HEAD TO TOE ASSESSMENT

Vital Signs
- Pulse ___ (rate, strength, regularity)
- Temperature ___ (oral, rectal, tympanic)
- BP ___ RR ___ SPO2 ___

Orientation
- (Orientation x 4)
  - What year is this?
  - Tell me your name
  - Tell me where you are
  - Tell me why you're here

Pupil Check
- (PERRLA) Pupils equal, round, react to light, accommodate
  - Sluggish ( ) No change ( ) Brisk ( ) Normal ( )
  - Accommodation Yes ( ) No ( )

Neck Veins
- Pt at 45 degree angle ( )
- Neck veins flat ( ) Distended ( )

Heart Tones
- Apical pulse with stethoscope
  - Rate ___ Rhythm ___
  - Clarity of sounds ___ Abnormal ( )

Bilateral Checks
- Radial pulses ___
- Hand strength ___
  - Right stronger ( ) Left stronger ( ) Equal ( )
- Pedal pulses ___
- Capillary refill ___

Skin
- Skin turgor (1-3 second return) ___
- Skin colour ___
  - Pink ( ) Pale ( ) Jaundice ( ) Cyanotic ( )
- Conjunctiva ___
- Skin temperature ___
  - Hot ( ) Warm ( ) Cool ( )

Breath Sounds
- Anterior and Posterior ___
  - Clear bilaterally ( ) Left only ( )
  - Right only ( )
  - Both poor bilaterally ___
  - Adventitious sounds ___

Bowel Sounds
- Assess all 4 quadrants, do not palpate before auscultation
  - RLQ Active ( ) Absent ( )
  - Hyperactive ( )
  - RUQ Active ( ) Absent ( )
  - Hyperactive ( )
  - LUQ Active ( ) Absent ( )
  - Hyperactive ( )
  - LLQ Active ( ) Absent ( )
  - Hyperactive ( )
  - Soft ( ) Hard ( ) Distended ( )

Peripheral Edema
- Feet Yes ( ) No ( )
- Hands Yes ( ) No ( )

Pain
- Where is the pain? ___
- How long has it lasted? ___
- Does the pain travel anywhere? ___
- What makes it better/worse? ___
- Describe the pain ___
- Scale of 1 - 10 ___

Skin Breakdown
- Normal ( ) Abnormal ( )