

Shadow Health will undergo maintenance starting on Saturday, April 4th at 1:00 AM CST until Saturday, April 4th at 9:00 AM CST. During this time Shadow Health may be inaccessible.

Gastrointestinal Results | Turned In

Advanced Health Assessment - STU - August 2023, nur504ap4

[Return to Assignment \(/assignments/867640/\)](#)



Your Results

Lab Pass (/assignment_attempts/15154906/lab_

Overview

[Transcript](#)

[Subjective Data Collection](#)

[Objective Data Collection](#)

[Education & Empathy](#)

[Documentation](#)

[Video Tutorial](#)

Experience Overview

Patient: Tina Jones



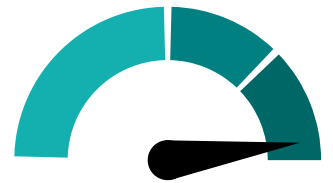
Digital Clinical Experience Score

98.1%

This score measures your performance on the Student Performance Index in relation to other students in comparable academic programs. Your instructor has chosen to scale your Student Performance Index score so that the average score on the index is a 84.0%. This score may not be your final grade if your instructor chooses to include additional components, such as documentation or time spent.

Student Performance Index

52 out of 53



Proficiency Level: **Proficient**

Beginning

Developing

Proficient

Students rated as "proficient" demonstrate an expertise in advanced practice competencies and reasoning skills. In comparable programs, the top students perform at the level of a proficient practitioner.

Subjective Data Collection

31 out of 31

Objective Data Collection

18 out of 18

Education and Empathy

3 out of 4

Time

72 minutes total spent in assignment

Interaction with patient

72 minutes

Comments

If your instructor provides individual feedback on this assignment, it will appear here.



About Shadow Health (<https://evolve.elsevier.com/education/simulations/shadow-health/>)

Terms and Conditions (<https://www.elsevier.com/legal/elsevier-website-terms-and-conditions/elsevier-terms-and-conditions-for-personal-https://www.elsevier.com/>)

Privacy Policy (<https://www.elsevier.com/legal/privacy-policy>)

Accessibility (https://service.elsevier.com/app/answers/detail/a_id/34675/supporthub/shadow-health/)

Support and Contact (<https://service.elsevier.com/app/home/supporthub/shadow-health/>) Patents (</static/patents>)

Cookies are used by this site. [Cookie Settings](#).

Copyright © 2026 Elsevier Inc., its licensors, and contributors. All rights are reserved, including those for text and data mining, AI training, and similar technologies.

Shadow Health will undergo maintenance starting on Saturday, April 4th at 1:00 AM CST until Saturday, April 4th at 9:00 AM CST. During this time She may be inaccessible.

Gastrointestinal Results | Turned In

Advanced Health Assessment - STU - August 2023, nur504ap4

[Return to Assignment \(/assignments/867640/\)](#)



Your Results

Lab Pass (/assignment_attempts/15154906/lab_

[Overview](#)

[Transcript](#)

[Subjective Data Collection](#)

[Objective Data Collection](#)

[Education & Empathy](#)

[Documentation](#)

[Video Tutorial](#)

Transcript

Started: Sep 16, 2023 | Total Time: 72 min

All Lines (127) Interview Questions (115) Statements (12) Exam Actions (0)

	Hi my name is Yndia I will interview you and later do a physical exam.	09/16/23 9:42
	Hey.	
	What is your name?	09/16/23 9:42
	Tina Jones.	
	What's your date of birth?	09/16/23 9:42
	February 17th.	
	How old are you?	09/16/23 9:42
	I'm 28.	
	What brings you to the clinic today?	09/16/23 9:42
	I've been having this stomach pain for awhile. It keeps coming back, and it really is starting to bother me.	
	Sorry to hear that you are feeling bad	09/16/23 9:42
	Thanks for saying that.	



When did the pain start?



Probably at least a month ago. Maybe longer. It started out really minor so it took me awhile to realize it was getting bad.



Where is the pain located?



It's like... my upper stomach. Like right below my breastbone, in the middle.



Describe how the pain feels



Um, it feels like heartburn. But sometimes, if it's bad, it's sharper than that.



Does the pain increase



Yeah, it's getting worse over time. I get these stomach pains every day.



How many times a week have you been having issues with abdominal pain?



Every time I eat it hurts a little, but 3 or 4 times a week, it'll be a lot worse.



Do you have abdominal pain everyday?



Yeah, I've had stomach pain for awhile now.



When did the abdominal pain begin?



Probably at least a month ago. Maybe longer. It started out really minor so it took me awhile to realize it was getting bad.



How long does the pain last?



For a few hours after I eat.



Can you rate your current pain level on a scale of 0 to 10?



