



1

2



Student Name: _____

Date: _____

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 0946

Patient admitting dx acute pyelonephritis

Pt sitting up in bed watching tv

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

Pt A&O x3

Sensation to face, upper and lower extremities, sensation intact x4 bilaterally, pt does experiece numbness and tingling in feet from neuropathy but can feel me touch her

HGTW strong bilaterally, push and pull strong with both hands and feet. PERLA intact, sclera white pt is coordinated and speech is clear, not slurred

Comfort level: Pain rates at 0 **(0-10 scale) Location:** N/A

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

Patient responded readily, calm/relaxed to questions and conversation with staff

facial expressions were responsive, friendly and cooperative with staff

no family at bedside at the time of assessment

EENT (symmetry, drainage of eyes, ears, nose, throat, mouth, including dentition, nodes, and swallowing) EENT symmetrical, no drainage assessed in EENT, mouth clean and intact,

Patient had no difficulty swallowing drink of water and eating, nodes unpalpable, oral mucosa pink and moist

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

chest configuration symmetrical on both sides