

Dover Behavioral Health
Clinical Assignment
2023

Student Name: Kasey McNatt Date: 11/15/2023

Patient's Initials: CP Age: 59 Sex: M

Psychiatric Diagnosis(es): Substance Use Disorder (alcohol and cocaine)

Pathophysiology of the main Psychiatric Diagnosis:

- chronic, relapsing brain disease
- alcohol can produce morphine-like substances in the brain that are responsible for addiction
- dopamine becomes less effective, so the individual needs more to raise dopamine levels (using ETOH or cocaine)
- certain personality, cognitive, and genetic factors can influence this disorder

Medications

Medication Name, Classification/Action	Rationale	Side Effects	Nursing Implications
Antabuse (disulfiram) Alcohol antagonist	Reacts to alcohol and causes unpleasant side effects	Headache, drowsiness, halitosis, seizures, dermatitis, pruritis,	-Do not drink or do cocaine while on this med -don't give if CHF, CAD, psychosis, or liver disease

Mental Status Exam:

Document subjective & objective data

1. Appearance

59 yr old male, divorced, one adult son, African American, homeless, Well-groomed, good hygiene, appearance appropriate for age

2. Behavior

Normal body movements, normal eye contact

3. Speech

Normal rate and volume of speech, some articulation problems at times

4. Mood

Affect appropriate, mood happy, calm

5. Disorders of the Form of Thought

none

6. Perceptual Disturbances

none

7. Cognition

A&Ox4, appropriate attention and abstraction, aware of problem behaviors

8. Ideas of harming Self or Others

No SI/HI

Problem #1:

Ineffective coping

Patient Goals:

1. CP will demonstrate effective coping strategies prior to discharge.
2. CP will verbalize the resources and support available during my care.

Assessments:

- Triggers, signs of stress, use of ineffective and effective coping mechanisms, support system

Interventions (In priority order):

1. Build rapport and trusting relationship q shift.
2. Educate on effective coping mechanisms (taking a walk, exercising, music, and distractions) q shift.
3. Utilize therapeutic communications q shift.
4. Maintain therapeutic milieu q shift.
5. Provide resources such as support groups and AA q shift.
6. Identify and remove triggers q shift.

Problem #2:

Risk for acute substance withdrawal syndrome

Patient Goals:

1. CP will demonstrate no signs or symptoms of withdrawal during my care.
2. CP will maintain a normal level of consciousness during my care.

Assessments:

- s/sx of withdrawal, LOC changes, N/V/D, last drink/time used, level of anxiety/depression,

Interventions (In priority order):

7. Build rapport and trusting relationship q shift.
8. Provide low stimuli environment q shift.
9. Maintain a safe environment (low bed, open doors, try not to restrain, keep call bell in reach) q shift.
10. Administer anxiolytic or antinausea meds as ordered.
11. Maintain seizure precautions q shift.
12. Provide resources for inpatient or outpatient rehab at discharge.

Patient Teaching

List 2 teaching topics that you taught a client. Were they appropriate for this client, and why?

1. Educated on resources for rehab after discharge from DBH. This was appropriate because it was what the patient was seeking because of his history of drug and alcohol abuse.
2. Educated on some Sussex County homeless resources including the tiny houses in Georgetown that could be helpful. This is appropriate because the patient is homeless.

Growth & Development

1. Discuss norms of growth and development, including the development stage.

Within the middle adult developmental stage, there are not many physical changes occurring. Any physical changes are due to diet, exercise, disabilities, or health conditions. Work is a huge part of their lives. Cognitive development does not develop. Role changes and midlife crises may occur.

2. Discuss any deviations of growth and development and the developmental stage.

There is a deviation in role changes because the patient is divorced, so his role as a husband and parent is influenced. The patient has a deviation in physical development because he has a physical disability. Cognitive and nerve impulses are deviated because of the drug and alcohol use and its influence on the brain.

Self-Evaluation: Answer each of the following questions.

1. What is your personal perception of your performance during your clinical day? What did you do well? What could you have done better? Give specific examples.

I think my performance during the clinical day was overall successful. I was able to talk to many different patients comfortably and have them open up easily to me. I feel one thing I could have done better was focus on my one patient, but I was trying to decide who I wanted to further explore. For example in the morning I had many small conversations with many people.

2. Give an example of one of the challenges you faced today. What did you do to overcome it?
I feel like today was a bit harder in terms of communicating with the patients because there was limited time to talk to them due to their activities being so tightly structured. To overcome this, I talked to various people during art therapy, in the hallways, and during transitions.