

Nursing Assessment

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Objectives

- Review common s/s that present in college health
- Learn techniques to elicit additional information from patient
- Assessment of headache
- Assessment of abdominal pain
- Better recognize red flags of meningitis & appendicitis
- Improve descriptive documentation

Nursing Assessment

- Assessment of chief complaint
- Remember these....
- Tips and tricks
- Red flags

ACHA-NCHA II Spring 2014 survey

79,256 students

Allergies: 19.7 %

Hepatitis B or C: 0.3 %

Asthma: 9.1 %

High blood pressure: 3.1 %

Back pain: 12.6 %

High cholesterol: 2.7 %

Broken bone/Fracture/Sprain: 7.7 %

HIV infection: 0.2 %

Bronchitis: 6.2 %

Irritable Bowel Syndrome: 2.9 %

Chlamydia: 1.1 %

Migraine headache: 7.8 %

Diabetes: 1.1 %

Mononucleosis: 1.8 %

Ear infection: 7.0 %

Pelvic Inflammatory Disease: 0.3 %

Endometriosis: 0.9 %

Repetitive stress injury: 2.0 %

Genital herpes: 0.7 %

Sinus infection: 16.9 %

Genital warts/HPV: 1.0 %

Strep throat: 10.6 %

Gonorrhea: 0.3 %

Tuberculosis: 0.3 %

Urinary tract infection: 10.0 %

What do we see at Dartmouth College?

- Abdominal pain
- Headache
- URI
- Urinary complaints
- STI
- Birth control
- Injuries: sprains, cuts
- Immunizations/allergy shots

Old Carts



Assessing with OLD CARTS



- **O**nset
- **L**ocation
- **D**uration
- **C**haracteristics
- **A**ggravating factors
- **R**elated symptoms
- **T**reatment by the patient
- **S**everity

Interview Techniques

Mr. W. is a 51-year-old auto mechanic who comes to the clinic wanting to be checked out for shortness of breath. As you listen to him as he describes his symptoms in more detail, you say “Go on,” then later “Mm-hmmm.”

This is an example of which of the following skilled interviewing techniques?

- a. facilitation
- b. nonverbal communication
- c. echoing
- d. empathic response

Interview Techniques

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Tips and Tricks

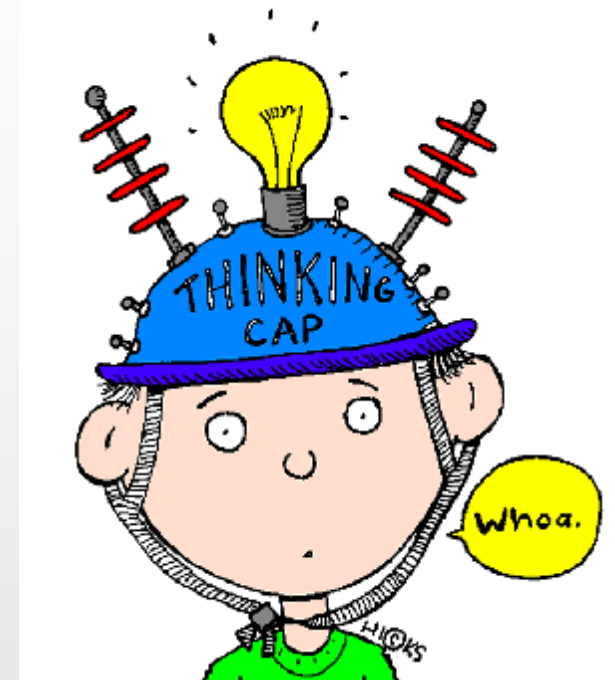
- **Open ended questions**
 - 90% dx is in history

Tips and Tricks

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- **Physical exam : verifies subjective info**

Tips and Tricks

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Tips and Tricks

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- **When in doubt explain what you see**



Tips and Tricks

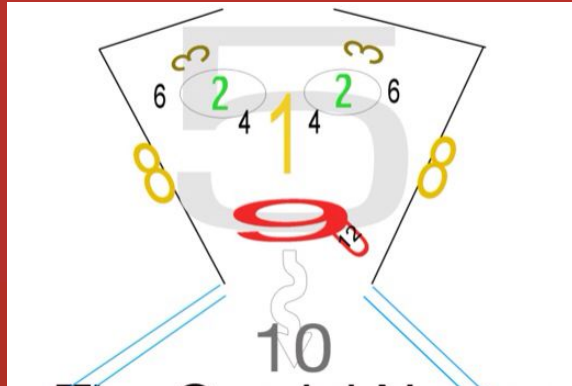
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- **Resources**
- **Protocols**



Tips and Tricks

- Open ended questions
 - 90% dx is in history
- Physical exam : verifies subjective info
- Not everything fits into a square box
- When in doubt explain what you see
- Resources
- Protocols
- **Know when to NOT follow the protocol**
 - Benner (Novice to Expert)
 - Has your “gut instinct” ever been wrong?....





Headache

[HTTPS://WWW.YOUTUBE.COM/WATCH?V=OLBWSHG_KJ4](https://www.youtube.com/watch?v=OLBWSHG_KJ4)

Headache: Assessment

- **OLD CARTS**



Headache: Assessment



- **HPI (history of present illness)** *what about last night?...

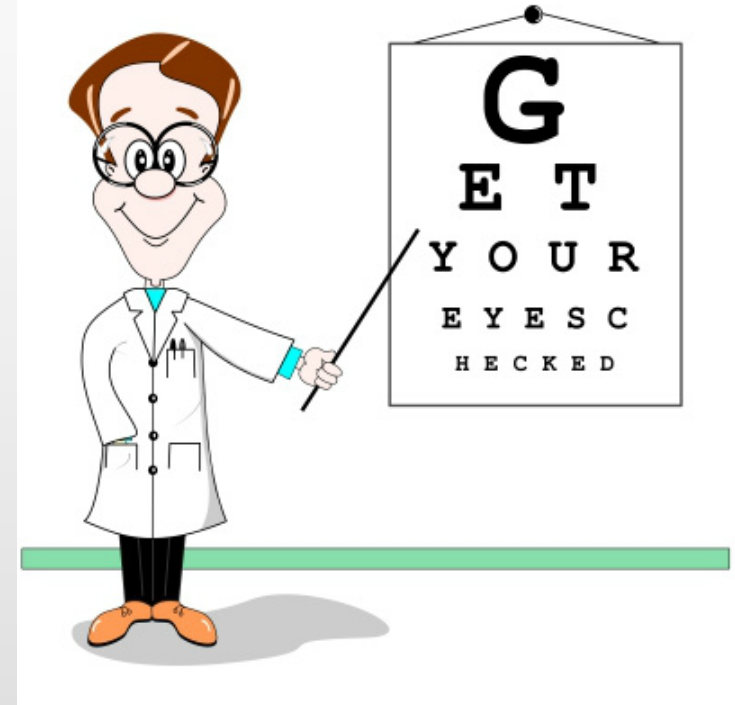


Headache: Assessment

- OLD CARTS
- HPI (history of present illness) *what about last night?...
- **Appetite**

Headache: Assessment

- OLD CARTS
- HPI (history of present illness) *what about last night?...
- Appetite
- Vision (Snellen)
- Ask about double vision/visual fields
- Aura
 - Usually unilateral : migraine



Headache: Assessment

- **Reflexes (graded 0-4)**
 - 2+/4 is normal
 - Triceps
 - Patella
 - Biceps
 - Achilles
 - Brachiradialis
 - Plantar (Babinski) Neg. is normal after age 2.
 - Babies and brain damage flex and fan

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- Balance/gait
 - Tandem walk
 - Rapid alternating movements (upper / lower)
 - Romberg
 - Pronator drift

Remember these...

