



## Patient Case

Date 01 / 01 / 2026

Week 3 of 14

**Student: who took the lead in completing each step of NCPM to a safe and competent standard?**

S = Student (req'd minimal help to meet standard) OS = Other Student PE = Practice Educator S+PE = Shared equally

1	2	3	4	5	6	7	8
S +PE	S	S+PE	S+PE	S+PE	S+PE	S+PE	S+PE

**Student: write-up a patient case, incorporating feedback received on your initial effort**

		PE comments
Age: <u>89 years</u> Gender: <u>Female</u>		
PmHx	Epilepsy, hypertension, osteoporosis	<p>Prompted on what to put in each section – keep referring to NCPM checklist</p> <p>Refer to HSE abbreviations list to help record relevant investigations in step 1. O<sub>2</sub> sats are missing but relevant here</p> <p>Indicate H, L, N in biochemistry. Also indicate the direction (increasing, decreasing, or no change), i.e. insert ↑, ↓, ↔</p> <p>Use nursing notes for step 4. Fluid balance missing</p>
SurgHx	Right THR	
SHx	Widowed, lives alone, two children living nearby, NOK is daughter YL	
1. P/C Investigations	Found unresponsive with L-sided weakness, admitted via A&E CTB on admission – right ICH confirmed. Repeat CTB today (due to reduced alertness) shows increased blood volume, oedema, and midline shift. New AFib confirmed. Apyrexia at 37.6°C	
MDT recs	NPO and for NG feeding, as per medical team and SLT. NG placed today	
2.	K <sup>+</sup> 4.4, Na <sup>2+</sup> 150, Mg <sup>2+</sup> 0.8	
3.	Phenytoin, Furosemide, KCl, Augmentin, Microlax	
4.	BNO since admission, on IV fluids, not alert, not responsive	
5. Height	1.52m	
Weight	64.5kg (recorded on previous admission, 6/12 ago)	
BMI	27.9kg/m <sup>2</sup>	
Weight history	No recent changes (reported by daughter)	
Requirements	25kcal/kg = 1613kcal, 1.0-1.5g/kg protein = 65-97g, 30mls/kg = 1935mls	
6.	NPO	
7.	NPO, for NG feeding	
8. Start NG feeding	Jevity Plus HP over 12 hours. Day 1 = 30mls for 4 hours, 50mls for 4 hours, and 70mls for 4 hours. Intake 780kcal, 49g protein, and 600mls feed	
Monitor	Bowels, fluid balance, electrolytes ↔	
Liaise í staff	Medical staff re: laxatives, KCl, and monitoring bloods as feed commences Discuss feeding regimen with nursing staff	
Documentation	Write regimen and medical note	
Review	1/7	



[patient case cont'd]

	<b>PE comments</b>
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**Student: write a brief skills-based reflection on this case**

1. State 1 skill that you performed especially well or that has shown improvement.
2. State 1 skill that was challenging to perform. What factors made this skill challenging to perform?

1. My familiarity with working through notes has improved. It took about 10 minutes less to work through the chart this week, compared to last week. I will keep a copy of common abbreviations in my folder to make the collection of background information more efficient.

2. I was nervous approaching the nurses to ask for information, as I could see they were very busy. I think my confidence approaching other staff needs improvement, so I'll ensure that I have a clear list of information that I need to acquire, to help me remain succinct when speaking with other HCPs.

**PE: tick to confirm that the NCPM grid on page 1 accurately reflects the contributions to this case**



**PE: record any additional comments on the skills or behaviour of the student during this case**

*Demonstrated good rapport with family – showed good empathy toward the patient's daughter, who expressed concern about the feeding tube being withdrawn. Student appropriately recognised their limits and requested that the PE step in at this point.*

**Student and PE: identify 1-2 SMART actions the student should take to make progress over the next week**

1. *Keep the NCPM checklist and HSE abbreviations list in your folder*
2. *Systematically check medical, bed-end, and nursing notes. Talk to staff to address gaps in information*

**Student signature** \_\_\_\_\_ **Print name** \_\_\_\_\_

**Dietitian signature** \_\_\_\_\_

**Print name** \_\_\_\_\_

**CORU registration number** DI \_\_\_\_\_