

From Dream to Reality: Conducting a Thorough Physical Exam With a Cell Phone

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Background: The COVID-19 pandemic has prompted a surge in the utilization of telemedicine as physicians and patients attempt to protect themselves. The art of medicine is rooted in the ability to gather subjective and objective data from patients to make accurate diagnoses and recommendations. We must rely on creativity and innovation to gather this information in the new setting of telehealth in a manner with high consistency and reliability to maintain high-quality patient care.

Case Presentation: After gathering a thorough history, we work with the patient's guardian to systematically view the patient head to toe, perform cardiopulmonary auscultation, and assess exercise tolerance through a functional examination. This method of physical examination allows for teaching to be easily integrated as both attending physician and student are viewing and listening to the same thing at the same time. Just as importantly, this method of examination strengthens the doctor-patient relationship by creating a working partnership with parent and child to gather the information needed for a successful and reliable physical examination. The lack of training physicians have in performing a virtual physical examination is a concern. There is often a perceived barrier to what can be examined virtually, creating a potential disservice to the patient. Here, we present how mobile communication devices (i.e. cellular phones) can act as the sole peripheral device necessary to conduct a thorough history and physical examination as most of these devices now come equipped with a high-quality camera, microphone, and bright light allowing for a general head-to-toe visualization of the patient and auscultation.

Conclusion: Technology will continually advance and become more accessible, but what is currently widely available for both the patient and clinician is the mobile communication device. Optimization of the use of technology that is currently available needs to be prioritized. We must also take advantage of the great opportunity we have been presented with to create unique partnerships between physician, guardian, and child that make them a part of their healthcare. These unique working relationships and the opportunity for improved medical teaching are drivers for high-quality healthcare.