

FNP Student Skills Check Off

At Loyola, the Advanced Health Assessment (AHA) courses are the first steps in becoming acclimated to the role of Primary Nurse Practitioner.

In preparation for their new role, FNP students are required to go through different Advanced Health Assessment stations, where they will learn new assessment skills, such as how to use an otoscope and ophthalmoscope. Students will also have their RN Head to Toe Assessment skills verified and will be required to successfully complete a Head to Toe exam on a partner in order to begin clinicals. The following pages contain a sample of the grading criteria.

Please practice and come prepared to complete the Head to Toe exam **without prompting or note cards**.

Students who are not successful will be given **one (1)** additional opportunity to demonstrate proficiency.

Tools to Bring:

- Stethoscope
- Penlight
- Reflex Hammer

What to Wear:

Loose, comfortable clothing. Students will be conducting physical exams on one another.

Dates & Times:

Students will receive an email containing meeting dates at the time of registration. Dates will also be posted to the School of Nursing Resources webpage.

Required Textbooks:

Students will receive an email containing textbook(s) required for Advanced Health Assessment at the time of registration.

If you have any questions, please contact Jennifer Brackett, the DNP/MSN Administrative Assistant, at brackett@loyno.edu.

Loyola University New Orleans
College of Nursing and Health
BSN DNP, MSN-FNP, and MSN-NE Program
RN PHYSICAL EXAM REQUIREMENTS

Student's name: _____ Grade: _____

Evaluator: _____ Date: _____

Students will complete a physical assessment on a fellow student, meeting all of the objective points indicated on this Physical Exam Performance Checklist. Please wear comfortable, loose clothing as you will examine a fellow student. Student is expected to complete the exam in a strictly timed 30 minute period.

You will need a stethoscope, penlight, and reflex hammer to complete the physical exam.

Students Approach to Patient			
	Yes	No	Comments
Logical Exam Sequence (-2)			
Initiated / Ended Exam well (-1)			
Explained exam to patient (-1)			
Assembled proper equipment (-1)			
Provided for privacy (-1)			
Professional, and mature (-2)			
Used correct terminology and pronunciation (-2)			
Students may lose up to 10 points for inappropriate demeanor and behavior			

		PROCEDURE	Yes	No	Points
CARDIAC & THORACIC	THORACIC	Inspect anterior, posterior, lateral, chest wall			1.0
		Respiratory rate, rhythm, and effort (retractions, use of accessory muscles)			1.0
		Palpate for chest wall (for tenderness, lesions)			2.0

		Thoracic expansion (anterior/posterior)			1.0
		Percussion (anterior, posterior, and lateral) from apex to base (note resonance, hyperresonance, dullness)			2.0
		Auscultation of breath sounds from apex to bases (posterior, anterior, lateral-sitting)			2.0
	CARDIAC & CIRCULATION	Inspection of the precordium. Describes 6 areas of assessment (aortic, pulmonic, Erb's, Tricuspid, Mitral, epigastric)			3.0
		Palpation of precordium for any heave, thrill, PMI, pulsations.			2.0
		Auscultation of the heart (supine, left lateral, sitting position with diaphragm and bell)			2.0
		Inspection, palpation and auscultation of carotids.			2.0
		Location of palpable pulses (radial, brachial, dorsalis, posterior tibia, popliteal).			2.0
SUBTOTAL CARDIAC & THORACIC WORTH 20 POINTS					20
HEAD, EARS, EYES, NOSE, THROAT (HEENT)	GENERAL OVERVIEW AND SKIN	Inspect & Palpate skin (turgor, texture, temperature)			1.0
		Hair - inspect			1.0
		Nails - inspect and palpate (clubbing, cap refill)			2.0
	HEAD & NECK	Palpate head and scalp, including sinuses and TMJ			2.0
		Palpate and auscultate temporal arteries; Inspect neck and neck veins			2.0
		Palpate Neck: <ul style="list-style-type: none"> • Trachea • Thyroid • Lymph nodes (all sets in neck - state which ones) 			2.0
	EYES	Inspection of eyebrows, eyelids, orbital area, eyelashes, lacrimal gland			1.0
		Palpation of orbital area (sclera, conjunctiva)			1.0
		Direct and Consensual Response			2.0
	EARS	Inspection and palpation of ear & functional hearing			2.0
	NOSE	Inspect external nose & internal nares			2.0
MOUTH	Inspect lips, teeth, buccal mucosa, tongue, floor of mouth			2.0	
SUBTOTAL HEENT WORTH 20 POINTS					20.0
ABDOMEN		Inspection of the abdomen (supine position, pillow under head, arms at side, empty bladder)			3.0