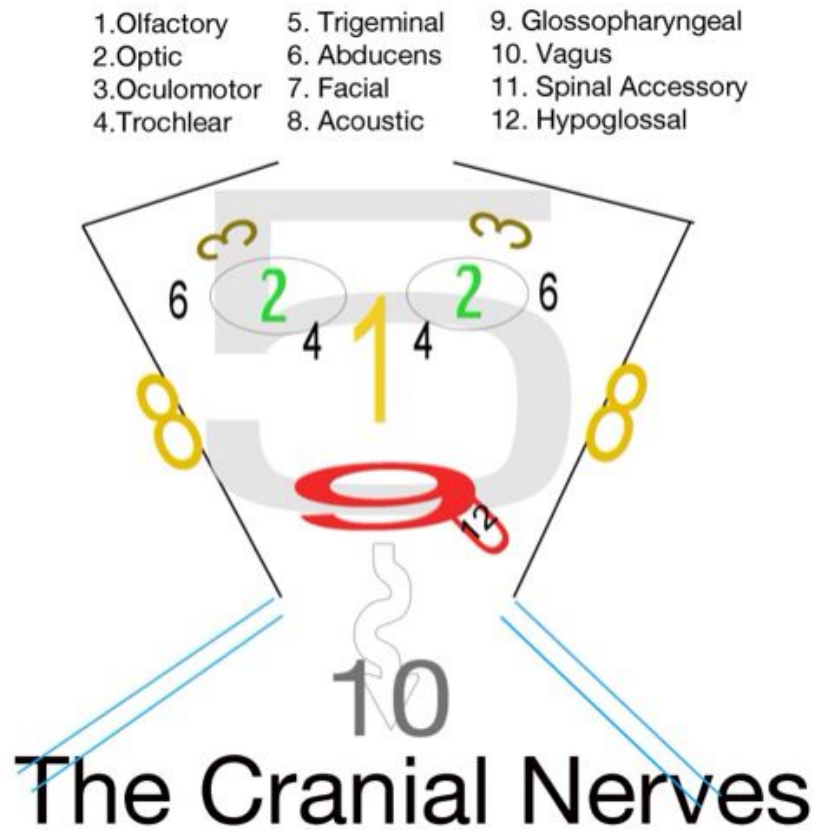
Stereognosis



Graphesthesia

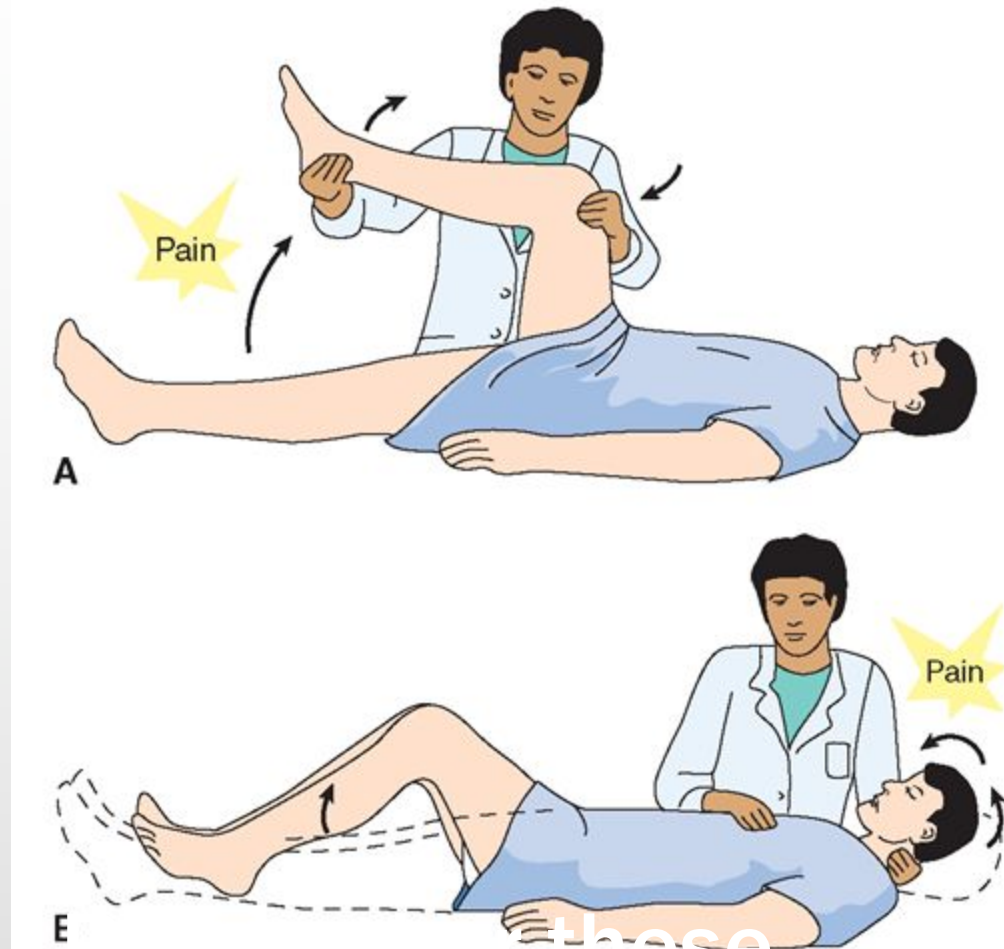


Remember these...



1. Sniff
2. Visual acuity
3. 6 cardinal gazes, pupillary constriction, opening and closing eyes
4. 6 cardinal gazes, downward & inward movement of eyes
5. Facial sensation-maxillary, mandibular. Masseter strength & temporalis muscle strength
6. 6 cardinal gazes & lateral movement of eyes
7. Puffing out cheeks, smile & frown
8. Whisper test, Weber, Rinne & Romberg
9. gag & swallow
10. Cough & gag reflex (motor)
11. Shrug (trapezius) side to side with head (sternocleidomastoid)
12. Tongue movement and strength

Remember these....



Kernig Sign

Brudzinski Sign

Remember these....

