



# ATI Swift River Simulations 2.0

## Client Report Sheet

Room Number: <b>112</b>	Allergies: <b>No known allergies</b>	Diet: <b>NPO, parenteral feeding</b>	Acuity 1 2 3 <b>Unknown</b>
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Client Name: <b>Estelle Hatcher</b>	Pronouns: <b>She/her</b>
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Health Alteration/Concept and Exemplar: <b>Appendicitis</b>
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Date of Birth/Age: <b>09/30/1993</b>	Code Status: <b>unknown</b>
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Medical Record Number: <b>38919121</b>	Provider: <b>Dr. Sangerstien</b>
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SBAR report:

Situation: **patient came into ER with complaints of pain to rule out appendicitis. She is one day post-op from an appendectomy. She is NPO but is receiving parenteral feedings through**

Background: **NG tube. The client is alert and oriented. Her wound dressing is clean, dry, and intact.**

Assessment: **Her vital signs are T 101.2, BP 108/74, P 92, respirations 20, O2 sat is 99% on room air, no time was given within the chart.**

Recommendations: **The client ambulates with minimal support and family is at the bedside with her. Recommend labs are drawn immediately.**

Client specific considerations that surround diversity and inclusion (culture, religion, age, language):

**Patient speaks English, and is 31 years old. There were no culture or religious beliefs noted.**

Time	Blood Pressure	Heart Rate	Respirations	Temperature	SpO <sub>2</sub>
first day post op	108/74	92	20	101.2 F	99%
third day post op	110/70	87	18	99.7 F	99%

Neurologic Assessment Findings: **PERRLA bilaterally and accomadation. Patient alert and cooperative with care.**

Cardiovascular (Perfusion) Assessment Findings: **S1S2 sounds noted. All pulses are palpable.**

Respiratory (Gas Exchange) Assessment Findings: **Lung sounds equal and clear bilaterally.**

Oxygen Delivery: **room air**

Oxygen Amount: **not applicable**

GI/GU (Elimination) Assessment Findings: **Active bowel sounds in all four quadrants**

Skin (Tissue Perfusion) Assessment Findings: **Incision was clean, dry, and intact.**

Lab Results: **Not applicable**

Diagnostic Results: **Appendicitis**

IV site: **left forearm**

Medications	Dosage	Route	Frequency	Time
<b>Oxycodone</b>	<b>5 mg</b>	<b>oral</b>	<b>as needed</b>	<b>N/A</b>
<b>Dextrose 1/2 Saline with 20 KCL</b>	<b>125mL/hr</b>	<b>IV</b>	<b>Continuous</b>	<b>N/A</b>