



CASE RECOMMENDATION FORM

Presenter Credential: PA-C

After review of the case presentation and discussion of this patient's case among the ECHO Community of Practice, the following suggestions have been made:

Case Summary

50-year-old female with a history of Opioid Use Disorder and Methamphetamine Use. Patient has an unclear psychiatric history but has a history of bipolar and anxiety symptoms. Since last fall, the patient has been in and out of the hospital for wounds, infections, and rehabilitation issues. She is highly aggressive and was recently sent to OTP where she tested positive for fentanyl, despite being on methadone. Her psychiatric diagnoses changed to Malingering and Adult Antisocial Personality Disorder. The resident recently checked herself into the ER reporting her pain medications had been stopped abruptly and hospital records showed she was on methadone and oxycodone.

Central Question(s)

How can we remove barriers so important information can be efficiently communicated between facilities.

Recommendations

- Organization Safeguards
 - Consider putting safeguards in place for all patients who come to your clinic. Implementing safeguards for all reduces stereotyping and stigmatization, and allows for the clinic to safely treat their patients and prevent any issues related to misuse. These safeguards could include pill counts, urine toxicology testing, and reviewing legal records of new patients.
 - Consider implementing hospital or organizational alerts. Many health care systems have alert pages that are the first thing a provider sees when they view a patient's chart. While this can sometimes cause stereotyping, often it aids in treatment and can be helpful to both the provider and the patient's treatment plan moving forward.
- Adult Antisocial Personality Disorder Diagnosis
 - Consider re-evaluating the patient for this diagnosis.
 - Antisocial personality disorder typically requires a pattern of behavior before the age of 15.
 - Given the patient's criminal behavior and pattern of use, this behavior could be attributed to her substance use disorder rather than a personality disorder. To be correctly diagnosed with antisocial personality disorder, the patient needs to meet criteria outside of her addiction.

Consider presenting follow-up for this patient case or any other patient cases at a future ECHO Clinic session.

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