

# Trauma-Informed Physical Examination: Practicing Sensitivity

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## Objectives

- Define trauma and trauma-informed care
- Describe key principles of performing a physical examination in a manner that is sensitive to all patients, particularly those with a history of trauma
- List specific examples of trauma-informed language and behaviors that can be utilized during the physical examination
- Practice performing vital signs using a trauma-informed approach

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## Trauma

*SAMHSA (the 3 Es):*

“Individual trauma results from an **event**, series of events, or set of circumstances that is **experienced** by an individual as physically or emotionally harmful or life threatening and that has lasting adverse **effects** on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.”

www.samhsa.gov

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# Trauma

A variety of experiences may qualify as traumatic. Examples can include:

- ✓ Physical abuse
- ✓ Psychological abuse
- ✓ Sexual assault
- ✓ Intimate partner violence
- ✓ Adverse childhood experiences
- ✓ Neglect
- ✓ Loss
- ✓ War and conflict
- ✓ Poverty
- ✓ Racism
- ✓ Community violence
- ✓ Discrimination
- ✓ Medical trauma
- ✓ Natural disasters

www.samhsa.gov

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# Trauma

- 89% of people living in the U.S. have experienced at least one traumatic event in their lifetime<sup>1</sup>
- Trauma has been associated with chronic mental and physical health conditions such as substance use, depression, diabetes, and cardiovascular disease<sup>2</sup> as well as an increase in mortality<sup>3</sup>
- Victims of trauma feel a deprived sense of safety, autonomy, and trust, which can affect their relationship with the healthcare system and their providers

1 – Kijpatrick DG et al. (2013); 2 – SAMHSA, Trauma and Violence (2015); 3 – McFarlane A (2010)

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# Trauma-Informed Care

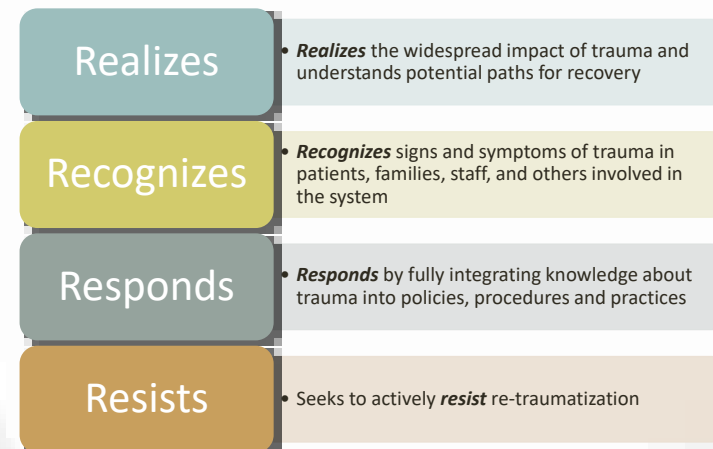
- An organizational structure and treatment **framework** that involves understanding, recognizing, and responding to the effects of all types of trauma
- Emphasizes physical, psychological and emotional **safety** for patients and providers, and helps survivors rebuild a sense of control and empowerment
- Principles can be applied **universally** to all clinical interactions

http://www.traumainformedcareproject.org/

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# Trauma-Informed Care

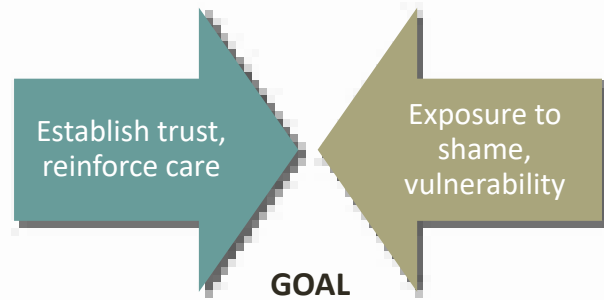
A trauma-informed program, organization, or system:



www.samhsa.gov

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## Physical Examination



Safe, comfortable experience for all patients, including those with a history of trauma

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## Patient Quotes

I blanked out during the exam. I don't know what happened. I'm not sure what the doctor did or didn't do.

