

# Fundamentals of Patient Assessment for Nurses

## ## Introduction

Patient assessment is the foundational skill upon which all other nursing actions are built. It is a systematic, deliberate process of collecting, verifying, and analyzing data about a patient's health status. A thorough and accurate assessment is critical for identifying problems, planning care, and ensuring patient safety.

## ## The Primary Survey (ABCDE)

The primary survey is a rapid assessment used to identify and manage immediate life-threatening conditions. It follows the ABCDE mnemonic to ensure the most critical functions are checked first.

- \*\*A - Airway:\*\* Is the patient's airway clear and open? Check for any obstructions, listen for unusual breath sounds like stridor or gurgling. If compromised, interventions like suctioning or positioning may be needed immediately.

- \*\*B - Breathing:\*\* Is the patient breathing effectively? Assess the rate, rhythm, and depth of respirations. Look for signs of respiratory distress, such as the use of accessory muscles, cyanosis, or nasal flaring. Check oxygen saturation.

- \*\*C - Circulation:\*\* Does the patient have adequate circulation? Check the patient's heart rate, blood pressure, and capillary refill time. Assess skin color, temperature, and moisture. Look for any signs of major bleeding.

- \*\*D - Disability:\*\* What is the patient's neurological status? A common tool for this is the AVPU scale (Alert, Voice, Pain, Unresponsive) or the Glasgow Coma Scale (GCS). Check pupil size and reaction to light.

- \*\*E - Exposure/Environment:\*\* Expose the patient as necessary to perform a full examination, while also preventing hypothermia. Check for any obvious injuries, rashes, or other issues that were not visible before.

## ## The Secondary Survey

The secondary survey is a more detailed, comprehensive head-to-toe examination that is performed after the primary survey is complete and any life-threatening issues have been managed. It involves a systematic review of each body system to gather more specific information about the patient's condition.

## ## Conclusion

Mastering both the primary and secondary surveys allows nurses to quickly identify priorities, make sound clinical judgments, and provide safe, effective care to their patients.