**NRNP 6540 Week 5 Case Assignment**

**Case Title:** **A 67-year-old With Tachycardia and Coughing**

Ms. Jones is a 67-year-old female who is brought to your office today by her daughter Susan. Ms. Jones lives with her daughter and is able to perform all activities of daily living (ADLs) independently. Her daughter reports that her mother’s heart rate has been quite elevated, and she has been coughing a lot over the last 2 days. Ms. Jones has a 30-pack per year history of smoking cigarettes but quit smoking 3 years ago. Other known history includes chronic obstructive pulmonary disease (COPD), hypertension, vitamin D deficiency, and hyperlipidemia. She also reports some complaints of intermittent pain/cramping in her bilateral lower extremities when walking, and has to stop walking at times for the pain to subside. She also reports some pain to the left side of her back, and some pain with aspiration.

Ms. Jones reports she has been coughing a lot lately, and notices some thick, brown-tinged sputum. She states she has COPD and has been using her albuterol inhaler more than usual. She says it helps her “get the cold up.” Her legs feel tired but denies any worsening shortness of breath. She admits that she has some weakness and fatigue but is still able to carry out her daily routine.

 Vital Signs: 99.2, 126/78, 96, RR 22

Labs: Complete Metabolic Panel and CBC done and were within normal limits

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| --- | --- | --- | --- |
| **CMP Component** | **Value** | **CBC Component**  | **Value** |
| Glucose, Serum | 86 mg/dL | White blood cell count | 5.0 x 10E3/uL |
| BUN | 17 mg/dL | RBC | 4.71 x10E6/uL |
| Creatinine, Serum | 0.63 mg/dL | Hemoglobin | 10.9 g/dL |
| EGFR | 120 mL/min | Hematocrit | 36.4% |
| Sodium, Serum | 141 mmol/L | Mean Corpuscular Volume | 79 fL |
| Potassium, Serum | 4.0 mmol/L | Mean Corpus HgB | 28.9 pg |
| Chloride, Serum | 100 mmol/L | Mean Corpus HgB Conc | 32.5 g/dL |
| Carbon Dioxide | 26 mmol/L | RBC Distribution Width | 12.3% |
| Calcium | 8.7 mg/dL | Platelet Count | 178 x 10E3/uL |
| Protein, Total, Serum | 6.0 g/dL |  |  |
| Albumin | 4.8 g/dL |  |  |
| Globulin | 2.4 g/dL |  |  |
| Bilirubin | 1.0 mg/dL |  |  |
| AST | 17 IU/L |  |  |
| ALT | 15 IU/L |  |  |

Allergies: Penicillin

Current Medications:

* Atorvastatin 40mg p.o. daily
* Multivitamin 1 tablet daily
* Losartan 50mg p.o. daily
* ProAir HFA 90mcg 2 puffs q4–6 hrs. prn
* Caltrate 600mg+ D3 1 tablet daily

Diagnosis: Pneumonia

**Directions:** Answer the following 10 questions directly on this template.

Question 1: What findings would you expect to be reported or seen on her chest x-ray results, given the diagnosis of pneumonia? Infiltrations , opacification in the base of the lungs

Question 2: Define further what type of pneumonia Ms. Jones has, HAP (hospital-acquired pneumonia) or CAP (community-acquired pneumonia)? What’s the difference/criteria?

Ms. Jones has CAP. Tutor check on difference which is the type of micro-organism on each one

Question 3:

* 3A) What assessment tool should be used to determine the severity of pneumonia and treatment options? Tutor to search answer
* 3B) Based on Ms. Jones’ subjective and objective findings, apply that tool and elaborate on each clinical factor for this patient. Tutor to search answer

Question 4: Ms. Jones was diagnosed with left lower lobe pneumonia. What would your treatment be for her based on her diagnosis, case scenario, and evidence-based guidelines? Based diagnosis is community –acquired pneumonia over lapping a COPD

Question 5: Ms. Jones has a known history of COPD. What is the gold standard for measuring airflow limitation? Tutor search for answer

Question 6: Ms. Jones mentions intermittent pain in her bilateral legs when walking and having to rest to stop the leg pain/cramps. Which choice below would be the best choice for a potential diagnosis for this? Explain your reasoning.

1. DVT (Deep Vein Thrombosis)
2. Intermittent Claudication (this is the answer)
3. Cellulitis
4. Electrolyte Imbalance

Question 7: Ms. Jones mentions intermittent pain in her bilateral legs when walking and having to rest to stop the leg pain. What test could be ordered to further evaluate this? Arterial Doppler ultrasound , and CT angiogram of the legs

Question 8: Name three (3) differentials for Ms. Jones’ initial presentation. Tutor search for differentials

Question 9: What patient education would you give Ms. Jones and her daughter? What would be your follow-up instructions? Tutor search for answer

Question 10: Would amoxicillin/clavulanate plus a macrolide have been an option to treat Ms. Jones’ Pneumonia? Explain why or why not. Yes this is the combination for micro in CAP tutor check for microbiology