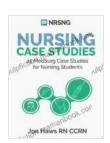
### 15 Med Surg Case Studies With Rationales

Medical-surgical (med surg) nursing is a challenging and rewarding field that requires nurses to have a strong foundation in both medical and surgical knowledge. Med surg nurses must be able to assess, plan, implement, and evaluate care for patients with a wide variety of acute and chronic conditions.

Case studies are a valuable tool for med surg nurses to develop their critical thinking skills and improve their ability to provide patient care. By working through case studies, nurses can learn how to apply their knowledge to real-world situations and develop strategies for managing complex patient care situations.

This article provides 15 med surg case studies with rationales to help nurses develop their critical thinking skills and improve patient care. The case studies cover a wide range of topics, including:



#### **Nursing Case Studies: 15 Med Surg Case Studies with**

Rationales by Jon Haws

4.4 out of 5

Language : English

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Text-to-Speech : Enabled

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: Enabled

Cardiovascular disease

Pulmonary disease

Gastrointestinal disease

Genitourinary disease

Neurological disease

Endocrine disease

**Case Study 1: Acute Myocardial Infarction** 

A 65-year-old male with a history of hypertension and hyperlipidemia presents to the emergency department with chest pain. The pain is described as a crushing pressure in the center of his chest that radiates to his left arm. He is diaphoretic and short of breath. His vital signs are:

Blood pressure: 160/90 mmHg

Heart rate: 110 bpm

Respiratory rate: 24 bpm

Oxygen saturation: 92%

**Rationale:** The patient's symptoms and vital signs are consistent with acute myocardial infarction (AMI). AMI occurs when there is a sudden blockage of blood flow to the heart. This can be caused by a blood clot forming in a coronary artery, which is a blood vessel that supplies blood to the heart.

**Nursing Interventions:** 

Administer oxygen to improve the patient's oxygenation.

Monitor the patient's vital signs closely.

Give the patient aspirin to help thin the blood and reduce the risk of

further clotting.

Prepare the patient for cardiac catheterization, which is a procedure to

diagnose and treat blockages in the coronary arteries.

**Case Study 2: Chronic Obstructive Pulmonary Disease (COPD)** 

A 68-year-old female with a history of COPD presents to the clinic with

shortness of breath, wheezing, and productive cough. She has been using

her albuterol inhaler more frequently in the past few weeks. Her vital signs

are:

Blood pressure: 140/80 mmHg

Heart rate: 100 bpm

Respiratory rate: 26 bpm

Oxygen saturation: 88%

Rationale: The patient's symptoms and vital signs are consistent with

COPD. COPD is a chronic lung disease that causes inflammation and

narrowing of the airways. This can make it difficult to breathe, especially

during exercise or when exposed to irritants such as smoke or pollution.

**Nursing Interventions:** 

Educate the patient about COPD and how to manage her symptoms.

Encourage the patient to guit smoking, if she is a smoker.

Prescribe medications to help reduce inflammation and open up the

airways.

Provide oxygen therapy to improve the patient's oxygenation.

**Case Study 3: Gastroesophageal Reflux Disease (GERD)** 

A 45-year-old male presents to the clinic with heartburn, regurgitation, and difficulty swallowing. He has been experiencing these symptoms for several

months and they have been getting worse lately. His vital signs are:

Blood pressure: 130/80 mmHg

Heart rate: 80 bpm

Respiratory rate: 16 bpm

Oxygen saturation: 98%

Rationale: The patient's symptoms are consistent with GERD. GERD occurs when stomach acid flows back into the esophagus. This can cause inflammation and irritation of the esophagus, leading to heartburn,

regurgitation, and difficulty swallowing.

**Nursing Interventions:** 

Educate the patient about GERD and how to manage his symptoms.

Recommend lifestyle changes, such as losing weight, eating smaller

meals more frequently, and avoiding lying down after eating.

Prescribe medications to reduce stomach acid production.

#### **Case Study 4: Urinary Tract Infection (UTI)**

A 25-year-old female presents to the clinic with dysuria, frequency, and urgency. She has also been experiencing lower abdominal pain and cloudy urine. Her vital signs are:

Blood pressure: 120/80 mmHg

Heart rate: 85 bpm

Respiratory rate: 16 bpm

Oxygen saturation: 98%

**Rationale:** The patient's symptoms are consistent with a UTI. A UTI is a bacterial infection of the urinary tract. This can cause inflammation and irritation of the bladder and urethra, leading to dysuria, frequency, urgency, and lower abdominal pain.

#### **Nursing Interventions:**

- Collect a urine sample to confirm the diagnosis of a UTI.
- Prescribe antibiotics to treat the infection.
- Educate the patient about UTIs and how to prevent them.

#### Case Study 5: Stroke

A 70-year-old male presents to the emergency department with sudden onset of weakness and numbness on the right side of his body. He is also having difficulty speaking and understanding speech. His vital signs are:

Blood pressure: 180/100 mmHg

Heart rate: 100 bpm

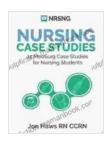
Respiratory rate: 20 bpm

Oxygen saturation: 95%

**Rationale:** The patient's symptoms are consistent with a stroke. A stroke occurs when there is a sudden loss of blood flow to the brain. This can cause damage to the brain tissue, leading to a variety of symptoms, including weakness, numbness, difficulty speaking, and difficulty understanding speech.

#### **Nursing Interventions:**

- Call a stroke alert and activate the stroke team.
- Monitor



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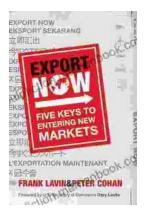
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