

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.? *Impaired peripheral-neurovascular function and risk for injury.*
2. What discharge teaching will you provide her? *Tell N.J. to that good BG management may help her wound recover, emphasize on plenty of bed rest and finish course of prescribed antibiotics. Also, avoid taking medical advice from unqualified individuals and to always contact her HCP with any questions and concerns*
3. How can you advocate for N.J. regarding required medical equipment, supplies, and medications and their cost on a limited budget? *I would have the case manager come talk to N.J. I would also give her the resources and programmes available at the hospital to help diabetic patients financially.*
4. What expectation would you anticipate for N.J. regarding follow-up care? *Teach N.J. on how to self-inspect her feet daily, notify physician immediately on any bruising or ulcers present, and have her make a comprehensive annual foot exam to help identify risk factors predictive of ulcers or amputations.*