



NR603 Week 6 Assignment: Clinical Education Associated (CEA) Pre-Diagnostic Exam Case Study Part 1

Step 1: Select a chief complaint that meets the following criteria:

- Related to the body system from your lowest scoring CEA content area- which was integumentary
- Commonly seen in clients in primary care settings.
- Not covered in this term's iHuman virtual patient encounter.

Step 2: Create an original case study using the criteria outlined below, focus on a Chief Complaint, NOT an individual diagnosis.

Include the following sections:

I. Application of Course Knowledge: Answer all questions/criteria with explanations and detail.

- Client Information and Social History:** Include the client's name or initials, date of birth, chief complaint, demographics, any client allergies, and at least three social history elements (e.g., substance use, marital status, living conditions, social support, etc.).
 - Client: T.R.
 - Date of Birth: 08/14/1992
 - Chief Complaint: "I have a red, itchy rash that keeps spreading."
 - Demographics: 33-year-old White female, English-speaking
 - Allergies: Penicillin (urticarial reaction in childhood), Nickel (contact rash with costume jewelry)
 - Social History: T.R. lives in an apartment with her fiancé and reports a stable home environment. She works full-time as a hair stylist, a role that involves frequent handwashing and repeated exposure to hair products and gloves. She denies tobacco use, vaping, or illicit drug use and reports consuming alcohol socially approximately once per week. She identifies her fiancé and sister as primary sources of emotional support and describes her current stress level as moderate due to work demands. She reports recent use of new fragranced personal-care products, including body wash and lotion.
- Assessment Data:** Include the chief complaint, history of present illness, and associated physical exam findings.
 - Chief Complaint: "Red, itchy rash that keeps spreading."



- History of Present Illness: T.R. presents with a 9-day history of a progressively spreading pruritic rash. The rash initially appeared on the right wrist and gradually extended to involve the bilateral forearms, anterior neck, and upper chest. She describes the rash as red, dry, and intensely itchy, with pruritus rated at 7/10 in severity. Symptoms are most pronounced at night and following hot showers. She reports scratching to the point of superficial skin breakdown in several areas. She denies fever, chills, fatigue, joint pain, facial swelling, oral lesions, shortness of breath, or wheezing. She has not started any new prescription medications but reports beginning an over-the-counter immune supplement approximately two weeks prior to symptom onset. She notes recent