

# Project ECHO: Sunflower Health Plan Case Presentation

## Presentation Information

Series: Health Equity

Session: \_\_\_\_\_

Name: Susan Hocker

Date: 10/24/2024



## Patient Information

Gender:  Male  Female

Age: 61

Race:

- American Indian/Alaskan Native Asian     Native Hawaiian/Pacific Islander     Multi-racial Other  
 Black/African American     White/Caucasian     Prefer not to say

## Ethnicity:

- Hispanic/ Latino     Not Hispanic/Latino     Prefer not to say

### Strengths and Preferences (goals, motivators, preferences, Important to the individual)

Member has a strong determination to live independently. Strong spiritual belief, he places his problems in "God's hands." He is good at networking for things he needs, he knows community services around him. He is very resourceful, and good at developing relationships with others in the community.

### Relevant Social and Trauma History (Current living situation, employment status, pertinent legal history, level of education, relationship status, children, support system, etc.)

Member is single. He has children that he is estranged from. He has not shared openly about this situation with his children. He has an elderly mother who he still has a relationship with. Member has a high school education and shared he was in the Marines and served as military police.

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Relevant Medical History (Diagnosis, conditions, etc.)	Medication Summary (Name, dose, frequency, route)
<p>Hemiplegia and Hemiparesis following cerebral infarction. Affecting right dominant side                      Type 2 diabetes                      Cervical disc disorder with myelopathy                      Spinal stenosis                      Hypertension                      Depression                      Obstructive sleep apnea                      Pain                      Fall risk                      Uses a power wheelchair for mobility.</p>	<p>Amlodipine 100mg/1 daily                      Baclofen 10mg 1 tab 4 times per day                      Clonidine 1 tab 2/day                      Cyclobenzaprine 10mg 1 tab every 8 hours PRN                      Hydrochlorothiazide 25 mg 1 tab daily                      Lantus solostar Pen inj 3ml 40 units under skin at bedtime                      Lidocaine 5% patch 1 patch for 12 hours on 12 hours off.                      Meloxicam 15 mg 1 tab daily                      Metformin 500mg 1 tab 2/day                      Nebivolol 10 mg 1 tab 2/day                      Novolog flexpen sliding scale, 3/day                      Pregabalin 100 mg 1 cap 2/day</p>
Lab Summary (Test, result, date, etc.)	Toxicology Summary (Test, result, date, etc.)
<p>No lab reports available. Member indicates is blood sugar can run about 185 in the morning, per his blood sugar check.</p>	<p>No toxicology reports.</p>
Substance Use History (Substance, age of first use, age where use became problematic, longest period of sobriety, how sobriety was achieved, method of use)	
<p>Member denies substance abuse history</p>	
Psychiatric History (Age of first mental health contact, past diagnosis, self-harming behavior, suicide attempts, etc.)	
<p>Member has not used mental health services</p>	

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## **Treatment Summary** (Form of treatment, engagement in treatment, date entered, voluntary, etc.)

Member has a diagnosis of Cervical Myelopathy which has caused him to have falls and resulting in discectomy and fusion surgery. Member has not completed a recommended treatment regime due to not wanting to stay long enough in a skilled setting. He leaves skilled settings due to his inability to maintain his home in the community. Due to incomplete therapies, he has gradually declined in functional ability, he is now dependent on a power wheel chair for all of his mobility. Member does have Medicare and Medicaid. During his most recent skilled setting early 2024, he could have been a candidate for an Institutional Transition to the HCBS/PD waiver, but was not in the facility long enough to qualify. As a result, he went home without enough support.

## **Barriers to Treatment**

Member physical limitations that limit his ability to complete self-care tasks  
Member lives on limited income- affects his ability to access rehab long-term for fear of not being able to pay for housing and NF stay- does not want to be long-term care in a Nursing Facility  
Very little informal support  
Very cautious about sharing full extent of his experiences/feelings for fear of an adverse result  
Hesitant about following doctor's recommendations fully, including routine vaccinations, such as flu and shingles vaccines- thinks about how it could potentially impact his medical conditions