

Essential Elements Physical Examination Checklist

INSTRUCTIONS: For the next items, indicate whether the student omitted the maneuver, performed it incorrectly or correctly.

Key notes:

1. Auscultation, palpation and percussion are readily identified by the patient, inspection is less obvious. An explanation while inspecting helps to make the patient aware of the examiner's actions.
2. While this checklist is listed by organ system, the order that the exam is performed may vary. Students should receive credit for performing the maneuver regardless of order

How well did the student perform each PE maneuver?

VITAL SIGNS	Omitted	Incorrectly	Correctly
Introduce Self to Patient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Washed hands	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Palpated radial pulses.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Measured pulse rate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Measured blood pressure in one arm	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Measured Respiratory Rate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HEENT	Omitted	Incorrectly	Correctly
Examined head/hair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inspected conjunctiva (palpebral and bulbar)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Checked pupillary response to light	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Correctly held/used ophthalmoscope to perform fundus exam of both eyes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Examined External Ears	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Correctly held and used otoscope to examine ears	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Performed inspection of nasal vaults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Performed inspection of oral cavity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

NECK	Omitted	Incorrectly	Correctly
Examined for lymph nodes (9 areas)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Palpated Carotids	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Auscultated Carotids	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inspected thyroid from front or side of patient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Palpated thyroid	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Performed percussion of posterior lung fields cephalad to caudal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Performed auscultation of anterior lung fields bilaterally	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Performed auscultation of posterior lung fields bilaterally	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Demonstrated appropriate draping of the precordium	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inspected the precordium	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Performed appropriate palpation of apical impulse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Used DIAPHRAGM of stethoscope to auscultate:			
Upper right sternal border (aortic area)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Upper left sternal border (pulmonic area)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lower left sternal border (right ventricular area)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Apical Impulse (Left ventricular area)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Used BELL of stethoscope to auscultate			
Upper right sternal border (aortic area)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Upper left sternal border (pulmonic area)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lower left sternal border (right ventricular area)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Apical Impulse (Left ventricular area)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

ABDOMINAL	Omitted	Incorrectly	Correctly
Demonstrated appropriate draping of abdomen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inspected abdomen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Auscultated abdomen using diaphragm of stethoscope	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Percussed liver span in midclavicular line	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Palpate abdominal aorta	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using light and deep palpation, examined:			
LUQ	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
LLQ	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
RUQ, evaluating for liver edge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
RLQ	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

BACK/SPINE	Omitted	Incorrectly	Correctly
Palpated costovertebral angles for tenderness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Palpated spinous processes of thoracic and lumbar spine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Palpated paraspinal muscles of lumbar spine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Assessed ROM of back (flexion, extension, lateral bending)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
EXTREMITY	Omitted	Incorrectly	Correctly
Assessed hands for deformities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Assessed legs for edema by palpating for 5 seconds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Palpated dorsalis pedis pulses-bilateral	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inspected feet for ulcers or deformities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

NEURO EXAM	Omitted	Incorrectly	Correctly
Evaluate the strength of the following muscle groups			
Shoulder abductors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elbow Flexors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elbow Extensors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wrist Flexors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wrist Extensors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hip Flexors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knee Flexors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knee Extensors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ankle Dorsiflexors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ankle Plantar Flexors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Assessed reflexes			
Biceps	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Triceps	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Brachioradialis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patellar	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Achilles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Evaluated sensation to light touch in all extremities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Evaluated cerebellar function-finger to nose	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Evaluated cerebellar function-heel to shin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Evaluated normal ambulation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Evaluated toe walk, heel walk, tandem walk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments (insert standard 2 feedback fields)