Patient Assessment

May 2022 CEU



Objectives

- Scene Size-Up
- Primary Assessment
- Effective Communication
- History Taking
- Secondary Assessment
- Patient Monitoring



Scene Size-Up

- On-going process, not once and done
- Dispatch
- Standard Precautions/PPE
- Scene Safety
- Resource Determination
- Location of Patients
- Mechanism of Injury/Nature of Illness



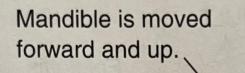
Scene Size-Up Example



Primary Assessment

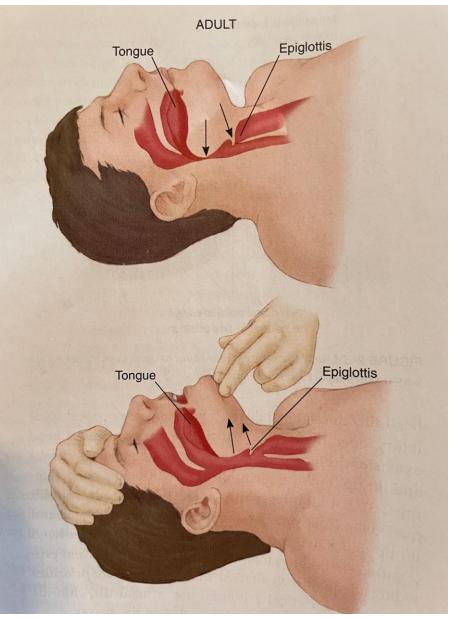
- Form a General Impression
- Stabilize the Cervical Spine
- Assess Mental Status
 - AVPU
- Assess the Airway
- Assess Breathing
- Assess Circulation
- Priority Determination



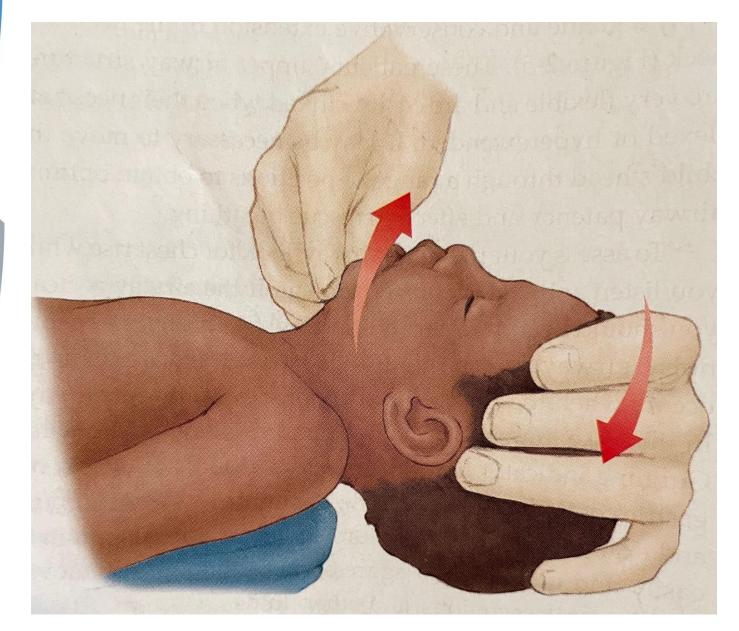


Head and neck are kept in neutral in-line position.











Effective Communication

- Build Trust and Rapport
- Techniques
- Interviewing a Patient
- Special Needs and Challenges
- Transferring Patient Care



History Taking

- Develop and differential diagnosis!
- Preliminary Data
- Chief Complaint vs. Primary Problem
- Present Problem
 - OPQRST-ASPN
- Past Medical History
 - SAMPLE
- Family/Social History



History Taking

- Review of Body Systems (ROS)
 - General
 - HEENT
 - Chest and Lungs
 - Heart and Blood Vessels
 - Lymph Nodes
 - Gastrointestinal System
 - Genitourinary System
 - Genitalia
 - Musculoskeletal System
 - Neurologic System
 - Hematologic System
 - Endocrine System
 - Psychiatric History



History Taking

Clinical Reasoning



- Physical Exam Techniques
 - Inspection
 - Palpation
 - Percussion
 - Auscultation



- The General Survey
 - Mental Status
 - Level of Consciousness
 - Appearance and Behavior
 - Speech and Language
 - Mood
 - Thoughts and Perceptions
 - Insight and Judgement
 - Memory and Attention



- The General Survey
 - General Appearance
 - Signs of Distress
 - Apparent State of Health
 - Vital Statistics
 - Broselow tape!
 - General Stature
 - Sexual Development
 - Skin Color and Obvious Lesions
 - Posture, Gait, and Motor Activity
 - Dress, Grooming, and Personal Hygiene
 - Breath or Body Odors
 - Facial Expressions



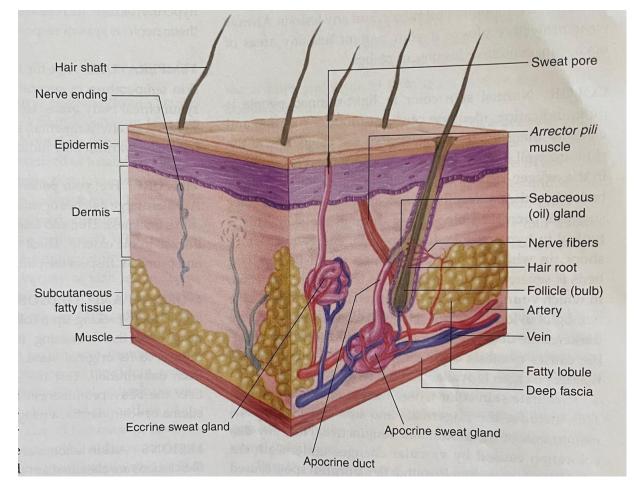
- The General Survey
 - Vital Signs
 - Respiration
 - Rate
 - Effort
 - Quality
 - Pulse
 - Rate
 - Rhythm
 - Quality
 - Blood Pressure
 - Body Temperature
 - Capillary Refill
 - Oral Mucosa Color



