

USC Student Run Clinic Case Study:

30 yo obese mother of a 4 year old, daughter of a 56 year old woman with morbid obesity, type II diabetes mellitus, hyperlipidemia, hypertension, renal insufficiency, and hypertensive cardiomyopathy presents with a 6 week history of an itching rash. She was seen in the clinic and treated for “eczema” 4 weeks prior, seen in an emergency room 2 weeks ago and treated for “a fungal infection.” The family physician immediately recognizes today’s rash as urticaria, and when the history fails to reveal an obvious allergenic precipitant, he asks her about how things are at home, and if she is experiencing any stress of depression. She immediately begins crying and explains that her 4 year old is constantly having “temper tantrums” so that she cannot take her out in public and finds it difficult get her home from school on the public bus. She admits that her husband is verbally abusive and works 2 jobs, leaving her alone to care for the child and her 56 year old mother, also a patient in the clinic. She prepares all the meals, checks her mother’s blood sugars/blood pressures/daily weights, gives her her insulin, and tries to make sure she takes all of her medications. Her PHQ-9 is 27, consistent with severe depression.

- 1. How would each respective professional look at this family?***
- 2. What might their respective roles be in generating and implementing a care plan?***
- 3. How might this family be monitored for response to treatment?***

MD:

PA:

Pharm D:

OT:

PT:

SW:

Brian Prestwich, MD

Keck School of Medicine of the University of Southern California