| Nama a . | Due Date |
|----------|----------|
| Name: | Due Date |
| | |

College & Career Awareness Cycle: Systems, Poisonous Picnic



Overview:

Essential question:

Terms: Empathy, Epidemiologist, Health Informatics

Checklist:

___Record input

____ Use the slides from the PowerPoint to collect data describing the people who contributed to the picnic. Match the people to the pictures that represent their part in this scenario by writing the LETTER of the person in the square to the left of the picture.

Mission Possible – Activity 1

| Picture | Letter of First Name | Person Description |
|---------|----------------------------|--------------------|
| | | |
| | | |
| | | |
| - O. | | |

| Name: | Due Date | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| Recor | Record here any additional info about the case: | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Mission Possible – Activity 2 Patient Interview Split into pairs. One of you will be the admittance clerk (first face you see when you go to the hospital.) It's time to practice empathy, putting yourself in someone else's situation. (Don't get confuse empathy with sympathy, feeling sorry or bad for someone.) The other person will be the patient. | | | | | | | | |
| 1. | What is your name? | | | | | | | |
| 2. | What is your age? | | | | | | | |
| 3. | What is your chief complaint (what is bothering you today)? | | | | | | | |
| 4. | Did this feeling you have come on suddenly or gradually? | | | | | | | |
| 5. | Is there anything you do to make this feeling better or worse? | | | | | | | |
| 6. | What does this feel like? | | | | | | | |
| 7. | Does the feeling move anywhere else on your body? | | | | | | | |
| 8. | On a scale from 1-10 with 10 being the worst feeling you can imagine, how would you rate what you're feeling? | | | | | | | |
| 9. | When did this feeling start? | | | | | | | |
| 10. | . Are you allergic to anything? | | | | | | | |
| 11. | . Do you take any medications? | | | | | | | |
| 12. | . Do you have any past medical history? | | | | | | | |
| 13. | . What was the last thing you had to eat or drink? | | | | | | | |
| 14. | . What were you doing when this started? | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Name: Due Date

- #1 TANNER Sick, ham & salad, water
- #2 Ana Sick, ham, salad, punch
- #3 Megan Sick, salad, punch
- #4 Jim Sick, ham, salad, punch
- #5 BriAnn Not sick, salad, water Did not get sick
- #6 Juan Sick, ham, salad, water, and punch
- #7 Tyson Well, ham, salad, and water
- #8 Paul Sick, ham, salad, and fruit punch
- #9 Maria Sick, ham and fruit punch
- #10 Sarah Sick, ham, water, and fruit punch
- #11 Debbie Sick, ham, salad, water, and punch
- #12 Allen Sick, ham, salad, water, and punch
- #13 Bridget Well, ham, salad, and water
- #14 Laura Well, ham and water
- #15 Sionne Well, ham, salad, and water

Use the info from this chart to fill in the chart below.

Mission Possible – Activity 3

| # | NAME | | | НАМ | | SALAD | | WATER | | FRUIT PUNCH | |
|----|---------|-------|------|------|------|-------|------|-------|------|-------------|------|
| | | WELL | SICK | WELL | SICK | WELL | SICK | WELL | SICK | WELL | SICK |
| 1 | Tanner | | | | | | | | | | |
| 2 | Ana | | | | | | | | | | |
| 3 | Megan | | | | | | | | | | |
| 4 | Jim | | | | | | | | | | |
| 5 | BriAnn | | | | | | | | | | |
| 6 | Juan | | | | | | | | | | |
| 7 | Tyson | | | | | | | | | | |
| 8 | Paul | | | | | | | | | | |
| 9 | Maria | | | | | | | | | | |
| 10 | Sarah | | | | | | | | | | |
| 11 | Debbie | | | | | | | | | | |
| 12 | Allen | | | | | | | | | | |
| 13 | Bridget | | | | | | | | | | |
| 14 | Laura | | | | | | | | | | |
| 15 | Sionne | | | | | | | | | | |
| | | | | | | | | | | | |
| | | TOTAL | | HAM | | SALAD | | WATER | | FRUIT PUNCH | |
| | | NUM | | # | % | # | % | # | % | # | % |
| | | MEL | | | | | | | | | |
| | | WELL | | | | | | | | | |
| | | SICK | | | | | | | | | |

To figure the percentage divide the total number of people (15) by the total for the well or sick.

| Name: Due Date | | | | | | | | |
|---|-----------------|-------------|---------------|----------------|---------------------------|-------------------|--|--|
| Fill in the information on this chart by walking around the room to find the needed information. | | | | | | | | |
| ILLNESS CHART: | | | | | | | | |
| | 1 1 | | | | 0.1.1 | | | |
| Possible illnesses | Influenza (flu) | Hepatitis A | Salmonella | Lead Poisoning | Cadmium Poisoning | | | |
| Cause | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Time it takes to | | | | | | | | |
| get sick | | | | | | | | |
| | | | | | | | | |
| Symptoms - | | | | | | | | |
| what happens to the patient | | | | | | | | |
| | | | | | | | | |
| Olim and the si | | | n autout Male | | ala al da sala a assila a | ode at the atable | | |
| Clip out the illness chart and tape it into your output. Make sure you add a label to describe what the table contains. | | | | | | | | |
| Turn in study | y guide. | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |