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Case Study 4: N.J.

Scenario

N.J. is a 65-year-old widow who lives alone. She has a long history of type 2 diabetes and hypertension. N.J. is not employed. She has very limited savings and relies on Social Security benefits for income. She smokes about half a pack of cigarettes a day and has been a smoker since she was in her 20s. She drinks alcohol "a couple of times a year, usually a glass of wine at a special dinner."

N.J. has a sore on her ankle that she has noticed for the last several months. The sore does not hurt much, but she has been unable to get it to heal. The cashier at the convenience store tells her that she should use butter to help heal wounds because the butter keeps the wound moist and helps to enhance healing.

N.J. decides to follow the cashier's advice and applies butter to her wound for a week. The wound does not seem to be getting any better; in fact, it looks worse. It now has yellowish drainage, and the skin around the wound has become red. Her foot also hurts when she walks on it. N.J. stops the butter treatment and goes to the emergency department.

Discussion Questions

1. What are the priority nursing diagnoses for N.J.?

The priority nursing diagnoses for N.J would be her Type 2 Diabetes and her diabetic neuropathy causing delayed healing of her ankle wound. The inability for the wound to heal is more likely due to her Type 2 Diabetes/Diabetic Neuropathy, and not the butter, but the butter certainly does not help and promotes a higher risk of infection/delayed healing.

2. What discharge teaching will you provide her?

Discharge teachings for N.J. would include to check her feet daily, wear socks and close toed shoes, and to keep her feet clean and apply lotion. This will help prevent more wounds that will not heal due to her Type 2 Diabetes. I would also educate her on proper wound care and to not use butter on her skin, but instead keep her wounds clean and use a type of medicated ointment on any wounds. I would also educate her on signs and symptoms of infection and tell her to seek medical help as soon as she experiences any signs or symptoms. She should also be reminded that good BG control can help with treating her diabetic neuropathy and delayed healing of wounds, as well as quitting smoking (a huge risk factor for chronic foot complications in diabetics).

3. How can you advocate for N.J. regarding required medical equipment, supplies, and medications and their cost on a limited budget?

I would connect N.J with a case worker to discuss her options of receiving Medicaid or Medicare and speak with her Health Care Provider to ensure she is being prescribed more budget friendly medication options. I would provide her with a list of resources to receive her medical supplies at a lower cost.

4. What expectation would you anticipate for N.J. regarding follow-up care?

I would expect N.J to follow her wound treatment regimen and to be more consistent with checking for possible wounds. By catching them early she can possibly prevent infection and

save money on medical treatment, along with strict blood glucose control. I would also expect N.J. to continue monitoring her BG and treating her Type 2 Diabetes with insulin, diet, and exercise. She should also be making it a priority to see her HCP for an annual comprehensive foot exam to maintain healthy feet.