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### IM6 (Acute Psychiatric) Critical Thinking Worksheet

<p><b>1. DSM-5 Diagnosis and Brief Pathophysiology (include reference):</b></p> <p><b>Alcohol withdrawal</b></p>	<p><b>2. Psychosocial Stressors (i.e. Legal, Environmental, Relational, Developmental, Educational, Substance Use, etc.);</b></p> <p>getting married or divorced, moving, or starting a new job. Problems at home or work, a death in the family, or an illness also can lead to stress. Maltreatment in childhood includes exposure to emotional, sexual, and/or physical abuse or neglect</p>	<p><b>3. DSM-5 Criteria for Diagnosis (Asterisk or Highlight Symptoms Your Patient Exhibits and Include References)</b></p> <p><b>Anxiety</b> <b>Tremors</b> <b>Insomnia</b> <b>Headache</b> <b>Palpitations</b> <b>GI upset</b> <b>Tachypnea</b> <b>Confusion</b> <b>Hallucinations</b> <b>Delirium tremens</b></p>
<p><b>3. Medical Diagnoses:</b></p> <p><b>Alcoholism</b></p>		
<p><b>5. Diagnostic Tests Pertinent or Confirming of Diagnosis</b></p> <p><b>AUDIT</b> <b>CIWA-AR</b></p>	<p><b>6. Lab Values That May Be Affected:</b></p> <p><b>Blood Alcohol Level</b></p>	<p><b>7. Current Treatment:</b></p> <p><b>Medications</b> <b>-Benzodiazepines</b> <b>-Librium</b> <b>-Valium</b></p> <p><b>Beta Blockers</b></p> <p><b>Magnesium Sulfate</b></p>

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<p><b>8. Focused Nursing Diagnosis:</b> Denial</p>	<p><b>12. Nursing Interventions related to the Nursing Diagnosis in #7:</b> 1. Teach patient the definition of dependence, and withdrawal and define categories and symptoms.</p> <p><b>Evidenced Based Practice:</b></p>	<p><b>13. Patient Teaching:</b> 1. Teach patient to recognize drinking triggers, and avoid them by planning g in advance</p> <p>2. Teach patient symptoms that occur with alcohol withdrawal, to help build patient comfort.</p> <p>4. Teach patient to be patient, and encourage themselves (celebrate small goals) and build their own self esteem</p>
<p><b>9. Related to (r/t):</b> Cultural factors, family value system</p>	<p>This information helps patient make decisions regarding acceptance of problem and treatment choices.</p> <p>2. Always follow-through with patient and provide accurate information regarding diagnosis.</p> <p><b>Evidenced Based Practice:</b></p>	
<p><b>10. As evidenced by (aeb):</b> Delaying in seeking healthcare attention</p>	<p>Develop trust between patient and staff can lead to better patient outcomes.</p> <p>3. Confront and examine denial and rationalization in peer group. Use confrontation with caring.</p> <p><b>Evidenced Based Practice:</b></p>	<p><b>14. Discharge Planning/Community Resources:</b> 1. Set up local AA chapter for patient to attend weekly.</p> <p>2. Set up family therapy to provide information to children and spouse about the nature of this disease.</p> <p>3. Teach patient to use medication as prescribed and non-pharmacological coping measures.</p>
<p><b>11. Desired patient outcome:</b> Verbalize awareness of relationship of substance abuse to current situation by end of hospitalization.</p>	<p>denial is the defense mechanism in addictive disease, confrontation can help the patient accept the reality of adverse consequences of behaviors and that drug use is a major problem.</p>	