



Case 4- No Localizing Urinary Tract S/S's: No Warning S/S's

Situation: Suzi has mild generalized discomfort with mild confusion but orientable. She refused activities today and appetite is poor. She remains alert. She had recent med change with addition of gabapentin for chronic pain

Resident evaluation: She's had no recent falls or exposure to infectious residents or visitors. Lungs are clear. She has no chest pain, no change in BMs, no vomiting or diarrhea, no skin rashes or sores, and no new joint, chest, or abdominal pains. There are no localizing urinary symptoms or signs.

Appearance: Suzi has 24-36 hrs. of poorly localized general discomfort with mild confusion and poor appetite without warning signs, localizing urinary or other focal S/Sx's.

Vitals

Temperature: 97.2 (oral)

Pulse: 68 regular **Resp:** 20

BP: 120/62

O2 Sat: 97% RA

Finger stick Blood Sugar: 106

Background

Diagnoses: multiple spine VB compression fractures, OA, osteoporosis, h/o mastectomy

Recent antibiotics: none

Anticoagulants, Dig, oral

hypoglycemic: none

Allergies: Doxycycline

Code Status: Full Code

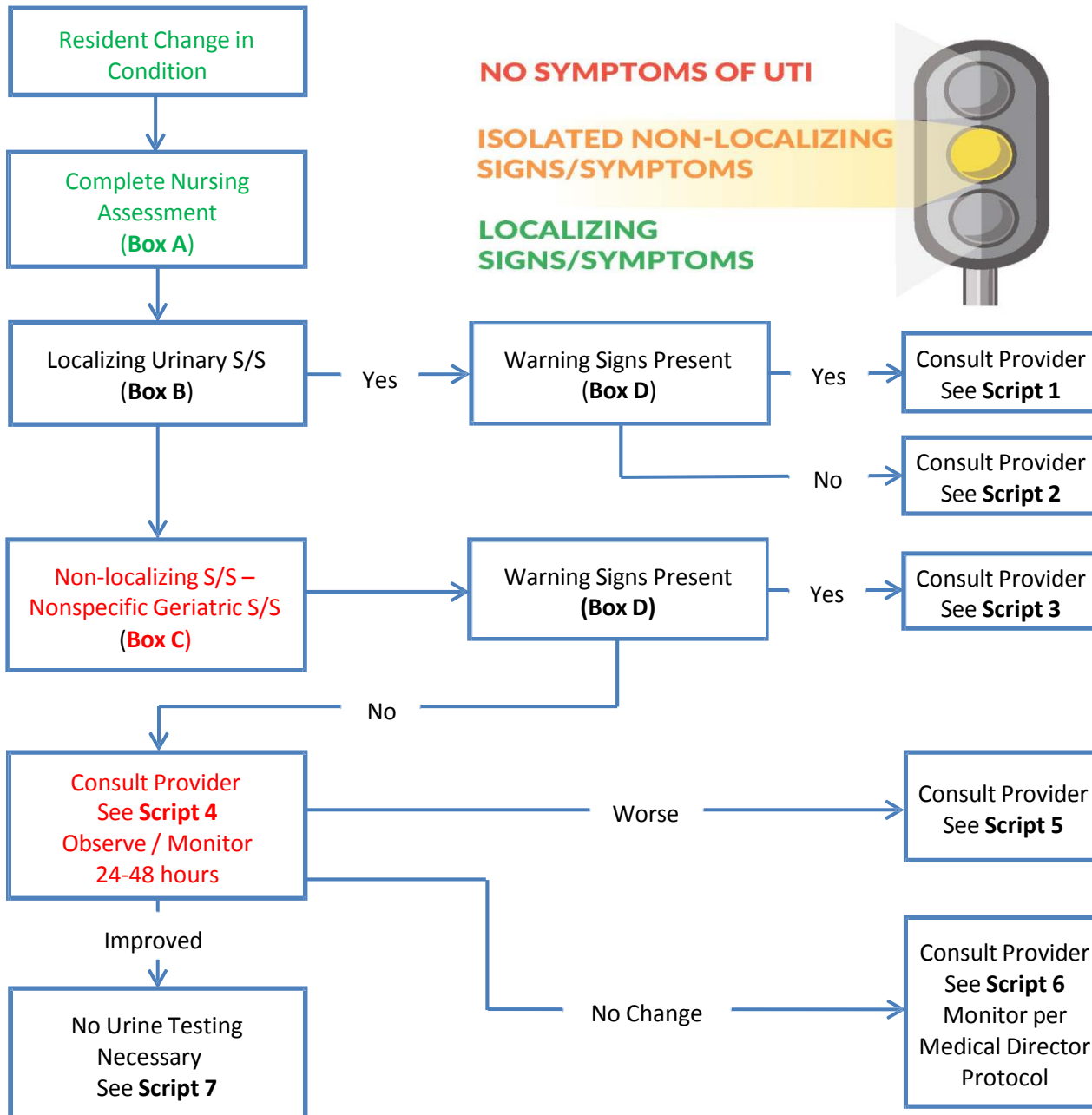


Case Study 4 – Answer Keys

When to Test Urine – Nursing Tool

Case Study 4 – Nursing Tool Answer Key

Wisconsin Healthcare-Associated Infections in LTC Coalition



Box A
Nursing Assessment
Complete Nursing Assessment
See Nursing Assessment on reverse side of this tool

Box B
Localizing Urinary S/S

- Acute dysuria
- New or worsening frequency
- New or worsening urgency
- New or worsening incontinence
- Gross hematuria
- Suprapubic pain
- Costalvertebral angle pain
- New scrotal / prostate pain
- Urethral purulence

Box C
Non-localizing / Non-Specific Geriatric S/S

- Behavior Changes
- **Functional Decline**
- **Mental Status Change**
- Falls
- Restlessness
- Fatigue
- “Not Being Her-Himself”

Box D
Warning Signs

- Fever
- Clear-cut Delirium
 - Altered LOC
 - Disorganized Thinking
 - Psychomotor Retardation
- Rigors (shaking chills)
- Hemodynamic Instability
 - Hypotension
 - Tachycardia



