Reflection Paper 2: Pathophysiology and Pharmacology Case Analysis

Gwendolyn Ritter-Randolph

University of Florida

College of Nursing

When reflecting on the case study analysis assignment completed in NUR 3123 I had to go back to why I selected this particular case. I work on a very busy and fast paced thirty bed medical surgical unit and on any giving day we have multiple discharges and admissions covering a wide variety of diagnosis. Why did I select this patient? Ultimately I feel my decision was based on the relationship that was formed between the patient, his wife, and the medical, nursing, and ancillary staff that provided the comprehensive and patient-centered care and services that led to a positive outcome and discharge for this patient.

This patient was admitted for an above the knee amputation (AKA) due to chronic left stump infection with osteomyelitis status post a left below the knee amputation (BKA). This patient also presented with a history of multiple co morbidities which include Hypertension, Diabetes Type 2, Chronic Kidney Disease, Stage III, and Peripheral Vascular Disease. It was imperative to utilize the essential leadership skills of Essential II of AACN Baccalaureate Essentials of critical decision making as we addressed the many ways each of these conditions affected his pre and post-surgical progress and recovery. For example the patient’s Blood Glucose readings were consistently elevated. These results were relayed to the medical doctor and adjustments were made to gain better glycemic control.

The patient and his wife were Spanish speaking only so we had to provide translation assistance throughout his stay. In addition, both the patient and his wife were very quiet and soft spoken. I would utilize Spanish speaking staff as often as possible, but I did not want the patient or his wife to feel that this would be the only way in which we would communicate with them. I utilized our translation line frequently to let them know that there would never be a time in which they would not be able to express any questions regarding the patient’s care or any needs the patient or his wife felt they might require. This entailed Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes. (AACN, 2008) It was important to make sure that the patient and his wife had confidence that the nursing staff served as their advocate during their hospitalization. I met daily with the Medical Interdisciplinary Team to discuss medical needs and plan of care. The wife expressed that they would need assistance with patient mobility in the home upon discharge. We were able to secure a wheelchair for the patient to use in the home. Nursing and Dietetics provided continual education on diabetes management, and proper medication use. Physical Therapy provided education on proper body mechanics for use of rolling walker and safe wheelchair use.

Reflection of this case analysis showed that there was so much that was done for this patient and his wife throughout his stay that I do not think I illustrated as thoroughly as I could have. Whenever I provide care for a patient I give them 100% of myself to provide them the best nursing care possible. I feel that even when I did not realize it I was using several of the Essentials of the American Association of Colleges of Nursing Baccalaureate Education. That helps me to feel hopeful that I am on the right track towards obtaining my BSN.

References

 American Association of Colleges of Nursing (2008). *The Essentials of Baccalaureate Education  for Professional Nursing Practice*. Washington, D.C.: AACN

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