

Each table below represents one bullet. Feel free to check off as many boxes as apply within each bullet category, but you only get one bullet per table. PF exam requires one to five bullets. EPF exam requires six to eleven bullets. Detailed exam requires 12 bullets. Comprehensive exam requires at least TWO bullets from EACH of NINE different organ systems.

CONSTITUTIONAL		Ears/Nose/Mouth/Throat			
Any Three Vital Signs		External Appearance of Ears and Nose		no	yes
Blood Pressure	130/80	Normal appearance			X
Heart Rate	62	Rhynophyma			
Respirations	20	Other:			
Temperature		Hearing Assessment		no	yes
Height		Decreased on right			
Weight		Decreased on left			
General Appearance		Other:			
No acute distress	X	Otosopic Exam		no	yes
Conversant	X	Canal erythema			
Looks older than stated age		TM erythema			
Unkempt and disheveled		Discharge			
Other:		Other:			
EYES		Nasal Mucosa, Septum and Turbinates		no	yes
Conjunctivae/Lids		Nasal mucosal edema			
Pale conjunctivae	X	Nasal discharge			
Discharge		Mucosal ulcers			
Palpebral edema		Other:			
Ptosis	X	Inspection of Lips, Teeth and Gums		no	yes
Other:		Edentulous			
Pupils/Irises		Good dentition			X
PERRLA		Gingival hyperplasia			
R > L		Angular stomatitis			
L > R		Cold sores/fever blisters			
Small pupils		Other:			
Large pupils		Oropharynx Exam		no	yes
Sluggishly reactive to light		Mucosal ulcerations			X
Decreased accommodation		Dry mucous membranes			
Other:		Posterior erythema			
Ophthalmoscopy		Pharyngeal exudate			
Hemorrhages		Post-nasal drip			
Exudates		Vesicles			
AV nicking		Atrophic glossal papillae			
Papilledema		Other:			
Other:					
NECK					
Neck Exam		no	yes	R	L
Tender	X				
Crepitus					
Trachea deviated to:					
Mass	X				
Other:					
Thyroid Exam		no	yes	R	L
Enlarged		X			
Bruit		X			
Nodule(s)					
Tenderness					
Other:					
CHEST/BREASTS					
Inspection		no	yes	R	L
Symmetric					
Nipple discharge					
Other:					
Palpation		no	yes	R	L
Breast masses/lumps					
Axillary mass					
Other:					

RESPIRATORY									
Respiratory Effort		no	yes	Percussion		no	yes	R	L
Increased/labored			X	Dullness					
Use of accessory muscles				Hyperresonance					
Other:				Other:					
Auscultation		no	yes	R	L	Palpation		no	yes
Rhonchi		X				Increased tactile fremitus			
Crackles		X				Symmetric expansion			
Wheezes		X				Normal diaphragmatic excursions			
Friction rub						Other:			
Other:						Other:			
CARDIOVASCULAR									
Carotids		no	yes	R	L	Palpation of Heart		no	yes
Diminished						Displaced PMI			
Bruit		X				Hyperdynamic PMI			
Other:						Other:			
Heart Auscultation		no	yes	Abdominal Aorta		no	yes		
RRR, no MRGs			X	Increased size					
Systolic murmur				Bruits					
Diastolic murmur				Other:					
S4				Femoral Pulses		no	yes	R	L
S3				Bruits					
Other:				Diminished					
Lower Extremity Edema		no	yes	Pedal Pulses		no	yes	R	L
Bipedal edema			X	Absent					
Venous stasis edema				Diminished					
Other:				Absent					
GASTROINTESTINAL									
Abdominal Exam		no	yes	Liver and Spleen		no	yes		
Masses			X	Hepatomegaly			X		
Tenderness			X	Splenoemgaly					
Other:				Other:					
Hernias		no	yes	R	L	Rectal		no	yes
Ventral						Masses			
Umbilical						Hemorrhoids			
Inguinal hernia						Decreased sphincter tone			
Incisional hernia						Other:			
Femoral hernia						Occult Blood Testing		no	yes
Other:						Heme Positive			
MALE GENITOURINARY									
Exam of Scrotum		no	yes	Exam of Penis		no	yes		
Hydrorcoele				Lesion(s)					
Spermatocoele				Masses					
Cord tenderness				Discharge					
Testicular mass				Rash					
Other:				Other:					
Digital Rectal Exam						no	yes		
Enlarged prostate									
Prostate nodule(s)									
Prostate tenderness									
Asymmetric prostate									
Other:									

→

This is page one of two pages. See more bullets on the next page.

