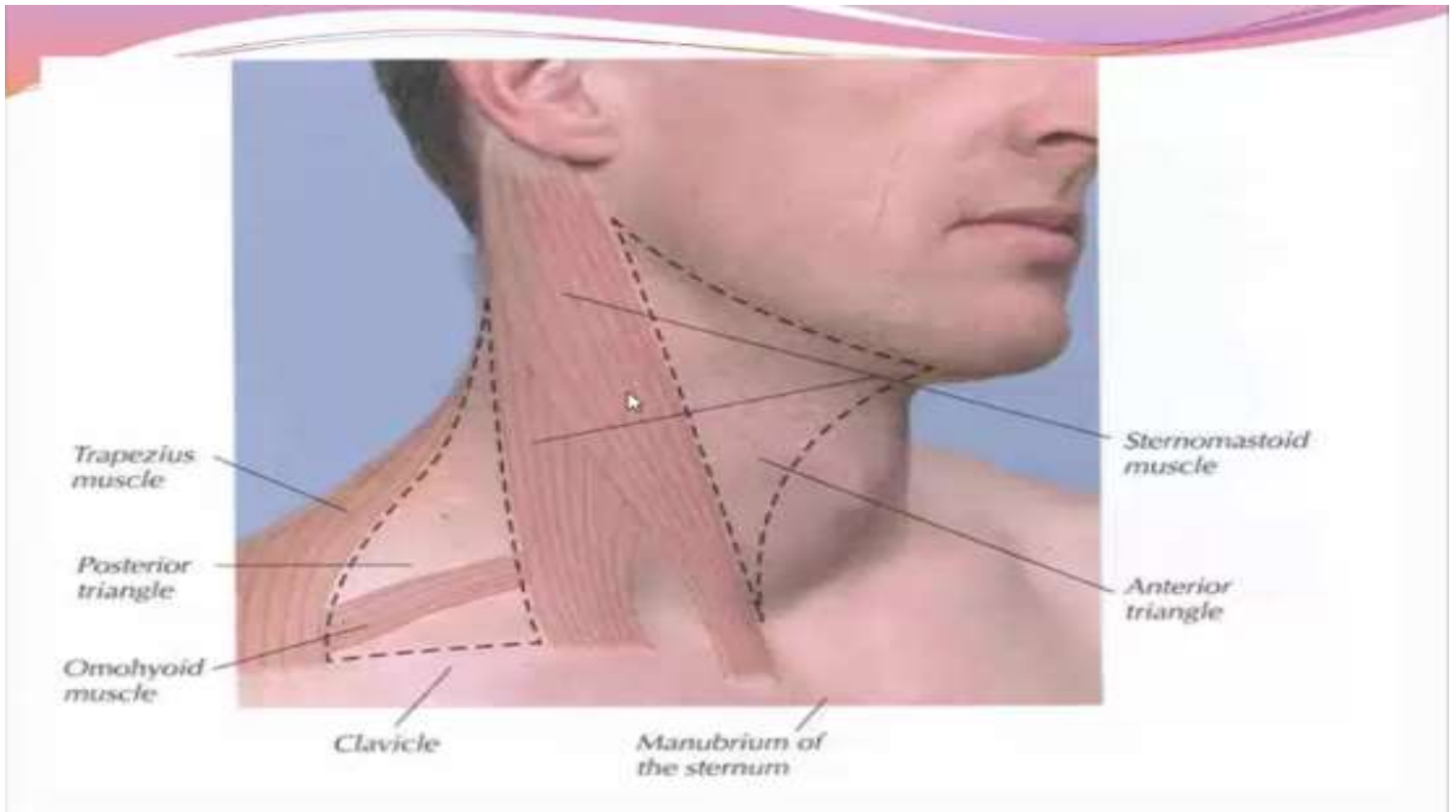
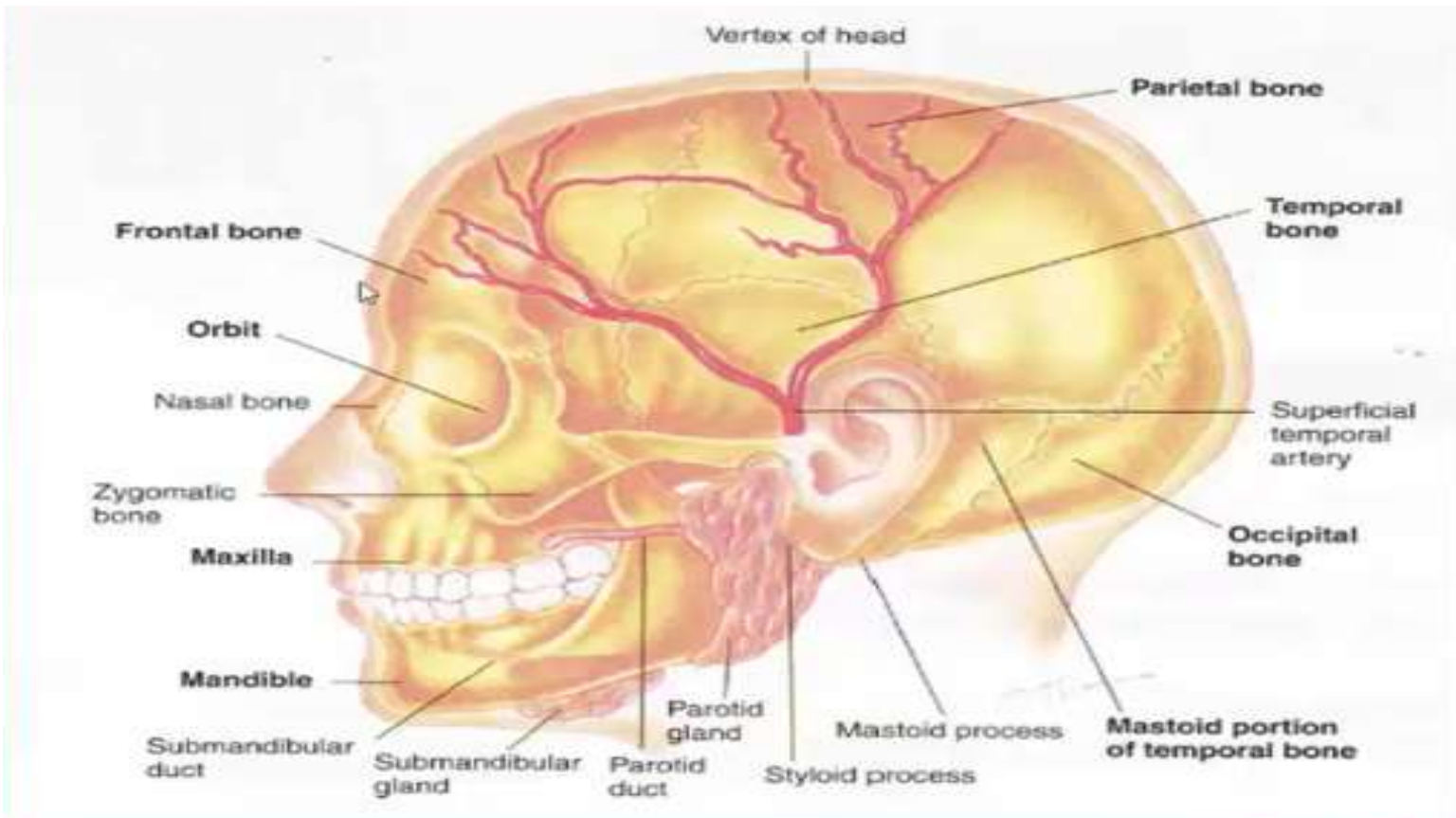