Right now, it's like a 1 or 2. But after I eat, it's like a . . . 5?



Is the pain crushing?



No.



Is the pain gnawing? (No matching questions found.)



Is it like a cramping pain



No, it's not like stomach cramps.



Where is the pain located?



It's like... my upper stomach. Like right below my breastbone, in the middle.



On what side of the your stomach is the pain located?



No, it's right in the center of my stomach, like between my belly button and my ribs.



Do you have sharp pain in your lower abdomen?



No, it's not at all like that. It's in the middle of my stomach.



I'm sorry to hear that you're having such pain



Thanks for understanding.



Does your pain occur after eating?



Yes. Every time I eat it hurts. I've been eating less because I don't like being in pain.



Is your pain with larger meal?



Yes, large meals make the pain worse. [AUDIO COMING SOON]



Do you eat spicy food?



Well, I used to eat spicy food sometimes, but in the last few weeks I can't. It makes my stomach pain too bad.



Do you eat lots of fatty food?



Not too much. I mean, I like French fries and stuff, but I try not to eat them too often.



French fries are considered fatty food try to cut down on them



Alright, thanks for letting me know.



Is your pain worse when you bend over?



Yeah. It gets worse when I bend over -- I noticed that at work.



Sorry to hear that



I appreciate you saying that.



Does it hurt when you lie flat?



Yeah.



Try not to bend over at work



That makes sense.



Does the pain improve when you sit up?



Usually, yeah.



Any decrease in appetite?



Yeah, I haven't been wanting to eat lately.



It's important that you eat at least three meals a day.



Sure, I think I understand what you mean.



Do you eat out a lot?



I try not to eat out too much, but with my schedule I end up having to.



Have you been eating smaller meals than usual?



Yeah, I've been trying to eat really little meals. I haven't been that hungry, and I don't want to have the pain of eating a big meal.



Have you been burping more than usual?



Yeah, that's been happening after I eat.



What makes your pain better



I feel the best in-between meals. And sitting up on the couch seems to help. And sometimes I take an antacid.



Sitting up position help prevent stomach acid from coming up in the esophagus



OK, I understand.



What is the name of the antacid



I take the chewable Tums.



How many trouble terms do you take in a day (Clarified to How many tums do you take in a day?.)



I start with two, and then I chew a couple more if I need to. The bottle says you can have up to four. (Clarified to how many Tums I take in a day.)



Do the terms relieve your pain (No matching questions found.)



Do the tums relieve your pain



Yeah, they help. I try to only take them when the pain seems worse than usual.



Does the pain change



Yeah, it's getting worse over time. I get these stomach pains every day.



Does the stomach pain comes with nausea and vomiting (Clarified to Does nausea occur with the abdominal pain?.)



No, I don't feel nauseous. (Clarified to if nausea occurs with the abdominal pain.)



Is your abdomen tender



No. My stomach pain's not tender like that.



Any cramping



Yeah, I get cramps pretty bad.



Is your pain associated with gas



I don't think so. I haven't been gassy lately.



Are you passing any gas at all



I've been able to pass gas, but I haven't really been very gassy. [AUDIO COMING SOON]



How is your bowel movement



It's normal, I think. Not hard, and not too, uh, soft or anything.



What do you normally eat for a typical breakfast



I usually have either cereal or toast, or if I pick something up on my way to work, I'll get a muffin or some pumpkin bread.



What do you normally eat for lunch



I usually either make a sandwich and bring it with me, or I get a sandwich somewhere. And I have chips or pretzels with it. Or *maybe* French fries, but I try not to get them too often.



Try to avoid fatty foods such as chips french fry they are not healthy for you and can cause stomach problems



Thanks for telling me.



How often do you eat spicy food



Well, I used to eat spicy food sometimes, but in the last few weeks I can't. It makes my stomach pain too bad.



Yes spicy food what irritate your stomach lining and can cause you to have really bad stomach aches



OK, I understand.



Are you having stomach pain right now



Only a little.



What time of day is your pain worse



I don't think it's a particular time of day. It just hurts the worst right after I eat.



Do you have any allergies



Yeah, I'm allergic to cats.



Do you have gastrointestinal problem



Yeah, I've had stomach pain for awhile now.



Do you have gastrointestinal disease



I don't have like, diseases. But I've had this stomach pain for like, a month.



Have you ever had gastrointestinal surgery



No.



Any past medical history of appendicitis (Clarified to Have you had health problems in the past?.)



Yeah. . . I have asthma and diabetes. (Clarified to if I have had past health problems.)



Have you ever had cholecystitis



Not that I've heard of.



Any history of stomach cancer



No.



Any history of liver disease



No, I've never had any problems with my liver.



Any history of ulcers



No.



Any history of bladder disease



No, I never have.



