

Student Name: _____ Jesus Carrasco _____

Date: _____ 1/13/21 _____

Patient Physical Assessment Narrative

PHYSICAL ASSESSMENT NARRATIVE BY SYSTEMS: (Complete using assessment check list and reminders below)

GENERAL INFORMATION (Time of assessment, admit diagnosis, general appearance)

Time: 1500, 48 y/o Male. Admitting Diagnosis: DM Wound infection, Patient also had a fall at home which resulted in Left Tibia/Fibula Fracture and Medial Tibial Plateau Fracture. General Appearance: Alert, awake and up in chair when not ambulating, Temperature: 97.2 *F

Neurological - sensory (LOC, sensation, strength, coordination, speech, pupil assessment)

Alert and Oriented X 4, Pupils: Met PERRL- Pupils 2-3mm Bilaterally equal, round and reactive to light with a responsive and accurate cardinal gaze, Sensation: slightly diminished in lower extremities (Feet) due to DM but Upper Extremity sensation is strong. Moves and Responds appropriately on command. HGTW: strong bilaterally. Patient is under seizure protocol due to history.

Comfort level: Rates pain at 8/10 (0-10 scale) Location: Left Leg due to Fractures

Psychological/Social (affect, interaction with family, friends and staff)

Cooperative and Responsive to nursing staff in polite and approachable manner, Interacts appropriately with staff, patient does have history of ADHD, Bipolar depression and Anxiety, No family in the room..

EENT (symmetry, drainage of eyes, ears, nose, throat, mouth, including dentition, nodes and swallowing)

EENT are symmetrical, Sclera: is white with no drainage, Ears: canals clean and without drainage and no hearing devices used, Nose and Septum: midline and with pink mucosa, Throat: Trachea is midline and without nodes or deformities, Mouth and Tongue: Pink mucosa, moist and no sores, Teeth: are intact and no sign of infection or gum disease.

Respiratory (chest configuration, breath sounds, rate, rhythm, depth, pattern)

Chest is symmetrical: Scars on sternum and abdomen from previous CABGx4. Breath sounds: clear and audible moving air anteriorly and posteriorly, Rate: 16 breaths per minute, Oxygen Percentage: 98% on Room air, Rhythm and Pattern: Slow and deep breaths normal for patient.

Cardiovascular (heart sounds, apical and radial rate and rhythm, radial and pedal pulse, pattern)

S1 and S2 with regular audible rhythm, and rate of 86 beats per minute, Chest pain: Denied, Apical Pulse: audible and strong rate of 86 beats when auscultated 1 full minute, Radial Pulse: Equal and 2+ bilaterally, Nailbeds: are pink, clean and capillary refill <3 seconds, Pedal Pulse: 2+ bilaterally with generalizes edema to Left foot and slight 1+ pitting edema, Blood pressure: 146/84 with digital machine.

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Gastrointestinal (bowel habits, appearance of abdomen, bowel sounds, tenderness to palpation)

Bowel habits are regular with 1-2 BM daily, Abdomen: Appears slightly distended and slight tenderness with palpitation due to patient's history of Gastroparesis, bowel sounds are audible and active X 4 quadrants. Stool not observed. Last BM: 1/13/20

Genitourinary-Reproductive (frequency, urgency, continence, color, clarity, odor, vaginal bleeding, discharge)

Patient Voids regularly but frequency increases due to diuretic Rx of Furosemide 80mg, Urine Color: is a light yellow and Clarity is clear, Odor no assessed, No reports or observation of bleeding, Not discomfort reported or sign of UTI, Does not use urination devices at home.

Urine Output (last 24 hrs) 475mL observed during assessment **LMP** (if applicable) _____

Musculoskeletal (alignment, posture, mobility, gait, movement in extremities, deformities)

Back and chest are symmetrical with no deformities, Patient is in a Full Leg Brace located on left leg, Posture: upright, Mobility: is Good and patient ambulates with 2 wheeled walker in hallway, Gait: has regular steps with steady pace and is able to move all extremities without assistance, 4th Digit amputation on Left Foot due to DM.

Skin (skin color, temp, texture, turgor, integrity)

Skin color: normal and pink for race, Temperature: is warm, and non- cyanotic, Skin is intact with spots of Petechiae, bruises, redness and abrasions, Turgor: is elastic, Numerous tattoos located throughout his body.

Wounds/Dressings

Diabetic wound located on the Ball of patient's Right foot, Dime size but stage is not confirmed and not verified and is open to air. Diabetic wound located on ball of the patients Left Foot, size of half dollar but stage is not confirmed or verified and wound is covered with dressing.

Other

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