

N312 Lab Test Out 3 Danville

Student Name: Casey Buchanan

Exam Room Number: _____

Chief Complaints (CC): Headache

Demographical Data (5 points)

Gender: Female	Age: 28	Race: Mexican	Code Status: CPR
Allergies: Penicillin (causes rash)			
PMH: Scoliosis, eczema			
PSH: Wisdom teeth (2014)			
Social history			
Assistive devices: None	Smoke: No	Alcohol: Yes, 5 vodka cranberries/ day	Drugs: No

Vital Signs (5 points)

B/P: 114/70	Temp: 97.5 F (oral)	Pulse: 84/min	O2 sat: 98
Pain: 6/10	Wt: 138lbs	Ht: 5'8"	Visual Acuity: L20/50 R20/50
			RR: 15/min

History of present Illness (10 points)

Headache started yesterday afternoon.
Frontal portion of head is the only part that hurts.
Head has been hurting constant "pretty much nonstop."
Watching TV made the headache worse. Patient stated that the 3 rd vodka drink also made it worse.
Patient stopped drinking for the evening, the headache did not go away.
No other remedies or treatments were attempted.

Review of Systems (5 points total) Subjective

May circle the positives that the patient complains of

Review of Systems (10 points total)

Total points: _____

General	Fatigue, weight changes, fevers, chills, night sweats, fatigue
Skin	Dryness , rashes, lesions, non-healing sores, hair changes, puritis
HEENT	Headache , head injury, blurry vision, double vision, earache, drainage, change in hearing, nasal congestion, nose bleeds, nasal drainage, dry mouth, sore throat, swallowing difficulty,
Cardiac	Chest pain, palpitations, diaphoresis, dyspnea, PND, Orthopnea, claudication
Respiratory	Wheezing, cough, difficulty breathing, increase in sputum production
GI	Nausea, vomiting, diarrhea, constipation, abdominal pain, heartburn, jaundice, Hematochezia, Melena
GU	Hesitancy, frequency, urgency, burning, hematuria, incontinence, flank pain, flow changes
MSK	Swelling, stiffness or soreness in joints, back or neck pain
Neuro	Weakness, numbness, LOC, syncope, dizziness, headache, coordination changes, recent falls

Physical Exam (5 points per section)

Total of 60 points

<p>General: Alert and orient, distress, overall appearance</p>	<p>Skin: rashes, lesions, color, hair, nails, temperature, turgor, capillary refill</p>
<p>Documentation: Alert and oriented. Well appearing, looks stated age. Pleasant demeanor.</p>	<p>Documentation: Warm, pink, no rashes or lesions noted. Capillary refill <3 seconds, rapid recoil skin turgor. Slight dry skin on hands and arms, patient says is normal for this time of year.</p>
<p>Head and Neck: symmetry, tracheal deviation, palpate thyroid, check carotids, assess lymph nodes</p> <p><i>May be asked to identify lymph nodes: Preauricular, posterior auricular, occipital, tonsillar, posterior cervical, submaxillary, submental, anterior or deep cervical, supraclavicular</i></p>	<p>Eyes: appearance of lids, sclera and conjunctiva, PERRLA, EOM's, Roseburg, red light reflex</p>
<p>Documentation: Symmetrical, trachea symmetrical, thyroid palpable. 2+ carotid pulse.</p>	<p>Documentation: Eye lids pink, sclera white, cornea clear, conjunctiva light pink. PERRLA, extra ocular movements intact. Visual acuity 20/50. Red light reflex.</p>
<p>Ears: External ear appearing, inspect TM bilaterally (note color and how to use otoscope)</p>	<p>Nose: deviated septum, turbinates, polyps, palpate sinuses</p>
<p>Documentation: Right: auricle pink, no lesions, wax build up, unable to visualize tympanic membrane. Left: auricle pink, no lesions, wax build up, unable to visualize tympanic membrane.</p>	<p>Documentation: Septum midline, nasal tissue slightly inflamed, nasal turbinates erythematous, no polyps, sinuses palpable.</p>
<p>Throat: Appearance of tonsils, any erythema, exudate, uvula midline, moisture of mouth, teeth</p>	<p>Cardiac: Presence of S1 and S2, aortic, pulmonic, Erb's point, tricuspid, mitral, apical impulse (PMI)</p>
<p>Documentation: tonsils pink, uvula midline, soft palate and mucosa moist and pink. Good dentition.</p>	<p>Documentation: Clear S1S2 sounds. Auscultated aortic, pulmonic, Erb's, tricuspid, and mitral.</p>
<p>Thorax: symmetry, respiratory effort, auscultation of 6 posterior, 4 anterior, how to assess the RML, identify lung sounds (wheezes and crackles)</p> <p><i>May be asked to perform: Egophony, bronchophony, Tactile fremitus, Whispered Pequiloquey, diaphragmatic excursion</i></p>	<p>Abdominal: auscultation for bowel sounds, light palpation, deep palpation, presence of masses or enlarged organs, CVA tenderness (appropriate order)</p> <p><i>May be asked to perform: McBurney's point, psoas, Rovsing sign, Obturator sign, Murphy's</i></p>
<p>Documentation: Chest symmetrical, no discomfort or difficulty breathing. Clear lung sounds.</p>	<p>Documentation: Bowel sounds present. Light and deep palpation, no abnormalities felt. Patient reported no pain during palpation.</p>

