General Survey

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General Survey

• Study of the whole individual
• Overall impression
• Begins at the first encounter with a person
• Introduction to the physical assessment
• Composed of 4 parts: physical appearance, body structure, mobility & behavior

General Survey

• Physical Appearance
  • Age
  • Sex
  • LOC
  • Skin color
  • Facial features
  • No signs of acute

• Body Structure
  • Stature
  • Nutrition: WDN, or malnourished
  • Symmetry:
    • Posture: erect, slumped over,
    • Aging person who may be stooped with kyphosis
  • Position
  • Body build, contour
  • Obvious physical deformities: note congenital or acquired defects

General Survey

• Mobility
  • Gait: coordinated, arms swinging freely
  • Range of Motion (PROM or AROM)
• No involuntary movement

• Behavior
  • Facial expression
  • Mood and affect: appropriate to situation, flat, hostile, cooperative
  • Speech: garbled, unclear
  • Dress/Hygiene: appropriate, cultural, for weather, body odor

General Survey

• Includes Height & Weight
• Vital signs: Temperature, Pulse, Respiration & Blood Pressure
• Recognize transcultural considerations
• Note S/S (signs/symptoms) of distress/pain

Factors Controlling Blood Pressure

Illustration Pat Thomas, © 2006
Assessing Distress/Pain

• Assessment includes:
  - S- Severity
  - L- Location
  - I- Influencing factors
  - D- Duration
  - A- Associated Symptoms

Sample Documentation: General Survey

This is a 34 yo black female office manager, WD appropriate for age, WN, grooming appropriate for age, appears stated age, sexual development appropriate. A&Ox3, responds to questions appropriately articulation clear. Maintains eye contact, calm, cooperative, with appropriate expressions. Skin color dark olive, tone even, intact, hyperpigmented macules on bilateral cheeks and lower arms. Facial features symmetrical. Bilateral body parts are symmetrical and proportionate, posture erect, sitting comfortably in chair facing examiner. No obvious physical deformities. Ambulatory with steady gait, full, smooth ROM without involuntary movements. VS:HT 5’ 4”, WT 165 lb, both appropriate for age and body build and proportionate. BP(Rt arm:sitting) 125/85, NAD, P 78 RRR, RR 16 even, unlabored, T 98°F oral.

Assessing Skin, Hair & Nails

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Structure and Function

• Think of skin as body’s largest organ system
  – Covers 20 square feet of surface area in adults
  – Skin is sentry that guards body
    • Environmental stresses, e.g., trauma, pathogens, dirt
    • Adapts it to other environmental influences, e.g., heat, cold
Structure and Function

• Skin—three layers
  1. Epidermis: avascular
     – basal cell layer: keratin & melanin
     – horny cell layer: desquamated every 4 wks
     – Derivation of skin color
  2. Dermis
     – Connective tissue or collagen
     – Elastic tissue
  3. Subcutaneous layer

• Epidermal appendages
  1. Hair: terminal & vellus hair
  2. Sebaceous glands
  3. Sweat glands
     – Eccrine glands: sweat to control temp
     – Apocrine glands: thick milky secretion to hair follicle, bacteria, body odor
  4. Nails: hard plates of keratin

Skin Cancer

• [Link to MedlinePlus](http://www.nlm.nih.gov/medlineplus/ency/anatomyvideos/000125.htm)

Structure of Skin

Structure of Nails

Assessing the Skin

• Rationale for Assessment: reflect underlying disease and hydration status, if any breaks- can predispose for infection
• Integumentary System= skin, hair, nails.
• Skin- Epidermis, Dermis, Subcutaneous tissue
• Incorporates subjective and objective assessments
• Includes inspection and palpation techniques

Subjective Assessment: Skin

• Past history of skin disorders? (allergies, hives, psoriasis, or eczema)
• Changes in pigmentation(size or color)?
• Changes in a mole?(color, shape & size)
• Excessive dryness, or moisture?
• Pruritus?
• Any lesions that do not heal
• Trauma to skin (stitches, burns)
• Use of tanning salons, sun lamps
• How much time does person spend outside
Subjective Assessment: Skin

- Excessive bruising?
- Hair loss
- Change in nails
- Rash or lesion?
- Meds
- Environmental hazards- work, sun, insects, plants
- Self care- cosmetics, soaps, etc.

