

CASE STUDY WITH RUBRIC

GI Bleeding

Cheyenne Smith, age 40, was transferred from the emergency department to the high acuity Med/Surg unit with a diagnosis of probable gastrointestinal tract bleeding. The ED history states he had been seen as an outpatient 1 week ago because of epigastric pain after heavy alcohol consumption at his 40th birthday party. He stated he had been “hungover and nauseated” for over 48 hours and has had severe “stomach pain” since the party. Gastritis was diagnosed and he was sent home with antiemetic and antacid medications and advised to stop smoking. He returned to his job of restaurant manager, but complains that he has not felt well since the party. In addition to the prescribed medications from the ED visit, he has been taking two buffered aspirin “a few times a day” for stomach pain. On his return to the ED on this visit he complained of continued nausea, two episodes of vomiting large amounts of “dark brown” liquid, and complaints of extreme weakness. He also experienced dizziness when he stood or sat up abruptly. His initial admission vitals and laboratory data at 6pm BP 96/60; HR 102, RR 20, Temp 37.9 C, Hgb 11; Hct, 29, WBC 1200. You arrive 14 hours later for your shift at 0800 after Mr. Smith had an “unstable” night.

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GI Bleed Case Study Grading Rubric (20 POSSIBLE POINTS)					
	4 points	3 points	2 points	1 points	0 points
1. Describe the general demographics of the patient: age, gender, and admitting diagnosis.				Accurately identifies age, gender and admitting diagnosis	Does not identify age, gender, and admitting diagnosis
2. What is the pertinent past medical history, past social history, and current medications?			Accurately identifies pertinent PMH, SH, and current medications	Identifies PMH, SH, and current medications, but not pertinent to case study	Does not identify PMH, SH, or current medications
3. What is the relevant assessment data for their admitting diagnosis? What signs and symptoms exist?		Identifies all relevant assessment data for diagnosis. Identifies all signs and symptoms that are applicable to diagnosis.	Identifies all relevant data for admitting diagnosis; identifies signs and symptoms but not all are applicable to admitting diagnosis.	Identifies assessment data and signs and symptoms. Neither are specific to pt's admitting diagnosis	Does not identify relevant assessment data or signs and symptoms to pt's admitting diagnosis
4. What laboratory values are important to assess?			Identifies all laboratory values that are relevant to case	Identifies most laboratory values that are relevant to case, but omits others	Does not identify laboratory values relevant to case
5. What are the two primary nursing diagnoses for this patient?			Accurately identifies two pertinent primary	Identifies nursing diagnoses. 1 or more is not primary	Does not correctly identify any nursing

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			diagnoses for this patient written in the correct format.	to case study or in correct format.	diagnoses for patient.
6. What are two nursing interventions, per diagnosis, for this patient?			(For each nursing diagnosis) Accurately identifies correct intervention for patient applicable to nursing diagnosis.	(For each nursing diagnosis) Identifies intervention but not applicable to nursing diagnosis	Does not identify nursing diagnosis
			2 points each (3-4 points total)	1 points each (1-2 points total)	
7. How would you evaluate the effectiveness of your interventions?		Accurately identifies expected outcomes of nursing interventions. Evaluation time specific and measurable.	Accurately identifies expected outcomes of nursing interventions, but unclear on measurement.	Identifies expected outcomes of patient's care, but not consistent with identified nursing interventions.	Does not identify any evaluation strategies of nursing interventions.
8. What education would be important to provide to the patient and the family about the diagnosis and your interventions?		Correctly identifies education topic pertinent to patient's care trajectory. Individualizes plan to patient's	Correctly identifies education topic pertinent to patient's care trajectory. Does not individual plan to	Identifies education topic, but not pertinent to patients care trajectory.	Does not identify education topic.

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		social setting. Identifies family support and includes in plan of care.	incorporate patient's social setting or family support.		
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