

Show Case Details

Overview	EHR	History	Physical	Nurse Notes	Exercises
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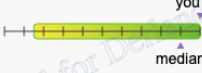

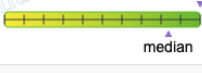

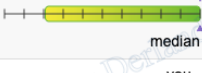



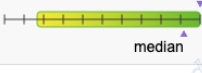
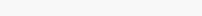

PDF

### Performance Overview

The following table summarizes your performance on each section of the case, whether you completed that section or not.

Time spent: 33 min 58 sec

Status: Submitted

Case Section	Status*	Your Score	Cohort Comparison (N=786)	Performance Details
Total Score		98% 		
EHR MCQ	Done	100% 		6 correct items, 0 missed, 0 incorrect
History	Done	100% 		37 questions asked, 37 correct, 0 missed relative to the case's list
History MCQ	Done	100% 		3 correct items, 0 missed, 0 incorrect
Physical Assessment	Done	89% 		24 physical assessments performed, 19 correct, 4 partially correct, 0 missed relative to the case's list, 0 harmful to patient **
Physical Assessment MCQ	Done	100% 		6 correct items, 0 missed, 0 incorrect
Nurse notes	Done			1 word long; the case's was 24 words
Exercises	Done	100%  (of scored items only)		10 of 10 correct (of scored items only)

\*Status:

Not started - the section has not been started yet.

In progress - the section is incomplete and there's still time to finish it.

Incomplete - the section is incomplete and the assignment due date has passed.

Done - the section is finished and evaluated.

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Overview

EHR

History

Physical

Nurse Notes

Exercises

Time spent: 21 sec



Score: 100%

- Correct
- ✗ Missed
- Extraneous

During your review of the EHR, which of the findings did you judge as key?

Yours	Graded	Choice
<input checked="" type="checkbox"/>	●	COPD Exacerbation.
<input checked="" type="checkbox"/>	●	DNI.
<input type="checkbox"/>		Hyperkalemic.
<input type="checkbox"/>		Hyponatremic.
<input checked="" type="checkbox"/>	●	Leukocytosis.
<input type="checkbox"/>		Elevated glucose.
<input checked="" type="checkbox"/>	●	Febrile.
<input type="checkbox"/>		Sputum culture positive for Streptococcus pneumoniae.
<input checked="" type="checkbox"/>	●	Inspiratory and expiratory wheezes.
<input type="checkbox"/>		WBC within normal range.
<input type="checkbox"/>		Clear chest x-ray.
<input type="checkbox"/>		DNR.
<input type="checkbox"/>		EKG shows normal sinus rhythm.
<input type="checkbox"/>		Audible crackles.
<input type="checkbox"/>		Rash on chest.
<input checked="" type="checkbox"/>	●	Sputum sample needs to be collected.

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Overview      EHR      **History**      Physical      Nurse Notes      Exercises

**History**

The following is a summary of all the tasks you performed during the history portion of your patient encounter.

Time spent: 15 min 34 sec

**All History Questions**

Time spent: 15 min 23 sec



Performed: 37 of 37 concepts addressed  
37 questions asked

**Performed**

- Performed
- ⊕ Not required, not inappropriate
- ⊖ Extraneous
- ⊘ Duplicate
- ⊙ Inappropriate

**Not performed**

- ✗ Missed

Score	Order	Type	Question	Response
●	1	Introductory	Hello, I am your nurse and will be taking care of you.	(Nods hello).
●	2	Introductory	I am here to perform an assessment.	OK.
●	3	Introductory	Let me wash my hands before we get started.	OK.
●	4	Introductory	Can I take a look at your wristband to confirm your identity?	Sure.
●	5	Introductory	Let me close the curtain/door before we get started.	Sure.
●	6	Pt's Orientation	How would you like to be addressed?	Ben.
●	7	Pt's Orientation	When is your birthday?	June 22nd.
●	8	Pt's Orientation	What is your name?	Ben Bundy
●	9	Pt's Orientation	Where are you?	In the hospital.
●	10	Pt's Orientation	What time is it?	..oriented to time when asked..

