

Tikrit University

College of Nursing

Basic Nursing Sciences



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Health assessment and physical examination

(Assessment of the head, face & neck)

by:

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Assessment of Head and Neck

Subjective Data

- Headaches
- Head injury
- Dizziness
- Neck pain, limitation of motion
- Lumps or swelling
- History of head or neck surgery

Subjective Data

Headaches

- **Timing:** (onset, duration, frequency)
- **Location:** (frontal, temporal, behind eyes, like a band around the head, in the sinus area, or in the occipital area).
 - Tension headaches: tend to be occipital, frontal, or with bandlike tightness.
 - Migraines headaches (vascular): supraorbital, or frontotemporal.
 - Cluster headaches: pain around eye, forehead, cheek.
- **Quality-** Character: throbbing (pounding, shooting)- migraine headaches.
- **Severity** (mild, moderate, or severe)
- **Medications-** contraceptives, bronchodilators, nitrates produce headaches.
- **Associated factors** (nausea & vomiting, vision changes, neck pain, stomach problem)
- **Aggravated and relieving factors**
- **Effort to treat & coping strategies**

Head Injury

- Onset
- Setting: were you wearing a helmet or hard hat
- Before injury: dizzy, lightheaded, seizure

- After injury
- Location: where did you hit your head
- Discharge from nose and mouth
- History of illness
- Associated symptoms
- Effort to treat

Dizziness

- Determine exactly what the person means by dizziness. Was it (feelings of lightheaded, swimming sensation, feeling of falling) or spinning sensation (Vertigo).

Neck Pain

- Onset
- Location
- Associated symptoms
- Precipitating factors
- **Lumps or swelling in neck**
- Any recent infection? Any tenderness? acute infection.
- Any difficulty swallowing (Dysphagia)?
- Do you smoke? Increase risk of respiratory & oral cancer.
- Ever had a thyroid problem?

Hx of head and neck surgery

Inspection of Head and Face- Objective Data

➤ **Inspect and Palpate the Skull**

- Size and Shape:** To assess the shape: palpate the scalp
 - Head size and shape vary with ethnicity.

- The skull normally feels symmetric, smooth, round, normocephalic with no visible lesions.
- **Normocephalic:** a round symmetric skull that is appropriately related to body size.
- Deformities include: **Microcephaly** (small head), **Macrocephaly** (abnormal large head).

Objective data-Palpate the Temporal area

Palpate the Temporal Artery

- Normal Findings: temporal artery is elastic and nontender.
- Abnormal Findings: artery feels hardened, thick, tortuous, and tender (seen with inflammation [temporal arteritis])

Palpate the Temporomandibular Joint

- Normal Findings: smooth movement, no limitation or tenderness.
- Abnormal Findings: crepitation, limited ROM, tenderness.

Inspect & Palpate the Neck- Objective data

Symmetry:

- Normal Findings: head position is centered in the midline & held erect, symmetrical accessory muscles
- Abnormal Findings : Head tilt-with muscle spasm, rigid head & neck occur with arthritis.

Range of Motion (ROM):

- Normal Findings: motion is smooth and controlled.
- Abnormal Findings : pain at any movement, limited movement from cervical arthritis, Arthritic neck rigid
- Test muscle strength & carotid artery pulsation.
- Note enlargement of the salivary and thyroid glands

Inspection of Head and Face- Objective Data

➤ Inspect the Face

❑ Facial Structures:

- Facial structures vary somewhat among races
- Normal Findings: Symmetric (eyebrows, palpebral fissures, nasolabial folds & sides of the mouth).
- Abnormal Findings: asymmetry (central brain lesion or cranial nerve VII damage).
- Exophthalmos, pigmentation, periorbital edema, involuntary movements (tics) or excessive blinking.

Inspect & Palpate the Neck- Objective data

❑ Lymph Nodes:

- Use gentle pressure & palpate with both hands
- If any nodes are palpable, note their location, size, shape, mobility, consistency, tenderness.
- Normal Findings: the salivary glands are not palpable, lymph nodes; soft, discrete, nontender, movable.
- Abnormal Findings : lymphadenopathy is enlargement of lymph nodes larger than > 1 cm due to infection, allergy, or neoplasm.

❑ Lymph Nodes:

- 1- **Preauricular**: in front of the ear
- 2- **Posterior auricular**: superficial to the mastoid process
- 3- **Occipital**: at the base of skull
- 4- **Submental**: midline behind tip of mandible
- 5- **Submandibular**: halfway between tip & angle of the mandible
- 6- **Jugulodigastric**: under the angle of the mandible
- 7-**Superficial cervical**: overlying the sternomastoid muscle

8- **Deep cervical:** deep under the muscle

9- **Posterior cervical:** in the posterior triangle along the edge of the trapezius muscle

10- **Supraclavicular:** just above and behind the clavicle

❑ **Trachea:**

- Normal Findings: the trachea is midline, the space symmetric on both sides.
- Abnormal Findings :
 - Trachea is shifted toward the affected side; e.g., Atelactasis, Pleural adhesions, or Fibrosis
 - Trachea is pushed to the unaffected (healthy) side (e.g., Pneumothorax, Aortic aneurysm, tumor, & unilateral thyroid lobe enlargement)

❑ **Thyroid Gland**

- Anterior approach (thumbs are used in palpation).
- Posterior approach (fingers of one hand are used to palpate while fingers of the other hand push the thyroid against the other hand).
- Normal Findings: Normally the thyroid glands are not palpable.
- If palpable, check consistency, symmetry, enlargement, tenderness, presence of nodules.
- If thyroid gland is enlarged, auscultate it for a bruit (present with hyperthyroidism).
 - **Bruit:** soft, pulsatile, blowing sound
 - Heard best with the bell of stethoscope.
- Abnormal Findings : enlarged lobes that are easily palpated before swelling, or are tender to palpate , or presence of nodules or lumps.