

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?

First on arrival I am worried on the patient's status, is she continuing to show signs of worsening weakness, severe fatigue, and fever. What is causing her fever and how high of a temperature is she running and seeing if I can get something to bring her fever down in that moment. I would make sure to grab all her vitals and ask her, if possible, to provide information regarding her baseline if she knew at all. I am concerned she lives at home alone and only has an aid come once a week to give all basic care needs. I think that an aid should be coming much more often due to her medical history. When staying in bed for prolonged periods of time results in bed sores so I would make sure to do a thorough skin assessment to ensure no pressure injuries have formed. Also, lastly, I would try and get in contact with her POA which is her friend to see if maybe they could bring in her home meds so that we could clarify dosages and which medications she is currently or not currently taking.

- ▶ 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 try my best to get all the information regarding her medications and her current living status at home. Trying to see if she knew of any code status paperwork or documentation that maybe she was entrusted with. Seeing if the patient is showing signs of being alert and oriented x3 to make such decisions for herself in that moment. I would discuss what led up to this severe fatigue and asking about respiratory issues potentially and conducting a thorough respiratory assessment.

- ▶ Discuss the ethical issues this case presents.

I would say one ethical issue that arises in this situation is respecting the patient's autonomy throughout this crisis. Regarding her critical care patients can decline fast in this setting so with her POA involved there may be a plan already set in place.

- ▶ Discuss the legal issues this case presents.

I think some legal issues that presents in this case could be with the POA and if she was never contacted if she could not speak for her own care. This could potentially lead to legal issues between the healthcare team and the POA for her friends care at the hospital. The hospital has a legal obligation to involve family and any sorts of POA's during times of crisis.

- ▶ In what ways will you serve as an advocate for Margaret?

I will ensure that I provide the best care that I possibly can for this patient in this time of need. One way I will advocate for her is by involving her POA and getting the most up to date information regarding medications and current living standards. Next if Margaret is neurologically intact I will ensure that her autonomy is put first regarding her own care. I will also ensure that her healthcare team is involved and updated on any changes in her medical status and responding accordingly effectively.

- ▶ What other departments would you involve in her care, and why?

Other departments that I could potentially be getting involved in her care would be pharmacy to see if she has any medication records on file through them to see if we can get some more information on missing meds. Next, I could see if her weakness and fatigue is increasing, I would probably have respiratory on standby just in case her SpO2 and breathing starts to decline. I could see social workers getting involved as well depending on her POA and if there are any set advanced directives regarding to her care. If there are any bed sores and or pressure injuries, I could potentially see wound care getting involved to assess the wounds and to make the calls on how to appropriately cleanse and dress them. Also, when getting case management involved I could see them getting more services with home health care potentially so that she doesn't have to be so alone all the time and getting more basic life care around the clock.

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.