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●	9	Pt's Orientation	Where are you?		In the hospital.	
●	10	Pt's Orientation	What time is it?		..oriented to time when asked..	
●	11	Pt's Orientation	What happened?		I am....trouble breathing.	
●	12	Concerns	Do you have pain anywhere? If so, where?		Chest...from....coughing.	
●	13	Assoc Sx	When did your shortness of breath/difficulty breathing start?		Few..days..ago.	
●	14	Assoc Sx	What treatments have you had for your fever?		Just...some...medication.	
●	15	Assoc Sx	What treatments have you had for your shortness of breath/difficulty breathing?		Just...here. No..pills...at home. Cannot...afford.	
●	16	Assoc Sx	Are you coughing up any sputum?		Yup....green. Some...in the tissue ...on the table (deep breath). Chest...sure...hurts...from coughing.	
●	17	Assoc Sx	How high is your fever?		It feels...pretty...high.	
●	18	Assoc Sx	Do you have any other symptoms or concerns we should discuss?		Nope...(puff...puff).	
●	19	Assoc Sx	Have you had a cough like this before?		Yes.	
●	20	Assoc Sx	When did your cough start?		It's been.... about three days.... now.	
●	21	Assoc Sx	When did your fever start?		Couple....days...ago.	
●	22	Assoc Sx	What treatments have you had for your cough?		Just.... treatments....here.	
●	23	Assoc Sx	Does anything make your shortness of breath/difficulty breathing better or worse?		Medication...here. No pills...at home...cannot afford.	
●	24	PMH	Any new or recent change in medications?		No..just can't....afford them...sometimes.	
●	25	PMH	Are your immunizations up to date?		Yes.	
●	26	PMH	Do you have any allergies?		Uh...no.	
●	27	PMH	Are you taking any prescription medications?		Yeah.... when... I can.... afford them.	
●	28	SH	Do you use electronic cigarettes? How many per day?		No.	
●	29	SH	Do you now or have you ever smoked or chewed tobacco?		Yes.	
●	30	HPI/ROS	Do you have any problems with nervousness, depression, lack of interest, sadness, memory loss, or mood changes, or ever hear voices or see things that you know are not there?		Uh...no.	
●	31	HPI/ROS	Do you have any problems with fatigue, difficulty sleeping, unintentional weight loss or gain, fevers, or night sweats?		Always tired.... can't breathe ...	

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		30	HPI/ROS	Do you have any problems with hair loss, decreased appetite, weakness, weight loss, memory loss, or mood changes, or ever had a stroke or see things that you know are not there?	
		31	HPI/ROS	Do you have any problems with fatigue, difficulty sleeping, unintentional weight loss or gain, fevers, or night sweats?	Always tired.... can't breathe ...
		32	HPI/ROS	When did you last take your medications?	I ran out....inhalers.... last week
		33	HPI/ROS	Do you experience shortness of breath, wheezing, difficulty catching your breath, chronic cough, or sputum production?	Short...of...breath.....(puff....deep breath).
		34	Closing	Do you know how to use your call button and bed controls?	Yes.
		35	Other	Are you comfortable, or can I assist you in moving into a more comfortable position?	I'm...good.
		36	Other	What is your advance directive/code status?	No...tubes.
		37	HPI/ROS	Do you experience chest pain discomfort or pressure; pain/pressure/dizziness with exertion or getting angry; palpitations; decreased exercise tolerance; or blue/cold fingers and toes?	Yeah....COPD.

History MCQ

Time spent: 11 sec  
Score: 100%

- Correct
- ✗ Missed
- Extraneous

During your interview of the patient, which of the findings did you judge as key?

Yours	Graded	Choice
<input type="checkbox"/>		Diarrhea.
<input checked="" type="checkbox"/>	<span style="color: green;">●</span>	Tripod position.
<input type="checkbox"/>		Fell at home.
<input type="checkbox"/>		Blurred vision.
<input type="checkbox"/>		Sinus pain.
<input checked="" type="checkbox"/>	<span style="color: green;">●</span>	Cannot afford medication.
<input type="checkbox"/>		Blood-tinged sputum.

## History MCQ

Time spent: 11 sec



Score: 100%

● Correct

✘ Missed

○ Extraneous

During your interview of the patient, which of the findings did you judge as key?

Yours	Graded	Choice
<input type="checkbox"/>		Diarrhea.
<input checked="" type="checkbox"/>	●	Tripod position.
<input type="checkbox"/>		Fell at home.
<input type="checkbox"/>		Blurred vision.
<input type="checkbox"/>		Sinus pain.
<input checked="" type="checkbox"/>	●	Cannot afford medication.
<input type="checkbox"/>		Blood-tinged sputum.
<input type="checkbox"/>		Dry cough.
<input type="checkbox"/>		Headache.
<input type="checkbox"/>		Tightness in abdomen.
<input checked="" type="checkbox"/>	●	Green sputum.