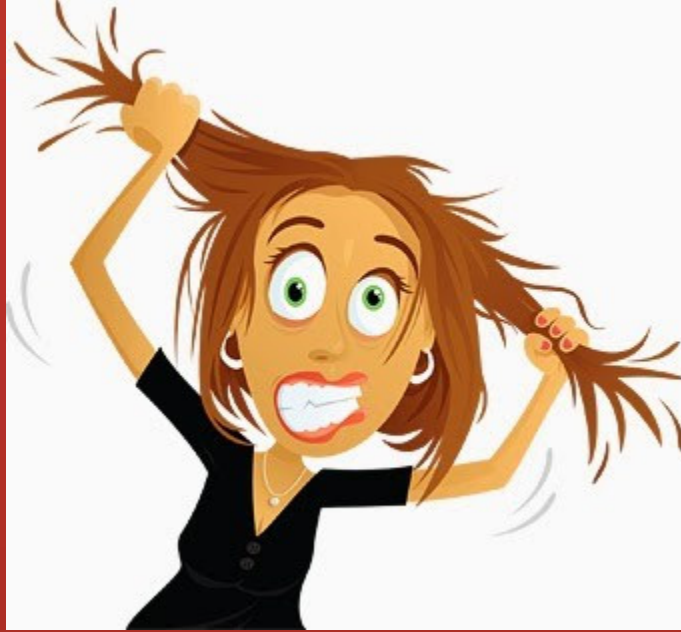
Meningeal irritation

Headache: Red Flags

- **RED FLAGS**
 - Worst headache of life
 - Sudden onset
 - Recent head injury
 - Neuro changes with out history of Migraine
 - Fever
 - Nuchal rigidity
 - Increases with Valsalva
 - Wakes from sleep
 - “different”
 - **BILATERAL** scotoma (Pituitary tumor ~ compression of optic chiasm)

Meanwhile....

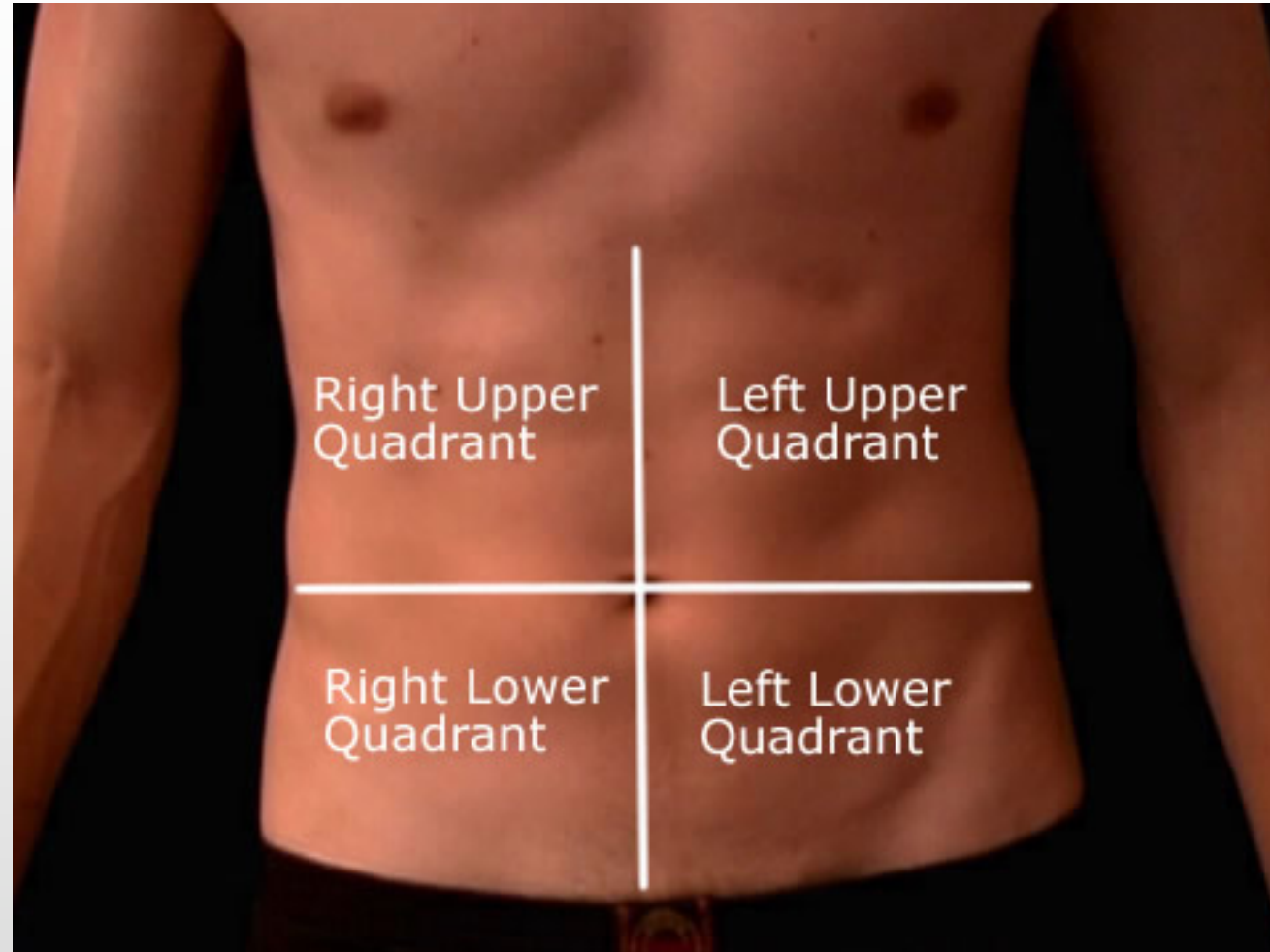
- Headache diary (pain scale/food/activity)
- Dilated eye exam
- History of migraine? Triggers?
- OTC's
- Sleep
- https://www.youtube.com/watch?v=0lbwshg_Kj4