Anatomic Region Assessment



Skin



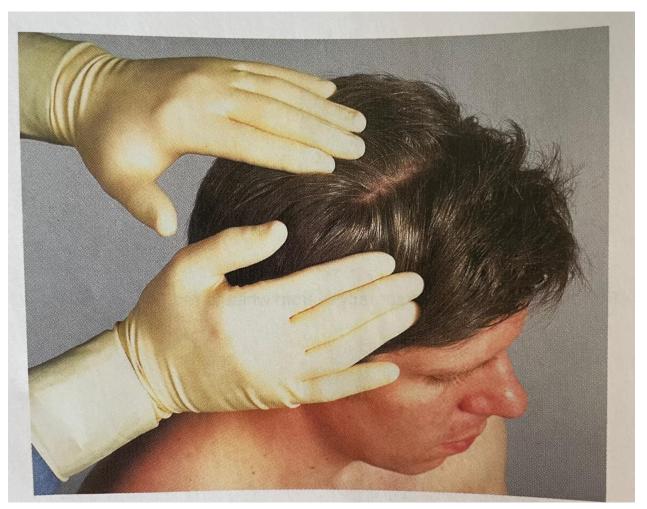


Skin Assessment

- Color
- Moisture
- Temperature
- Texture
- Mobility and Turgor
- Lesions

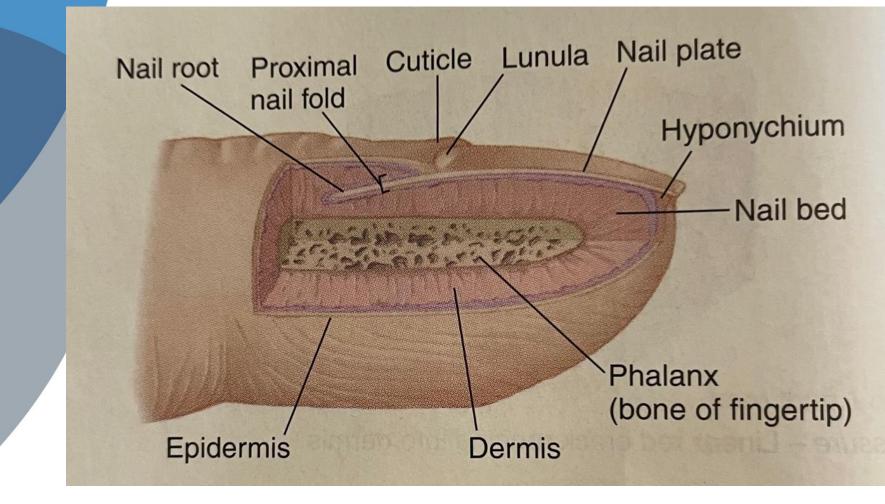


Hair Assessment



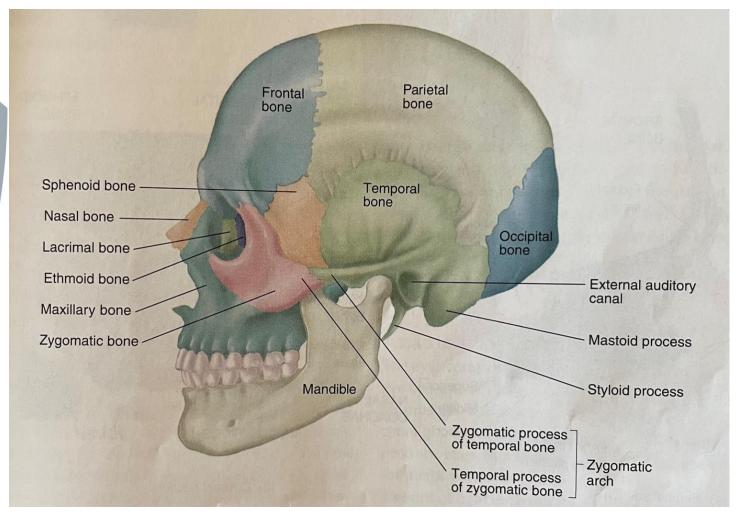


Nail Assessment



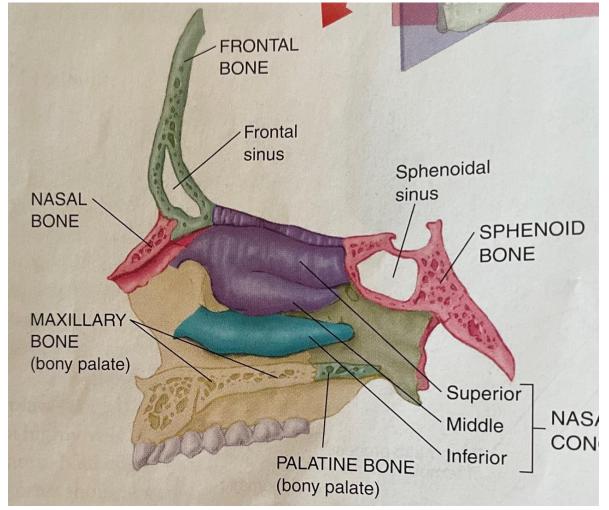


Head





Head



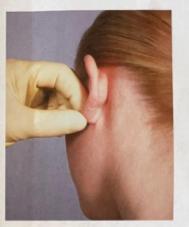


Head Assessment

Procedure 5-2 Examining the Head



5-2a Palpate the cranium from front to back.



5-2b Inspect the mastoid process.



5-2c Palpate the facial bones.

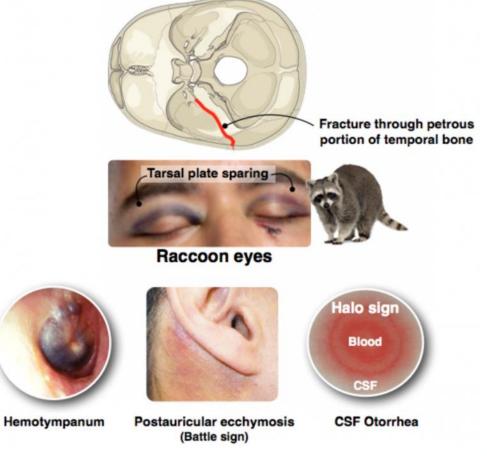


5-2d Palpate the TMJ.



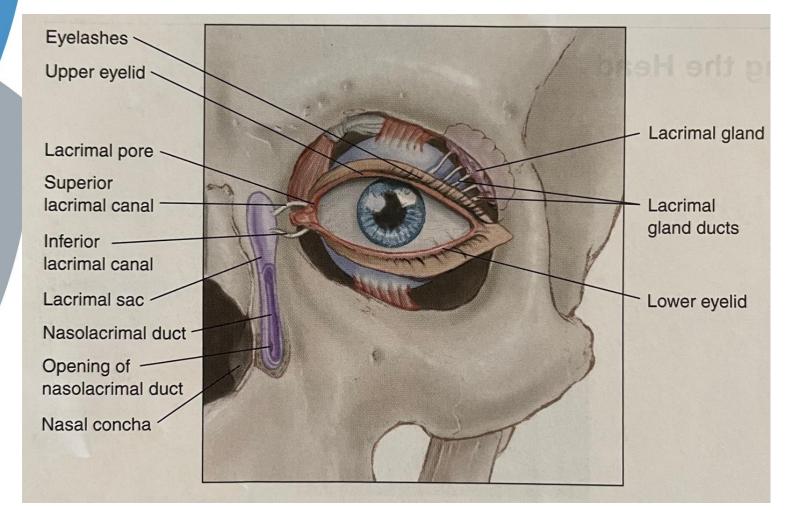
Head Assessment

Basilar Skull Fracture



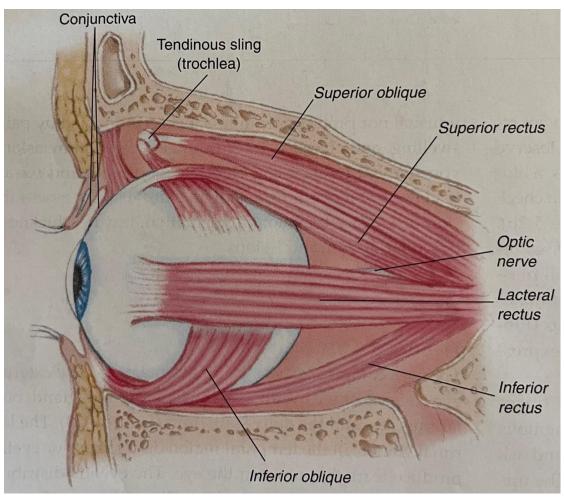


Eyes

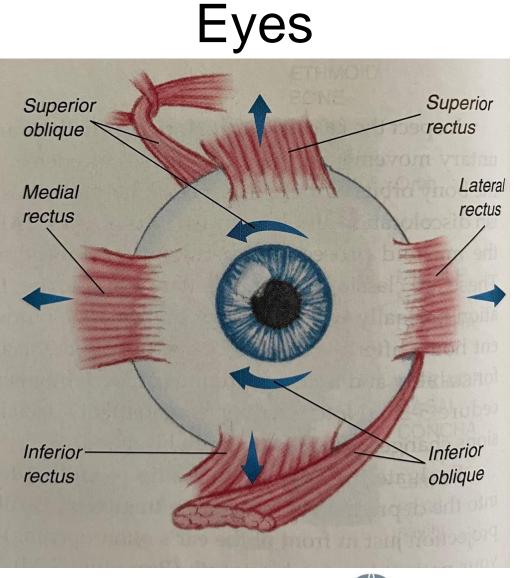




Eyes

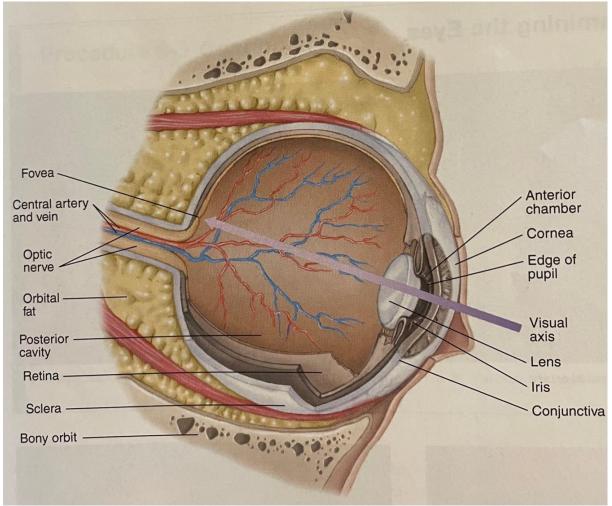














Eye Assessment

VISUAL FIELD ABNORMALITIES

Horizontal defect

Blind eye

Bitemporal hemianopsia

Homonymous hemianopsia

Homonymous quadrantic defect

Left Right

* Mercyhealth

Eye Assessment



5-3a Use a visual acuity chart to test visual acuity.



5-3b Test peripheral vision.



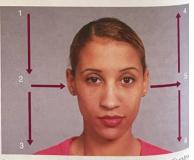
5-3c Inspect the external eye.



5-3d Test the pupil's reaction to light.



5-3e Test for accommodation.



5-3f Move your finger in an H pattern to test your patient's extra ocular muscles.



Eye Assessment



5-3g Check the corneal reflex.

