

## Neck Examination

- **Intro (WIIPPPPEE)**
  - Wash your hands
  - Introduce yourself
  - Identity of patient – confirm
  - Permission (consent and explain examination)
  - Pain?
  - Position sitting in chair with room behind the chair for the examiner to stand
  - Privacy
  - Expose neck and clavicles (patient may need to tie hair back/ remove necklace)
  - Equipment – have a glass of water to hand
- **General Inspection**
  - *Surroundings*
    - Monitoring
    - Treatments
    - Paraphernalia
  - *Patient*
    - Note whether there is any dyspnoea on sitting/ lying down
- **Neck**
  - *Inspect*
    - From front and sides
      - Lumps/ asymmetry
      - Scars (thyroidectomy/ parathyroidectomy scars using a pentorch)
      - Skin changes, facial plethora (SVC obstruction)
      - Distended neck veins (SVC obstruction)
    - If a neck lump is seen:
      - Ask patient to 1) take a sip of water, 2) hold it in their mouth 3) and swallow
        - The three part command gives the examiner time to position themselves to watch the neck lump on swallowing
        - Any lump attached to the pretracheal fascia will move upwards on swallowing i.e. a thyroid lump or thyroglossal cyst
      - Ask patient to 1) open their mouth 2) and stick their tongue out
        - A midline lump that moves upwards on tongue protrusion is a thyroglossal cyst
  - *Palpate: anterior*
    - Trachea
      - For tracheal deviation (support back of neck whilst doing this and warn patient it may feel uncomfortable)
    - Carotid pulse (one side at a time)
  - *Palpate: posterior*
    - Explain to the patient that you will be moving behind them to palpate their neck. Take this opportunity to inspect the back of the neck.
    - Thyroid gland
      - Palpate one lateral lobe at a time then isthmus (nodules and thrills)
      - Ask the patient the swallow another sip of water whilst palpating the thyroid gland (thyroid masses that move upwards on swallowing)
    - Anterior and posterior triangles
    - Parotid glands
    - Lymph nodes
      - Cervical

- Supraclavicular
  - *Percuss*
    - Over sternum for retrosternal goitre
  - *Auscultate*
    - Carotid bruits
    - Thyroid bruits
    - Any other neck lumps (if pulsatile with bruit suspect carotid artery aneurysm)
- **Closure**
  - Thank patient
  - Patient comfortable?
  - Help getting dressed?
  - Wash hands

Turn to examiner, hands behind back, holding stethoscope (try not to fidget!) before saying:

- **“To complete my examination, I would like to...”**
- Further examination:
  - Take a full history
  - Perform a thyroid status examination
  - Perform an ENT examination
- Further Invx as indicated
  - Bloods including TFTs
  - Ultrasound lump
  - Fine needle aspiration/ core biopsy of lump