

PRESENTING COMPLEX
PATIENTS:
A SYSTEMS-BASED APPROACH

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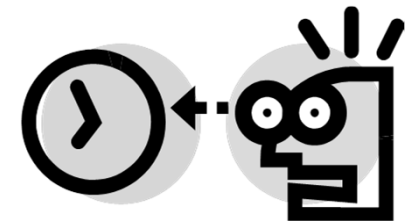
Objectives

Be able to:

1. Describe the purpose of using a systems based approach when monitoring and presenting a patient to a preceptor/provider.
2. Differentiate categories used to breakdown medical issues facing complex patients.
3. Identify categories to which different types of information would belong.
4. Compose a presentation to summarize a patient case and provide recommendations to a preceptor/provider

Purpose of using a framework for presenting a patient case

- When presenting a case, it is important to be:
 - Complete
 - Utilizing a framework helps to organize and avoid omitting information
 - Helps to anticipate questions that may be asked
 - Succinct
 - Utilizing a framework helps to present information efficiently
 - Be respectful of the time of others
 - Remember how busy preceptors/providers are



Problem- vs. Systems-Based Approach

Problem-based

- Best for simple situations
 - Ex. Generally healthy patient with 1-2 issues
 - Ex. Patients with chronic diseases that are stable that have a small number of acute issue



Systems-Based

- More thorough
 - Addresses each organ system
 - Helps insure nothing is missed
- Helps to organize presentation
 - Provides a framework to present from
- Helpful when there is uncertainty in diagnosis

Preparing to present a patient case


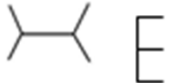
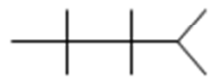
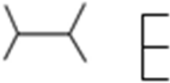



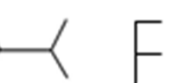

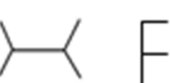
- Remember your audience
 - Physicians and pharmacists tend to be more focused on different aspects of patient care
 - Different specialties will also have different focuses
- Organize your information
 - Know which pertinent positives and negatives you want to mention
 - Know what you can omit from your presentation
 - Have written notes
- Anticipate questions
- Practice

Patient Name (Last Name, Last 4):

Admission Date:

Room:

Age	Admission CC:	Pertinent PMH:	Allergies/ADRs:
Gender			
Height			
Actual Body Wt			
Ideal Body Wt			
Adjusted Body Wt			
BMI			
Line Access: Central Line: Peripheral Line:	Med Hx <input type="checkbox"/> Med Rec <input type="checkbox"/>	Warfarin <input type="checkbox"/> PK <input type="checkbox"/>	Discharge Information:
	ESRD Status: PD ____ HD ____	Drains/Tubes/Tracheostomy:	

Date																				
Daily weight (kg):																				
Vitals																				
Labs <table border="1"> <tr> <td>Na⁺</td> <td>Cl⁻</td> <td>BUN</td> <td rowspan="2">glucose</td> </tr> <tr> <td>K⁺</td> <td>HCO₃⁻</td> <td>creatinine</td> </tr> <tr> <td>WBC</td> <td>Hgb</td> <td>HCT</td> <td>Plt</td> </tr> <tr> <td>E</td> <td>Calcium</td> <td>Magnesium</td> <td>Phosphate</td> </tr> </table>	Na ⁺	Cl ⁻	BUN	glucose	K ⁺	HCO ₃ ⁻	creatinine	WBC	Hgb	HCT	Plt	E	Calcium	Magnesium	Phosphate	  Est CrCl:	  Est CrCl:	  Est CrCl:	  Est CrCl:	  Est CrCl:
Na ⁺	Cl ⁻	BUN	glucose																	
K ⁺	HCO ₃ ⁻	creatinine																		
WBC	Hgb	HCT	Plt																	
E	Calcium	Magnesium	Phosphate																	
Other Labs																				
Therapeutic Drug Monitoring																				
VTE Px																				
GI Px																				

PHARMACY MONITORING FORM

Patient Name (Last Name, Last 4):

Admission Date:

Room:

Date					
Neurological NEURO					
Cardiovascular CV					
Pulmonary/ Respiratory PULM/RESP					
Gastrointestinal/ Nutrition GI					
Renal/Hepatic					
Infectious diseases ID					
Hematological HEME					
Endocrinological ENDO					
PAIN Bowel regimen:					
Other:					

PHARMACY MONITORING FORM

Patient Name (Last Name, Last 4):

Admission Date:

Room:

