

# Physical examination begins with the hands

All too often for JMOs, physical examination of the hands is forgotten. In situations other than test conditions, most people "go for the money" - jumping immediately to the body system expected to have the problem. This is perhaps understandable in the time poor hospital environment.

Nevertheless, I feel that all physical examination should always begin with the hands. Even if there are no specific physical signs, the hands can tell you much about the patient:

- Are they warm and well perfused?
- Is the patient nervous and sweaty?
- Do the hands tell you something about the patient's occupation and lifestyle?

If there are signs, the hands will often give you a medical history in itself.

In a study in a Welsh hospital in 2003 where every ward patient's hands were examined, 44% had an abnormal physical sign that was clearly present (1). To quote the oft-stated phrase:

**"More is missed by not looking than by not knowing"**

*Thomas McCrae, 1870-1935*

## An example:

This is a photo of the hands of the four-year-old daughter of a patient who came to see me in my rooms:



Cyanotic nail beds and a clear example of clubbing. The child had congenital cyanotic heart disease (note: this diagnosis was known when the mother was questioned). These signs don't walk through your door every day and if you don't take the opportunity to look, you will miss them.

Take five seconds and examine the hands of your patients! You may be surprised by what you find.

## References

(1) White HA., Alcolado R., Alcolado JC. Examination of the hands: an insight into the health of a Welsh population. *Postgraduate Medical Journal* 2003; 79:588-589 [[Link](#) :: PDF 102 Kb]