

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?
As the critical care nurse caring for Margaret, I have many concerns for her physical and mental health. First are her presenting symptoms of severe fatigue, weakness, and a fever. Along with this, it is said in her history that she has a chronic Foley due to urinary retention. With all of this information, I am thinking of looking for a serious CAUTI and sepsis. Margaret lives alone and is only checked on once a week by a home health aide. Since her weakness has onset, Margaret has not been out of bed for several days and only leaves the house to attend her physician appointments. With this information, I would inspect all of her skin for any signs of breakdown, pressure injuries, or infected wounds. Next, I would be concerned about her disease management of HTN, hyperlipidemia, and diabetes mellitus from her lack of medication knowledge and her consumption of take-out meals daily. She stated that she does not have her medications, nor does she know the doses. This statement shows that she is not properly educated on her medications and most likely is not taking them as prescribed. There was no information added about her current blood pressure or blood sugar, so I would obtain those and act accordingly. Lastly, I would be concerned about her mental health since she has no family, an aide visits only once a week, she has been inside almost every day for three years, and has multiple disease processes.
- ▶ 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.
While communicating with Margaret and her POA, I would use a friendly, nonjudgmental, and respectful tone. I would use therapeutic communication and ensure to use open-ended questions to gather more information about her situation at home. This would help me guide my care plan while in the hospital and later down the road, any possible discharge placement. Whenever caring for Margaret, I would explain everything that I am doing and would give education on many topics. These topics may include checking her blood pressure and blood sugar, medication compliance, foley

catheter care, diet management, etc. I would try to educate the POA on Margaret's current diagnoses and situation, and ensure they can be available for Margaret. The POA most likely will need to help decide on placement if Margaret will not be able to go home after her stay.

- ▶ Discuss the ethical issues this case presents.
Ethically, in healthcare, Margaret has autonomy over her medical decisions. Her POA should be confirmed and included in her plan of care. In this situation, her POA may try to take away any of Margaret's autonomy since the explanation of her situation sounds as though she is not able to take care of herself at all. Even though Margaret may not be able to take care of herself fully, her mental capacity will be evaluated, as she can still make her own healthcare decisions. In certain situations, an ethical dilemma may arise between Margaret and her friend (her POA). An ethics committee will evaluate the situation and help promote and protect the patient's rights. They will include education, support, and resolution of any problems.

- ▶ Discuss the legal issues this case presents.
In Margaret's situation, she was seen weekly by a home health aide. Depending on further information on Margaret's condition, negligence may be found against the aide if she was not properly cared for on the day of each visit. If there is any suspicion of negligence, the nurse is mandated to report their findings. Another legal issue could be giving information to Margaret's friend before ensuring she is her POA. Her POA should be verified by the signed legal documentation first before sharing any of Margaret's medical information.

- ▶ In what ways will you serve as an advocate for Margaret?
During Margaret's stay, I would advocate for testing and treatment of her possible infection from her chronic Foley catheter. I would ensure she can get adequate education about her condition and medications before the discharge process. I will make sure Margaret has autonomy, and if able, will be involved in all decision-making. Also, I would ensure to include her POA in her plan of care and education about her care to give Margaret a support person and the best chance of recovery if possible. When Margaret is ready

for discharge from the hospital, I will ensure she is set up, possibly in a longer-term facility for proper monitoring and care.

- ▶ What other departments would you involve in her care, and why?
One department that may be involved in Margaret's care is urology to assess her chronic Foley catheter and the possibility of a serious CAUTI or further infection. Another department that may be involved is the Pharmacy, which may be able to better explain the medications, reasons, doses, etc., to Margaret before discharge. Case management should also be involved to work with Margaret and her POA for proper placement after discharge, which may include a long-term facility like a nursing home for proper care. A dietitian should be consulted to talk to Margaret about her disease processes and proper diet management that does not include take out every day.

Place your answers to these questions in the **“Unit 1: Overview CC dropbox”** by **1/7/2026 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.