Student Name: Bergan Gunter_____Date: 10/19/2021_____

IM6 (Acute Psychiatric) Critical Thinking Worksheet

<table>
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<td>1. DSM-5 Diagnosis and Brief Pathophysiology (include reference):

Anxiety: In the central nervous system the major symptoms of anxiety disorders appear to be norepinephrine, serotonin, dopamine, and GABA. Other neurotransmitters are peptides, such as corticotropin-releasing factor, may be involved. Peripherally, the autonomic nervous system, especially the sympathetic nervous system, mediates many of the symptoms.</td>
<td rowspan="2">2. Psychosocial Stressors (i.e. Legal, Environmental, Relational, Developmental, Educational, Substance Use, etc.);

• Recent diagnosis of cancer
• Future body image change
• Physical distance from family
• Misplacing religious item that is supposed to keep her safe</td>
<td rowspan="2">3. DSM-5 Criteria for Diagnosis (Asterisk or Highlight Symptoms Your Patient Exhibits and Include References)
• The individual finds it difficult to control the worry.
• The anxiety and worry are associated with three (or more) of the following six symptoms (with at least some symptoms having been present for more days than not for the past 6 months).
▪ Restlessness or feeling keyed up or on edge
▪ Being easily fatigued
▪ Difficulty concentrating or mind going blank
▪ Irritability
▪ Muscle tension
▪ Sleep disturbance</td>
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<td>4. Medical Diagnoses:
• Breast cancer</td>
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<td>5. Diagnostic Tests Pertinent or Confirming of Diagnosis

The doctor will perform a physical exam and ask about the patient’s symptoms. They may also do a blood test to help rule out other conditions that may be causing the symptoms. They will also ask about any medications the patient is on because some medications cause anxiety.</td>
<td>6. Lab Values That May Be Affected:

• Vital signs
▪ Heart rate
▪ Blood pressure
▪ Respiratory rate

There are no specific blood draw labs that will be affected because of anxiety. They may run test to rule out other potential diagnosis.</td>
<td>7. Current Treatment:

• Lorazepam (2mg)
• Buspirone (7.5mg)</td>
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8. Focused Nursing Diagnosis:

Fear

9. Related to (r/t):

Cancer diagnosis and surgery

10. As evidenced by (aeb):

- The patient stating that they feel like they are going to die.
- Increase HR, and BP
- Patient is pacing in the room

11. Desired patient outcome:

Patient will acknowledge and discuss fears to resolve issues before surgery.

12. Nursing Interventions related to the Nursing Diagnosis in #7:

1. Present and discuss reality of the situation with the patient in order to recognize aspects that can be changed and those that cannot.

Evidenced Based Practice:
Client must accept the reality of the situation before the work of reducing fear can progress.

2. Encourage client to explore underlying feelings that may be contributing to irrational fears. Help client to understand how facing these feelings, rather than suppressing them, can result in more adaptive coping abilities.

Evidenced Based Practice:
Verbalization of feelings in a nonthreatening environment may help client come to terms with unresolved issues.

3. Explore things that may lower fear level and keep it manageable (contacting family, religious beads, deep breathing, positive self-talk).

Evidenced Based Practice:
Provides the client with a sense of control over the fear. Distracts the client so that fear is not totally focused on and allowed to escalate.

13. Patient Teaching:

1. Teach the client that they have a right to refuse any treatment and to withdrawal consent for the surgery.

2. Teach the patient diaphragmatic breathing. This is a relaxation technique that involves breathing slowly and deeply form the belly. This technique can help slow heart rate, lower blood pressure, and calms the body.

3. Teach the patient how to perform the 5-4-3-2-1 technique when they feel anxious. This is a grounding tool that can help the patient to focus on where they are and that they are safe.

14. Discharge Planning/Community Resources:

1. Provide proper aftercare instructions about incision, and s/s of infection. Also teach when they should call the Dr. or go to the ER.

2. Schedule follow up appointment.

3. Help the patient identify support systems and find support groups to attend.