Do you experience pain during bowel movement (Clarified to Do you have pain when you're having sex?.)



No, I've never had that problem. (Clarified to if I have pain during sex.)



Any bloody or tarry stools



Um, no.



Have you had mucus in your stool



Ew. No.



Any change in your bow pattern (Clarified to Are there changes in your bowel habits?.)



No, everything's been normal in that department. (Clarified to if there are changes in my bowel habits.)



Do you have increased urination



Yeah, but I've been drinking more water.



Drinking water is really good for you it helps with bowel movement and preventing UTIs



Thanks for telling me.



What color is your urine



Um, light yellow or almost clear? The regular color.



Does it hurt during urination



No.



Do you pee a lot at night



Yeah, I definitely get up more than once during the night.



Do you have blood in your urine



I don't think so... My pee hasn't been red or anything.



When was your last period



I think it was just about a month ago.



Do you have stomach pain during periods (Clarified to Do you have menstrual pain?.)



Yeah, I get cramps pretty bad. (Clarified to if my periods are painful.)



Are you sexually active



Um, not right now.



When was your last meal



This morning, I had breakfast at home.



What did you have for breakfast



This morning, I had toast with butter and honey, and some orange juice.



What did you have for dinner yesterday



Last night we had baked potatoes with broccoli and cheese soup on them.



What did you have for lunch yesterday



I had a piece of pizza. It was someone's birthday at work, so they ordered pizza for all of us.



What did you have for breakfast yesterday



I had a small bowl of cereal.



What is your typical diet



It's pretty good, I think. I'm not a huge health nut or anything.



What do you typically have for breakfast on a regular basis



I usually have either cereal or toast, or if I pick something up on my way to work, I'll get a muffin or some pumpkin bread.



How many meals do you usually have per day



I try to eat breakfast, lunch, and dinner. I usually have a snack somewhere in there.



Any alcohol beverages



Not lately, but I do every so often.



How often do you drink



Very rarely.



How many alcohol beverages do you have in one sitting



Never any more than 2 or 3.



Do you drink any sodas



Yeah, I drink diet Coke.



How much water do you typically drink (Clarified to How much water do you drink in a day?.)



Probably... 6 or 8 glasses? I drink a lot of water. (Clarified to how much water I drink per day.)



Have we ever had food poisoning



I've had food poisoning when I was a kid, and this isn't anything like that.



Any recent travels outside of the country



No. I've been here in Shadowville working my butt off!



Do you use any illegal drugs



Well, I used to smoke pot. . . but I don't do that anymore.



When was the last time you smoked pot



I haven't smoked pot since I was twenty or twenty-one.



Do you smoke cigarettes



No, I've never smoked a cigarette in my life.



Great smoking and drugs are not good for you



Sure, I think I understand what you mean.



Are you feeling bloated right now



No, I don't feel bloated.



Do you have any sore throat



No, my throat doesn't hurt.



Any coughs



No, I haven't been coughing.



Any difficulty breathing



Well, I have asthma, but I haven't had much trouble with it. With my inhaler, it's under control.



What do you use to control your asthma



I use a daily inhaler now, twice a day every day, and then I have my rescue inhaler, too, in case my breathing gets bad. Otherwise I just try to avoid things that give me problems, like cats.



Do you have chest pain



No, I'm not having chest pain. The pain I'm feeling is lower, like right in the middle of my torso. . . above my stomach, but below my ribs.



Has your sense of taste change



No, I can taste everything fine.



Any family history of colon cancer



Um, Grandpa Jones died of colon cancer.



I'm very sorry to hear that



Thanks.



Any family history of GERD



No.



What happens when you are around cats



Whenever I'm around cats, I start sneezing, my eyes get itchy. . . and my asthma starts to act up.



Are you allergic to dust



Well. . . I don't know if it's allergies, but sometimes my asthma acts up around dust.



Are you allergic to penicillin



Yes.



What is the name of the inhaler that you use for your asthma



I have a Flovent daily inhaler and a Proventil rescue inhaler.



What is the dosage of your medication (No matching questions found.)



What is the dosage of your medication for your inhaler (Clarified to What is the dosage for the inhaler?.)



Of the Flovent, it's two puffs, twice a day, 110 mcg a spray. For the rescue inhaler, it's two puffs when I need it, which is rare. That one is albuterol, 90 mcg a spray. [AUDIO COMING SOON] (Clarified to what dosage my inhaler is.)



When was the last time you use your inhaler



I used it this morning -- like I do every day. I'm supposed to take it twice a day.



How often do you have a bowel movement



Usually every other day.



Any fevers



No. No fever.



Annie fatigue (No matching questions found.)



Any fatigue



No, I don't feel tired.



Any constipation



I don't have that problem.