Objective Assessment: Skin

The Physical Exam

- Equipment: Strong, direct lighting, small centimeter ruler, penlight, gloves
- Begins with INSPECTION
- Assess hands, nails = nonthreatening
- Assess for color changes: pallor, erythema, cyanosis, jaundice
- Pigmentations: Freckles, Nevus (mole), Birthmarks

Objective Assessment- Skin

The Physical Exam

- Proceed to PALPATION
- Temperature: use back of hands
- Texture: use finger tips-smooth, rough
- Moisture: diaphoresis or dehydration
- Edema: use scale +1~+4
- Turgor: elasticity. Tenting= dehydration
- Vascularity or Bruising: ecchymosis
- Mobility: elasticity
- Thickness

Abnormal Findings (cont.)

Primary skin lesions

- Macules
- Papules
- Patches
- Plaques
- Nodules
- Wheals
- Tumors
- Urticaria (hives)
- Vesicles
- Cysts
- Bullas
- Pustules
Abnormal Findings (cont.)

Secondary skin lesions

- Debris on skin surface
  - Crusts
  - Scales

- Break in continuity of skin surface
  - Fissures
  - Erosions
  - Ulcers
  - Excorations
  - Scars
  - Atrophic scars
  - Lichenifications
  - Keloids
Crust

Scale

Fissure

Erosion

Ulcer

Excoriation
Abnormal Findings (cont.)

Vascular Lesions
- Hemangiomas
  - Port-wine stain (nevus flammeus)
  - Strawberry mark (immature hemangioma)
  - Cavernous hemangioma (mature)
- Telangiectases
  - Spider or star angioma
  - Venous lake
- Purpuric lesions
  - Petechiae
  - Purpura
- Lesions caused by trauma or abuse
  - Pattern injury
  - Hematoma
  - Contusion (bruise)
Scar of Arm Following Open Reduction of a Fracture

Excoriations from branches of multiple tree branches

Cherry angiomas common in adults over 30

Tinea pedis + athletes foot

Ecchymosis Caused by Injury from Falling on a Hard Object

Ecchymosis

Scaling and Fissures of Tinea Pedis
Venus star

Cellulitis

Gangrene

Cyanosis

Raynauds

Telangiectasia dilation of capillaries
Assessment of Lesions
The Physical Exam

- Color
- Pattern or Shape
- Size in cm
- Elevation (flat or raised)
- Location and distribution on body
- Exudate (color, odor)

Diabetic, ulcer

Decubitus stage 2 & 3

Stage 4 decubitus

SOAP NOTES

- **Assessment**
  1. Impaired skin integrity r/t...
  2. Risk for impaired skin integrity r/t...
  3. Disturbed body image r/t....
  4. Enhanced Health seeking behaviors r/t...

- **Plan**
  1. Teaching Hygiene Cancer prevention

Assessing Hair

- Inspection and palpation
- Color
- Texture
- Distribution
- Lesions of scalp
SOAP NOTES

• **Assessment**
  1. Potential for infection r/t...
  2. Body image disturbance r/t....

• **Plan**
  1. Hygiene shampoo and combing

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**Assessment of Nails**

• **Shape and contour:** convex, slightly curved or flat and smooth, 160 degrees.
• **Consistency:** surface smooth and regular, not brittle or splitting, uniform thickness.
• **Capillary Refill:** depress nailbed color blanches, color should return <1-2 seconds

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**Pediculosis**

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**Balding**

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**Alopecia**

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**Fingernail**
**Clubbing & amputation**

- Clubbed fingers
- Normal angle of nail bed
- Distorted angle of nail bed

**Cyanosis**

- Blue discoloration of the skin

**SOAP NOTES**

- **Assessment**
  1. Potential for infection r/t...
  2. Body image disturbance r/t...

- **Plan**
  1. Hygiene

**Health Promotion**

- Teach all adults to examine skin once a month & a yearly exam by dermatologist.
- Teach diabetics the importance of skin care to feet

**Health Promotion**

- Danger signs of pigmented lesions (moles):
  - A - Asymmetrical Shape
  - B - Border Irregularity
  - C - Color
  - D - Diameter greater than 6mm
  - E - Elevation (flat or raised)
Malignant melanoma

Basal cell carcinoma

Lesions caused by trauma or abuse: Pattern injury

Summary

- General survey – overall appearance of an individual…beginning of the physical health assessment
- Physical health assessment begins with the skin including the hair and nails
- Includes inspection & palpation
- Health promotion through teaching is incorporated

A flat macular hemorrhage is called a(n):

A. Purpura
B. Ecchymosis
C. Petechiae
D. Hemangioma