

For Nurse Aide

Head to Toe Observation Guide

When providing care, notify the nurse if you observe any of these changes in condition.



GENERAL:

- Is the resident less active than usual?
- Any change in appetite, food, or fluid intake?
- Any complaints/non-verbal expressions of pain (e.g., guarding, wincing, groaning)?

MOUTH:

- Any difficulty chewing, refusal to eat, or only chewing on one side of the mouth?
- Do the gums, lips, cheeks, or tongue seem very dry or cracked?
- Any redness or bleeding in the mouth or gums?
- Any concern for fit of dentures or dental appliances?
- Are there food particles in the mouth after eating that cannot be easily removed?
- Any white patches on the tongue and/or cheeks?
- Any bad breath?

SKIN:

- Any redness, bruising, bleeding, or texture changes to the skin?
- Are toenails or fingernails discolored? Is there any dirt stuck underneath?
- Are there any new cuts, wounds, or scrapes?
- Are there any areas that are warm or hot to touch?
- Any drainage or odor changes to the skin?
- Is the skin flaky or crusted?

URINARY TRACT:

- Any change in urine color, odor, or clarity? Can you see any blood in the urine?
- Any change in the amount of urine (e.g., new incontinence, frequent urination, not producing urine)?
- Any pain or burning when urinating? Any pain above the pubic area or in the lower back?
- Any concerns for dehydration?

For Licensed Nurse

Head to Toe Observation Guide

Always observe for changes in condition. Work as a team and notify the medical provider when appropriate.



GENERAL CONSIDERATIONS:

- Has there been a change in appetite, energy, mood, or orientation?
- Any signs of sepsis including fever, shivering, tachycardia, tachypnea, diaphoresis, or confusion?

DETERMINE IF THE RESIDENT IS AT RISK FOR A PNEUMONIA:

- Any change in respiratory rate or O₂ saturation from baseline?
- Are the resident's lung sounds different than baseline?
- Any newly developed or worsening pain while breathing or coughing?
- Any coughing or shortness of breath? If coughing, is the cough productive?
- Any cyanosis present on the extremities or around the mouth?
- History of known/suspected dysphagia? Has the resident recently vomited or choked?

DETERMINE IF THE RESIDENT IS AT RISK FOR A SKIN INFECTION:

- Are any areas of the skin open, red, warm, or swollen? Any presence of drainage?
- Does the resident have newly developed or worsening pain at the affected site?
- Is any wound or incision site weeping, discolored, or smelly?
- History of edema, eczema, venous insufficiency, skin or soft tissues infections, or other skin disorders?

DETERMINE IF THE RESIDENT IS AT RISK FOR A URINARY TRACT INFECTION:

- Any new or worsening urinary incontinence, urgency, frequency, dysuria, or gross hematuria?
- Any fever, shaking, chills, or flank pain?
- Is the resident experiencing a sense of pressure/pain in lower abdomen, side, or back? Any pain above the pubic area? Any swelling or tenderness of the external genitalia?
- Any signs of dehydration – dry oral mucosa/lips, tenting skin, decreased urine output with darker color/reduced clarity/odor, or headache?
- Does the resident have an indwelling catheter in place/recently removed?