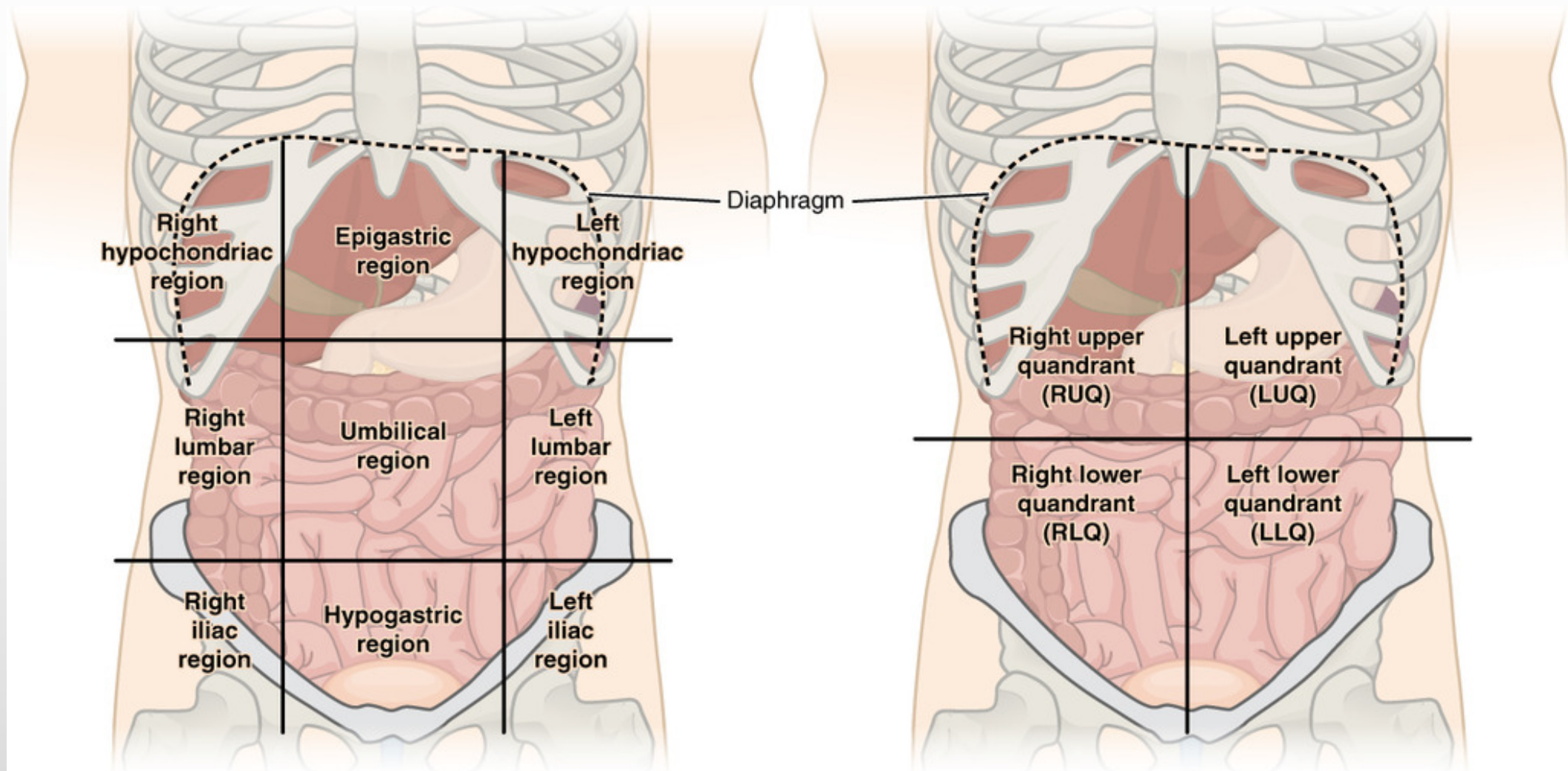
Abdominal Pain

Abdominal Pain: Assessment

- Inspect
- Auscultate
- Percuss
- Palpate



Abdominal Pain: Assessment



Abdominal Pain: Assessment

- OLD CARTS
- HPI (history of present illness) *what about last night?...
- VS & appearance
- ADL's
- Appetite/food
- Elimination



Types of Abdominal Pain

- **Visceral pain:** hollow organs contract or become distended or solid organs swell against capsule.
 - gnawing, cramping, aching
 - Difficult to localize
 - labor
- **Parietal pain:** inflammation that effects parietal peritoneum
 - Severe
 - Easily to localize
 - appendicitis
- **Referred pain:** originates different place but shares spinal nerve innervation
 - Gallbladder / Shoulder

Abdominal assessment

- Listen for 5 min in each quadrant
- 5-34 sounds a minute (normal)
- Light palpation vs. deep palpation
- Borborygmi (long gurgles)
- Hematochezia (blood in stool)
- Melena (black tarry stool)
- hepatosplenomegaly

The mystery of percussion...

Say what?.....



What do I do?

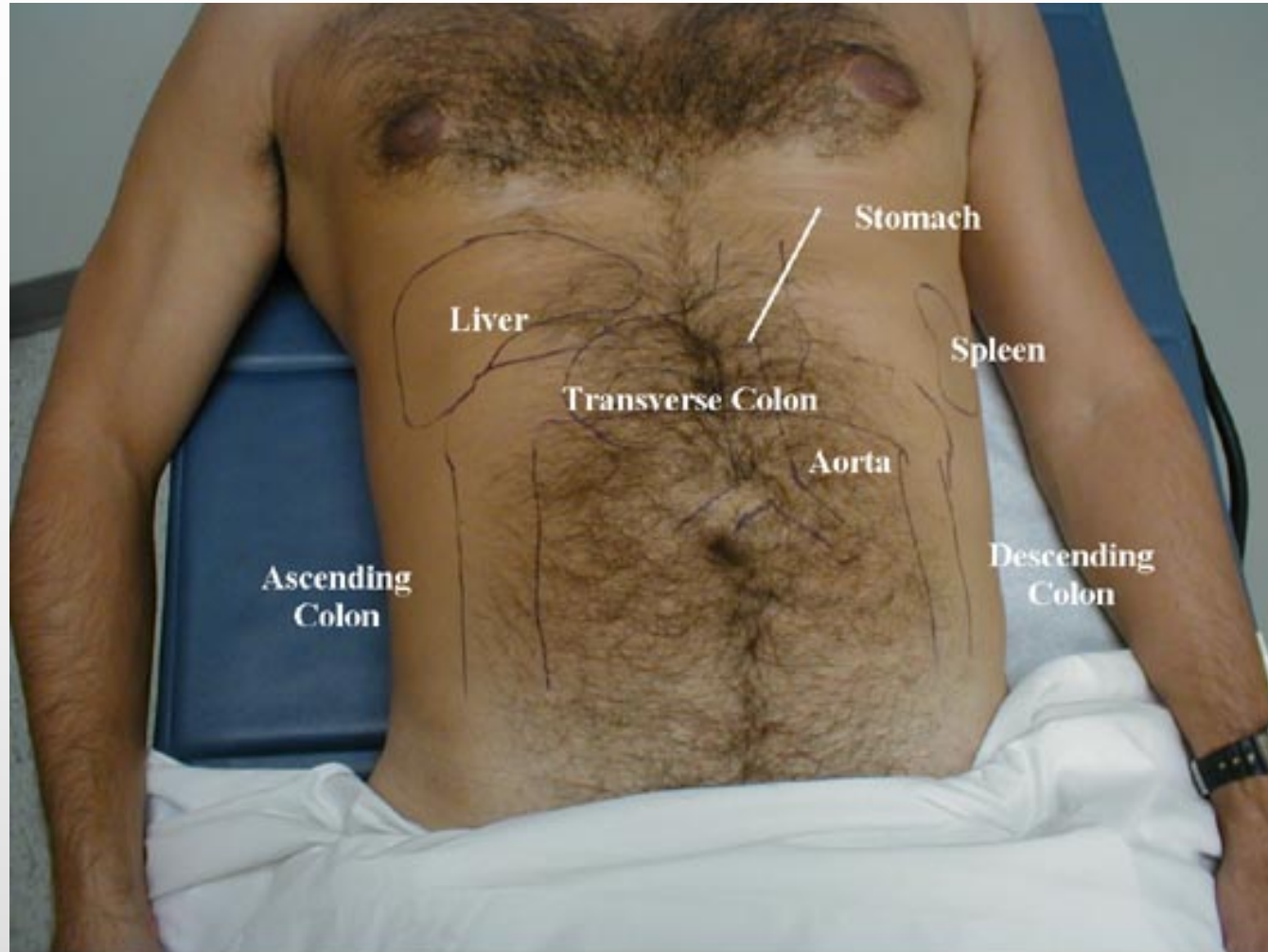


What do I hear?

