## OSCE Checklist: Hydration Status Assessment

### Introduction

1. Wash your hands and don PPE if appropriate
2. Introduce yourself to the patient including your name and role
3. Confirm the patient’s name and date of birth
4. Briefly explain what the examination will involve using patient-friendly language
5. Gain consent to proceed with the examination
6. Adjust the head of the bed to a 45° angle and position the patient lying down
7. Ask the patient if they have any pain before proceeding with the clinical examination

### General inspection

8. Inspect the patient from the end of the bed whilst at rest, looking for clinical signs suggestive of underlying pathology
9. Look for objects or equipment on or around the patient that may provide useful insights into their medical history and current clinical status

### Hands

10. Inspect the hands for relevant clinical signs
11. Assess and compare the temperature of the hands
12. Assess peripheral capillary refill time
13. Assess skin turgor

### Pulses and blood pressure

14. Palpate the patient’s radial pulse and assess rate/rhythm
15. Palpate the patient’s brachial pulse and assess character
16. Measure the patient’s blood pressure

### Jugular venous pressure

17. Measure the patient’s jugular venous pressure

### Face

18. Inspect the eyes for signs relevant to the patient’s fluid status
19. Inspect the mouth for signs relevant to the patient’s fluid status

### Chest

20. Calculate the patient’s respiratory rate
21. Assess central capillary refill time
22. Auscultate the patient’s heart sounds
23. Auscultate the patient’s lungs
<table>
<thead>
<tr>
<th>Abdomen</th>
<th>Oedema</th>
<th>To complete the examination...</th>
</tr>
</thead>
<tbody>
<tr>
<td>24 Position the patient lying flat on the bed, with their arms by their sides and legs uncrossed for abdominal inspection</td>
<td>27 Assess for sacral oedema</td>
<td>29 Explain to the patient that the examination is now finished</td>
</tr>
<tr>
<td>25 Inspect the patient's abdomen for signs suggestive of hypervolaemia</td>
<td>28 Assess for pedal oedema</td>
<td>30 Thank the patient for their time</td>
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<tr>
<td>26 Assess for shifting dullness if ascites is suspected</td>
<td></td>
<td>31 Dispose of PPE appropriately and wash your hands</td>
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<td>32 Summarise your findings</td>
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<td>33 Suggest further assessments and investigations (e.g. blood pressure, full blood count, urea and electrolytes, further imaging, accurate fluid balance, urine and serum osmolality)</td>
</tr>
</tbody>
</table>

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