Have you lost or gained any weight

Shadow Health will undergo maintenance starting on Saturday, April 4th at 1:00 AM CST until Saturday, April 4th at 9:00 AM CST. During this time She may be inaccessible.

Gastrointestinal Results | Turned In

Advanced Health Assessment - STU - August 2023, nur504ap4

[Return to Assignment \(/assignments/867640/\)](#)



Your Results

Lab Pass (/assignment_attempts/15154906/lab_

[Overview](#)

[Transcript](#)

[Subjective Data Collection](#)

[Objective Data Collection](#)

[Education & Empathy](#)

[Documentation](#)

[Video Tutorial](#)

Subjective Data Collection: 31 of 31 (100.0%)

Hover To Reveal...

Hover over the **Patient Data** items below to reveal important information, including **Pro Tips** and **Example Questions**.

○ Indicates an item that you found.

○ Indicates an item that is available to be found.

Category

Scored Items

Patient Data

Not Scored

Experts selected these topics as essential components of a strong, thorough interview with this patient.

A combination of open and closed questions will yield better patient data. The following details are facts of the patient's case.

Chief Complaint

Established chief complaint

○ Reports frequently occurring stomach pain

History of Present Illness

Asked about onset of pain

○ Reports noticing pain for "at least a month"
○ Reports that pain increased gradually

Asked about frequency of pain

○ Reports pain occurs every day
○ Reports 3 to 4 episodes a week that more severe

Asked about duration of pain

○ Pain begins right after finishing a meal
○ Each episode lasts "a few hours"

-
- | | |
|--|--|
| <input type="checkbox"/> Asked about severity of pain on a scale | <ul style="list-style-type: none">◦ Rates present pain as 1 or 2◦ Rates worst pain after eating◦ Rates pain when supine as a |
|--|--|
-

- | | |
|--|---|
| <input type="checkbox"/> Asked about character of the pain | <ul style="list-style-type: none">◦ Describes the pain as similar◦ Denies crushing pain◦ Denies gnawing pain◦ Denies cramping pain◦ Denies that abdomen is tend |
|--|---|
-

- | | |
|---|---|
| <input type="checkbox"/> Asked location of the pain | <ul style="list-style-type: none">◦ Pain is in center of upper sto◦ Pain does not radiate◦ Denies shoulder pain◦ Denies back pain◦ Denies arm pain◦ Denies flank pain◦ Denies pain on right side of e |
|---|---|
-

- | | |
|--|--|
| <input type="checkbox"/> Asked about aggravating factors | <ul style="list-style-type: none">◦ Pain occurs after eating◦ Pain worsens with larger mea◦ Reports that spicy foods incr◦ Denies high-fat foods as an e◦ Pain worsens when supine◦ Pain worsens when bending |
|--|--|
-

- | | |
|--|---|
| <input type="checkbox"/> Asked about relieving factors | <ul style="list-style-type: none">◦ Pain improves between meal◦ Pain improves when upright |
|--|---|
-

- | | |
|---|---|
| <input type="checkbox"/> Asked about effects of pain on diet and appetite | <ul style="list-style-type: none">◦ Reports decreased appetite◦ Describes not wanting to eat◦ Reports eating smaller meals◦ Reports avoiding spicy foods |
|---|---|
-

- | | |
|--|---|
| <input type="checkbox"/> Asked about increased burping | <ul style="list-style-type: none">◦ Reports burping◦ Burping occurs after eating |
|--|---|
-

- | | |
|--|---|
| <input type="checkbox"/> Asked about changes in weight | <ul style="list-style-type: none">◦ Denies recent weight loss |
|--|---|
-

Medical History

- | | |
|---|--|
| <input type="checkbox"/> Confirmed use of medications | <ul style="list-style-type: none">◦ Confirms medications (no ne◦ Reports occasional antacid u◦ Denies frequent Advil (ibupro |
|---|--|
-

- | | |
|---|--|
| <input type="checkbox"/> Followed up on use of antacids and relieving factors | <ul style="list-style-type: none">◦ Antacid brand is Tums◦ Takes antacids every few day◦ Takes between 2 and 4 antac◦ Reports that antacids offer p |
|---|--|
-

- | | |
|--|---|
| <input type="checkbox"/> Confirmed allergies | <ul style="list-style-type: none">◦ Confirms allergies (no new al |
|--|---|

-
- Asked about past gastrointestinal history
- Denies past history of ulcers
 - Denies gastrointestinal disease
 - Denies past history of GERD
 - Denies past gastrointestinal surgery
 - Denies past history of appendicitis
 - Denies past history of cholecystitis
 - Denies past history of stomach ulcers
 - Denies past history of liver disease
 - Denies past history of kidney disease
 - Denies past history of bladder disease
-

- Asked about typical bowel movements
- Reports bowel movement every day
 - Denies pain during bowel movements
 - Denies bloody or tarry stools
 - Denies mucus in stool
 - Describes consistency of bowel movements
-

- Asked about typical urination
- Reports increased urination
 - Reports urine is a clear or light color
 - Reports nocturia
 - Denies pain during urination
 - Describes urine character as normal
 - Denies pink or bloody urine
 - Denies incontinence
-

- Asked about menstruation and sexual activity
- LMP was 3 weeks ago
 - Denies sexual activity
-

Social History

- Asked about most recent meal
- Most recent meal was breakfast
 - Most recent meal was toast and orange juice
-

- Asked 24-hour diet recall
- Yesterday's breakfast was cereal
 - Yesterday's lunch was pizza
 - Yesterday's dinner was a baked chicken
-

- Asked about typical diet
- Reports typical intake is 3 meals a day
 - Typical breakfast is cereal, bread, and milk
 - Typical lunch is a sandwich and fruit
 - Typical dinner is chicken, a vegetable, and bread
 - Reports fast food intake 3 times a week
 - Typical snack is pretzels, French fries
-

- Asked about typical beverages
- Last alcoholic drink was 2 weeks ago
 - Typical alcohol frequency is 2 times a week
 - Typical alcohol intake is 2 - 3 drinks
 - Reports that alcohol intake is occasional
 - Reports drinking soda
 - Reports drinking 3 - 4 diet coffees

- Reports that she hasn't noticed a connection between soda intake and pain
- Reports drinking 6 - 8 glasses of water a day

Asked about recent dietary and life experiences

- Denies recent travel
- Denies food poisoning

Asked about substance use

- Denies illicit drug use
- Denies cigarette smoking

Social Determinants of Health

Asked about food access

- Reports living near grocery store
- Reports access to fresh food

Review of Systems

Asked about general symptoms

- Denies fever
- Denies chills
- Denies fatigue
- Denies night sweats

Asked about review of systems for mental health

- Reports occasional feelings of anxiety
- Reports feelings of stress

Asked about review of systems for gastrointestinal

- Denies nausea
- Denies vomiting
- Denies diarrhea
- Denies constipation
- Denies flatus
- Denies bloating

Asked about review of systems for respiratory

- Denies sore throat
- Denies coughing
- Denies dysphagia
- Denies difficulty breathing
- Denies chest pain
- Denies palpitations
- Denies change in sense of taste

Family History

Asked about relevant family history

- Reports family history of colorectal cancer
- Denies family history of GERD
- Denies family history of IBS
- Denies family history of cholelithiasis
- Denies family history of liver disease
- Denies family history of kidney disease
- Denies family history of bladder cancer

Shadow Health will undergo maintenance starting on Saturday, April 4th at 1:00 AM CST until Saturday, April 4th at 9:00 AM CST. During this time She may be inaccessible.

Gastrointestinal Results | Turned In

Advanced Health Assessment - STU - August 2023, nur504ap4

[Return to Assignment \(/assignments/867640/\)](#)



Your Results

Lab Pass (/assignment_attempts/15154906/lab_

[Overview](#)

[Transcript](#)

[Subjective Data Collection](#)

[Objective Data Collection](#)

[Education & Empathy](#)

[Documentation](#)

[Video Tutorial](#)

Objective Data Collection: 18 of 18 (100%)

- Correct Incorrect
 Partially correct Missed

Inspected skin turgor

1 of

Observations (1/1 point)

- No tenting
 Tenting

Inspected abdomen

1 of

Symmetry (1/3 point)

- Symmetric
 Asymmetric

Contour (1/3 point)

- Flat
 Rounded
 Protuberant
 Hollowed

Appearance (1/3 point)

- No visible abnormalities
 Rash
 Striae
 Bulging around umbilicus
 Distension
 Visible masses (warts, cysts, or tumors)
 Freckles, birthmark, or discoloration
 Excessive hair growth
 Scarring
 Laceration, lesion or wound
 Bruising

Auscultated breath sounds

1 of

Breath Sounds (1/3 point)

- Present in all areas
- Diminished in some areas
- Absent in some areas

Adventitious Sounds (1/3 point)

- No adventitious sounds
- Wheezing
- Fine crackles
- Stridor
- Rhonchi
- Rales

Location (1/3 point)

- All areas clear
- Adventitious sounds in anterior right upper lobe
- Adventitious sounds in anterior right middle lobe
- Adventitious sounds in anterior right lower lobe
- Adventitious sounds in anterior left upper lobe
- Adventitious sounds in anterior left lower lobe
- Adventitious sounds in posterior right upper lobe
- Adventitious sounds in posterior right lower lobe
- Adventitious sounds in posterior left upper lobe
- Adventitious sounds in posterior left lower lobe

