

Reflective Journaling Assignment

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First off, I am actually fairly excited to start the psychiatric portion of the module. I have lots of mixed and confused ideas towards psychiatric care, which is the reason I am excited about it. We see a plethora of movies, documentaries and tv shows that involve psychiatric patients and how those patients are treated. These things can cause a construed outlook on how the “real life” units are run, and how the patients actually act. I personally have never truly worked on a designated psychiatric unit, so I don’t really know what to expect. I worked in the emergency room for a couple of years, and we did have the occasional suicide attempt/ideation, depression and schizophrenia patients but nothing too harsh or in detail. When we received these patients, we immediately started the transfer process to get the into a psych unit. Since the patients were transferred out so quickly, we didn’t have much patient care or experience with those types of patients. In turn of that last statement, my feelings for this module are all over this place. I am excited, nervous and scared all at the same time.

My personal experience with psychiatric illness is minimal. I do have mild anxiety and depression which are both caused by one another. When I was growing up, I always knew that I was gay, but I was always too afraid to come out. This was the start to the problems that I live with now. When I was growing up, I had to hide who I was and that was damaging to my mental health causing the depression. After high school I decided to “come out” and tell everyone who I really am. From that experience, I have developed anxiety in fear of people not accepting me for who I really am. I think every human on earth struggles with a type of mental health disorder. I know that mine are very minuscule compared to some of the things we are going to see in the clinical setting. From going through this process growing up, it might help me be able relate a

little more closely to some of the patients and try to understand what they are going through in their minds.

Some of my fears and concerns about being on a psychiatric unit are not being able to help the patient enough, or not fully understanding what they are going through. Yes, I have a fear of saying something that elicits a negative response but I'm sure everyone has that fear. We will never be able to fully understand what someone is going through in their head and that's what concerns me. I fear that I won't comprehend what the patient is going through and won't be able to treat the patient to the full extent of their illness. I am fearful that some of my actions might unknowingly upset the patients, making the situation worse for the patient. I like to fully understand what is going on with an illness, but in psychiatric care that may not always be the case and I need to come to terms with that. Every patient is different, and I will have to learn how to treat each patient individually and equally to the best of my ability.

Some of my expectations from the psychiatric course are going to be learning how to calmly de-escalate situations, how the different illnesses work mentally and non-pharmacologic/pharmacological ways to treat the different illnesses. My first question that I would like answered during this course would be how to therapeutically talk to psychiatric patients without triggering or upsetting them. Working with psychiatric patients the slightest unintentional look or word may cause them to have a psychotic break and that's frightening to me. Secondly, I would like to find the answer on how the illnesses work and different types of nursing interventions to treat that specific illness. I would like to know how to ask questions to psychiatric patients about their illness to achieve a deeper understanding on how they feel or what they are thinking. Like mentioned before, I like to know how the illness works, but every patient is different so they might have different things that affect them. Lastly, I would like to learn how the different

medications work and which ones work best together for a certain illness. This also raises the question on if there are non-pharmacologic ways to treat psychiatric illnesses before resorting to medications. I know that medications are the number one way to treat psychiatric illnesses, but I want to know some other ways to treat them before just giving them medications to “level” them out. I have seen some psychiatric patients that are on so many medications that they aren’t themselves anymore, or the meds can cause them to fall into a deep depression.

In conclusion, I am really excited to further my nursing knowledge about psychiatrics. I really look forward to answering my questions stated about and applying that knowledge in clinical sites.