Unit 1: Overview of Critical Care Nursing

ONLINE CONTENT (1H)

Unit Objectives:

- Select appropriate nursing interventions to manage common problems and needs of critically ill patients. (1,6,)*
- Develop strategies to manage issues related to caregivers of critically ill patients. (1,2,6)*
- Apply the principles of hemodynamic monitoring to the nursing and interprofessional management of patients receiving monitoring. (1,2,6,7)*

*Course Objectives

Assignment:

Review- Unit 1: Overview of Critical Care Nursing PowerPoint.
Read the case study, then answer the case study questions below.

CASE STUDY

Margaret Mayfield is a 62 year old female who has been admitted from the ED to the critical care unit, after calling 911 due to severe fatigue, weakness, and fever. Her past medical history includes: dwarfism, HTN, hyperlipidemia, diabetes mellitus, and has a chronic Foley catheter due to urinary retention. She lives alone in an apartment and has no family members. Her friend is her POA for healthcare, and is the only contact listed. She has a home health aide visit once a week to assist her with bathing and all of her meals are delivered from local take-out restaurants. She utilizes a walker at home, however reports she hasn't been out of bed for the last several days due to weakness and fever. She uses a private ambulance service to go to physician appointments; this is the only time she gets out of her apartment **for the last three years.** Home medications include carvedilol, simvastatin, aspirin, and insulin. She does not have her medications with her and **does not know the doses.**

Case Study Questions

- As the critical care nurse caring for her, what overall concerns do you have?
  - Concerned about her vital signs, her blood sugars/a1c, labs such as Lipid, BMP, CBC w/diff, TSH, Vit D, Vit B12
  - Concerns of fever onset, how high was the fever? Has she taken Tylenol to help? Fluids?
  - When the last time her urinary catheter was changed, patency of it, her urine color and clarity (CAUTI?), proper perineal care? Is the bag below the bladder at all times?
  - Her I&O's, what she typically eats in a day
  - If she has any redness/pressure areas due to not getting out of bed for quite some time
  - How often is she seeing her HCP?
  - Is she administering the correct dosage of insulin
  - Concerned that she doesn't know the dosages of her medications
  - Concerned that the only time she's seeing a HHA is once per week, is she also seeing a HHC nurse?
  - If she has a code status and or living will
  - How is her ROM?
- Describe ways in which you would communicate with her and her POA for healthcare. Include what topics you would discuss at this time in her hospitalization.
  - I would communicate by using her preferred learning style
  - Find out if there are any barriers to communication such as ET tube, sedation, etc
  - A brochure to take home of any resources that may be needed
  - Educate on: balanced diet, carb counting, increasing fluid intake such as water, checking blood pressure at least BID, her medications and their importance to her body
  - Pressing the call light if she is experiencing any pain/distress, or needs any assistance
  - Discuss what she typically eats in a day, fluid intake per day
  - Educating on exercising, even light ROM exercises so her joints and muscles don't tense up
  - How many hours of sleep she gets per night
  - Inquire if she has any cultural considerations
- Discuss the ethical issues this case presents.

    - Non maleficence – do no harm, do not deprive her of a good meaningful life. There is harm by her staying at home for long periods, hardly goes out, her eating habits, lack of education of medication regimen, how she is being assisted once per week with bathing
    - False imprisonment – staying at home, has only seen her HCP once in the past 3 years. Developed a fever, weakness, fatigue
    - Justice / professional negligence– has only seen her HCP once in the past 3 years. I feel like her HCP could have been more "aggressive" with follow up appts.
    - Moral distress- patient may know the right thing to do but however she is very fatigued and has a fever
    - Veracity – medical staff has to be honest with patient
    - Fidelity- being honest with the patient
- Discuss the legal issues this case presents.
    - Need informed consent to begin treatment
    - Patient needs to be informed of her rights
    - Patient has the right for confidentiality and right for privacy
- In what ways will you serve as an advocate for Margaret?
    - Speaking up for her when she is afraid to (such as reading her body language)
    - Talking to her alone and seeing how she is feeling with things that are going on
    - Ask her what she wants to do, let her be in charge of her care
    - Listening to her and being there for her
    - Treating her as a human being
- What other departments would you involve in her care, and why?
    - Endocrine = she has diabetes and dwarfism
    - Cardiology = HTN, HLD
    - Urology = foley catheter, urine retention
    - Nutrition = balanced meal planning
    - PT/OT = limited mobility, uses a wheelchair
    - Pharmacist = to answer any medication question

Place your answers to these questions in the **"Unit 1: Overview CC dropbox" by 1/8/2025 at 0800.** Be prepared to share and discuss your thoughts in class.

In order to receive full credit (1 hour class time) for this assignment, it must be completed in its entirety by the due date/time assigned. Any assignments not

completed in its entirety will result in missed class time and must be completed by the end of the semester to pass the course.