

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

IM6 (Acute Psychiatric) Critical Thinking Worksheet

<p><b>1. DSM-5 Diagnosis and Brief Pathophysiology (include reference):</b>  <b>Anxiety-</b> a feeling of worry, nervousness, or unease, typically about an imminent event or something with an uncertain outcome.</p>	<p><b>2. Psychosocial Stressors (i.e. Legal, Environmental, Relational, Developmental, Educational, Substance Use, etc.);</b>  <b>Having a major surgery related to her breast cancer and not having her medicine bundle</b></p>	<p><b>3. DSM-5 Criteria for Diagnosis (Asterisk or Highlight Symptoms Your Patient Exhibits and Include References)</b></p> <ol style="list-style-type: none"> <li>1. The presence of excessive anxiety and worry about a variety of topics, events, or activities. Worry occurs more often than not for at least six months and is clearly excessive.</li> <li>2. The worry is experienced as very challenging to control. The worry in both adults and children may easily shift from one topic to another.</li> <li>3. The anxiety and worry are accompanied by at least three of the following physical or cognitive symptoms             <ul style="list-style-type: none"> <li>- Restlessness</li> <li>- Fatigue</li> <li>- Impaired concentration</li> <li>- <del>Difficulty sleeping</del></li> </ul> </li> </ol>
<p><b>4. Medical Diagnoses:</b>  <b>Breast cancer</b></p>	<p><b>5. Lab Values That May Be Affected:</b></p> <p>cortisol  WBC  Serum electrolytes  High B/P</p>	<p><b>6. Current Treatment:\</b>  <b>Lorazepam</b>  <b>Bupirone</b></p>
<p><b>4. Diagnostic Tests Pertinent or Confirming of Diagnosis</b>  <b>7-item PROMIS Anxiety Short Form</b>  <b>The Hamilton Anxiety Rating Scale (HAM-A)</b></p>		

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<p><b>7. Focused Nursing Diagnosis:</b> Innefective coping</p>	<p><b>12. Nursing Interventions related to the Nursing Diagnosis in #7:</b> 1.allow time for rituals</p> <p><b>Evidenced Based Practice:</b> Allow for client to achieve a calm sensation while doing things that the client is comfortable and confident in</p>	<p><b>13. Patient Teaching:</b> 1. don't get on your phone or watch tv before bed to allow a time to wind doen before bed to achieve better sleep</p> <p>2.avoid caffeine or nicotine because they can cause an increase in anxiety</p> <p>3. Relive tension with light exercise or engage in activities that help relieve stress like reading, or doing a puzzle</p>
<p><b>8. Related to (r/t):</b> Loss of medicine bundle before major surgery</p>	<p>2.provide honest and therapeutic communication</p> <p><b>Evidenced Based Practice:</b> Will allow the client to feal prepared and will gain trust from the client</p>	<p><b>14. Discharge Planning/Community Resources:</b> 1. give information about support groups with common diagnosis</p> <p>2. give information about local native American groups in the patients areas to help obtain community</p>
<p><b>9. As evidenced by (aeb):</b> SOB, statements of " feel like im going to die"</p>	<p>3.initiate deep breathing exercises</p> <p><b>Evidenced Based Practice:</b> Will slow down patients breathing and in conjunction calm down the patients nerves</p>	<p>4. Have a social worker help get inContact with family back home</p>
<p><b>10. Desired patient outcome:</b> Patient will learn effective coping school for anxiety before the next schedule surgery time</p>		