

Dover Behavioral Health
Clinical Assignment
2024

Student Name: Caroline Maull Date: 10/16/2024

Patient's Initials: K.D. Age: _____ Sex: F

Psychiatric Diagnosis(es): major depressive disorder

Pathophysiology of the main Psychiatric Diagnosis:

Neuroanatomical Factors:	↓ white matter Amygdala & hippocampus have structural anomalies ↓ gray matter volume
Neurotransmitters:	serotonin: ↓ norepinephrine: ↓ dopamine: ↓
Course/ characteristics of illness:	symptoms for at least 2 weeks loss of interests, feeling down, cannot find pleasure, ↓ energy, insomnia, changes in appetite, agitation, worthlessness/guilt, suicidal ideations

Medications

Medication Name What is this for?	Classification & Action	Side Effects	Nursing Implications
Lexapro (escitalopram) (SSRI)	SSRI blocks the reuptake of serotonin	-sexual dysfunction -CNS: insomnia, anxiety, agitation -weight ↓, then weight ↑	-educate on avoiding alcohol -do not take w/ MAOI -do not d/c abruptly -monitor for suicidal ideations -toxicity: serotonin syndrome
Abilify (aripiprazole) (antipsychotic 2nd gen)	2nd gen antipsychotic targets pos. & neg. symptoms of schizophrenia	-EPS (TD, parkinsonism, akathisia, dystonic reaction) -↑ weight -↑ BG -hypotension	-start low -monitor BP -monitor for EPS

Mental Status Exam:

	Subjective Data	Objective Data
Appearance	"This is my outfit to go home in"	wearing same clothes as yesterday, hair unkempt, smiling
Behavior	"I feel tired today"	did not attend or participate in group therapy, did not go to AT
Speech	"I'm tired" "When am I going home?"	calm tone, quiet volume, incomplete sentences/simple phrases
Mood	"I feel okay"	smiling, laughing, appropriate affect
Disorders of the Form of Thought	"I want to get out of here"	organized thoughts, no delusions/obsessions
Perceptual Disturbances	"I'm glad to leave here soon"	no hallucinations/illusions
Cognition	"I want to go home"	AOx4, appropriate memory, insight, judgement
Ideas of harming self or others	"I am feeling okay today"	suicidal thoughts, plan present

Problem #1:

Ineffective Coping

Priority Patient Goal:

1. Pt. will learn coping skills and apply them in practice Q by discharge

Assessments:

- > mood Q 2 hr., cognition Q 2 hr., triggers Q once per shift, support system Q once per shift

Top 2 Interventions with rationale:

1. Use therapeutic communication at all times → builds rapport/trust
2. provide coping techniques (deep breathing) Q PRN → helps pt. to see what works

Problem #2:

Risk for injury

Priority Patient Goal:

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

Assessments:

- > pt.'s mood Q 2 hr., suicidal ideation Q once per shift, cognitive function Q 2 hr.

Top 2 Interventions with rationale:

1. reduce stimuli at all times → low stimuli can help relax pt.'s
2. implement suicide precautions Q PRN → to not harm self

Patient Teaching

List 2 teaching topics that you taught a client.

1. Coping techniques → deep breathing
2. medication importance

Growth & Development

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

Norms in growth and development that this patient experienced are height/weight.

2. Discuss any deviations of growth and development.

There are deviations of growth and development such as effective coping skills, ↑ social abilities, problem solving skills. She has a developmental delay.

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.

During my clinical day, my perception of my performance was that I did well. I think I did well communicating with all patients and felt more comfortable doing so. During breakfast it was hard to get K.D. to talk but I still managed to communicate therapeutically. I think I could have done better at involving K.D. in activities and maybe talking her into participating.