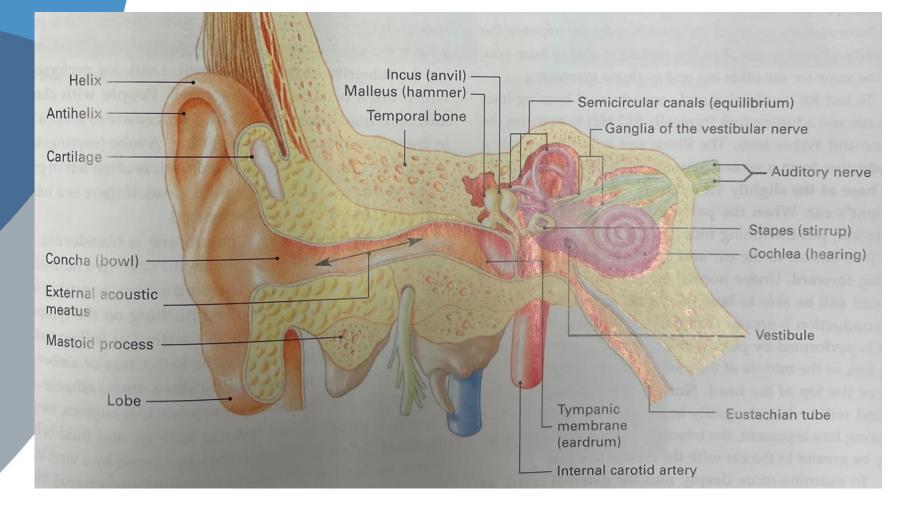
5-3h Visualize the interior eye with an ophthalmoscope.







Ears





Ear Assessment

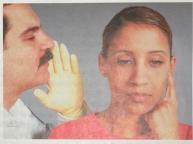




5-4a Examine the external ear.

5-4b Press on the mastoid process.





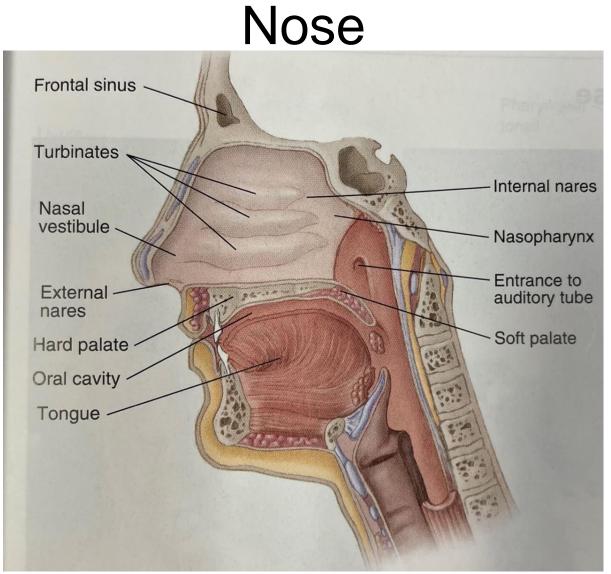
-4c Inspect the ear canal for drainage.

5-4d Whisper into your patient's ear.



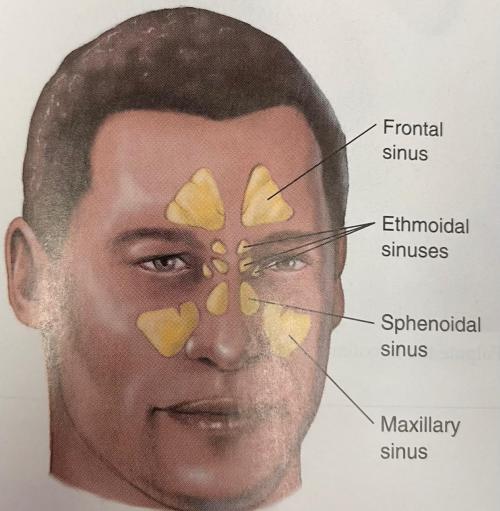
5-4e Visualize the inner ear canal and tympanic membrane.













Nose Assessment







5-5a Palpate the external nose.

5-5b Inspect the internal nose with an otoscope.

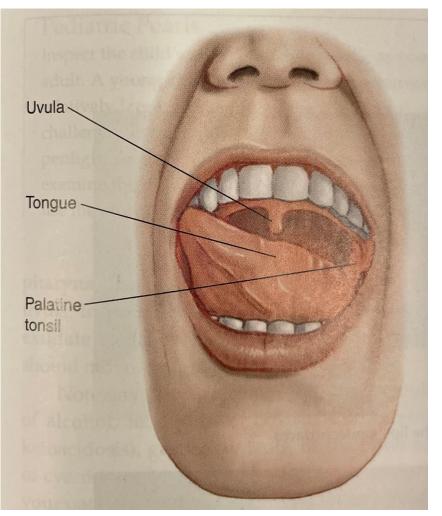
5-5c Inspect the nose for nasal obstruction.





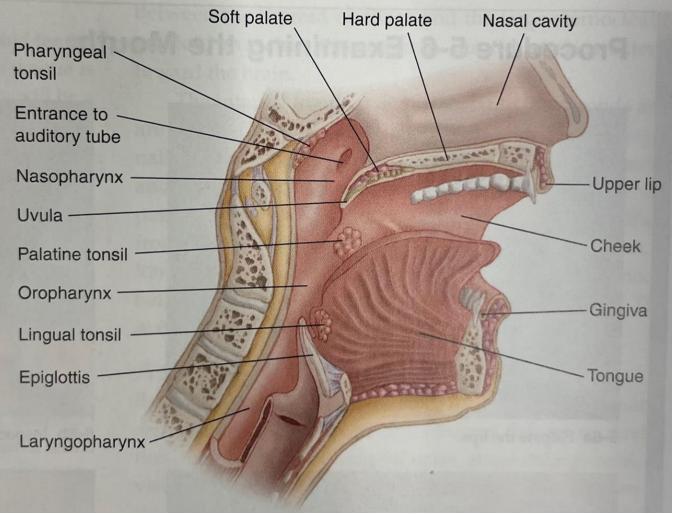


Mouth



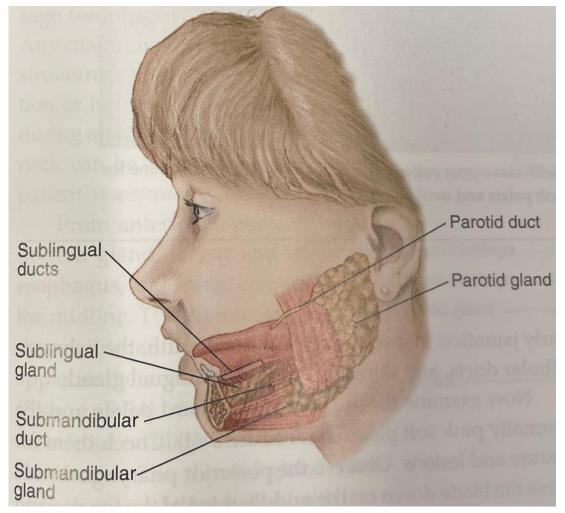


Mouth





Mouth





Mouth Assessment



5-6a Palpate the lips.



5-6c Examine the buccal mucosa.



5-6b Inspect the lips' undersurfaces.



5-6d Inspect the tongue using a gauze pad and a gloved hand.



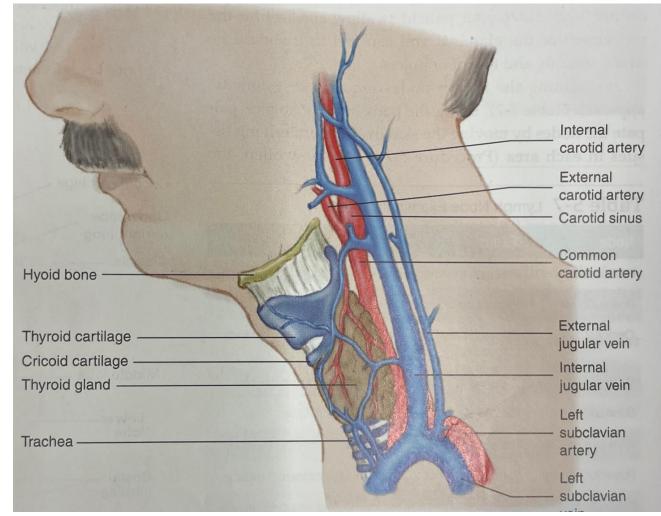
5-6e Inspect under the tongue.



5-6f Have your patient say "aaahhh" while you examine the soft palate and uvula.

