



THE CORRECTIONAL NURSE

Inspiring

Professional Correctional Nursing Practice

August 2020

I hope that you have had a good month since we last communicated. While I had hoped that COVID conversations would be at a minimum by now, it seems that this is not the case; and the situation, while becoming the "norm," continues to require vigilance and common sense.

This month, I wanted to share a story that reflects the importance of obtaining a thorough history and subjective information from our patients. A few weeks ago at the Free Clinic, a 43 year old woman came in for a follow-up to an emergency department encounter that occurred 3 days prior. She went to the emergency department for "heart palpitations and racing" that had been occurring intermittently for the past six weeks. She also complained of intermittent constipation, diaphoresis and hot flashes. The emergency department obtained an EKG which indicated a sinus tachycardia of 123 beats per minute, and labs that were within normal parameters, except for an elevated thyroid stimulating hormone level of 4.8. Her T4 level was 1.8 (within normal parameters). The emergency department discharged her with a diagnosis of Hypothyroid and recommended that she go to her primary care provider for a prescription for levothyroxine.

At the Free Clinic, I precept medical students, nurse practitioner students, and physician assistant students, and my students that day obtained vital signs (all normal except a tachycardia of 118 beats per minute), completed a general physical examination (unremarkable), and were ready to write the prescription and send her home. However, because the symptoms she described were not all congruent with a diagnosis of hypothyroid, when I went in to meet her, I asked more questions about her history, including the medication she was currently taking. She denied taking any medication when the students asked, and she denied taking medication when I questioned her as well, but when I asked about any vitamins or supplements taken, she took some vitamins and an herb called Maca, which claimed to increase energy and libido, out of her bag. The bottle noted that the Maca could affect the thyroid. We decided to have her stop the Maca and repeat her labs in a week. When the labs were redone, they all came back normal, and she reported that her symptoms had greatly decreased. Her vital signs were within normal parameters, and included a pulse of 80 beats per minute. Consequently, we discontinued her diagnosis of hypothyroidism and definitely did not prescribe any medication. She was given an appointment for 4 weeks to recheck the lab work, and was told to return to the clinic sooner if her symptoms returned. When I asked her why she did not tell the students about the Maca and vitamins, she replied that they only asked about what medications she was taking. She also stated that the hospital staff only asked about medication, so they did not know about the Maca either.

This is an example of symptoms that did not quite make sense, and so we kept digging to try to figure out why. It shows the importance of asking patients about medications (prescription and over-the-counter) and herbal supplements and vitamins they are taking, all of which can impact their condition. The students also learned that day that sometimes the first course of action should be to obtain more information, re-assess the objective findings, and even repeat a lab before acting on incongruent findings.

Newsworthy Notes

The [American Correctional Nurses Association](#) is going strong, but we need you! Membership is open and everyone is invited to become a member! Dues are \$50 annually. There are also Affiliate memberships for corporations and individuals that support Correctional Nursing, but who are not, themselves, correctional nurses. Check out the [ACNA website](#) for up-to-date information on such things as the need for committee members, the upcoming Board election, and our **Inaugural Poster sale**. Remember, the ACNA is the professional organization for **ALL** Correctional Nurses - LPNs, RNs and APRNs!

I have just learned that our *Correctional Nurse: Scope and Standards of Practice 3rd edition* should be available on October 1st.

[The National Commission on Correctional Health Care](#) has posted its Call for Submission for Presentations for the Spring 2021 conference. Please consider presenting a nursing topic!!

Remember that you can find our past Newsletters on the CorrectionalNurse.Net website in the Newsletter Archive.

Thanks for all you do, and Be Safe!!

CorrectionalNurse.Net

This month, the [CorrectionalNurse.Net BLOG](#) will feature practice information about conditions causing Red Eye.

Our professional practice topics will be Correctional Nurse Perspective: Inmate or Patient and Nursing Ethics: Respect for Human Dignity. As always, announcements for new blog posts will be posted on our FaceBook pages.

Please [FOLLOW US](#) and check back often to ensure that you get notification of new posts!

[VISIT CORRECTIONALNURSE.NET NOW](#)

Correctional Nurse Educator

This month our featured, discounted class is [Red Eye for the Correctional Nurse](#). I hope that you find it interesting!

[VISIT THE CORRECTIONAL NURSE EDUCATOR NOW](#)

Nursing Behind the Wall

This month at [Nursing Behind the Wall](#), you will meet Ms. Burns, a patient who presents with a complaint of red eye.

[VISIT NURSING BEHIND THE WALL NOW](#)

In closing, I appreciate you taking the time to read this newsletter, and I hope that you will find our sites interesting and educational. Our profession of Correctional Nursing is unique and sometimes challenging, but always very important to our patients. The impact we make is far-reaching, even if it is not always evident as we care for our patients. I have ALWAYS been proud to say that I am a Correctional Nurse – I hope that you are as well!!

Rori

Inspiration

*you must do the things you think you
cannot do*
-eleanor roosevelt



The Correctional Nurse

CorrectionalNurse.Net

West Palm Beach
FL 33407 United States



[CONTACT US](#)

You received this email because you signed up on CorrectionalNurse.Net, Nursing Behind the Wall or The Correctional Nurse Educator. If you no longer wish to receive our emails, you may UNSUBSCRIBE below.

[Unsubscribe](#)