PATIENT CHART

Chart for Sherman “Red” Yoder Simulation #3

Download these tools and attach to chart:

* Katz Index of Independence in Activities of Daily Living

<https://hign.org/consultgeri/try-this-series/katz-index-independence-activities-daily-living-adl>

* [The Lawton Instrumental Activities of Daily Living (IADL) Scale](http://consultgerirn.org/uploads/File/trythis/try_this_23.pdf" \t "_blank)

<https://hign.org/sites/default/files/2020-06/Try_This_General_Assessment_23.pdf>

* Transitional Care Model (TCM): Hospital Discharge Screening Criteria for High Risk Older Adults

<https://hign.org/sites/default/files/2020-06/Try_This_General_Assessment_26.pdf>

Add any other relevant information from Simulation 1 and 2 charts

Report Students Will Receive Before Simulation

**Time:** 0700

**Person providing report:** Nurse ending shift

**Situation:** 80-year-old male who was treated for infected foot wound and sepsis. Stable and preparing for discharge.

**Background:** Red Yoder is an 80-year-old type 2 diabetic treated with metformin and glipizide. He was healthy, alert, and active until he developed a pressure ulcer on his right great toe about 5 weeks ago. The wound became infected and he was admitted through the ED with sepsis. He was treated with IV antibiotics and improved. He lives alone in his home and has a son and his family living nearby. The family have been involved in his care and have expressed concern about Red’s ability for care for himself if he is discharged back to his home.

**Assessment:** Vital signs have been stable. He is able to ambulate to the bathroom with assistance, but he is weak. Living arrangements after discharge need to be discussed.

**Recommendation:** Do a head to toe assessment, assess his wound, and use the following tools to help determine discharge planning: Katz Index, Lawton IADL Scale, and TCM Hospital Discharge Screening Criteria tool.

Provider’s Orders

**Allergies/Sensitivities:** None known

|  |  |
| --- | --- |
| **Date/Time:** |  |
|  | Plan discharge for tomorrow morning.  Consult with Home Health and schedule home visit for tomorrow.  Return to office in one week for follow up. Frank Baker, MD |

Nursing Notes

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| --- | --- |
| **Date/Time:** |  |
|  | Patient is up independently, moving slowly with assistance of walker. Will be discharged home tomorrow. Family still discussing whether patient will go to his own home or to son’s home. K. Anderson, RN |