

IM6 (Acute Psychiatric) Critical Thinking Worksheet

<p>1. DSM-5 Diagnosis and Brief Pathophysiology (include reference): Opioid Withdrawal After repeated exposure to opioids over time, the body creates more neural receptors in an attempt to achieve homeostasis in the body. As a patient withdraws from opioids, a surge of norepinephrine (which is what causes fight or flight response in stressful situations) is released into the body, affecting all major organ systems and causing withdrawal symptoms, which begin with anxiousness and a racing heartbeat.</p>	<p>2. Psychosocial Stressors (i.e. Legal, Environmental, Relational, Developmental, Educational, Substance Use, etc.);</p> <p>Going through a divorce</p> <p>Family stressors</p> <p>History of substance use</p>	<p>3. DSM-5 Criteria for Diagnosis (Asterisk or Highlight Symptoms Your Patient Exhibits and Include References)</p> <p>Presence of either of the following:</p> <ul style="list-style-type: none"> - Cessation of or reduction in opioid use that has been heavy and prolonged - Administration of an opioid antagonist after a period of opioid use <p>3 or more of the following developing within minutes to several days after</p> <ul style="list-style-type: none"> - Nausea/vomiting* - Muscle aches - Lacrimation or rhinorrhea - Pupillary dilation, piloerection, sweating* - Diarrhea* - Yawning <p>Insomnia*</p>
<p>4. Medical Diagnoses: Anxiety, Depression, and Heroin Overdose</p>		<p>7. Current Treatment:</p> <p>Prescribed 400 mg ibuprofen q 6 hours for back pain.</p> <p>Calling HCP to see if we can bump prescribed analgesic and</p>
<p>5. Diagnostic Tests Pertinent or Confirming of Diagnosis</p> <ul style="list-style-type: none"> -COWs -Physical Examination 	<p>6. Lab Values That May Be Affected:</p> <p>Labs pending:</p> <ul style="list-style-type: none"> -CBC- to assess blood cell status -CMP- to assess electrolytes after n/v -ETOH- to rule out alcohol -urine toxicology- to identify opiate 	

Student Name: _____ Date: _____

<p>8. Focused Nursing Diagnosis:</p> <p>Ineffective Coping</p>	<p>12. Nursing Interventions related to the Nursing Diagnosis in #7:</p> <p>1. Use verbal and nonverbal therapeutic communication to establish rapport.</p>	<p>13. Patient Teaching:</p> <p>1. Teach the patient the importance of medication compliance.</p>
<p>9. Related to (r/t):</p> <p>Use of substances to cope with life's stressors like her recent divorce, family conflicts and pain.</p>	<p>Evidenced Based Practice:</p> <p>Establishing rapport with this client is crucial as she is feeling ignored. Therapeutic communication promotes a healthy therapeutic relationship.</p>	<p>2. Provide teaching regarding other potential coping mechanisms to promote physical and emotional well-being like walking, healthy eating, and guided imagery.</p>
<p>10. As evidenced by (aeb):</p> <p>Track marks on her extremities, insomnia, tremors, diaphoresis, feelings of isolation and being misunderstood.</p>	<p>2. Assist the client to set realistic goals and identify personal skills and knowledge.</p> <p>Evidenced Based Practice:</p> <p>Researchers learned that positive affective states and autonomous goal motivation predicted positive coping.</p>	<p>3. Teach the patient about the local support groups available.</p> <p>14. Discharge Planning/Community Resources:</p> <p>1. Social work to see if patient qualifies for financial aid to enhance compliance with prescribed regimen.</p>
<p>11. Desired patient outcome:</p> <p>Patient will report an increase in psychological comfort by 3/5/21 at 1600.</p>	<p>3. Collaborate with the client to identify strengths such as the ability to relate the facts and to recognize source of stressors.</p> <p>Evidenced Based Practice:</p> <p>Strength-based nursing is a philosophical approach that includes eight values including a collaborative partnership with clients and families.</p>	<p>2. Follow up with the HCP.</p> <p>3. Rehabilitation to promote detox.</p>