Auscultated heart sounds**Heart Sounds (1/2 point)**

- S1 and S2 audible
- S1, S2, and S3 audible
- S1, S2, and S4 audible
- S1, S2, S3, and S4 audible

Extra Heart Sounds (1/2 point)

- No extra sounds
- Gallops
- Murmur
- Friction rub
- Valve clicks

Auscultated bowel sounds**Sounds (1/2 point)**

- Absent
- Hypoactive
- Normoactive
- Hyperactive

Location Of Non Normoactive Bowel Sounds

- All quadrants normoactive
- Right upper quadrant
- Right lower quadrant
- Left upper quadrant
- Left lower quadrant

Auscultated abdominal aorta**Sound (1/1 point)**

- No bruit
- Bruit

Auscultated renal arteries**Right (1/2 point)**

- No bruit
- Bruit

Left (1/2 point)

- No bruit
- Bruit

Auscultated iliac arteries**Right (1/2 point)**

- No bruit
- Bruit

Left (1/2 point)

- No bruit
- Bruit

Auscultated femoral arteries

Right (1/2 point)

- No bruit
- Bruit

Left (1/2 point)

- No bruit
 - Bruit
-

Percussed abdomen

Observations (1/1 point)

- All areas generally tympanic
 - Some areas dull, some tympanic
 - Some areas resonant
-

Percussed CVA tenderness

Patient Reaction (1/1 point)

- Did not react
 - Pain reaction
-

Percussed spleen

Spleen (1/1 point)

- Tympany
 - Dullness
-

Percussed liver span

Size (1/1 point)

- Smaller than 6 cm
 - Between 6 and 12 cm
 - Greater than 12 cm
-

Palpated abdomen - light

Tenderness (1/3 point)

- None reported
- Tenderness reported

Location Of Tenderness (1/3 point)

- No quadrants tender
- Right upper quadrant
- Right lower quadrant
- Left upper quadrant
- Left lower quadrant

Observations (1/3 point)

- No additional observations
 - Masses
 - Guarding
 - Distension
-

Palpated abdomen - deep

Presence Of Unexpected Mass (1/2 point)

- No palpable mass
- Palpable mass

Location Of Mass (1/2 point)

- No palpable mass
- Right upper quadrant
- Right lower quadrant

- Left upper quadrant
- Left lower quadrant

Palpated liver

Detection (1/1 point)

- Not palpable
- Palpable

Palpated spleen

Detection (1/1 point)

- Not palpable
- Palpable

Palpated kidneys

Right (1/2 point)

- Not palpable
- Palpable

Left (1/2 point)

- Not palpable
- Palpable

Comments

If your instructor provides individual feedback on this assignment, it will appear here.



About Shadow Health (<https://evolve.elsevier.com/education/simulations/shadow-health/>)

Terms and Conditions (<https://www.elsevier.com/legal/elsevier-website-terms-and-conditions/elsevier-terms-and-conditions-for-personal-use>)

Privacy Policy (<https://www.elsevier.com/legal/privacy-policy>)

Accessibility (https://service.elsevier.com/app/answers/detail/a_id/34675/supporthub/shadow-health/)

Support and Contact (<https://service.elsevier.com/app/home/supporthub/shadow-health/>) Patents (</static/patents>)

Cookies are used by this site. [Cookie Settings](#).

Copyright © 2026 Elsevier Inc., its licensors, and contributors. All rights are reserved, including those for text and data mining, AI training, and similar technologies.

Shadow Health will undergo maintenance starting on Saturday, April 4th at 1:00 AM CST until Saturday, April 4th at 9:00 AM CST. During this time She may be inaccessible.

Gastrointestinal Results | Turned In

Advanced Health Assessment - STU - August 2023, nur504ap4

[Return to Assignment \(/assignments/867640/\)](#)



Your Results

Lab Pass (/assignment_attempts/15154906/lab_

[Overview](#)

[Transcript](#)

[Subjective Data Collection](#)

[Objective Data Collection](#)

[Education & Empathy](#)

[Documentation](#)

[Video Tutorial](#)

Education & Empathy : 3 of 4 (75.0%)









During the patient interview, there are a number of opportunities to provide patient education and empathy. The opportunities listed below are those identified by nursing experts to be of particular importance to this patient. A **Statement** is provided as an example of an appropriate response to each opportunity.

- Opportunities marked as **Not Encountered** are opportunities that were not elicited in the interview
- Opportunities marked as **Not Followed Up** are missed opportunities that were present in the interview, but w/ statements were made
- Opportunities marked as **Followed Up** were followed up by students, and include the dialogue between student and patient

1 Symptoms

Follow

Description: Tina describes the symptoms that have been bothering her.

