**SECTION 1 – INTRODUCTION TO PROBLEM**

Linear pages w/ access to library, notebook

**SECTION 2 – PATIENTS**

Patient home screen

**NOTE:** SIMULATION MUST RANDOMLY PRESENT ORDER OF PATIENTS—MR SMITH CAN’T ALWAYS APPEAR FIRST

**NOTE**: EACH PATIENT PROFILE STARTS A UNIQUE PATH THROUGH THE SIMULATION THAT WILL END WITH THE SAME CONCLUSIONS/DIAGNOSIS PAGE

**There are six patients in your waiting room. Who would you like to examine first? Click the patient chart of the person you would like to examine first.**

**MR. SMITH**

Sex: Male

Age: 25

Chief Complaint: Burning Feet and Toes

**MS. JONES**

Sex: Female

Age: 45

Chief Complaint: Check up

**MR. ANDERSON**

Sex: Male

Age: 50

Chief Complaint: Thirsty and needs to use bathroom frequently

**MS. WILLIAMS**

Sex: Female

Age: 63

Chief Complaint:

Can’t sleep

**MR. LANE**

Sex: Male

Age: 42

Chief Complaint:

Shortness of breath

**MS. WATSON**

Sex: Female

Age: 52

Chief Complaint:

Check up

Library

Notebook

Go Back

**Patient Profile # 1 – Mr Smith**

**NOTE: ALL PATIENTS WILL OPEN WITH THE DIALOUGE: WHAT BRINGS YOU HERE TODAY? WITH THE PATIENT RESPONDING WITH THEIR CHIEF COMPLAINT.**

Library

Notebook

Go Back

My feet and toes feel like they are burning.

Library

Notebook

Go Back

What brings you here today?

My feet and toes feel like they are burning.

**THEN, STUDENT WILL BE PRESENTED WITH A POP UP WINDOW SAYING:**

**What would you like to do now?**

Listen to the patient’s heart

Listen to the patient’s lungs

**Check the patient’s height, weight, and BMI**

Examine the patient’s feet for sensation

Examine the patient’s feet for sores

**Ask the patient if he has diabetes**

**Ask the patient about his diet**

**Check the patient’s blood sugar**

Check the patient’s eyes

**Ask if the patient smokes**

**Ask patient how much he exercises**

***Ask if the patient has any family members with diabetes***

***Ask if the patient has any family members who are obese***

***Ask if the patient has any family members who had a stroke***

***After checking 5 items, link appears “I’ve finished examining the patient”***

**NOTE: WE MAY ALSO NEED TO RANDOMIZE THE PRESENTATION OF ITEMS**

**NOTE: WOULD IT BE POSSIBLE TO HAVE CERTAIN WORDS WITH A “HOVER OVER” OPTION AND A DEFINITION?**

**NOTE: THERE MAY BE SOME PATIENT SPECIFIC QUESTIONS**

**DETAILS OF EACH TEST**

For heart—link with two sound clips “this is a normal sounding heart” and “this is your patients heart” –student clicks to listen

Do you think your patient’s heart sounds normal (yes/no)?

Links back to “What would you like to do now”?

For lungs—just like the heart, except different sound clips

Height weight and BMI—window appears Your patients height is X, weight is Y making their BMI Z. Your patient is normal weight/overweight/obese (this information is recorded in students notebook)

Examine patient’s feet for sores—same thing as heart and lungs-- picture of healthy feet, picture of unhealthy feet…do you think your patients feet are healthy? (yes/no)

Diabetes—patient will either respond yes I have type I/type II diabetes, or no I don’t have diabetes

Diet- patient responds “I eat mainly…..”

Blood sugar—window appears like in height/weight that has the number and a note that says this is HIGH, NORMAL or LOW

Patient’s eyes – same as heart/lungs

Smokes – patient will respond yes, no, I used to

Exercises – yes, no

Family member—patient will respond yes, my X or no

**MR SMITH’S RESPONSES**

Listen to the patient’s heart - NORMAL

Listen to the patient’s lungs - NORMAL

Check the patient’s height, weight, and BMI – 5’7 115 lbs, BMI 18 underweight

Examine the patient’s feet for sensation- ABNORMAL

Examine the patient’s feet for sores-NORMAL

Ask the patient if he has diabetes TYPE I DIABETES

Ask the patient about his diet FRUIT, VEGETABLES, MILK

Check the patient’s blood sugar, 170

Check the patient’s eyes: ABNORMAL

Ask if the patient smokes: NO, NEVER SMOKED

Ask patient how much he exercises: YES, I LIKE TO RUN

Ask if the patient has any family members with diabetes, NO

Ask if the patient has any family members who are obese, YES, both parents, grandfather

Ask if the patient has any family members who had a stroke, YES, grandfather

**MS JONES’ RESPONSES**

Listen to the patient’s heart - NORMAL

Listen to the patient’s lungs - NORMAL

Check the patient’s height, weight, and BMI – TBD overweight

Examine the patient’s feet for sensation- NORMAL

Examine the patient’s feet for sores-NORMAL

Ask the patient if he has diabetes TRYING TO REVERSE TYPE II DIABETES

Ask the patient about his diet: FRUIT, VEGETABLES, MILK

Check the patient’s blood sugar, 91 (Not diabetic)

Check the patient’s eyes: NORMAL

Ask if the patient smokes: NO, NEVER SMOKED

Ask patient how much he exercises: YES, I STARTED BIKING TO WORK

Ask if the patient has any family members with diabetes, YES, BOTH PARENTS

Ask if the patient has any family members who are obese, YES, both parents,

Ask if the patient has any family members who had a stroke, NO

**MR ANDERSON’S RESPONSES**

Listen to the patient’s heart - NORMAL

Listen to the patient’s lungs - NORMAL

Check the patient’s height, weight, and BMI – TBD OBESE

Examine the patient’s feet for sensation- NORMAL

Examine the patient’s feet for sores-NORMAL

Ask the patient if he has diabetes: NO (Question prompt: Do you think Mr Anderson has diabetes?)

