

Indian Journal of Postgraduate Dermatology



Innovations and Ideas

Use of Wooden Spatula for Palpation of Mucosal Lesions as an Alternative Tool to Gloved Finger

Priyansh Gupta¹, Priyanka Sangwan¹

Department of Dermatology and Venereology, All India Institute of Medical Sciences, Bhubaneswar, Bhubaneswar, Odisha, India.

*Corresponding author:

Priyanka Sangwan, Department of Dermatology and Venereology, All India Institute of Medical Sciences, Bhubaneswar, Bhubaneswar, Odisha, India.

priyankasangwan90@gmail. com

Received: 14 August 2024 Accepted: 17 October 2024 EPub Ahead of Print: 22 November 2024 Published: 07 February 2025

DOI

10.25259/IJPGD_182_2024

Quick Response Code:



PROBLEM FACED

Examination of oral and genital mucosa forms an integral part of the physical examination of dermatology patients.^[1] Naked finger palpation is rarely done at these sites because of concerns regarding hygiene and the risk of cross-infection. To surmount this, the gloved finger is the preferred method of examination. However, the presence of an extra layer of gloves between the finger and lesion being examined decreases the sensitivity of tactile receptors on fingertips.^[2] In addition, individuals sensitised to latex, rubber or talc avoid using gloves during the examination.

SOLUTION PROPOSED

We tried to overcome this problem by replacing the gloved finger with a disposable wooden tongue depressor/spatula or ice-cream stick for palpation [Figure 1]. The wooden spatula commonly used to retract buccal mucosa while inspecting the oral cavity can be held with fingers to palpate the consistency and surface change of mucosal lesions [Figure 2]. The wooden spatula functionally is an extension of fingers with the ability to detect palpatory findings better than gloved fingers and comparable to naked fingers in our observation. This is similar to the use of surgical



Figure 1: Image showing gloves (below) and wooden spatula (above) commonly used for examination.

This is an open-access article distributed under the terms of the Creative Commons Attribution-Non Commercial-Share Alike 4.0 License, which allows others to remix, transform, and build upon the work non-commercially, as long as the author is credited and the new creations are licensed under the identical terms. ©2025 Published by Scientific Scholar on behalf of Indian Journal of Postgraduate Dermatology



Figure 2: Clinical image to demonstrate palpation of a lesion (leukoplakia) on left buccal mucosa using wooden spatula.

instruments by surgeons to palpate internal structures during procedures. It offers the additional advantage of palpating lesions located distally in mucosa which cannot be easily reached with fingers. Better sensitivity, decreased chance of allergy to glove material and easy availability of the disposable wooden tongue depressor or spatula at ice-cream parlours add to the advantage of this novel method. The inability to

perform bimanual palpation with a spatula as well as need for sterilisation forms the limitation of this tool.

Ethical approval: Institutional Review Board approval is not

Declaration of patient consent: The authors certify that they have obtained all appropriate patient consent.

Financial support and sponsorship: Nil.

Conflicts of interest: There are no conflicts of interest.

Use of artificial intelligence (AI)-assisted technology for manuscript preparation: The authors confirm that there was no use of artificial intelligence (AI)-assisted technology for assisting in the writing or editing of the manuscript and no images were manipulated using AI.

REFERENCES

- Madani M, Berardi T, Stoopler ET. Anatomic and Examination Considerations of the Oral Cavity. Med Clin North Am 2014;98:1225-38.
- Tiefenthaler W, Gimpl S, Wechselberger G, Benzer A. Touch Sensitivity with Sterile Standard Surgical Gloves and Single-use Protective Gloves. Anaesthesia 2006;61:959-61.

How to cite this article: Gupta P, Sangwan P. Use of Wooden Spatula for Palpation of Mucosal Lesions as an Alternative Tool to Gloved Finger. Indian J Postgrad Dermatol. 2025;3:101-2. doi: 10.25259/IJPGD_182_2024