

Physical Exam

CHILD AND TEEN CHECKUPS (C&TC) FACT SHEET FOR PRIMARY CARE PROVIDERS

C&TC Requirements

General

A comprehensive physical examination performed by a clinician is required at each C&TC visit. The following components must be evaluated using medically accepted techniques (Tanski & Garfunkel, 2010):

- Review of physical measurements
- Skin, lymph nodes
- Head, eyes, ears, nose, neck
- Mouth, throat, tonsils, mucosa, teeth, gums
- Chest, heart, lungs
- Abdomen
- Musculoskeletal
- Neurological
- External genitalia and sexual development (pelvic exam is *not* part of a routine C&TC exam)

The exam should be performed with the patient unclothed and appropriately draped.

Personnel

A licensed health care provider (physician, nurse practitioner, or physician assistant) may complete the physical exam or a registered or public health nurse (RN or PHN) who has completed the C&TC Comprehensive Screening training through the Minnesota Department of Health (MDH).

Documentation

Documentation must include normal and abnormal findings of the physical exam. Providers must document refusal of or inability to perform any portion of the physical exam, along with the reason.

When a C&TC screening is performed outside of the child's health care home, documentation

should be sent to the child's primary care clinic to strengthen continuity of care.

For documentation examples, refer to the [C&TC Documentation Forms for Providers and Clinics \(www.dhs.state.mn.us\)](http://www.dhs.state.mn.us).

Procedure

The physical exam is the cornerstone and an essential part of the pediatric evaluation in every health supervision visit (Tanski & Garfunkel, 2010).

Explain to the child and family ahead of time that a head-to-toe exam is part of the well visit.

A comprehensive physical exam is important:

- To educate the child and parent about the child and his or her body and growth.
- To provide the opportunity to discuss the child's physical changes associated with healthy development.
- To identify silent or subtle illness or health risks.

The physical examination must be comprehensive and focus on specific assessments that are appropriate for the child or adolescent's age, development, and needs or concerns which are identified from the patient history (Tanski & Garfunkel, 2010).

The physical examination of an infant, toddler, or young child should be completed in the presence of the child's parent or guardian (American Academy of Pediatrics, 2011). If a parent or guardian is unavailable or if the parent's presence will interfere with the physical exam (e.g. in cases of physical or sexual abuse or if the patient is uncomfortable with the parent in the room), a chaperone, preferably unrelated to the patient or family, should be present during the physical exam (American Academy of Pediatrics, 2011).

According to the American Academy of Pediatrics, a parent or chaperone is recommended for parts of the physical exam that involve inspection or palpation of the breasts or genitalia. The use of a chaperone should be a shared decision between the patient and the provider. If the adolescent prefers to have the parent or guardian in the room during the exam, offer another opportunity for a private conversation during the visit (American Academy of Pediatrics, 2011). Refer to the [C&TC Health History Fact Sheet \(www.health.state.mn.us\)](http://www.health.state.mn.us) for information on adolescent and provider 1:1 time.

Referral

If the patient or parent present concerns that are outside the clinician's scope of practice, or if the provider does not have the skills to perform a required component, the child or adolescent must be referred to an appropriate health care provider or specialist.

Professional Recommendations

American Academy of Pediatrics

A physical exam is part of each preventive health care visit, according to the AAP's [Guidelines for Health Supervision for Infants, Children and Adolescents \(www.brightfutures.aap.org\)](http://www.brightfutures.aap.org).

The American Academy of Pediatrics sports preparticipation PE form was updated in 2019 to include most components of a general well child exam (American Academy of Pediatrics, 2019).

Resources

Minnesota Department of Human Services

- [C&TC Schedule of Age-Related Screening Standards \(www.dhs.state.mn.us\)](http://www.dhs.state.mn.us)

- [Minnesota Health Care Programs \(MHCP\) Provider Manual - C&TC Section \(www.dhs.state.mn.us\)](http://www.dhs.state.mn.us)

Minnesota Department of Health

- [Child and Teen Checkups \(C&TC\) \(www.health.state.mn.us\)](http://www.health.state.mn.us)

References

American Academy of Pediatrics. (2011). Policy statement-Use of chaperones during the physical examination of the pediatric patient. *Pediatrics*, 127(5), 991-993.

American Academy of Pediatrics. (2019). *Preparticipation Physical Evaluation (PPE)*. Retrieved from American Academy of Pediatrics : <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Pages/PPE.aspx>

Tanski, S., & Garfunkel, L. (2010). *Physical Exam*. American Academy of Pediatrics, Bright Futures, The Bright Futures Clinical Guide to Performing Preventive Services.

For More Information

The Child and Teen Checkups (C&TC) program is administered through a partnership between the Minnesota Department of Human Services and the Minnesota Department of Health.

For questions about this fact sheet or to obtain this information in a different format, email health.childteencheckups@state.mn.us or call 651-201-3760.

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