Medi-EYE GLOBAL

*The gray cells marked with "VR collaboration scenario" are examples of collaboration with the VR kit for Medi-EYE.
https://medi-lx.jp/cont/servise_vr_medical_eye/

						recommended use area						
Case Classification	Patient's name	age	sex	Diseases and surgical procedures	Summary (Case study points in student teaching)	Adult Acute	Adult Chronic	Gerontological	Home Care	Mental Health	Child Health	Women's Health
basic	Makiko Kobe	80s	woman	Aortic valve stenosis VR Cooperation Scenario	Simulated case of valve replacement for aortic stenosis. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: approximately 10 days, via ICU, general ward, and up to 8 days postoperatively. (2) Perform preoperative extubation weaning, SAT, and SBT evaluations (3) During hospitalization, delirium is noted and care for prevention/prevention of delirium is discussed.	○						
basic	Seiji Sakai	60s	man	Rectal cancer VR Cooperation Scenario	Simulated case of Miles implementation for rectal cancer. Key points of cases during exercise design and alternative practice:. (1)Period of hospitalization: About 10 days. After admission to a general hospital or discharge from a home (2) Observation of general condition immediately after surgery and early weaning from bed (3) Stoma management and patient guidance	○	○					
basic	Jiro Nakamura	50s	man	Hepatocellular carcinoma VR Cooperation Scenario	Simulated cases of hepatic encephalopathy and terminal cancer patients. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: approximately 10 days. (2) Trace the course of the patient from admission to the general ward to the discharge coordination scene. (2) Treatment of patients in a confusing situation due to hepatic encephalopathy (3) Study of ACP support for terminally ill cancer patients		○					
basic	Hiroko Sakamoto	20s	woman	Glioma VR Cooperation Scenario	Simulated case of tumor resection for glioma. Key points of cases during exercise design and alternative practice:. (1) Length of hospital stay: approximately 9 days, via ICU, general ward, and up to 7 days postoperatively. (2) Observation of neurological signs and motor paralysis using NIHSS (3) Postoperative rehabilitation	○						
basic	Jun Hamasaki	70s	man	Squamous cell carcinoma, right lower lobe	Perioperative simulated case study of lung cancer. Key points of the case study during exercise design and alternative practice: 1) Duration of hospitalization: approximately 10 days. (1) Length of hospitalization: approximately 10 days, discharged home after HCU and general wards. (2) Preoperative breathing training (3) Perioperative pain relief with epidural anesthesia	○						
basic	Hanako Nishi	70s	woman	Colorectal cancer	Perioperative simulated case of colorectal cancer complicated by diabetes and hypertension. Key points of cases during exercise design and alternative practice:. (1)Hospitalization: Approx. 10 days, HCU, general ward, then discharged home (2) Complicated ileus-like symptoms in POD3, postoperative rehabilitation (3) Perioperative pain relief with epidural anesthesia	○						

basic	Sonoko Mohri	40s	woman	Breast cancer	Perioperative simulated case study of breast cancer. Key points of cases during exercise design and alternative practice:. (1)Period of hospitalization: About 10 days. After admission to a general hospital or discharge from a home (2) Investigation of care for body image changes associated with mastectomy (3) Perioperative pain relief with epidural anesthesia	○						
basic	Kazuo Tokuda	70s	man	Bladder neck bladder tumor	Simulated case of total cystectomy for bladder tumor. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: about 1 month, discharged home after GICU and general wards. (2) Stoma management and patient guidance (3) Study of care for body image changes associated with stoma creation	○	○					
basic	Hiroshi Tada	60s	man	ischemic heart disease	Simulated case of ischemic heart disease complicated by DM and hyperlipidemia. Key points of cases during exercise design and alternative practice:. (1)Hospitalization: 1 month, ICU, general ward, then discharged home. (2) Cardiac rehabilitation after CABG (3) Provide discharge guidance on complications, medication, dietary management, etc.	○	○					
basic	Michiko Tanaka	60s	woman	lung cancer	An example of thoracoscopically assisted partial left upper lobectomy simulation. Key points of cases during exercise design and alternative practice:. (1)Hospitalization: 1 month, ICU, HCU, general ward, then discharged home. (2) Implementation of postoperative pain relief using analgesics (3) Rehabilitation aimed at early bed release	○	○					
basic	Naoto Matsuda	50s	man	Heart is not whole	Simulated case of first heart failure. Key points of cases during exercise design and alternative practice:. (1)Period of hospitalization: About 1 month. After admission to a general hospital or discharge from a home (2) Heart Failure Guidance (3) Cardiac rehabilitation and discharge guidance		○					
basic	Tamiko Hatinishi	60s	woman	Osteoarthritis of the hip	Simulated case of THA implementation for osteoarthritis of the hip. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: approximately 2 weeks. Transferred to a rehabilitation hospital after admission to a general ward. (2) Rehabilitation intervention for cognitive decline (3) Implementation of rehabilitation programs in a multidisciplinary setting	○	○					
basic	Sachiko Nagata	60s	woman	Stomach cancer	Perioperative simulated case of gastric cancer. Key points of cases during exercise design and alternative practice:. (1)Discharged home after 10 days in HCU and general ward (2) Investigation of care and patient guidance for postoperative dumping syndrome (3) Perioperative pain relief with epidural anesthesia	○						
basic	Tamiko Ishikawa	50s	woman	Cervical cancer	Simulated case of performing an abdominal extensive total hysterectomy for cervical cancer. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: approximately 10 days. After admission to the general ward, follow up to the 5th postoperative day. (2) Investigation of care for postoperative dysuria (3) Perioperative pain relief with epidural anesthesia	○						

