Head to Toe Intake Assessment

Name of Assessor:

Name:			DOB:	Date:
Respiration:	Pupils:	Dx:		
Pulse:	BP:			
Skin:	Pulse Oximetry:	Seconday Dx:		

Neurological Assessment

Glasgow Coma Scale (score range 0-15, Coma ≤ 7)		Oriented to: ☐ Person ☐ Place ☐ Time ☐ Infant	
Eye opening to:	☐ Spontaneous = 4	Head circumference:	
	☐ Verbal command = 3	Pupils: ☐ ROP History ☐ Visual impairment ☐ Glasses	
	☐ Pain = 2	☐ Cataract surgery ☐ Laser surgery	
	☐ No response = 1	Reactive to light: ☐ Yes ☐ No	
Verbal response to:	☐ Oriented, converses = 5	Reaction: ☐ Brisk ☐ Sluggish	
	☐ Disoriented, converses = 4	☐ R no reaction ☐ L no reaction	
	☐ Uses inappropriate words = 3	Round: ☐ Yes ☐ No	
	☐ Incomprehensible = 2	☐ R abnormal shape ☐ L abnormal shape	
	☐ No response = 1	Communication/speech: ☐ WNL ☐ Non-verbal	
Verbal response to:	☐ Verbal command = 6	☐ Dysarthria	
	☐ Localized pain = 5	Aphasia: ☐ Expressive ☐ Receptive ☐ Global	
	☐ Flexes & withdrawals = 4	**Muscle Strength*:**	
	☐ Flexes abnormally (decorticate) = 3	5 = WNL	4 = 75% normal
	☐ Extends abnormally (decerebrate) = 2	3 = 50% normal	2 = 25% normal
	☐ No response = 1	1 = 10% normal	0 = complete paralysis

Location	Muscle Tone	**Muscle Strength***	Sensation	Tremor
Head	☐ WNL ☐ Flaccid ☐ Spastic	0 1 2 3 4 5	☐ WNL ☐ To pain ☐ No response to pain	☐ Yes ☐ No
R Hand	☐ WNL ☐ Flaccid ☐ Spastic	0 1 2 3 4 5	☐ WNL ☐ To pain ☐ No response to pain	☐ Yes ☐ No
L Hand	☐ WNL ☐ Flaccid ☐ Spastic	0 1 2 3 4 5	☐ WNL ☐ To pain ☐ No response to pain	☐ Yes ☐ No
Core	☐ WNL ☐ Flaccid ☐ Spastic	0 1 2 3 4 5	☐ WNL ☐ To pain ☐ No response to pain	☐ Yes ☐ No
Upper Limbs	☐ WNL ☐ Flaccid ☐ Spastic	0 1 2 3 4 5	☐ WNL ☐ To pain ☐ No response to pain	☐ Yes ☐ No
Lower Limbs	☐ WNL ☐ Flaccid ☐ Spastic	0 1 2 3 4 5	☐ WNL ☐ To pain ☐ No response to pain	☐ Yes ☐ No
Feet	☐ WNL ☐ Flaccid ☐ Spastic	0 1 2 3 4 5	☐ WNL ☐ To pain ☐ No response to pain	☐ Yes ☐ No

Respiratory Assessment

Pulse ox: ☐ WNL (95-100%) ☐ WNL for this patient at	O2 required: ☐ NC ☐ Mask ☐ Trach ☐ Home pulse ox needed	
Cough: ☐ None ☐ Non-productive, dry ☐ Productive ☐ Productive-sounding, no sputum	Sputum: ☐ None ☐ Thick ☐ Thin ☐ Foamy	
Oxygen: ☐ None ☐ Room air liters/nasal cannula % per face mask ☐ Mechanical ventilator	Color: ☐ White ☐ Other:	
	Respiratory rate: ☐ WNL ☐ Tachypneic ☐ Badypneic ☐ Apnea	
Respiratory effort: ☐ Relaxed and regular ☐ Painful respiration ☐ Labored ☐ Dyspnea at rest ☐ Dyspnea with minimal effort, talking, eating, etc. ☐ Dyspnea with moderate exertion, dressing, walking ≤ 20 ft., etc. ☐ Dyspnea when walking feet or with exercise	Breath sounds: ☐ Clear ☐ Decreased ☐ Crackles: ☐ Rales ☐ Coarse/moist ☐ Rhonchi ☐ Bronchial spasms from BPD ☐ Wheezes: ☐ Inspiratory ☐ Expiratory ☐ Friction rub ☐ Tactile fremitus ☐ Absent or diminished	
Recovery time following dyspneic episode:		
Respiratory rhythmn: ☐ WNL ☐ Regular, tachypneic ☐ Regular, bradypneic ☐ Regular with periods of apnea	Lungs	
☐ Regular pattern of rate and depth with good, clear air exchange	Upper chest: R:	L:
☐ Regular, abnormal, rapid, deep respiration (central neurogenic hyperventilation)	Mid chest: R:	L:
☐ Regular, abnormal, prolonged inspiration with pause or apneustic	Lower chest: R:	L:
☐ Irregular pattern/depth (ataxic) ☐ Irregular with periods of apnea (cluster breathing)		

