

Merced College Registered Nursing Program
 Leveled Patient Assessment Tool (LPAT)
 Second semester (Inspection, Auscultation & Palpation)

Pt. Initials: _____

Room # _____

Vital signs time: _____	Temp: _____	Pulse: _____	Resp.: _____	BP: _____	O ₂ sat: _____	Pain: _____
Vital signs time: _____	Temp: _____	Pulse: _____	Resp.: _____	BP: _____	O ₂ sat: _____	Pain: _____
Vital signs time: _____	Temp: _____	Pulse: _____	Resp.: _____	BP: _____	O ₂ sat: _____	Pain: _____

NEUROLOGIC

Level of Consciousness (LOC)
 Level of Orientation
 Sleep
 Pain

Normal findings

alert
 x 4
 good
 no

Possible Abnormal findings

lethargic obtunded stuporous comatose
 not to: person place time purpose
 poor nap x _____ reason: _____
 yes location: _____ scale (0-10/10): _____
 Time: _____ Intervention: _____

HEENT

Head: Shape
 Hair
 Eyebrows/lashes
 Eyes: Vision
 Pupils
 Sclera
 Ears: Hearing
 Nose: Nares
 Mouth: Lips
 Tongue
 Gums/mucous membranes
 Dentition
 Neck: Lymph nodes
 Thyroid gland
 Throat: Swallowing
 Speech

normocephalic
 clean/shiny
 present
 20/20
 both (OU) equal
 round
 reactive to light
 white
 good bilaterally
 patent bilaterally
 moist / supple
 moist / papilliated
 moist / pink
 good
 not enlarged or tender
 non palpable / smooth
 smooth
 clear

asymmetrical
 dirty dull brittle alopecia bald
 sparse absent
 myopia (near) presbyopia (far) glasses blind R / L
 not equal
 describe shape: _____
 non-reactive to light sluggish reaction to light
 red yellow thickened other: _____
 hard of hearing deaf hearing aids R / L
 blocked, R / L septal deviation, R / L
 dry cracked fissures swollen bleeding *cyanotic
 dry coated white patches
 dry pale coated bleeding white patches
 poor loose cavities dentures: upper/lower
 enlarged tender location: _____
 enlarged asymmetrical nodule @ _____
 dysphagia
 aphasia

CARDIOVASCULAR

Pulses: Radial
 Pedal
 Capillary Refill
 Edema
 Heart: Apical Rhythm
 Strength (quality)
 Telemetry
 Intravenous Fluids:
 Site location/appearance

present/strong/equal
 present/strong/equal
 normal (<3sec)
 absent
 regular
 strong (bounding)
 no
 no / saline lock
 clear

*absent weak unequal R / L
 *absent weak unequal R / L
 delayed @ _____ seconds
 present @ _____ (+1 / +2 / +3 / +4)
 irregular regularly irregular (with breathing)
 *weak (thready)
 yes Rhythm: _____
 yes: Solution: _____ Rate: _____ ml/hr.
 Location: _____ *edema *erythema *pain

RESPIRATORY

Respirations (rhythm/depth/quality)
 Chest: Shape (AP diameter)
 Expansion
 Lung Sounds (anterior & posterior)
 *Adventitious sounds
 Cough
 Oxygen therapy

even/unlabored
 normal (AP<transverse)
 normal (3-5 cm)
 clear all lobes
 none
 none
 N/A

irregular deep shallow *labored dyspnea SOB
 asymmetrical barrel (AP=transverse) pigeon (sunk-in)
 limited (<3cm) enlarged (>5cm)
 diminished (location): _____
 wheeze (location): _____ on insp. / exp.
 fine crackles (location): _____ on insp. / exp.
 coarse crackles (location): _____ on insp. / exp.
 dry (non-productive) hacking spasms
 wet (productive): sputum color & amt. _____
 O₂ @ _____ L/min. per NC mask tent PRN

GASTROINTESTINAL

Abdomen: shape
bowel sounds
palpation

Appetite:

Fluid Intake:

Nasogastric tube:
suction

Bowel movement:
description

Normal findings

round / flat
active x 4 / borborygmi
soft / non-tender
good
quantity sufficient
N/A
N/A
yes / normal
soft / brown

Possible Abnormal findings

scaphoid protuberant distended
hypo / hyper / ***absent** @ RLQ / RUQ / LUQ / LLQ
rigid tender @ RLQ / RUQ / LUQ / LLQ
poor nausea emesis x ____ color: _____
poor limited fluid restriction of _____ mL/hr.
location: R / L nares patent ***non-patent**
low / medium / high continuous / intermittent
Color of drainage: _____
no LBM: _____ flatus
hard / pellets / pencil-thin / liquid color: _____

GENITOURINARY

Urine: color
clarity
quantity
*** complains of:**
Bladder palpation
Foley catheter / condom catheter

yellow
clear
sufficient (>60mL/hr.)
N/A
no distention or pain
N/A

dk. amber bloody
cloudy sediment visible odiferous
decreased ***<30mL/hr.**
burning frequency retention incontinence
distended tender
patent (draining) ***non-patent (not draining)**

MUSCULOSKELETAL

Muscle tone
Muscle strength: Hand Grips
Foot pushes
Range of Motion (ROM)
Joint palpation
Spine: inspection
Palpation
Gait
Use of assistance devices
Treatment: Cast
Traction
CMS checks
Amputation

good
strong
strong
full
flexible / not enlarged
normal curvature
non-tender
steady
none
N/A
N/A
N/A
none

poor (flaccid) paralyzed / contractures R / L
weak R / L absent R / L
weak R / L absent R / L
limited (location): _____
rigid crepitus enlarged deformed tender red swollen
kyphosis lordosis scoliosis
tender spasm sciatica pain
unsteady propelling ataxia
cane quad cane walker wheelchair crutch
location: _____ elevated: Yes / No
location: _____ amt. of wt. _____
good ***poor**
yes (location): _____

SKIN

Skin: Color
Temperature
Turgor
Appearance
Fingernails & Toenails
Wound : Location
Dressing
Appearance

normal for ethnicity
warm / dry
good
clear / intact
present / normal
N/A
dry / intact
new granular growth

pale jaundiced ***cyanotic** mottled
hot cool cold moist ***diaphoretic**
poor (tenting)
***open lesion/s:** _____
***bruising:** _____ ***rash:** _____
absent yellow thick brittle cyanotic R / L
yes: _____
not intact drainage color: _____ dsq. changed
measurements: _____

PSYCHOSOCIAL

Behavior
Mood
Restraints
Language spoken
Family

cooperative
pleasant
N/A
English
present

uncooperative confused other: _____
withdrawn seclusive ***combative** other: _____
type: _____ R / L released every 2 hrs.
Spanish Hmong other: _____
not present estranged

Signature

Initial

Date

*** Team Leader or Nursing Instructor notified of findings**

Revised by J.Richards, NP 08/2020 ©