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●	5	temperature		✓ Interpretation	normotensive
●	7	Chest Wall & Lungs: Inspect anterior and posterior chest			
●	8	Extremities: Inspect/palpate extremities: Lower			
●	9	Extremities: Inspect/palpate extremities: Upper			
●	10	HEENT: Inspect mouth/pharynx			
●	11	HEENT: Inspect nose external/internal			
●	12	Lines: Assess IV site			
●	13	Skin and Nails: Assess capillary refill: Fingers			
●	14	Skin and Nails: Assess capillary refill: Toes			
●	15	Skin and Nails: Assess skin turgor			
●	16	Skin and Nails: Inspect finger/toe nails			
●	17	Skin and Nails: Inspect skin			
☐	18	temperature			
●	20	Vitals: respiration		✓ Rate	28
				✓ Rhythm	regular
				✓ Effort	labored
●	23	Neurological: examine pupils		✓ Left	normal reactive
				✓ Right	normal reactive
●	24	Vitals: SpO <sub>2</sub>			

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●	24	Vitals: SpO <sub>2</sub>		✓ Right	normal reactive normal reactive
●	6	Abdomen: auscultate abdomen	<ul style="list-style-type: none"> <li>You didn't listen for at least 8 seconds at RUQ, LUQ, RLQ, and LLQ.</li> </ul>	✓ Interpretation	normoactive normoactive
●	19	Vitals: pulse	<ul style="list-style-type: none"> <li>You didn't listen for at least 15 seconds at right brachial, left brachial, right radial, right femoral, left femoral, and left radial.</li> <li>You did not check radial pulse first on conscious adult patient.</li> </ul>	✓ Rate ✓ Rhythm ✓ Strength	88 88 regular regular normal normal
●	21	Chest Wall & Lungs: auscultate lungs	<ul style="list-style-type: none"> <li>You didn't listen for at least one cycle at right midaxillary, left midaxillary, anterior upper right, anterior upper left, anterior middle right, anterior middle left, anterior lower right, anterior lower left, posterior upper left, posterior middle left, posterior middle right, posterior lower left, posterior lower right, and posterior left costophrenic angle.</li> <li>You did not auscultate all the locations.</li> </ul>	✓ Left ✓ Right	wheeze wheeze wheeze wheeze
●	22	Heart: auscultate heart	<ul style="list-style-type: none"> <li>You didn't listen for at least one cycle at aortic, pulmonic, Erb's point, tricuspid, and mitral/apex.</li> </ul>	✓ Interpretation	Normal Normal

Physical Assessments MCQ

Time spent: 32 sec  
Score: 100%

- Correct
- ✗ Missed
- Extraneous

During your physical assessment of the patient, which of the findings did you judge as key?

Yours	Graded	Choice
<input type="checkbox"/>		Absent bowel tones.
<input type="checkbox"/>		Rash across chest.
<input checked="" type="checkbox"/>	●	Cyanosis to lips.
<input type="checkbox"/>		Afebrile.
<input type="checkbox"/>		Left arm swelling.
<input checked="" type="checkbox"/>	●	Use of accessory muscles to breathe.



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Overview

EHR

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- Correct
- Missed
- Extraneous

During your physical assessment of the patient, which of the findings did you judge as key?

Yours	Graded	Choice
<input type="checkbox"/>		Absent bowel tones.
<input type="checkbox"/>		Rash across chest.
<input checked="" type="checkbox"/>	<input checked="" type="radio"/>	Cyanosis to lips.
<input type="checkbox"/>		Afebrile.
<input type="checkbox"/>		Left arm swelling.
<input checked="" type="checkbox"/>	<input checked="" type="radio"/>	Use of accessory muscles to breathe.
<input type="checkbox"/>		Pressure ulcer on left heel.
<input type="checkbox"/>		Capillary refill greater than three seconds.
<input checked="" type="checkbox"/>	<input checked="" type="radio"/>	Febrile.
<input type="checkbox"/>		Boggy heels.
<input checked="" type="checkbox"/>	<input checked="" type="radio"/>	Inspiratory and expiratory wheezes.
<input type="checkbox"/>		Clubbing to fingers.
<input type="checkbox"/>		Cool, clammy skin.
<input type="checkbox"/>		Hypocarbia.
<input checked="" type="checkbox"/>	<input checked="" type="radio"/>	Barrel chested.
<input checked="" type="checkbox"/>	<input checked="" type="radio"/>	Warm, diaphoretic skin.
<input type="checkbox"/>		Concave chest.
<input type="checkbox"/>		Lungs clear to auscultation