Cardiovascular Assessment

Skin: ☐ Warm/dry ☐ Cool ☐ Clammy/diaphoretic

Capillary refill: ☐ WNL ☐ Delayed (> 2 seconds)

Skin Turgor: ☐ WNL ☐ Tenting

Apical pulse rhythm: ☐ Regular ☐ Regular irregular ☐ Irregularly irregular

Apical pulse rate: ☐ WNL ☐ Bradycardia ☐ Tachycardia ☐ Other:

Apical/radial deficit: ☐ Yes ☐ No

Heart sounds: ☐ Normal ☐ Gallop ☐ Valve click (artificial heart valve) ☐ Murmur: ☐ Holosystolic ☐ Midsystolic ☐ Diastolic

Peripheral Pulses			Edema		
R radial	☐ Yes ☐ No ☐ N/A		R hand/arm	☐ No ☐ Non-pitting ☐ Pitting	
R femoral	☐ Yes ☐ No ☐ N/A		R knee to thigh	☐ No ☐ Non-pitting ☐ Pitting	
R pedal	☐ Yes ☐ No ☐ N/A		R ankle to knee	☐ No ☐ Non-pitting ☐ Pitting	
R post tib	☐ Yes ☐ No ☐ N/A		R foot/ankle	☐ No ☐ Non-pitting ☐ Pitting	
L radial	☐ Yes ☐ No ☐ N/A		L hand/arm	☐ No ☐ Non-pitting ☐ Pitting	
L femoral	☐ Yes ☐ No ☐ N/A		L knee to thigh	☐ No ☐ Non-pitting ☐ Pitting	
L pedal	☐ Yes ☐ No ☐ N/A		L ankle to knee	☐ No ☐ Non-pitting ☐ Pitting	
L post tib	☐ Yes ☐ No ☐ N/A		L foot/ankle	☐ No ☐ Non-pitting ☐ Pitting	

Cardiac Hx:

Genitourinary Assessment

Genitalia: ☐ WNL ☐ Abnormalities, describe:

Assessment of urination: ☐ WNL ☐ Burning ☐ Bladder distention ☐ Pelvic pain/discomfort ☐ Lower back pain/flank pain/discomfort

Continent: ☐ Infant ☐ Yes ☐ Stress incontinence ☐ Rarely incontinent ☐ Regularly incontinent

Urine amount: ☐ WNL (> 2ml/kg/hr) ☐ Less than 2ml/kg/hr ☐ Output greatly exceeds intake

Color: ☐ Yellow, WNL ☐ Amber ☐ Orange ☐ Dark amber ☐ Pink ☐ Red-tinged ☐ Grossly bloody

Characteristics: ☐ Clear, WNL ☐ Cloudy ☐ Sediment ☐ Abnormal color

Urostomy: ☐ N/A ☐ Urostomy/ileal conduit ☐ Continence maintaining nipple valve ostomy

Stoma status: ☐ N/A ☐ Pink, viable ☐ Red ☐ Deep red ☐ Dusky ☐ Dark ☐ Retracted below skin ☐ S/S of infection

Urinary stents: ☐ N/A ☐ R ureter ☐ L ureter

Comments:

