# HEAD TO TOE ASSESSMENT

# Before the Exam

- · Ensure privacy and keep the room at a comportable temperature
- · Sit/ Stand at eye level + make good eve contact
- · Use open-ended questions to gather unbiased information

# General & Health History

#### SUBJECTIVE -

- 1. Health history
- 2. Family history 3 Cheif complaint

# OBJECTIVE

- Behavior + mood
- 2. Appears stated age Hygiene + nourishment level
- Posture and mobility
- 5. Level of conciousness L. Alert ? Oriented?

#### Integument

Inspect Skin. I. Color

- 2. Moisture 3. Texture
- 4. Turgor
- 5 Lesions









E

T Z

PPOO

Account posts I may be about the

WED HER

bee impassive

- 1. Inspect + parpase hair. scalp + face 2. Test CN VIII - have pt. smile, Frown Show teeth, frown - pure cheeks
- 3. Inspect Science, iris conjunctive for any discoloration /abnormalines 4 Test vision - Snellen Chart
- 5 Check Dupits are equal, round and reactive to light - accommodation

# Neurological + Mental Status

- Assess speech patiern
- 2. Orientation to person, place, time and situation
- 3. Assess recent and remote memory
- 4. Screen for depression + anxiety
- 5. Ensure the client's thought process is logical and concrent
- 6. Assess mond + facial expression

#### Inspection Look I SWEET



Palpation Feel technic consigning with palms



Percussion

two to assers the awanters / sym

Auscultation cisten for sounds



I. Test hearing

2. Inspect pinha and inner ear

# Nose



- I. Assess patercy
- 2. Ensure Sense of Sinnelli
- 3 Inspect septum+ turibly outes

#### Mouth



I Inspect lips/murosa

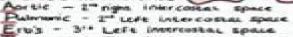
2. Assess teets + gums 3. Check hard + Soft polime

#### Through

- I inspece uvula-
- 2. Test CN IX
- "Say annhh" 5. Test CN XI move tongue

# Cardiovascular

- Inspect anterior aun di posterior Chest
- Percuss lung fields
- 3. Paipate Aprai puve
- 4 Auscultate lung sounds 5 Auscultate heart sounds



ricuspid - 4" Left intercostal space Mibral - 5th intercestal space as misseuricular



# Abdomen - GI & GU

- I Inspect Contour, symmetry 2. Auscultate for bowel sounds
- 3. Percuss all 4 quadrants
- 4. Palpate all 4 quadrants
- 5. Assess bladder + voiding habits

# Extremities-Musculoskeletal

- I. Assess ROM + muscle Strength
- 2. Check for a grade any edema 3. Inspect posture + quit
- 4. Test deep tendon reflexes /



# **Nursing Assessment Study Guide**

Sharon L. Lewis, Linda Bucher, Shannon Ruff Dirksen

#### **Nursing Assessment Study Guide:**

Nursing Assessment (Speedy Study Guides) Speedy Publishing,2014-07-03 A Nursing Assessment Guide is a comprehensive work to outline the procedures nurses use to properly assess patients to determine a patient s needs and apparent state of health It provides a clear blueprint of procedures to follow and outlines the most practical order to follow them Proper technique is described in detail and it has illustrations and diagrams for doing things the correct way for the comfort of the patient and good assessment of possible problems It is a helpful reference for clear and concise charting

Nursing Assessment ,2013 Study Guide for Medical-Surgical Nursing Sharon L. Lewis, Susan A. Sandstrom, Linda Bucher, Mariann M. Harding, Margaret M. Heitkemper, Dottie Roberts, Jeffrey Kwong, 2016-10-03 Resource added for the Nursing Associate Degree 105431 Practical Nursing 315431 and Nursing Assistant 305431 programs Assessment Review: Cardiovascular System E Staff, Learn and review on the go Use Quick Review Nursing Study Notes to help you learn or brush up on the subject quickly You can use the review notes as a reference to understand the subject better and improve your grades Easy to remember facts to help you perform better Perfect study notes for all health sciences premed medical and nursing students Study Guide for Medical-Surgical Nursing Sharon Lewis, 2013-12-16 Study Guide & Laboratory Manual for Physical Examination & Health Assessment E-Book Carolyn Jarvis, Ann L. Eckhardt, 2023-01-02 Both a comprehensive lab manual and a practical workbook the Study Guide Laboratory Manual for Physical Examination Health Assessment 9th Edition gives you the tools you need to master physical examination and health assessment skills in the lab and in clinical practice Corresponding to the bestselling Jarvis textbook this guide features terminology reviews application activities clinical judgment questions regional write up sheets and narrative summary forms with answers to study questions at the back of the book to facilitate both learning and review The 9th edition has been thoroughly updated with a fresh focus on the Next Generation NCLEX NGN with case studies featuring new NGN question formats to prepare you not only for the skills laboratory but for success on the NCLEX and in interprofessional collaborative practice Authoritative review and guidance for laboratory experiences personally written by the textbook authors provide a seamlessly integrated study and clinical experience Consistent format includes Terminology Review Study Guide and Clinical Judgment Questions in each chapter Physical examination forms familiarize you with what you will encounter in clinical practice and offer practice in documenting the patient history and examination findings The only full color illustrated lab manual available for a nursing health assessment textbook with anatomy exercises that align with the main text NEW Clinical judgment exercises equip you for success on the Next Generation NCLEX NGN including questions with an increased focus on clinical judgment robust single episode case studies that employ the latest NGN question types and unfolding case studies which reflect the language of the NCSBN Clinical Judgment Measurement Model NEW Chapter 33 includes unfolding case studies for the NGN that present opportunities for you to practice prioritizing decision making and using clinical judgment

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