I'm just a little jumpy when people come close to me.

The doctor was lingering way too long when touching me.

Quotes reported to military sexual trauma (MST) counselor at Providence VA Medical Center after appointments with their primary care doctors, 2017

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## What Does Trauma Look Like?

- Cannot assume who has experienced traumatic stress. The best way to identify trauma exposure is to ask!
- Signs of trauma may include:
  - Avoidance of procedures (Pap smear, colonoscopy, dental care)
  - Vague, generalized symptoms (chronic headache, pelvic pain)
  - Appearing nervous or distracted during visit
  - Non-adherence to treatment

Rao/A et al (2017)

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## Trauma-Informed Physical Exam

Before

- Set the stage for a sensitive exam



During

- Perform a sensitive exam



After

- Provide sensitive closure

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informed  
awareness  
professional  
skillful  
helpful guide  
patient-centered  
learning

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## Before the Exam

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## Before the Exam

- Check non-verbals
- Set an agenda
- Make it standard
- Identify concerns
- Ask about comfort
- Offer chaperone

Clardie S (2004)

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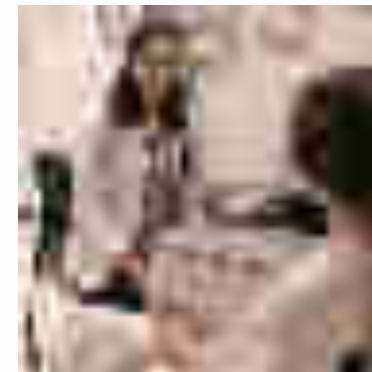


Image by photographer Jared DiChiara, used with permission. Physician: Sadie Ellisou, MD. Standardized patient: Paula Goldberg, 2017.

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## Non-Verbals

- Speak clearly, slowly, and at an appropriate volume
- Appear engaged, pleasant and calm
- Maintain appropriate eye contact
- Sit/stand at eye level with the patient
- Avoid sudden movements
- Keep hands outside of pockets
- Pay attention to patient cues (i.e. tensing muscles, fidgeting, breathing quickly, flushing, crying, trembling, appearing distracted or spaced out)

Schachter et al. (2009)

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## What Should I Do If...

- If the patient exhibits or vocalizes discomfort, pause the exam
- Speak in a calm, caring manner
- Avoid sudden movements
- Reassure patient that they are safe
- Remind patient where they are
- Explain what you are doing and why
- Offer water, a washcloth, and/or an additional drape
- Consider changing environment (e.g. move to a different room)

Shankansky, www.ptsd.va.gov

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## What Should I Do If...

You seem anxious. Is there something you are uncomfortable with?

Do you have difficulty when someone touches your knees?

I'm noticing that you are tensing up. Is there something I should know?

Schachter et al. (2009)

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## Before the Exam

- Check non-verbals
- Set an agenda
- Make it standard
- Identify concerns
- Ask about comfort
- Offer chaperone

I'd like to transition to the physical exam. We will be doing a pulmonary exam today, so I will be listening to the lungs. This exam should take about 5 minutes.

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## Before the Exam

- Check non-verbals
- Set an agenda
- Make it standard
- Identify concerns
- Ask about comfort
- Offer chaperone

**This is something that I do with all of my patients who come in with symptoms of a cold.**

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## Before the Exam

- Check non-verbals
- Set an agenda
- Make it standard
- Identify concerns
- Ask about comfort
- Offer chaperone

**Are there questions or concerns we should address before the exam?**

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## Before the Exam

- Check non-verbals
- Set an agenda
- Make it standard
- Identify concerns
- Ask about comfort
- Offer chaperone

**Is there anything I can do to make you more comfortable?**

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## Before the Exam

- Check non-verbals
- Set an agenda
- Make it standard
- Identify concerns
- Ask about comfort
- Offer chaperone

**Would you like anyone else to be present for the exam?**

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# During the Exam

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## During the Exam

- Attend to draping and modesty
- Introduce exam components
- Explain why
- Ask permission
- Stay within eyesight
- Respect personal space
- Use simple, clinical language
- Check in
- Use professional touch
- Be efficient

