

Anatomy of a Pediatric Clinical Visit

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Objectives

- Engaging effectively with children and families in clinical encounters
- Key components of the pediatric visit
 - History
 - Physical exam
 - Assessment
 - Plan

Meeting the Patient

- Observe first
- Smile, introduce self
- Is parent anxious?
- Is child fearful?
- Begin history with easy questions
- Begin examination with observation of developmental milestones
- Explain what you will do before you do it

Taking the History

Birth History

- Birth weight
- Mode of delivery
- Maternal health
- Maternal ART use
- Infant ART use
- Neonatal complications

Taking the History

Developmental History

- Gross motor milestones
- Fine motor milestones
- Language
 - Receptive
 - Expressive
- Problem solving

Taking the History

Past Medical History

- Illnesses
 - Pneumonia
 - Ear infections, drainage
 - Fevers
 - Diarrhea
- Hospitalizations
- Medications
- Immunizations

Taking the History

Family History

- Who is living? Current health status?
- Who has died? Cause of death?
- HIV status?

Parents

Grandparents

Siblings

Taking the History

Social History

- Who lives in household?
- Who is child's guardian?
- Where does child live?
 - Water supply
 - Food supply
- School

Physical Exam

- Approaching a child
 - Perform least frightening elements first
 - Enlist child's cooperation
- Growth parameters
 - Weight
 - Length or height
 - Head circumference
- Vital Signs
 - Respiratory rate
 - Heart rate

Physical Exam

Observation

- Breathing pattern
 - Indrawing or retractions
 - Nasal flaring
 - Grunting
- Motor activity
 - Symmetry
 - Using all extremities
- Skin color and perfusion
- Interaction with others

Physical Exam

- Mouth
 - Ulcers
 - White patches
 - Teeth and gingiva
- Ears
- Neck
 - Parotid swelling
 - Lymph Nodes
- Scalp

Physical Exam

Chest

- Lungs
 - Symmetry in aeration
 - Crackles, wheezes
 - Dullness
- Heart
 - Rate, rhythm, extra heart sounds
 - Murmur
- Axillae
 - Lymph nodes

Physical Exam

- Abdomen
 - Contour
 - Bowel sounds
 - Soft or hard
 - Tenderness
 - Mass
 - Liver
 - Spleen
 - Inguinal lymph nodes
- Genitalia
 - Anomalies
 - Rash, ulcers, drainage

Physical Exam

- Musculoskeletal
 - Deformities
 - Mobility
- Neurological
 - Strength
 - Reflexes
 - Symmetry
- Skin

Assessment

- Growth chart
- Development
- HIV status
- Problem List
 - Infections
 - Organ system abnormalities
- Social support system

Plan

- Treatment for problems
- Nutritional support needed?
- PCP prophylaxis needed?
- ART indicated?
- Referrals for home and community support
- Plan for next visit

Follow-up Visits

- Interval history
 - Growth
 - Development
 - Physical exam
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- Tracking patterns over time

Summary

- Initial visit involves complete history and physical examination
- Follow-up visits focus on interval changes
- Track patterns over time
- Build trusting relationship – will facilitate adherence with care and treatment