Ask the patient about his diet: FRIED CHICKEN, HAMBURGERS, FRENCH FRIES, COKE

Check the patient’s blood sugar, 175 (HIGH, DIAGNOSIS AS DIABETIC)

Check the patient’s eyes: NORMAL

Ask if the patient smokes: YES, I AM A SMOKER

Ask patient how much he exercises: NO, I DON’T EXCERCISE

Ask if the patient has any family members with diabetes, YES, MOM AND SISTER

Ask if the patient has any family members who are obese, YES, MOM, DAD, AND SISTER

Ask if the patient has any family members who has a stroke: MOM

**MS WILLIAMS’ RESPONSES**

**NOTE: MS WILLIAMS ONLY HAS ONE LEG AND IS IN A WHEEL CHAIR**

Listen to the patient’s heart - ABNORMAL

Listen to the patient’s lungs - ABNORMAL

Check the patient’s height, weight, and BMI – TBD OBESE

Examine the patient’s feet for sensation- ABNORMAL

Examine the patient’s feet for sores-NORMAL

Ask the patient if he has diabetes: YES

Ask the patient about his diet: FRIED CHICKEN, HAMBURGERS, FRENCH FRIES, COKE

Check the patient’s blood sugar, 205 (HIGH)

Check the patient’s eyes: ABNORMAL

Ask if the patient smokes: YES, I AM A SMOKER

Ask patient how much he exercises: NO, I DON’T EXCERCISE

Ask if the patient has any family members with diabetes, YES, BOTH PARENTS

Ask if the patient has any family members who are obese, YES, BOTH PARENTS

Ask if the patient has any family members who has a stroke: YES, BOTH PARENTS

Ask patient why are they having trouble sleeping? ANSWER: BECAUSE I CAN’T BREATHE LAYING DOWN. I HAVE TO SLEEP IN A RECLINER IN THE LIVING ROOM. THE KIDS ARE NOISY AND WAKE ME UP.

**MR LANE’S RESPONSES**

**MR LANE LOOKS SICK—HE’S RUNNING A FEVER**

Listen to the patient’s heart - NORMAL

Listen to the patient’s lungs - NORMAL

Check the patient’s height, weight, and BMI – TBD OBESE

Examine the patient’s feet for sensation- NORMAL

Examine the patient’s feet for sores-ABNORMAL

Ask the patient if he has diabetes: YES

Ask the patient about his diet: FRUIT, SALAD, MILK

Check the patient’s blood sugar, 240 (VERY HIGH, DIAGNOSIS AS DIABETIC)

Check the patient’s eyes: NORMAL

Ask if the patient smokes: YES, I AM A SMOKER

Ask patient how much he exercises: NO, I DON’T EXCERCISE

Ask if the patient has any family members with diabetes, YES, MOM AND SISTER

Ask if the patient has any family members who are obese, YES, MOM, DAD, AND SISTER

Ask if the patient has any family members who has a stroke: MOM

Check the patient’s temperature—RUNNING A FEVER

**MS WATSON’S RESPONSES**

Listen to the patient’s heart - NORMAL

Listen to the patient’s lungs - NORMAL

Check the patient’s height, weight, and BMI – TBD OBESE

Examine the patient’s feet for sensation- NORMAL

Examine the patient’s feet for sores-ABNORMAL

Ask the patient if he has diabetes: YES

Ask the patient about his diet: FRUIT, SALAD, MILK

Check the patient’s blood sugar, 120 (HIGH, BORDERLINE DIABETIC)

Check the patient’s eyes: NORMAL

Ask if the patient smokes: YES, I AM A SMOKER

Ask patient how much he exercises: NO, I DON’T EXCERCISE

Ask if the patient has any family members with diabetes, YES, MOM, DAD, GRANDPARENTS, BROTHER, SISTER

Ask if the patient has any family members who are obese, BROTHER, SISTER, MOM, DAD

Ask if the patient has any family members who has a stroke: GRANDPARENTS

**AFTER STUDENT SAYS THEY ARE FINISHED EXAMINING THE PATIENT, ALL PATHS DIRECT TO DIAGNOSIS. (WHICH ISN’T FINISHED YET)**

**(tentative list)**

**Is [patient’s name] getting better or worse?**

Likert scale/slider bar 1-5

**Do you think [patients name] is healthy?**

YES/NO

**Why is this person [healthy??]?**

Drag/drop evidence? Highlight in notebook?

**Why do you think the community is so unhealthy?**

(open text box)

Two links appear: See More Patients and after seeing at least 3 patients, Make Final Recommendation