

## **OHNEP ADULT CASE STUDY #2**

**HX**: The patient presents to his primary care provider complaining of a 6-month history of fatigue, increased thirst, frequent urination, blurry vision, pain when chewing, and sore bleeding gums associated with brushing. The patient also noticed that his front bottom teeth wiggle more than usual, causing anxiety about losing his teeth. The patient reports not having seen a primary care provider in 3 years and a dentist in 5 years because the family dentist retired and he does not have health insurance.

**PMH**: Patient denies any past medical history

**PSH:** Appendectomy at age 12

**ROS**: Denies fevers, mouth sores, ear pain or throat discomfort. Denies chest pain or shortness of breath.

**FH**: Father and paternal grandfather were diagnosed with T2D in their 50s. Patient's father has HTN and dyslipidemia and receives hemodialysis 3 times a week. Patient's mother has HTN and Alzheimer's disease. Both parents reside in a nursing home. Patient is an only child. Pt. has 2 adult children who are healthy and do not live at home. Patient is widowed, his spouse died of cancer 2 years ago.

**Social history**: Lost insurance when he changed job three years ago. Pt. was employed as a part-time office manager when he lost his job due to COVID shutdown. Pt. has not been to a primary care provider since losing job and health insurance. Pt. denies smoking, alcohol consumption, or illicit drug use and is an active member of his church congregation.

## DISCUSSION

Using the 4 IPEC Competencies (2016) related to:

- 1. Working with individuals of other professions to maintain a climate of mutual respect and shared values (Values/Ethics for Interprofessional Practice);
- 2. Using the knowledge of one's own role and those of other professions to appropriately assess and address the health care needs of patients and to promote and advance the health of populations (Roles/Responsibilities);
- 3. Communicating with patients, families, communities, and professionals in health and other fields in a responsive and responsible manner that supports a team approach to the promotion and maintenance of health and the prevention and treatment of disease (Interprofessional Communication);
- 4. Applying relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan, deliver and evaluate patient/population-centered care and population health programs and policies that are safe, timely, efficient, effective, and equitable (Teams and Teamwork).



## Please collaborate as a team to develop a management plan for the above patient.

- Oral-Systemic Risk Assessment
  - Identify the oral-systemic assessment findings (Hx and PE HEENOT)
  - What does the history and physical tell us about this patient?
  - What additional data do you need to collect (eg. labs, diet and exercise, etc)?
  - Identify oral-systemic risk factors
- Differential Diagnosis(es)
  - Identify the tentative diagnoses for the oral health problems
  - Identify the tentative diagnoses for the systemic health problems
  - Discuss the important oral-systemic connections
- Develop a management plan for the oral-systemic conditions affecting this patient, including:
  - Preventive interventions that include screening and behavior change counseling that are fundamental to patient-centered care
  - Anticipatory guidance
  - Oral health maintenance
  - Social determinants of health
  - Collaboration and referral

## **Questions to Guide Your Interprofessional Collaboration**

- Roles and Responsibilities
  - What is the scope of the role and responsibilities of each of the providers on your team today?
- Collaboration
  - How can the Nurse Practitioner, Dentist, Physician, Pharmacist, and Social Worker collaborate to promote this patient's health?
- Team Building & Communication
  - What do you think are the most effective strategies to help a Nurse Practitioner, Physician, Dentist, Pharmacist, and Social Worker function as a community-based primary care team?
  - What are the most effective ways for the IP team to communicate?
- Referrals and Follow up
  - How do the social determinants of health influence which referrals need to be made for this patient?
  - What providers does this patient need to see? When? How often?
  - What are the follow up actions for each team member to maximize coordinated care for this patient?