Type II Diabetes Mellitus

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Presentation of Diabetes Mellitus II

Mr. B presents to his PCP’s office with complaints of increased fatigue, increased thirst, and numbness in his toes. Mr. B is a 53 year-old Native American male. Mr. B’s past medical history is reviewed and his weight, and vital signs are obtained; the abnormal values as follows: BMI: 31, BP: 190/10.

Furthermore, Mr. B underwent an A1C (HbA1c) test that is known as HbA1c is ordered. Results: Blood glucose 200 mg/dL. Mr. B has met the criteria of the diagnosed type 2 diabetes. Mr. B is advised to act for 30 minutes a day, and to have some dietary changes for a healthy diet. Mr. B will also be started on oral antidiabetic medication, such as Metformin, to lower and manage his blood glucose levels. Mr. B is also started on an antihypertensive medicine, as well as an antihypertension medication related to his physical exam findings and lab value results. Mr. B is to have a follow-up with his PCP in 3 months for repeated blood work (Kajal, Cadet, Hirani, & Thomas, 2018).

Significance of Pathophysiology

“Approximately 90% to 95% of newly diagnosed cases of diabetes are DM2” (Waddell, 2017, p. 26). With the rising of DM2 incidence amongst individuals, it is important for healthcare professionals to educate those who are at risk, and treat hyperglycemia and DM2 early to prevent long-term complications of hyperglycemia. Chronic hyperglycemia over time damages both, micro and macro blood vessels causing vision loss, nerve damage, kidney disease, cardiovascular disease, risk of stroke, and increased blood circulation (Cornel, 2015).

Implications for Nursing Care

There are many nursing interventions and implications for DM2, the most important being to educate patients on prevention of diabetes, but also education on how to manage blood glucose with DM2. Education includes diet and lifestyle modification to prevent DM2 education (Saw et al., 2016):

- **Healthy diet:**
  - BMI of 25 or less
  - Exercise for at least 30 minutes/day
  - Smoking cessation
  - Alcohol consumption
  - Sleep of at least 7 hours of sleep/night
  - Behavior support and counseling
  - Glycemic control

Education for those at risk or with DM2:

- Follow up every 3-4 months with PCP for proper glycemic control and management: assess A1C level, monitor blood glucose levels, evaluate medication dosages and adherence, screen for weight gain or loss, measure BP and lipid levels, assess foot care and nutrition, annual urinalysis, health exam, dental care, and glaucoma screening (Kajal, Cadet, Hirani, & Thomas, 2018).

Signs & Symptoms of Hypoglycemia, Lethargy, confused, drowsy, teeth to touch in dart, mouth:

- Signs & Symptoms of HFS and DKA: “fruity” breath, confused, lethargy, tachypnea, tachycardia, ketones in urine, urination increase.

References


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