**Performed**

- Correct
- ◐ Partially correct
- ✘ Incorrect
- ⊘ Not scored

**Not performed**

- Unanswered

Section	Score	Type	% Correct	Order	Question	User Answer	Case Answer
Prework	<span style="color: blue;">⊘</span>	Didactic	n.a.	1	<p><b>Definition of Virtual Simulation:</b>                      A teaching method that mimics the real world through the re-creation of a healthcare encounter depicted in a digital world.                      Each simulation has four components: Pre-brief – Enactment – Debrief – Assessment (PEDA).</p> <ul style="list-style-type: none"> <li>Pre-briefing: preparatory activities to complete the simulation case. This may include scenario overview, review of concepts, review of pre-simulation questions, expectations, confidentiality, and bedside handoff report.</li> <li>Enactment/Simulation: completion and participation in the simulation case.</li> <li>Debrief: reflection on your performance in the simulation case and discussion with others on ways to improve your nursing practice.</li> <li>Assessment/Evaluation: evaluation of your case performance by faculty using the rubrics in Canvas.</li> </ul> <p><b>Purpose:</b>                      The case simulation provides the opportunity to apply nursing theory to practice.</p> <p><b>Clinical Replacement:</b>                      You must complete all required simulations and debriefings for this course.</p> <p><b>Expectations:</b></p> <ul style="list-style-type: none"> <li>Consciously make a personal choice to act with professional integrity.</li> <li>Organize and prepare for the virtual simulation experience.</li> <li>Be accountable for one's role and responsibilities.</li> <li>Be collaborative, supportive, and mutually respectful of all simulated patients.</li> <li>Share expertise and/or experiences in a safe, nonjudgmental manner.</li> <li>Be calm, compassionate and create a sense of trust.</li> <li>Be cognizant of issues related to the care of diverse populations and the diversity among all involved in the virtual simulation experience.</li> <li>Be honest, mindful, and sensitive to cultural differences and ethical issues related to the virtual simulation experience.</li> <li>Recognize unprofessional and unethical behavior during the simulation and take steps to abate it.</li> <li>Follow standards of practice, guidelines, principles, and ethics of one's profession. American Nurses Association (ANA) Professional Standards.</li> <li>Create and maintain a safe learning environment.</li> </ul> <p><b>Ground Rules:</b>                      Your focus must be on your virtual simulation activities just as it would be in a real clinical setting.</p> <p><b>Successful behaviors include the following:</b></p> <ul style="list-style-type: none"> <li>Complete the simulation activity individually.</li> <li>Review all necessary materials and complete assigned pre-simulation work prior to each virtual simulation activity.</li> </ul>		

