

# HEENT Assessment Checklist and Observation Log

**Patient's full name:**

**Patient's date of birth:**

**Date and time assessed:**

**Clinician's full name:**

**What you need:** a penlight; Snellen chart; tongue depressor; vanilla, mint, or coffee for patients to smell; ophthalmoscope; otoscope; tuning fork

## **Perform safety and clerical nurse work:**

- Perform hand hygiene and ensure their hands are totally clean
- Inspect the room for any transmission-based precautions
- Introduce themselves to the patient, what their role is, what they're about to do, and how long it'll take to conduct the assessment
- Confirm the patient's ID using their full name and date of birth
- Explain the process of the assessment to the patient
- Ask the patient for any questions they might have regarding the assessment

## **HEAD**

- Visual inspection: check the head and face for symmetry or asymmetry.
- Visual inspection: check the hair for color, distribution, and texture.
- Palpation: check the scalp and skull for tenderness.
- Palpation: check the scalp and skull for flaking, lesions, and other deformities.

### **Notes**

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## EYES

- Check the alignment of the eyes.
- Check for the presence of discharge, irritation, and redness.
- Check the eyelids for any drooping.
- Check the strength of each eyelid by having your patient shut their eyes. Try to open their eyes. You shouldn't be able to if the eyelids are strong.
- Check the sclera and conjunctiva for both eyes.
- Check the cornea, iris, and lens for transparency.
- Check the pupils and compare them. Test them by conducting the PERRLA Eye Exam.
- Check the six cardinal positions of the gaze.
- Check for conjugate gaze.
- Check for nystagmus.
- Check the visual fields in both eyes: medially/laterally, superiorly/inferiorly.
- Check their visual acuity using a Snellen Chart.
- Check their ocular fundi using an ophthalmoscope.
- Check the transparency of the anterior and posterior chambers.
- Check the red reflex of the retina.

### Notes

## EARS

- External inspection: check the pinna for abnormalities that may point to skin cancer and gout
- External inspection: check the external auditory canal for redness, swelling, and earwax.
- If there is earwax, clear the ears.
- Perform an Otoscopy with an otoscope: check the color and shape of the eardrums (and if they're bulging or retracted), cone of light, umbo, the long and short processes of the malleus, pars tensa, pars flaccida, and the annulus.

- Hearing acuity: conduct the Whisper Test.
- If their acuity doesn't seem good, conduct the Weber and Rinne Tests to check for deafness.

### Notes

## NOSE

- Visual inspection: check the nose's color, shape, size, and symmetry.
- Visual inspection: check for any presence of drainage, tenderness, and masses.
- Nasal passage inspection: use an otoscope or nasal speculum to check for patency, nasal mucosa for color, nasal septum for deviation, and turbinates for color and swelling.
- Check the frontal and maxillary sinuses for tenderness and infections.
- Check their sense of smell using any of the following: an orange or lemon peel, coffee, vinegar, vanilla, or peppermint.

### Notes

## THROAT

- Lips inspection: check for color, moisture, masses, cracks, sores, fissures, and symmetry.
- Oral mucosa inspection: check for color, lesions, dryness, moisture, masses, and swelling.
- Tongue inspection: check for color, thickness, moisture, symmetry of movement left and right, and deviations from the midline. Also check the tongue and the floor of the mouth for any masses and swelling.
- Teeth inspection: check for their general condition and evaluate if any teeth are missing.
- Gums inspection: check for color, texture, swelling, retraction, and bleeding.
- Uvula inspection: check for movement, position, size, symmetry, and color.
- Pharynx inspection for color, redness, inflammation, exudate, masses, and lesions.
- Tonsils inspection: check for size, color, inflammation, and exudate.
- Salivary glands (parotid, sublingual, and submaxillary) inspection: check for patency and signs of inflammation or redness.
- Check the patient's gag reflex and ability to swallow.
- Check for an enlarged thyroid gland at the suprasternal notch.

### Notes

## NECK

- Check neck muscles for symmetry, masses, and swelling.
- Palpation: check the cervical lymph nodes for any swelling or tenderness.
- Assess the head and the neck's range of motion.
- Assess the strength of the trapezius muscle.
- Assess the strength of the cervical muscle.
- Check the trachea for deviation.
- Check the thyroid gland for enlargement.

Check the thyroid gland for any nodules and masses.

Check the posterior aspect of the neck for tenderness in the cervical point.

### Notes

### Additional Comments