



What Does Your Doctor Do?

A Brief Introduction to Clinical Examinations

Introduction

Medicine is not only a science; it is also an art. Clinical examinations are something of an arcane art, by which the doctor's care is delivered. On the other hand, medicine should be a science in which an evidence-based approach cannot be emphasised enough.

The cornerstone of clinical practice remains to be history taking and clinical examinations. It is of utmost importance for doctors to distil the

useful information from the history and assess the important physical signs in a clinical examination in order to formulate a working diagnosis as well as to assemble a problem list and management plan.

Good doctors demonstrate interest, empathy and concern. They possess the appropriate clinical skills and attitude towards sick children. However, a health visit is sometimes not only stressful and frightening to the children, but also induces anxiety to their parents. In

order to avoid the unnecessary stress to the family, it is important to have a basic understanding of the clinical approach.



Common Clinical Scenarios

There are some common clinical scenarios in which children are seen by their doctors. These include acute illnesses, such as upper respiratory tract infection, and chronic medical problems, such as metabolic diseases. In addition, children with developmental delay, for example, slow to talk or walk, are often referred to doctors for assessment. Furthermore, some behaviour problems, such as hyperactivity, may require medical attention. Last but not the least, children often get their shots in a clinic, like the annual influenza vaccination.

What Worries Do The Children Have About Clinical Examinations?

It is not uncommon that children are afraid of going to their doctors. Health visits can also be a challenging experience for the whole family. It is often due to the association with bad memories of being sick.

One of the reasons for anxiety is the misunderstanding of clinical examinations. The children may not understand what the doctor will do in the clinical examination and treatment. The uncertainty fuels anxiety resulting in a negative impact on the emotional control and adjustment. In addition, the children may have separation anxiety as they worry about being separated from their parents during a health check.



Another big source of fear is needle phobia. Fear of pain is a common reason for anxiety. The children may also worry about pain during the physical examination, for example, when palpating the tender abdomen.

Last but not the least, the doctor's manner in history taking and during the physical examination, such as eye contact, tone, and gesture, determines the doctor-patient relationship. The children only put their trust in doctors demonstrating empathy and concern based on a good doctor-patient relationship. In fact, a clinical examination is likely unrewarding unless a rapport is established.

General Principles of History Taking

The aim of history taking is to establish the relevant facts which are always the most fruitful source of diagnostic information to formulate a working diagnosis. The interview environment should be as welcoming and unthreatening as possible to avoid unnecessary fear for the children.

Full details of the presenting symptoms are required in chronological order, including the onset, duration, site, radiation, character, severity and aggravating or relieving factors. Parents and doctors must listen to the children's complaints with an open mind in their own words and at their own pace.



The past medical history, including any serious illnesses and operations in the past, is important. In addition, the maternal obstetric problem, delivery, perinatal problem and immunization record are also useful in pediatrics cases. A review of different systems and key development milestones give a better understanding of the general health condition. Furthermore, the drug and allergy history should also be explored in detail.

Many diseases run in families as they share genes and hence diseases. A proper family history is therefore essential to understand any potential inherited disease affecting the children.

Last but not the least, the social history gives a comprehensive understanding of the children and their families. The relevant information includes socioeconomic status, parental occupation, education, housing, family relationship, smoking and alcohol etc. Such a snapshot of social background is crucial as some illnesses or conditions are permeated by adult behavioral problems, like drug abuse and parental psychiatric disorders.

General Principles of Physical Examinations

Careful observation is always the key to success. Good doctors must be observant, like a detective. Doctors perhaps need the character of Sherlock



Holmes, rather than the intelligence of Albert Einstein. Inspection before touching the child provides useful information on the growth, nutritional status, severity of illness, level of hygiene and care etc. In addition, there are certain important measurements, such as weight, height, body temperature, blood pressure, pulse and respiratory rate.

There is a formal systematic approach in a physical examination. For every single system, such as the respiratory system, the examination begins with inspection, followed by palpation, then percussion and auscultation.

In an abdominal examination, for example, the doctor begins with careful inspection on the general appearance and then focuses on the abdomen to look for any scar, abdominal distension, local swelling or protrusion. After explanation, relaxing the patient and encouraging him to breathe gently, the doctor then palpates the abdomen in a systematic fashion, through the four abdominal quadrants, to examine the abdominal organs including liver, spleen and kidneys. It is followed by percussion, if necessary, to delineate the border and size of organs, and to detect fluid in the abdominal cavity. Now at last the stethoscope is required for auscultation, by which children may find the sounds produced in their body,



such as heart sounds, quite interesting to hear.

How Can We Help Children in a Health Visit?

First, scheduling a health visit conflicting with the child's meals or nap time should be avoided. In addition, too much warning about the upcoming appointment may lead to unnecessary worry. Instead, reassurance and explanation help to relieve the fear. Before the health visit, parents can familiarise the child, for example, with the tools in a toy doctor kit.

If the child has questions concerning the clinical procedure, such as whether a shot will be given, we

should answer truthfully, reassure that it will only hurt for a moment and emphasise that it will protect the child against sickness.

Moreover, the child usually feels more secure if the parents, instead of another care provider, accompanies him / her to the doctor's appointment. During the clinical examination, the doctor or parents should avoid dominating the child. They should be confident, but gentle. The doctor should make friends with the child and establish a rapport with the family. The child should be encouraged to express the symptoms and any negative feelings about the illness and clinical procedure.



A simple explanation to what the doctor is about to do and what the child is asked to do, in a simple and understandable language, is essential to gain the cooperation and confidence of the child. A short mock examination, such as auscultating a teddy's hand, may allay a little child's fear. Furthermore, the physical examination should start at a non-threatening area, such as the hand. Any unpleasant procedure should be left until last.

Finally, the child should be encouraged to express their feelings and discuss any pleasant aspects, like getting stickers, gummy or a small toy after the visit. Good behaviour should be appreciated and rewarded.

Conclusion

Having understood the common reasons for fear, the general principles of clinical examinations and the ways to relieve anxiety, a health visit could be more rewarding and a better experience for children.

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