

IM6 (Acute Psychiatric) Critical Thinking Worksheet

<p><b>1. DSM-5 Diagnosis and Brief Pathophysiology (include reference):</b></p> <p><b>Post-Traumatic Stress Disorder (PTSD)</b></p> <p>Exposure to traumatic event leads to a fear-conditioning response, activating the amygdala and other brain structures, such as the hypothalamus and locus coeruleus. The response also stimulates the autonomic and endocrine systems. The alpha<sub>2</sub>-adrenergic receptor response that inhibits stress-induced release of norepinephrine is impaired. Progressive behavioral sensitization results, with generalization to stimulus cues from the original trauma. Consequently, responses of increased sympathetic activity occur. (Overview. View Monograph. (n.d.). Retrieved October 11, 2021, from <a href="https://nareference.wkhpe.com/ref/view.do?key=b0b33643ba0b8d5e433b605d77319efc65008216&amp;nmn=ope nMonographFromGlobalId&amp;monographId=CC.978-1-58255-511-9.chapter313.">https://nareference.wkhpe.com/ref/view.do?key=b0b33643ba0b8d5e433b605d77319efc65008216&amp;nmn=ope nMonographFromGlobalId&amp;monographId=CC.978-1-58255-511-9.chapter313.</a>)</p>	<p><b>2. Psychosocial Stressors (i.e. Legal, Environmental, Relational, Developmental, Educational, Substance Use, etc.);</b></p> <ul style="list-style-type: none"> <li>-Guilt related to his wife having to take care of everything</li> <li>-anxiety related to trauma seen while in the military</li> <li>-financial stress related to dr. visits to treat PTSD</li> </ul>	<p><b>3. DSM-5 Criteria for Diagnosis (Asterisk or Highlight Symptoms Your Patient Exhibits and Include References)</b></p> <p>On 4<sup>th</sup> page.</p>
<p><b>4. Medical Diagnoses:</b></p> <p><b>Concussion</b></p>		

<p><b>5. Diagnostic Tests Pertinent or Confirming of Diagnosis</b></p> <p>DSM-5  Mini-Cog  Mental Status Exam  Concussion Assessment Evaluation</p>	<p><b>6. Lab Values That May Be Affected:</b></p> <p>CRP- shows inflammation in the body</p> <p>Hgb/Hct-oxygen levels in body</p> <p>CMP- monitoring liver enzymes to watch for deterioration</p> <p>WBC-certain infections may explain some of pts symptoms</p>	<p><b>7. Current Treatment:</b></p> <p>Treatment of migraines-topiramate  Mindfulness</p>
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Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

<p><b>8. Focused Nursing Diagnosis:</b></p> <p>Complicated Grieving</p>	<p><b>12. Nursing Interventions related to the Nursing Diagnosis in #7:</b></p> <p>1. Acknowledge/Express feelings of guilt or self-blame</p>	<p><b>13. Patient Teaching:</b></p> <p>1. Teach the patient about symptoms that indicate a decline in progress such as thoughts of hurting himself, increased irritability, increased feelings of sadness or tearfulness.</p>
<p><b>9. Related to (r/t):</b></p> <p>Previous trauma and losses that incurred during or following a traumatic event.</p>	<p><b>Evidenced Based Practice:</b> Recognizing your own feelings allows yourself to process these emotions as well as provide professionals with accurate information in order to treat the disorder.</p> <p>3. Assess the impact that the trauma has on ADL's</p>	<p>2. Teach his wife about how to care for someone with PTSD and the symptoms that they might experience.</p> <p>3. Teach the patient about expressing feelings to a support person especially if the patient feels he is in danger.</p>
<p><b>10. As evidenced by (aeb):</b></p> <p>Irritability Inability to stay asleep Cognitive deficits Increased emotions</p>	<p><b>Evidenced Based Practice:</b> It is important to know how badly this disorder is affecting the patient in order to provide the best care.</p> <p>4. Assess for self-destructive behaviors</p>	<p><b>14. Discharge Planning/Community Resources:</b></p> <p>1. Provide information on support groups that the patient can utilize</p>
<p><b>11. Desired patient outcome:</b></p> <p>The patient will demonstrate progress in dealing with the stages of grief and be able to cope with his symptoms, and express optimism for the future</p>	<p><b>Evidenced Based Practice:</b> PTSD often has a second diagnosis like a concussion that causes pain, flashbacks and anxiety which puts the patient at a greater risk for self-harm.</p>	<p>2. Schedule a follow up appointment to adjust medication as well further assessment of his mental status</p> <p>3. Refer the patient to a counselor or psychiatrist who specifically deals with PTSD in veterans to facilitate the best care possible</p>

DSM 5 criteria for diagnosis: asterisk by the ones my patient exhibits.

Adopted: August 2016, revised October 2018

- Criteria A: Exposure to actual or threatened death or serious injury, or sexual violence in at least one of these ways: \*
  - Direct exposure
  - Witnessed event
  - Indirect involvement (close friend or relative exposed to trauma)
  - Repeated or extreme indirect exposure to details of the traumatic event, usually involved with professional duties, such as first responders
- Criteria B: Persistent re-experiencing of this traumatic event in at least one of these ways: \*
  - Recurrent and intrusive distressing recollections of the event
  - Recurrent distressing dreams of the event
  - Flashbacks of the event
  - Intense psychological distress at exposure to events
  - Physiologic reactivity on exposure to events
- Criteria C: Persistent avoidance of stimuli associated with the trauma or numbing of general responsiveness not present before the trauma, as indicated by at least one of the following: \*
  - Efforts to avoid memories, thoughts, or feelings associated with the traumatic event
  - Efforts to avoid reminders that are closely associated with the traumatic event (such as places, people, activities, objects, circumstances)
- Criteria D: Negative changes in mood or thoughts associated with the traumatic event indicated by two or more of the following: \*
  - Inability to recall an important aspect of the event
  - Exaggerated negative beliefs about oneself or others
  - Distorted beliefs about the event that causes the patient to blame self
  - Negative, persistent emotional state
  - Inability to feel positive emotions
  - Sharply decreased interest in significant activities
  - Feeling of detachment or estrangement from others
- Criteria E: Persistent symptoms of increased arousal (not previously present), as indicated by two or more of these criteria: \*
  - Difficulty falling or staying asleep
  - Irritability or outbursts of anger
  - Self-destructive or reckless behavior
  - Difficulty concentrating
  - Hypervigilance
  - Exaggerated startle response
- Criteria F: The disturbance must have lasted at least 1 month \*
- Criteria G: The event must cause significant distress or impairment of social, occupational, or other important areas of functioning \*
- Criteria H: The disturbance is not attributed to other illnesses or medication or substance use \*