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				<ul style="list-style-type: none"> <li>Recognize unprofessional and unethical behavior during the simulation and take steps to address it.</li> <li>Follow standards of practice, guidelines, principles, and ethics of one's profession. American Nurses Association (ANA) Professional Standards.</li> <li>Create and maintain a safe learning environment.</li> </ul> <p><b>Ground Rules:</b> Your focus must be on your virtual simulation activities just as it would be in a real clinical setting.</p> <p><b>Successful behaviors include the following:</b></p> <ul style="list-style-type: none"> <li>Complete the simulation activity individually.</li> <li>Review all necessary materials and complete assigned pre-simulation work prior to each virtual simulation activity.</li> <li>Always be prepared and organized.</li> <li>Ensure a quiet environment and that all technology is checked and working before your scheduled simulation activity.</li> <li>Ensure an adequate power source and internet connections are available.</li> <li>Arrange for family responsibilities prior to entering the virtual simulation environment to not be a distraction.</li> <li>Complete in its entirety without interruption. Virtual simulation activity may last from 2 – 4 hours.</li> </ul> <p><b>Confidentiality:</b> To preserve the educational value, integrity, and safety of the learning environment, you agree to maintain strict confidentiality about the proceedings of the simulation session, details of the training scenarios, and the performance of all participants. You acknowledge that this expectation aligns with the guidelines related to the Health Insurance Portability and Accountability Act (HIPAA) and laws governing Protected Health Information (PHI) in patient care environments. You will not view, discuss, share, record or disclose any confidential information pertaining to the session. You understand that lapses in confidentiality are considered academic misconduct and could result in dismissal from the academic program.</p> <p><b>Fiction Agreement:</b> You will suspend judgment of realism for any given simulation in exchange for the promise of learning new knowledge and skills, treating the simulated patients with the same care as an actual patient, and acting with a genuine desire to learn even when it may be difficult.</p> <p><b>Orientation to I-Human:</b> To refresh or re-orient to the I-Human software, please review</p> <ul style="list-style-type: none"> <li>Robert Jones practice case and orientation videos.</li> <li>Description of Tabs/Tutorial of I-Human</li> <li>Technical Requirements specific to I-Human</li> </ul> <p><b>Assessment &amp; Evaluation:</b> You will be evaluated using the rubric located within Canvas. Debriefing is in a separate discussion also in Canvas.</p>	
Prework	●	Multiple choice	100%	2	<p>Click to interact with chronic obstructive pulmonary disease (COPD) using 3D technology. You have been assigned a patient who is a 75-year-old male admitted to the hospital from the emergency department for an acute COPD exacerbation. What do you anticipate being the primary concerns for this patient? Select all that apply. [link to media disabled]</p> <p>✓ Respiratory distress. ✓ Difficulty breathing.</p> <ul style="list-style-type: none"> <li>Respiratory distress.,</li> <li>Difficulty breathing.</li> </ul>
Prework	●	Multiple choice	100%	3	<p>Which of the following assessments would be the priority for a patient experiencing a COPD exacerbation? Select all that apply.</p> <p>✓ Breath sounds. ✓ Oxygen saturation.</p> <ul style="list-style-type: none"> <li>Breath sounds.,</li> <li>Oxygen saturation.</li> </ul>

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Overview				EHR	History	Physical	Nurse Notes	Exercises
					You will be evaluated using the rubric located within Canvas. Debriefing is in a separate discussion also in Canvas.			
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Prework	●	Multiple choice	100%	3	Which of the following assessments would be the priority for a patient experiencing a COPD exacerbation? Select all that apply.	<ul style="list-style-type: none"> <li>✓ Breath sounds.</li> <li>✓ Oxygen saturation.</li> </ul>	<ul style="list-style-type: none"> <li>• Breath sounds.,</li> <li>• Oxygen saturation.</li> </ul>	
Prework	●	Multiple choice	100%	4	Assessing a patient with COPD requires the proper auscultation of breath sounds to assess the severity of airflow obstruction. Which of the following are best practices in the auscultation of breath sounds? Select all that apply.	<ul style="list-style-type: none"> <li>✓ Warm up the cold stethoscope by rubbing the chest piece in your hands before placing it on the patient's body.</li> <li>✓ Never auscultate through the clothing; place the stethoscope on bare skin.</li> <li>✓ Ensure that the entire diaphragm or bell of the stethoscope is in contact with the skin.</li> </ul>	<ul style="list-style-type: none"> <li>• Warm up the cold stethoscope by rubbing the chest piece in your hands before placing it on the patient's body.,</li> <li>• Never auscultate through the clothing; place the stethoscope on bare skin.,</li> <li>• Ensure that the entire diaphragm or bell of the stethoscope is in contact with the skin.</li> </ul>	
Prework	●	Multiple choice	100%	5	Which of the following findings would be expected during a respiratory assessment of a patient experiencing a COPD exacerbation? Select all that apply.	<ul style="list-style-type: none"> <li>✓ Tripod position.</li> <li>✓ Low oxygen saturation.</li> <li>✓ Wheezing.</li> </ul>	<ul style="list-style-type: none"> <li>• Tripod position.,</li> <li>• Low oxygen saturation.,</li> <li>• Wheezing.</li> </ul>	
Prework	●	Multiple choice	100%	6	In patients experiencing respiratory illness, which of the following is an example of health promotion activities the nurse can promote to reduce the risk of further complications and improve respiratory health? Select all that apply.	<ul style="list-style-type: none"> <li>✓ a. Engage in regular exercise.</li> <li>✓ b. Ensure regular check-ups.</li> <li>✓ d. Maintain a healthy weight.</li> <li>✓ e. Take steps to quit smoking.</li> </ul>	<ul style="list-style-type: none"> <li>• a. Engage in regular exercise.,</li> <li>• b. Ensure regular check-ups.,</li> <li>• d. Maintain a healthy weight.,</li> <li>• e. Take steps to quit smoking.</li> </ul>	
Prework	🔗	Didactic	n.a.	7	<a href="#">Click here</a>			
Exams	●	Multiple choice	100%	1	Understanding that Ben cannot afford his medications, which of the following interdisciplinary team members would be most appropriate to include in his care?	<ul style="list-style-type: none"> <li>✓ Social worker.</li> </ul>	<ul style="list-style-type: none"> <li>• Social worker.</li> </ul>	
Exams	●	Multiple choice	100%	2	The nurse is screening the patient for severe sepsis. Which of the following signs and symptoms of infection are both present and new to Ben? Select all that apply.	<ul style="list-style-type: none"> <li>✓ Leukocytosis (WBC count&gt;12,000 mm3).</li> <li>✓ Tachypnea &gt; 20 breaths per minute.</li> </ul>	<ul style="list-style-type: none"> <li>• Leukocytosis (WBC count&gt;12,000 mm3),</li> <li>• Tachypnea &gt; 20 breaths per minute.</li> </ul>	