Script 4 PHYSICIAN COMMUNICATION

No Localizing Urinary Tract S/S's: No Warning S/S's

May Fax

Resident: Suzi Notsosick Provider:
Date: 10/21/15 4:30PM

Dr. Wesby

This message is to inform you of a change of condition

Chief Complaint: Generalized discomfort and mild confusion since lunch today.

Situation: She has a complaint of generalized discomfort. She has had a mental status change of mild lethargy and mild confusion tending to wander but is orientable. She didn't go to activities this afternoon. Appetite poor since this morning. She remains alert. She has a recent med change consisting of addition of gabapentin 300 mg bid oral for pain.

Vitals: Temperature 97.2 (oral) Pulse 68 and regular, Respirations 20, B/P 120/62. O2 Sat on room air is 97%.

Finger-stick Blood Sugar: 106

Background:

Diagnoses: Compression fracture multiple vertebral bodies, osteoporosis, osteoarthritis, GERD. Hx of mastectomy.

Recent antibiotics: None

Allergies: Doxycycline

Anticoagulants, Hypoglycemics, Digoxin: None

Code Status: Full Code

Resident Evaluation: She has not recently fallen. There is no exposure to infectious residents or visitors. Lungs are clear and there is no chest pain. She has had no change in BMs with last one yesterday and there is no vomiting or diarrhea. There are no localizing urinary symptoms or signs. There are no skin rashes or sores, and no new joint, chest, or abdominal pains.

Appearance: This resident is an elderly female with 24-36 hours of complaint of poorly localized general discomfort with mild confusion and poor appetite. She has no warning signs, no localizing urinary signs or symptoms and no signs or symptoms of other focal infection.

Review/Notify: According to our understanding of best practices and our facility protocols, the information is insufficient to indicate an active urinary tract infection. The resident does NOT need an immediate prescription for an antibiotic or urine testing. We are asking for an order for a 24-48 hour period of observation and will call physician with resident change of condition. Please advise.