

Week 4:

Discussion: NR509 Week 4 Discussion: Client Challenges : Argumentative Encounter Family

Nurse Practitioner, Danielle Cavasin has been practicing in a busy clinic alongside Dr. Goedert for 6 years now. The office is located in Newark, New Jersey which is a struggling, poverty stricken, and high-violent high-crime area. Most residents that are a part of this community have healthcare disparities and substandard living conditions. In order to serve the community better Dr. Goedert accepts just about every insurance, payment plans, and NJ Family Care that is a publicly funded health insurance program. Since Dr. Goedert has made these exceptions, the office sees many different patient cases.

One client case in particular is Jalen Cox who is a 35-year-old male and a regular in the office and usually sees the NP Danielle. Mr. Cox is well known in the office due to his habitual office visits, usually once a month. The client has medical and psychiatric problems as well as a history of drug abuse and alcoholism. If Mr. Cox is not visiting the office, he is usually in the Emergency Department at a local hospital. Mr. Cox was recently diagnosed with pancreatitis. While in the ED Mr. Cox was treated with intravenous Morphine for pain and discharged with a prn prescription for Tramadol PO 50mg BID with a supply for 7 days and no refills. The client was instructed to follow up with his primary care doctor, a gastroenterologist, and pain management doctor. That prescription lasted Mr. Cox only 4 days. During Mr. Cox's first visit he continued to have complaints on pain and requested a higher dose of the Tramadol. The NP agreed to increasing the dose due to the patient's history and tolerance but was also referred to a pain management specialist given the patient's history of drug abuse. The NP also gave 2 refills on the prescription. It was not even 2 full weeks before Mr. Cox made another appointment at the clinic and that day is tomorrow. Danielle is concerned and anticipating that tomorrow's appointment will not go smoothly knowing what Mr. Cox is going to be asking for. It is reported that a patient's desire for increased pain medication will negatively effect the ratings of patient experience and physician-reported visit difficulty (Bell et al., 2018).

During the visit Danielle assess Mr. Cox's adherence to the treatment plan that was discussed during the last visit, and it was evident that he has not been following the suggested plan. Mr. Cox explain to the NP how the prescription did not last as long due to the increased level of pain he was feeling and that he needs something else. While the NP is discussing the importance of using the medication as prescribed and to make an appointment with a pain-management doctor, she can tell that the client is becoming increasingly frustrated, and that the conversation is heading nowhere. Danielle explains to Mr. Cox that seeing a pain-management specialist will be able to address the situation better due to their specialty in that field and the patient's history.

While trying to explain herself the patient begins interrupting the NP and insinuating that she does not care or believe the patient about his pain, begins shouting, "I am not drug-seeking," and she does not want to help him. Mr. Cox then begins crying. No matter what the NP said Mr. Cox was not listening. Communicating with Mr. Cox was as difficult as the NP expected. The article by the International Association for the Study of Pain (2018), clinicians experience difficulty communicating with "narcotic-seeking" patients that continue to request or demand a higher dose of opioids and that the treating physician does not take their pain seriously. The