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		choice			airflow obstruction. Which of the following are best practices in the auscultation of breath sounds? Select all that apply.	<p>by rubbing the chest piece in your hands before placing it on the patient's body.</p> <ul style="list-style-type: none"> <li>✓ Never auscultate through the clothing; place the stethoscope on bare skin.</li> <li>✓ Ensure that the entire diaphragm or bell of the stethoscope is in contact with the skin.</li> </ul>	<p>by rubbing the chest piece in your hands before placing it on the patient's body.,</p> <ul style="list-style-type: none"> <li>• Never auscultate through the clothing; place the stethoscope on bare skin.,</li> <li>• Ensure that the entire diaphragm or bell of the stethoscope is in contact with the skin.</li> </ul>
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Exams		Multiple choice	100%	1	Understanding that Ben cannot afford his medications, which of the following interdisciplinary team members would be most appropriate to include in his care?	<ul style="list-style-type: none"> <li>✓ Social worker.</li> </ul>	Social worker.
Exams		Multiple choice	100%	2	The nurse is screening the patient for severe sepsis. Which of the following signs and symptoms of infection are both present and new to Ben? Select all that apply.	<ul style="list-style-type: none"> <li>✓ Leukocytosis (WBC count&gt;12,000 mm3).</li> <li>✓ Tachypnea &gt; 20 breaths per minute.</li> </ul>	<ul style="list-style-type: none"> <li>• Leukocytosis (WBC count&gt;12,000 mm3),,</li> <li>• Tachypnea &gt; 20 breaths per minute.</li> </ul>
Exams		Multiple choice	100%	3	Which of the following would be the priority intervention in the care of Ben Bundy?	<ul style="list-style-type: none"> <li>✓ Titrate the oxygen to keep oxygen saturation between 88%-92%.</li> </ul>	Titrate the oxygen to keep oxygen saturation between 88%-92%.
Exams		Multiple choice	100%	4	The next day, you are assigned to care for Ben Bundy. Which of the following would be an <b>unexpected</b> outcome of his care?	<ul style="list-style-type: none"> <li>✓ Absent breath sounds on the right side.</li> </ul>	Absent breath sounds on the right side.
Exams		Multiple choice	100%	5	Why would conducting a cardiac assessment be important for a patient with COPD? Select all that apply.	<ul style="list-style-type: none"> <li>✓ a. COPD causes a rise in blood pressure related to decreased oxygenation.</li> <li>✓ d. Medications used to treat COPD can affect the heart.</li> </ul>	<ul style="list-style-type: none"> <li>• a. COPD causes a rise in blood pressure related to decreased oxygenation.,</li> <li>• d. Medications used to treat COPD can affect the heart.</li> </ul>



## NR305 Week 4 Ben Bundy iHuman Virtual Patient Encounter Worksheet

Name:

