

Case Study 2: Patient G.C.

You admit G.C., 48 yr. old obese Hispanic male with Type 2 Diabetes on your medical floor with left heel ulceration. He completed antibiotics and Prednisone for a severe respiratory infection 1 week ago. He is a soft-spoken unemployed cook. He conveys that he lives with Mama (she is present speaks no English). He is unmarried and has no children. He appears depressed. You scan his Labs:

Blood glucose 275
BUN 32 – Creatinine 2.5
Triglycerides, Total Cholesterol 270

He states he was started on 25 units of NPH Insulin when he developed the foot ulcer several weeks ago. He states his PCP said if he does not “straighten out he may end up on dialysis.” You ask him if he maintains a dietary plan and he says; “sometimes.” GC states his doctor told him to try to maintain a blood glucose level of 100-150.

The next day GC received his AM dose of insulin at 0645. Blood glucose check at 11:30 is 138. You note GC ate poorly at breakfast and very little at lunch because he wanted to rest. At 1430 you want to check on GC and are prepared to change the dressing on his foot. When you enter the room, he says he has a headache. You immediately check his blood sugar which is 69.

- What is your immediate plan of direction?
 - o Administer IV dextrose. If no IV access administer Glucagon
- Why did the hypoglycemia occur at 4 PM?
 - o He ate very little for breakfast and lunch after being given insulin.
- What nursing diagnoses are appropriate
 - o Hypoglycemia, Left foot ulcer, and possible depression
- Why does the doctor recommend that GC maintain a higher than normal level?
 - o To prevent hypoglycemia while on NPH which effects last 12-24 hours.
- What could cause GC's blood sugar to elevate?
 - o Elevated carbohydrate intake, failure to take NPH correctly.
- What barriers does GC have?
 - o Being part of an at-risk community (Hispanics), possible depression due to life status which could lead to poor adherence to diet and medication plan.
- What are important goals for GC regarding diabetes care?
 - o To get in adequate nutrition to promote healing while maintaining blood sugar. Adherence to medication when not admitted to hospital. Inspect feet often for any wounds.
- What culture or language challenges might GC have?

- o Hispanic culture is at risk as many Hispanic food is rich in high glycemic carbohydrates. He must also translate anything his health care professionals tell him to his mother who is not a English speaker.