



THE CORRECTIONAL NURSE

Inspiring

Professional Correctional Nursing Practice

September 2024

This month, I wanted to share a story that reflects the importance of obtaining a thorough history and subjective information from our patients, and making sure that the patient understands what you are asking. A 43 year old woman came in to the Free Clinic 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 previous 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 expected parameters, except for an elevated thyroid stimulating hormone level of 4.8. Her T4 level was 1.8 (within expected 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. Thus, she came to the clinic.

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 head-to-toe 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 within expected parameters, and she reported that her symptoms had greatly decreased. Her vital signs were within expected 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, and those were not medications. 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, teas, folk remedies 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, reassess the objective findings, and even repeat a lab before acting on incongruent findings.

Newsorthy Notes

The next American Correctional Nurses Association OPEN FORUM will be held on September 19, 2024. Check the ACNA Website for the topic of the month. We have been having some very interesting conversations, and I invite you to become a member of ACNA and attend our Open Forum. Check out the [website!](#)

Upcoming conferences

[Western American Correctional Health Services Association](#) will hold its annual conference in San Diego, CA September 18-20, 2024.

[NCCHC](#) Fall Conference in Las Vegas, NV October 19-23, 2024.

CorrectionalNurse.Net

This month at [CorrectionalNurse.Net](#) we will be discussing Bullying in the Workplace and the Top Ten skills for a Correctional Nurse.

As always, announcements for new blog posts will be posted on our FaceBook pages and on Instagram.

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

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Correctional Nurse Educator

Our 50% off featured class this month at [The Correctional Nurse Educator](#) is *Skin Assessment I for the Correctional Nurse*. I hope you enjoy it!

Remember The Correctional Nurse Educator will work with your group to provide quality, accredited continuing education classes at a discounted and affordable cost.

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Nursing Behind the Wall

This month at [Nursing Behind the Wall](#) we will be discussing Ms. Russell, a woman with muscle and joint pain.

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!

Lori

Inspiration



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