Making a diagnostic checklist more useful

I read with interest Dr. Hickner’s editorial, “How to avoid diagnostic errors” (J Fam Pract. 2014;63:625), and was fascinated by the diagnostic checklists developed by John Ely, MD, which are available at www.improvediagnosis.org/resource/resmgr/docs/diffdx.doc.

On his checklists, Dr. Ely suggests the material could be adapted for use on a handheld device, so I decided to convert Dr. Ely’s checklists from Microsoft Word to a PDF with hyperlinks so they would be easy to view on most tablets and smartphones. I kept the content exactly the same, but formatted each diagnostic problem as a “header,” which became the table of contents. Each of these table of contents headers is hyperlinked, so a user can simply tap on the item in the table of contents and jump to the correct page (“card”) in the document.

After converting Dr. Ely’s checklists to a PDF, I found them easy to use on both an iPhone and Google tablet.

Thank you again, Drs. Ely and Hickner, for your work in this area.

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Dr. Vincent is one of the assistant editors for Clinical Inquiries, a monthly column in The Journal of Family Practice.

Dr. Hickner’s list of 7 ways to avoid diagnostic errors was excellent. I would augment his sixth tip (“Follow up, follow up, follow up, and do so in a timely manner”) with something we tell all of our patients: “Keep me informed via our online portal.” When patients have such easy access to communication with their physician, the diagnostic process is greatly enhanced.

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When patients can communicate with their physician via an online portal, the diagnostic process is greatly enhanced.

A modified approach to thyroid exams

For years, I (MKC) have been teaching medical students and family medicine residents at my facility a modified anterior approach to examining the thyroid, and they are surprised at how much easier it is than the standard approach. Our modified anterior approach, which we demonstrate at https://www.youtube.com/watch?v=A6xV8wiXzo, allows simultaneous visualization of both lobes and the isthmus of the thyroid gland. It differs from standard techniques because it involves simultaneously moving both sternocleidomastoid muscles farther apart, which causes the skin to be stretched over the thyroid gland, bringing it into relief and allowing for enhanced inspection and easier palpation.

A literature search that included PubMed and textbooks such as The Rational Clinical Examination: Evidence-Based Clinical Diagnosis¹ and Bates’ Guide to the Physical Examination and History Taking² suggests that this modified anterior approach hasn’t been described before. We believe this approach will correlate more closely with ultrasonic examinations than currently used techniques, and we encourage readers to help us empirically test this assertion.

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References