	Auscultation of all quadrants: bowel sounds, aortic, iliac, femoral, and renal arteries.			3.0
	Percussion of abdomen in 4 quadrants			2.0
	Percussion of liver span at MCL			3.0
	Percussion of splenic dullness			2.0
	Light & Deep palpation of 4 quadrants			2.0
	CVA and rebound tenderness			3.0
	Palpate aortic pulsation			2.0

SUBTOTAL ABDOMEN WORTH 20 POINTS

20.0

MUSCULOSKELETAL	OVERVIEW	Inspect joints and muscles			1.0
	ROM	Neck - Flexion, extension, lateral bending and rotation (Assessment of head and neck may be done with head and neck exam.)			2.0
		Shoulder - Adduction, abduction, internal rotation, and external rotation			2.0
		Elbow - Flexion and extension, supination pronation			2.0
		Wrist - Flexion and extension, ulnar and radial deviation			2.0
		Fingers - Flexion and extension, adduction and abduction			2.0
		Hip - Internal and external rotation, flexion, extension, adduction and abduction			2.0
		Knee – Flexion and extension			2.0
		Ankle - Plantar and dorsiflexion			1.0
		Vertebral column - Flexion, extension, rotation, and lateral bending			2.0
		STRENGTH	<input type="checkbox"/> Neck, <input type="checkbox"/> Shoulder, <input type="checkbox"/> Elbow, <input type="checkbox"/> Hands, <input type="checkbox"/> Hips, <input type="checkbox"/> Knees, <input type="checkbox"/> Ankle		

SUBTOTAL 4 MUSCULOSKELETAL WORTH 20 POINTS

20.0

NEUROLOGICAL	OVERVIEW	Cognitive abilities (memory)			1.0
		Judgment, abstraction			1.0
	CRANIAL NERVES	Fields of peripheral vision CN II - Optic Pupil condition and response to light and accommodation CN II (Optic), and III (Oculomotor)			2.0
		Extra ocular movement (six cardinal fields) CN III (Oculomotor), IV (Trochlear), and VI (Abducens) Assess CN V - Trigeminal- Motor and Sensory			2.0

		Assess CN VII – Facial - Motor only whisper test) CN VIII - Acoustic			2.0
		Observe movements of soft palate – CN IX (Glossopharyngeal) and X (Vagus)			2.0
		Assess CN XI - Spinal accessory Inspect tongue for movement - CN XII - Hypoglossal			2.0
	REFLEXES (DTRS)	Upper extremities (biceps, triceps, brachioradialis)			1.5
		Lower extremities (patellar, Achilles, Babinski, clonus)			1.5
	CEREBELLAR	Sensation (light touch) using LE and UE			1.0
		Coordination (finger to nose, nose to finger, alternating, rapid hand patting)			1.0
		Pronator drift			1.0
		Gait: Tandem walking			2.0
SUBTOTAL NEUROLOGIC SYSTEM WORTH 20 POINTS					20.0
CARDIAC AND THORACIC	Worth 20 points				
HEENT	Worth 20 points				
ABDOMEN	Worth 20 points				
MUSCULOSKELETAL	Worth 20 points				
NEUROLOGICAL	Worth 20 points				
TOTAL	Total possible points = 100				

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Practicum Skills Checklist	This checklist provides a guide for minimum competencies required in the program				
Students should demonstrate skills & provided rationale for choice of exam/test during their clinical rotation and during the site visit with FNP faculty Course faculty will be responsible for making the final determination regarding course grade after conducting the site visit and consulting with the preceptor. Grading Key O= observed but not competent C= observed & competent in skill	812 AHA Prac	830 Primary Care Peds Prac	845 Primary Care of Adults Prac	855 Primary care of Adults & Women Prac	Spring Intensive
Complete Head-to-toe History and Physical Exam (Annual Adult Wellness/Preventive Exam)	*				
Episodic History and Physical Exam	*	*	*	*	
Complete HEENT Exam	*	*	*	*	
Complete Cardiovascular Exam Inspection (pulsations, lifts, heaves, retractions, skin lesions, venous distention, surgical scars, tattoos, JVD) Palpation (precordium, apical pulse, pulsations, lifts, heaves, retractions) Pulses (Apical, radial, femoral, temporal, carotid, brachial, radial, popliteal, posterior tibial, dorsalis pedis) Peripheral lymph nodes Evaluation of Edema Auscultation for bruits Heart Sounds (aortic, pulmonic, Erb’s Point, Tricuspid, Mitral) Identification of Heart Murmur	*	*	*	*	
Complete Respiratory Exam Inspection Auscultation Palpation Percussion	*	*	*	*	

