



## Decision Guide Case Study No. 1

### Anxious Resident: Possible C. Difficile

#### Brief Background

Mr. St. John is an 89-year-old man admitted for post-acute care following a 5-day inpatient admission for pneumonia. The hospital discharge planner reported he was “clinically stable”.

#### In the Hospital

- Pneumonia was treated with IV antibiotics; changed to oral antibiotics on the day of transfer
- Mr. St. John required continuous oxygen to maintain pulse ox greater than 93%
- Mr. St. John developed severe diarrhea on the day prior to discharge. A stool specimen was sent for C. difficile toxin assay

#### Change in Condition

- The day after admission to the nursing home, the CNA reported to the nurse that Mr. St. John did not want to get out of bed for breakfast and seemed more tired and weak than the previous day.
- The nurse assessed the resident and found:
  - Mr. St. John was lethargic but could be easily aroused and knew his name/date/location
  - Mr. St. John reported 4 episodes of diarrhea overnight. He has no appetite and is feeling too weak to get out of bed. His abdomen had hyperactive bowel sounds and was diffusely tender
  - Clear lungs sounds, no cough

#### Actions Taken

- The nurse called the physician who said she would be able to see the resident within 2 hours and requested:
  - Bloodwork be done immediately (CBC and basic metabolic panel)
  - IV fluids immediately
  - Probiotic with p.o. antibiotic order
  - Call for results of the stool specimen sent for C. difficile
- The physician arrived 2 hours later and went to the resident’s room with the nurse. They found the resident weak but easily aroused.
- Mr. St. John said to them: “I think I should go back to the hospital...I feel like I have been getting sicker by the minute since I came here.”

#### **Case Study Analysis for Discussion:**

- 1) Using information learned from the Guide, what is your response to the resident?
- 2) Are there actions you can take to prevent hospital readmission?
- 3) Using information learned from the Guide, what is your response to the resident?
- 4) Should you have discussed possible readmission with the doctor before seeing the resident? What should you say?
- 5) Is it appropriate to discuss readmission issues with the resident at this time?