PHYSICAL EXAMINATION

Mrs. N. is a short, overweight, middle-aged woman, who is animated and responds quickly to questions. She is somewhat tense, with moist, cold hands. Her hair is well groomed. Her color is good, and she lies flat without discomfort.

Vital signs: Ht (without shoes) 157 cm (5'2"). Wt (dressed) 65 kg (143 lb). BMI 26. BP 164/98 right arm, supine; 160/96 left arm, supine; 152/88 right arm, supine with wide cuff. Heart rate (HR) 88 and regular. Respiratory rate (RR) 18. Temper-ature (oral) 98.6 °F.

Skin: Palms cold and moist, but color good. Scattered cherry angiomas over upper trunk. Nails without clubbing, cyanosis.

Head, Eyes, Ears, Nose, Throat (HEENT):

Head: Hair of average texture. Scalp without lesions, normocephalic/atraumatic (NC/AT).

Eyes: Vision 20/30 in each eye. Visual fields full by confrontation. Conjunctiva pink; sclera white. Pupils 4 mm constricting to 2 mm, round, regular, equally reactive to light. Extraocular movements intact. Disc margins sharp, without hemorrhages, exudates. No arteriolar narrowing or A-V nicking.

Ears: Wax partially obscures right tympanic membrane (TM); left canal clear, TM with good cone of light. Acuity good to whispered voice. Weber midline. AC > BC.

Nose: Mucosa pink, septum midline. No sinus tenderness.

Mouth: Oral mucosa pink. Several interdental papillae red slightly swollen. Dentition good. Tongue midline, with 3×4 mm shallow white ulcer on red base on undersurface near tip; tender but not indurated. Tonsils absent. Pharynx without exudates.

Neck: Neck supple. Trachea midline. Thyroid isthmus barely palpable, lobes not felt.

Lymph nodes: Small (<1 cm), soft, nontender, and mobile tonsillar and posterior cervical nodes bilaterally. No axillary or epitrochlear nodes. Several small inguinal nodes bilaterally, soft and nontender.

Thorax and lungs: Thorax symmetric with good excursion. Lungs resonant. Breath sounds vesicular with no added sounds. Diaphragms descend 4 cm bilaterally.

Cardiovascular: Jugular venous pressure 1 cm above the sternal angle, with head of examining table raised to 30o. Carotid upstrokes brisk, without bruits. Apical impulse discrete and tapping, barely palpable in the 5th left interspace, 8 cm lateral to the midsternal line. Good S1, S2; no S3 or S4. A II/VI medium-pitched midsystolic murmur at the 2nd right interspace; does not radiate to the neck. No diastolic murmurs. Breasts: Pendulous, symmetric. No masses; nipples without discharge.

Abdomen: Protuberant. Well-healed scar, right lower quadrant. Bowel sounds active. No tenderness or masses. Liver span 7 cm in right midclavicular line; edge smooth, palpable 1 cm below right costal margin (RCM). Spleen and kidneys not felt. No costovertebral angle tenderness (CVAT).

Genitalia & Rectal: Deferred

Extremities: Warm and without edema. Calves supple, nontender. Peripheral vascular: Trace edema at both ankles. Moderate varicosities of saphenous veins both in lower extremities. No stasis pigmentation or ulcers. Pulses (2+ = brisk, or normal

Musculoskeletal: No joint deformities. Good range of motion in hands, wrists, elbows, shoulders, spine, hips, knees, ankles. Neurologic: Mental Status: Tense, but alert and cooperative. Thought coher-ent. Oriented to

person, place, and time. Cranial nerves: II to XII intact. Motor: Good muscle bulk and tone. Strength 5/5 throughout. Cerebellar: RAMs, point-to-point movements intact. Gait stable, fluid. Sensory: Pinprick, light touch, position sense, vibration, and stereognosis intact. Romberg negative.