



Queensland Government

Neurovascular Observation Chart – Lower Limb

Facility: *Couni Hospital*

Left Right

Affix patient identification label here

URN: *45678*

Family Name: *Richards*

Given Names: *Jo*

Address:

Date of Birth: *01 JAN 1970* Sex: M F I

Date	<i>xx/xx/xx</i>
Time	<i>0800</i>

Pain Score Please tick: <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Faces Pain Scale – Revised <input type="checkbox"/> FLACC	10	
	9	
	8	
	7	
	6	
	5	
	4	•
	3	
	2	
	1	
	0	

Sensation Peroneal Nerve dorsal surface Tibial Nerve plantar surface A = Absent P = Pins and needles / fuzzy / numb M = Moves to touch N = Normal	Peroneal	A	
		P	
		M	
		N	•
	Tibial	A	
		P	
		M	
		N	•

Movement Peroneal Nerve dorsiflexion Tibial Nerve plantarflexion 4 = Passive movement with pain 3 = Active movement with pain 2 = Passive movement without pain 1 = Active movement without pain	Peroneal	4	
		3	
		2	•
		1	
	Tibial	4	
		3	
		2	•
		1	

Pulses A = Absent W = Weak S = Strong Dorsalis pedis Posterior Tib.	D.P	A	
		W	
		S	•
	P.T	A	
		W	
		S	•

Capillary Refill 4 = 4+ sec 3 = 3 sec 2 = < 2 sec	4	
	3	
	2	•

Warmth Cold Cool Hot Warm	
	•

Colour Dusky Pale Pink	
	•

Swelling L = Large M = Moderate S = Small N = Nil	L	
	M	
	S	•
	N	

Ooze L = Large M = Moderate S = Small N = Nil	L	
	M	
	S	
	N	•

Date	Time	Prescribed alteration to parameters	Signature	Designation
<i>xx/xx/xx</i>	<i>0800hrs</i>	<i>Nil</i>	<i>[Signature]</i>	<i>mo</i>

INSTRUCTIONS FOR USE: Refer to CHS NS 00253 Considerations for Paediatric Observations for instructions.
 Source: All images property of Lady Cilento Children's Hospital, Queensland Health.

DO NOT WRITE IN THIS BINDING MARGIN

NEUROVASCULAR OBSERVATION CHART – LOWER LIMB

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Mat. No.: 10317311



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