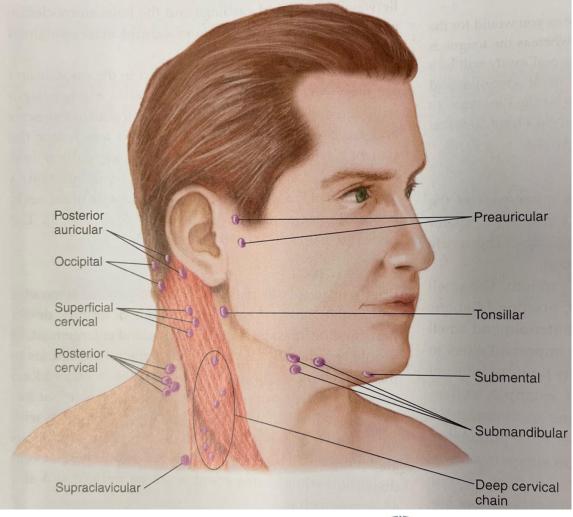


Neck





Neck





Neck Assessment

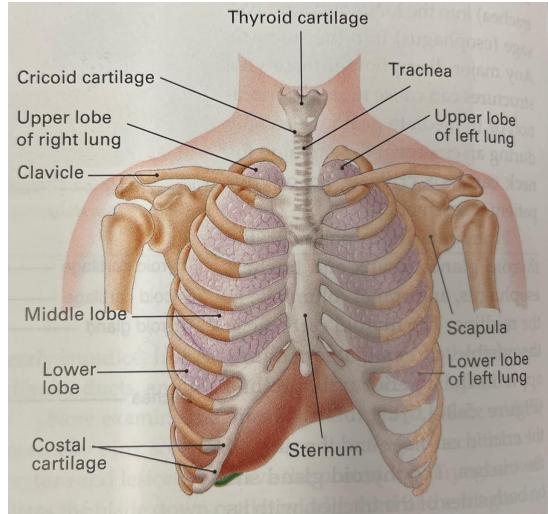


5-7c Palpate the thyroid gland.

5-7d Palpate the lymph nodes.

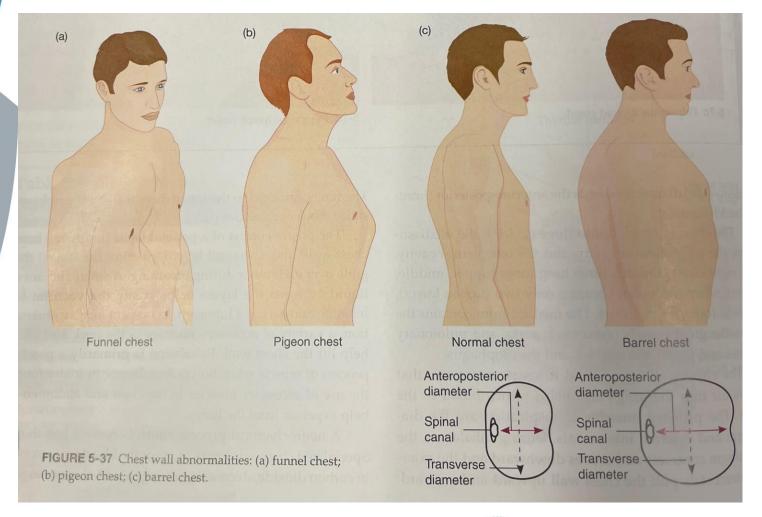


Chest and Lungs





Chest and Lungs Assessment



* Mercyhealth

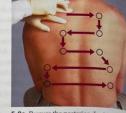
Chest and Lungs Assessment



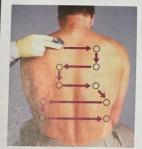


5-8a Palpate the posterior chest for excursion.

5-8b Palpate the posterior chest for tactile fremitus.



5-8c Percuss the posterior chest.



5-8d Auscultate the posterior chest.



5-8e Palpate the anterior chest for excursion.

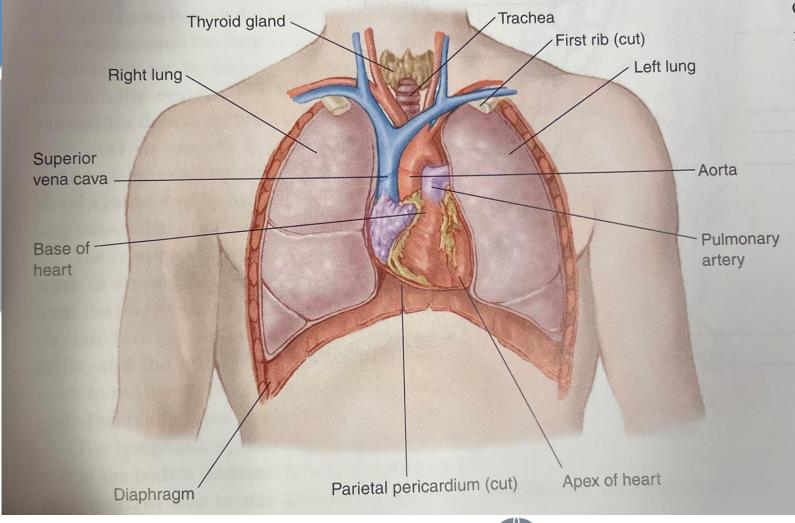


5-8f Percuss the anterior chest.



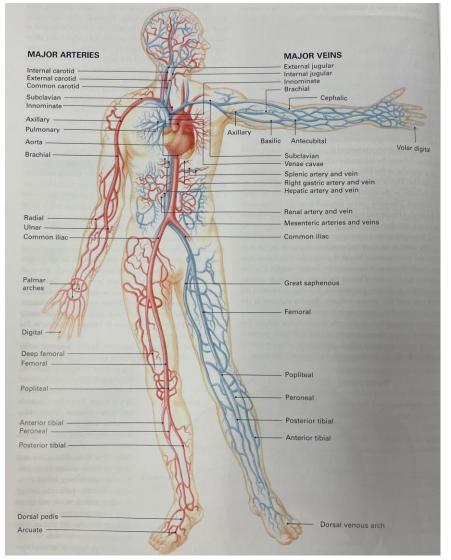


Heart and Blood Vessels



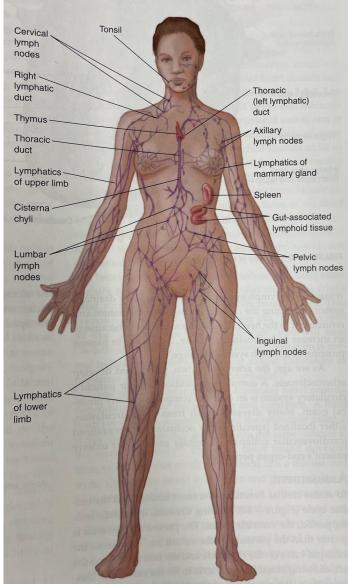


Heart and Blood Vessels



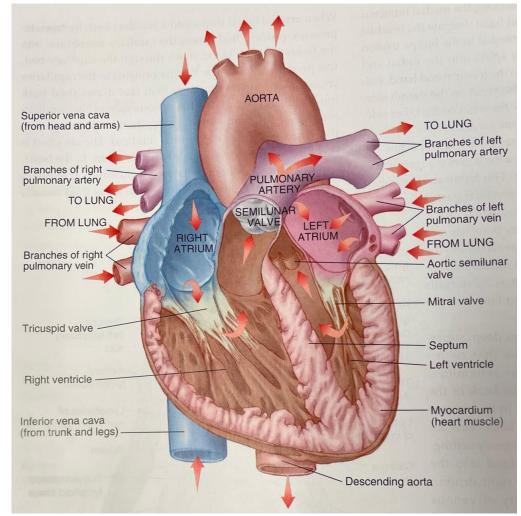


Heart and Blood Vessels





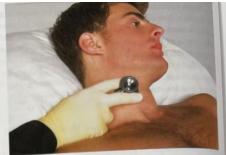
Heart and Blood Vessels Assessment





Heart and Blood Vessels Assessment





5-9a Assess the carotid pulse.

5-9b Auscultate for bruits.



5-9c Palpate for the point of maximal impulse (PMI).



5-9d Percuss for the PMI.



5-9e Auscultate for heart sounds.



Heart and Blood Vessels Assessment







5-10a Palpate the radial artery.

5-10b Palpate the brachial artery.

5-10c Palpate and compare the femoral arteries.



5-10d Palpate the popliteal pulse.

5-10e Palpate the dorsalis pedis pulse.

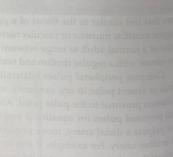




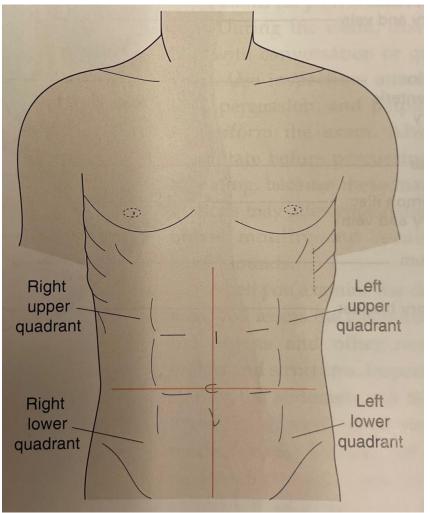
5-10g Palpate for edema.



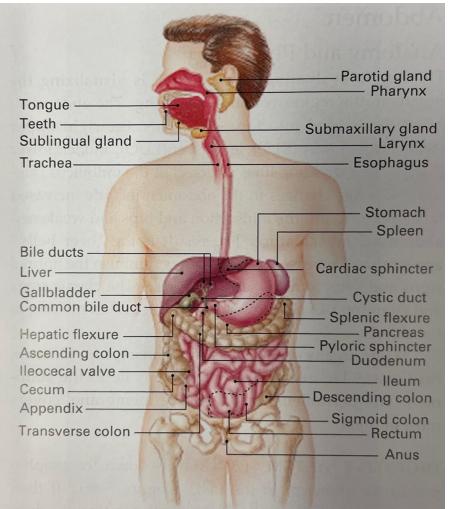
5-10f Palpate the posterior tibial pulse.



