

Case 1

GUARD Method™ in Action

One Way to Organize the Case (Initial Information)



Remember: This is one way to organize the information using the GUARD Method based on the initial patient information (Meet Your Patient). There can be multiple ways to organize the information.



Linda Carter

72 years old | Medical-Surgical Unit
Admitted with a urinary tract infection (UTI)



GOAL

Goal for this patient right now

- Treat the urinary tract infection
- Relieve urinary symptoms (frequency, burning)
- Prevent the infection from worsening
- Maintain stability and support recovery
- Promote comfort and hydration

WHY THIS MATTERS FOR THIS PATIENT

- UTI can progress and lead to a more serious infection, especially in older adults.
- Symptoms are affecting her comfort and function.
- Her age and diabetes increase the risk for complications.



UNSAFE OUTCOMES

What could become unsafe for this patient?

- Worsening infection or progression to a systemic infection (e.g., sepsis)
- Dehydration
- Changes in mental status, confusion, increased weakness
- Unstable blood glucose
- Falls related to weakness or frequent urination
- Kidney involvement (e.g., pyelonephritis)

WHY THIS MATTERS FOR THIS PATIENT

- Older adults and patients with diabetes are at higher risk for complications from a UTI.
- Early recognition of changes can help prevent deterioration.



AFFECTING FACTORS

What factors are affecting this patient or situation?

- Age 72
- Type 2 diabetes mellitus
- Hypertension
- Current symptoms: increased urinary frequency, burning, feeling weak
- Home medications (e.g., ACE inhibitor, metformin, statin)
- Lives at home with her spouse (assess available support)
- No known drug allergies

WHY THIS MATTERS FOR THIS PATIENT

- Age and diabetes can increase the risk for a more complicated infection.
- Diabetes can affect immune function and wound healing.
- Current symptoms and feeling weak may affect safety and functional status.
- Home medications and overall health status influence the plan of care.

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One Way to Organize the Case (Initial Information)



RESULTS

What results or findings are most important right now?

- Temperature: 99.0 °F (37.2 °C)
- Blood Pressure: 128/76 mm Hg
- Heart Rate: 84 beats/min
- Respiratory Rate: 16 breaths/min
- Oxygen Saturation: 97% on room air
- Pain Rating: 3/10 (lower abdomen)
- WBC: $11.8 \times 10^3/\mu\text{L}$ (elevated)
- Urinalysis: positive for leukocytes and nitrites
- Creatinine: 0.9 mg/dL
- Blood Glucose: 142 mg/dL (slightly elevated)
- Assessment: alert and oriented, reports urinary symptoms and feeling weak

WHY THIS MATTERS FOR THIS PATIENT

- Elevated WBC and positive urinalysis support the diagnosis of a UTI.
- Vital signs are stable at this time, but should be monitored for changes.
- Blood glucose is slightly elevated, which may affect healing and infection risk.
- Current assessment findings help establish a baseline to compare with future changes.



DO OR DON'T

What should the nurse do or not do at this time?

- Administer prescribed treatment (e.g., antibiotics)
 - Encourage fluid intake as appropriate
 - Monitor vital signs and symptoms
 - Monitor blood glucose per protocol
 - Assess pain and provide comfort measures
 - Educate the patient about the importance of completing the antibiotic
 - Monitor for changes in mental status, increased weakness, fever, or worsening symptoms
 - Ensure safety (fall precautions if needed)
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- Do not ignore new or worsening symptoms, confusion, or signs of deterioration

WHY THIS MATTERS FOR THIS PATIENT

- Early and appropriate treatment can help prevent the infection from worsening.
- Hydration and symptom management support recovery and comfort.
- Ongoing monitoring allows early identification of changes.
- Patient education supports adherence and helps prevent future infections.



Key Takeaway

At this point, Linda is relatively stable. The GUARD Method helps organize what we know, identify potential risks, and plan care before her condition changes.

Case 1

GUARD Method™ in Action

Updated Thinking After a Change in Condition



Linda's condition has changed. Here is one way to update the GUARD Method using the new information. Compare this to the initial GUARD Method example (One Way to Organize the Case) and notice how the thinking evolves as new data becomes available.



