

BLOOD PRESSURE EDUCATION TOOLKIT MODULE 1 CASE STUDY #1

Mr. Jones is 82 years old. His grey hair, thick glasses and jolly demeanor are carried well on his 5'6", 220 lb frame. He has difficulty controlling his adult onset diabetes and has smoked 2pks/day for 50 years.

After the recent loss of his brother from a heart attack Mr. Jones was no longer able to stay at home and agreed to admission to a long term care home. He has been a resident now for 1 week.

Through conversations with Mr. Jones, you learn his favorite activity is eating chips and drinking beer (~2-3 beer per day) while watching TV.

At the start of your shift you learn that Mr. Jones has had swollen feet over night and that his bedtime snack was a pepperoni pizza. The night staff report his blood pressure last evening was 167/84 on his left arm.

The day RPN communicates that Mr. Jones morning blood pressure remains high at 164/90. He is on daily blood pressure medication.

You note shortness of breath (SOB) when he moves. His face is flushed. His skin is cool and clammy, and he is complaining of a headache.

QUESTIONS

- 1. What abnormal signs & symptoms does Mr. Jones have?
- a) shortness of breath (SOB) when he moves
- b) face is flushed
- c) skin cool & clammy
- d) complaining of headache
- e) elevated blood pressure (164/90)
- 2. Upon noticing these signs & symptoms what actions would you take?

Get help right away

3. What do you report to the registered staff?

You report the signs & symptoms you see which include confusion, SOB, flushed face, cool & clammy skin, headache, swollen feet and confusion, BP reading of 164/90

4. Should you do anything more?

Yes, you should continue to note any changes in Mr. Jones condition and support him until the registered staff take over his care during this unstable time.



BLOOD PRESSURE EDUCATION TOOLKIT MODULE 1 CASE STUDY #1

- 5. What are Mr. Jones risk factors for hypertension?
- a) 82 years old
- b) 5'6", 220lbs obese
- c) diabetic
- d) family history heart attack
- e) stress from admission to home x1wk
- f) smokes 2pk/d
- g) inactive watch TV
- h) poor diet- potato chips
- i) alcohol intake > 14 drinks
- 6. Once Mr. Jones condition has stabilized how can you support him to improve his blood pressure management?
- a) Diabetic diet
- b) Reduce salt intake
- c) Increase activity
- d) Weight loss
- e) Reduce stress of moving to the LTC home
- f) Smoking cessation
- g) Reduce alcohol intake
- h) Monitor blood pressure
- i) Support medication therapy
- j) Supporting diabetic management (eg. blood sugar monitoring, medications, diet and exercise)
- k) Reinforce that hypertension is the 'silent killer' that can cause such things as stroke, heart attack and even death
- I) Observe and report any changes in condition to the nurse
- 7. If Mr. Jones' blood pressure does NOT return to and remain within target range, what might the consequences be?
- a) Heart Attack
- b) Stroke
- c) Kidney (renal)
- d) Blindness
- e) Loss of cognitive function or dementia