



CASE RECOMMENDATION FORM

Presenter Credential: LCSW

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:

Summary:

50-year-old female using multiple substances. The client has also been diagnosed with PTSD, ADHD, Bipolar 1, and has had two hospitalizations. The client has a history of childhood sexual abuse and adult domestic violence. She also has a history of seizures, sleep apnea, and high blood pressure. Client is currently on several medications including Wellbutrin, Hydroxyzine, Naloxone, and Vyvanse. She has good medication adherence.

Treatment Question(s):

1. How can I re-engage this client in her treatment?
2. How can I address her resistance to following up with medical providers?

Recommendations:

Neurological Assessment and Specialist Referral

- Obtain an EEG assessment from a neurological specialist as soon as possible to evaluate seizure activity and underlying causes. Ensure the referrals are in place and follow up with the patient to confirm the appointment.
 - [Dr. Wechsler – St. Luke's Boise](#)
 - [Dr. Ireland – St. Luke's Meridian](#)

Medication Review

- Medications of concern include Wellbutrin (Bupropion), Hydroxyzine, and Buprenorphine. All three medications are known to lower seizure thresholds.
- Prioritize Buprenorphine due to its essential role in treatment but assess the risk/benefit of continuing Wellbutrin and Hydroxyzine.
 - Communicate with providers prescribing Wellbutrin and coordinate to explore alternative options.
 - Consider suspending Vyvanse and Wellbutrin until the patient sees a specialist.

Immediate Action Plan

- Inform the patient that ongoing prescriptions require a neurological workup and release of information to coordinate care, due to the danger in her frequent seizures. Medications under your care serve as leverage to ensure the patient follows through with required medical evaluations and appointments.
- Continue providing Buprenorphine, as it is vital for the patient, but communicate the necessity of attending appointments for further care.

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

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