Adult/Geriatric Critical Thinking Worksheet

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1. Disease Process & Brief Pathophysiology

Morbid obesity. The numerous amount of adipose cells secrete adipokines. Adipokines play a key role in overall metabolic function. They affect appetite, inflammation, blood pressure, hemostasis, insulin sensitivity, metabolism. This takes an extreme toll on the body and organ functioning.

The patient was admitted with septic shock caused by a UTI. This could in part be due to the fact that high levels of adipokines create a systemic inflammatory response. Chronic inflammation causes a weakened immune system. This makes the patient more susceptible to infection.

2. Factors for the Development of the Disease/Acute Illness

Modifiable risk factors for developing morbid obesity are unhealthy diet and sedentary lifestyle. Non-modifibale risk factors are genetics and ethnicity also play a role in the development of morbid obesity. The main components of unhealthy diet are caloric surplus, high sugar intake, high saturated/ trans fat intake. Sedentary lifestyle is associated with a high body mass index. Genetic studies have shown that certain DNA elements are linked to the development of obesity. African Americans, Hispanics, and whites, in that order, are the most susceptible to obesity. Asian groups are the lest likely to develop a high body mass index.

3. Signs and Symptoms

High body mass index, obesity is considered a BMI >30. Morbid obesity is considered a BMI > 40. (P)

Central obesity (P)

Increased waist circumference (P)

Metabolic syndrome

Shortness of breath (P)

Difficulty ambulating (P)

Easily fatigued (P)

4. Diagnostic Tests pertinent or confirming of diagnosis

Body mass index >30 (obesity) Body mass index >40 morbid obesity (P)

General physical exam (P)

Measuring waist circumference

5. Lab Values that may be affected

HDL is low. Normal HDL: >40mg/dl

LDL is high. Normal LDL: <100mg/dl

Fasting blood sugar and hemoglobin A1c that indicate prediabetes or diabetes (P)

Normal blood sugar:7 0-110 mg/dl (P)

Normal A1c: <5.7

Liver function to screen for fatty-liver disease

6. Current Treatment

Healthy lifestyle changes

Heart healthy diet

Increase in physical activity

Behavioral weight loss programs

Weight loss medications

Blood pressure medications (P)

Bariatric surgery

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7. Focused Nursing Diagnosis:

Impaired mobility

8. Related to (r/t):

Pathophysiology of morbid obesity

9. As evidenced by (aeb):

BMI 50.0-59.9

Central obesity

Shortness of breath

Inability to balance/support self

Patient ambulate x2 assist with a walker

10. Desired patient outcome:

The patient will understand and teach back the importance weight loss to increase mobility and overall health. This includes understanding of dietary modifications and physical activity plan. 12/09/2020.

11. Nursing Interventions related to the Nursing Diagnosis in #7:

1 . Discuss emotional/psychological events or feelings that may lead to overeating or food as a coping mechanism.

Evidenced Based Practice:

Can help patient identify the difference between the hunger sensation and an emotional compulsion.

2. Provide emotional support while patient increases ambulation.

Evidenced Based Practice:

Emotional support increases self-esteem and comfortability in completing challenging tasks.

3. Discuss options for a dietary plan that will include patient preferences in a healthier way.

Evidenced Based Practice:

Focusing on low-fat intake, adequate protein intake, increased fruit and vegetable intake is a healthier and more balanced diet. Finding a way to incorporate the preferences of the patient increases the likelihood of compliance and sustained life modification.

12. Patient Teaching:

1. Teach the patient the importance of a heart healthy diet.

2. Teach the patient the importance of physical activity.

3. Encourage support system by suggesting joining an activity group at nursing home.

13. Discharge Planning/Community Resources:

1. Consult with dietician at nursing home facility to assist in meal planning.

2. Increased visits with physical therapy to increase strength and ambulation.

3. Options for physical exercise clubs/groups at the nursing home facility that the patient would enjoy. This will also provide emotional support in a social setting.

Resources

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