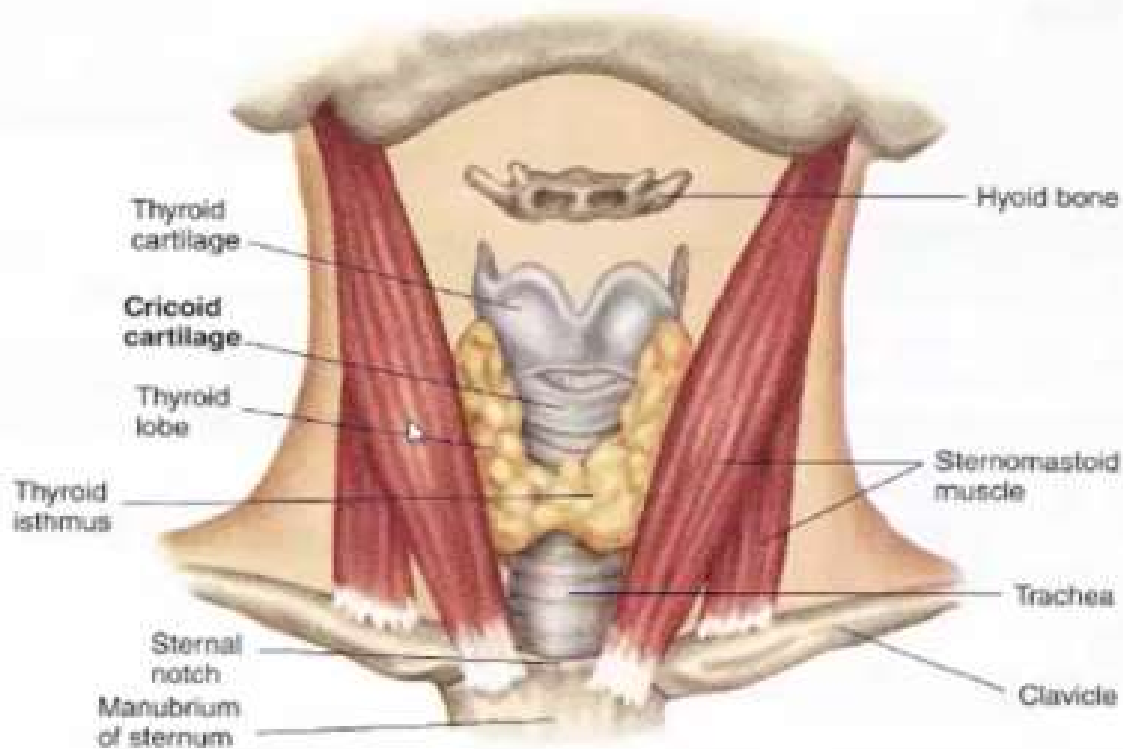