- | | | |
|---|--|-----------|
|  | Do you have chest pain | 10:1 |
|  | No, I'm not having chest pain. The pain I'm feeling is lower, like right in the middle of my torso. . . above my stomach, but below my ribs. | |
|  | Has your sense of taste change | 10:1 |
|  | No, I can taste everything fine. | |
|  | Any family history of colon cancer | 10:1 |
|  | Um, Grandpa Jones died of colon cancer. | |
|  | I'm very sorry to hear that | E
10:1 |
|  | Thanks. | |

Model Statement: "I'm sorry to hear you're having stomach pain. I'm glad you came in to see me. Stomach pain can be caused by several different things, so I will ask you questions and we'll see if we can determine what's causing yours."

2 Medications

Description: Tina describes her medication regimen, including antacids for her stomach pain.



What makes your pain better



I feel the best in-between meals. And sitting up on the couch seems to help. And sometimes I take an antacid.



Sitting up position help prevent stomach acid from coming up in the esophagus



OK, I understand.

Model Statement: "Thank you for letting me know that you're using antacids in addition to the medications you usually take. I will ask you a few questions about how you're using each medication."

3 Diet

Description: Tina's diet contains high levels of carbohydrates, which is not recommended for a person with diabetes.



What do you normally eat for a typical breakfast



I usually have either cereal or toast, or if I pick something up on my way to work, I'll get a muffin or some pumpkin bread.



What do you normally eat for lunch



I usually either make a sandwich and bring it with me, or I get a sandwich somewhere. And I have chips or pretzels with it. Or *maybe* French fries, but I try not to get them too often.



Try to avoid fatty foods such as chips french fry they are not healthy for you and can cause stomach problems



Thanks for telling me.

Model Statement: "It sounds like you're eating quite a few carbohydrates, which can be unhealthy for people with diabetes. Carbohydrates are found in things like pizza crust, potatoes, bread, and juice. Let's talk about eating foods with fewer carbohydrates."

4 Soda Intake

Description: Tina drinks Diet Coke every day, which is acidic and could irritate her symptoms.



Do you drink any sodas



Yeah, I drink diet Coke.



How much water do you typically drink (Clarified to: How much water do you drink in a day?)



Probably... 6 or 8 glasses? I drink a lot of water. (Clarified to: how much water I drink per day)



Have we ever had food poisoning



I've had food poisoning when I was a kid, and this isn't anything like that.

Model Statement: "Some forms of stomach pain can be irritated by acidic drinks or foods. Drinking less soda and more water could relieve some of your stomach pain."

Comments

If your instructor provides individual feedback on this assignment, it will appear here.



About Shadow Health (<https://evolve.elsevier.com/education/simulations/shadow-health/>)

Terms and Conditions (<https://www.elsevier.com/legal/elsevier-website-terms-and-conditions/elsevier-terms-and-conditions-for-personal-digital-subscriptions-and-e-books>)

Privacy Policy (<https://www.elsevier.com/legal/privacy-policy>)

Account Responsibility (https://service.elsevier.com/app/answers/detail/a_id/34675/supporthub/shadow-health/)

Support and Contact (<https://service.elsevier.com/app/home/supporthub/shadow-health/>) Patents (</static/patents>)

Cookies are used by this site. [Cookie Settings](#).

Copyright © 2026 Elsevier Inc., its licensors, and contributors. All rights are reserved, including those for text and data mining, AI training, and similar technologies.

Gastrointestinal Results | Turned In

Advanced Health Assessment - STU - August 2023, nur504ap4

[Return to Assignment \(/assignments/867640/\)](#)



Your Results

[Lab Pass \(/assignment_attempts/15154906/lab_pass.pdf\)](#)

[Overview](#)

[Transcript](#)

[Subjective Data Collection](#)

[Objective Data Collection](#)

[Education & Empathy](#)

[Documentation](#)

[Video Tutorial](#)

Documentation / Electronic Health Record

[Document: Provider Notes](#)

Document: Provider Notes

Student Documentation

Model Documentation

Subjective

Mrs Joan is a pleasant and she has increased her water and take recently 28 year old African American woman presenting with complaints of upper abdominal pain after eating x1 month. She states the pain is daily after every meal but 3 to 4 times a and she has increased week it is worse. She has noticed increased burping following meals. She says that an acid and time makes it better. she is taking an acid everyday which provides some relief. she denies any chains of her diet but notes that she has been eating less to avoid the pain and she increase her water and take recently.

Objective

Message John is a pleasant obese 28 year old African woman and no acute distress. She is A&O and maintain eye contact throughout visit. Abdomen is soft and protuberant, no scars or lesions noted. Bowel sounds are present and normoactive in all four quadrants. No tenderness or guarding on light or deep palpation. Tympany heard throughout.

