Hey there, friend!

I know that learning the nursing assessment can be daunting.

To be honest, I had no idea what a nursing assessment even was when I started nursing school.

So if you’re like me, and are a little (read: a LOT) nervous to assess patients at clinical, I’m here to help!

This cheat sheet will walk you through the general survey and everything you need to be assessing when you first walk into your patient’s room.

Here’s what’s included:

1. What is the General Survey?
2. Assessment questions to ask yourself
3. Assessment questions to ask your patient
4. Things to look for
5. General survey checklist (for you to take to clinical!)

And if you need more help with nursing fundamentals, be sure to check out this playlist on YouTube.

All my best,
Christina
General Survey (Nursing Assessment) Cheat Sheet

WHAT IS THE GENERAL SURVEY?

The general survey is your first impression of the patient. This includes data like their appearance, mental status, behavior, mood, pain level, speech, mobility and body type.

Here is a list of things to do during the general survey. The following page includes a checklist for you to go through during clinical.

Assessment questions to ask yourself

1. Are they easily awakened?
2. Is the patient well groomed?
3. Do they look older/younger/or about the same as their stated age?
4. Is their face symmetrical?
5. Are they responding appropriately?
6. Is their speech delayed or stuttered?
7. Are they calm or agitated?
8. Are they thin or overweight?

Assessment questions to ask the patient

1. Can you tell me your name?
2. Can you tell me where you are right now?
3. Can you tell me what day it is?
4. What brought you into this facility?
5. What’s your pain level?
6. What’s the quality and location of your pain?
7. How do you normally get around (cane, front wheel walker, independently, etc.)?

Things to look for

1. Is the patient safe in the position they’re in?
2. Do they have IV fluids running?
3. Look at how many mL are left (think ahead to when you’ll need to grab a new bag of fluids).
4. Is their bed alarm on?
5. How many rails are up on the bed?
6. What’s their bedside table look like?
7. How many mL of juice did they drink since documented last?
8. Is there anything in front of them that shouldn’t be (cigarettes, thin liquids if they are on a nectar thick diet, etc.)?
### GENERAL SURVEY CHECKLIST:

#### Appearance
- □ Deviation from stated age
- □ Gender
- □ Race
- □ Facial symmetry
- □ Hygiene

#### Mental Status
- □ Easily awakened
- □ Response
- □ Aware of person, place, time, and situation

#### Behavior/Mood
- □ Calm, agitated, anxious, compliant, etc.

#### Pain
- □ Pain rating
- □ Location
- □ Quality
- □ Precipitating factors
- □ Palliative factors
- □ When did it start

#### Speech
- □ Clear, delayed, stuttered, slurred, mumbled

#### Mobility
- □ Ticks or tremors
- □ Range of motion
- □ Use of assistive devices

#### Body Type
- □ Thin, overweight, weight appropriate for height

#### Room Observations
- □ Safety
- □ Bedside table assessment
- □ IV fluids
- □ Call light, rails, bed lowered

---

**LEGAL DISCLAIMER:** This study guide is intended for educational purposes only. This is not medical advice and errors may occur. Never treat a patient or make a nursing or medical decision based solely on the information provided in this video. Never practice nursing or medicine unless you have a proper license to do so.