**Module 3 Stewardship: Case Study #1**

**Who:**

* A 34-year-old woman with an MRI proven macro adenoma 4.3 cm in size with invasion into the cavernous sinus comes to clinic.
* She is known to have panhypopituitarism with central diabetes insipidus.
* She was discharged 10 days ago but ran out of intranasal DDAVP, levothyroxine, and hydrocortisone 3 days ago.
* She reports 3 days of vomiting and profound polyuria and polydipsia.
* She has no money and no insurance.

**Where:**

* Yesterday she was in the emergency department with a moderately elevated serum sodium.
* Serum glucose was normal.
* Serum osmolality was moderately elevated.
* Very low urine osmolality was noted.
* She has a normal blood pressure and pulse without orthostatic changes.
* She was discharged from the ED and told to follow in the clinic the next day to get her medication.
* She is in the clinic today.
* *In the clinic there is a federally supported low cost pharmacy, a licensed social worker and insurance support team.*

**Lab Findings:**

|  |  |
| --- | --- |
| **Serum sodium moderately elevated** | Indicating dehydration |
| **Glucose normal** |  |
| **Serum osmolality moderately elevated** | Indicating dehydration |
| **Urine osmolality very dilute** | Indicating inappropriate excretion of free water |

**Case Review:**

* As the care team, you are to review the case and write up a care plan.

**Points of Discussion:**

* Does the patient need medication and can she pay for it?
* Can you get insurance/Medicaid for her today?
* The neurosurgeon will not operate until she has insurance.
* Should you direct admit the patient to help her get insurance?