Assessment techniques Percussion sounds

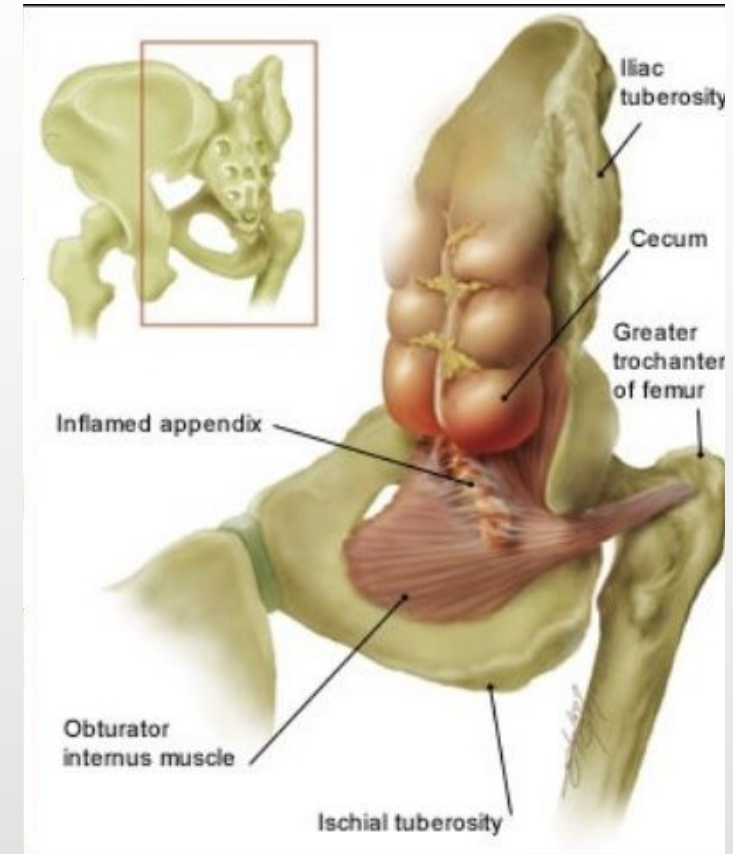
- Flatness - bone or muscle
- Dullness - heart, liver, spleen
- Resonance - air filled lungs (hollow)
- Hyperresonance - emphysematous lung (hyperinflated)
- Tympany - air-filled stomach (drumlike)

What is where again?....



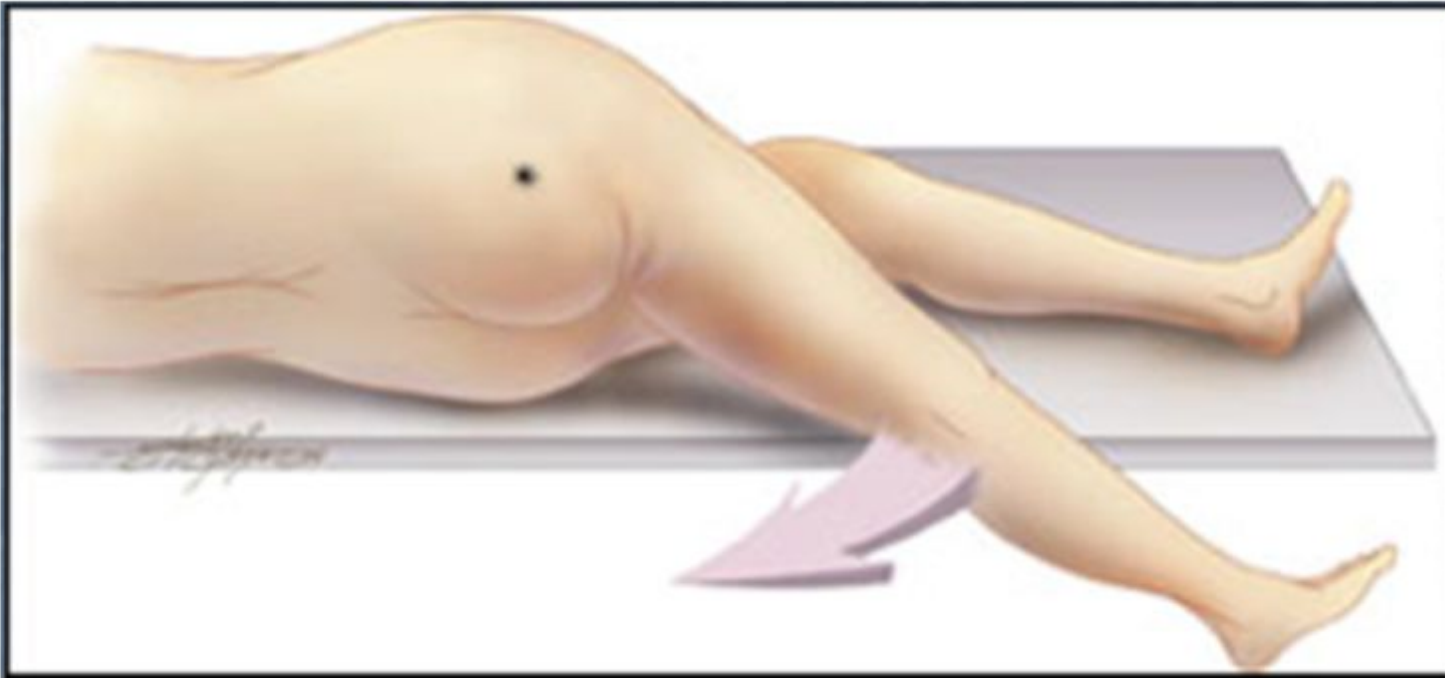
Remember these....

