# Quick Head-To-Toe

# Assessment

ISBAR:
INTRODUCE SELF
SITUATION
BACKGROUND
ASSESSMENT

ORIENTATION(NEUROLOGICAL):
•NAME •DETERMINE LOC
•YEAR
•PLACE
•SITUATION

VITAL SIGNS:
•BLOOD PRESSURE

VITAL SIGNS:
-BLOOD PRESSURE
-RESPIRATORY RATE
-HEART RATE
-PULSE OXIMETRY
-TEMPERATURE
-PAIN

PUPILS: PERRLA
(NEURO)
•PULPILS
•EQUAL
•ROUND
•REACTIVE
•LIGHT
•ACCOMMODATION

MUSCULOSKELETAL:

·HAND GRASP

·HAND PUSH/PULL

·FEET PUSH/PULL

·GRADE UPPER/LOWER

EXTREMITIES 1-5

·R.O.M

·GAIT

·MORSE SCORE

ORAL & IV INTAKE
URINE OUTPUT
OTHER OUTPUT

COLOR
CONDITION
CLARITY
TEMPERATURE
BRADEN SCORE
SKIN TURGOR

INTEGUMENTARY:

BREATH SOUNDS-ANTERIOR
POSTERIOR
ADVENTITIOUS SOUNDS
CHEST SYMMETRY

CARDIOVASCULAR:
-HEART TONES- S1852
-PULSES (RADIAL, DORSALIS
PEDIS, POSTERIOR TIBIAL; GRADE
0-3)
-JVD
-CAPILLARY REFILL
-APICAL PULSE
-CALF TENDERNESS
-EDEMA

GASTROINTESTINAL:
AUSCULTATE BEFORE
YOU PALPATE
BOWEL SOUNDS
PALPATE
NUTRITIONAL STATUS

GENITOURINARY:
-URINE
-COLOR
.CHARACTER.CLARITY
-URINARY ALTERATIONSINCONTINENCE,
DYSURIA.FREQUENCY,BLADDER
DISTENSION, FLANK PAIN, ETC

## · DOCUMENT!

# **Quick Head To Toe Nursing Assessment Guide**

**David Baud** 

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