Assessment Form

Symptoms in red are potential COVID-19 relevant risk factors or indicators. Use this for patient assessment before calling medical provider.

Resident Name __________________________

Condition Change ________________________

Associated medical conditions include (check all that apply)

- CHF
- chronic pressure ulcer
- diabetes
- ESRD/hemodialysis
- CAD or hx of MI
- COPD/asthma
- Dementia
- Hospitalized within past 30 days
- Surgery within past 30 days
- Other ______________________

☐ Full Code ☐ DNR ☐ Do not hospitalize

Goals of Care

- Comfort Measures
- Limited Intervention
- Full Intervention

Antibiotic Use

- Use antibiotics only if comfort cannot be achieved fully through other means
- Use antibiotics consistent with treatment goals

Artificial Nutrition

- No artificial nutrition
- Defined trial of artificial nutrition
- Long-term artificial nutrition

<table>
<thead>
<tr>
<th>Temp</th>
<th>Pulse</th>
<th>Resp. Rate</th>
<th>O₂ Sat</th>
<th>On O₂</th>
<th>B/P</th>
<th>Blood Sugar</th>
<th>Weight/Change?</th>
<th>Most recent BM</th>
</tr>
</thead>
</table>

Symptom-Based Exam Guide

If presenting this symptom:

Do this assessment:

- Abdominal pain or Nausea/Vomiting/Diarrhea/Constipation
  - Abdominal/Genital/Urinary

- Chest pain
  - Lungs/Heart

- Cough or Shortness of breath
  - Lungs/Heart

- Altered mental status
  - Full Exam

- Fever
  - Full Exam

- Rashy/Itching
  - Skin

- Facial droop/arm or leg weakness, or headache/blurry vision
  - Neurological

- Leg swelling
  - Lungs/Heart/Skin

- Hematuria or vaginal discharge
  - Genital/Urinary

- Fall
  - Neurological/Skin

- Muscle or Joint Pain
  - Musculoskeletal

Mental Status/Mood/Behavior

- not pertinent

- depressed

- agitated

- malaise/fatigue

- nonresponsive

- withdrawn

- restless

- increased aggression (physical or verbal)

- personality change

- hallucinations (worse or new)

- increased confusion

- lethargy

Neuro

- not pertinent

- speech irregularity

- abnormal gait

- weaker on RUE/RLE/LUE/LLE (circle)

- facial asymmetry

- decreased sensation

- dizzy

- leaning to right/left side

- tingling

- numbness

Head/Eyes/Ears/Mouth/Throat

- not pertinent

- jaundiced eyes

- pupils unequal

- pupils non-reactive

- mouth lesion

- sore throat

- headache

- difficulty swallowing

- ringing in ears
Lungs

- abnormal lung sounds
- painful deep breaths
- orthopnea
- dyspnea on exertion
- cough (productivity, non-productivity)
- labored
- shallow
- short of breath

Heart/Pulses

- irregular pulse
- edema
- abnormal heart sound
- orthostatic
- weak pulse
- chest pain

Abdominal

- tender
- distended
- hypoactive bowel sounds
- diarrhea
- new incontinence
- change in stool color
- constipation
- hyperactive bowel sounds
- nausea/vomiting
- bloody stool
- bloody emesis
- absent bowel sounds

Skin

- jaundice
- cyanotic
- bruising
- excoriation
- itch
- blister
- wound
- laceration
- muscle aches/pains
- rash
- localized warmth
- localized swelling
- skin tear
- exudation

Musculoskeletal

- falls
- joint pain
- joint swelling
- general weakness
- muscle aches/pains
- muscle spasm
- joint pain
- joint swelling

Genital/Urinary

- new incontinence
- new nocturia
- increased urinary frequency
- dysuria
- hematuria
- abnormal discharge
- lesion

Pain (elaborate on previously mentioned pain or discuss new symptom)

- location
- pain scale (1-10):
- pain quality is sharp/dull/constant/intermittent/other:
- pain is relieved by
- pain is made worse by

Use transmission based precautions if any possible symptoms of COVID-19 are present.

Provider Call Orders

When will PCP be contacted again? Responsible Party Notified? Y/N

Indiana State
Department of Health

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