

Respiratory assessment

Procedure	Score	Done	Not done	Comment
Washing hand and wearing gloves	1			
Prepare equipment: gloves, watch, stethoscope.	1			
Explain procedure to the mother and child.	1			
Keep privacy.	1			
Keep child in comfortable position (on bed and head of bed elevated 30 degree or mother lap).	1			
Remove clothes and expose chest area	1			
Inspect size and shape of the chest	1			
Inspect chest movement and respiratory effort	2			
Count the respiratory rate.	1			
Palpate child's chest using;				
a- Tactile fremitus.	1			
b- Chest expansion.	1			
Auscultate chest	4			
a- Using land marks				
b- Evaluate the quality and characteristics of breath sounds over entire chest, comparing sounds between the sides.				
c- Identify normal breath sounds.				
d- Identify abnormal breath sounds.				
Do chest percussion, describing of sounds heard with percussion of the chest.	1			
Covering child	1			
Removing gloves and washing hand	1			
Documentation	1			
Total	20			

Cardiovascular assessment

Procedure	Score	Done	Not done	Comment
Washing hand and wearing gloves	1			
Preparing equipment: gloves ,watch ,stethoscope.	1			
Explain procedure to the mother and child.	1			
Keep privacy	1			
Keep child in comfortable position (reclining or semi-flower's).	1			
Remove clothes and expose chest area	1			
Inspect the shape and symmetry of the anterior chest from the front and side views(rib cage, bulging).	1			
Check PMI location.	2			
Use palpation to count heart rate at apical impulse site.	2			
Auscultate heart sounds; a- S1(Identify location) b- S2 (Identify location)	4			
Auscultate PMI.	2			
Covering child	1			
Removing gloves and washing hand	1			
Documentation	1			
Total	20			

Abdominal assessment

Procedure	Score	Done	Not done	Comment
Washing hand and wearing gloves	1			
Preparing equipment : gloves ,watch ,stethoscope.	1			
Explain procedure to the mother and child.	1			
Keep privacy	1			
Keep child in comfortable position (on bed supine position)	1			
Remove clothes and expose chest area	1			
Inspect the shape and counter of the abdomen.	1			
Inspect umbilicus.	1			
Inspect Abdominal movement.	1			
Auscultate bowel sounds in each quadrant	2			
Evaluate bowel sounds (normal, hyperactive, absence).	2			
Do abdominal indirect percussion to evaluate borders and sizes of abdominal organs and masses.	1			
Position the child supine with knee flexed.	1			
Stand beside the child and place warmed fingertips across child's abdomen and start light palpation.	2			
Covering child.	1			
Removing gloves and washing hand.	1			
Documentation.	1			
Total	20			