



## Case for 2025 Interprofessional Teaming Symposium for Dementia: Rodrigo

### Demographic information

**Name:** Rodrigo Perez

**Age:** 67

**Diagnosis:** Alzheimer's disease (AD), Type 2 Diabetes Mellitus (T2DM), Hypertension (HTN), Atrial Fibrillation (A-Fib), s/p right hemispheric cerebral vascular accident (CVA).

**Prior living arrangement:** Home with family

**Current placement:** Maple Manor Skilled Nursing Facility (SNF) for OT/PT and skilled nursing care.

Length of stay: 18 days

**Insurance/payer:** Medicare

### **Current medications:**

Aricept: 10 mg PO q HS

Namenda: 5 mg PO q 12hr

Captopril: 25 mg PO q 8hr

Coreg: 12.5mg PO bid

Hydrochlorothiazide: 50 mg PO q day

Humulin: 70/30 (60 u in am; 34 u in pm SQ)

Warfarin: 5 mg PO q day

**Purpose of meeting:** Rodrigo is nearing day 21 of his stay, at which time \$209.50/day copay begins. In preparation for a meeting with the family, the facility administration is seeking clarity on facility recommendations. Dr. Martin, the facility's physician, states that Rodrigo's BP and glucose levels have stabilized and recommends that he stay an additional week to continue rehabilitation to address self-care, balance, strength and cognition. Dr. Martin also questions Rodrigo's behavioral responses and recommends a neurology consult.

**Reason for admission:** Three weeks ago, Rodrigo fell forward onto a cement driveway as he was getting out of his truck. It is unclear if this fall resulted in loss of consciousness. Rodrigo's son, Eduardo, drove him to the hospital where he received 11 stitches on the left side of his forehead. In the emergency room, Rodrigo was disoriented, hallucinated, and his BP and glucose levels were elevated. A head CT scan was normal. He was diagnosed as having a mild traumatic brain injury (TBI) and was admitted. His confusion continued as did the visual hallucinations. He was weak, dizzy, and unsteady on his feet. After 3 days, he was discharged to Maple Manor for rehabilitation (18 days ago).

**Medical history:** Rodrigo was diagnosed with A-fib 9 years ago and is on blood thinners to prevent stroke. His activity tolerance declined with the A-fib. Three years ago, Rodrigo was hospitalized following a right CVA due to a right middle cerebral artery (MCA) infarct which resulted in left hemiplegia and left-sided neglect. His primary care doctor indicated that he likely had "several mini strokes" prior to the one for which he was hospitalized three years ago. After the stroke, Rodrigo experienced residual confusion, agitation, difficulty paying attention, and problems with memory. However, he regained use of his left arm and leg. Two years ago, his primary care doctor told the family that Rodrigo's condition was likely related to vascular dementia but provided the family with no further information or recommendations.

Rodrigo has HTN and has taken antihypertensive medication for at least 15 years. It had been controlled up until the most recent hospitalization. He has a 20-year history of T2DM which he controlled with diet for many years; however, he has required insulin for the past five years. Rodrigo smoked one pack of cigarettes per day up until his most recent hospitalization when he was placed on a nicotine patch. Rodrigo is not oriented to location and date; he believes he is still in the hospital and that it is 2015.

**Social history:** Rodrigo, an immigrant from El Salvador, has lived in the United States since 1995. He is married to Sofia, and they have three children: Eduardo (19 years), Camila (17 years), and Andrés (16 years). Sofia works as a waitress. Rodrigo worked as a farm hand for the same employer for many years and inherited the small, but

financially stable farm, when the owner died ten years ago. The family manages the farm with the help of a few workers who also live on the property. Rodrigo is often short of breath with physical exertion and has not been involved with any heavy lifting on the farm for the past six years. This makes him very frustrated. Rodrigo has a strained relationship with his family due to his frustration and temper. Although his first language is Spanish, Rodrigo is fluent in English. However, he seldom talks to Maple Manner staff. He answers most questions from the staff with only “yes”, “no”, and short comments. When speaking to family he speaks primarily Spanish with a little English. Rodrigo completed the equivalent of a fourth-grade education in El Salvador. The family reports Rodrigo has fallen several times in the past 2 years. He most often falls at the end of the bed and scrapes his back along the dresser or bed as he falls, rarely needing medical attention for the injuries. Sofia has commented that he seems to be more distressed and anxious since the Aricept and Namenda were increased 3 months ago. He has been aggressive toward Sofia and the children several times in the past six months.

**Spirituality/ routines/ rituals:** Rodrigo is Catholic. The family has been active in Holy Trinity Catholic Church since they were married in 2003. Rodrigo attended mass 3 times per week and said the rosary daily. Since this was a second marriage for Rodrigo, he is not able to participate fully in the communion rituals. He also enjoyed daily walks around the farm and listening to a local Latino radio station.

**Behavioral/ emotional functioning:** Rodrigo does not interact with other facility residents and has been inappropriate and aggressive in some interactions with female staff members. He has been cooperative with the male physical therapist, male nurses and trainer but not the female occupational therapist, female speech therapist, female nurses or certified nursing assistants. His family is trying to be supportive, despite their strained relationship; however, Rodrigo has been agitated and withdrawn when they visit. He spends most of the day sitting in the same chair in his room staring out the window. He is often found lying awake at night and dozes frequently during the day. He refuses any offers to explore the facility’s lush grounds.

Rodrigo participates cooperatively in Physical Therapy (PT) sessions with Jamal but acts aggressively and inappropriately during occupational therapy (OT) sessions with Jasmina and SLP sessions with Abby. Jasmina finds that Rodrigo becomes most frustrated with bathing and grooming tasks. Rodrigo frequently refuses sessions with Abby and becomes agitated when presented with memory tasks. Once when his wife, Sofia, visited, he became agitated and threw his walker. The nursing assistant reported that Rodrigo touched her several times inappropriately when she was assisting in cleaning him after his diarrheal accidents. The nursing assistant says she will not work with him any longer.

**Current functioning for daily living and instrumental daily living tasks:** Rodrigo feeds himself but typically eats only half of the food and has lost 5 pounds since his admission at the hospital. He is able to dress himself when his clothes are laid out for him, but he will not change his clothing unless he is told to do so. He will not complete grooming or bathing tasks unless someone directs him on what to do next and where to locate items. Rodrigo has bowel accidents at least daily. He has been incontinent of urine twice since his arrival. He can ambulate with a rolling walker for 100 feet, with stand-by supervision. He frequently bumps into items that are low to the floor. Without prompting, he forgets to use his walker. Initially, Rodrigo refused to attempt stairs in PT but after reassurance from Jamal, he was able to navigate 2 steps with maximal assistance x1 on 2 steps. Reportedly, there are 3 steps into the house at the back door and 1 step at the front door (which Rodrigo refused to use. Rodrigo scored a 7/30 on the Montreal Cognitive Assessment – Basic (MoCA-B). The family reports that before admission, Rodrigo was recently having difficulty completing even basic household tasks. He needed assistance or reminders to put away groceries, make a sandwich, or to take out the garbage; all of which he had previously done independently on a daily basis.

**An interprofessional meeting has been called by the administrator:** The purpose of the **meeting** is to review and address concerns noted by other residents and staff regarding Rodrigo. Concerns regarding his participation, behavior and safety with his current level of care. Additionally, the concern as noted at the beginning of this case is his financial status and the patient/family’s ability to stay in this facility. The family’s Medicare co-pay for days number 21 to 100 in a SNF is \$209.50 per day.