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## During the Exam

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**In order for me to do an accurate exam of the lungs, I'll need to listen with my stethoscope directly on the skin.**

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## During the Exam

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**I'm going to leave the room and allow you to change. Please remove the shirt, and you can keep the bra on. Here's a gown for you to wear; it opens in the back. I'll be back in a few minutes. I'll knock before I come in.**

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## Draping and Modesty

- Give clear, specific instructions
- Refer to the “gown” (what the patient wears) and the “drape” (the sheet over their lap)
- If possible, provide fabric gowns in a variety of sizes, as patients feel this preserves their dignity more than paper gowns
- Patient moves their own gown and/or drape when possible
- Allow patients to wear clothing on body parts that are not being examined (e.g. keep pants on for an ankle exam)
- For a limited exam, consider asking patient to move their clothing rather than disrobing (e.g. patient lifts back of shirt up to reveal a skin lesion on the lower back)

Schachter et al (2009); Raja et al (2015)

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## Draping and Modesty

- Privacy when undressing (may use curtain and/or door)
- Expose only the minimum body surface area required at any given time
- Do not assume that all men are comfortable baring a full chest
- Provide tissues as needed following a pelvic or rectal examination where lubrication is used
- Patient re-dresses privately once exam is finished
- Knock before re-entering the room, ensuring an affirmative patient response before opening the door (e.g. “all set”)

Schachter CL et al (2009)

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I am now going to listen to the lungs, using my stethoscope.

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This is important because we need to see if you have pneumonia, which is an infection of the lungs.

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May I open the gown from the back slightly, in order to get a better listen to the lungs?

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I'm going to stand at your side.

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## Stay Within Eyesight



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## Stay Within Eyesight

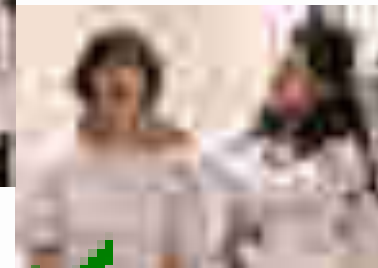


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## Stay Within Eyesight



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## Stay Within Eyesight



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## During the Exam

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- Stay within eyesight
- **Respect personal space**
- Use simple, clinical language
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- Use professional touch
- Be efficient

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## Respect Personal Space



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## Respect Personal Space



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With the mouth open,  
take some deep breaths  
in and out.

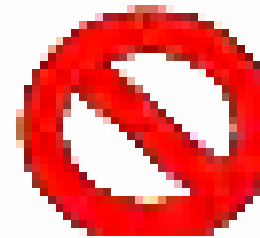
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## Simple, Clinical Language

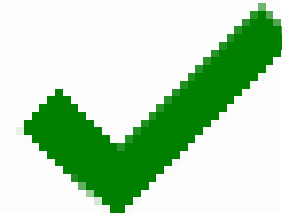
- Easy to understand
- Avoids medical jargon
- Cautious with imagery; you never know what might be triggering
- Avoids all possible sexual connotation
- Minimizes power differential between patient and provider
- Accommodates patients who speak other languages
- Word choice is professional, not personal

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## Simple, Clinical Language



*"Your"*  
*"Butt"*  
*"Bed"*  
*"Provocative tests"*



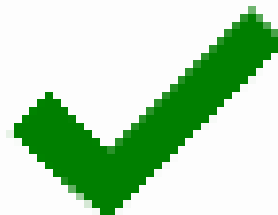
*"The"*  
*"Bottom"*  
*"Exam table"*  
*"Additional tests"*

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## Simple, Clinical Language



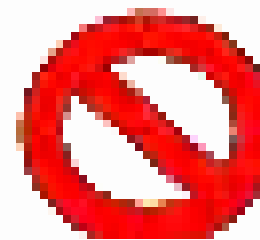
*"Normal"*  
*"Stirrups"*  
*"That looks good"*



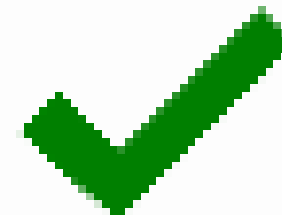
*"Healthy"*  
*"Foot rests"*  
*"That looks healthy"*

