

# Module Report

Simulation: HealthAssess 3.0

Module: Older Adult



Individual Name: **Cheyenne Walls**

Institution: **Lakeview CON**

Program Type: **BSN**

## Overview Of Most Recent Use

	Date	Time Use	Score
Lesson	7/20/2024	20 min 50 sec	N/A
Test	7/18/2024	9 min	89.5%

## Lesson Information:

### Lesson - History:

	Date/Time	Time Use	Total Time Use: 45 min
Lesson	7/20/2024 5:27:50 PM	20 min 50 sec	
Lesson	7/18/2024 10:35:52 PM	23 min 55 sec	

## Older Adult 3.0 Test Information:

### Older Adult 3.0 Test - Score Details of Most Recent Use

	Individual Score	Individual Score										
		1	10	20	30	40	50	60	70	80	90	99
COMPOSITE SCORES	89.5%											▲
Older Adult 3.0 Test	89.5%											▲

### Older Adult 3.0 Test - History

	Date/Time	Score	Time Use	Total Time Use: 9 min
Older Adult 3.0 Test	7/18/2024 10:46:00 PM	89.5%	9 min	



## Expert Chart Claudia Pacheco

This expert chart is intended to assist in evaluating student performance in documentation for this activity. Only the tabs and tables of the chart that warrant entries are included.

Claudia Pacheco, Female	<b>DOB:</b> 12/11/XX	<b>Attending:</b> Marisol Menendez, MD
<b>MRN:</b> 10298955	<b>Height:</b> 162.5 cm	<b>Code Status:</b> Full Code
<b>Allergies:</b> none	<b>Weight:</b> 45.8 kg	<b>Comments:</b> none

### Allergies & Home Medications

Allergies	
No known allergies	Reviewed

Home Medication List	
<b>Losartan</b> 25 mg daily, Oral Reason: Hypertension	Is patient taking medication? Taking Last taken: Yesterday <b>Reconciled</b> Reason: Admission Continued
<b>Vitamin D</b> 800 IU daily, Oral	Is patient taking medication? Taking Last taken: Yesterday <b>Reconciled</b> Reason: Admission Continued

### Chief Complaint & History of Present Illness

Admission Problems	
Chief Complaint	Fell in bathroom; right hip pain

History of Present Illness/Injury	
Location (Where are the symptom located? Are they local or do they radiate?)	Right hip

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## History

Past Medical History	
<b>hypertension</b> Date of diagnosis: 20+ years ago Details and treatments: losartan 25 mg PO daily	Information Added
Social/Environmental Safety Screening	
Patient lives	With S/O
Support Systems	Wife

## Vital Signs

Vital Signs	
Temperature	97.7° F
Temperature Source	Temporal
Pulse	88 bpm
Pulse Source	Radial
Blood Pressure	128/86
Position	Supine
Respirations	16 bpm
SpO2 (%)	97%
Oxygen Source	Room Air
Measurements	
Height/Length	162.5 cm
Weight	45.8 kg

## Orders/Prescriptions

Start Date	Order	Details
11.0 hr before start	<p><b>0.9% Sodium Chloride (NACL)</b></p> <p><i>Entered by Provider</i>  Dose/Frequency: 1000 mL  Rate: 125 mL/hr  Route: IV</p> <p>Start Date: 11.0 hr before start  End Date:  Dispensed: Injection, IV 1000 mL (1 L)</p>	<p>3.0 hr before start – Started 1000 mL</p> <p>11.0 hr before start – Started 1000 mL</p>
11.0 hr before start	<p><b>Losartan Potassium</b></p> <p><i>Entered by Provider</i>  Dose/Frequency: 25 mg Daily  Route: Oral</p> <p>Start Date: 11.0 hr before start  End Date:  Dispensed: Tablet, Oral 25 mg</p>	
11.0 hr before start	<p><b>Morphine Sulfate</b></p> <p><i>Entered by Provider</i>  Dose/Frequency: 2 mg every 4 hr  Route: IVP</p> <p>Start Date: 11.0 hr before start  End Date:  Dispensed: Injectable,  Injection 2 mg/mL</p>	<p>40.0 min before start – Given 2 mg</p>
11.0 hr before start	<p><b>Vitamin D (cholecalciferol)</b></p> <p><i>Entered by Provider</i>  Dose/Frequency: 800 Other – See  Administration Instructions, Daily  Route: Oral</p> <p>Start Date: 11.0 hr before start  End Date:  Dispensed: Oral, Capsule 800 IU</p>	<p>800 IU daily</p>

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*Medication Administration for 0 Days after start*

