

## Case Study 147

Name \_\_\_\_\_ Class/Group \_\_\_\_\_ Date \_\_\_\_\_

Group Members \_\_\_\_\_

### ► Scenario

J.G., a 49-year-old man, was seen in the emergency department 4 days ago, diagnosed with alcohol intoxication, and released after 8 hours to his brother's care. He was brought back to the ED 12 hours ago with an active gastrointestinal (GI) bleed and is being admitted to the intensive care unit (ICU); his diagnosis is upper GI bleed and alcohol intoxication.

You are assigned to admit and care for J.G. for the remainder of your shift. According to the ED notes, his admission vital signs (VS) were 84/56, 110, 26, and he was vomiting bright red blood. He was given IV fluids and transfused 6 units of packed red blood cells (PRBCs) in the ED. On initial assessment, you note that J.G.'s VS are blood pressure 154/90, 110, 24; he has a slight tremor in his hands, and he appears anxious. He complains of a headache and appears flushed. You note that he has not had any emesis and has not had any frank red blood in his stool or melena (black tarry stools) over the past 5 hours. In response to your questions, J.G. denies that he has an alcohol problem but later admits to drinking approximately a fifth of vodka daily for the past 2 months. He reports that he was drinking vodka when he got home from the ED the first time. He admits to having had seizures while withdrawing from alcohol in the past. He tells you that he "just can't help it" and has strong urges to drink, but that he never means "to drink very much." He has had trouble keeping a job over the past several months.

### Chart View

#### Admission Lab Work

Hgb	10.9 g/dL
Hct	23%
ALT (formerly SGPT)	69 units/L
AST (formerly SGOT)	111 units/L
GGT	75 units/L
ETOH	291 mg/dL

1. Which data from your assessment of J.G. are of concern to you?
2. What do the admission laboratory results indicate?
3. Which of the previous laboratory results specifically reflects chronic alcohol ingestion?

### PART 3 PSYCHIATRIC AND ALTERNATIVE THERAPIES CASES

4. What are the two most likely causes of J.G.'s symptoms?
5. What is the most likely time frame for someone to have withdrawal symptoms after abrupt cessation of alcohol?

#### CASE STUDY PROGRESS

You assess J.G.'s history of alcohol use by talking to J.G. and his brother and conclude that he is showing indications of alcohol use disorder.

6. Name the criteria for alcohol use disorder as outlined in the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-V)* and put an asterisk or star next to the ones J.G. demonstrates.
7. Based on the DSM-V criteria, how would you rate the severity of J.G.'s alcohol use? Explain your decision.
  - a. No problem
  - b. Mild
  - c. Moderate
  - d. Severe
8. What would be helpful for J.G.'s physician to know regarding J.G.'s substance abuse history?

#### CASE STUDY PROGRESS

J.G.'s physician comes to the ICU to assess J.G. and tells you to "watch out" because J.G. is about to go into alcohol withdrawal delirium. The physician writes several medication orders.



**CASE STUDY PROGRESS**

J.G. experiences alcohol withdrawal delirium that lasts for 36 hours before subsiding. He did not experience any seizures this time. As his medical condition stabilizes, he is transferred out of the ICU to the hospital's psychiatric unit. He tells you that he is "ready to go home" and does not want to "touch another drink" but admits that he needs help.

13. What medications might be prescribed to J.G. to assist him with sobriety? What is the usual treatment regimen, and what side effects and precautions should you educate the patient about concerning each?

14. What types of education and referral will be done before J.G.'s discharge from the hospital?

15. J.G. is referred to the local Alcoholics Anonymous (AA) program. What strategy can be implemented to increase his likelihood of attendance at these meetings?

**CASE STUDY OUTCOME**

J.G.'s AA sponsor meets with him while J.G. was still in the hospital, and the meeting goes well. The day after his discharge from the hospital, J.G. attends his first AA meeting with his sponsor.