

## Examples of Normal/Abnormal Physical Assessment Findings

### NEUROLOGICAL/SENSORY (LOC, sensation, strength, speech, pupil assessment, pain):

Normal: Alert, oriented to person, place and time/date. Pupils 3 mm equal, round, reactive to light (PERLL). Moves all extremities on command, responds appropriately to sharp & dull sensations. Hand grasp and toe wiggle (HGTW) equal & strong bilaterally. Movements purposeful & coordinated. Speaks English(native language) clearly. Pain level "0" on 1-10 pain scale

Abnormal: Confused to place & time, oriented to person. R pupil 3 mm, L pupil 6 mm. Pupils react sluggishly to light. Does not respond to sharp/dull sensations. Right hand grasp weak, left strong, toe wiggle absent bilaterally. Speech slurred, incoherent. Complains of pain of 8 on 1-10 pain scale. Pain is dull ache to left knee.

### PSYCHOLOGICAL/SOCIAL (affect, interaction with family, friends, staff):

Normal: Cheerful affect, interacts appropriately with family, friends and staff

Abnormal: Flat affect. Little interaction with family, friends or staff. Agitated, uncooperative, withdrawn

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

Normal: Sclera clear & white without drainage. Ears symmetrical, auditory canals without drainage. Hears spoken voice without difficulty. Nasal septum midline, mucosa pink, oral mucous membranes pink, moist & intact. Neck supple with no palpable lymph nodes.

Abnormal: Sclera yellow, conjunctival membrane red with yellow purulent drainage. Unable to hear without hearing aid. Auditory canals with purulent drainage. Nasal septum deviated to left. Oral mucous membranes dry & cracked, gums red & swollen, numerous missing teeth. Neck stiff. Multiple enlarged cervical lymph nodes 3 cm in diameter present, tender to palpation.

### RESPIRATORY (chest configuration, breath sounds, rate, rhythm, depth, pattern):

Normal: Chest symmetrical, trachea midline. Respirations 28, even and unlabored. Breath sounds clear to auscultation (CTA) bilaterally. Breathing room air. O2 sat on room air (RA) 98%

Abnormal: Chest barrel shaped, trachea shifted to right. Respirations 34 and shallow. Breath sounds diminished on the left with expiratory wheezes heard throughout. Course crackles bilaterally, respirations labored. O2 3L nasal cannula (N/C) with O2 sat 86-88%.

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

Normal: S1 & S2 audible with regular rate and rhythm. Apical rate 72, radial pulses 2+ bilaterally with rate of 72. Pedal pulses 2+ bilaterally, no edema noted. B/P 110/76. Denies chest pain or discomfort. Nailbeds pink, capillary refill < 2-3 seconds.

Abnormal: Heart sounds audible with murmur noted. Irregular rate and rhythm. Apical rate 132, radial pulse 1+ bilaterally with rate of 102. Right pedal pulse 2+, left pedal pulse 0, audible with Doppler only. 3+ pitting edema bilaterally to ankles & feet. Nailbeds pale and gray. Capillary refill >3 seconds.

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

Normal: Abdomen flat, soft and nontender. Active bowel sounds X4 quadrants. States usually has BM every AM with soft, formed brown stool. (not observed)

Abnormal: Abdomen distended, firm. Bowel sounds absent X4 quadrants. Right lower quadrant (RLQ) . Complains of severe tenderness to RLQ during palpation. Incontinent of frequent, black tarry diarrhea stool.

**GENITOURINARY/REPRODUCTIVE** (frequency, urgency, continence, color, clarity, odor, vaginal bleeding, discharge):

Normal: Voids clear yellow urine, adequate amount. Denies odor, discharge or pain. Post-menopausal

Abnormal: Foley to gravity draining cloudy amber colored urine with foul smell and sediment. Urine output 100 mL in past 8 hours.

**SKIN/MUSCULOSKELETAL** (skin color, temp, texture, turgor, integrity, mobility, gait):

Normal: Skin warm, dry and intact. Color appropriate to race. Turgor elastic. Walks ad lib without assistance, gait steady.

Abnormal: Skin cool, clammy. Turgor poor. Bilateral lower extremities (BLE) contracted, lying in fetal position. Does not ambulate. Stage III decubitus ulcer on coccyx 10cm X 6cm covered with transparent dressing.

**WOUNDS/DRESSINGS** :

-10 cm midline abdominal incision, sutures intact, reddened with small amount of serous drainage

- Occlusive dressing to right knee clean, dry and intact