Medication	-16 hr	-15 hr	-14 hr	-13 hr	-12 hr	-11 hr
<b>0.9% Sodium Chloride (NACL)</b> <i>Entered by Provider</i> Dose/Frequency: 1000 mL Rate: 125 mL/hr Route: IV  Start Date: 11.0 hr before start End Date: Dispensed: Injection, IV 1000 mL (1 L)						Started KW
<b>Losartan Potassium</b> <i>Entered by Provider</i> Dose/Frequency: 25 mg Daily Route: Oral  Start Date: 11.0 hr before start End Date: Dispensed: Tablet, Oral 25 mg						
<b>Morphine Sulfate</b> <i>Entered by Provider</i> Dose/Frequency: 2 mg every 4 hr Route: IVP  Start Date: 11.0 hr before start End Date: Dispensed: Injectable, Injection 2 mg/mL						
<b>Vitamin D (cholecalciferol)</b> <i>Entered by Provider</i> Dose/Frequency: 800 Other – See Administration Instructions, Daily Route: Oral  Start Date: 11.0 hr before start End Date: Dispensed: Oral, Capsule 800 IU						

Medication	-8 hr	-7 hr	-6 hr	-5 hr	-4 hr	-3 hr
<p><b>0.9% Sodium Chloride (NACL)</b></p> <p><i>Entered by Provider</i>  Dose/Frequency: 1000 mL  Rate: 125 mL/hr  Route: IV</p> <p>Start Date: 11.0 hr before start  End Date:  Dispensed: Injection, IV 1000 mL (1 L)</p>						Started KW
<p><b>Losartan Potassium</b></p> <p><i>Entered by Provider</i>  Dose/Frequency: 25 mg Daily  Route: Oral</p> <p>Start Date: 11.0 hr before start  End Date:  Dispensed: Tablet, Oral 25 mg</p>						
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<p><b>Vitamin D (cholecalciferol)</b></p> <p><i>Entered by Provider</i>  Dose/Frequency: 800  Other – See Administration Instructions, Daily  Route: Oral</p> <p>Start Date: 11.0 hr before start  End Date:  Dispensed: Oral, Capsule 800 IU</p>						

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## Flowsheet

### Assessment

Head, Face, Anterior Fontanel, Neck	
Head, Face	Head round and symmetrical, Normocephalic
Comment	Facial expressions symmetrical

Respiratory	
Resp. Effort/Pattern	Bilaterally even and unlabored
Breath Sound, Comments	Symmetrical movements bilaterally, anterior and posterior chest. Breath sounds diminished anteriorly and posteriorly.

Cardiac	
Cardiac Rhythm/Sounds	S1 and S2 present
Cardiac Comments	No murmurs

Peripheral Vascular	
RUE	Capillary refill less than 3 secs, +2 moderate pulse
LUE	Capillary refill less than 3 secs, +2 moderate pulse
RLE	No edema or pain, +2 moderate pulse
LLE	Capillary refill less than 3 secs, No edema or pain, +2 moderate pulse
Periph. Vasc. Comments	Radial pulses regular bilaterally. Dorsalis pedis pulses regular bilaterally

Integumentary	
Skin Color	Appropriate for ethnicity, Even distribution
Skin Temperature/Condition	Intact, Warm
Skin Turgor	Recoils immediately
Skin Comments	Ecchymoses on right hip and outer aspect of thigh, 12 cm X 8 cm

Musculoskeletal	
RLE	Limited range of mobility, Weakness
LLE	Full range of mobility
Musculoskeletal Comments	Upper extremities symmetrical on inspection. Grip strength strong and equal bilaterally. Right lower extremity slightly shorter than left. Swelling noted over right hip.

Gastrointestinal	
Abdomen	Soft, Nontender
Bowel Sounds	Hypoactive
Last Bowel Movement	1 Days before start
GI Comment	Reports nausea since waking. Abdomen concave, symmetric, with umbilicus at midline and inverted.

#### IV Site Assessment

##### *Interventions (Lines, Drains, etc.)*

	<p>LINES</p> <p>Type: Peripheral IV</p> <p>Action: Assessment</p> <p>Location: Forearm</p> <p>Orientation: Right</p> <p>Site Assessment: Clean, Dry, Intact</p> <p>Infiltration Scale: Grade 0 = No symptoms</p> <p>Phlebitis Scale: Grade 0 = No symptoms</p> <p>Dressing: Transparent</p>
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## Patient Education

Learner Assessment	
Learner	
Learner Assessment Comments	

Patient Education Documentation	
Teaching Methods	Explanation – Verbal
Education Provided/Reinforced	Home safety: Discussed need for adequate lighting, remove area rugs, clear path through home.  Nutrition: Keep journal or chart of intake to track amount of food and fluids consumed
Learner Response	Verbalizes understanding