

**CASPER Report  
MDS 3.0 NH Assessment Print**

Run Date 05/07/2019

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State: MO  
Facility ID: 12345  
Facility Name: SUNNY VALLEY NURSING CENTER  
Resident Name: HOPPIN, DAVID  
Assessment ID: 1436109862

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**Section M: Skin Conditions**

M0210	RESIDENT HAS 1+ UNHEALED PU/INJURIES	1 – YES
M0300B1	STAGE 2 PRESSURE ULCERS: NUMBER PRESENT	0
M0300B2	STAGE 2 PRESSURE ULCERS: NUMBER AT ADMIT/REENTRY	^
M0300C1	STAGE 3 PRESSURE ULCERS: NUMBER PRESENT	0
M0300C2	STAGE 3 PRESSURE ULCERS: NUMBER AT ADMIT/REENTRY	^
M0300D1	STAGE 4 PRESSURE ULCERS: NUMBER PRESENT	2
M0300D2	STAGE 4 PRESSURE ULCERS: NUMBER AT ADMIT/REENTRY	0
M0300E1	UNSTAGED DUE TO DRESSING/DVC: NUM PRESENT	0
M0300E2	UNSTAGED DUE TO DRESSING/DVC: NUM AT ADMIT/REENTRY	^
M0300F1	UNSTAGED SLOUGH/ESCHAR: NUMBER PRESENT	0
M0300F2	UNSTAGED SLOUGH/ESCHAR: NUMBER AT ADMIT/REENTRY	^
M0300G1	UNSTAGEABLE – DEEP TISSUE INJURY: # PRESENT	4
M0300G2	UNSTAGEABLE – DEEP TISSUE INJURY: # AT ADMIT/REENTRY	4

This report contains fictional resident data created  
for demonstration purposes only.