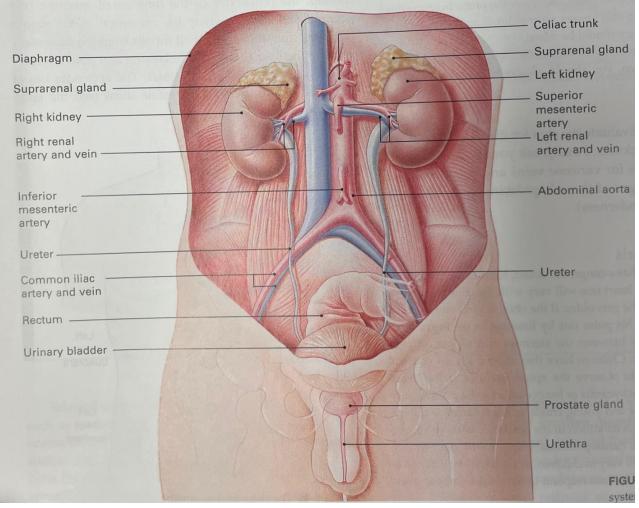




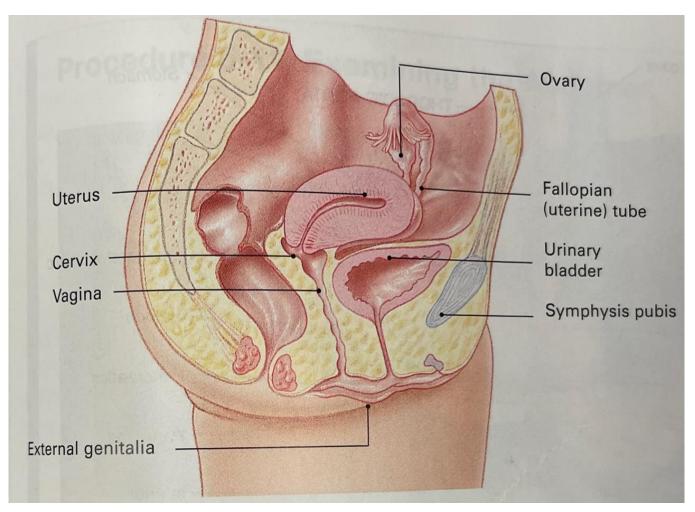




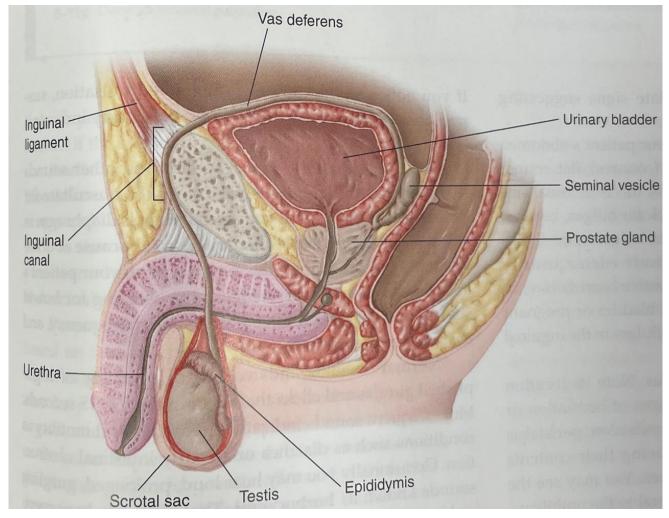




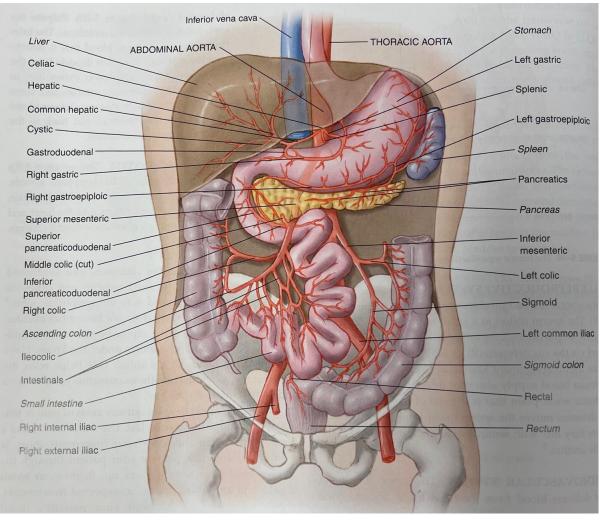














Abdomen Assessment



5-11a Auscultate for renal bruits.



5-11b Light abdominal palpation.

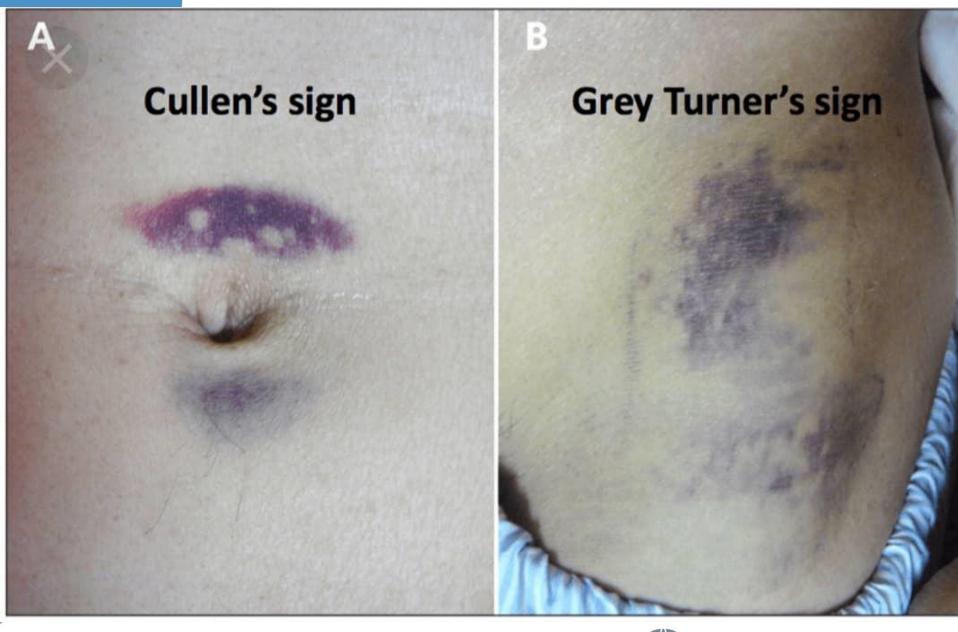


5-11c Deep abdominal palpation.



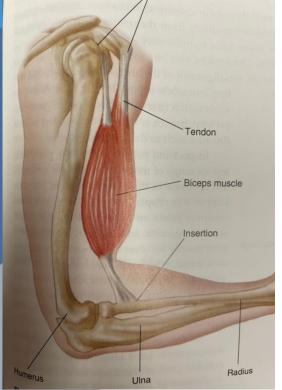
5-11d Test for ascites.

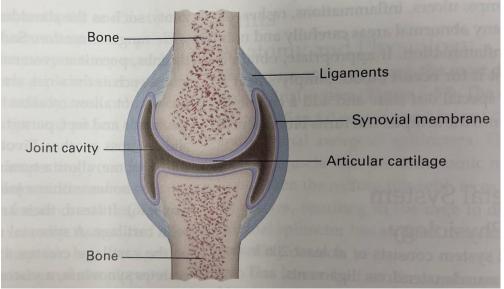


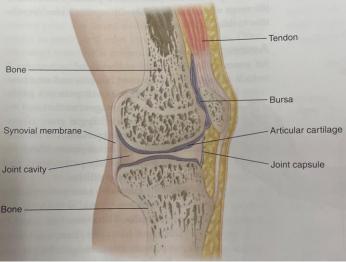




Musculoskeletal System

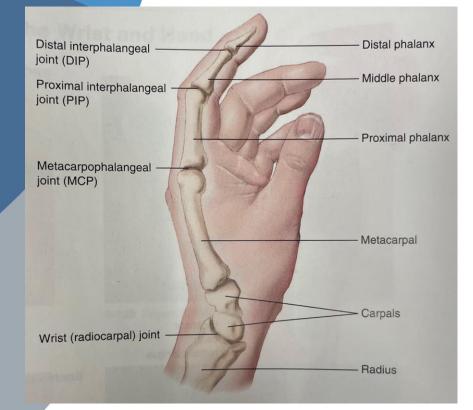


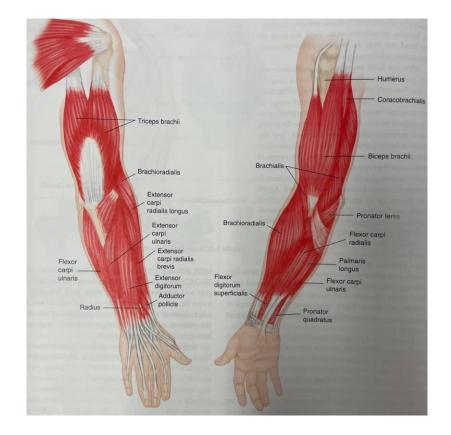






Wrists and Hands







Wrists and Hands Assessment







5-12c Palpate the wrist.