Assessment

GERD

HPI: Ms. Jones is a pleasant 28-year-old African American woman who presented to the clinic with complaints of upper stomach pain after eating. She noticed the pain about a month ago. She states that she experiences pain daily, but notes it to be worse 3-4 times per week. Pain is a 5/10 and is located in her upper stomach. She describes it "kind of like heartburn" but states that it can be sharper. She notes it to increase with consumption of food and specifically fast food and spicy food make pain worse. She does notice that she has increased burping after meals. She states that time generally makes the pain better, but notes that she does treat the pain "every few days" with an over the counter antacid with some relief.

Social History: She denies any specific changes in her diet recently, but notes that she has increased her water intake. Breakfast is usually a muffin or pumpkin bread, lunch is a sandwich with chips, dinner is a homemade meal of a meat and vegetable, snacks are French fries or pretzels. She denies coffee intake, but does drink diet cola on a regular basis. She denies use of tobacco and illicit drugs. She drinks alcohol occasionally, last was 2 weeks ago, and was 1 drink. She does not exercise.

Review of Systems: General: Denies changes in weight and general fatigue. She denies fevers, chills, and night sweats. • Cardiac: Denies a diagnosis of hypertension, but states that she has been told her blood pressure was high in the past. She denies known history of murmurs, dyspnea on exertion, orthopnea, paroxysmal nocturnal dyspnea, or edema. • Respiratory: She denies shortness of breath, wheezing, cough, sputum, hemoptysis, pneumonia, bronchitis, emphysema, tuberculosis. She has a history of asthma, last hospitalization was age 16, last chest XR was age 16. • Gastrointestinal: States that in general her appetite is unchanged, although she does note that she will occasionally experience loss of appetite in anticipation of the pain associated with eating. Denies nausea, vomiting, diarrhea, and constipation. Bowel movements are daily and generally brown in color. Denies any change in stool color, consistency, or frequency. Denies blood in stool, dark stools, or maroon stools. No blood in emesis. No known jaundice, problems with liver or spleen.

General: Ms. Jones is a pleasant, obese 28-year-old African American woman in no acute distress. She is alert and oriented. She maintains eye contact throughout interview and examination. • Abdominal: Abdomen is soft and protuberant without scars or skin lesions; skin is warm and dry, without tenting. Bowel sounds present and normoactive in all quadrants. No tenderness to light or deep palpation. Tympanic throughout. Liver is 7 cm at the MCL and 1 cm below the right costal margin. Spleen and bilateral kidneys are not palpable. No CVA tenderness. • Cardiovascular: Regular rate and rhythm, S1 and S2 present, no murmurs, rubs, gallops, clicks, precordial movements. No bruits with auscultation over abdominal aorta. No femoral, iliac, or renal bruits. • Respiratory: Chest is symmetrical with respirations. Lung sounds clear to auscultation anteriorly and posteriorly without wheezes, crackles, or cough.

Gastroesophageal reflux disease without evidence of esophagitis

Student Documentation

Model Documentation

Plan

Educate on life Changes including weight loss engagement and daily activities add limitation of food that made aggravate symptoms including chocolate,citrus fruit, mint, coffee, alcohol and spicy foods.
Elevate head on pillows, avoid eating 2 to 3 hours before bedtime

Educate on lifestyle changes including weight physical activity, and limitation of foods that including chocolate, citrus, fruits, mints, coffee Ms. Jones may elevate the head of her bed with a bolster for comfort or symptom reduction. • Limit meals and to avoid eating 2-3 hours before bedtime reduction in fat to decrease symptoms. • Trial mouth twice daily for two weeks. If reduction continue therapy. If symptoms persist, follow recommendations and consider testing for helicobacter proton pump inhibitor, or upper endoscopy. • emergent care including signs and symptom gastrointestinal bleed, weight loss, and chest weeks for evaluation and follow up.

Comments

If your instructor provides individual feedback on this assignment, it will appear here.



About Shadow Health (<https://evolve.elsevier.com/education/simulations/shadow-health/>)

Terms and Conditions (<https://www.elsevier.com/legal/elsevier-website-terms-and-conditions/elsevier-terms-and-conditions-for-personal-digital-subscriptions-and-e-books>)

Privacy Policy (<https://www.elsevier.com/legal/privacy-policy>) Accessibility (https://service.elsevier.com/app/answers/detail/a_id/34675/supporthub/shadow-health/)

Support and Contact (<https://service.elsevier.com/app/home/supporthub/shadow-health/>) Patents (</static/patents>)

Cookies are used by this site. [Cookie Settings](#).

Copyright © 2026 Elsevier Inc., its licensors, and contributors. All rights are reserved, including those for text and data mining, AI training, and similar technologies.



(<https://www.relx.com/>)