

FOCUSED SPINE ASSESSMENT

- 1) Person: Is the patient reliable, alert and oriented, without significant distracting injuries?
- 2) Body: Can the patient move and feel all extremities. Are they absent from numbness, tingling, radiating pain, or uncommon sensations?
- 3) Spine: Is the spine free from pain? Does the patient voluntarily move?

MEDICAL HISTORY: S.A.M.P.L.E.

Signs & Symptoms	
Allergies	
Medications	
Pertinent History	
Last Ins & Outs	
Events Prior	

PAIN ASSESSMENT: O.P.Q.R.S.T.

Onset: Slow or fast?	
Provokes: What makes it better or worse?	
Quality: Sharp, dull, stabbing, etc.	
Radiation: Does the pain radiate?	
Severity: On a scale of 1-10, how bad is the pain?	
Time & Trends: When did it start?	

4. Vital signs: Pay attention to trends

Time	Pulse	Respiratory	Blood Pressure	Skin Signs	L.O.R

5. Document, plan, monitor & anticipate problems

Assessment: What are the current problems?	
Plan: How will you address these problems?	
What future problems do you anticipate?	