

HEENT Assessment

Checklist and observation log

Patient information

Full name:

Date of birth:

Date and time assessed:

Medical history (if needed):

Equipment needed

- Penlight
- Snellen chart
- Tongue depressor
- Vanilla, mint, coffee, orange/lemon peel, vinegar, peppermint for smell test for patients
- Ophthalmoscope
- Otoscope
- Tuning fork

Preparations beforehand

- ☐ Perform hand hygiene. Ensure your hands are clean.
- ☐ Inspect the room for any transmission-based precautions.
- ☐ Introduce yourself to the patient, your role, what you'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.

HEENT assessment

Head

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

Notes:

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

- Do an external inspection of the pinna for abnormalities that may point to skin cancer and gout, as well as the external auditory canal for redness, swelling, and earwax.
- Check the auricle, canal, and ear drum for any changes in color, symmetry, elasticity and presence of tenderness or lesions.
- Check the tympanic membrane for any changes in color, shape, transparency, integrity, and the presence of bulging or scarring.
- If there is earwax, clear the ears.
- Conduct the Whisper Test as part of the gross hearing test to check for hearing acuity.
- If their acuity doesn't seem good, conduct the Weber and Rinne tests to check for deafness. These require a vibrating tuning fork.

Notes:

Nose and lymph nodes

- Visually inspect the nose's color, shape, size, and symmetry.
- Visually inspect the nose for any presence of drainage, tenderness, and masses.
- Use an otoscope or nasal speculum to inspect the nasal passages 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. Ensure that they are not tender to palpation.
- Check their sense of smell or conduct the CN I test (Olfactory nerve) by having them sniff an orange or lemon peel, coffee, vinegar, vanilla, or peppermint.
- Check if the patient reports difficulty smelling.

Notes:

Throat

- Inspect the lips for color, moisture, masses, cracks, sores, fissures, and symmetry.
- Inspect the oral mucosa for color, lesions, dryness, moisture, masses, and swelling.
- Inspect the tongue for color, thickness, moisture, symmetry of movement left and right, and deviations from the midline. Also, check the mouth, tongue, and floor for masses and swelling.
- Conduct an oral examination to inspect the posterior pharynx.
- Inspect the teeth for their general condition and evaluate if any teeth are missing.
- Check for any oral cavity. Examine the hard and soft palate for integrity and length.
- Inspect the gums for color, texture, swelling, retraction, and bleeding. Check for signs of periodontal disease.
- Inspect the uvula for movement, position, size, symmetry, and color.
- Pharynx inspection for color, redness, inflammation, exudate, masses, and lesions.
- Inspect the tonsils for size, color, inflammation, and exudate.
- Inspect the salivary glands (parotid, sublingual, and submaxillary) 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.
- Palpate 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 and cervical muscle.
- Check the trachea for deviation.
- Check the thyroid gland for enlargement, any nodules, and masses.
- Check the posterior aspect of the neck for tenderness in the cervical point.

Notes:

Additional notes

Physician name:

Physician signature: