

## 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)

02/13/2024 at 1215; Admitting diagnosis: Exacerbated CHF with pulmonary edema; General appearance: The patient was sitting up in bed. She was friendly and did not show any signs of distress. She was well-nourished and had normal skin coloring for her race.

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

The patient was alert and oriented x 4. She was able to detect soft and sharp sensations. She was able to grasp my hands and wiggle her toes. She was able to follow all commands to raise her eyebrows and smile showing her teeth (cranial nerve VII), and to stick out her tongue, touch it to the roof of her mouth, and move it side to side (XII). She demonstrated her accessory nerve function by shrugging her shoulders. Her speech was clear, and her pupils were round, equal, and reactive to light.

**Comfort level: Pain rates at 5 (0-10 scale) Location: Middle, lower back**

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

The patient had a positive affect and appropriate interaction with staff.

**EENT** (symmetry, drainage of eyes, ears, nose, throat, mouth, including dentition, nodes, and swallowing) The patient's eyes, ears, mouth, and throat were symmetrical. She was wearing dentures. Her nodes were not swollen, but she had redness at the back of her throat; she denied pain. She did not have any difficulty swallowing.

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

The patient's chest was symmetrical. Her breath and lung sounds were normal and clear. Her rhythm was regular and unlabored. She was on 6 L of oxygen delivered through a nasal cannula; her respirations were 18, and her O2 saturation was 99.

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

The patient's blood pressure was 159/67 with a MAP of 98. Her apical rate was 72, with 2+ bilateral pulse rates. S1 and S2 were audible. She had a capillary refill of less than 2 seconds, and she did not have clubbing or edema.

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

## Physical Assessment Narrative

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

The patient stated that her bowel habits are normal. Her last bowel movement was yesterday, and she described it as brown and pasty. Her abdomen was soft and unswollen. Bowel sounds were heard x 4, and she did not display tenderness or guarding. Last BM 2/12/2024

**Genitourinary-Reproductive** (frequency, urgency, continence, color, clarity, odor, vaginal bleeding, discharge) The patient described her urinary habits as normal in terms of frequency, urgency, color, clarity, and odor. She was placed on a PureWick yesterday. It was removed this morning, and the canister contained amber colored urine. The patient has been ambulating to the restroom following the removal of the PureWick. She denies vaginal bleeding and discharge.

\_\_\_ Urine output (last 24 hrs) unknown LMP (if applicable) unknown

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

The patient's alignment and posture were erect. She was able to ambulate to the restroom with a normal gait. She was able to complete this portion of the exam by making a touchdown motion with her arms, rotating her wrists, pressing and pulling against my hands with her hands and feet, rotating her ankles, moving her ankles to her skins, turning her head side to side, and nodding up and down. She does not have musculoskeletal deformities.

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

Her skin was of normal color for her race and it was warm to the touch. She has skin turgor and her skin is intact. She does have bruising on her left abdomen, which she attributes to injecting herself with insulin. She also has brown markings on her shins bilaterally. She has a soft one inch fluid-filled sac at the base of her skull, which was reported to her nurse.

**Wounds/Dressings**

She has a PICC on her left forearm. There was dried blood around the site, and it was reported to her nurse.

**Other**

Adopted: August 2016