

Cardiac and peripheral vascular assessment essay sample

[Nutrition](#)



- Chest Pain: no tightness or pain indicated
- Shortness of breath (dyspnea): no shortness of breath • Number of pillows sleep with at night (orthopnea): sleeps with 2 pillows, denies orthopnea • Cough: coughs during the day or night; no mucus or blood tinged; coughs • Fatigue: no fatigue
- Skin ever turn bluish or ashen in color? (Cyanosis or Pallor): denies facial skin turn blue or ashen • Swelling in your ankles or feet (edema): no swelling of feet and legs • Ever awaken at night to urinate? How many times? (nocturia): no nocturia indicated • Past health problems with your heart? No past history of hypertension, obesity, diabetes or signs of coronary artery disease • Personal habits (cardiac risk factors)
 - o Nutrition (fats, calories, salt): consume limited amount of sodium intake o Exercise: does cardio workout every other day ; gym member
 - o Smoking (current, former, pack hx, type): no history of smoking o Alcohol consumption? (how much, how often, type of alcohol): drinks socially on the weeknds

PERIPHERAL VASCULAR (Subjective)

- Leg pain or cramps : no leg pain or cramps
- Skin changes or arms and/or legs: denies redness, pallor, blueness or brown discoloration • Swelling in arms or legs: no swelling in arms or legs • Swollen glands in your arms or legs (Lymph node enlargement): no swollen glands, no lumps or kernels

****OBJECTIVE****

GENERAL SURVEY

AA&O X7; pleasant and cooperative; grooming appropriate for season and setting with casual dress. Gait and motor is stable, coordinated without use of walking aids. Affect is appropriate with normal speech flow. Facial expression is calm and relaxed.

Vital signs: T, P, R, BP (not required to demonstrate)

T: 97.5, R: 24, BP: 112/78

PHYSICAL EXAM

NECK

Carotid Pulse

Inspect: Carotids 2+ and = bilaterally

Palpate: contour is smooth with rapid upstroke and slower downstroke; amplitude strength 2+ Auscultate: no bruits auscultated

Internal Jugular: Internal jugular veins pulsation present upon supine, diminishes when elevated 30 degrees

CHEST

Inspection

Anterior Chest: no visible pulsation, no heaves or lift

Palpation

Anterior Chest: no thrills palpated

Apical impulse: apical pulse palpated at the 5th ICS at the left MCL, 2 cm in size, amplitude short, gentle tap with short duration

Auscultation

- ✓ Aortic
- ✓ Pulmonic
- ✓ Erb's point
- ✓ Tricuspid
- ✓ Mitral

Comment on the following at each area:

Rate and rhythm: rate 78 beats per minute, rhythm regular

S1: not diminished or accentuated, S1 is louder than S2 at the apex S2: not diminished or accentuated, S2 is louder than S1 at the base S3: no extra heart sound heard, no ventricular gallops heard upon auscultation S4: no extra heart sound heard, no atrial gallop heard upon auscultation Murmurs: no murmurs heard, absence of clicks and rubs

Posture Maneuvers to accentuate murmurs and extra sounds:

Left lateral with bell (mitral/S3/S4): no blowing, swooshing heard with bell

Sitting leaning forward with diaphragm (aortic) : no pulmonic regurgitation heard at the base, right , and left sides.

PERIPHERAL VASCULAR

UPPER EXTREMITIES

Inspection: bilateral symmetry in both arms with no edema or venous patterning, no scars inspected on hands and arms, extremities have pink-tan color, no redness, cyanosis, or any skin lesions. Hair distribution continues along arms.