

**Temporal-** The temporal pulse is easy and strong to find on a child patient, so as a peds nurse in some cases this may be the best way to feel for a pulse. Especially if the child has had an arm/ hand injury.

**Carotid-** The carotid pulse is one that is easily accessible when the patient is in shock, in a code situation, or simply if the other pulse sites are not palpable. So in an emergency the nurse could use this site quickly in determining the next actions to take place.

**Brachial-** The nurse during their assessment needs to take the patients blood pressure, they are already going to find the brachial pulse prior to taking the pressure. So it would make sense for the nurse to find this pulse and calculate it then, take the blood pressure.

**Apical-** This site is used to help locate/ feel for an apical pulse. Using a stethoscope. A nurse might decide to use this method if there is damage to the body such as burns, and as they are already listening for bowel sounds and lung sounds they might as well determine pulse at this location at the same time.

**Ulnar-** The nurse could have a patient with hand trauma/ nerve damage and may use this pulse site to assess the hands circulation.

**Femoral-** This pulse site is often used during a code/ cardiac arrest situation. This is because the other pulses will not be palpable while this site is.

**Popliteal-** This site is used to feel if there is proper circulation to the lower leg.

**Posterial tibial, Dorsalis pedis-** Both sites are used to determine proper circulation to the feet. This can be done with patients who have diabetes type 2.