



PÉCSI TUDOMÁNYEGYETEM
ÁLTALÁNOS ORVOSTUDOMÁNYI KAR

Examination by a physiotherapist

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11/02/2025 Pécs



The role of the physiotherapist



- **Definition:** Physiotherapists help patients recover from injuries, surgeries, and chronic conditions by improving movement and function.
- **Work settings:** Hospitals, rehabilitation centers, private clinics, sports teams, nursing homes.
- **Common conditions they treat:** Back pain, joint injuries, stroke recovery, respiratory conditions, post-surgery rehabilitation.
- **Main responsibilities:**
 - Assessing patients
 - Creating treatment plans
 - Guiding therapeutic exercises
 - Using manual therapy

Educating patients about posture, movement, and injury prevention

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Why is a precise patient assessment important for a physiotherapist?

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Purpose of patient examination: Identify functional limitations

A precise patient assessment is essential:

- helps in establishing an **accurate diagnosis**
- it forms the foundation of **effective treatment**
- understanding the patient's condition
- creating a **personalized therapy plan**
- allows the identification of potential risks and **contraindications**
- ensures the effectiveness of the treatment
- helps build patient trust and supports professional accountability

My experience....

The main steps of the assessment

Taking medical history

- **Medical history**
- **Guided conversation!!!!**
- **Subjective parameters – based on the patient's report.**

Components:

- Personal data (name, age, gender)
- Present complaints
- Previous complaints
- Family history
- Social history



Interviewing for symptoms

Where does it hurt, please show me?
Is your pain radiating out?
What is the nature of the pain?
How long has it been hurting?
Has your pain changed since then?
When does it occur, how often?
When does your pain increase?
By what time do your complaints ease?
What do you do when you are in pain?
Does it limit your daily activity?
Does it change from time of day to time?



Present complaints

List and describe the symptoms involved:

- Pain
- Movement disorder, limited mobility
- Sensory disturbance
- Swelling
- Muscle weakness, muscle atrophy
- Paralysis
- Difficulty walking, limping



Present complaints

List and describe the symptoms involved:

- Use of assistive devices
- Manipulation interference
- Speech disorder
- Urination, defecation disorders
- Infant's movement development slow, abnormal
- Early fatigue
- Unreasonable weight loss



Previous complaints

- General health
- Previous interventions, diseases, operations, medicines, accidents (steroids, NSAIDs)
- Other present complaints, illnesses
- Results of previous treatment for present complaints



Family history/Social history

Family history:

- hereditary diseases

Social history:

- Who do you live with?
- What environment do you live in?
- Type of work?
- Hobby activity?
- Pleasure substances?
- Sick leave

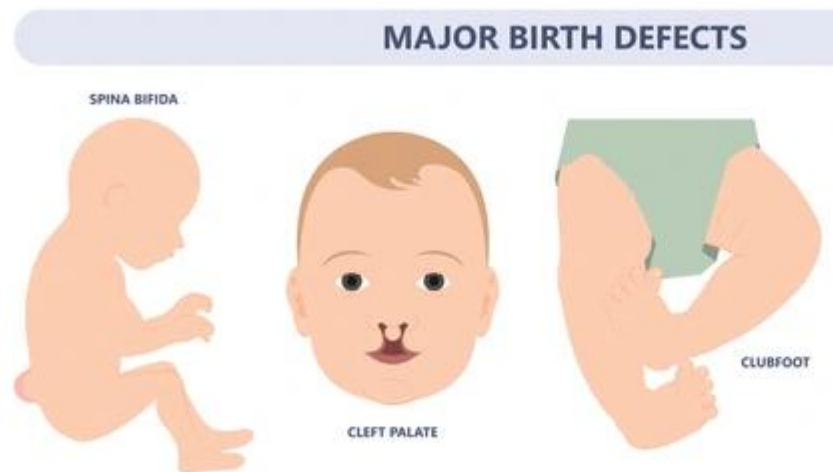


Inspection



Inspection

- First appearance, facial expression, build, posture, nutrition
- Movement, gait, coordination, balance
- Use of assistive devices, everyday movements
- Deformities, compensatory posture, **compensatory movements**, asymmetries
- Congenital or acquired deformities



