Inspection Reminder-Checklist

Head

- Inspect skin characteristics
- Inspect symmetry and external characteristics of eyes and ears
- Inspect configuration of the skull
- Inspect and palpate scalp and hair for texture, distribution, quantity

Face

- Palpate facial bones
- Palpate temporomandibular joint while patient open and closes mouth
- Palpate and percuss sinus regions; if tender, transilluminate
- Inspect ability to clench teeth, squeeze eyes tightly shut, wrinkle forehead, smile, stick out tongue, puff out cheeks
- Test light touch sensation of forehead, cheeks, and chin

Eyes

- External examination
- Inspect eyelids, eyelashes, and palpebral folds
- Determine alignment of eyebrows
- Inspect sclera, conjunctiva, and iris
- · Palpate lacrimal apparatus
- Near vision screening
- Eye function
- Test pupillary response to light and accommodation
- Perform cover-uncover test and corneal light reflex
- Test extraocular eye movements
- Assess visual fields
- Test corneal reflexes
- Test red reflex
- Inspect lens
- Inspect disc, cup margins, vessels, and retinal surface

Ears

- Inspect alignment and placement
- Inspect surface characteristics
- Palpate auricle
- Assess hearing and whisper test or ticking watch
- Perform otoscopic examination
- Inspect canals
- Inspect tympanic membranes for landmarks, deformities, and inflammation

Nose

- Note structure, position of septum
- Determine patency of each nostril
- Inspect mucosa, septum, and turbinates with nasal speculum
- Asses olfactory function, test sense of smell

Mouth and Pharynx

- Inspect lips, buccal mucosa, gums, hard and soft palates, floor of mouth for color, surface characteristics, and any other apparent abnormalities
- Inspect oropharynx. Note anteroposterior pillars, uvula, tonsils, posterior pharynx, and mouth odor.
- Inspect teeth for color, number, and surface characteristics
- Inspect tongue for color, characteristics, symmetry, and movement
- Test gag reflex and ah reflex
- Perform taste test

Neck

- Inspect for symmetry and smoothness of the neck and thyroid
- Inspect for jugular venous distention
- Inspect and palpate range of motion, test resistance against examiner's hand
- Test shoulder shrug
- Palpate carotid pulses, one at a time,
- Palpate tracheal position
- Palpate thyroid
- Palpate lymph nodes
- Auscultate carotid arteries and thyroid

Chest, Heart

- Inspect the chest for respiratory movement, size, shape, precordial movement, and deformity
- Palpate the anterior chest, locate the point of maximal impulse; note tactile fremitus in the talking or crying child
- Auscultate the anterior, lateral, and posterior chest for breath sounds; count respirations
- Auscultate all cardiac listening areas for S1 and S2, splitting, and murmurs; count apical pulse

Abdomen

- Inspect abdomen
- Auscultate for bowel sounds
- Palpate. Identify the size of the liver and any other palpable organs or masses
- Percuss
- Palpate the femoral pulses, compare to radial pulses
- Palpate the lymph nodes

Back

- Inspect skin and thoracic configuration
- Inspect symmetry of shoulders, musculoskeletal development
- Inspect and palpate scapula and spine, percuss spine.
- Palpate and percuss costovertebral angle
- Palpate spine

Lungs

- Inspect respiration: excursion, depth, rhythm, and pattern
- Palpate for expansion and tactile fremitus
- Palpate scapular and subscapular nodes

- Percuss posterior chest and lateral walls systematically for resonance
- Percuss for diaphragmatic excursion
- Auscultate systematically for breath sounds. Note characteristics and adventitious sounds

Upper Extremities

- Inspect arms for movement, size, shape; observe use of the hands; inspect hands for number and configuration of fingers and palmar creases
- Palpate radial pulses
- Elicit biceps and triceps reflexes when child cooperates
- Take blood pressure at this point or alter depending on the child's attitude

Lower Extremities

- Inspect legs for movement, shape, size, alignment, and lesions
- Inspect feet for alignment, longitudinal arch, and number of toes
- Palpate dorsalis pedis pulse
- Elicit plantar reflex and, if cooperative, the Achilles and patellar reflexes

Musculoskeletal

- Observe patient moving from lying to sitting position
- Note coordination, use of muscles, ease of movement

Spine

- Inspect and palpate spine as the child bends down slowly forward to touch toes
- Observe posture from anterior, posterior, and lateral views
- Test range of motion: flexion, hyperextension, lateral bending, rotation of upper trunk
- Observe gait