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<p>Complete Neurologic Exam including: Mental Status (mood, affect, thought processes, cognitive functions) Cranial Nerve Exam I-XII Cerebellar Exam Coordination/Cerebellar Function (alternating hands movements, touch thumb to each finger, finger to examiner’s finger bilat, touch nose with index finger, pronator drift, heel to shin) Proprioception (Romberg test, stand on one foot, walk, heel-toe walk, walk on toes, walk on heels) Motor Exam (Hand grips and strength testing) Sensory Exam Pain (Sharpness/Dullness) Vibratory Sensation Position of joints Stereognosis Two point discrimination Deep Tendon Reflexes (UE & LE) Plantar bilateral Clonus (present or absent)</p>	*	*			
	NURS 812	NURS 830	NURS 845	NURS 855	Spring Intensive
<p>Complete Gastrointestinal Exam Inspection (striae, Cullen sign, distention, hernias, masses) Auscultation (bruits, renal, aorta, iliac femoral) Percussion (liver span, spleen, gastric bubble, CVA tenderness) Palpation (Murphy’s sign, McBurney’s point, iliopsoas muscle test, obturator muscle test, abdominal reflexes, rebound tenderness, ballottement)</p>	*	*	*	*	
<p>Complete Musculoskeletal Exam (upper extremities) Temporalmandibular joint, cervical spine, thoracic, lumbar spine, shoulder, elbow, wrist/hand assessment Spurling’s Test, Apley Scratch Test, Painful Arc Test, Apprehension Sign, Hawkins test, Identify the Snuff Box, Finkelstein’s Test, Phalen’s Test, Tinel Test, ROM, muscle tone</p>	*				
<p>Complete Musculoskeletal Exam (lower extremities) Hip, knee, ankle, foot Trendelenburg Test, Anterior/Posterior Drawer Sign, McMurray Maneuver, Lachman Test, Anterior/Posterior Drawer Test, Talar Tilt Test, Thomas Test, Straight Leg Raise/Crossed Straight</p>	*				

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Leg Raise, Bulge sign, Ballottement test, ROM, muscle tone/strength					
	N 812	N 830	N 845	N 855	Spring Intensive
Pediatric PE Infant (review with parent/pt guardian-growth charts and developmental screening)		*			
Pediatric PE Toddler (review with parent/pt guardian-growth charts and developmental screening)		*			
Pediatric PE Child (review with parent/pt guardian-growth charts and developmental screening)		*			
Pediatric PE Adolescent (review with parent/pt guardian-growth charts and developmental screening)	*	*	*	*	
Pre-participation physical		*			
Laboratory Evaluation (includes interpretation): CBC CMP Lipid panel Thyroid panel Hepatic function panel UA and Culture					
Breast exam					*
Pelvic Exam					*
Prostate Exam					*
Testicular Exam					*
Basic Chest X-ray Interpretation lecture					*
Basic EKG interpretation lecture					*
Basic Suturing					*
Basic Splinting & Extremity X-rays					*

Additional Skills					
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	NURS 812	NURS 830	NURS 845	NURS 855	
Saline wet mount					
Potassium hydroxide (KOH) prep					
Woods lamp					
Pulmonary function tests (evaluate)					
Peak flow (obtain from patient during encounter)					
Spirometry					
Routine eye exam- Snellen chart					
Routine eye exam-Rosenbaum					
Fluorescein staining of eyes					
Tonometry					
Tympanometry tests					
Audiometry					

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Developmental screenings		*		
Growth charts		*		
Pap smears				
Portable Doppler (please identify purpose for Doppler evaluation)				
Suturing				
Incision and drainage				
Dermabond				
Staple removal				
Chemical cautery/liquid nitrogen				
Cerumen removal				
Ring removal (removal of ring from finger)				
Cognitive testing				
Mini mental exam				
PHQ2 and PHQ9				
GAD-7				
Screening for ETOH use				
Screening for Intimate Partner Violence				