



Mr. Ed Jones, a 75-year-old widower, is retired from his job as a cabinetmaker. He continues to work with wood as a hobby in the basement of his home located on the banks of the Deep River. He sells small toys at craft fairs and flea markets in nearby communities. His daughter lives approximately 20 minutes away and checks in on him at least every weekend. Mr. Jones is independent and sees his primary care physician occasionally for monitoring of his blood pressure, which is controlled with antihypertensive medications. Following a week of heavy rainstorms, flash flooding occurred in the area and Mr. Jones's basement sustained much water damage and ruined most of his stored wood, wooden toy products, and the woodworking machinery. Mr. Jones waded through the waist-deep water to get to the rescue boat rather than wait for the boat to get to him. He is subsequently admitted to the medical/surgical unit due to concerns from the EMTs who triaged him at the fire station 5 miles inland from Mr. Jones's neighborhood.

### ASSESSMENT

Lisa Smith, RN, obtains a nursing assessment. Mr. Jones states that he has been on antihypertensive medications for "a few years" but only takes his medication "once in awhile" since it has been some time since his last office visit and he wants his remaining pills "to last" until he can get back to the doctor. He has had numerous cuts to his hands from his woodworking and has had a big ulcer on his right foot "for a few weeks" caused by a tool that fell on his foot. He did not seek medical care because he believed it would get better on its own. "It looks worse than it is. It really doesn't even hurt."

When asked about his home he stated, "Everything is gone. My wife is gone, my wood, my tools . . . it's all over."

Physical assessment findings include T 100.7°F PO, P 96, R 20, and BP 178/100. Skin cool and dry with multiple lesions on both hands and a Stage II ulcer on his right dorsal foot with yellow-green exudate. Pain rated at a 2 on a 10 scale with 10 being the worst pain there could be. Lungs are clear, heart rate regular. No edema noted. Abdominal assessment is normal. Neurologically intact. Weight is normal for height and frame. A culture is ordered and taken of the yellow-green exudate of the right foot.

Preliminary blood work results show WBCs at 15,000/mm<sup>3</sup>. A peripheral IV is initiated with continuous fluids and IV antibiotics are ordered every 6 hours. An antihypertensive medication is ordered on a regular schedule plus a prn antihypertensive for systolic >180 and diastolic >90.

### DIAGNOSES

- *Impaired Skin Integrity* of the right foot and hands related to lesions (cuts) on the hands and Stage II ulcer with exudates on the right foot
- *Powerlessness* related to perceived loss of control over life situation
- *Ineffective Thermoregulation* related to trauma
- *Acute Pain* related to expression of pain secondary to skin lesions

### EXPECTED OUTCOMES

- Regain skin integrity—ulcer on right foot and lesions on hands will heal.
- Identify aspects of his life still under his control.
- Maintain body temperature at normothermic levels.
- Express feeling of comfort and relief from pain.

### PLANNING AND IMPLEMENTATION

- Inspect skin every shift; describe and document skin condition; report changes.
- Perform prescribed treatment regimen for skin condition. Clean lesions on hands and right foot every 8 hours and assess healing.
- Arrange psychosocial consult(s).
- Guide the client through a life review. Encourage reflection on past achievements.
- Help the client identify the aspects of his life that are still under his control.
- Allow the client the right to express feelings.
- Monitor client's body temperature every 4 hours, more often if indicated.
- Monitor and record client's heart rate and rhythm, blood pressure, and respiratory rate every 4 hours.
- Administer analgesics, antipyretics, and medications as indicated. Monitor and record their effectiveness.
- Maintain hydration; monitor intake and output.
- Assess client's signs and symptoms of pain and administer pain medication as prescribed. Monitor and record the medication's effectiveness and adverse effects.

### EVALUATION

Mr. Jones was hospitalized for 3 days, receiving intravenous antibiotic therapy, analgesics, an antidepressant, monitoring of his cardiac response to a new antihypertensive medication, wound care, and sessions with the social services representative and his daughter. His hand lesions are healed, the foot ulcer has developed new granulation tissue with no signs of infection, he is afebrile, and his blood pressure is maintained within normal limits. He will be discharged to his daughter's home until his home can be assessed for the extent of the water damage and feasibility of repair. He has agreed to visit a therapist to work through his feelings of grief and loss. He has expressed an interest in attending monthly support group meetings with his neighbors who also experienced losses in this disaster.

### CRITICAL THINKING IN THE NURSING PROCESS

1. What action did Mr. Jones take that probably exacerbated his skin lesions?
2. What other testing might you anticipate related to Mr. Jones's delayed healing?
3. What were the contributing factors to Mr. Jones's fever?
4. What life situations contributed to Mr. Jones's attitude about life?

*See Evaluating Your Response in Appendix C.*