### 1. Situation, Background, Assessment, Recommendations (SBAR) Documentation

<b>S</b>	<p>Situation</p> <p>Concise statement of the purpose of the communication</p>	<p>The patient was a 55-year-old male named Ben Bundy, who came with complaints of chest pain and shortness of breath. He describes the chest pain as occasional and has a history of hypertension and hyperlipidemia.</p>
<b>B</b>	<p>Background</p> <p>Brief information related to the clinical background of the situation</p>	<p>The patient has been diagnosed with hypertension, hyperlipidemia, and type 2 diabetes mellitus in the past. He is currently on antihypertensives and statins. He has a family history of cardiovascular diseases. He reported that he does not smoke; however, he drinks occasionally.</p>
<b>A</b>	<p>Assessment</p> <p>Brief analysis and consideration of options</p>	<p>Upon examination, Mr. Bundy's vital signs are as follows: Blood pressure is 150/95, pulse rate is 90, respiratory rate is 20 breaths per minute, oxygen saturation is 95% on air, and temperature is 98.6°F. Cardiovascular assessment showed that the patient's heart had a normal rhythm, and no audible thrills or friction rubs were heard upon auscultation of the lungs. Except for the wheezing sound in the initial assessment, no adventitious sounds were heard over the lungs. EKG revealed that there were no acute ischemic changes in the patient. Labs reported high LDL cholesterol. The patient is clinically stable but should undergo further assessment for possible angina.</p>
<b>R</b>	<p>Recommendation</p> <p>Suggestion of what you believe the client needs</p>	<p>I recommend that the patient should be referred to a cardiologist for better management of chest pain. I suggest maintenance of the current drug regimen and exploring the need for other antihypertensive medications. I recommend that blood pressure and lipid values should be closely monitored. Assess the patient's understanding of changes in lifestyle and medication compliance.</p>

### 2. Defuse Questions

Did you feel comfortable and knowledgeable in Ben's simulation?



Yes, I was quite comfortable during Ben's simulation and seemed to know what was coming next. The training was quite extensive and gave one a basic understanding on how cardiovascular assessments should be conducted as well as some of the signs.

What did you learn?

It made me appreciate the significance of a detailed and organized analysis of signs and symptoms related to cardiovascular diseases, especially when dealing with clients at risk or with proper comorbidities such as hypertension or hyperlipidemia. It also pointed out areas of differential diagnosis and the right time of the patient to refer them to a specialist.

What additional information is needed to better care for Ben?

Other information required includes a description of how often and for how long the chest pain occurs, whether there are any circumstances that lead to it, and a better understanding of his compliant with medications and lifestyle changes. Additional investigations like stress-testing or imaging studies would also be helpful.

What specific questions would you like to ask him?

What does the chest pain feel like? Is it a sharp pain, aching or more like pressure?  
Have you observed any precipitating factors or characteristics of chest pain?  
How frequently do you check your blood pressure and blood glucose level at home?  
Are you experiencing other symptoms including dizziness, palpitation, or nausea?  
To what extent do you follow your ordered medications and dietary advice?

**3. Post-Case Questions (Provide at least one scholarly source from the Chamberlain Library to answer the questions in this section. Provide an APA in-text citation and full APA reference for the scholarly source).**

Discuss at least two evidence-based interventions that can improve Ben's outcomes and promote safety.

Medication Optimization: Though perfect medication compliance remains a challenge, increasing the intensity of antihypertensive management will enable greater blood pressure control and, therefore, cardiovascular event risk reduction (Xu et al., 2021).  
Lifestyle Modifications: An effective clinical strategy for weight management involves a comprehensive lifestyle modification program that addresses dietary behavior, physical activity, and smoking in certain cases and has been observed to have a positive impact on cardiovascular health (Pataky et al., 2021).

How would you prioritize your care based on the best evidence for Ben? Explain.



Focus on enhancing the client's blood pressure control by evaluating and possibly modifying his existing antihypertensive medications. At the same time, a lifestyle intervention program should be started with dietary advice on avoiding foods with a high glycemic index, increased physical activity, and education to ensure compliance with medication regimens. Based on the guidelines, the above interventions will effectively target his risk factors and enhance his cardiovascular well-being.

### References

Pataky, M. W., Young, W. F., & Nair, K. S. (2021, March). Hormonal and metabolic changes of aging and the influence of lifestyle modifications. In *Mayo Clinic Proceedings* (Vol. 96, No. 3, pp. 788-814). Elsevier.

Xu, W. A. N. G., Yi, L. I., Jing, L. I., Miao-Han, Q. I. U., Zi-Zhao, Q. I., Xiao-Ying, L. I., ... & Kun, N. A. (2021). Medication compliance for secondary prevention and long-term outcome among patients with acute coronary syndrome after percutaneous coronary intervention in different regions. *Chinese Journal of Cardiology*, 143-149.