

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 diagnosis is impaired skin integrity because of the sore on the ankle that is keep getting worse.
2. What discharge teaching will you provide her?
Stop using butter on the ankle, inspect feet daily, do not walk around barefoot, wear good supportive shoes.
3. How can you advocate for N.J. regarding required medical equipment, supplies, and medications and their cost on a limited budget?
I would try to help the patient to find a program that would support the cost of treatment. Help the patient to find a community that could help with diabetes.
4. What expectation would you anticipate for N.J. regarding follow-up care?
I would like to expect that N.J. foot ulcer is showing no pain, expect that it would not get worse than it already is.