

## **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? – Give GC some juice and recheck BC in 20 minutes.
- Why did the hypoglycemia occur at 4 PM? -G.C. is inconsistent with his dietary plan so the insulin probably peaked, and he hadn't eaten anything.
- What nursing diagnoses are appropriate? DM management and imbalanced nutrition less than body requires.
- Why does the doctor recommend that GC maintain a higher-than-normal level? G.C.'s Dr. probably considered that G.C. is inconsistent with his diet. By recommending a higher BC range it helps with Hypoglycemia.
- What could cause GC's blood sugar to elevate? – a side effect of Prednisone is Hyperglycemia.
- What barriers does GC have? His ethnicity (non-white) G.C. is also obese
- What are important goals for GC regarding diabetes care? G.C. needs to be more consistent with his diet. I would also educate him on the importance of good personal hygiene, specifically on how to care for his feet.
- What culture or language challenges might GC have? Maybe he doesn't speak fluent English which would explain why he's so soft spoken. This could also mean he may not fully understand his treatment plan.