

Mental Status Exam:

	Subjective Data	Objective Data
Appearance	Well-kept appearance Good hygiene Height and weight appropriate for age	Hair neatly braided Pink hair Clothes clean, free of stains
Behavior	Appropriate behavior	Maintained adequate eye contact No excessive movements or abnormal movements Gave another peer the “middle finger”
Speech	Appropriate for age No disturbances in speech	Clear, slow and quiet speech Used some profanity
Mood	Stable mood	Bland and flat affect
Disorders of the Form of Thought	Thoughts coherent and logic	Stated 2 realistic goals for the day that correlated with her diagnosis, “I will not fight anyone,” “I will have a good day”
Perceptual Disturbances	Unable to assess	Unable to assess
Cognition	Alert and oriented Has insight on illness	Stated, “I was admitted because I have thoughts of hurting myself and others”
Ideas of harming self or others	N/A	Stated, “I was admitted because I have thoughts of hurting myself and others” When asked if she still has these thoughts stated, “From time to time”

Problem #1: Ineffective coping

Priority Patient Goal:

1. Pt will identify coping strategies by the end of my care

Assessments:

- Assess for signs of self-harm/other harm ideations, assess current coping strategies/knowledge of strategies, assess learning level (to effectively teach strategies), assess support system, assess knowledge of illness/diagnosis

Top 2 Interventions with rationale:

1. Establish rapport
2. Educated on new or more effective coping strategies

Problem #2: Risk for self- or other-directed harm

Priority Patient Goal:

1. Pt will not harm self/others during my time of care

Assessments:

- Assess for suicidal/homicidal ideas, assess for Hx of these ideations, assess if pt has a plan, assess for means to carry out plan, assess support system

Top 2 Interventions with rationale:

1. Ensure safety, remove harmful objects if access and have a plan
2. Establish trust/rapport w/ pt

Patient Teaching

List 2 teaching topics that you taught a client.

1. In partial a pt asked how this observation was related to nursing I educated that mental health and substance disorders are a big part of nursing; also, that this experience will help you to be open-minded and properly care for said population of pts.
2. Educated on coping strategies, ie: journaling, meditation, physical exercise

Growth & Development

1. Discuss norms of growth and development for your patient, including development stage.

The developmental stage for my pt is Adolescent. Norms for this period include modifying self-image, acceptance by peers is important, sexuality is discovered. Obesity is of

concern during this stage. During this period puberty also takes place and for females is concluded by age 13.

2. Discuss any deviations of growth and development.

Growth was appropriate for age and developmental stage. During this period adolescence are at higher risk for self-harm, so it is not surprising for the diagnosis however, this can be perceived as a deviation.

Self-Evaluation: Answer the following question.

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 I did well talking to the patients. At the beginning of the day this was a little out of my comfort zone because I did not know what to say or did not want to say the wrong things. I also think that this could be improved upon by talking to even more people than I did. I gravitated to two individuals and talked to pretty much only them.