Obturator sign

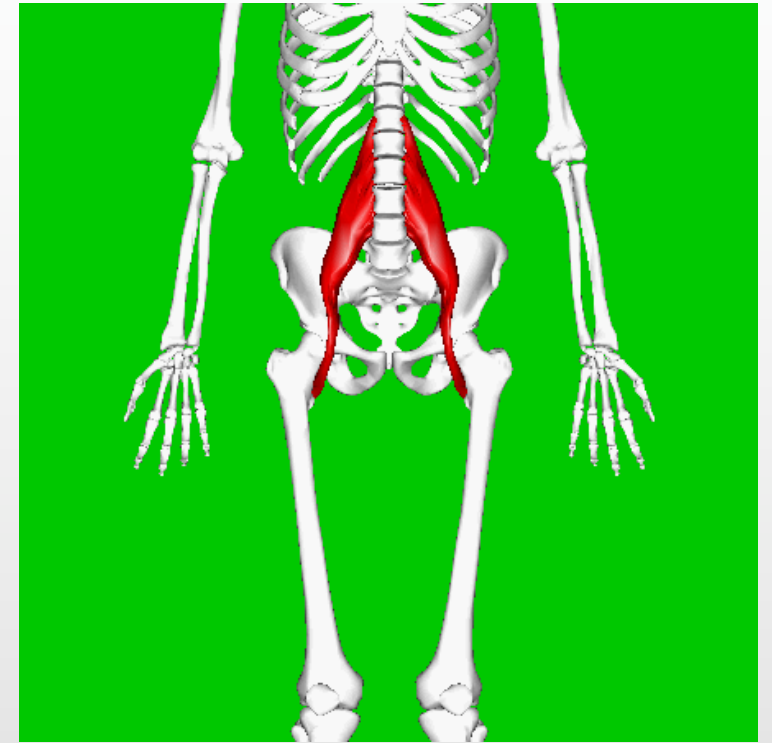


Remember these.....