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## Simple, Clinical Language



*"I want to"*  
*"Look at"*  
*"Feel", "Touch"*



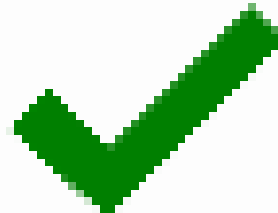
*"I am going to"*  
*"Inspect"*  
*"Examine", "Evaluate"*

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## Simple, Clinical Language



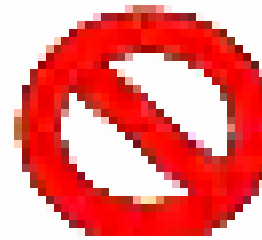
*"Don't let me"*  
*"Push me away"*  
*"Push my finger out"*  
*"Put up your arms like  
you're going to fight"*



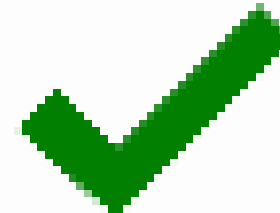
*"Resist this motion"*  
*"Push forward"*  
*"Bear down"*  
*"Bend the elbows"*

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## Simple, Clinical Language



*"Pretend you're at the  
beach"*  
*"Relax. Relax. Relax!"*



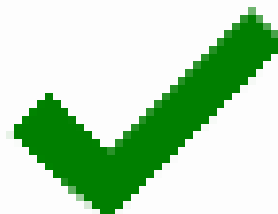
*"Some find it helpful to  
a deep, relaxing breath"*  
*"Allow the knees to relax"*

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## Simple, Clinical Language



*"For me"*  
*"Swallow for me"*



*(nothing)*  
*"I'm going to place my  
hands on the neck to  
examine the thyroid.  
When you can, please  
swallow."*

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## During the Exam

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How are you doing?

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## Professional Touch

- Consider a firm touch on the shoulder when...
  - reaching behind a patient (e.g. to grab an otoscope) so they still know where you are
  - Auscultating the posterior lung fields, to avoid surprise of touch
- Prior to an internal vaginal/rectal exam: "You're going to feel my hand on the thigh/buttocks"
- Prepare patients for different sensations:
  - "This is a tuning fork that will feel like a vibration"
  - "The speculum may feel cold"

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**That concludes the exam. I'm going to step out now, and you can get dressed. I'll be back in a few minutes so that we can discuss your results and come up with a plan together. I'll knock before I come in.**

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## Be Efficient

- Inform patient how long an exam will take beforehand
- Avoid keeping BP cuff inflated for too long, as it can resemble a restraint
- Take breaks during any exam where mouth is in fixed, open position, to avoid triggering memories of prior abuse
- Ask the patient to show you a genital lesion; taking time to find it yourself may take too long and can be uncomfortable for patient and provider

Schachter CL et al (2009)

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## After the Exam

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## After the Exam

- Express thanks
- Discuss results
- Ask for questions

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## After the Exam

- Express thanks
- Discuss results
- Ask for questions

(Knock knock). All set?

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## After the Exam

- Express thanks
- Discuss results
- Ask for questions

Thanks very much for coming to this appointment and for helping me perform a thorough physical exam.

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## After the Exam

- Express thanks
- Discuss results
- Ask for questions

The lungs sound clear, which is good news. You do not need a chest x-ray, and you do not have pneumonia.

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## After the Exam

- Express thanks
- Discuss results
- Ask for questions

(Alternatively). I did hear some crackling noises over the right side of the lungs. We sometimes hear this in patients with pneumonia. I'll discuss this with my mentor. We might get a chest x-ray, just to be sure.

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## After the Exam

- Express thanks
- Discuss results
- Ask for questions

What questions do you have?

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### BEFORE the exam:

- Check non-verbals
- Set an agenda
- Make it standard
- Identify concerns
- Ask about comfort
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### DURING the exam:

- Attend to draping and modesty
- Introduce exam components
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### AFTER the exam:

- Express thanks
- Discuss results
- Ask for questions

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# Questions?