



## GERIATRIC EDUCATION SERIES DEMENTIA

### COGNITION CASE STUDY 2 – MRS. BEE

Mrs. Bee is a 78-year-old woman born in Saskatoon, Saskatchewan. She has one older brother who still lives in Saskatoon. Mrs. Bee is a retired social worker who worked as a high-school guidance counsellor. She is divorced and has one child, Elizabeth from whom she is estranged.

In July 2018, she could no longer care for herself safely at home, ends up in hospital from a fall and is discharged to a long-term care facility (LTC). On her “Getting to Know Me” questionnaire, Mrs. Bee states that she loves doing puzzles, painting, gardening, and bubble baths. When asked about her marital status, Mrs. Bee states that she does not want to talk about her ex-husband and becomes tearful. When staff try to comfort her, she pulls away and states, “I don’t not like hugs”.

As she settles into LTC, Mrs. Bee becomes overly protective of her roommate. She feels responsible for her roommate’s care because she feels staff are not caring properly for her roommate. She has called 911 to report their negligence. She also has had several angry outbursts. On one occasion, she attempts to leave the home stating, “I’d rather live on the street than live here one more day!” Mrs. Bee often declines assistance with personal care. She mobilizes via foot-propelling in a wheelchair. She has had 3 falls since coming into LTC as she attempts to transfer herself.

#### ASSESSMENT AND INVESTIGATIONS FINDINGS

**Medical:** Bowels are regular, continent of urine, urine culture negative, vital signs are stable, blood work within normal range, appetite is good, weight is stable, sleeps well at night

**Mental status:** irritable mood, denies suicidal ideations, observed to be restless, agitated, and have poor concentration, MoCA = 13/30.

#### PAST MEDICAL HISTORY

#### MEDICATIONS

Fibromyalgia	Lyrica
Chronic Pain	Hydromorphone Contin
Depression	Effexor, Wellbutrin
Vertebral Fracture	Actonel, Calcium Carbonate, Vitamin D
Hypothyroidism	Eltroxin
Chronic constipation	Biscodyl, Peglyte
Dementia (2017)	
Hypertension	

#### DISCUSSION QUESTIONS

<b>IDENTIFY</b>	<b>1. What has changed?</b>
<b>SCREEN/ASSESS</b>	<b>2. Using the P.I.E.C.E.S™ framework, identify possible causes for Mrs. Bee’s behaviours?</b> Physical – Intellectual – Emotional – Capabilities – Environment – Social
	<b>3. What RISKS are associated with Mrs. Bee’s behaviours?</b>
<b>INTERVENE</b>	<b>4. Using the P.I.E.C.E.S™ framework, identify possible interventions?</b> (consider non-pharmacological and pharmacological, investigations)
<b>APPLY</b>	<b>5. How would you apply the P.I.E.C.E.S™ framework to your work context?</b>

\*P.I.E.C.E.S.™ Framework: <http://pieceslearning.com>