basic	Takeshi Kozaki	60s	man	Postoperative right non-small cell lung cancer Lung cancer chest wall recurrence	Simulated case of lung cancer. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 month. Discharged home after general ward. (2) Review of care for complications of chemotherapy and radiation therapy (3) Study of pain relief using narcotics and care for the mental health of the patient and family		○					
application	Akiko Inuyama	70s	woman	Right lung tumor	Simulated case of cervical cancer in remission and under follow-up. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: approximately 2 weeks. Discharged home after resection of the remaining upper lobe of the right lung for a right lung tumor. (2) Postoperatively, hemoptysis and wound bleeding were observed while the patient was in the GICU, and transfusion therapy was performed. 3) There are expressions of anxiety toward discharge home. Postoperative breathing training is also needed.	○						
application	Maki Shirai	10s	woman	peritonsillar abscess	Simulated case of peritonsillar abscess resulting in emergency surgery. Key points of cases during exercise design and alternative practice:. (1) Hospitalization: about 1 week. Discharged home after transfer to the emergency ICU and general ward. (2) Critical care practices during nasal intubation and ventilator management (3) Pain relief using narcotics	○						
application	Takashi Kitajima	80s	man	right pneumothorax	Simulated case of right pneumothorax after left and right lung cancer surgery and right lung suture. Key points of cases during exercise design and alternative practice:. (1) Length of hospital stay: approximately 1 month.Trace the process from postoperative to transfer to a general ward. (2) 10 days after right lung suture, the patient was extubated. After extubation, a sudden change occurred due to airway obstruction. (3) During hospitalization, delirium is noted and care for prevention/prevention of delirium is discussed.	○						
application	Kairi Omichi	50s	man	Aortic Dissection Stanford type B	Simulated aortic dissection. Key points of cases during exercise design and alternative practice:. (1)Hospitalization: 1 month, ICU, general ward, then discharged home. (2) Hemodialysis in ICU for about 3 weeks due to renal failure (3) Provide discharge guidance on daily living, medication, dietary management, etc.	○						
application	Yoshiaki Okada	60s	man	Guillain-Barre syndrome	Simulated case of Guillain-Barre severe case. Key points of cases during exercise design and alternative practice:. (1)Hospitalization: 1 month, ICU, general ward, and then transferred to another hospital. (2) Examination of care for insomnia and anxiety (3) Pulmonary rehabilitation	○						
application	Hitoshi Tanomoto	40s	man	Bleeding from the upper alimentary canal	Simulated case of a patient who came to the hospital with a chief complaint of hematemesis. Key points of cases during exercise design and alternative practice:. (1)Hospitalization: 1 week, ICU, general ward, then discharged home. (2) Response to circulatory hypovolemic shock after arrival at the hospital (3) Provide discharge guidance on daily living, medication, dietary management, etc.	○						
application	Tadashi Akihara	40s	man	Bacterial meningitis	Simulated case of admission to HCU for bacterial meningitis. Key points of cases during exercise design and alternative practice:. (1)Hospitalization: 1 month, ICU, general ward, then discharged home. (2) Examination of care for insomnia, delirium, and anxiety (3) Recovery phase rehabilitation		○					
application	Takeshi Kanda	80s	man	Postoperative right non-small cell lung cancer Lung cancer chest wall recurrence	Simulated case of lung cancer. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 month. Discharged home after general ward. (2) Review of care for radiation therapy complications (3) Study of pain relief using narcotics and care for the mental health of the patient and family		○					

Case Classification	Patient's name	age	sex	Diseases and surgical procedures	Example	Adult Acute	Adult Chronic	Gerontological	Home Care	Mental Health	Child Health	Women's Health
basic	Kazuko Sato	80s	woman	Alzheimer's type dementia VR Cooperation Scenario	Simulated case of Alzheimer's disease. Key points of cases during exercise design and alternative practice:. (1) Length of hospital stay: approximately 10 days. Discharged home from the Community Comprehensive Care Unit. (2) Examination of care for nocturnal delirium and BPSD (3) Review of home services, implementation of multidisciplinary conferences for discharge from the hospital			○				
basic	Mutsumi Sakai	80s	woman	S-shaped colonic perforation	Simulated case of colostomy augmentation following perforation of the sigmoid colon. Key points of cases during exercise design and alternative practice:. (1)Hospitalization: 2 weeks, ICU, general ward, then discharged home. (2) Investigation of care for postoperative ADL expansion, restlessness and delirium (3) Investigation of care for body image changes associated with emergency stoma creation.			○				
basic	Takuya Kimura	80s	man	cerebral infarction	Simulated case study after transfer to a convalescent rehabilitation hospital after a stroke. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: approximately 3.5 months. Discharged home from the rehabilitation ward. (2) Implementation of convalescent rehabilitation aiming for discharge home (3) Multidisciplinary hospital discharge support for home care		○	○				
basic	Hirofumi Sakamoto	70s	man	cerebral infarction	Simulated case study after stroke. Key points of cases during exercise design and alternative practice:. (1)Hospitalization: 3 weeks, transferred to SCU, general ward, and then to a rehabilitation hospital. (2) Rehabilitation for cerebrovascular disease, etc. (3) Coordination and support of hospital transfer by multiple professions	○	○	○				
basic	Noriko Tajima	50s	woman	Fascicular Atrophic Lateral Sclerosis	Simulated case study of a respite hospitalization for ALS. Key points of cases during exercise design and alternative practice:. (1) Length of hospital stay: approximately 2 weeks. Discharged home for home care from the general ward. (2) Examination of care for ALS patients (3) Multidisciplinary hospital discharge support for home care		○		○			
basic	Kimiko Ikeda	90s	woman	Chronic subdural hematoma	Simulated case of performing hematoma perforator cleaning for chronic subdural hematoma. Key points of cases during exercise design and alternative practice:. (1)Period of hospitalization: About 2 weeks. After admission to a general hospital or discharge from a home (2) Study of care for patients at high risk for falls and stumbles (3) Rehabilitation aimed at home discharge		○	○				
basic	Ichiro Nozaki (Short-term hospitalization ver.)	70s	man	COPD	A simulated case in which the patient was admitted to the Community Comprehensive Care Unit after a diagnosis of pneumonia. Key points of cases during exercise design and alternative practice:. (1) Length of hospital stay: about 2 weeks. Discharged home from the Community Comprehensive Care Unit. (2) Consideration of care needed during pneumonia treatment, taking into account the patient's ADLs (3) Introduction of HOT and discharge support by multiple departments for discharge home			○	○			

application	Ichiro Nozaki	70s	man	COPD	A simulated case in which the patient was admitted to the Community Comprehensive Care Unit after a diagnosis of pneumonia. Key points of cases during exercise design and alternative practice:. (1) Length of hospital stay: about 1 month. Discharged home from the Community Comprehensive Care Unit. (2) Consideration of care needed during pneumonia treatment, taking into account the patient's ADLs (3) Introduction of HOT and discharge support by multiple departments for discharge home			○	○			
application	Hiroshi Nakai	80s	man	End-stage cardiac insufficiency	Simulated case of end-stage heart failure and desire for end-of-life care at home. Key points of cases during exercise design and alternative practice:. (1)Period of hospitalization: approximately 5 weeks After admission to a general hospital, discharge from the hospital for the purpose of in-home convalescence (2) Examination of care at the end of life (3) Multidisciplinary hospital discharge support for home care			○	○			
application	Mie Kaneko	80s	woman	traumatic subarachnoid	Simulated case of traumatic SAH and concurrent infarction. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: about 1 month. Discharged home from the general ward. (2) Investigation of care for patients with decreased level of consciousness and risky behavior (3) Multidisciplinary hospital discharge support for home care		○	○				
application	Kyoji Uchida	70s	man	cerebral infarction	Simulated case of stroke and internal carotid artery stenosis with CAS implementation. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: about 3 weeks. Discharged to home after going through the general ward → SCU → general ward. (2) Consideration of care after Af complications and CAS (3) Provide discharge guidance on daily living, medication, dietary management, etc.	○	○	○	○			
application	Seiya Inoue	70s	man	Aspiration pneumonia	Simulated case of a patient admitted to a convalescent rehabilitation ward for cerebral infarction. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: approximately 3.5 months. Discharged home from the rehabilitation ward. (2) Examination of care for aspiration pneumonia (3) Multidisciplinary hospital discharge support for home care	○	○	○				

Case Classification	Patient's name	age	sex	Diseases and surgical procedures	Example	Adult Acute	Adult Chronic	Gerontological	Home Care	Mental Health	Child Health	Women's Health
basic	Kyoko Icho	child	woman	Gastroenteritis VR Cooperation Scenario	Simulated case of gastroenteritis. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: 3 days. Discharged home after hospitalization in a general ward. (2) A study of care for young children with gastroenteritis (3) Provide discharge guidance, such as daily living precautions, etc.						○	
basic	Yuto Takeuchi	child	man	Bronchial Asthma VR Cooperation Scenario	Simulated case study of nighttime emergency transport. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 week. Discharged home after hospitalization in a general ward. (2) A review of care for young children with bronchial asthma (3) Provide discharge guidance, such as daily living precautions, etc.						○	
basic	Mami Kurisu	child	woman	Croup's syndrome	Simulated case study of nighttime emergency transport. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 week. Discharged home after hospitalization in a general ward. (2) A review of care for young children with croup syndrome (3) Provide discharge guidance, such as daily living precautions, etc.						○	
basic	Yoshiyuki Kawasaki	school child	man	Kawasaki disease	Simulated case of IVIG implementation during admission to a pediatric ward. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: approximately 3 weeks. Discharged home after hospitalization in a general ward (2) IVIG, A study of care for children with Kawasaki disease who undergo steroid pulses (3) Psychological support during hospitalization in school-age children						○	
basic	Tsukito Shintomi	child	man	Burn	Simulated case of injury by boiling water. Key points of cases during exercise design and alternative practice:. (1) Length of hospitalization: 6 days. Cases during hospitalization in the general ward (2) Examination of care for infants with burns (3) Assessment of physiological changes in response to biological invasion in early childhood						○	
basic	Takashi Sakuyama	child	man	Nephrotic syndrome	Simulated case of nephrotic syndrome. Key points of cases during exercise design and alternative practice:. (1) Length of hospital stay: 2 weeks. Discharged home after going through the general ward → ICU → general ward. (2) A review of care for young children with nephrotic syndrome (3) Provide discharge guidance, such as daily living precautions, etc.						○	
basic	Hiyori Miyata	child	woman	RS virus infection	Simulated case study of nighttime emergency transport. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 5 days. Discharged home after hospitalization in a general ward. (2) Examination of care for an infant with RS virus infection. (3) Provide discharge guidance, such as daily living precautions, etc.						○	

basic	Yuki Miyata	child	woman	Kawasaki Disease	Simulated case study of globulin administration application. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 10 days. Discharged to home after a stay in a general ward. (2) Examination of care for children with Kawasaki disease undergoing IVIG (3) Psychological support during hospitalization in early childhood						○	
application	Yoshiyuki Kawai	school child	man	Kawasaki disease	Simulated cases of globulin administration and steroid pulse application. Key points of the case study during exercise design and alternative practice:. (1) Length of hospital stay: approximately 3 weeks. Discharged home after going through the general ward → ICU → general ward. (2) Examination of care for a child with Kawasaki disease at a non-prevalent age and with severe disease severity. (3) Psychological support during hospitalization in school-aged children						○	
application	Aoi Moriguchi	child	man	Ventricular septal hypoplasia	Simulated case study of a child with congenital heart disease. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 week; transferred after PICU admission. (2) Hospitalization for suspected respiratory infection. Consideration of necessary support for the family. (3) Examination of care at the time of respiratory failure and cardiac failure.						○	
application	Mutsuki Yamada	child	woman	oral intake difficulty	Simulated case study of a child with congenital heart disease. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 3 weeks. Discharged home after hospitalization in a general ward. (2) Developmental support for a child suffering from growth disturbance. (3) Investigation of care during gastrostomy extension and perioperative period.						○	
application	Nana Ogawa	child	woman	head injury	Simulated case of head trauma due to abuse. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 10 days. After emergency room and PICU admission, discharged to protective consignment. (2) Examination of care in head trauma cases. (3) Examination of intervention methods and necessary care for suspected abuse cases						○	
application	Saki Yamamoto	child	woman	aspiration pneumonia	Simulated case study of a patient in home care with congenital heart disease. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 month. Discharged home after hospitalization in a general ward. (2) Intervention for a child in medical care who suffered from aspiration pneumonia. (3) Examination of care required for a child with medical care, discharge coordination toward home, etc.				○		○	

Case Classification	Patient's name	age	sex	Diseases and surgical procedures	Example	Adult Acute	Adult Chronic	Gerontological	Home Care	Mental Health	Child Health	Women's Health
basis	Mitsuko Sato	30s	woman	Normal delivery VR Cooperation Scenario	Simulated case study of vaginal delivery. Key points of the case study for exercise design and alternative practice: (1) Length of hospitalization: 5 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for pregnant women and postpartum mothers with a normal course. (3) Examination of care for pregnant women and postpartum mothers who delivered vaginally and had a normal course of childbirth.							○
basis	Mitsuko Sato Baby	0	woman	Newborn VR Cooperation Scenario	Simulated neonatal case study. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: 5 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for a full-term neonate.							○
basis	Sakiko Kawabuchi	20s	woman	Pelvic position and cesarean section	Simulated case study of cesarean section. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: 8 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for pregnant women and postpartum mothers in pelvic position. (3) Examination of care for pregnant women and postpartum mothers who delivered by cesarean section and had normal postnatal course							○
basis	Sakiko Kawabuchi Baby	0	woman	Newborn	Simulated neonatal case study. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: 7 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for a full-term neonate.							○
basic	Kanako Umeki	20s	woman	normal delivery	Simulated case study of vaginal delivery. Key points of the case study for exercise design and alternative practice:. (1) Length of hospitalization: 5 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for unregistered pregnant women. (3) Examination of care for a pregnant woman who delivered vaginally and had a normal postpartum course.							○
basic	Hanako Umeki	0	woman	newborn baby	Simulated neonatal case study. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: 5 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for a full-term neonate.							○
basic	Yoko Ibuki	20s	woman	normal delivery	Simulated case study of pregnancy and normal progress. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: 5 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for a pregnant woman with weight control difficulties. (3) Examination of care for a pregnant woman with breast trouble after vaginal delivery.							○
basic	Riko Ibuki	0	woman	newborn baby	Simulated neonatal case study. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: 5 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for a full-term neonate.							○
application	Makiko Hotta	30s	woman	TAPS, twins	Simulated case of MD twin, TAPS suspected and hospitalized for management purposes. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 2 weeks. Discharged home after hospitalization in obstetrics ward. (2) Examination of care for a pregnant woman admitted for management due to multiple births, IUGR, and suspected TAPS. (3) Examination of care for a pregnant woman with a scheduled C/S and normal postpartum course.							○

application	Souta Hotta	0	man	newborn baby	Simulated case study of a low birth weight infant. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 week. Discharged home after hospitalization in the maternity ward. (2) Examination of care for a low birth weight infant with polycythemia vera. (3) Examination of care during phototherapy							○
application	Aoto Hotta	0	man	newborn baby	Simulated cases of low birth weight and hypoglycemia. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 week. Discharged home after hospitalization in the maternity ward. (2) Examination of care for a low birth weight infant. (3) Examination of care for a child with low blood sugar							○
application	Maiko Shinjo	30s	woman	normal delivery	Simulated case study of refractory anemia complication and a transplacental woman. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: 6 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for a pregnant woman in a complicated family environment. (3) Blood transfusion due to excessive bleeding after vaginal delivery							○
application	Eiko Shinjo	0	woman	newborn baby	Simulated neonatal case study. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: 6 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for a full-term neonate.							○
application	Kazumi Nagashima	30s	woman	psychiatric complications	Simulated case study of psychiatric complications. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: 6 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for a pregnant woman who undergoes a fetal donor and external rotation surgery. (3) Examination of care for a pregnant woman who delivered vaginally and had a normal postpartum course.							○
application	Eita Nagashima	0	man	newborn baby	Simulated neonatal case study. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: 6 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for a full-term neonate.							○
application	Kyoko Suzuki	20s	woman	Psychiatric complications	Simulated case study of unmarried and psychiatric complications. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: 7 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for an unregistered pregnant woman with psychiatric complications. (3) Examination of care for a pregnant woman who delivered vaginally and had a normal post-partum course.							○
application	Taro Suzuki	0	man	Newborn baby	Simulated neonatal case study. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: 7 days. Discharged home after hospitalization in the maternity ward. (2) Examination of care for a full-term neonate.							○

Case Classification	Patient's name	age	sex	Diseases and surgical procedures	Example	Adult Acute	Adult Chronic	Gerontological	Home Care	Mental Health	Child Health	Women's Health
basic	Hirofumi Yamada	50s	man	Depression VR Cooperation Scenario	Simulated case study of depression. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 month. After isolation hospitalization, the patient was transferred to an open ward and discharged home. (2) Understanding of the characteristics of the mental state in the acute phase of depression. (3) Understanding the characteristics of the mental state during the period when the effects of antidepressants are becoming apparent.					○		
basic	Yuko Uemura	40s	woman	Schizophrenia VR Cooperation Scenario	Simulated case study of schizophrenia. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 month. After isolation hospitalization, the patient was admitted to an open ward. (2) Examination of how to respond to acute delusions and accompanying intense emotional expression. (3) Examination of intervention methods for a patient with polydipsia.					○		
basic	Kaori Yusa	40s	woman	dissociative disorder	Simulated case study of dissociative disorders. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 month. During hospitalization in an open ward. (2) Examination of perioperative care for a patient with dissociative disorder. (3) Examination of care for a patient who has rarefied thoughts of death.					○		
basic	Emi Koyama	30s	woman	borderline personality disorder	Simulated case study of borderline personality disorder. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 month. During hospitalization in an open ward. (2) Examination of care for a patient with borderline personality disorder (3) Examination of care for emotional incontinence and auditory hallucination symptoms					○		
basic	Isao Hashizume	50s	man	Alcoholism	Simulated case study of alcoholism. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approx. 1 month. During hospitalization in an open ward. (2) Examination of care for an alcoholic patient (3) Examination of care for insomnia and alcohol withdrawal symptoms					○		
application	Mika Yamada	40s	woman	Severe mental retardation total hysterectomy	Simulated case of total hysterectomy required due to uterine cancer. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approximately 10 days. After hospitalization in an open ward and total hysterectomy, the patient was discharged home. (2) Study of perioperative care for an autistic patient. (3) Examination of care for a patient with self-harm and other injuries					○		
application	Kyoko Ohno	50s	woman	bipolar disorder	Simulated case of suicide by drowning and pneumonia. Key points of the case during exercise design and alternative practice:. (1) Length of hospitalization: approximately 1 month. Discharged home after admission to ICU and open ward for treatment of pneumonia. (2) Examination of care for a patient with bipolar disorder. (3) Examination of care for insomnia and anxiety symptoms					○		

application	Toshio Moriya	30s	man	schizophrenia	Simulated case study of schizophrenia. Key points of the case study during exercise design and alternative practice:. (1) Length of hospitalization: approx. 1 month. During hospitalization in an open ward. (2) Examination of care for schizophrenic patients (3) Examination of care for insomnia, anxiety, and auditory hallucination symptoms					○		

Medi-EYE Fundamental Nursing Pack Case Summaries, Goals to be attained at the time of exercises, etc.

	Patient Name	age	sex	Diseases, surgical procedures, etc.	case or medical history	SUMMARY (Case study points in student teaching)	Possible nursing problems	Assumed Case Use	Assumed readiness of the subject (previously studied preferred = 0)					
									Anatomy physiology	Physical assessment	nursing process	Pathophysiology Physiology	therapeutics	Medical Treatment Assistive Technology
Case 1	Kyoko Azuma	70s	woman	cerebral infarction	Hypertension	Simulated case of cerebral infarction due to occlusion of left middle cerebral artery. (1) Length of hospitalization: approximately 2 weeks. (2) Appropriate medical interview and physical assessment (3) Appropriate educational guidance (4) Clinical judgment (early detection of abnormalities) (5) Observation of the patient's medical environment (6)ltidisciplinary collaboration (Dr, Ph, PT, OT, ST, etc.)	#Risk of cerebral hemorrhage/re-infarction #Risk of falls and dislocations #Constipation #Risk of aspiration #lack of sleep #lack of clean self-care #communication difficulties	(1) Development of the nursing process on the desk (Group work) (2) Exercises utilizing simulators and medical equipment (Early detection of abnormalities) (3) Exercises with a mock patient (information gathering from medical interviews) (4) Exercises with mock patients (education and guidance)	○	○	○	○	○	○

Exercise Objectives	Situations anticipated to be used during the exercise
(1) Select and summarize the information necessary for nursing care from the electronic medical record (endemic conditions and pathological conditions). (2) To be able to classify information necessary for nursing care from the electronic medical record based on a theory (framework). (3) To be able to predict abnormalities based on the patient's condition (to verbalize the findings of clinical judgment) (4) To be able to use physical observation techniques (interview, visual inspection, palpation, percussion, auscultation, and measurement) and to collect necessary information by interviewing the patient in light of history and subjective symptoms. (5) Apply knowledge of physical assessment, which varies according to age and disease (developmental stage), and perform physical examination according to the situation. (6) To be able to assess (interpret, analyze, and integrate) the health condition of the subject based on the results of observation (7) To be able to predict and respond to procedures and examinations that will be required based on the results of the physical examination. (8) To be able to extract and prioritize nursing problems from a comprehensive assessment of the patient (9)To be able to formulate a nursing plan for nursing problems based on the individuality of the patient.	・Interview with a patient who was transferred to a general hospital bed after treatment in the SCU ・Vital sign measurement and physical examination at the first visit ・Observation (systematic observation, collection of information for comprehensive assessment) ・Observation of condition (deviation from normal) ・Early detection and reporting of abnormalities ・Assistive technology for daily living

	Patient Name	age	sex	Diseases, surgical procedures, etc.	case or medical history	SUMMARY (Case study points in student teaching)	Possible nursing problems	Assumed Case Use	Assumed readiness of the subject (previously studied preferred = 0)					
									Anatomy physiology	Physical assessment	nursing process	Pathophysiology Physiology	therapeutics	Medical Treatment Assistive Technology
Case 2	Mansho Fujise	70s	man	Chronic cardiac insufficiency Atrial tachycardia	Hypertension	Simulated case of exacerbation of chronic heart failure. (1) Length of hospitalization: approximately 2 weeks. Discharged home. (2) Appropriate medical interview, implementation of physical assessment of respiratory system, circulatory system, and abdomen. (3) Implementation of appropriate educational guidance. Implementation of discharge guidance. (4) Early detection of side effects of medication (bradycardia, lightheadedness, risk of falls and stumbles) and constipation associated with bed rest (5) Observation of the medical care environment (6) Multidisciplinary cooperation (Dr, Ph, PT, etc.)	#Cardiac Tissue Circulation Decreased Risk State #Lower activity tolerance #Falls and falls risk #Constipation #anxiety	(1) Development of the nursing process on the desk (Group work) (2) Exercises utilizing simulators and medical equipment (Early detection of abnormalities) (3) Exercises with a mock patient (information gathering from medical interviews) (4) Exercises with mock patients (Education and guidance)	○	○	○	○	○	○

Exercise Objectives	Situations anticipated to be used during the exercise
(1) Select and summarize the information necessary for nursing care from the electronic medical record (endemic conditions and pathological conditions). (2) To be able to classify information necessary for nursing care from the electronic medical record based on a theory (framework). (3) To be able to predict abnormalities based on the patient's condition (to verbalize the findings of clinical judgment) (4) To be able to use physical observation techniques (interview, visual inspection, palpation, percussion, auscultation, and measurement) and to collect necessary information by interviewing the patient in light of his/her history and subjective symptoms (5) Apply knowledge of physical assessment, which varies according to age and disease (developmental stage), and perform physical examination according to the situation. (6) To be able to assess (interpret, analyze, and integrate) the health condition of the subject based on the results of observation (7) To be able to predict and respond to procedures and examinations that will be required based on the results of the physical examination. (8) To be able to extract and prioritize nursing problems from a comprehensive assessment of the patient. (9) To be able to formulate a nursing plan for nursing problems based on the individuality of the patient.	・Interview on admission ・Vital sign measurement and physical examination at the first visit after admission ・Observation (systematic observation and collection of information for comprehensive assessment) ・Condition observation (deviation from normal) ・Early detection and reporting of abnormalities on the 12th day of admission (December 23) ・Implementation of Assistive Technology for Daily Living

	Patient Name	age	sex	Diseases, surgical procedures, etc.	case or medical history	SUMMARY (Case study points in student teaching)	Possible nursing problems	Assumed Case Use	Assumed readiness of the subject (previously studied preferred = 0)					
									Anatomy physiology	Physical assessment	nursing process	Pathophysiology Physiology	therapeutics	Medical Treatment Assistive Technology
Case 3	Minori Kiso	70s	woman	pneumonia	Hypertension Difficulty hearing in the right ear	Simulated case of pneumonia. (1) Length of hospitalization: approximately 2 weeks. Discharged home. (2) Appropriate medical interview and physical assessment. (3) Observation of medical equipment and medical care environment (4) Appropriate educational guidance and discharge guidance (5) Multidisciplinary cooperation (Dr, Ph, PT, etc.)	#Difficulty in expectorating sputum due to increased airway secretions from pneumonia (ineffective airway clearance) #Risk of falls and dislocations #Risk of constipation #Risk of decreased ALD associated with dyspnea during physical activity (decreased activity tolerance) #Ineffective health management #insomnia	(1) Developing the nursing process on the desk (Group work) (2) Exercises utilizing simulators and medical equipment (early detection of abnormalities) (3) Implementation of educational plan	○	○	○	○	○	○

Exercise Objectives	Situations anticipated to be used during the exercise
(1) Select and summarize the information necessary for nursing care from the electronic medical record (endemic conditions and pathological conditions). (2) To be able to classify information necessary for nursing care from the electronic medical record based on a theory (framework). (3) To be able to predict abnormalities based on the patient's condition (to verbalize the findings of clinical judgment) (4) To be able to use physical observation techniques (interview, visual inspection, palpation, percussion, auscultation, and measurement) and to collect necessary information by interviewing the patient in light of his/her history and subjective symptoms (5) Apply knowledge of physical assessment, which varies according to age and disease (developmental stage), and perform physical examination according to the situation. (6) To be able to assess (interpret, analyze, and integrate) the health condition of the subject based on the results of observation. (7)To be able to predict and respond to procedures and examinations that will be required based on the results of the physical examination. (8) To be able to extract and prioritize nursing problems from a comprehensive assessment of the patient. (9)To be able to formulate a nursing plan for nursing problems based on the individuality of the patient.	・Interview upon admission ・Vital sign measurement and physical examination at the first visit after admission ・Observation (systematic observation and collection of information for comprehensive assessment) ・Observation of condition (deviation from normal) ・Early detection and reporting of abnormalities ・Implementation of daily living assistance techniques ・Implementation of nursing plan (educational plan)

	Patient Name	age	sex	Diseases, surgical procedures, etc.	case or medical history	SUMMARY (Case study points in student teaching)	Possible nursing problems	Assumed Case Use	Assumed readiness of the subject (previously studied preferred = 0)					
									Anatomy physiology	Physical assessment	nursing process	Pathophysiology Physiology	therapeutics	Medical Treatment Assistive Technology
Case 4	Shunkai Mori	60s	woman	Right hip osteoarthritis, total hip replacement, posterior approach	Left THA postoperatively	Purpose of surgery: Simulated case of right total hip replacement. (1) Length of hospitalization: 2 weeks, from the second postoperative day to discharge home after rehabilitation. (2) Appropriate medical interview and physical assessment (3) Appropriate educational guidance and discharge guidance (4) Early detection of postoperative complications. Assistance in daily living during the period of postoperative pain and up to the period of gaining self-care ability. (5) Observation of the medical care environment (6)Multidisciplinary collaboration (Dr, PT, etc.)	#DVT risk #Dislocation risk #Tumble and fall risk	(1) Development of the nursing process on the desk (Group work) (2) Exercises utilizing simulators and medical equipment (Early detection of abnormalities) (3) Exercises with a mock patient (interview to link to assistance necessary for daily life support to meet the needs of the subject) (4) Exercises with a mock patient (Education and guidance related to the subject's range of activities, characteristics of the activities, and lack of knowledge of dislocated limb positions)	○	○	○	○	○	○

Exercise Objectives	Situations anticipated to be used during the exercise
(1) Select and summarize the information necessary for nursing care from the electronic medical record (endemic conditions and pathological conditions). (2) To be able to classify information necessary for nursing care from the electronic medical record based on a theory (framework). (3) To be able to predict abnormalities based on the patient's condition (to verbalize the findings of clinical judgment) (4) To be able to use physical observation techniques (interview, visual inspection, palpation, percussion, auscultation, and measurement) and to collect necessary information by interviewing the patient in light of his/her history and subjective symptoms (5) Apply knowledge of physical assessment, which varies according to age, disease (developmental stage), and surgical procedure, and perform physical examination according to the situation. (6)To be able to assess (interpret, analyze, and integrate) the health condition of the subject based on the results of observation (7) To be able to predict the procedures and tests that will be required based on the results of the physical examination. (8)To be able to collect information on the results of responses and assess the impact of the responses on the patient (nursing outcomes). (9)To be able to report and describe the content of the assessment based on the results of the physical examination.	・Vital sign measurement and physical examination after the second postoperative day ・Observation (systematic observation and collection of information for comprehensive assessment) ・Condition observation (deviation from normal) ・Early detection and reporting of abnormalities ・Assistive technology for daily living (holding good limbs, repositioning, wheelchair transfers, toileting, wiping, showering, etc.)

	Patient Name	age	sex	Diseases, surgical procedures, etc.	case or medical history	SUMMARY (Case study points in student teaching)	Possible nursing problems	Assumed Case Use	Assumed readiness of the subject (previously studied preferred = 0)					
									Anatomy physiology	Physical assessment	nursing process	Pathophysiology Physiology	therapeutics	Medical Treatment Assistive Technology
Case 5	Yuichi Aoi	50s	man	DLBCL Chemotherapy: R-CHOP Therapy	nothing	Patients with first-episode DLBCL. Admitted for R-CHOP therapy as remission induction therapy. (1) Length of hospitalization: approximately 2 months (3 courses of R-CHOP therapy, temporary discharge before the 4th course) (2) Appropriate medical interview and physical assessment (information collection at admission and discharge) (3) Clinical judgment (early detection and response to abnormalities such as adverse reactions during and after administration of anticancer agents) (4) Observation of the medical care environment (5) Multidisciplinary collaboration (Dr., Ph, PT, etc.)	#Adverse reactions to anti-tumor drug therapy (all adverse events will be covered. Infection risk states, anemia, bleeding tendency, mucous membrane disorders (stomatitis and gingivitis), constipation, peripheral neuropathy, insomnia, alopecia, nausea and vomiting, etc.) #Falls and Falls risk states. #Anxiety #body image confusion	(1) Developing the nursing process on the desk (Group work) (2) Exercises utilizing simulators and medical equipment (Early detection of abnormalities) (3) Exercise with a mock patient (Information gathering from medical interview) (4) Exercises with a mock patient (Education and guidance)	○	○	○	○	○	○

Exercise Objectives	Situations anticipated to be used during the exercise
(1) Select and summarize the information necessary for nursing care from the electronic medical record (endemic conditions and pathological conditions). (2) To be able to classify information necessary for nursing care from the electronic medical record based on a theory (framework). (3) To be able to predict abnormalities based on the patient's condition (to verbalize the findings of clinical judgment) (4) To be able to use physical observation techniques (interview, visual inspection, palpation, percussion, auscultation, and measurement) and to collect necessary information by interviewing the patient in light of his/her history and subjective symptoms (5) Apply knowledge of physical assessment, which varies according to age and disease (developmental stage), and perform physical examination according to the situation. (6) To be able to assess (interpret, analyze, and integrate) the health condition of the subject based on the results of observation (7) To be able to predict and respond to procedures and tests that will be required based on the results of the physical examination. (8)To be able to collect information on the results of responses and assess the impact of the responses on the patient (nursing outcomes). (9) To be able to report and describe the content and nursing outcomes of assessments.	・Interview on admission ・Vital sign measurement and physical examination at the first visit after admission ・Observation (systematic observation and collection of information for comprehensive assessment) ・Condition observation (deviation from normal) ・Early detection of abnormalities: infusion reaction, administration of necrotizing anticancer drugs, peripheral neuropathy, constipation, nausea, bone marrow suppression (easy infection, anemia, bleeding tendency) Reporting ・Assistive technology for daily living ・Assistive technology in medical treatment: venous blood collection, puncture of peripheral venous indwelling needle, aseptic manipulation (blood culture collection, Lumbar procedure)

	Patient Name	age	sex	Diseases, surgical procedures, etc.	case or medical history	SUMMARY (Case study points in student teaching)	Possible nursing problems	Assumed Case Use	Assumed readiness of the subject (previously studied preferred = 0)					
									Anatomy physiology	Physical assessment	nursing process	Pathophysiology Physiology	therapeutics	Medical Treatment Assistive Technology
Case 6	Junji Sakuraba	70s	man	Mid-pharyngeal cancer chemoradiotherapy	Hypertension	Simulated case of a patient hospitalized for chemoradiotherapy (CRT) after developing cancer of the mid-pharynx (1) Length of hospitalization: 2 months (70 Gy of radiation therapy and CDDP administered in the first, fourth, and seventh weeks), with temporary discharge until the second course of CDDP after the first course. (2) Appropriate medical interview and physical assessment (3) Appropriate discharge and educational guidance (4) Clinical judgment (early detection of abnormality, response, observation of response, and reflection from response) (5) Observation of the medical care environment (6) Multidisciplinary collaboration (Dr, Ph, etc.)	#Dermal integrative disorders #Infection risk states #Nausea and vomiting #Falls and falls risk conditions #Anxiety	(1) Developing the nursing process on the desk (Group work) (2) Exercises utilizing simulators and medical equipment (Early detection of abnormalities) (3) Exercise with a mock patient (Information gathering from medical interview) (4) Exercises with a mock patient (Education and guidance)	○	○	○	○	○	○

Exercise Objectives	Situations anticipated to be used during the exercise
(1) Select and summarize the information necessary for nursing care from the electronic medical record (endemic conditions and pathological conditions). (2) To be able to classify information necessary for nursing care from the electronic medical record based on a theory (framework). (3) To be able to predict abnormalities based on the patient's condition (to verbalize the findings of clinical judgment) (4) To be able to use physical observation techniques (interview, visual inspection, palpation, percussion, auscultation, and measurement) and to collect necessary information by interviewing the patient in light of his/her history and subjective symptoms (5) Apply knowledge of physical assessment, which varies according to age and disease (developmental stage), and perform physical examination according to the situation. (6) To be able to assess (interpret, analyze, and integrate) the health condition of the subject based on the results of observation (7) To be able to predict and respond to procedures and tests that will be required based on the results of the physical examination. (8)To be able to collect information on the results of responses and assess the impact of the responses on the patient (nursing outcomes). (9) To be able to report and describe the content and nursing outcomes of assessments.	・Interview on admission ・Interview at outpatient clinic ・Vital sign measurement and physical examination at the first visit after admission ・Observation (systematic observation and collection of information for comprehensive assessment) ・Condition observation (deviation from normal) ・Early detection and reporting of abnormalities: radiation sickness, side effects of anticancer drugs ・Assistive technology for daily living ・Assistive technology for medical treatment: CV port placement, radiotherapy, blood sampling, intravenous administration, subcutaneous injection ・Discharge guidance: diet, skin care, medication management

	Patient Name	age	sex	Diseases, surgical procedures, etc.	case or medical history	SUMMARY (Case study points in student teaching)	Possible nursing problems	Assumed Case Use	Assumed readiness of the subject (previously studied preferred = 0)					
									Anatomy physiology	Physical assessment	nursing process	Pathophysiology Physiology	therapeutics	Medical Treatment Assistive Technology
Case 7	Wakako Kawata	50s	woman	Gastric cancer (Gastric body)	Asthma Right ovarian cyst	Simulated case of a perioperative patient undergoing total gastrectomy for gastric cancer. (1) Length of hospital stay: approximately 2 weeks. Discharged home. (2) Appropriate medical interview and physical assessment (3) Appropriate educational guidance and discharge guidance (4) Early detection of postoperative complications. Assistance in daily living until the period of postoperative pain and acquisition of self-care skills. (5) Observation of the medical care environment (6)Multidisciplinary collaboration (Dr, PT, etc.) (7) Clinical judgment (early detection of abnormality, response, observation of reaction, and reflection from response)	#Risk of respiratory complications #Suture failure (pancreatic leak) #DVT risk #postoperative pain #anxiety #Postoperative ileus #Dumping syndrome	(1) Developing the nursing process on the desk (Group work) (2) Exercises utilizing simulators and medical equipment (Early detection of abnormalities) (3) Exercise with a mock patient (Information gathering from medical interview) (4) Exercises with a mock patient (Education and guidance)	○	○	○	○	○	○
		Exercise Objectives						Situations anticipated to be used during the exercise						
		(1) Capture a patient's stage and condition from the electronic medical record. (2) To be able to select observation and care items from the electronic medical record according to the patient's stage and condition (3) To be able to predict abnormalities from the patient's condition (to verbalize the findings of clinical judgment) (4) To be able to interview patients and collect information based on observation (visual, palpation, percussion, and auscultation) using the five senses in conjunction with subjective symptoms (5) To be able to observe physical, mental, social, and spiritual distress associated with changes in age, history, disease, etc. (6)Be able to assess the patient's health status (interpretation, analysis, and integration of clinical judgment) based on the results of observation (7) To be able to predict the nursing care, procedures, and tests that will be required based on the results of the interview and observations. (8) Based on the results of interview and observation, make an assessment based on the integrated information, and report the results. (9) To be able to describe the results of interview/observation and the nursing care practiced. Able to add and revise items when necessary.			・Interview on admission ・Vital sign measurement and physical examination at the first visit after admission ・Observation (systematic observation and collection of information for comprehensive assessment) ・Observation of condition (deviations from normal) ・Early detection and reporting of abnormalities ・Implementation of daily living assistance techniques ・Implementation of nursing plan (educational plan)						

	Patient Name	age	sex	Diseases, surgical procedures, etc.	case or medical history	SUMMARY (Case study points in student teaching)	Possible nursing problems	Assumed Case Use	Assumed readiness of the subject (previously studied preferred = 0)					
									Anatomy physiology	Physical assessment	nursing process	Pathophysiology Physiology	therapeutics	Medical Treatment Assistive Technology
Case 8.	Noriko Miyamoto	70s	woman	left ureteral stone disease	Hypertension	Simulated case of transurethral left ureteral lithotripsy for left ureteral stone (1) Length of hospital stay: approximately 1 week. Discharge home (2) Appropriate medical interview and physical assessment (information collection at admission and discharge) (3) Consideration of assistance methods appropriate for the patient (4) Clinical judgment (early detection of abnormalities, reflection from responses) (5) Consideration of how to respond to patient concerns	#Infection risk conditions #Falls and falls risk conditions #Pain #Anxiety #Delirium risk	(1) Development of the nursing process on the desk (Group work) (2) Exercises utilizing simulators and medical equipment (early detection of abnormalities, physical examination) (3)Exercises with a mock patient (Information gathering from medical interviews, communication) (4)Exercises with a mock patient (Education and guidance)	○	○	○	○	○	○
		Exercise Objectives						Situations anticipated to be used during the exercise						
		(1) Capture a patient's stage and condition from the electronic medical record. (2) To be able to select observation and care items from the electronic medical record according to the patient's stage and condition (3) To be able to predict abnormalities from the patient's condition (to verbalize the findings of clinical judgment) (4) To be able to interview patients and collect information based on observation (visual, palpation, percussion, and auscultation) using the five senses in conjunction with subjective symptoms (5) To be able to observe physical, mental, social, and spiritual distress associated with changes in age, history, disease, etc. (6)Be able to assess the patient's health status (interpretation, analysis, and integration of clinical judgment) based on the results of observation (7) To be able to predict the nursing care, procedures, and tests that will be required based on the results of the interview and observations. (8) Based on the results of interview and observation, make an assessment based on the integrated information, and report the results. (9) To be able to describe the results of interview/observation and the nursing care practiced. Able to add and revise items when necessary.			・Interview on admission ・Vital sign measurement and physical examination at the first visit after admission ・Observation (systematic observation and collection of information for comprehensive assessment) ・Observation of condition (deviation from normal) ・Early detection and reporting of abnormalities ・Screening for urinary retention after removal of indwelling urinary catheter, risk of urinary tract infection, sepsis (laboratory data and qSOFA)						

	Patient Name	age	sex	Diseases, surgical procedures, etc.	case or medical history	SUMMARY (Case study points in student teaching)	Possible nursing problems	Assumed Case Use	Assumed readiness of the subject (previously studied preferred = 0)					
									Anatomy physiology	Physical assessment	nursing process	Pathophysiology Physiology	therapeutics	Medical Treatment Assistive Technology
Case 9	Takeaki Arino	70s	man	subarachnoid hemorrhage	Hypertension diabetes mellitus	Simulated case of a patient exiting the subacute phase of subarachnoid hemorrhage and transitioning to the convalescent phase. (1) Length of hospitalization: approximately 2 weeks. (2) Appropriate medical interview and physical assessment (information collection upon admission) (3) Consideration of assistance methods appropriate for the patient (4) Clinical judgment (early detection of abnormalities, reflection from responses) (5) Consideration of how to respond to the patient's anxiety	#Ineffective brain tissue circulation #Aspiration risk status #Risk of falls and falls #Fear for future life due to motor impairments	(1) Developing the nursing process on the desk (Group work) (2) Exercises utilizing simulators and medical equipment (Early detection of abnormalities) (3) Exercise with a mock patient (Information gathering from medical interview) (4)Exercises with a mock patient (Planning of daily living assistance)	○	○	○	○	○	○

