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Learning Objectives:

Cognitive Domain:

1. **Analyze:** Identify and interpret the clinical signs of [clubbing](#) and their possible causes.
2. **Evaluate:** Correlate the findings of finger [clubbing](#) with underlying systemic diseases such as cardiopulmonary or gastrointestinal disorders.
3. **Synthesize:** Formulate a differential diagnosis based on the presence of [clubbing](#) and associated clinical features.

Psychomotor Domain:

1. **Examine:** Perform a detailed physical examination to detect and grade the severity of finger [clubbing](#).
2. **Detect:** Recognize the presence of other clinical signs that might point towards the underlying pathology (e.g., cyanosis, respiratory signs, abdominal examination).

Affective Domain:

1. **Respond:** Approach the patient with empathy, ensure their comfort during the examination, and explain the steps in layman's terms.
2. **Value:** Acknowledge the importance of early recognition of systemic diseases indicated by the presence of [clubbing](#) and the need for further investigation.

✦✦ Summarise

Station Duration:

5-8 minutes

Case Scenario for the Student:

You are a final-year medical student in the outpatient department. A 55-year-old male patient presents with complaints of chronic cough and fatigue. Upon initial inspection, you observe that the patient has digital [clubbing](#). Perform a clinical examination to assess the presence and grade of [clubbing](#) and suggest possible underlying causes.

Instructions for the Student:

- Perform a focused examination to detect and grade finger [clubbing](#).
- Identify the presence of other clinical signs that may provide clues to the underlying cause of the [clubbing](#).
- Correlate your findings with the patient's history of chronic cough and fatigue.
- Summarize your findings and suggest further investigations.

Examiner Guidelines and Marking Schema:

1. General Approach

- Proper hand hygiene and patient introduction (1 mark)
- Establish rapport with the patient (1 mark)
- Explain the purpose of the examination in clear terms (1 mark)

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2. Inspection for [Clubbing](#)

- Inspect the patient's hands for [clubbing](#) (1 mark)
- Check for the following signs of [clubbing](#):
 - **Schamroth's window test** (loss of diamond-shaped space between nails) (2 marks)
 - **Increased nail curvature** (convexity of the nail bed) (1 mark)
 - **Fluctuation of the nail bed** (softening of the nail bed) (2 marks)
 - **Drumstick appearance of the distal phalanges** (1 mark)

3. Grading of [Clubbing](#)

- Correctly grade the severity of [clubbing](#) (1 mark)

4. Further Examination and Associated Signs

- Look for signs of systemic diseases (2 marks):
 - Cyanosis
 - Respiratory distress or abnormal breath sounds (e.g., crackles suggestive of interstitial lung disease)
 - Abdominal examination for hepatomegaly (liver disease)
 - Signs of heart failure (jugular venous distension, peripheral edema)

5. Differential Diagnosis

- Respiratory causes (e.g., chronic lung disease, lung cancer, bronchiectasis) (2 marks)
- Cardiac causes (e.g., cyanotic congenital heart disease, infective endocarditis) (2 marks)
- Gastrointestinal causes (e.g., inflammatory bowel disease, cirrhosis) (2 marks)
- Other causes (e.g., familial and idiopathic [clubbing](#)) (1 mark)

6. Suggested Investigations

- Chest X-ray or CT scan (1 mark)
- Pulmonary function tests (1 mark)
- Echocardiogram (1 mark)
- Blood tests (liver function, inflammatory markers, etc.) (1 mark)

7. Communication Skills

- Summarizes findings clearly (2 marks)
- Explains the need for further investigations to the patient (2 marks)
- Professional demeanor and patient interaction (1 mark)

Total Marks: 25

Examiner Notes:

- The student should be thorough in their clinical examination, recognizing not only [clubbing](#) but also any other systemic signs that might give clues about the underlying pathology.
 - The student should appropriately prioritize differential diagnoses based on their clinical findings.
 - Effective communication and professionalism are essential, particularly when discussing the implications of [clubbing](#) and the need for further investigations.
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Patient Script (Simulated Patient Role):

- The patient is a 55-year-old male with a chronic cough lasting for 6 months.
- If asked, the patient reports some fatigue but denies chest pain or weight loss.
- The patient is cooperative but concerned about the possibility of a serious illness.
- The patient's hands show obvious [clubbing](#), and if asked, the patient does not recall when it started.