# Head and Neck





<p><b>Current symptoms</b></p>	<p>Have you noticed any bumps or lesions on your head or neck that don't heal or disappear ? Explain</p>	<p>Lump and lesions that don't heal or disappear may indicate cancer</p>
	<p>Do you have any difficulty moving your head or neck</p>	<p>Disease and disorders Involving head and Neck muscles may limit mobility and affect daily functioning</p>

<p>Do you experience neck pain ? Describe</p>	<p>Neck pain may Accompany muscular Problems or cervical spinal cord problems</p>
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Do you experience headaches ? Describe	A precise description of the symptoms can help determine possible causes of discomfort
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Have you experienced any dizziness ,spinning ,lightheadedness or loss of consciousness ? Explain	Symptoms imply risk for injury
Have you noticed a change in the texture of your skin ,hair or nail and changes in your energy level ,sleep habit or emotional stability	An increase in the thyroid hormone production can result in insomnia, thinning hair ,palpation ,weight loss

Past History	Describe any previous head or neck problems you have had	Previous head and neck cancer in your family cause chronic pain and-limitation in movement
Family History	Is there history of head and neck cancer in your family	Genetic predisposition is a risk factor for head and neck cancer

Life Style and health practice	Do you smoke or chew tobacco	Tobacco use increase the risk of head and neck cancer
	Do you wear a hard hat for hazardous occupation	Failure to use safety precautions increases the risk for head and neck injury

	The head and face inspection	
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Inspect the head size ,shape and configuration and involuntary movement	The head is symmetric round ,erect and in midline - No lesions are visible -Head should be held still and up right	The skull and facial are larger and thicker in <b>acromegaly</b> ,which occurs when there is an increased production of growth hormone
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- Tremors associated with neurologic disorders
- Head tilted to one side may indicate unilateral vision or hearing deficiency or shortening of the sternomastiod muscle

Palpate the head to assess consistency	Hard and smooth without lesions	Lesions and lumps may indicate recent trauma or cancer
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Inspect the face Symmetry features movement expressions and skin condition	Symmetric with round ,oval ,elongated or square appearance -No abnormal movement
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**ROUND**



**SQUARE**



**HEART SHAPED**



**OVAL**



**LONG**

- Asymmetry in front of the earlobes occurs with parotid gland enlargement
- Unusual or a symmetrical movement may form an organic or neurological problem

Palpate the temporal artery	temporal artery is elastic and not tender	the temporal artery is hard thick and tender with inflammation as in temporal arteritis
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Palpate the temporomandibular joint( T.M.J)	There is no swelling Tenderness or crepitation with movement	Limited range of motion, swelling, Tenderness and crepitation with crepitus may indicate <b>TMJ syndrome</b>
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	The neck	
Inspect the neck	Neck is symmetric with head centered and without bulging	Swelling enlarged masses or nodules may indicate an enlarged thyroid gland .inflammation of lymph nodes or tumor
Inspect Movement of the neck Structures	Thyroid gland move upward symmetrically as the client swallows	Asymmetric movement or generalized enlargement of the thyroid gland
Inspect the cervical vertebrae	C7 (vertebra prominence) is usually visible and palpable	Prominence or swelling other than the C7 vertebrae may be Abnormal

