

Chelsea's Case Story

Candace is a 17 year old single mother who currently lives with her family. She came with her mother to the emergency department last night because her six month old daughter, Chelsea had an axilla temperature of 39.5 degrees Celsius. Daughter seemed comfortable about letting the grandmother take care of the infant as she answered my questions when I was assessing the infant. Grandmother was friendly and mentioned she used to work at this hospital as a surgical nurse. Baby Chelsea had refused to eat any solid food for dinner, and, when sucking on her bottle of diluted apple juice, she kept pausing and crying. Chelsea has had a runny nose and a temperature of 38.5 -39 for the past 48 hours that would go down after being given Tylenol drops. Chelsea is also teething; her bottom front gum is tender to touch and she is drooling considerably. Both mom and grandmother are worried about the high temperature given mom's little brother had a history of febrile convulsions.

On examination, doctor diagnosed acute, bilateral otitis media. As the discharge nurse, I was responsible for answering questions about the diagnosis, communicating nursing measures to comfort the infant, and confirming instructions about the prescription for amoxicillin, an antibiotic, and the use of Tylenol for comfort and fever. I checked whether Candace had a family doctor to do the follow-up appointment after all of the medication had been taken. As I discussed everything with the young mother, I observed the grandmother cuddling and distracting the infant. They seem to get along with each other, as the grandmother let her daughter ask questions, or checked with her whether she understood my instructions.