HEAD TO TOE ASSESSMENT

GENERAL SURVEY:

- Safety checks – ID band, O2, IVs, call bell, bed height, side rails
- Overall skin color
- Work of breathing – cyanosis, in-drawing, pursed lips, tripod posture
- Appearance
- Mood/affect
- Hygiene
- Posture
- Obvious deformities

VITAL SIGNS:

- Temperature
- Pulse count for 30 sec x2 (unless irregular)
- Respirations – count 30 sec x2
- Blood pressure
- Oxygen saturation

PAIN ASSESSMENT:

- Location
- Quality
- Quantity
- Timing
- Provoking
- Associated symptoms
- Alleviating factors
- Aggravating factors
- Environmental factors
- Significance to patient

SKIN:

- Assessed throughout

HEAD and NECK:

- Assess LOC, alert and oriented to person, place and time or GCS if new confusion.
- Assess for any difficulty with speech and swallowing (CN 7, 9, 10, and 12).

HEAD and NECK CONTINUED:

- Inspect pupils – PERRLA (CN 2,3), Blink CN 3,7
- Inspect eyes, face, ears note: color, moisture of mucous membranes, discharge from eyes, ears, or nose, breath odor and skin breakdown.
- Carotid pulses

UPPER EXTREMITIES:

- Temperature
- Color
- Turgor
- Grip strength
- Capillary refill
- Clubbing of nail beds
- Radial pulses bilaterally

ANTERIOR THORAX:

- Inspect breathing, rate, rhythm and depth
- Assess cough/sputum
- Shape of thorax – Anterior Posterior to transverse ratio 1:2, symmetrical
- Auscultate breath sounds
- Auscultate heart sounds (aortic, pulmonic, erbs, tricuspid, mirtal) – listen with both diaphragm and bell
- Auscultate apical pulse x 1 minute while palpating radial pulse for pulse deficit.

ABDOMEN:

- Inspect- symmetry, shape, contour
- Auscultate bowel sound in 4 quadrants
- Auscultate for bruits if indicated
- Palpate for pain or distention
- Inquire re: last bowel movement, nausea, vomiting, diet concerns
- Assess urine color, amount, clarity with voiding
- Assess pain or burning on urination

LOWER EXTREMITIES:

- Temperature
- Color
- Turgor
- Edema
- Strength – plantar flexion, doriflexion
- Capillary refill
- Pedal pulses bilaterally – dorsalis pedis and posterior tibialis

POSTERIOR THORAX:

- Inspect skin, symmetry, spine, deformities,
- Auscultate breath sounds
- Inspect buttocks and back of legs for redness, skin breakdown.

- ➢ A more in-depth, focused assessment may be indicated depending on assessment findings.
- ➢ Report any abnormal, unexpected findings and document (in a systems fashion)

Adapted March 2019 by Denise Pasieka
Created by Denaine Lozza, November 2016