Dr. ID#	Patient Initials	DOS

## Respiratory

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SYSTEM/BODY AREA ELEMENTS OF EXAMINATION		
Constitutional	<ul> <li>Measurement of any three of the following seven vital signs:         <ul> <li>1)sitting or standing blood pressure, 2) supine blood pressure, 3) pulse rate and regularity, 4) respiration, 5) temperature, 6) height, 7) weight (may be measured and recorded by ancillary staff)</li> </ul> </li> <li>General appearance of patient e.g. development, nutrition, body habitus, deformities, attention to grooming.</li> </ul>	
Ears, nose, Mouth & throat	<ul> <li>Inspection of nasal mucosa, septum and turbinates</li> <li>Inspection of teeth and gums</li> <li>Examination of oropharynx e.g. oral mucosa, hard and soft palates, tongue, tonsils and posterior pharynx</li> </ul>	
Neck	<ul> <li>Examination of neck e.g. masses, overall appearance, symmetry, tracheal position, crepitus</li> <li>Examination of thyroid e.g. enlargement, tenderness, mass</li> <li>Examination of jugular veins e.g. distension; a, v or cannon A waves</li> </ul>	
Respiratory	<ul> <li>Inspection of chest with notation of symmetry and expansion</li> <li>Assessment of respiratory effort e.g. intercostals retractions, use of accessory muscles, diaphragmatic movement</li> <li>Percussion of chest e.g. dullness, flatness, hyperresonance</li> <li>Palpation of chest e.g. tactile fremitus</li> <li>Ausculation of lungs e.g. breath sounds, adventitious sounds rubs</li> </ul>	
Cardiovascular	<ul> <li>Auscultation of heart including sounds, abnormal sounds and murmurs</li> <li>Examination of peripheral vascular system by observation e.g. swelling, varicosities and palpation e.g. pulse, temperature, edema, tenderness</li> </ul>	
Gastrointestinal (abdomen)	<ul> <li>Examination of abdomen with notation of presence of masses or tenderness</li> <li>Examination of liver and spleen</li> </ul>	
Lymphatic	Palpation of lymph nodes in neck, axillae, groin and/or other locations	
Musculoskeletal	Assessment of muscle strength and tone e.g. flaccid, cog wheel, spastic with notation of any atrophy or abnormal movements  Examination of gait and station	
Extremities	Inspection of palpation of digits and nails e.g. clubbing, cyanosis, inflammation, petechiae, ischemia, infections, nodes	
Skin	Inspection and/or palpation of skin and subcutaneous tissue e.g. rashes, lesions, ulcers	
Neurological/Psychiatric	Brief assessment of mental status including:  Orientation to time, place and person  Mood and affect e.g. depression, anxiety, agitation	