Psoas sign



Psoas sign



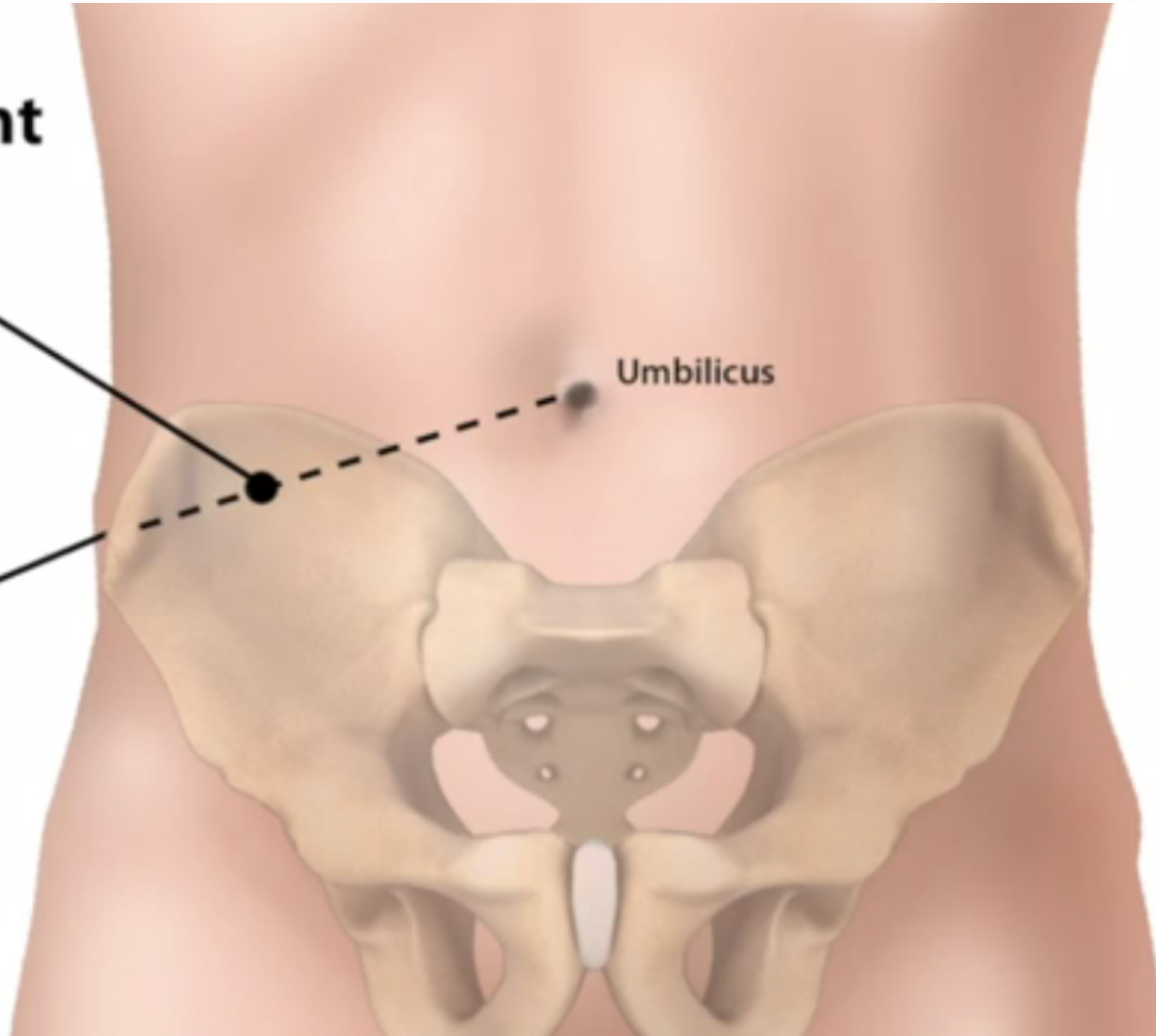
Remember these..... McBurney's point

McBurney's Point

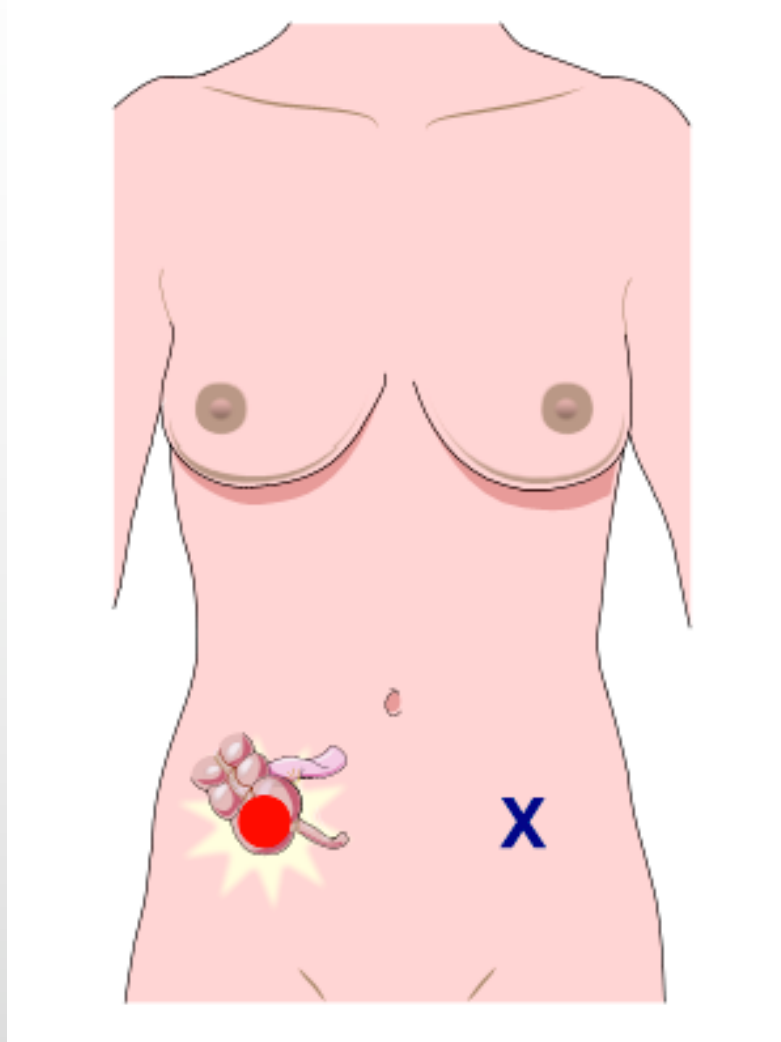
2/3 of the way from
umbilicus to ASIS

Anterior Superior Iliac Spine

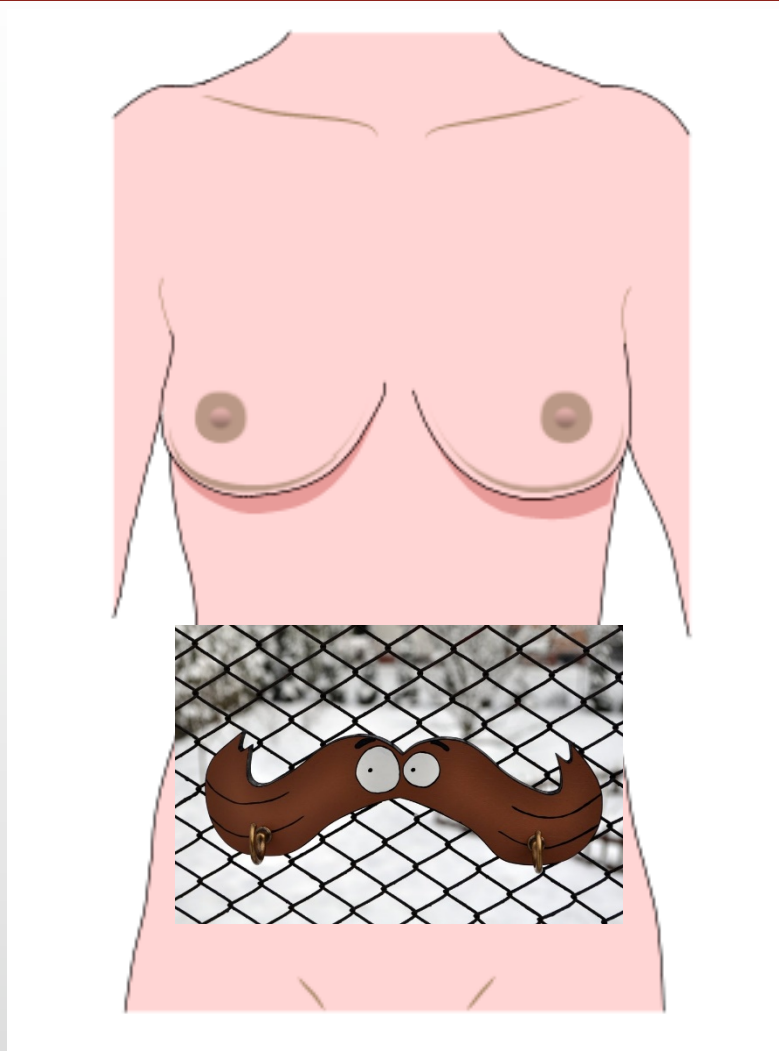
Umbilicus



Remember these..... Rovsing's sign

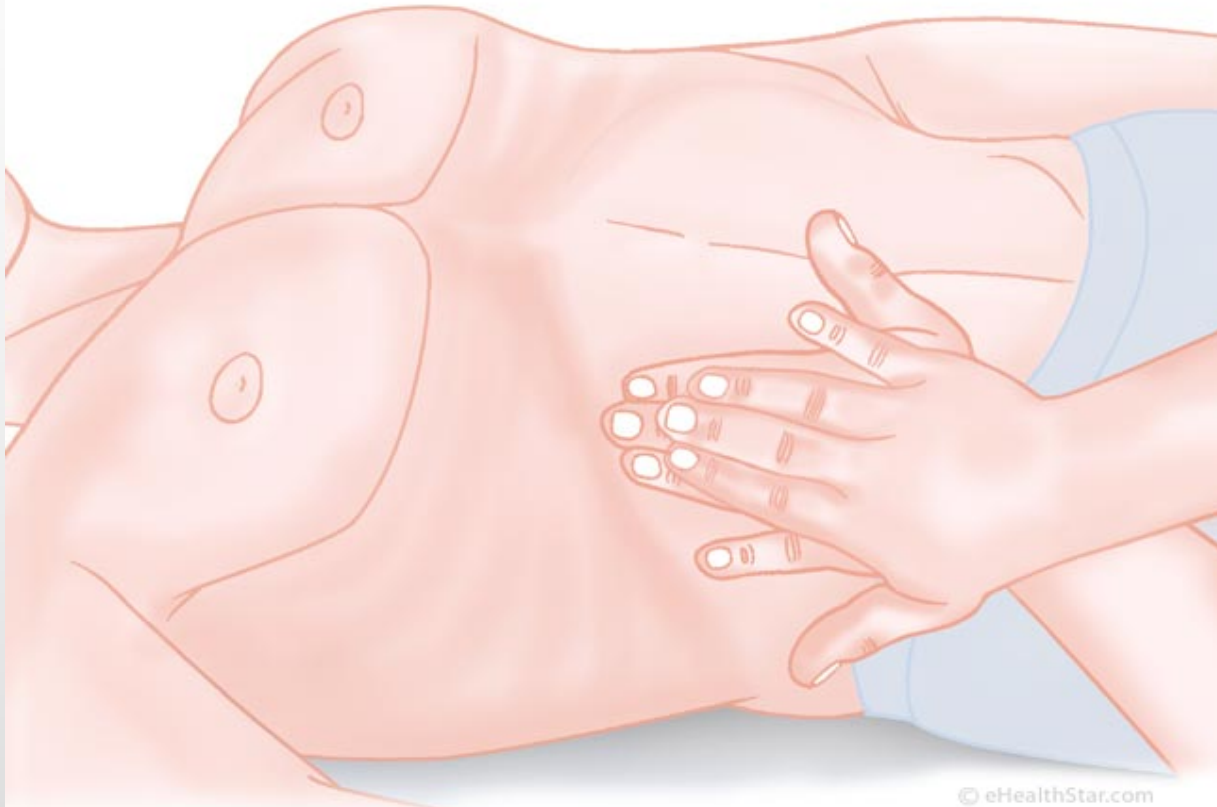


Remember these..... Rovsing's sign



Remember these..... Murphy's sign

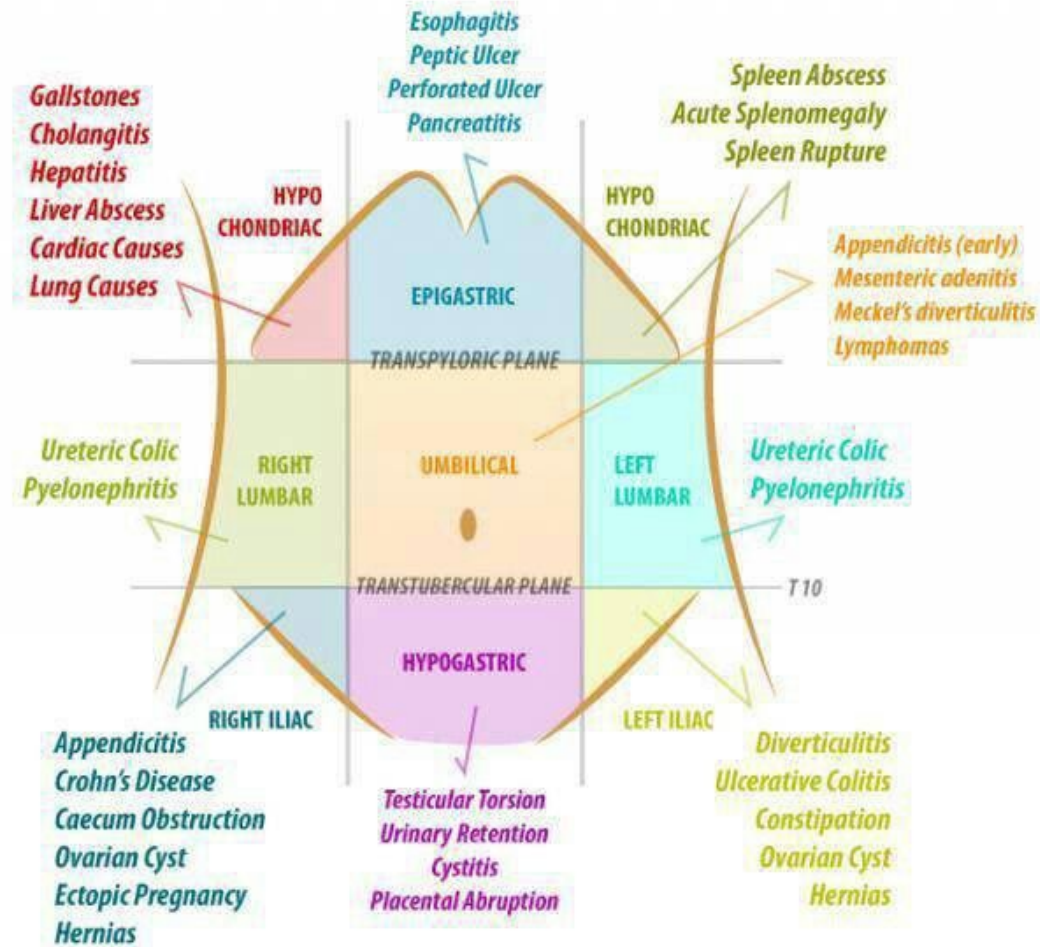
Murphy's Sign



Abdominal Pain: Red Flags

- **RED FLAGS**
 - Increasing in severity
 - Localized over time
 - Described as “hot” or “never had this before”
 - Fever
 - Rebound tenderness
 - Pain with bumps of car or walking
 - Unable to get up on exam table

Abdominal pain: DDX



