

**Head-to-Toe Assessment**

Assessment conducted by \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

**LOC**

Alert  Drowsy  Lethargic  Stuporous  Coma

**Orientation**

Person \_\_\_\_\_  
 Place \_\_\_\_\_  
 Time \_\_\_\_\_  
 Situation \_\_\_\_\_

**Vitals**

Temp \_\_\_\_\_  R \_\_\_\_\_  
 BP \_\_\_\_\_ Pulse O<sub>2</sub> \_\_\_\_\_

**Head**

Hair \_\_\_\_\_  
 PERLA \_\_\_\_\_ mm  
 Nose \_\_\_\_\_  
 Ears \_\_\_\_\_  
 Mouth \_\_\_\_\_  
    o Midline tongue \_\_\_\_\_  
    o Moist \_\_\_\_\_  
    o Lesions \_\_\_\_\_  
    o Dentition \_\_\_\_\_

**Neck**

Carotid pulse \_\_\_\_  JVD +  Trachea midline

**Chest**

Apical Pulse \_\_\_\_\_  Muffled  Arrhythmia  
 Breath Sounds - Anterior \_\_\_\_\_  
    Posterior \_\_\_\_\_ Lateral \_\_\_\_\_  
 Chest Symmetry \_\_\_\_\_  
 Skin Turgor (clavicle) \_\_\_\_\_

**Abdomen**

Inspection \_\_\_\_\_  
 Auscultation \_\_\_\_\_  
    o LUQ (active / hyper / absent)  
    o RUQ (active / hyper / absent)  
    o LLQ (active / hyper / absent)  
    o RLQ (active / hyper / absent)  
 Palpation \_\_\_\_\_

**Upper Extremities**

Radial pulses equal, +2  
    o Other: \_\_\_\_\_  
 Temp vs. trunk (warm / cool)  
 Grip equal and strong \_\_\_\_\_  
 Capillary refill <3 sec \_\_\_\_\_  
 Vein filling rapid \_\_\_\_\_

**Lower Extremities**

Hair present \_\_\_\_\_  
 Edema \_\_\_\_\_  
 Foot strength \_\_\_\_\_  
 Homain's (+ / -) Claudication (+ / -)  
 Temp vs. Trunk (warm / cool)  
 Nails  Yellowed  Thickened  Ingrown

Pedal pulse R(palp / doppler) L(palp / doppler)

**ROM**

\_\_\_\_\_/\_\_\_\_\_  
 Upper R \_\_\_\_\_  Upper L \_\_\_\_\_  
 Lower R \_\_\_\_\_  Lower L \_\_\_\_\_  
 Sensation \_\_\_\_\_

**Strength**

**General Assessment**

Weight/Height \_\_\_\_\_  
 BM \_\_\_\_\_

**Pain Assessment**

Acute/Chronic  Intensity (0-10) \_\_\_\_\_  
 Location \_\_\_\_\_  
 Duration \_\_\_\_\_  
 Characteristics \_\_\_\_\_  
 Precipitation \_\_\_\_\_  
 Frequency \_\_\_\_\_  
 Non-verbals \_\_\_\_\_  
 Relief factors \_\_\_\_\_  
 Sleep \_\_\_\_\_

**Skin Assessment**

Description: \_\_\_\_\_



\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_