

## **SCR Demo using SBAR-Initial**

I have one new case today

Florence Nightingale is a 73 yr old female

Initial PHQ: 7/13/2020 = 11    Initial GAD: 7/13/2020 = 5

**Situation:** Diagnosis of Depression and Anxiety, Symptoms of increased irritability, current stressors are physical health and increased difficulties with memory

### **Background:**

Psych History: Recent onset of depression following a Whipple procedure 10/2019. Denies any treatment for depression. Husband reports she is a different person since surgery. States she was very positive, happy, smiling, did a fair amount of volunteer work, and feels she has lost all of that.

Coping skills-She does use meditation, prayer and exercise 2-3x/wk

Psych Medications: Denies any psychotropics in the past and does not prefer to take them though as yet they had not been offered. Her reason is that she has seen people “get really messed up”

She does have a prescription for amitriptyline 10mg for sleep-but does not take it regularly. She fears falling when getting up at night.

### Medical history:

Sleep- Breathing related sleep disorder-no CPAP. Overnight sleep oximetry ordered. Reports sleeping in 2 hr periods-getting up to the bathroom, occasional GI distress. This is fairly regular. No difficulty falling asleep. Not taking Amitriptyline on a regular basis d/t fear of falling when getting up. Does sleep better when using it.

Hypothyroidism, primary TSH on 7/10/2020 =7.6

Pain-Some chronic abdominal pain following Whipple Procedure 10/2019. Pain most noticeable in evening when lying down.

Additional dx: Hyperlipids, HTN, Diverticulitis, GERD, Irritable bowel

SUD: Denies SUD, Nicotine, Minimal caffeine

Activity: Walking 2-3x/wk, reading, used to volunteer-not currently, puzzles, video games on computer

Medical Medications: thyroid medication increased. Woman’s multivitamin.

### Social history/support:

Sister has history of depression-unsure of treatment

Born and raised in Iowa by mom and dad. Is oldest in sibship of 6. Overall good childhood and raised by “good parents.” Good relationship with all her siblings and has contact with all of them. Between she and husband have 8 children. 2 live close by and others are somewhat scattered. 6 grandchildren are nearby.

Current support: Husband, Sisters, Multiple friends

Participation in program-yes

Follow up-ordered increase in thyroid medication, Sleep study

**Assessment:**

Willing to work with CM, open to listening to medication options

SMAP-made goal to establish walking schedule of 15 minutes per day

**Recommendations:**

Identify strategies for maintaining mood and resilience

Psychiatric consultant recommendations:

Follow up on TSH in 2 months (September 2020)

Stop amitriptyline d/t memory and fall concerns, start mirtazapine to see if sleep is better without dizziness-but still needs to get up carefully. May also calm the stomach.

Consider therapy (CBT) due to stress from medical issues and for insomnia, resilience support.

**Planning:**

Summarize the above recommendations

CM will speak w/ PCP re recommendations and then contact patient within next 2 days

Bring to SCR in 3 weeks

RRS 7-13-2021