Assessing with OLD CARTS

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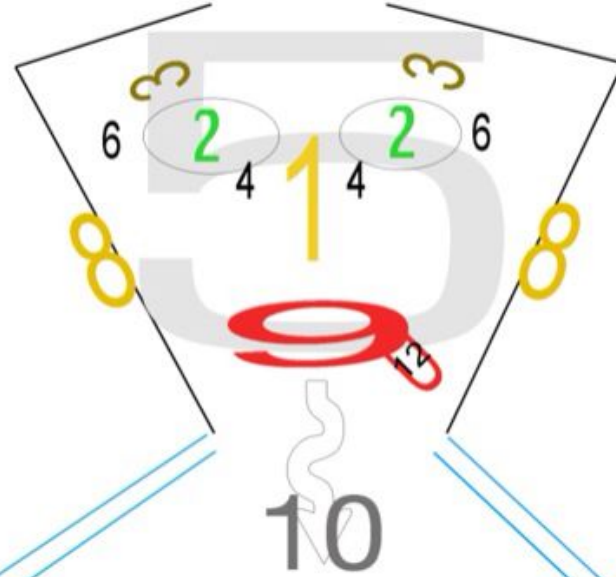
Takeaways...

- Trust your gut
- Use an old cart
- Its okay to not know
- Pain is warning sign
- Urine should be clear
- Try percussion
- An eye exam or a headache diary has never killed anyone...

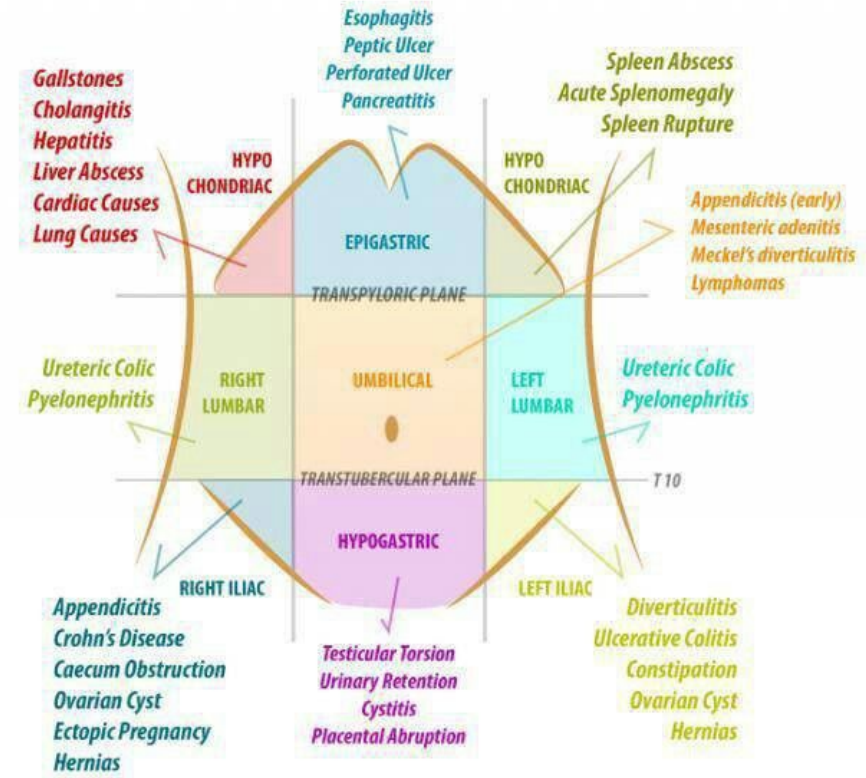


OLD CARTS

- | | | |
|---------------|---------------|----------------------|
| 1. Olfactory | 5. Trigeminal | 9. Glossopharyngeal |
| 2. Optic | 6. Abducens | 10. Vagus |
| 3. Oculomotor | 7. Facial | 11. Spinal Accessory |
| 4. Trochlear | 8. Acoustic | 12. Hypoglossal |



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Thank you

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