Inspect the neck movement Range of motion	Neck movement should be smooth and Neck controlled with 45 Range of degree flexion ,55 Motion degree extension 40 degree lateral abduction and 70 degree rotation	Stiffness rigidity and limited mobility of the neck from muscle spasm ,inflammation or cervical arthritis
Palpate the trachea	trachea is midline	the trachea may be pulled to one side in case of tumor ,thyroid gland enlargement
Palpate the thyroid gland	Land marks are positioned midline Usually not palpable unless the client is extremely thin with a long neck	Landmarks deviated from midline or are obscured because of masse or abnormal growth An enlarged ,tender gland may result from thyroiditis
Auscultation an enlarged thyroid gland	No bruits are Auscultation	A soft ,blowing ,swishing sound Auscultation over the thyroid lobes is often heard in hyperthyroidism

Lymph Nodes of the Head and Neck	
Pre auricular nodes in front of the ear Post auricular nodes in behind the ear -Occipital nodes at the angle of mandible Submandibular nodes located at the medial border of the mandible	All normally No swelling or enlargement or hardness and tenderness
Sub mental nodes few cm behind the tip of the mandible -Superficial cervical nodes in the area superficial to the stern mastoid muscle Posterior cervical nods - deeply within and around the stern mastoid muscle- Supraclavicular nodes - deeply between the clavicles and the sternomasted muscles	An enlarged ,hard ,non tender nodes specially in the left side may indicate metastasis from a malignancy in the abdomen or chest

Nursing Consideration While palpating the lymph nodes ,note the following:

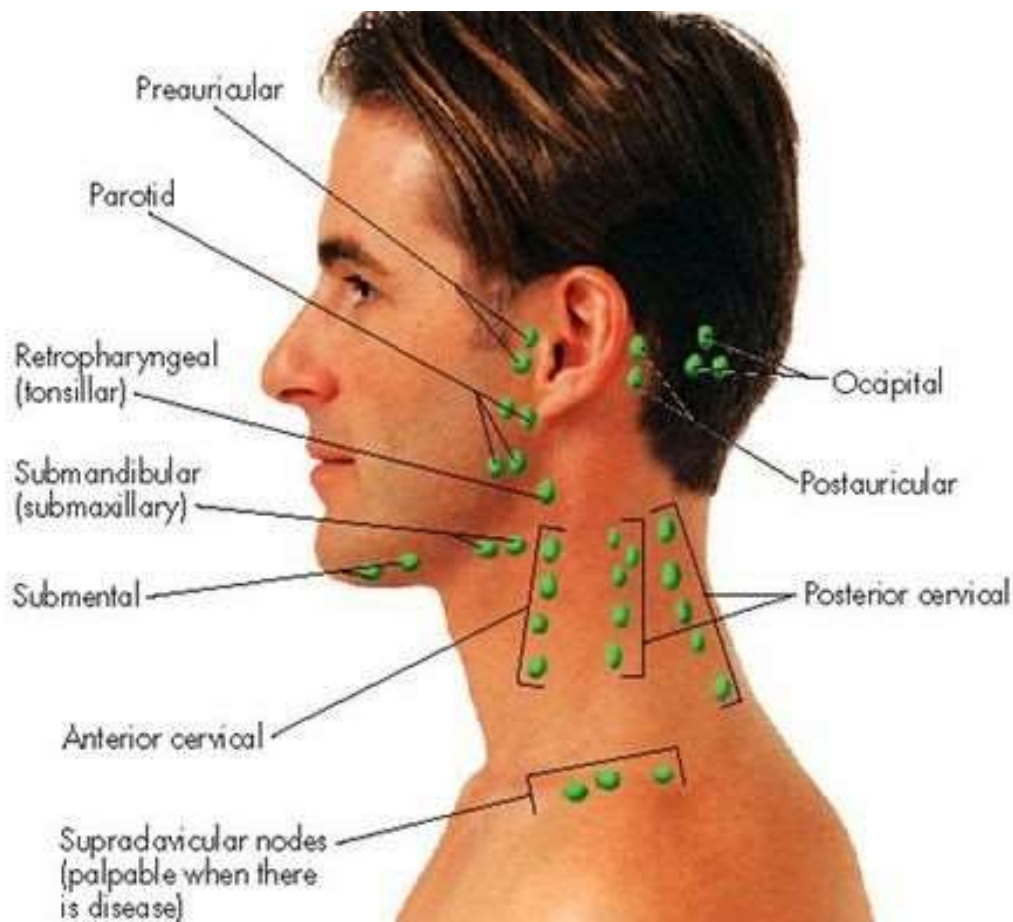
1-Size and shape

2- Delimitation

3-Mobility

4- Consistency

5-Tenderness and location



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