

# **Educational Resources in International Languages**

颈部和甲状腺检查

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- 1. 介绍自己并获许检查
- 2. 检查-从正面和侧面

# 查看

- 病人的大体情况-体重超标或过轻?
- 着装是否适合当天天气?
- 是否有明显的颈部肿块/甲状腺肿
- 颈部是否有伤疤
- 3. 让病人吞下一口水,同时从侧面来进行查看

吞咽时脖子上的肿块向上移动了吗? 如果移动,则很可能是甲状腺的征兆

4. 让病人伸出舌头,从一侧来进行查看

当伸出舌头时,脖子上的肿块向上移动了吗? 如果移动,则很可能是甲状舌管囊肿

5. 从后面来触诊颈部

首先询问病人是否感到疼痛!

- a) 是否感受到颈部肿块的存在并做出相应的评论
- 0 大小
- o相对于颈部底层结构的移动性
- o 纹理(弥漫型或结节状,单个或多个)
- o 疼痛
- b) 让病人吞下一口水,同时触摸并觉察病人的颈部肿块情况
- c) 触诊颈部肿大了的淋巴结
- 从下巴尖开始,触诊每一组淋巴结:
- o 颏下
- o 颌下
- o 前部颈椎链
- o 锁骨上
- o 后部颈椎链
- o 耳前和耳后
- o 枕后淋巴结
- 对以下做出评价:触痛,纹理(坚硬/坚固/有弹性),以及移动性
- d) 轻敲胸骨来对胸骨后的甲状腺肿的扩大进行诊断



轻敲胸骨,对胸骨后甲状腺肿扩大的程度进行评估。

- 6. 从前侧检查颈部
- a) 触摸气管所在位置
- b) 听诊甲状腺(双侧的)
- 甲状腺杂音则表明弥漫性毒性甲状腺肿(也称Grave's 病)的特异性表现。
- c) 测试胸锁乳突肌的功能 肌肉可能渗进到甲状腺恶性肿瘤内
- 7. 检查甲状腺疾病系统特性
- a) 手
- 温度
- 杵状指/甲状腺杵状指/甲剥离
- 掌红斑
- 手颤(让病人伸出手并闭上眼睛)
- b) 桡动脉脉搏
- 心房颤动或心跳过速
- c) 脸
- 干性皮肤
- 脱发或粗糙
- 眉毛外侧三分之一脱落
- 水肿
- d) 眼睛
- 眼睑迟滞和眼睑内缩是甲状腺功能亢进的非特异性特征 让患者随着你的手指下移的方向,眼睛往下看



眼睑迟滞。让患者的眼睛跟随你的手指所在方向移动,头部保持不动。将手指放在患者的头顶,然后迅 速下移。

眼肌麻痹,眼球突出,和球结膜水肿是弥漫性毒性甲状腺肿(也称Grave's 病)的特异性表现。

- e) 肌肉力量:测试近端肌病
- 测试局关节外展
- 要求病人不依靠胳膊的支力从椅子上站立起来
- f) 检查反射(特别是旋后肌和踝关节反射)
- g) 查看胫前粘液性水肿
- 8. 感谢病人



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