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Shadow health musculoskeletal subjective questions

By: emmbee07 • 2 days ago Shadow Health Musculoskele life assessment Subjective: HPI:Ms. Jones visits clinics and presents back pain, which she states began torturing her three weeks before. She attributes the back pain to pampering as she lifts a heavy box to a friend as the friend moves. She claims that before the incident, she lifted several boxes without hurting her back. Furthermore, it states that the purpose of the presentation relates to increased and continuous pain, which has affected its daily life activities. Social history: Mrs. Jones's job is mostly supervisory, although she reports that she may have to sit or stand for a long time.......... tobacco, alcohol and illicit drugs. She doesn't practice. General: Denies changes in weight, fatigue, weakness, fever, chills and night sweats. • Musculoskelete: Negates muscle weakness, pain, joint instability or swelling. She claims to have difficulty with the range of motion...... lower back affected her comfort as she slept and sat in class........ numbness, tingling, radiation, or bowel/bladder dysfunction. He denies previous musculoskele life injuries or fractures. • Neurologist: Denies loss of sensation, numbness, burning sensation, trembling, weakness, paralysis, fainting, fainting or seizures. ORDER NOW FOR INSTRUCTIONS COMPLIANT, ORIGINAL PAPER NR 509 Week 3 Shadow Health Musculoskele life assessment Target: ROS: General: Ms. Jones is a pleasant, obese 28-year-old African-American woman with no acute distress. She's awake and oriented. She maintains eye contact during interviews and examinations. Musculoskeletal: Bilateral upper extremities without muscle atrophy or joint deformity. Bilateral upper extremities with full range of shoulder, elbow and wrist movements........... upper extremity strength equal to 5/5 in neck, shoulders, elbows, wrists, arms. Bilateral strength of the lower extremities is equal to 5/5 in hip flexors, knees and ankles. HPI According to Bickley (2013) a clear, well-organized clinical record is one of the most important additions to patient care and information gathering using open questions, and then closed completed questions to encourage concrete answers. This paper provides an overview of clinical reasoning and decision-making by nurses after providing complete advanced health history and physical evaluation. It will also give insight into the care process and how it can improve clinical thinking, reasoning and judgement in Practice. Ms. Jones is a pleasant, 28-year-old obese African-American single woman posing for a full physical examination and assessment of a right foot injury. It's the primary source of history. Ms. Jones offers information freely and without contradictions. The speech is clear and coherent. It maintains eye contact throughout the Ms. Jones is awake and oriented, sitting upright on the interrogation table and not in obvious trouble. It is well-groomed, well developed and appropriately dressed with good hygiene. The main complaint is a headache. NR 509 Week 3 Shadow Health Musculoskele matter assessment Section Shadow Health Physical assessment Section Shadow Health Assessment Criteria Pts These criteria are associated with learning outcomeSubjection data, organization, communication, and summary (DCE score or transcript) 25.0 pts above average- DCE score greater than or equal to 93; Comprehensive introduction with expectations of exams verbalised; questions addressed in a non-judged manner; professional language to be practiced; issues well organised; appropriate closure summary of the findings verbalised to the patient. 21.0 pts Average DCE score greater than or equal to 86-92; Adequate introduction; some questions are addressed in a non-judged way; professional language that is mainly practiced; issues that are generally organised; somewhat complete closure. 10.0 pts below average- DCE score higher or equal to 80-85; Incomplete introduction; many questions are addressed in a judgmental manner; some professional language used; issues are somewhat organised; incomplete closure. 0.0 pts Unsatisfactory - DCE score less than or equal to 79; Missing introduction; issues worded in a damning manner; a little professional language; issues disorganised; closing is missing. 25.0 pts This criterion is related to learning outcome dataObjective data, physical examination, interpretation of findings, assessment and documentation 20.0 points above average - The physical assessment documentation includes all relevant body systems; all common and abnormal findings; documentation reflects professional language; the treatment plan includes each of the following components: diagnostics, medicines, education, counselling/referral and monitoring planning. 16.0 pts The average physical assessment documentation does not have sufficient details relating to one or two relevant body systems; or identifies ≥ 50% of common and abnormal findings; or documentation lacks professional language; or the treatment plan does not have one or two components (diagnostics, medicines, education, counselling/referral or follow-up planning). 8.0 pts below average - The physical assessment documentation lacks sufficient details relating to three or more relevant body systems; or identifies < 49% of common and abnormal findings; or documentation includes unprofessional language; or treatment plan has no three or more components (diagnostics, medicines, education, counselling/referral or monitoring planning). 0.0 pts Unsatisfactory- No documentation for physical evaluation or no treatment plan. 20.0 pts This criterion is associated with learning outcomeSelf-Reflection 5.0 pts above average- responds to of the three questions to think about; and provides performance analysis; and reflection posts written in a professional language; and reflection posts show insight. 3.0 pts Average- Answers two out of three thinking questions; or provides limited self-analysis of performance; or the reflection posts are somewhat vague about the student's task and experience; or posts for thought have no insight. 2.0 pts below average- Answers one of three thinking questions; or does not provide self-analysis of performance; or reflections are not related to the task and experience of the learner; or does not provide insight 0.0 pts Unsatisfactory - No thinking posts for the task. 5.0 pts Total points: 50.0 Get 10% off order above $50 Use the following coupon: SAVE15 NR 509 :Shadow Health Musculoskeletal Assessment Essay Shadow Health Musculoskeletal Assessment Subjective: HPI:Ms. Jones visits clinics and presents back pain, which she says she started torturing her three weeks before. 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This criterion is related to data on learning outcomeObjective data, physical examination, interpretation of findings, assessment and documentation 20.0 points above average - Documentation for physical assessment includes all relevant body systems; all common and abnormal findings; documentation reflects professional language; treatment plan includes any diagnostics, medicines, education, counselling/referral and monitoring planning. 16.0 pts The average physical assessment documentation does not have sufficient details relating to one or two relevant body systems; or identifies ≥ 50% of common and abnormal findings; or documentation includes unprofessional language; or treatment plan has no three or more components (diagnostics, medicines, education, counselling/referral or follow-up planning). 8.0 pts below average - The physical assessment documentation lacks sufficient details relating to three or more relevant body systems; or identifies < 49% of common and abnormal findings; or documentation includes unprofessional language; or treatment plan has no three or more components (diagnostics, medicines, education, counselling/referral or monitoring planning). 0.0 pts Unsatisfactory- No documentation for physical evaluation or no treatment plan. 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