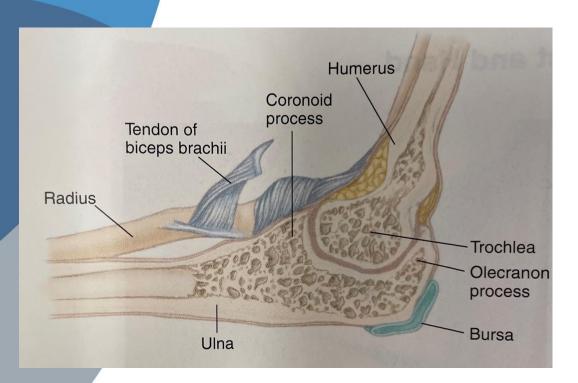


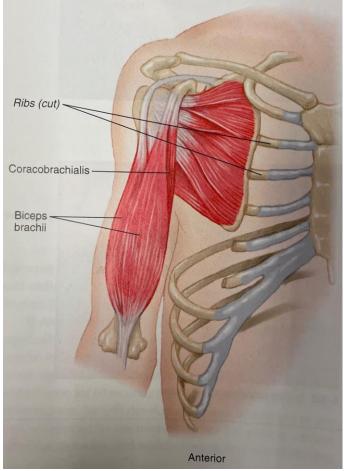






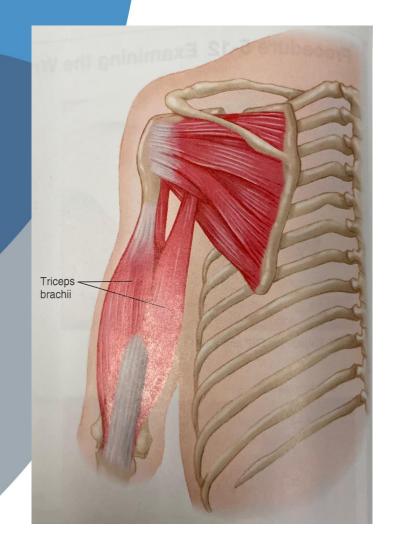
Elbows

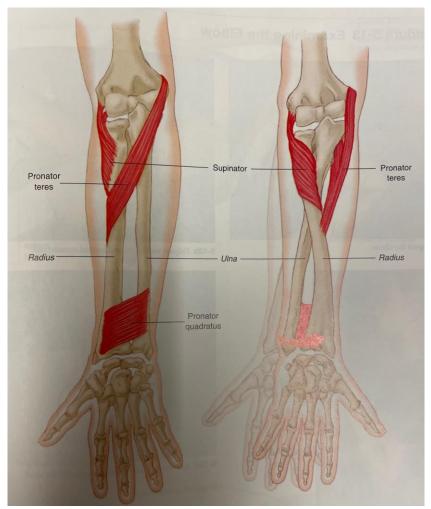






Elbows



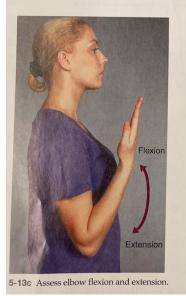




Elbows Assessment



5-13a Inspect the elbow.





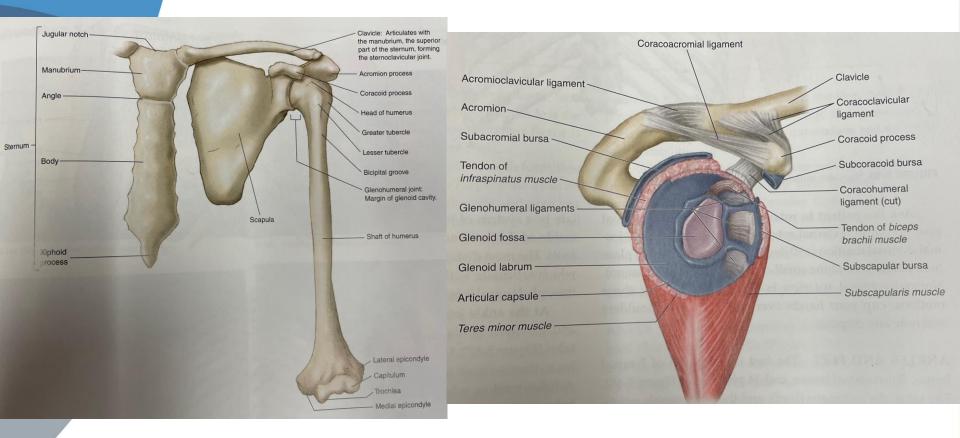
5-13b Palpate the lateral and medial epicondyles.



5-13d Assess supination and pronation of the wrist.

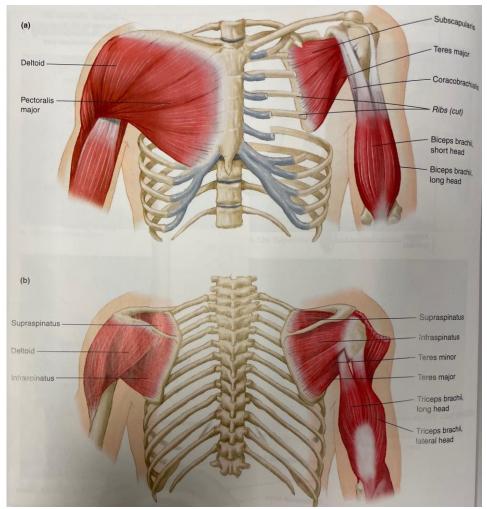


Shoulders





Shoulders

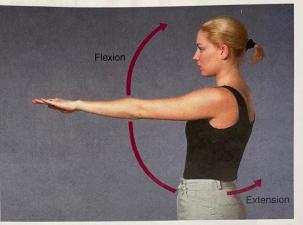




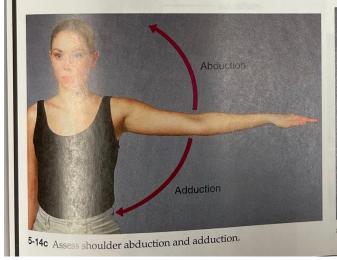
Shoulders Assessment

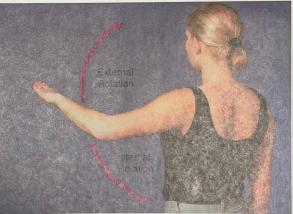


5-14a Palpate the shoulder with your fingertips.



5-14b Assess shoulder flexion and extension.

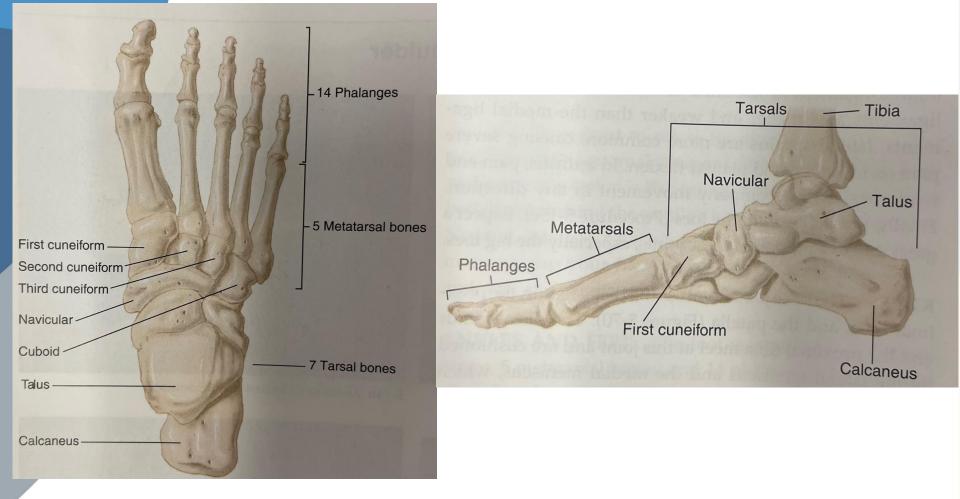




5-14d Assess internal and external shoulder rotation.