Inspection

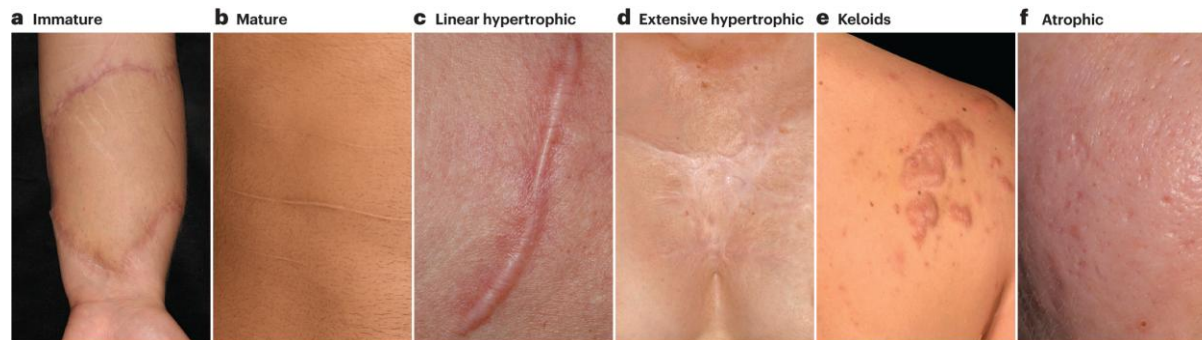
Examination of muscle nutrition: (determined by muscle protein composition and metabolism)

- hypertrophy,- increased muscle mass
- hypotrophy, - reduced muscle mass
- atrophy,- atrophied muscle



Inspection

- swelling, indentations, oedema
- skin discolouration, inflammation, other infections
- scars (surgery, injury), wounds
- hair and nail lesions
- limb defects



Palpation

Purpose: to find out by palpation about the anatomical location of the formations, their physiological position, painful and pathological formations.

- Examination of the healthy side followed by the affected side.
- Always comparable
- (We also feel while moving)!!!!

Palpation

- skin temperature-cool, warm
- Blood: - disturbance of autonomic nervous system
- tissue proliferation or deficiency
- skin turgor and fat content,: skin wrinkling
- subcutaneous nodules (RA)
- lipoma, fibroma, neurofibroma
- superficial vein drainage, saturation, dilatation (varix), thrombosis
- arteries, pulse palpation sites
- palpation of regional lymph nodes
- muscle run, origin, adhesion,
- tendons, nerves



Palpation

- muscle tone (resistance to passive stretching)
- normotone
- hypotone- flaccid
- hypertone, spastic; rigorous (knife symptom; gear symptom)
- atonia



Palpation

- myalgic nodules, inflammation of tendon sheaths, swelling
- bones: contours, deformities, pain, exostoses, osteophytes, tumours
- joints: contour, swelling, pain, fluid, crepitation
- intraarticular formations, joint fissure
- bursas: swelling, crepitation, pressure sensitive



Movement test

Motor functions:

1. ROM testing (goniometer)
2. Muscle strength (0-5 system, instrumented test, 1RM)
3. Muscle tests (extensibility)
4. Stability testing (FMS, Y balance, Triple Hop, Davies test)



Treatment plan

Short-term treatment plan:

- Recovery of acute, current deficit, paving the way for long-term recovery

Long-term treatment plan:

- Stages in the patient's treatment that can be determined based on his/her present diagnosis to enable him or her to return to his or her daily activities without loss of function or residual deficit.

Treatment programme: functional and tissue recovery achieved through movement therapy.



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What is the primary goal of physiotherapy assessment?

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What is the purpose of palpation in physiotherapy assessment?

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Which tool is commonly used to measure joint range of motion?

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Thank you for your attention!