

Sparse data available on value of bedside physical exams in ICU

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(HealthDay)—Data relating to the value of bedside physical examinations in the intensive care unit (ICU) are sparse, according to a review published online Aug. 4 in the *Annals of the American Thoracic Society*.

Thomas S. Metkus, M.D., and Bo Soo Kim, M.D., from Johns Hopkins Hospital in Baltimore, examined the clinical utility of bedside diagnosis in the modern ICU.

The researchers note that bedside assessment and physical examination are used in a heterogeneous manner across and within institutions. Current opinion regarding the utility of the [physical exam](#) is mixed, with some suggesting that the physical examination remains valuable in terms of its diagnostic value and in facilitating the doctor-patient relationship. Little published advocacy exists for the physical examination. Some data

show that test characteristics of specific physical examination maneuvers are poor; other data suggest specific physical findings can have clinical impact. No standard approach to bedside diagnosis in the ICU exists, and there is no consensus as to which physical examination maneuvers are useful, who should conduct exams, and when the physical examination should be performed.

"We believe there is substantial value to a comprehensive physical examination and bedside assessment in the ICU, notwithstanding the paucity of data," the authors write. "The bedside 'laying on of hands' provides a humanizing, grounding counterpoint, for patients, families, and physicians and providers alike, to the dehumanizing effects of critical care and high-technology, high-intensity medicine."

More information: [Full Text \(subscription or payment may be required\)](#)

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