Linda Carter

72 years old | Medical-Surgical Unit
Urinary tract infection (UTI)



GOAL

Updated Goal for This Patient

- Treat the urinary tract infection and prevent progression to systemic infection (sepsis).
- Stabilize vital signs.
- Relieve symptoms (pain, urinary frequency, burning).
- Maintain adequate hydration and oxygenation.
- Monitor for and address changes in mental status.

WHAT CHANGED AND WHY IT MATTERS

- The goal now includes preventing further deterioration (e.g., sepsis) because of new signs such as fever, increased heart rate, and a change in mental status.
- Focus on stabilizing vital signs and addressing increased symptoms and weakness.



UNSAFE OUTCOMES

Updated Unsafe Outcomes for This Patient

- Progression to sepsis or septic shock
- Worsening infection (e.g., pyelonephritis)
- Further decline in mental status (confusion, delirium)
- Dehydration
- Impaired oxygenation or respiratory compromise
- Falls related to weakness or confusion
- Unstable blood glucose

WHAT CHANGED AND WHY IT MATTERS

- New fever, increased heart rate, lower blood pressure, and a change in mental status indicate a higher risk for systemic infection and decline.
- Older adults with diabetes are at greater risk for complications and rapid changes.



AFFECTING FACTORS

Updated Affecting Factors for This Patient

- Age 72 (increased risk for rapid deterioration)
- Type 2 diabetes mellitus (increased infection risk, may affect healing and blood glucose)
- Hypertension
- Current change in symptoms: increased weakness, change in mental status, fever, and decreased oral intake
- Home medications (e.g., ACE inhibitor, metformin, statin)
- Lives at home with spouse (assess available support)

WHAT CHANGED AND WHY IT MATTERS

- New symptoms (fever, change in mental status, decreased intake) increase the risk for complications.
- Diabetes can affect immune response and increase the risk for sepsis.
- Decreased oral intake increases the risk for dehydration and kidney involvement.

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GUARD Method™ in Action

Updated Thinking After a Change in Condition



RESULTS

Updated Results or Findings for This Patient

- Temperature: 100.8 °F (increased from 99.0 °F)
- Blood Pressure: 104/62 mm Hg (decreased from 128/76)
- Heart Rate: 102 beats/min (increased from 84)
- Respiratory Rate: 20 breaths/min (increased from 16)
- Oxygen Saturation: 95% on room air (decreased from 97%)
- Pain Rating: 6/10 (increased from 3/10)
- WBC: $14.6 \times 10^3/\mu\text{L}$ (increased from 11.8)
- Creatinine: 1.1 mg/dL (slightly increased from 0.9)
- Blood Glucose: 168 mg/dL (increased from 142)
- Assessment: slower to respond and now oriented to person and place only, increased lower abdominal pain, decreased oral intake, continued urinary frequency and burning

WHAT CHANGED AND WHY IT MATTERS

- Fever, increased heart rate, and increased WBC suggest the infection may be progressing.
- Lower blood pressure and increased respiratory rate indicate potential systemic involvement.
- A change in orientation and responsiveness is a concerning change in an older adult.
- Higher blood glucose may be related to infection and stress.
- Trends show the patient is getting worse and requires prompt reassessment and intervention.



DO OR DON'T

Updated Do or Don't for This Patient

- Notify the provider of the change in condition (e.g., fever, lower BP, increased HR, change in mental status, elevated WBC).
 - Monitor vital signs and neurological status more frequently.
 - Ensure prescribed antibiotics are administered as ordered and evaluate response to treatment.
 - Encourage and monitor fluid intake and consider IV fluids if ordered.
 - Monitor blood glucose per protocol.
 - Implement safety measures (e.g., fall precautions) due to increased weakness and slower responses.
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- Do not dismiss a change in mental status, fever, or declining vital signs.
 - Do not delay reporting significant changes.

WHAT CHANGED AND WHY IT MATTERS

- The patient now requires more frequent monitoring and possible escalation of care.
- Early intervention can help prevent further deterioration.
- Safety measures are important due to increased weakness and slower responses.
- Prompt communication with the provider is essential given the new findings.



