

## Jesus Carrasco IM6

### Mental Health Case: Randy Adams

#### Guided Reflection Questions

##### Opening Questions

How did the simulated experience of Randy Adams' case make you feel?

I felt more concerned about how the patient was feeling internally with all the emotional trauma he has endured. Going to war or being deployed so any amount of time can take a toll of one's body and mind. It seems like he has so much that he would like to get off his chest but is unable to. It's easy for someone who hasn't been through what he has to say, "just go get help" or "tell me what's bothering you." I felt helpless since I have never been in his shoes nor to war.

Talk about what went well in the scenario.

Being able to ask the appropriate questions for the exams was helpful to understand what the patient was feeling. Even though he wouldn't be as open to talk about his feelings, he answered the same questions during the exam just a different version. I did remember to ask if the support person which was his wife was present during the examination. It has helped me be more mindful of what to ask and when it was appropriate to speak with the support person.

Reflecting on Randy Adams' case, were there any actions you would do differently? If so, what were these actions and why?

I would have used more of a therapeutic approach to some of my answers to his questions and concerns. I answered a concern by asking for an explanation. The patient is there for my help, not to be interrogated. I could have been more attentive to the spouse since we realized that she also was suffering from her husband's actions and diagnosis. It takes a toll on the family members as well and they should not be forgotten.

##### Scenario Analysis Questions\*

**PCC/S** What could occur if Randy Adams kept taking his sumatriptan succinate?

**The continuation of taking his sumatriptan succinate could lead to having an abnormal heart rhythm, heart attack, angina or a stroke.**

**PCC/I** Discuss the types of support groups and resources that would be beneficial to Randy Adams and his family.

**Randy would benefit from the VA hospital or a VA support group. Since most veterans don't talk to nonveterans about their combat experiences, it is possible that other vets could help him cope with his PTSD and guide him to a safe state of mind. This would also help his family who struggles to understand what he is feeling. The Psych NP also wanted Randy to take part in "Mindfulness" which is a type of meditation to assist in stress reduction. Family could also use a sense of stress reduction by which this could be a family event to help cope with his disability.**

**I** What benefit services are available for veterans with PTSD?

Ultimately the VA is able to provide many services for veterans with PTSD. They are able to provide a 1 to 1 health assessment to test for PTSD. Medication is also a great way to cope with the diagnosis. Psychotherapy is used to help the patient communicate more about what is bothering them or hindering their way of life. There are also family groups for those who are struggling to deal with being home after being on deployment for so long. In some cases, anger management, stress support and combat support are needed due to the frustrations of wanting to be present but the constant reminder of events due to the PTSD does not allow the patient to remain sane enough to cope.

**PCC** What discharge teaching needs to be given to Randy Adams' wife related to his care?

His wife needs to be aware of signs and symptoms of worsening PTSD such as the sleep disturbances returning. If episodes increase or her husband begins to become more irritable to talk him or consult his therapist for advice. The wife should also monitor any bad coping strategies such as heavy drinking, smoking and/or use of illegal drugs. Allowing the patient more time if needed to be self motivated to get treatment. The more family forces one's decision the more irritation and anger that will possibly cause the patient to shut down and not receive treatment. The wife should also be aware of signs and symptoms of suicide.

### **Concluding Questions**

How would you apply the skills and knowledge gained in the Randy Adams case to an actual patient situation in different acute care units (emergency room, intensive care unit, obstetrics unit, etc.)?

I have witnessed cases in the hospital where patient's with PTSD have placed hands on the nursing staff and thought they were back in the war. In that instance, the rest of the staff had to step back and calmly talk to the patient to release the nurse and coax him back to reality. I have also witness my uncle who is a vet under the kitchen table during fourth of July due to the fireworks outside. As the staff and healthcare provider, remaining calm and preventing the patient from being stimulated is a big factor in everyone's safety. I would apply my skills of patient communication and patience to keep the situation from being hostile to prevent injury to either party.

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\* *The Scenario Analysis Questions are correlated to the Quality and Safety Education for Nurses (QSEN) competencies: Patient-Centered Care (PCC), Teamwork and Collaboration (T&C), Evidence-Based Practice (EBP), Quality Improvement (QI), Safety (S), and Informatics (I). Find more information at: <http://qsen.org/>*