	No CVA tenderness.
Extremities: pulses (brachial, radial, ulnar, femoral, popliteal, posterior tibial, dorsalis pedis), capillary refill, edema, symmetry, epitrochlear lymph nodes, homan's sign <i>May be asked to show pulse location: carotid, brachial, radial, femoral, popliteal, posterior tibia, dorsalis pedis</i>	Musculoskeletal: range of motion, passive or active, gait, strength Neurological: deep tendon reflexes (ulnar, patellar, Achilles, Babinski) Rhombergs <i>Cranial nerves: I, II, III, IV, V, VI, VII, VIII, IX, X, XI, XII</i>
Documentation: 2+ ulnar, radial, brachial, femoral, popliteal pulse, posterior tibial, and dorsalis pedis. Negative Homan's sign. No edema noted.	Documentation: Lower and upper extremity strength 5/5. Appropriate range of motion for age Cranial nerves 1-12 intact. Ulnar, patellar, and Achilles tendon reflexes intact.

Name: _____ Date: _____

Auscultation Assessment (5 points)

1st System	Cardiac auscultation	Identify S1 and S2	Murmur	Gallops (S3 and S4)
2nd System	Respiratory auscultation	Identify Regular lung sounds	Wheezes	Crackles

Organization and Flow (10 points)

Head to Toe Organized flow	Patient Privacy and ID	Appropriate Uniform Name badge visible	Hand Hygeine	Therapeutic Communication
5 pts	1 pt	1 pt	1 pt	2 pt

Instructor Comments:

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Head and Neck: Symmetrical, trachea symmetrical, thyroid palpable. 2+ carotid pulse.

Eyes: Eye lids pink, sclera white, cornea clear, conjunctiva light pink. PERRLA, extra ocular movements intact. Visual acuity 20/50. Red light reflex.

Nose: Septum midline, nasal tissue slightly inflamed, nasal turbinates erythematous, no polyps, sinuses palpable.

Ears: Right: auricle pink, no lesions, wax build up, unable to visualize tympanic membrane.

Left: auricle pink, no lesions, wax build up, unable to visualize tympanic membrane.

Throat: tonsils pink, uvula midline, soft palate and mucosa moist and pink. Good dentition.

Cardiac: Clear S1S2 sounds. Auscultated aortic, pulmonic, Erb's, tricuspid, and mitral.

Thorax: Chest symmetrical, no discomfort or difficulty breathing. Clear lung sounds.

Abdominal: Bowel sounds present. Light and deep palpation, no abnormalities felt. Patient reported no pain during palpation. No CVA tenderness.

Extremities: 2+ ulnar, radial, brachial, femoral, popliteal pulse, posterior tibial, and dorsalis pedis. Negative Homan's sign. No edema noted.

Musculoskeletal: Lower and upper extremity strength 5/5. Appropriate range of motion for age.

Neuro: Cranial nerves 1-12 intact. Ulnar, patellar, and Achilles tendon reflexes intact.