FEMALE GENITOURINARY

External Genitalia	no	yes	Urethra	no	yes	Bladder	no	yes	Cervix	no	yes	Uterus	no	yes	Adnexa and Parametria	no	yes
Lesions			Masses			Fullness			Lesions			Decreased mobility					
Discharge			Tenderness			Masses			Discharge			Tenderness			Masses		
Cystocele			Scarring			Tenderness			Tender			Normal size			Tenderness		
Rectocele			Discharge			Nodularity			Scarring			Normal position			Nodularity		
Other:			Other:			Other:			Other:			Other:			Other:		

LYMPHATIC

(Assess for lymphadenopathy)

Neck	no	yes	R	L	Axillary	no	yes	R	L	Inguinal	no	yes	R	L	Other	no	yes	R	L
Submandibular					Apical					Superficial									
Submental					Anterior					Subinguinal									
Supraclavicular					Posterior					Deep Inguinal									

MUSCULOSKELETAL

Gait and Station	no	yes	Inspection/Palpation	no	yes	Joint Stability	yes	no
Stable gait and station		<input checked="" type="checkbox"/>	Misalignment			Dislocation		
Stooped posture			Asymmetry			Subluxation		
Shuffling gait			Crepitation			Laxity		
Ataxic gait			Tenderness			Other:		
Stiff gait			Masses					
Positive Romberg test			Effusions			Muscle Strength and Tone	yes	no
Other:			Defects			Weakness		
			Other:			Atrophy		
Exam of Digits	no	yes	Range of Motion	no	yes	Fasciculations		
Clubbing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	FROM			Spasticity		
Cyanosis	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Limited ROM			Cog-wheel rigidity		
Petechiae			Crepitation			Dystonia		
Ischemia			Contractures			Flacidity		
Nodes			Other:			Bradykinesia		
Other:			Other:			Other:		

Each sphere represents ONE body area. Draw a line from positive or negative findings to the relevant body area. Score one bullet for each body area examined per exam modality.

SKIN

Inspection	no	yes
Jaundice		
Erythema		
Rash		
Vesicles		
Ulcer(s)		
Telangiectasia		
Echymoses		
Other:		
Palpation	no	yes
Warm and dry		
Cool and clammy		
Subcutaneous nodules		
Skin tightening		
Tenting		
Decreased turgor		
Hyperemia		
Other:		

For negative or normal findings, just check the relevant box. For positive findings, draw a line to the affected body area above.

NEUROLOGIC

Cranial Nerves												
Intact	I	II	III	IV	V	VI	VII	VIII	IX	X	XII	XII
yes												
no												
Sensory Exam												
Intact	Yes	No										
Light touch												
Pin-prick												
Vibration												
Proprioception												
Other:												
Reflexes			R	L								
Biceps												
Brachioradialis												
Triceps												
Quadriceps												
Achilles												
Other												

(Map positive sensory deficits above.)

0 = absent
1+ = trace
2+ = normal
3+ = brisk
4+ = non-sustained clonus
5+ = sustained clonus

PSYCHIATRIC

Judgment and Insight	no	yes	Orientation	no	yes	Recent and Remote Memory	no	yes	Mood and Affect	no	yes
Judgment intact		<input checked="" type="checkbox"/>	Person		<input checked="" type="checkbox"/>	Recent memory intact			Appropriate		
Judgment globally impaired			Place		<input checked="" type="checkbox"/>	Recent memory globally impaired			Agitated		
Insight intact		<input checked="" type="checkbox"/>	Time		<input checked="" type="checkbox"/>	Remote memory intact			Confrontational		
Insight globally impaired			Situation		<input checked="" type="checkbox"/>	Remote memory globally impaired			Flat		
Other:			Other:			Other:			Other:		