Monitoring Notes	
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Cultures	Date	Site	Initial Result	Final Result	Sensitivities

Antimicrobial	Indication	Date																

Beginning a patient presentation

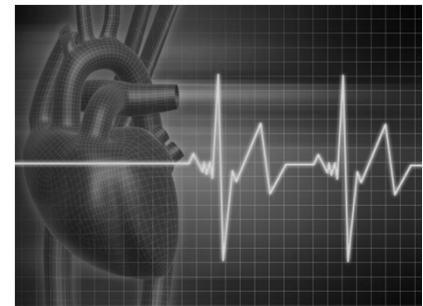
- Start by introducing the patient.
 - Ex. JP is a 48 year old female...
- Explain why the patient was admitted.
 - Ex. JP is a 48 year old female who presented to the emergency room with respiratory distress.
- Give a brief summary of the patient's background and pertinent history.
 - Ex. JP is a 48 year old female who presented to the emergency room with respiratory distress yesterday. The patient has a history of CKD, hypertension, coronary artery disease, and lupus nephritis for which she receives chronic immunosuppression.

Beginning a patient presentation (cont.)

- Summarize recent, significant events
 - Provide context to your audience
 - Ex. JP was intubated in the ED and admitted to the ICU overnight. Blood cultures were obtained and broad spectrum antibiotics were started for possible health care associated pneumonia
- Next, perform a review of systems

Review of Systems

- Neurological
 - Ex. alerted mental status, seizure activity, psychiatric symptoms, Phenytoin levels
- Cardiovascular
 - Ex. chest pain, blood pressure abnormalities, arrhythmias seen on EKG, Serum K⁺, norepinephrine infusion rate
- Pulmonary
 - Ex. Respirations, shortness of breath, wheezing, coughing, intubation status, nebulized medications



Review of Systems (cont.)

- Gastrointestinal/Nutrition
 - Ex. constipation, melena, diarrhea, diet orders, TPN, enteral feeding rates
- Renal/Hepatic
 - Ex. serum creatinine, creatinine clearance, liver dysfunction, electrolyte abnormalities
- Infectious disease
 - Ex. fevers, sites of infection, culture data, empiric antibiotic coverage

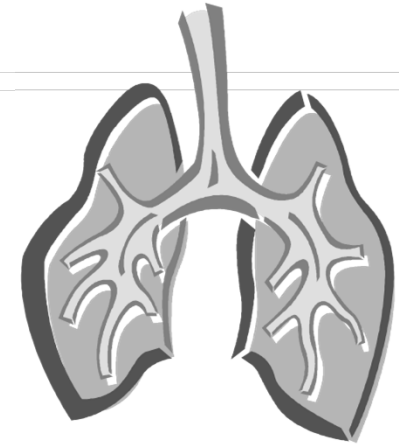


Review of Systems (cont.)

- Hematological
 - Ex. anticoagulation, antiplatelet therapy, anemia, coagulopathies, H/H
- Endocrine
 - Ex. Serum glucose, diabetes, thyroid dysfunction, adrenal disease, reproductive
- Pain
 - Ex. pain score, chronic pain, neuropathic pain, bowel regimen, morphine infusion rate
- Prophylaxis
 - Ex. DVT ppx, stress ulcer ppx



Example System Presentation



Pulmonary

Ex. Patient hospitalized with dehydration and a severe asthma exacerbation.

“Patient has a history of moderate to severe persistent asthma, who presented with an acute asthma exacerbation. Patient’s respirations down to 18 today from 24 bpm yesterday. O₂ saturations have been between 92 and 98% on room air. Patient is currently receiving budesonide 180 mcg inhaled BID, and albuterol nebulizers scheduled q4hr. I would recommend decreasing the frequency of neb treatments to just q4hr prn.”

Conclusion

- Provide overall assessment
 - Quickly review main points of patient presentation
 - Ex. In summary, JP is our 48 year old female patient admitted to the ICU due to health care associate pneumonia requiring intubation.
 - Identify areas for intervention
 - Ex. Patient blood pressure had now stabilized, but is currently fluid overloaded from multiple normal saline boluses given in the ER in the setting of chronic kidney disease.
- Provide therapy and monitoring recommendations
 - Ex. I would recommend doubling the patient's home dose of furosemide to help remove excess fluid. Potassium should be check in the morning.

Tips

- Be mindful of time
 - Avoid spending too much time on any one issue

- Stay organized
 - Be prepared to be interrupted with questions
 - Refer to notes when needed

- Have labs and vitals recorded nearby
 - You may be asked about labs you were not expecting

Thank you