3 D's CASE STUDIES

Case Study #1 – Rosemary Cellini

Mrs. Cellini, age 83, was referred to APS because she was found outside mumbling to herself. When her neighbor approached her, she quieted down but didn't make any sense. She appeared to have lost weight as well. The neighbor stated that she talked to Mrs. Cellini last week when Mrs. Cellini returned from a brief hospitalization and she seemed ok at that time. Now, Mrs. Cellini doesn't even recognize her own house.

When you visit, she appears confused and disoriented. She is quite thin and has a bruise on her forehead, but cannot explain what happened. She talks about her mother and how she just went to the store and how much she loves her. (You had heard from the neighbor that client's mother lived in Italy and died 10 years before). It is difficult to follow her conversation as she often stops in mid- sentence and she seems distracted. The house is in good repair but is untidy.

There is very little food in the refrigerator and there is about a week's worth of dirty clothing on the floors. Mrs. Cellini has current medication in her house for hypertension and diabetes.

1. What are the indicators that client may have a mental status problem?

2. Does the client appear to have dementia, delirium or depression?

3. What more information do you need and how would you get it?

Case Study #2 - Proful Dixit

Mr. Dixit, age 77, was referred to APS by the Health Department because they had received complaints about the environmental conditions in the home which have deteriorated over the last year. Although there were some minor violations, the concern was that the client who was found dirty and disheveled. The officer stated that Mr. Dixit seemed embarrassed and nervous. When the officer told him about the violations, he seemed not to understand what the issues were, but smiled and said his son would take care of everything.

When you visit, Mr. Dixit greets you pleasantly but does not volunteer information. The house appears to be in the same condition as described by the Health Officer. Mr. Dixit is surrounded by newspapers, magazines, and take-out food containers. His clothing is urine stained, but he does not appear to notice it.

There are several cats in the home. Mr. Dixit seems to have difficulty understanding what you are saying, but nods his head politely. Mr. Dixit has medication for arthritis, high cholesterol, and Parkinson's.

1. What are the indicators that client may have a mental status problem?

2. Does the client appear to have dementia, delirium or depression?

3. What more information do you need and how would you get it?

Case Study #3 – Mary Jo Jackson

Mrs. Jackson, age 73, was referred to APS after the police did a welfare check requested by Mrs. Jackson's daughter who lives out of state. Initially, Mrs. Jackson failed to answer the door for the police. Then, she appeared to be confused about why the police were there and refused any assistance.

When you visit, Mrs. Jackson appears to have difficulty focusing on your conversation. You have to repeat your questions as she often doesn't respond immediately and then seems to lose the thread of the conversation. When you ask Mrs. Jackson about her family, Mrs. Jackson seems uninterested in discussing her past or her daughter's current concerns. She says she'll call her daughter "later", when she feels up to it. The house is in reasonable repair but is very untidy.

There is little food in the home and the client appears unconcerned about getting more food. She asks you to leave because she doesn't feel up to answering questions.

1. What are the indicators that client may have a mental status problem?

2. Does the client appear to have dementia, delirium or depression?

3. What more information do you need and how would you get it?