

**310 Health Assessment
Proficiency 1 & 2**

Student Name _____

Total points ____/75

Date: _____ Start time: _____

End Time: _____

Basic Exam

	Completed	Points	Comments
Safety			
ID band, allergy band		2	
Coping/Psychosocial			
Coping with stress/hospitalization		2	
Support System		2	
Cognitive/Perceptual/Neuro			
Orientation		4	
PERRLA		4	
Movement/strength of UE and LE		4	
Sensation of UE and LE		4	
Communication/quality of speech		2	
Memory – ST and LT		2	
Respiratory			
Observe pattern/depth		2	
Breath sounds A/P, side-to-side		4	
Assess cough/secretions		2	
Cardiac			
Heart sounds in supine HOB 30 with diaphragm and bell: APETM		5	
Peripheral Neurovascular			
Inspect UE and LE for edema		2	
Check capillary refill on all digits		4	
Palpate radial pulses bilaterally		2	
Palpate dorsalis pedis pulses bilaterally		2	
Gastrointestinal			
Observe contour- nondistended		2	
Auscultate bowel sounds with diaphragm in 4 quadrants (15 secs in each quad)		4	
Palpate lightly for soft or firm abdomen		2	
Genitourinary			
Asks client about: Status of urination, color, clarity Vaginal flow as applicable BM status/consistency		6	
Skin			
Mucous membranes		2	
Color of torso		2	
Color of extremity		2	
Rashes/lesions		2	
Turgor		2	
Musculoskeletal			
ADL's/assess activity		2	