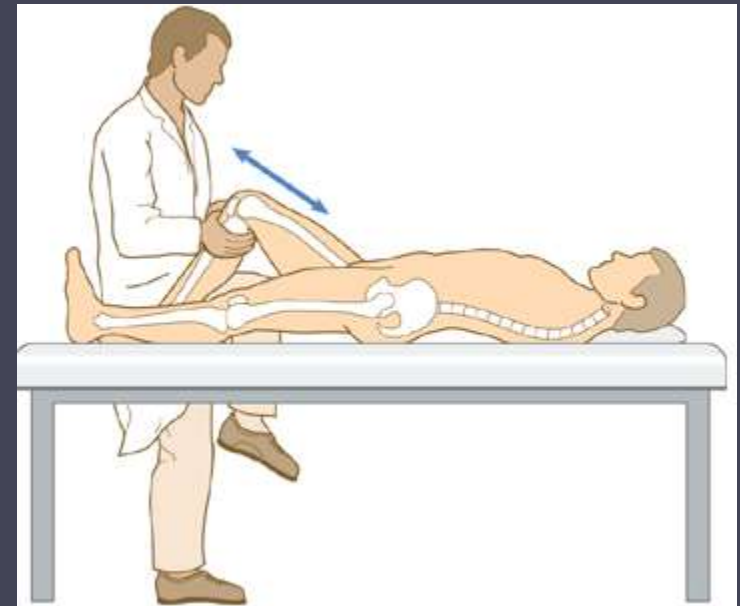
Varus & valgus
stress tests
At 20 degrees
flexion



Special Tests:

**Cruciate
Ligaments:**

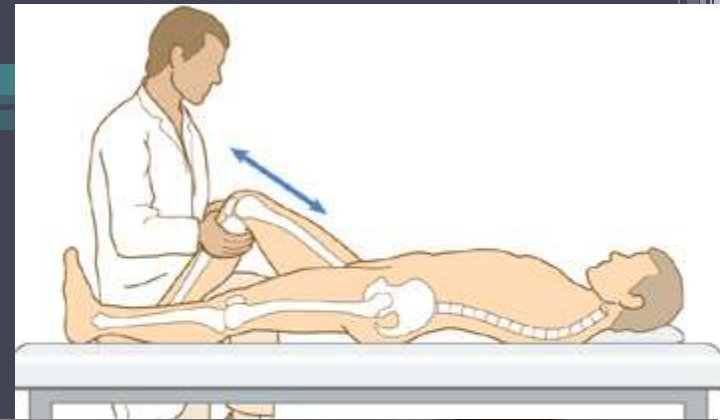
**Anterior
drawer (ACL)**



Special Tests:

**Cruciate
Ligaments:**

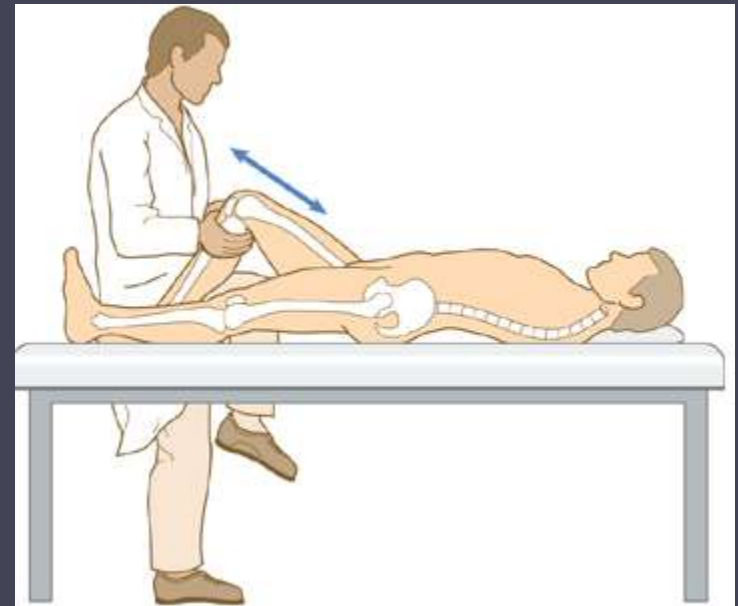
**Anterior
drawer (ACL)
At 20 and 90**



Special Tests:

**Cruciate
Ligaments:**

**Posterior
drawer (PCL)**



Special Tests:

Medial Meniscal tears:

Medial McMurray test



Special Tests:

Lateral Meniscal tears:

Lateral McMurray test



THANK
YOU

