

## Case Study Four

Dispatch: 19:45 hrs; personal injury collision, 79 y/o male injured

On Arrival: You see three vehicles at odd angles to each other in an intersection and a SUV that has apparently run head-on into a tree. The SUV appears to have also been impacted on the driver's side door and the rear bumper is severely damaged. Your patient is in the SUV. You find 79 y/o Sam, unrestrained, lying across the front seat. The steering wheel is bent.

### Initial Assessment Findings

Mental Status—Responsive to voice, oriented to name only, occasionally follows commands

Airway—Open and clear

Breathing—RR 24, lung sounds are faint wheezes in both bases, clear in upper lobes

Circulation—Skin pale, cold, dry

Radial pulse irregular at 70

Chief Complaint—No complaints at this time

### Focused History

Events—Bystanders state the SUV ran a red light, was impacted on the driver's side door and then rear ended by another vehicle and then jumped the curb and hit the tree.

Previous Illness—Hypertension, "heart problems"

Current Health Status—Good

Allergies—Penicillin

Medication—K-chlor, Theo-dur, glyburide, Lanoxin, Lasix and hydrochlorothiazide

Last oral intake—unknown

### Focused Physical Exam

Current Set of VS—Pulse 70 and irregular, BP 114/84, Respiratory rate 24

Other Pertinent Findings—Complains of pain when left chest wall is palpated, no creptius noted, ecchymosis to sternum; abdomen is soft and nontender to palpation; pelvis intact; bilateral contusions to the patella, deformity of the right ankle; pulse oximetry is 78 percent

Diagnostic Tests—BS 40

## Case Study Four Questions

1. What is significant about Sam's injury?
2. Given the mechanism, what type of injuries might you suspect and do those differ with age?
3. What are your scene considerations?
4. What are your treatment priorities?
5. According to your assessment findings, what body systems are affected?
6. How do normal changes of aging regarding the CNS affect your assessment?
7. How do normal changes of aging affect your assessment of Sam's skin?
8. Considering the medications Sam is taking, what preexisting problems does he have?
9. Would a pulse oximetry value of 80 percent on room air be considered normal for Sam?
10. How do Sam's preexisting problems affect your assessment?
11. Sam has a midsternal bruise. How would cardiac contusion be recognized?
12. What is Sam at risk for?
13. What is your initial treatment of Sam?

14. What other considerations, related to Sam's age and preexisting medical problems, must you take into account when assessing and treating Sam?
  
15. When you try to ask Sam what happened, he seems easily distracted and inattentive. When he does respond he asks questions of his own but doesn't answer your questions. What additional assessment should be done?
  
16. How does aging change the picture of the patient in shock?
  
17. How would you know if Sam was in shock?
  
18. During your time with Sam, you have determined that he is hard of hearing, but can lip-read. Answers to your questions are inconsistent, and his response to commands is also inconsistent. His pupils are equal; he moves all four extremities but his left side is noticeably weaker. Sam's blood sugar is 40. How would you continue treatment?