

<b>Last Name</b>	<b>Client from Week 7 Lesson</b>
O – Q	<a href="#">Diego Barroso</a>

**Application of Course Knowledge: Answer all questions/criteria with explanations and detail.**

**Describe your assigned client’s situation. Why are they presenting to the clinic? What medications are they currently taking?**

My patient is Diego Barroso, he is a 39-year-old male who is presenting to the clinic with complaints of constipation that has been present for the last 2-months. Subjectively, Mr. Barroso states that his last bowel movement (LBM) was 4 days ago, and that it was, “hard and pebble like”. He also expresses that he has had a significant amount of pain and straining associated with having bowel movements. He has attempted to resolve his constipation through the following methods: increasing fluid intake, started taking psyllium, polyethylene glycol, and magnesium oxide. Despite these interventions, he is still having difficulty having bowels movements (BM). His objective physical exam is unremarkable; however, his weight is 301.0 lbs., height 5’ 11”, and his BMI is 42, which is classified as stage 3/severe obesity. His others vital signs are as follows: blood pressure (BP) 131/87, heart rate (HR) 83, respiratory rate (RR) 19, oxygen saturation (O2 sat %) 96%, and temperature of 98.8 (oral). His past medical history (PMH) is significant for hypertension for which he takes hydrochlorothiazide (HCTZ) 25mg PO daily and asthma for which he takes a PRN albuterol inhaler for asthma exacerbations. His only medication allergy is to aspirin. Using clinical practice guidelines (CPG’s) the nurse practitioner (NP) must decide on an appropriate course of action and develop a treatment plan.

**Assess the applicable clinical practice guideline (CPG) for your assigned client linked on the same page in the lesson where the client case is located. What treatment is recommended by the CPG for your client’s situation? Discuss your personal professional assessment of the client’s situation provided in the scenario. What pharmacological treatment is necessary and why?**

According to the most recent CPGs, Mr. Barroso has already attempted to manage his condition with the recommendations that are suggested. According to the CPGs, the next step or recommendation for treatment would include the prescription of an osmotic laxative which in this case would be Lactulose (Chang et al., 2023). Lactulose is a synthetic disaccharide and is unable to be digested within the small intestine, however, it is digested by the resident gut bacteria which digests the lactulose into byproducts including lactic, formic, and acetic acid. Together these acids work together to produce an osmotic effect causing the retention of water within the small intestine and colon. This osmotic effect softens the stool, increases water content of stool, and promotes peristalsis. In turn, this results in a bowel movement, typically within 1 to 3 days (Rosenthal & Burchum, 2021). The initial dose is of treatment typically 10-20g ingested by mouth daily and may be increased to a maximum dose of 40 g daily, if needed. The medication is not meant to be used daily or for an extended period, so no more than a month supply should be prescribed, with no refills (Chang et al., 2023). If the lactulose is ineffective in treating his constipation the next recommendation is to use a stimulate laxative such as, bisacodyl (Chang et al., 2023).

**Reflect on additional questions you have about your assigned client that may influence treatment. What else do you need to know? What follow-up assessments, labs, or conversations are required to ensure optimal health outcomes?**

The primary concerns related to the use of lactulose are centered on the increase of fluid loss. This fluid