Instructional Module 1
Head-to-Toe Assessment Checklist

T	D	U	Assessment Component	Instructor Comments
			Alert and Oriented x 4: 1) Name & DOB 3) Current Date 2) Current Location 4) Event	
			Inspect scalp	
			Use penlight to assess PERRLA and cardinal gaze	
			Use penlight to check ears/nose/mouth	
			Smile and show teeth	
			Tongue out, side to side, roof of mouth	
			Eyebrow raise/wrinkle forehead	
			Inspect and palpate neck	
			Carotid pulses one at a time	
			Neck ROM (if not done with head inspection)	
			Shoulder shrug	
			Turgor	
			Heart sounds: four locations (clean stethoscope)	
			Anterior lung sounds: 8 places- start on right side	
			Inspect abdomen	
			Auscultate abdomen starting in RLQ and move clockwise	
			Palpate abdomen starting in RLQ and move clockwise	
			Ask about bowel and urine habits	
			Posterior lung sounds: 10 places-start on right	
			Inspect skin on back	
			Inspect skin of BUE	
			BUE ROM	
			Wrist ROM	
			Hand grasp	
			BUE flexion/extension	
			Palpate radial pulses bilaterally	
			BUE Capillary refill	
			BUE Nail shape/nail clubbing	
			Inspect skin of BLE	
			BLE ROM	
			Ankle circles	
			Toe wiggle	
			BLE flexion/extension	
			Palpate pedal pulses bilaterally	
			BLE Capillary refill	
			BLE nail shape	
			Inspect perineal area	