



Decision Guide Case Study No. 2 Abdominal Tenderness

Brief Case History

Robert Timmons is an 86-year-old male who has lived independently at home for the past 7 years. His medical diagnoses include:

- Congestive Heart Failure (CHF)
- Hypertension
- Anxiety

Hospitalization

- His most recent hospitalization was one week ago for severe anemia of unknown origin.
- Mr. Timmons was discharged to your skilled nursing facility after a 6-day hospital stay. Upon admission to your facility, he tells you he has never trusted nursing homes because he knows “many people” that have died in them. He wants you to know that if anything “happens” he wants to go to the local hospital because they can take care of people.

Change in Condition

- One week after admission to the facility, the CNA on the unit noted that he doesn't seem to have an appetite. She told the nurse Mr. Timmons did not eat breakfast and refused to touch his lunch. Upon assessing the patient, the nurse discovered the patient had tenderness in his lower abdomen when palpated, but no elevated temperature.
- The doctor is given a detailed assessment of the patient's condition and asks the nurse to closely monitor the patient. She adds that her nurse practitioner is coming to the facility this afternoon to evaluate Mr. Timmons.
- The patient asks if something is wrong and if he should be transferred to the hospital right now.

Case Study Analysis for Discussion:

- 1) How would you respond to Mr. Timmons' question?
- 2) Are there actions the nurse and other facility staff can do to establish this patient's trust and enhance his nursing home experience?
- 3) Using the Decision Guide as a tool, what is your next course of action in this case?
- 4) Is it appropriate to discuss readmission issues with the resident at this time?
- 5) Using information learned in the Decision Guide, are there additional actions that could be taken to prevent hospital readmission?