

# Module Report

Simulation: HealthAssess 3.0

Module: Health history



Individual Name: **Samantha Garcia**

Institution: **Lakeview CON**

Program Type: **BSN**

## Overview Of Most Recent Use

	Date	Time Use	Score
Lesson	1/27/2025	21 min 5 sec	N/A

## Lesson Information:

### Lesson - History:

	Date/Time (ET)	Time Use	Total Time Use: 21 min
Lesson	1/27/2025 3:08:39 PM	21 min 5 sec	

*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, and the expert responses for comparing against student responses are indicated with bold text.*

<b>Amira Hill</b> <b>MRN:</b> 3453895 <b>Allergies:</b> none	<b>DOB:</b> 03/19/XXXX <b>Height:</b> 61 in <b>Weight:</b> 122 lb	<b>Attending:</b> Rani Patel, MD <b>Code Status:</b> Full code <b>Comments:</b> none
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### Notes

10.0 Minutes after start	Nursing/Clinician Note	Nurse

Reports volunteering at the library, engaging in a lot of activity with assisted living community. No concerns about food security or financial difficulties. Reports falling "a little less than a year ago"; tripped over a rug in her living room. Fell on hip and braced with right arm; had hip bruising and sore arm for about a week. Has given the rug away. Mother passed away when client was 14 from motor vehicle crash. Has a kitchen, but eats most meals in dining room of assisted living "that way I don't need to keep track of my nutrition, they make sure all the meals are balanced."

### Immunization Record

HH 10.0 Minutes after start

#### Vaccine Administration Information

Tetanus, diphtheria, pertussis (Tdap) (7yr and older) 5 years before start	Facility/Location where immunization was given: Comments:
Influenza	Facility/Location where immunization was given: Comments: <b>Receives every year in October</b>
Pneumonia vaccine	Facility/Location where immunization was given: Comments:
Varicella	Facility/Location where immunization was given: Comments: <b>Reports having 2 doses</b>

Flowsheet

Admission

HH 10.0 Minutes after start

**Informant(s)**

Informant - If not patient  
(name and relationship)

**Admission Problems**

Chief Complaint Recently moved to the area. States "This is my first time at this office I have osteoporosis and need to get my shot."

Principal Problem - Admission Diagnosis

**Additional Demographic Info**

Marital Status Widow

Is English Primary Language? Yes

Preferred Language if Not English

Educational Level Masters Degree

Religion/Spirituality "I'm a practicing Muslim." Request a female provider. States "I really like the community at the mosque I go to."

Occupation Retired librarian (20 years ago). Began doctorate work but didn't complete dissertation

Race/Ethnicity Black or African American

Comments Client identifies as female gender and prefers the pronouns she/her/hers. Female sex assigned at birth

**Home Medication List**

<p>Denosumab Every 6 months, Subcutaneous</p> <p>Ordered by: Reason: Osteoporosis Start Date: End Date:</p>	<p>Is patient taking medication? Taking</p> <p>Last taken: Last does 6 moths ago; has taken for 9 years</p>
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## Past Medical History

### Pertussis (Whooping cough)

Date of diagnosis: **During grade school**  
 Details and treatments: "I got really sick"

### Varicella (chickenpox)

Date of diagnosis: **During grade school**  
 Details and treatments:

### "Occasional cold"

Date of diagnosis: About once a year;  
 last 6 months ago  
 Details and treatments:

### Menopause

Date of diagnosis: **During her 50s;**  
**denies bleeding or spotting post-**  
**menopause**  
 Details and treatments:

### Measles

Date of diagnosis: **During grade school**  
 Details and treatments:

### Osteoporosis

Date of diagnosis: **Age 75**  
 Details and treatments: **Bone**  
**density test at diagnosis. Began**  
**denosumab injection at that time.**

## Past Surgical History

### Cesarean Section

Has had 2 pregnancies, 2 Cesarean births at term;  
 one 7 pounds, the other 7 pounds 3 ounces

Date of procedure:

## Family History

### Myocardial Infarction

Family members affect: **Pt's Father**  
**Cause of death at age 86**

**Social/Environmental Safety Screening**

Patient lives	Alone
Comments	Living in own apartment at an assisted living facility. No concerns about housing situation.
Support Systems	Reports help with errands and appointments from daughter and son-in-law. Sees family once a week, has "lots of friend," joined a sewing club. Apartment complex has a van for transportation, client used for appointment today. Denies transportation issues.
Abuse/Neglect/Exploitation screen	
Observations - Neglect/Abuse	
Abuse/Neglect Comments	Reports feeling safe in current situation

**What impairments does the patient have that affects life at home and safety?**

Vision impairment: Wears glasses for reading only  
 Hearing impairment: Wears a hearing aid

**Flowsheet**

*Assessment*

HH 20.0 Minutes after start

**Eyes, Ears, Nose, Throat**

Eyes	Glasses
Eyes Comments	
Ears	Hearing Aid
Ears Comments	Glasses for reading only.
Nose, Throat	
Nose, Throat Comments	

## Integumentary

Skin Color

Skin Temperature/Condition

Skin Turgor

Skin Comments

Reports "skin can be very dry and itchy." Relieved by fragrance-free lotion daily, year round. Worse during winter.

## Musculoskeletal

RUE

LUE

RLE

LLE

Musculoskeletal Comments

Reports feeling "a little stiff in the morning." Relieved by stretching during water aerobics. Attends women's water aerobics at the senior center "a few days a week."

Reports muscle and joint pain; states "my hips give me trouble sometimes." Relieved by sitting and water aerobics. Reports that when she does have paint, it is a 1 to 2 on 0 to 10 scale.

## Gastrointestinal

Abdomen

Bowel Sounds

Passing Flatus

Last Bowel Movement

GI Comment

Reports constipation at times; attributes to Halal cheese. Tries to avoid eating it.

## Pain Assessment

Pain Location

Numeric Pain Rating

0

Pain Rating – Faces

Pain Relieved By

Pain Comments