

IM6 (Acute Psychiatric) Critical Thinking Worksheet

<p>1. DSM-5 Diagnosis and Brief Pathophysiology (include reference): Although the exact pathology is unknown it is believed that the main factor contributing to bipolar disorder is genetics. Also, it is believed that the mood swings (mania and depression) are related to membrane changes in sodium and potassium activated adenosine triphosphatase involving disordered intracellular signals.</p> <p>https://Inareference.wkhpe.com/ref/view.do?key=213457bdb0198103056104b40f3801f1b4b7c77e&nmn=openMonographFromGlobalId&monographId=CC.978-1-58255-511-9.chapter57</p>	<p>2. Psychosocial Stressors (i.e. Legal, Environmental, Relational, Developmental, Educational, Substance Use, etc.);</p> <p>Medication compliance is the biggest stressor that I see when it comes to Sharon.</p> <p>Environmental as well, Sharon had not really slept or eaten in the past 2 weeks before her accident on stage and the beginning of her manic episode.</p>	<p>3. DSM-5 Criteria for Diagnosis (Asterisk or Highlight Symptoms Your Patient Exhibits and Include References)</p> <p>3 or more of the symptoms are present: Inflated self-esteem or grandiosity Decreased need for sleep Excessive talking Flight of ideas Easily distracted Psychomotor agitation Excessive involvement in dangerous activities</p> <p>Symptoms don't meet criteria for a mixed episode</p> <p>https://Inareference.wkhpe.com/ref/view.do?key=213457bdb0198103056104b40f3801f1b4b7c77e&nmn=openMonographFromGlobalId&monographId=CC.978-1-58255-511-9.chapter57</p>
<p>4. Medical Diagnoses: Bipolar Disorder</p>		

<p>5. Diagnostic Tests Pertinent or Confirming of Diagnosis Clinical Exam that rules out other physical disorders Psychological Exam identifies bipolar criteria</p>	<p>6. Lab Values That May Be Affected: Although Bipolar disorder doesn't affect lab values directly, in the case of Sharon, Bipolar disorder caused an accident which then lead to surgery which then lead to these different lab values: Hemoglobin is 16.4 (H) White Blood Cells 10.6 (H) Chloride 98 (L)</p>	<p>7. Current Treatment: Mood stabilizers Diet (clear liquid but can advance to regular diet) Pain management Atypical Antipsychotics Benzodiazepines Antibiotics</p>
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<p>8. Focused Nursing Diagnosis: Risk for injury</p>	<p>12. Nursing Interventions related to the Nursing Diagnosis in #7: 1. Involve family in helping to provide a culture of safety.</p>	<p>13. Patient Teaching: 1. Educate the patient on signs and symptoms of mania and depression. 2. Importance of adequate salt intake while taking lithium.</p>
<p>9. Related to (r/t): Alteration in cognitive functioning</p>	<p>Evidenced Based Practice: A client centered approach to care should include the family, in both planning and decision making. 2. Evaluate whether exposure to community violence is a contributor to a client's risk for injury.</p>	<p>3. Possible adverse effects of the medications Sharon is taking and telling her which adverse effects to report to her provide if they appear.</p>
<p>10. As evidenced by (aeb): Patient breaking their ankle after jumping on stage and getting in an altercation during a manic episode</p>	<p>Evidenced Based Practice: Exposure to violence can result in many negative consequences. 3. Review drug profile for potential side effects and interactions that may increase risk for injury.</p>	<p>14. Discharge Planning/Community Resources: 1. Give information regarding some support groups that Sharon and her family can be involved in, in order to have a healthy relationship as a family and be more educated on Bipolar disorder. 2. Have the patient create an emergency plan just in case of an emergency and Sharon needs medical attention quickly.</p>
<p>11. Desired patient outcome: By the third day of hospitalization, Sharon will be able to demonstrate a controlled behavior while also adhering to her medication of lithium.</p>	<p>Evidenced Based Practice: A mix of medications can cause a reduction in physical function, raise the risk for falls, delirium, and is known factor in hospital admissions and deaths.</p>	<p>3. Assess the patient's ability and knowledge about the medications they are going home with. Also assess family's ability and knowledge to administer medication if patient cannot.</p>