

Nursing Assessment

1. Part of Nursing Process
2. Nurses use physical assessment skills to:
 - a) Obtain baseline data and expand the data base from which subsequent phases of the nursing process can evolve
 - b) To identify and manage a variety of patient problems (actual and potential)
 - c) Evaluate the effectiveness of nursing care
 - d) Enhance the nurse-patient relationship
 - e) Make clinical judgments

Gathering Data

Subjective data - Said by the client (S)

Objective data - Observed by the nurse (O)

Document: SOAP/IE/R

Assessment Techniques:

The order of techniques is as follows (Inspect – Palpation – Percussion - Auscultation) except for the abdomen which is Inspect – Auscultation – Percuss – Palpate.

A. Inspection – critical observation "always first"

1. Take time to "observe" with eyes, ears, nose (all senses)
2. Use good lighting
3. Look at color, shape, symmetry, position
4. Observe for odors from skin, breath, wound
5. Develop and use nursing instincts
6. Inspection is done alone and in combination with other assessment techniques

B. Palpation – light and deep touch

1. Back of hand (dorsal aspect) to assess skin temperature
2. Fingers to assess texture, moisture, areas of tenderness
3. Assess size, shape, and consistency of lesions and organs
4. Deep = 5-8 cm (2-3") deep; Light = 1 cm deep

C. Percussion – sounds produced by striking body surface

1. Produces different notes depending on underlying mass (dull, resonant, flat, tympanic)
2. Used to determine size and shape of underlying structures by establishing their borders and indicates if tissue is air-filled, fluid-filled, or solid
3. Action is performed in the wrist

D. Auscultation – listening to sounds produced by the body

1. Direct auscultation – sounds are audible without stethoscope
2. Indirect auscultation – uses stethoscope
3. Know how to use stethoscope properly *[practice skill]*
4. Fine-tune your ears to pick up subtle changes *[practice skill]*
5. Describe sound characteristics (frequency, pitch intensity, duration, quality) *[practice skill]*
6. Flat diaphragm picks up high-pitched respiratory sounds best.
7. Bell picks up low pitched sounds such as heart murmurs.
8. Practice using BOTH diaphragms

Sample Nursing Physical Assessment Documentation

L Cohen



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Table of Contents Sample Nursing Physical Assessment Documentation

1. Understanding the eBook Sample Nursing Physical Assessment Documentation
 - The Rise of Digital Reading Sample Nursing Physical Assessment Documentation
 - Advantages of eBooks Over Traditional Books
2. Identifying Sample Nursing Physical Assessment Documentation
 - Exploring Different Genres
 - Considering Fiction vs. Non-Fiction
 - Determining Your Reading Goals
3. Choosing the Right eBook Platform
 - Popular eBook Platforms
 - Features to Look for in an Sample Nursing Physical Assessment Documentation
 - User-Friendly Interface
4. Exploring eBook Recommendations from Sample Nursing Physical Assessment Documentation
 - Personalized Recommendations
 - Sample Nursing Physical Assessment Documentation User Reviews and Ratings
 - Sample Nursing Physical Assessment Documentation and Bestseller Lists
5. Accessing Sample Nursing Physical Assessment Documentation Free and Paid eBooks
 - Sample Nursing Physical Assessment Documentation Public Domain eBooks
 - Sample Nursing Physical Assessment Documentation eBook Subscription Services
 - Sample Nursing Physical Assessment Documentation Budget-Friendly Options

6. Navigating Sample Nursing Physical Assessment Documentation eBook Formats
 - ePub, PDF, MOBI, and More
 - Sample Nursing Physical Assessment Documentation Compatibility with Devices
 - Sample Nursing Physical Assessment Documentation Enhanced eBook Features
7. Enhancing Your Reading Experience
 - Adjustable Fonts and Text Sizes of Sample Nursing Physical Assessment Documentation
 - Highlighting and Note-Taking Sample Nursing Physical Assessment Documentation
 - Interactive Elements Sample Nursing Physical Assessment Documentation
8. Staying Engaged with Sample Nursing Physical Assessment Documentation
 - Joining Online Reading Communities
 - Participating in Virtual Book Clubs
 - Following Authors and Publishers Sample Nursing Physical Assessment Documentation
9. Balancing eBooks and Physical Books Sample Nursing Physical Assessment Documentation
 - Benefits of a Digital Library
 - Creating a Diverse Reading Collection Sample Nursing Physical Assessment Documentation
10. Overcoming Reading Challenges
 - Dealing with Digital Eye Strain
 - Minimizing Distractions
 - Managing Screen Time
11. Cultivating a Reading Routine Sample Nursing Physical Assessment Documentation
 - Setting Reading Goals Sample Nursing Physical Assessment Documentation
 - Carving Out Dedicated Reading Time
12. Sourcing Reliable Information of Sample Nursing Physical Assessment Documentation
 - Fact-Checking eBook Content of Sample Nursing Physical Assessment Documentation
 - Distinguishing Credible Sources
13. Promoting Lifelong Learning
 - Utilizing eBooks for Skill Development
 - Exploring Educational eBooks
14. Embracing eBook Trends
 - Integration of Multimedia Elements

- Interactive and Gamified eBooks

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