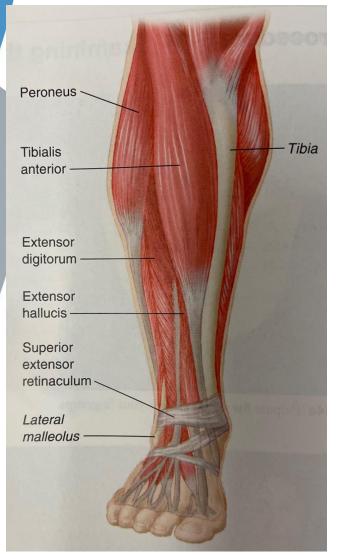


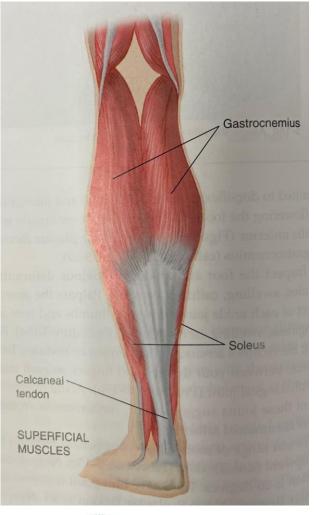
Ankles and Feet





Ankles and Feet







Ankles and Feet Assessment



5-15a Palpate the ankle and foot.



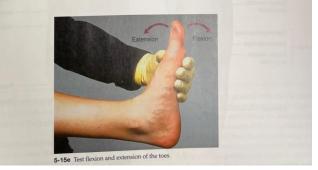
5-15b Palpate the metatarsophalangeal joints.



5-15c Assess dorsiflexion and plantar flexion.

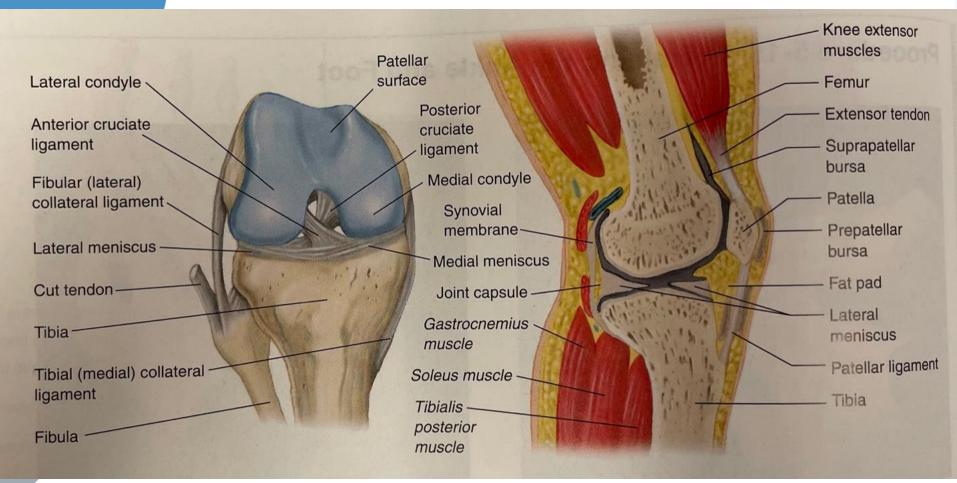


5-15d Assess inversion and eversion of the foot.



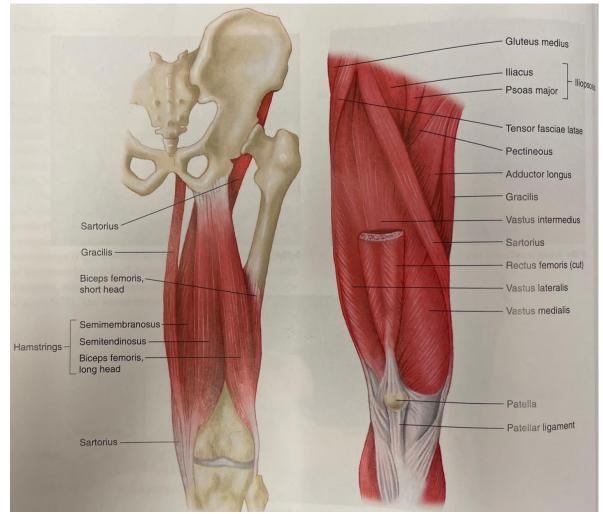


Knees





Knees





Knees Assessment





5-16b Palpate the patella.



5-16c Test the collateral ligaments of the knee

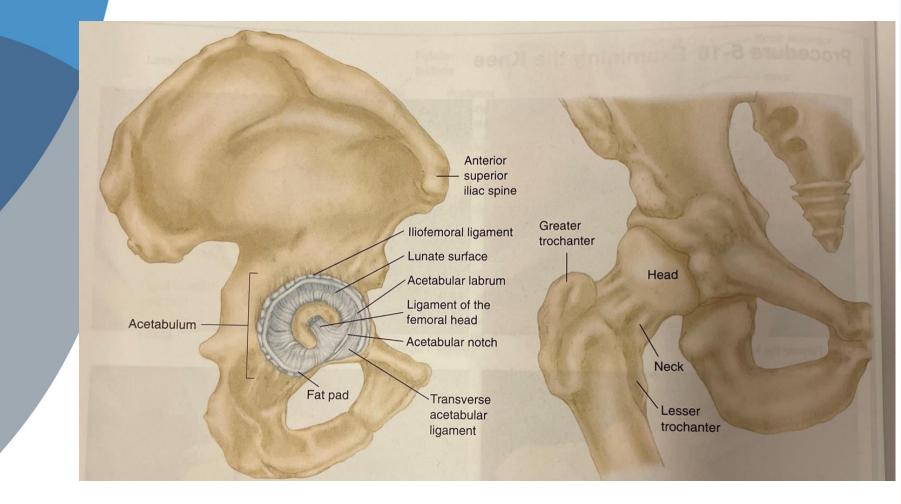


5-16d Test the cruciate ligaments of the knee.



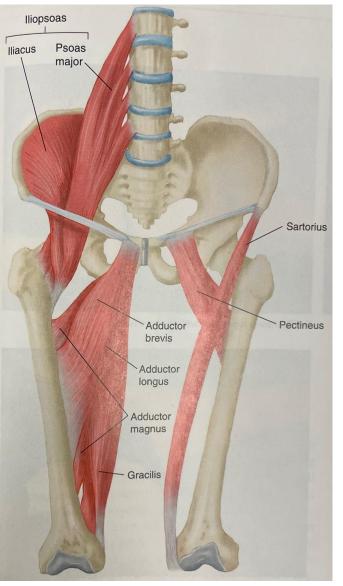


Hips



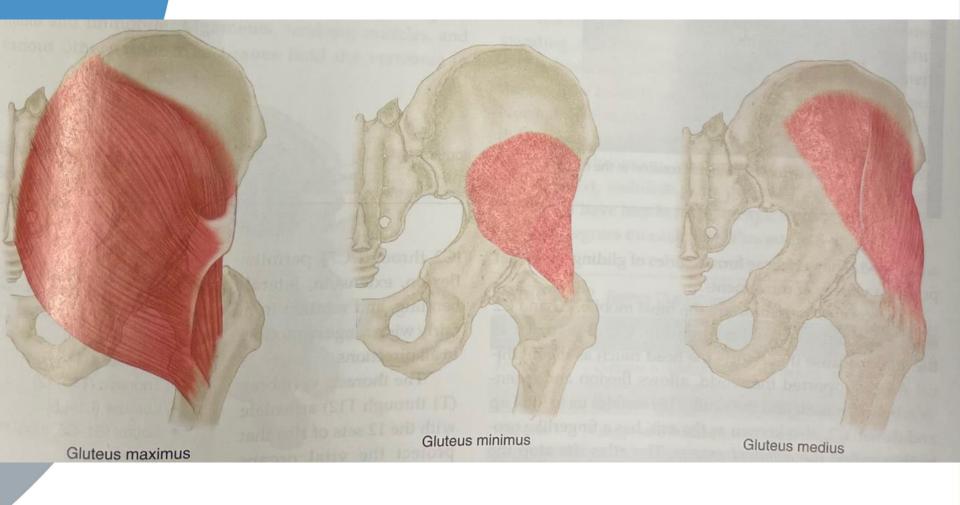


Hips





Hips





Hips Assessment





5-17a Palpate the hip.



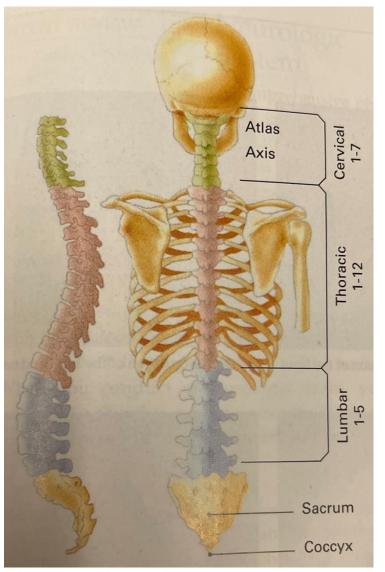
5-17b Assess hip flexion with the knee flexed.



5-17d Assess hip abduction and adduction.

