

## **Physical Assessment findings**

### **General Appearance:**

Patient, A.C. is a 58-year-old, Latino female patient at South San Francisco, Kaiser Permanente Hospital. Patient was admitted on 11/7/2008. She came here for a colonoscopy for Diverticulosis of the colon. Upon the procedure, she ended up with a sigmoid perforation, resulting in a Sigmoid Colectomy. Patient has a medical history of hypertension, Osteoarthritis of the Hip, Diabetes Mellitus, and diverticulosis of the colon. Patient was calm and cooperative during physical assessment. She doesn't have any distress at this time.

### **Vital Signs:**

Oral Temperature= 98.6  
Pulse= 67  
Respirations= 18  
Blood Pressure= 120/72  
Pain Level= 2-3

### **Mental Status:**

Alert and oriented times four to person, place, time and situation. Her affect is congruent to her mood. Her speech clear and concise.

### **Skin:**

Pt.'s skin has a warm healthy pink/tan undertone and dry to the touch. She has a petechiae on her ULQ. It was about 0.5 cms in diameter and just a bit darker than her skin tone. The Pt. said it was a birthmark. Other than that there are no signs of any scars, masses, lesions, or moles, larger than 6mms in diameter. Skin turgor was elastic, indicating no signs of dehydration.

### **Hair, Head:**

Her hair looked healthy and evenly distributed, with no signs of Alopecia. It was thinning and dyed brown. She has no presence of any rashes, skin lesions. She has free jaw movement without crepitation. The shape of her head was symmetrical, and the contour and size is of normal size.

### **Ears:**

External ear shape is symmetrical and lobes are intact. No presence of any masses, deformities, discharge, or lesions. Hearing acuity in both ears is good, based on whisper test. Pt. stated there were no signs of ringing in her ears. Ear canal is clear with no redness, swelling, or discharge. No use of hearing aids.

### **Eyes:**

PERRLA: both pupils respond to light consensually, brisk and equal; from 2mm to 3mm, and are symmetrical. Extraocular muscles are intact. Sclera is clear with no signs of jaundice, conjunctivitis, discharge, or swelling. Blink reflexes intact bilaterally. No use of glasses.

### **Nose:**

Both left and right nare is patent. Nasal mucosa is a normal pink. No presence of any discharge, swelling, lesions, or redness.

### **Mouth/Pharynx:**

Upper and lower teeth are intact. Gums are healthy and pink with no signs of cyanosis in the oral mucosa. No signs of halitosis. Gag reflex is present. No signs of tongue abnormalities and tonsils are present but not swollen or inflamed.

### **Face:**

Facial symmetry, with no signs of facial paralysis. Pt. frowned, smiled, showed her teeth, and puffed her cheeks with ease.

### Neck:

Neck has full range of motion, with no pain or difficulty. Both sides are symmetrical with no masses or lesions. Following lymph nodes were palpated: preauricular, posterior auricular, submental, supraclavicular and the anterior and posterior cervical chains. Carotid pulse was palpated bilaterally. Rhythm, strength, and elasticity of arteries were normal and regular.

### Upper extremities:

Condition of nails is good. Finger tips were pink and shiny, no presence of clubbing. ~~I~~ Couldn't see any chalky nail beds because Pt's nails were painted. Capillary refill is less than one second. Shoulders, wrists, hands, and fingers had full range of motion. Both left and right brachial and radial pulses are bounding and regular. Bilateral grips were strong. No presence of tremors, seizures, or spasticity. Bi-lateral fine gross motor skills were demonstrated successfully. Her back and spine were straight and both flanks were symmetrical. No presence of any curvatures of scoliosis, lordosis, or kyphosis. No presence of any sacral edema.

### Chest and Lungs:

Auscultated anterior, posterior, and lateral thorax. Bronchial, bronchovesicular, and vesicular sounds were deep and regular. No coughing, no presence of sputum production, chest pain, orthopnea, dyspnea, or shortness of breath. No signs of wheezing or crackles in lobes. Lungs sound clear to auscultation with no adventitious breath sounds. Chest is symmetrical.

### Heart:

Aortic area located at 2nd intercostal space, right of the sternum. Pulmonic area located at 2nd intercostal space, left of the sternum, tricuspid area heard at 4th intercostal space, left of sternum. Lastly, mitral area ~~aka~~ PMI, located at 5th intercostal space at left midclavicular line. Pt's carotid pulse was palpated for one minute while listening to PMI. Pt. has normal regular heart beat. No presence of murmurs, gallops, or thrills.

### Abdomen:

abdomen was symmetrical. Auscultated all four quadrants and heard positive bowel sounds. Due to the sigmoid ostomy, Pt. had an incision in the lower median of the quadrants, which was clean, dry and intact. Pt. was hooked up to a wound V.A.C, which had minimal abdominal drainage in the wound V.A.C. of 50mLs for the previous shift. There were no presences of any tubes or stomas. No presence of distension in any region of abdomen or bladder. Skin is normal with no signs of redness, rashes or irritations.

### Lower extremities:

Skin is pink/tan. Temperature is warm and dry. Turgor is elastic. No signs of cold feet. No presence of edema in lower legs. Good demonstration of full range of motion while laying supine. Good condition of nails, except for right toe nail. Although Pt. had nail polish on her feet, there seemed to be a presence of an overgrowth. Calf palpated and checked for symmetry and Homan's sign. Both the posterior tibial and the dorsalis pedis were both palpated. They were bounding and regular.

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