



# ASSOCIATION OF ONTARIO MIDWIVES

☞ Represents Registered Midwives and Promotes the Profession of Midwifery in Ontario ☞

## Membership Reference Binder

Section 7

### Clinical Practice Guidelines for Midwives

No. 2

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## PHYSICAL ASSESSMENT OF THE WELL WOMAN

*This document has been reviewed and approved by the Standards and Research Committee of the Association of Ontario Midwives (AOM) on October 28, 1998. The final draft was approved by the AOM Board of Directors on November 6, 1998.*

### INTRODUCTION

Physical assessment of the pregnant woman is the responsibility of the midwife as a primary caregiver. It should be done shortly after the onset of care.

Physical assessment is an integral component of midwifery care because it:

- contributes to the identification of indications for discussion, consultation and transfer of care
- includes health assessment and screening, e.g., PAP smear

- includes health teaching, e.g., self-breast examination

It is important that a thorough examination of each area be conducted. These guidelines note the areas that should be examined, and some of the essential points to review. Any unusual finding should be documented and appropriate follow-up should be initiated. Each practice needs to develop their own protocols for follow-up of abnormal findings.

### PRINCIPLES

- A detailed health history is the most important part of the assessment of all systems. After completing the history you should also have a general idea of the physical and mental state of the client. Included (in italics) are some elements that are easily integrated into the physical examination that will complete the health history.
- A good physical exam should follow a logical smooth sequence, integrating all parts of the exam effectively.
- To ensure that the woman is relaxed and comfortable by allowing time for a relationship to develop, midwives often schedule the physical assessment after the initial clinic visit.
- During the exam the midwife should explain her actions to the woman and provide the opportunity for feedback.
- Midwives should attempt to limit the number of position changes for the woman and minimize exposure.

This guideline reflects information consistent with the best practice as of the date issued and is subject to change. The information is not intended to dictate a course of action. Local standards may cause additions to or modifications of this guideline. Such changes should be well documented by practice groups.



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#### PREPARATION

- Conduct the exam in a warm place, free from drafts.
- Provide adequate draping (some women prefer an examination gown as well).
- Offer privacy while she undresses and during the examination.
- Ensure adequate lighting.
- Have all equipment ready in advance.

#### COMPONENTS OF THE PHYSICAL ASSESSMENT OF THE WELL WOMAN

##### 1. General Assessment

- Appearance
- Skin
- Gait and posture
- Behavior, general affect
- Symmetry
- Note scars

*If you note unusual findings, elicit additional history from the woman.*

##### 2. Head & Neck

- Inspect face and hair
- Palpate lymph nodes in the neck and super clavicular region
- Inspect/ask about teeth
- Palpate the thyroid gland

*Ask about major dental work, bleeding gums and headaches. Note if woman wears glasses or contacts.*

##### 3. Chest & Lungs

- Inspect thorax for symmetry
- Auscultate the lung fields

*Does the woman have a history of asthma, allergies, respiratory problems?*

##### 4. Cardiovascular System

- Palpate radial pulse
- Assess blood pressure

- Auscultate the 5 areas of the heart: aortic, pulmonic, 3rd left interspace, tricuspid and mitral

*Has the woman ever been told she has a heart murmur? If yes, does she require antibiotic prophylaxis for dental work?*

##### 5. Breasts

- Discuss breast self-examination
- Inspect breasts and nipples
- Palpate breasts in a systematic manner with woman recumbent or sitting
- Palpate nipples
- Examine lymph nodes in axilla with the woman in the sitting position

*Does the woman perform regular breast self-examination? Has she been taught how?*

##### 6. Extremities

- Inspect for the presence of edema in hands, feet and legs
- Inspect for varicose veins

*Does the woman have hemorrhoids?*

##### 7. Reflexes

- Assess patellar reflex

##### 8. Abdomen

- Palpate the uterus (*if possible*)
- Palpate for masses



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#### COMPONENTS OF THE PHYSICAL ASSESSMENT OF THE WELL WOMAN (Continued)

##### 9. Genitalia and Reproductive Organs

- Inspect external genitalia for masses, lesions and varicosities
- Speculum exam
  - Collect specimens to screen for vaginal infections and STDs
  - Obtain a PAP smear if needed

- Conduct a bimanual exam
  - Assess/confirm dates if needed
  - Assess for masses

*If parous, ask re: comfort with intercourse, urinary and bowel continence problems.*