

The physical exam comes after the history. This is where the doctor pokes and prods and listens to things like your heart. When I first started examining patients, especially women, the hard part for me was - gasp - the breast exam. So that we could receive proper feedback on our technique, the medical school hired women to get breast examined by twenty or so medical students. In my case, the exposed female was about forty. The exam went OK, I thought. "Great circular motion", she remarked matter-of-factly as my hand trembled like a leaf in the wind. That was the only feedback that I got.

My goal here is not to describe the entire physical exam. I'm sure that would bore you to tears. In fact, most of the exam *is* highly technical and boring, with the exception of the breast exams, which for some reason people seem to enjoy hearing about.

The physical exam begins with the vital signs, which are pulse (heart rate), blood pressure, respiratory rate (breaths per minute), and temperature. Vital signs are vital because if any of them are too low or too high, then your patient will get sick and die soon. After the vitals, most physicians approach the exam by system: cardiovascular, respiratory, gastrointestinal, genitourinary, nervous, and musculoskeletal. The table below gives some examples of what each system is and how doctors examine them.

System	Description	Exam Examples
Cardiovascular	heart, blood vessels, lymph nodes	listen to heart; check pulses in wrists, arms, feet, etc.; palpate lymph nodes under chin and on the neck
Respiratory	lungs	listen to chest (front and back), thump on chest
Gastrointestinal	mouth, esophagus, stomach, small intestine, colon, rectum, anus	look in mouth, listen to abdomen for bowel sounds, palpate abdomen for tenderness or masses, rectal exam
Genitourinary	penis, testicles, prostate, vagina, uterus, ovaries, breasts	testicular exam, breast exam, rectal exam, pelvic exam

Nervous	brain, nerves, eyes, ears	check pupil response to light, ocular motion, look in ears, check skin sensation, memory, reflexes
Musculoskeletal	muscles, joints, spine	check flexibility and strength, joint exam

There are a couple of things that you should know about the exam. Doctors perform the exam in different orders, depending on the doctor and the history elicited from you. For instance, some docs do the cardiovascular exam first, others examine your ears first; some docs do the exam by system whereas some docs do the exam starting at the head and progressing downward; and so on. If your doctor knows you well, he may simply focus the exam on parts of you that your history indicated may be out of order. Some docs don't even do pelvic exams. But whatever the case, most physicians will want to check out your heart, lungs, abdomen, and head (eyes, ears, nose, and throat) every time you visit. Although the order of the exam may differ from doctor to doctor, your doctor will likely examine you the same way each time. Why? Otherwise, she might forget something. Since docs have to see a lot of patients, efficiency is key. Thus, many MDs will ask you to change into a gown or remove your shirt ahead of time.

There are a set number of things that a doctor examines, noting what is important, regular, or irregular in the chart. Many times, what you think is weird or drastically wrong is just plain normal. I'm not saying that you shouldn't tell your doctor about such things - in fact, I would argue that you should. But don't be surprised that, in general, most of what you are is totally fine. Remember that doctors have seen hundreds of patients every week, and you've seen only you and, at best, a small number of other people. So what's out of your range is often not out of your doctor's