

## Cardiac Examination Checklist

Instructions: *Italicized information indicates what the student should be verbalizing.*

	Performed	Verbalized
<b><i>Washes hands FIRST and dons appropriate personal protective equipment.</i></b>	Y / N	
<b><i>Introduces self to patient using first and last name, including role.</i></b>		Y / N
<b>Notes general appearance and vital signs.</b>		Y / N
<b>Positions table appropriately (table should be flat).</b>	Y / N	
<b>Patient is supine with 30° elevation of head unless otherwise stated.</b>	Y / N	Y / N
<b>Inspection</b>		
1. Inspect for jugular venous pressure (JVP) and carotid pulsations <i>Performed if JVD is present or suspected. Ask patient to turn head slightly away and use tangential lighting to inspect JVP bilaterally.</i>	Y / N	Y / N
2. Note point of maximal impulse (PMI) using tangential lighting, and inspect for abnormal pulsations <i>Remove patient's gown enough to be able to see anterior chest.</i>	Y / N	Y / N
<b>Palpation</b>		
1. Measure JVP <i>Ruler is placed vertically at the sternal angle; another straight object is placed at a right angle so the lower edge rests at the top of the jugular pulsations.</i>	Y / N	Y / N
2. Assess amplitude of carotid pulse, and feel for thrills <i>Use first two fingers to palpate carotid over lower 1/3 of neck--each side separately.</i>	Y / N	Y / N
3. Palpate the PMI and note its location, amplitude and duration <i>Palpate at the midclavicular line at the level of the 4th and 5th intercostal spaces [below the nipple around the level of the bra line]. Feel the impulse with one fingertip. If not felt supine, try left lateral decubitus position.</i>	Y / N	Y / N
4. Palpate for heaves, lifts, and thrills. Palpate the pulmonic area/left 2nd interspace to assess pulmonic artery impulse <i>Left edge of the sternum about 2" inferior to the clavicle.</i>	Y / N	Y / N
5. Palpate the aortic area/right 2nd interspace to assess the aortic arch for pulsations <i>Right edge of the sternum about 2" inferior to the clavicle.</i>	Y / N	Y / N
6. Palpate at the left sternal border in the 3rd–5th interspaces to assess systolic impulse of the right ventricle <i>Locate the correct interspaces. The 4th–5th interspace is at the level of the xyphoid. Then feel with fingertips at the same time in the three interspaces.</i>	Y / N	Y / N

	Performed	Verbalized
<b>Percussion</b>		
1. Percuss to determine the left border of cardiac dullness if PMI is not palpable <i>Percuss medially from area of resonance well left of midclavicular line to the start of cardiac dullness.</i>	Y / N	Y / N
<b>Auscultation</b>		
1. Listen for carotid bruits <i>Ask patient to hold breath.</i>	Y / N	Y / N
2. Auscultate with the diaphragm in the aortic (second intercostal space and right border) and pulmonic areas (2nd interspace and left sternal border), then Erbs point along the left sternal border and 3rd. intercostal space and 5 <sup>th</sup> intercostal space at the apex. 5th interspaces) and at the apex.	Y / N	Y / N
Note timing, intensity, and any splitting of S <sub>1</sub> or S <sub>2</sub> Note where S <sub>1</sub> or S <sub>2</sub> are best heard <i>Start 2" below clavicle at right and left sternal edge, continue along left sternal edge to level of the bra line, and finish at the 4th–5th interspace around midclavicular line.)</i>	Y / N	Y / N
3. Auscultate with the bell at the apex and along the left sternal border at the 4th and 5th interspaces (Tricuspid). Note any murmurs <i>Start at the 4th–5th interspace around midclavicular line on the left side and finish at the right sternal edge.</i>	Y / N	Y / N
4. Auscultate with bell at apex in left lateral decubitus position to listen for S <sub>3</sub> , S <sub>4</sub> , and the murmur of mitral stenosis <i>Ask patient to roll partly onto the left side.</i>	Y / N	Y / N
5. Auscultate with the diaphragm along the left sternal border and the apex with patient leaning forward/exhaling, listening for aortic murmurs <i>Listen along left sternal border and at the apex.</i>	Y / N	Y / N
6. Note rate, rhythm, and any extra sounds (S <sub>3</sub> , S <sub>4</sub> , systolic or diastolic sounds, or murmurs)	Y / N	Y / N

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