Exercise Objectives	Situations anticipated to be used during the exercise
(1) Select the data necessary to provide nursing care that meets the needs of patients from the electronic medical record and examine nursing practice. (2) To be able to classify information necessary for nursing care from electronic medical records based on a theory (framework). (3) To be able to predict abnormalities based on the patient's condition (to verbalize the findings of clinical judgment) (4) To be able to collect necessary data by interviewing the patient using physical examination and comparing the patient's history, subjective symptoms, etc. (5) To be able to consider responses according to changes in conditions due to age and disease (6) To be able to assess (interpret, analyze, and integrate) and verbalize the health status of the subject based on the results of observation (7) To consider nursing care tailored to the needs of the patient and to consider what is necessary to meet those needs	・Interview on admission ・Vital sign measurement and physical examination at the first visit after admission ・Observation (systematic observation and collection of information for comprehensive assessment) ・Observation of condition (deviation from normal) ・Early detection and reporting of abnormalities ・Assistive technology for daily living

	Patient Name	age	sex	Diseases, surgical procedures, etc.	case or medical history	SUMMARY (Case study points in student teaching)	Possible nursing problems	Assumed Case Use	Assumed readiness of the subject (previously studied preferred = 0)					
									Anatomy physiology	Physical assessment	nursing process	Pathophysiology Physiology	therapeutics	Medical Treatment Assistive Technology
Case 10.	Takanori Sato	60s	man	acute cholangitis		A simulated case of acute cholangitis before lower bile duct cancer surgery. (1) Length of hospitalization: approximately 1 week. Discharged home. (2)Implementation of appropriate medical interview and physical assessment (information collection at admission and discharge) (3) Implementation of appropriate discharge and educational guidance (4) Clinical judgment (early detection of abnormalities, response, and reflection from response: infection, sepsis) (5)Observation of medical equipment and medical care environment (6)Improvement of patient readiness for surgery (nutritional management, preoperative rehabilitation) (7) Multidisciplinary collaboration (Dr, Ph, PT, OT, ST, etc.)	#Septicemia risk #Infection risk	(1) Developing the nursing process on the desk (Group work) (2) Exercises utilizing simulators and medical equipment (Early detection of abnormalities) (3) Exercise with a mock patient (Information gathering from medical interview) (4) Exercises with a mock patient (Education and guidance)	○	○	○	○	○	△ Recommended after 2nd day

Exercise Objectives	Situations anticipated to be used during the exercise
(1) Select and summarize the information necessary for nursing care from the electronic medical record (endemic conditions and pathological conditions). (2) To be able to classify information necessary for nursing care from the electronic medical record based on a theory (framework). (3) To be able to predict abnormalities based on the patient's condition (to verbalize the findings of clinical judgment) (4) To be able to use physical observation techniques (interview, visual inspection, palpation, percussion, auscultation, and measurement) and to collect necessary information by interviewing the patient in light of his/her history and subjective symptoms (5) Apply knowledge of physical assessment, which varies according to age and disease (developmental stage), and perform physical examination according to the situation. (6) To be able to assess (interpret, analyze, and integrate) the health condition of the subject based on the results of observation (7) To be able to predict and respond to procedures and tests that will be required based on the results of the physical examination. (8)To be able to collect information on the results of responses and assess the impact of the responses on the patient (nursing outcomes). (9) To be able to report and describe the content and nursing outcomes of assessments	・Vital sign measurement and physical examination at the time of emergency transport ・Post-hospitalization condition monitoring (systematic observation and information gathering for comprehensive assessment) ・Condition observation (deviation from normal, assessment of infection, sepsis screening) ・Early detection and reporting of abnormalities ・Post-procedure observation (bleeding, ERCP pancreatitis, perforation) ・Assistive technology implementation ・Discharge guidance (diet, medication, self-injection)

	Patient Name	age	sex	Diseases, surgical procedures, etc.	case or medical history	SUMMARY (Case study points in student teaching)	Possible nursing problems	Assumed Case Use	Assumed readiness of the subject (previously studied preferred = 0)					
									Anatomy physiology	Physical assessment	nursing process	Pathophysiology Physiology	therapeutics	Medical Treatment Assistive Technology
Case 11.	Kazuya Kawai	70s	man	Gastric cancer (Endoscopic submucosal dissection)		Simulated case of endoscopic submucosal dissection for early stage gastric cancer (1) Length of hospitalization: approximately 10 days. Discharge home (2) Implementation of appropriate medical interview and physical assessment (information collection at admission and discharge) (3) Appropriate discharge and educational guidance (4) Clinical judgment (early detection of abnormalities, response, and reflection from response) (5) Observation of medical equipment and medical care environment (6) Multidisciplinary collaboration (Dr, Ph, etc.)	#Hemorrhage risk state #pain #Falls and Falls Risk	(1) Developing the nursing process on the desk (Group work) (2) Exercises utilizing simulators and medical equipment (Early detection of abnormalities) (3) Exercise with a mock patient (Information gathering from medical interview) (4) Exercises with a mock patient (Education and guidance)	○	○	○	○	○	

Exercise Objectives	Situations anticipated to be used during the exercise
(1) Select and summarize the information necessary for nursing care from the electronic medical record (endemic conditions and pathological conditions). (2) To be able to classify information necessary for nursing care from the electronic medical record based on a theory (framework). (3) To be able to predict abnormalities based on the patient's condition (to verbalize the findings of clinical judgment) (4) To be able to use physical observation techniques (interview, visual inspection, palpation, percussion, auscultation, and measurement) and to collect necessary information by interviewing the patient in light of his/her history and subjective symptoms (5) Apply knowledge of physical assessment, which varies according to age and disease (developmental stage), and perform physical examination according to the situation. (6) To be able to assess (interpret, analyze, and integrate) the health condition of the subject based on the results of observation (7) To be able to predict and respond to procedures and tests that will be required based on the results of the physical examination. (8)To be able to collect information on the results of responses and assess the impact of the responses on the patient (nursing outcomes). (9) To be able to report and describe the content and nursing outcomes of assessments.	・Interview on admission ・Interview at outpatient clinic ・Vital sign measurement and physical examination at the first visit after admission ・Observation (systematic observation and collection of information for comprehensive assessment) ・Condition observation (deviation from normal) ・Early detection and reporting of abnormalities ・Assistive technology for daily living ・Assistive technology for medical treatment