

Student Name: Heather Leigh Acker

PT = HD

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IM6 (Acute Psychiatric) Critical Thinking Worksheet

SCHIZOPHRENIA

<p>1. DSM-5 Diagnosis and Brief Pathophysiology (include reference): <u>Schizophrenia with increased dopamine hallucinations</u>  <u>Complex D/O: dysregulation of multiple pathways. Dopamine: glutamate system. Glutamate: excitatory neurotransmitter. Pathways combined w/ interactions w/ early brain development. Bress 2009, Karum 2010</u></p>	<p>2. Psychosocial Stressors (i.e. Legal, Environmental, Substance Use, etc.):  <u>Educational, Substance Use, etc.</u>  <u>Pt. Dx @ 17yo w/ paranoid delusions. Nicotine addiction - 2yrs - 3ppd, single wifes w/ widowed mother.</u>  <u>2nd year @ ITU psychology</u>  <u>2 wks ago change in habits - self-isolation, missing class.</u>  <u>DSX - command hallucinations.</u>  <u>PTX - motivation</u>  <u>Isolation - bad hygiene @ 1 week.</u>  <u>currently taking long paliperidone pcd.</u></p>	<p>3. DSM-5 Criteria for Diagnosis (Asterisk or Highlight Symptoms Your Patient Exhibits and Include References)  <u>2 or more of following - olivung. 1m p</u>  <u>1 Delusions</u>  <u>2 Hallucinations</u>  <u>3 Disorganized Speech</u>  <u>4 Grossly Disorganized or Catatonic</u>  <u>5 <del>Ex</del> diminished or avolition</u></p>
<p>4. Medical Diagnoses:  <u>Ruling out other mental health disorders</u>  <u>Determining that Sx are NOT due to substance abuse, medication, medical condition</u></p>	<p>6. Lab Values That May Be Affected:  <u>Schizophrenia &amp; associated w/ any characteristics of lab results</u>  <u>- all pts should receive following lab</u>  <u>* CBC</u>  <u>* LFT</u>  <u>- TSH</u>  <u>- Fret</u>  <u>- Renal Function Test</u>  <u>* - BMP</u></p>	<p>7. Current Treatment:  <u>Maravolis, 2017 p. 252</u>  <u>Pt taking long Paliperidone pcd</u>  <u>No other treatment noted</u></p>
<p>5. Diagnostic Tests Pertinent or Confirming of Diagnosis  <u>1. Physical Exam</u>  <u>2. Screening for alcohol or drugs</u>  <u>3. MRI</u>  <u>4. CT Scan</u>  <u>5. Psychiatric Evaluation</u>  <u>Asking about thoughts, moods, hallucinations, substance use potential for violence, family personal history</u></p>	<p>However empty - because he is on Paliperidone. Should have creatinine closely monitor  <u>* Creatinine level</u></p>	

\* Benes, F.M. (2009) - Neural Circuitry models of Schizophrenia, dopamine, timon, glutamate, Biopsych 2009  
 \* Karum, E.S. (2010) - Signaling pathways in Schizophrenia, emerging targets and therapeutic Trends Pharmacol 2010  
 \* Varcarolis, E.M. (2017) Essentials of Psych Nursing infant Heather Nursing