Heart-Lung & Abdominal Exam ☑ Check normal, circle & describe abnormal						Patient:Insurance:	date:(dd/mm/lyr)
CC & significan	nt history:						M/F
Temp:	Duleo	Poen:	RD· I ·	1	P· /	_	
Tellip.	, Fuise	, ixesp	, BP: L:		_, IX/_		
Heart-Lu	na: 🗆 WNL		Percussion				
Observation			□ Resonant:				
□ Shape & symmeti	ry, bony markings		□ Flat:				
□ Spinal shape & cu	urvature (kyphosis, lore	dosis, scoliosis)	Dull:Hyperresonant:				
□ Skin:			Palpation				
 Effort of respiration 	on (use of accessory m	nuscles):	□ Spine/rib tenderne	ess:			
□ Extremities:							
	g		□ THOTAGIC EXCUISION	າ:			
□ Edema:			□ 1101111tus				
□ Cyanosis:			- Diaprilamatio oxoc	Irsion:			
	es:		- □ Abdominal aorta: _	/ueviation			
Lung Auscultation			□ Abdominaraorta				
):		1 5	<u>පසු</u>			/ ا
□ Crackles (rales): _							
			The state of the s				
				1			
		—— / l			1000	1000	E CONTRACTOR OF THE PARTY OF TH
Heart Auscultation		/ (/ (lup) (C	('\)	
	impulse:		1	1			
			I W	The	X !	1 1 1 1 1	FASTER KII
Specific valves				- Flore		' 1	Exist All
'				T	120		Le company
			MIRE	17			1 Sign XI
□ Erb's point:			The second second	THE WAY			
□ Tricuspid:				2// 1/2		1 100	
□ Mitral:			10/1/3	2 //		\ \\(\(\(\)\)	203
Sounds			100 3	15 /	17 /1	1/ 4/	
□ S1 ('lub'):				= 10	\		STATES I
□ S2 ('dup'):			, ,	P	1	1	All it
□ Bruit:							
U Other:							
Abdome	n: 🗆 WNL		Hernia evaluation Umbilical:			Acute abdomen special	tests
Observation			□ Inguinal direct:			□ Rigid abdomen:	
□ Skin:	••		To an American Providence				
	r:					☐ Murphy's sign (GB):	
Auscultation			Strength			☐ Murphy's punch (kidner	y):
			D			Carnett's test:	
□ Upper right:				ion:			
□ Lower right:			_				
□ Lower left:			_		er Quadrant 1		Left Upper Quadrant
□ Vascular:				Liver	. 1	No series	Left lobe of liver
□ Aorta:			_	Gall bladd		W. J.	Spleen
□ Renal:			_	Duodenur			Stomach
□ Iliac:			_	Head of pa		V77/2 X	Body or pancreas
□ Femoral:			_	Right adre	right kidney	The state of the s	Left adrenal gland Portion of left kidney
□ Bowel sounds:			_		right kidney exure of colon	VALUE OF THE PARTY	Splenic flexure of colon
Percussion				Ascending			Transverse colon
Liver:			_	Transvers	•	H CONTY	Descending colon
□ Spieen:			-				2000000
Industry S purion: Descussion note:			_	Right Lowe	er Quadrant	MININA	Left Lower Quadrant
Palpation (light then			_		e of right kidney	1 VALOR	Lower pole of left kidney
				Cecum &			Sigmoid colon
☐ Cutaneous hyper	sentitivity:		-		ascending colon	5	Portion of descending colon
	Schullvity.			Ovary & s		The state of the s	Ovary & salpinx
□ Deep palpation:			_	Uterus	1) Uterus
□ Inguinal lymphno	des:		-	Right sper	matic cord		Left spermatic cord
				Right uret			/ / Left ureter
				-	,	()	1

This form is a comprehensive checklist of examination procedures. Each item should be utilized as a diagnostic option based on the patient's presenting symptoms and the clinical discretion of the examiner. Every procedure does not have to be performed on every patient. Some procedures may be contraindicated in certain situations. Patient information contained within this form is considered strictly confidential. Reproduction is permitted for personal use, not for resale or redistribution. www.prohealthsys.com ©2005 by Professional Health Systems Inc. All rights reserved. "Dedicated to Clinical Excellence."

Signature:

Date: