

IM6 (Acute Psychiatric) Critical Thinking Worksheet

<p><b>1. DSM-5 Diagnosis and Brief Pathophysiology (include reference):</b>          Post Traumatic Stress Disorder is triggered by experiencing or being witness to a traumatic event. Flashbacks, anxiety and fixation on the event are uncontrollable experiences of the individual suffering from PTSD. (Mayo Clinic, 2018)</p>	<p><b>2. Psychosocial Stressors (i.e. Legal, Environmental, Relational, Developmental, Educational, Substance Use, etc.);</b></p> <p>PTSD can take a major toll on psychosocial relationships (P)</p> <p>outbursts/anger that are out of character (P)</p> <p>Withdrawal from family and work tasks (P)</p> <p>May lead to coping using alcohol or drugs</p> <p>Interfere with daily life (P)</p>	<p><b>3. DSM-5 Criteria for Diagnosis (Asterisk or Highlight Symptoms Your Patient Exhibits and Include References). (NCBI, 2013)</b></p> <ol style="list-style-type: none"> <li>1. Exposure to actual or threaten traumatic event (1 or more ways) (P)</li> <li>2. Presence of 1 or more of the following (distressing memories (P), recurrent distressing dreams (P), dissociative reactions(P), intense or prolonged physical distress to exposure that resembles event, marked physiologic reactions (P) to internal/ external cues that resemble the event)</li> <li>3. Persistent avoidance of stimuli associated with the event</li> <li>4. Negative alterations in mood/ cognition</li> <li>5. Marked arousal/reactivity</li> </ol>
<p><b>4. Medical Diagnoses:</b>          Concussion</p>	<p>Withdrawal from family and work tasks (P)</p> <p>May lead to coping using alcohol or drugs</p> <p>Interfere with daily life (P)</p>	<p><b>7. Current Treatment:</b></p> <p>Antidepressants- SSRI</p> <p>Diazepam (P)</p> <p>Topiramate (P)</p>
<p><b>5. Diagnostic Tests Pertinent or Confirming of Diagnosis</b></p> <p>DSM-5 Criteria</p> <p>Physical exam to rule out physical causes</p> <p>Psychological exam (discuss signs/ symptoms)</p> <p>(NCBI, 2013)          (Mayo Clinic, 2018)</p>	<p><b>6. Lab Values That May Be Affected:</b></p> <p>A CBC and endocrine studies may be completed to rule out physical causes.</p>	<p><b>7. Current Treatment:</b></p> <p>Antidepressants- SSRI</p> <p>Diazepam (P)</p> <p>Topiramate (P)</p>

<p><b>8. Focused Nursing Diagnosis:</b></p> <p>Ineffective coping</p> <p>(Ackley, et al, 2019)</p>	<p><b>12. Nursing Interventions related to the Nursing Diagnosis in #7:</b></p> <p>1. Provide opportunities for the patient to identify strengths and sources of stress.</p> <p><b>Evidenced Based Practice:</b> This can ultimately help the patient take control back in his life and self reflection is very beneficial for mental health.</p> <p>2. Encourage use of spiritual resources as the patient would like.</p> <p><b>Evidenced Based Practice:</b> Religious practices and faith promote comfort and healthy coping.</p> <p>3. Monitor patients risk for suicide.</p> <p><b>Evidenced Based Practice:</b> Patients experiencing PTSD are at a high risk for suicidal ideation and severe depression.</p>	<p><b>13. Patient Teaching:</b></p> <p>1. Teach healthy sleep habits.</p> <p>2. Teach relaxation techniques. This includes breathing and guided imagery.</p> <p>3. Teach about the importance of medication adherence.</p>
<p><b>9. Related to (r/t):</b></p> <p>Extreme anxiety</p>		<p><b>14. Discharge Planning/Community Resources:</b></p> <p>1. Refer to a therapist for intensive Cognitive Behavioral Therapy.</p> <p>2. Refer patient and family to local support groups.</p> <p>3. Plan frequent follow-up appointments to assess progress and complete updated mental status screenings.</p>
<p><b>10. As evidenced by (aeb):</b></p> <p>Patient reports and behavior.</p>		
<p><b>11. Desired patient outcome:</b></p> <p>Patient will teach back effective coping strategies by discharge.</p>		