



COLLEGE OF
LICENSED PRACTICAL NURSES
OF NEWFOUNDLAND AND LABRADOR
LPNS - A PRACTICAL APPROACH TO QUALITY CARE

FORM E

To: Practical Nursing Program Coordinator / Registrar / Course Leader

Re: Adult Health Assessment

We have been asked to conduct a PLAR for the adult health assessment course completed at

_____, in _____, by _____, LPN.
(Name of Educational Facility) (City,Province) (Applicant Name)

Course start date _____ Course completion date _____

Part 1

Please indicate the following regarding your Health Assessment course

It included a: Theory component yes no
 Lab component yes no

Part 2

The following describes the competencies that graduates have completed in the **Health Assessment** course in the province of Newfoundland and Labrador.

Please verify that these components have been completed by the above named graduate, using the following outcome status:

C: Completed
NC: Not Completed

_____ **Written Health History**

SKIN, HAIR AND NAILS

_____ Inspection and palpation for condition, hydration, lesions

HEAD AND NECK**Head**

_____ Palpation of skull for size, shape, contour
 _____ Inspection of face for symmetry of features, expression,
 movement, plus skin
 _____ Examination of TM Joint
 _____ Palpation of temporal arteries and lacrimal glands
 _____ Test for tenderness
 _____ Test trigeminal nerve and teeth clenching
 _____ Test facial nerve (smiling, frowning, eyebrow raising)

Eye

_____ Visual acuity using Snellan chart
 _____ Inspection for nystagmus, cataracts, conjunctiva, eyelids, pupil
 size, direct pupillary reaction, consensual pupillary reaction,
 convergence, accommodation and extra-ocular eye movements
 _____ Test for peripheral vision
 _____ Test for eye muscle strength, cranial nerve function (by visual
 acuity and fields) and nystagmus (Cover Test)

Ear

_____ Inspection of shape, presence of auricle and tragus
 _____ Palpation for tenderness of mastoid and ear canal
 _____ Test for nerve function (Whisper Test), lateralization (Webber
 Test), conduction hearing loss (Rinne Test)

Nose

_____ Palpate for tenderness
 _____ Inspection by otoscope of inferior and middle turbinates

Mouth/Pharynx

_____ Inspection of lips for lesions, appearance of upper and lower gums,
 teeth, ventral and dorsal tongue, floor of mouth, palates, uvula,
 tonsils, posterior pharyngeal wall
 _____ Test of cranial nerves IX (gag), X and XII, inspecting raising of
 uvula, gag reflex and tongue wag (motor only)

Neck and Lymph Glands

_____ Inspection through ROM for range
 _____ Inspection and palpation on neck flexion and extension strength
 _____ Palpation of lymph glands for consistency, mobility, size, shape
 _____ Inspection and palpation of trachea for location
 _____ Inspection for cricoid cartilage movement
 _____ Palpation of carotid arteries for rate, rhythm and quality
 _____ Inspection of Cranial Nerve XI by testing for strength of shoulder
 shrugs

CHEST AND ABDOMEN

Chest

- _____ Inspection of ROM of spine for lateral flexion; and extension
- _____ Inspection for shape, movement, respirations
- _____ Palpation of posterior chest for tenderness, masses, respirations, expansion, tactile fremitus
- _____ Percussion of lungs to note changes in percussion tones and location of change in tone
- _____ Auscultation of posterior chest for breath sounds, and location of adventitious sounds
- _____ Auscultation of anterior chest for breath sounds, and location of adventitious sounds
- _____ Palpation of anterior chest for tenderness, masses and respiratory expansion

Heart

- _____ Palpation (at mitral site) for presence of apical impulse, for thrills
- _____ Auscultation of heart sounds in aortic, pulmonic, tricuspid and mitral areas

Breasts

- _____ Inspection and palpation for skin color, skin thickening, prominent pores, symmetry, contour, nipple size, nipple direction, rashes, ulcerations, discharge and skin dimpling
- _____ Palpation of lymph nodes for tenderness, consistency, mobility, size and shape
- _____ Teach self examination procedure for tenderness and lumps

Abdomen

- _____ Inspection of skin pulsations, peristalsis, surface alterations
- _____ Auscultation for bowel sounds
- _____ Percussion of gastric bubbles, bowel
- _____ Light palpation for tenderness

EXTREMITIES

Peripheral Vascular System

- _____ Inspection of peripheral vascular status
- _____ Palpate rate, rhythm and characteristic of radial, brachial, apical, carotid, femoral and pedal pulses
- _____ Auscultation of peripheral pulses by dopler

Upper Extremities

- _____ Inspection and palpation for configuration, consistency, and finger bogginess, *crepitus*
- _____ Test for Carpal Tunnel Syndrome (Phalens Tests)
- _____ Inspection of flexion, extension, abduction of fingers; flexion and extension of wrists; flexion, extension, supination and pronation of elbows; flexion, extension, abduction, adduction and internal and external rotation of shoulders
- _____ Test strength in fingers, wrists, elbows and shoulders
- _____ Cerebellar tests for balance and coordination
- _____ Test for sensation including tactile discrimination, vibration, stereognosis
- _____ Palpate nails for consistency

Lower Extremities

- _____ Inspection and palpation of toes, ankles, knees, hips, and joints for bogginess and crepitus
- _____ ROM for smoothness, pain and range
- _____ Inspection of flexion, extension, abduction and adduction of toes; Dorsi flexion, plantar flexion, inversion and eversion of ankles; flexion and extension of knees; abduction, adduction, external and internal rotation of hips
- _____ Strength of toes, ankles, knees, hips
- _____ Inspection through cerebellar tests for balance and coordination, leg tests, gait balance, Romberg Test
- _____ Test for sensation; tactile discrimination; ability to feel symmetrically

GENITALIA

Female Genitalia

- _____ Inspection of external genitalia for skin colour, lesions, swelling, discharge, and hair distribution
- _____ Inspection of anus for external hemorrhoids

Male Genitalia

- _____ Inspection and palpation of penis and scrotum for skin colour, lesions, swelling, discharge, and retraction of foreskin
- _____ Palpation of scrotum for presence and consistency of testes
- _____ Teach self examination procedure for tenderness and lumps
- _____ Inspection of anus for external hemorrhoids

Signature of Authorizing Person

Title

Print Name

Date of Authorization

(Not valid without signature and seal)

Please return completed form to:

College of Licensed Practical Nurses of NL
209 Blackmarsh Road
St. John's, NL, Canada A1E 1T1