Urinary catheter: ☐ N/A ☐ Foley, short term ☐ Foley, long term at home

☐ Suprepubic catheter insertion site: ☐ WNL ☐ S/S of infection

Gastrointestinal Assessment

Oral mucosa: ☐ Intact ☐ Moist ☐ Dry ☐ Pink

Pale tongue: ☐ N/A ☐ WNL ☐ Pink ☐ White patches

Last bowel movement: ☐ Today ☐ Yesterday ☐ Other:

Abdominal pain:

Bowel movements: ☐ WNL ☐ Constipation ☐ Diarrhea ☐ Bowel program required (if diarrhea, assess risk for C-diff or VRE)

Continent: ☐ Yes ☐ Rarely incontinent ☐ Regularly incontinent

Bowel sounds (all four quadrants): ☐ Active, WNL ☐ Hyperactive ☐ Hypoactive ☐ Absent (listen for 5 full minutes)

Other:

Nausea/vomiting: ☐ No ☐ Yes, describe:

Times per day:

Feeding difficulties or feeding aversion noted:

Tubes: ☐ None ☐ Salem pump ☐ Nasoduodenal feeding tube

Tube feeding type:

Amount: ml over hrs via ☐ Gravity ☐ Pump

NG X GGT/PEG tube size: ☐ Jejunostomy tube size ☐ Other:

☐ Intermittent ☐ Continuous ☐ Nipple/tube feed

Skin Integrity Assessment

Skin color: ☐ WNL ☐ Pale ☐ Jaundice ☐ Dusky ☐ Cyanotic

Skin is: ☐ Intact ☐ No, describe:

S/S of inflammation/infection: ☐ Redness ☐ Tenderness/pain ☐ Warm ☐ Sweling

Location(s):

Contusion(s)/Ecchymosis: ☐ N/A

Length: cm

Width: cm

Location(s):

Is client on a pressure reduction or relief surface?

☐ No

☐ Yes, type:

Pain Assessment

Pain is: ☐ N/A ☐ Acute ☐ Chronic ☐ Constant ☐ Intermittent ☐ Other:

Location of pain (if applicable):

Affected areas: ☐ N/A ☐ Sleep ☐ Activity ☐ Exercises ☐ Relationships ☐ Emotions ☐ Concentration ☐ Appetite ☐ Other:

Description of pain: ☐ Sharp ☐ Stabbing ☐ Throbbing ☐ Shooting ☐ Burning ☐ Electric-like shock ☐ Other:

Pain rating on a scale of 0-10:
Acceptable level of pain for this patient:

Highest pain level today:
Best pain level today:
Best the pain ever gets:

PCA: ☐ N/A ☐ Morphine ☐ Dilaudid ☐ Fentanyl via ☐ IV ☐ Epidural
Dressing: ☐ D&I ☐ Other:
Continuous dose: /hr
Demand dose: every mins
Max doses per hour:

(Assess pain every 2 to 4 hours, evaluate the # of attempts vs the # of demand doses received to determine if does is sufficient)

What makes the pain decrease? ☐ Rest/sleep ☐ Medication ☐ Heat ☐ Cold ☐ Family presence ☐ Music ☐ Reading ☐ Distraction ☐ Meditation ☐ Guided Imagery ☐ Relaxation Techniques ☐ Other:

Medications:	Route:	Dose:
Opiod medication(s):		
Breakthrough medication(s):		
Tylenol:		
NSAIDs/Adjuvants:		

Does the pation have concerns about overusing medications/addictions?

Comments:

IV Assessment

Type of line: ☐ N/A ☐ Peripheral, site: ☐ Triple lumen CVL: PICC: ☐ Implanted port: (check CXR for catheter tip replacement before using all new central venous and PICC lines)

Insertion site: ☐ WNL ☐ Redness ☐ Tenderness/pain ☐ Warmth ☐ Swelling ☐ Drainage
(IV needs to be DC'd if S/S of infection/ thrombophlebitis, or pain is present. Change PIV, notify MD of PIV and CVL)

IV Fluids: ☐ N/A, heplock ☐ Fluids, describe: @ mls/hr ☐ Continuous ☐ Over hrs ☐ IV pump ☐ Dial-a-flo ☐ Gravitiy

Motor, Sensory, Self-Help, Communication

Functional limitations:

Limitations on activity:

Mental status:

Misc.: