National Western Stock Show
January 7-22, 2017

Health Professions Interprofessional Training
What do I need to do?

- Recruit participants & help them feel at ease
Have materials ready

**BMI:**
- Stadiometer
- Scale

**Blood Pressure:**
- Blood Pressure Monitor
Have materials ready

**Blood Glucose**

- Cotton Balls
- Band-Aid
- Alcohol Swab
- Lancet
- Glucometer
- Glucometer Test Strip
Have materials ready

**Pulse Oxymeter**  **Vision screener**
Health Screening: Adults

- iPad: Interview

- Demographics
  - Age
  - Gender
  - Ethnicity (req’d by HRSA): Hispanic or non-Hispanic
  - Race (req’d by HRSA): may decline to answer
  - Height
  - Weight
  - Calculate BMI
Health Screening: Adults

- Do you know your BMI?

- Do you know what BMI means?

  **if (No)**

  - BMI is an indicator of body fat. It is used as a screening tool to identify whether an adult is at a healthy weight. Although BMI does not measure body fat directly, research has shown that BMI does correlate with maintaining improved quality of life.

  - **For individuals with a BMI over 30:** Research has shown that individuals with a BMI over 30 have an increased risk of developing high blood pressure, high cholesterol, Type II diabetes, stroke, osteoarthritis and some cancers including breast cancer and colon cancer in addition to sleep apnea.

  - **Do you snore?** Have you ever been tested for sleep apnea? Sleep apnea is a disorder where there is a pause in breathing that lasts from a few seconds to minutes. As a result, the quality of your sleep is poor, which makes you tired during the day. Sleep apnea is a leading cause of excessive daytime sleepiness.
Health Screening: Adults

- Would you say you live in a City, Town or Rural area?
- What is your health insurance status?
  - Uninsured
  - Insured
  - Refused
- Do you have a Primary Care Provider (MD, DO, PA or NP)?
  - If no – please provide with referral information
- When was your last medical visit?
- Family medical history?
Health Screening: Adults

- Do you regularly wear your seatbelt?
- Do you ride a bike/motorcycle/ATV/horse? Participate in rodeo events?
  - Do you wear a helmet?
Health Screening: Adults

- Do you know what your Blood Pressure typically runs?
  - Take BP (If above 140/90 – recheck)

- **Note:**
  - If their Blood pressure continues to be >140 systolic OR >90 diastolic recommend that the person have it rechecked at their doctor’s office or clinic in the near future.
  - If their Blood pressure >160 systolic OR >100 diastolic, alert the supervising faculty AND ask them to talk to the person about being seen by their doctor or clinic because they are at risk for developing complications of high blood pressure.
  - Any person who is hypertensive AND who is having chest pain, trouble breathing, confusion or dizziness refer to the faculty supervisor and taken to the first aid station
Blood Pressure Instructions

- Place cuff on patient & press start

Four different size cuffs to choose from
**Health Screening: Adults**

- **Pulse Oximetry:** Place oximeter on the index or middle finger & press button

- **Note:**
  - Oxygen saturation of 90% is normal in Denver in contrast to 95 to 98 at sea level
  - If someone is below 90 and they are feeling any symptoms, alert the faculty supervisor and send them to the first aid station
Health Screening: Adults

- Last tetanus?

- If 65+
  - Have you had the pneumonia vaccine this year?
  
  **Note**
  - The CDC recommends that individuals over the age of 65 get a pneumonia vaccine. Check with your personal physician or clinic to get one.

- Did you get a Flu shot this year?
  - We may or may not have them at the booth this year.
Health Screening: Adults

- If 50+
  - Have you had colon cancer screening of some kind within the last 10 years?
  - If no, it is recommended that individuals undergo screening for colon cancer beginning at age 50 and every 10 years thereafter unless recommended more frequently by their personal healthcare provider
Health Screening: Adults

- If Female
  - Have you had cervical cancer screening within the last 3 years?
  - If no, it is recommended that women between the ages of 21 and 30 undergo a cervical cancer screen every three years and starting at age 30, women should undergo a cervical cancer screen every 3 years or 5 years with HPV co-testing.

