



Case Study and Reflection - Neuroscience

Mrs. Z is an 81 year old, French and Spanish speaking female who presented to the JGH ER due to sudden onset right sided weakness and difficulty speaking. She was diagnosed with a left middle cerebral artery stroke and was treated with tPA. Her hospital course was complicated by cardiogenic shock, which necessitated a two week stay in the coronary care unit. While there, she was found to have bilateral upper extremity proximal stenosis.

Mrs. Z's previous medical history includes a diagnosis of bipolar affective disorder type I.

Mme Z was referred to occupational therapy once transferred to the stroke unit for functional evaluation and discharge planning. You are told that she has been refusing to get out of bed. The medical team wants to know the discharge plan today as the patient has already been hospitalized for two weeks.

When reading the chart, it is written that Mme Z was independent and living on her own at baseline. She has two children, one more involved than the other. The chart also indicates that Mme Z has global aphasia and right hemiplegia. A note in the chart shows that the psychiatry service stopped her psychiatric medications in the context of not needing them since she had a stroke.

Reflective Exercise

- 1) What are your initial concerns regarding Mrs. Z?
- 2) What are your thoughts on Mrs. Z's current living situation (ie home environment, social environment, etc.)?
- 3) What do you expect to see during your evaluation with Mrs. Z? How will you communicate with Mrs. Z?
- 4) What additional information would help you to better understand Mrs. X? Prepare a brief summary of your plan for your initial interview and evaluation of Mrs. X.
- 5) You want to learn a little bit more about Mrs. Z's current situation but you find her in a deep sleep in her hospital bed, who else can you look to for additional information?
- 6) What would you recommend as goals for Mrs. Z while she's in hospital, and what interventions would you plan to achieve these?
- 7) What are different discharge possibilities given Mrs. X's current condition and care needs? For example, is Mrs. Z a good candidate for rehab? Why or why not?