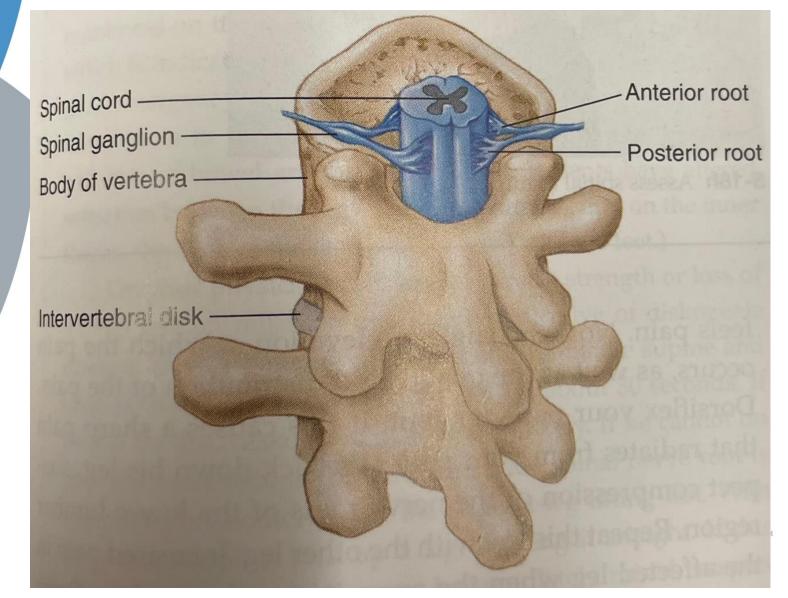










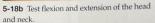


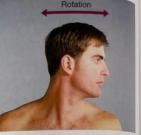
Spine Assessment



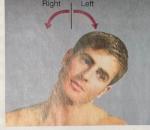
5-18a Palpate the spine.







5-18c Test rotation of the head and neck.



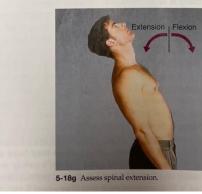
5-18d Test lateral bending of the head and neck.

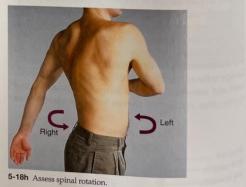


5-18e Assess flexion of the lower spine.



5-18f Assess lateral bending of the lower spine.





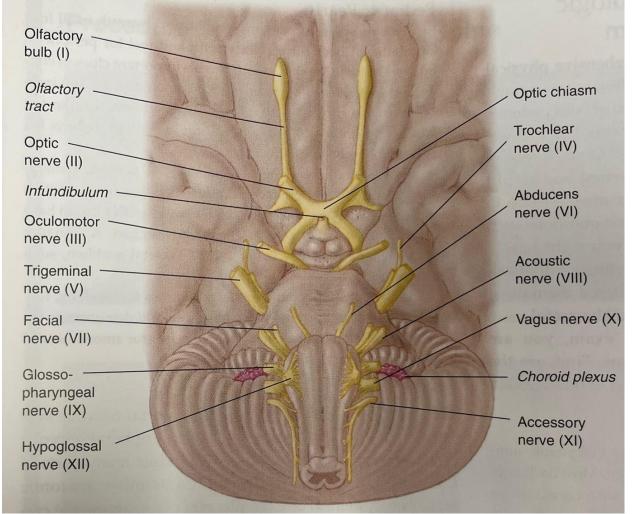


Neurologic System

- Mental Status and Speech
- Cranial Nerves
- Motor System
- Sensory System
- Reflexes



Cranial Nerves





Cranial Nerves

Cranial Nerve	Function	Innervation
I-Olfactory	Sensory	Smell
II-Optic	Sensory	Sight
III-Oculomotor	Motor	Pupil constriction; superior rectus, inferior rectus, inferior oblique muscles
IV—Trochlear	Motor	Superior oblique muscles
V—Trigeminal	Sensory Motor	Ophthalmic (forehead), maxillary (cheek), and mandibular (chin) regions Chewing muscles
VI-Abducens	Motor	Lateral rectus muscle
VII—Facial	Sensory Motor	Tongue Facial muscles
VIII – Acoustic	Sensory	Hearing, balance
IX—Glossopharyngeal	Sensory Motor	Posterior pharynx, taste to anterior tongue Posterior pharynx
X—Vagus	Sensory Motor	Taste to posterior tongue Posterior palate and pharynx
XI-Accessory	Motor	Trapezius, sternocleidomastoids
XII-Hypoglossal	Motor	Tongue



Cranial Nerves Assessment



5-19a Test the olfactory nerve by having your patient identify common odors.



5-19b Test the oculomotor, trochlear, and abducens nerves by evaluating your patient's extraocular movements.



5-19c Test motor function of the trigeminal nerve by palpating the temporal and masseter muscles.



5-19d Test sensory function of the trigeminal nerve with sharp and dull objects.



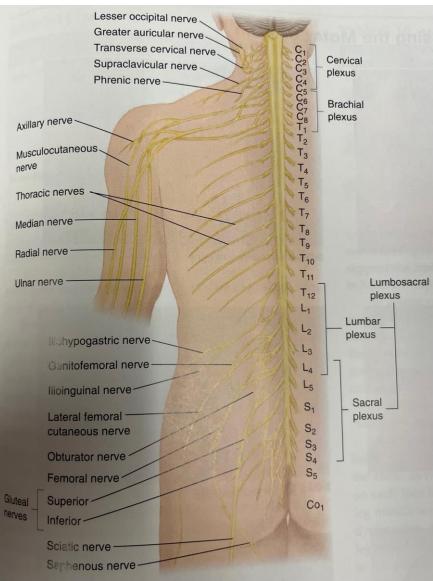
5-19e Test the glossopharyngeal and vagus nerves with a tongue blade.



5-19f Test the spinal accessory nerve by having your patient shrug her shoulders against resistance.



Motor System



* Mercyhealth

Motor System Assessment



5-20a Assess the elbow's range of motion.



5-20b Test your patient's grip.



5-20c Test arm strength.



5-20d Test for pronator drift.



5-20e Test for coordination with rapid alternating movements.



5-20f Test coordination with point-to-point testing.





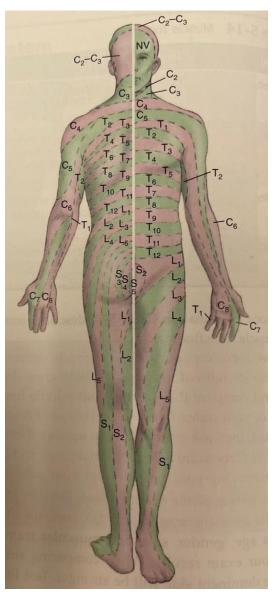
Motor System Assessment

Finding	Description
Spasticity	Increased tone when passive movement applied, especially at the end of range. Common in stroke.
Rigidity	Increased rigidity throughout movement (lead- pipe). Common in Parkinson's disease and extrapyramidal reactions. Cog-wheel motion is a patient-applied resistance.
Flaccidity	Loss of muscle tone causing limb to be loose. Common in stroke, spinal cord lesion, and Guillain-Barré syndrome.
Paratonia	Sudden changes in tone with passive movement. Can be increased or decreased resistance. Common in dementia.

1 4016 2-12	Muscle Strength Tests		
Muscles	Nerves	Test	
Biceps	C5, C6	Flexion of the elbow	
Triceps	C6, C7, C8	Extension of the elbow	
Wrist extensors	C6, C7, C8, radial nerve	Extension of the wrist	
Fingers	C8, T1, ulnar nerve	Finger abduction	
Thumb	C8, T1, median nerve	Thumb opposition	
lliopsoas	L2, L3, L4	Hip flexion	
Hip extensor	S1	Hip extension	
Hip abductors	L4, L5, S1	Hip abduction	
Hip adductors	L2, L3, L4	Hip adduction	
Quadriceps	L2, L3, L4	Knee extension	
Hamstrings	L4, L5, S1, S2	Knee flexion	
Feet	L4, L5	Dorsiflexion	
Calf muscles	S1	Plantar flexion	



Sensory System Assessment





Reflexes

- Biceps
- Triceps
- Brachioradialis
- Quadriceps
- Achilles Tendon
- Plantar



Reflexes Assessment



5-21a Test the biceps reflex (cervical nerves C5 and C6).



5-21c Test the brachioradialis reflex (cervical nerves C5 and C6).



5-21e Test the Achilles reflex (sacral nerves S1 and S2).





5-21b Test the triceps reflex (cervical nerves C6, C7, and C8



5-21d Test the quadriceps reflex (lumbar nerves L2, L3, and L4).



5-21f Test the plantar reflex (central nervous system).



5-21g Test abdominal reflexes (thoracic nerves T8, T9, T10, T11, and T12).

Patient Monitoring

- ECG
- Pulse Oximetry
- Capnography
- Pulse CO-Oximetry
- Blood Glucometry
- Ultrasound



When do we use a backboard?