- If Female & 50+
  - Have you had a mammogram?
  - For women between the ages of 50 and 74 there is convincing evidence that undergoing a mammogram every two years reduces breast cancer mortality. There is limited evidence of benefit for women under the age of 50 and is determined by the presence of known genetic history or history of chest radiation. Increasing age is the most important risk factor for most women.
Health Screening: Adults

- Do you know your blood sugar?
- Have you had anything to eat today?
- Take blood sugar

**Note:**
- Non-diabetics: If fasting blood sugar is $> 100$ or non-fasting $> 140$ advise the person to get it rechecked by their doctor or clinic.
- Known to be diabetic: fasting blood sugar should be 130 or less or 180 or less if non-fasting
- If numbers are great than those listed above, contact faculty supervisor for consultation
Blood Draw for Glucose

- Glove up
- Place glucose test strip in glucometer (butterfly up/wide end in glucometer)
- Wipe participant finger with alcohol swab
- Use lancet provided separately (not in kit) to draw blood from side of finger
- Start flow (may need to gently squeeze finger)
- Place glucose test strip (black dot) next to blood on finger
Vision screen

- Have you noticed any recent changes in your vision?
- Testing done with glasses if worn
- Place ruler on forehead (14 inches)
- Have them cover one eye & read lowest (most clear) number line (left hand column)
- Repeat for other eye
- Test is a guideline & does not offer a true prescription
- Have the person follow-up with an optometrist or ophthalmologist (>20/40)
Health Screening: Adults

- Current tobacco use?
- Do you drink alcohol?
- Do you use marijuana?
- Milk consumption?
- Sweetened Beverages?
- Fruits & vegetables daily?
- Restaurants per week? Sit down & fast food?
Health Screening: Adults

- On average, how many times per week do you do moderate exercise for at least 20 minutes? This can include brisk walking, bicycling, vacuuming, gardening, or anything else that causes an increase in breathing or heart rate.
Health Screening: Adults

- **Blood Pressure Retake**
  - If their Blood pressure continues to be >140 systolic OR >90 diastolic recommend that the person have it rechecked at their doctor’s office or clinic in the near future.
  - If their Blood pressure > 160 systolic OR >100 diastolic, alert the supervising faculty AND ask them to talk to the person about being seen by their doctor or clinic because they are at risk for developing complications of high blood pressure.
  - Any person who is hypertensive AND who is having chest pain, trouble breathing, confusion or dizziness refer to the faculty supervisor & taken to the first aid station.
Balance Screen

- Questions
  - Are you afraid of falling?
  - Have you fallen in the past 3 months?
  - Have you had a near fall in the past 3 months?

- Balance screen
  - One leg stance (eyes open: 10 seconds each leg)
    - Able/ Unable
  - Romberg Test (eyes closed: 30 seconds each)
    - Feet together (excess sway, loss of balance, dizziness)
    - Feet tandem (excess sway, loss of balance, dizziness)

- If response is yes to any of the above encourage them to talk to their PCP
Health Screening: Adults

- What Animals are you regularly exposed to?
  - Dogs
  - Casts
  - Horses
  - Sheep
  - Cows
  - Goats
  - Chickens
  - Pigs
  - Amphibians (snakes, frogs, turtles, etc.)
Oral Health Screen

Adult (answers are yes, no, I don’t know)

- **Risk factors (any yes answer is considered high risk)**
  - Have you had a cavity in the past year?
  - Have you ever been told that you have “pockets” or gum disease?
  - Have you had a tooth removed for decay or gum disease in the past year?
  - Do you have a history of diabetes, heart disease, stroke, COPD or depression?
  - Do you take medication that causes dry mouth?
  - Do you have a history of tobacco, alcohol or other substance abuse?
  - Do you have a mouth sore that has lasted more than two weeks?
Oral Health Screen cont.

Adult (answers are yes, no, I don’t know)

- **Protective factors (any no answer is considered high risk)**
  - Do you live in a community that has fluoride in its water?
  - Do you drink tap water?
  - Do you brush your teeth with a fluoride toothpaste twice a day?
  - Do you floss your teeth daily?
  - If you have a partial or dentures, do you take them out and clean them at night?
  - Have you seen a dental professional (Dentist/ Dental Hygienist, etc)
  - Do you have Dental insurance (including Medicaid)?
Health Screening: Adults

- On a scale from 1-10, how important is it to **change** anything about your health?

- Print out patient sheet (still working on e-mail option)
  - Discuss any follow-up they may need
  - Provide them with Medical or Dental referral sources if they do not have a PCP in their area

- Exit the program
Health Screening: Child/Adolescent

- Measure height (inches) & weight (pounds)
- Record both on a sticky note to enter into iPad
Health Screening: Child/Adolescent

- Birthdate
- Age
- Gender
- Do they live in a big city, small town or on a ranch?
Health Screening: Child/Adolescent

- Family history?
- Eat breakfast?
- Eat at restaurant or fast food?
- Snacks?
- Sweetened beverages?
- Milk?
- Fruits & vegetables?
Health Screening: Child/Adolescent

- Does anyone smoke around you?
- Active play or sports?
- Television, movies, video games or computer?
Health Screening: Child/Adolescent

- Have you noticed any changes in your vision?
  - Vision screen: same as adult

- Balance screening: same as adult
Oral Health Screen

Children (answers are yes, no, I don’t know or n/a)

- **Risk factors (any yes answer is considered high risk)**
  - Have you ever had a cavity?
  - Do you eat candy, or drink soda or juice more than three times a day?
  - Do you take daily liquid medicine?
  - Have you ever been told that you are anemic or need to take iron?
  - Have you used tobacco/marijuana products in the past month (including chew, snuff, cigarettes, e-cigs or cigars)
  - Have you been diagnosed with any developmental problems?
  - Do you have any piercings in your mouth?
Oral Health Screen

Children (answers are yes, no, I don’t know or n/a)

- **Protective factors (any no answer is considered high risk)**
  - Do you live in a community that has fluoride in its water?
  - Do you drink tap water every day?
  - Do you brush your teeth with a fluoride toothpaste twice a day?
  - Have you seen a Dental Professional (Dentist, Dental Hygienist, etc) in the past year?
  - Do you wear a mouth guard for sports activities?
Health Screening: Child/Adolescent

- Print form & go over with child &/or parents-guardians
- Results may be printed in English & Spanish
Closure

- **DO**
  - Explain the power of small changes
  - Encourage them to follow up with their healthcare providers as needed
  - Be sensitive to weight issues – especially with kids
  - Consult faculty supervisor if unsure of how to answer questions

- **DON’T**
  - Give a laundry list of things they are doing wrong
PRACTICE TIME!!
Where is the booth?

- 4655 Humboldt Street, Denver, CO 80216
- Exit Brighton Blvd
- Big brown building with black animals
Where is the booth?

- Exposition Hall: Booth #217
Parking?

- Parking on the stock show grounds is FREE in designated areas.
- Allow 30 minutes before your shift to find parking & shuttle to the building.
- Go to the National Western Stock Show website for additional directions: [www.nationalwestern.com](http://www.nationalwestern.com)
What do I wear?

- Western apparel or business casual
- Nursing students must wear approved uniform as per the AMC College of Nursing guidelines
- A white coat will be provided at the booth
  - You do not need to bring your own
- Student ID Badge **MUST** be worn at all times

Required for admission into the Expo Building
**What do I bring?**

- Water Bottle & lunch/dinner (a small refrigerator is provided for volunteers)
- Nothing Else
- There is very little room for storage (even your coat)
- Leave valuables at home NOT IN YOUR CAR; every year there are thefts from cars during the NWSS
Contact Cindy Armstrong if you have any questions or if you have an emergency & can’t make your shift:

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- cell: 303-888-0580
Questions?