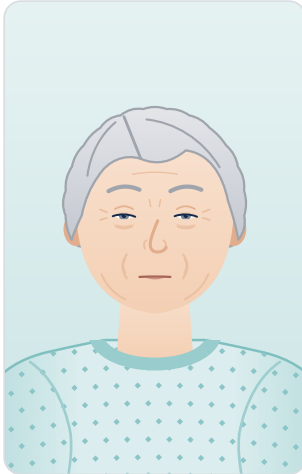
Key Takeaway

As the patient's condition changes, the information within each part of GUARD also changes. The same framework helps organize new data, identify growing risks, and guide next steps.

Case 1

Faculty Guide and Case Reflection

Linda Carter – When the Patient's Condition Changes



Linda Carter

72 years old | Medical-Surgical Unit
Urinary tract infection (UTI)



Case Summary

Linda Carter is a 72-year-old female admitted with a urinary tract infection (UTI). Initially, she is stable with mild symptoms. Several hours later, her condition changes with a fever, increased heart rate, lower blood pressure, a change in mental status, and worsening symptoms. This case demonstrates how the GUARD Method can be used to organize thinking with initial data and then updated as new information becomes available.



Learning Objectives

After working through this case, learners will be able to:

- Apply the GUARD Method to organize patient information.
- Identify changes in the patient's condition and reassess priorities.
- Recognize risk factors for complications in older adults with a UTI.
- Use assessment data to guide appropriate nursing actions.
- Determine when to escalate care based on changing findings.
- Reflect on how GUARD supports ongoing and dynamic thinking in clinical practice.



Key Teaching Points

- UTIs in older adults can progress quickly to systemic infection (e.g., sepsis).
- Changes in vital signs and mental status are early warning signs that require prompt reassessment.
- Age and diabetes increase the risk for complications.
- The GUARD Method helps prioritize relevant information, identify risks, and guide nursing actions.
- Ongoing monitoring and reassessment are essential, as patient conditions can change.
- Early recognition and intervention can prevent further deterioration.



Discussion Questions

- 1 Which part of GUARD was most helpful in organizing your thinking? Why?
- 2 What information on the initial assessment was most important? How did that change with the new findings?
- 3 What signs indicated that Linda's condition was getting worse?
- 4 What additional information would you want to know at this time?
- 5 What are the priority nursing actions now? What should be reported or escalated?
- 6 How does the GUARD Method support safe, patient-centered care in a changing situation?

Case 1

Faculty Guide and Case Reflection

Linda Carter – When the Patient's Condition Changes

Comparison: Initial vs. New Information

Parameter	Initial (0800)	New Information (1400)	Key Change
Temperature	99.0 °F (37.2 °C)	100.8 °F (38.2 °C)	↑ Increased
Blood Pressure	128/76 mm Hg	104/62 mm Hg	↓ Decreased
Heart Rate	84 beats/min	102 beats/min	↑ Increased
Respiratory Rate	16 breaths/min	20 breaths/min	↑ Increased
Oxygen Saturation	97% on room air	95% on room air	↓ Decreased
Pain Rating (lower abdomen)	3/10	6/10	↑ Increased
Mental Status	Alert and oriented × 4	Oriented to person and place; slower to respond	Change in mental status
WBC	$11.8 \times 10^3/\mu\text{L}$	$14.6 \times 10^3/\mu\text{L}$	↑ Increased
Creatinine	0.9 mg/dL	1.1 mg/dL	↑ Slightly increased
Blood Glucose	142 mg/dL	168 mg/dL	↑ Increased

Case Reflection

- What changed in Linda's condition, and where did your thinking change with it?
- How did the priority nursing actions differ from the initial plan?
- What did you learn about using GUARD in a changing situation?
- How might you apply this approach to other patients you care for?

Key Takeaways

- Patient conditions can change quickly, especially in older adults with infections.
- The GUARD Method is a flexible framework that can be updated as new information becomes available.
- Ongoing assessment, recognition of changes, and timely intervention are essential for patient safety.
- Using GUARD supports critical thinking, prioritization, and patient-centered care.