

“Rosalind” is a 90-year old woman with anxiety issues. She lives with her 100-year old husband, “Seymour”, in a condominium. Along with Rosalind, scheduled in-home caregivers assist Seymour, who has had many health issues in the past. They have a supportive daughter who lives on the west coast.

Advocare’s Care Manager, “Sarah” had Rosalind as presenting very well. All labs indicated that, clinically, her health was better than most of her demographic. During an examination, Sarah noticed that Rosalind seemed to be losing weight and complained of feeling a general malaise. It affected her so, that it caused a fall in her home. Sarah made doctor appointments and follow up lab tests, all of which left Rosalind with a clean bill of health. The question became why was Rosalind feeling so poorly?

On the day she called Sarah, Rosalind found that she couldn’t stand up. Obviously concerned, Sarah rushed to Rosalind’s home, put her in a wheelchair, and immediately got her to her doctor’s office. The Nurse Practitioner, who had seen Rosalind before, told them that since every test had come back indicating nothing was wrong that the diagnosis was that Rosalind was imminent (medical speak for, “about to die”). But why? Sarah felt that she could not stand by and wait for an inevitability that she was not fully convinced of. In her role of Advocate, Sarah convinced the Nurse Practitioner to call 911.

In the Emergency Room, labs tests were conducted and, again, disclosed nothing. The doctor ordered a CT scan of her chest, because it seemed that Rosalind was slightly short of breath upon arrival, even though she was asymptomatic of anything. Upon review of the scan, it showed that her lungs were completely opaque. Suspecting cancer, a lung specialist was called in. Sarah notified Rosalind’s daughter who prepared to come to South Florida. In the interim, Sarah visited Rosalind, assuaged her anxiety and advocated on her behalf.

During the biopsy, the specialist saw that Rosalind did not have cancer; she had an infection from a mild pneumonia contracted years ago. The bacteria had built up a one-inch barrier of pus that had to be surgically removed.

Sarah, with the help of Advocare’s team, was able to arrange for an appropriate Skilled Nursing/Rehabilitation Facility to take care of Rosalind after her 30-day hospital stay on IV antibiotics, arrange for continuous-care for Seymour, and oversee Rosalind’s progress.

Today, Rosalind is back to living her life, healthy and happy, with Seymour at her side.