

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 of Assessment 0900. Pt admitted for acute chronic respiratory failure due to volume overload. Patient appears clean and comfortable.

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

Pt A&O x3. Pt felt dull and sharp sensations in her right arm. Grasps and pushes were strong in hands and feet bilaterally. Patient coordinated. No slurred speech noted. Pupils equal and reactive bilaterally. Pupils are a 3 reaction to light.

Comfort level: 0 (0-10 scale) Location: no pain noted

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

Pt is friendly and calm and interacts well with staff. No friends or family at the bedside.

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

Patient c/o a sore throat and coughing up copious amounts of white mucous. Drainage noted in the throat. No drainage noted in the eyes, ears, nose. No breakdown of skin in the nose or behind the ears. Facial symmetry noted. Positive swallow test. No enlarged nodes noted. No notable dentition abnormalities.

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

No noted abnormalities or use of accessory muscles in the chest. Breath sounds diminished upon auscultation. Respiratory rate 20. O2 97% on room air. Trachea midline.

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

Heart sounds clear. Apical and radial pulse equal. Rythym was regular at 72 bpm. Radial pulses 2+ bilaterally. Pedal

Adopted: August 2016

**Student Name: Eliana Servantez**

**Date:11/29/2023**

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pulses 2+ bilaterally. No edema noted

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

Abdomen was soft. Patient had hyperactive bowel sounds. No tenderness noted upon palpation noted. Patient mentioned that bowel habits recently started to become normal since being in the hospital.

\_\_\_\_\_ **Last BM 11/28/2023**

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

Pt stated normal frequency of urination. Pt is continent. Pt does not have urgency to urinate frequently. Urine was clear and yellow with no abnormal odor noted.

\_\_\_ **Urine output** (last 24 hrs) approximately 1000 mL LMP (if applicable) n/a

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

Musculoskeletal alignment good. Posture was good. Assistance needed for mobility. Gait unsteady. Positive movement in lower extremities with ease. Right arm had tetany. Left arm had positive movement with ease. No deformities noted.

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

Skin warm and pink on peripheral extremities bilaterally. Capillary refill less than 2 seconds. Skin turgor WNL. Skin intact.

**Wounds/Dressings**

No wounds noted. Clean dressing noted on Right AC IV access site. Clean dressing noted on left jugular CVAD.

**Other**