

IM6 (Acute Psychiatric) Critical Thinking Worksheet

<p>1. DSM-5 Diagnosis and Brief Pathophysiology (include reference): Severe anxiety: In the central nervous system the major mediators of the symptoms of anxiety appear to be norepinephrine, serotonin, dopamine, & gamma aminobutyric acid. The autonomic nervous system & sympathetic nervous system mediates many of the symptoms. The brain amygdala appears key in modulating fear and anxiety.</p> <p>4. Medical Diagnoses:</p> <p>Left Mastectomy, Severe Anxiety</p>	<p>2. Psychosocial Stressors (i.e. Legal, Environmental, Relational, Developmental, Educational, Substance Use, etc.);</p> <ul style="list-style-type: none"> - stressed, emotional - has an aggressive breast cancer - anxious about her surgery 	<p>3. DSM-5 Criteria for Diagnosis (Asterisk or Highlight Symptoms Your Patient Exhibits and Include References)</p> <ul style="list-style-type: none"> - Excessive anxiety, worry occurring more days - difficult to control the worry - anxiety, flushed, breathing rapidly - restlessness, fatigued, difficulty concentrating - mind going blank, irritability, muscle tension - sleep disturbance, feeling keyed up or on edge - physical symptoms cause clinically significant distress or impairment in social, occupational - disturbance is not attributable to the physiological effects of a substance or another medical condition - panic attack, obsessive thoughts, difficulty concentrating, avoidance behavior
<p>5. Diagnostic Tests Pertinent or Confirming of Diagnosis</p> <ul style="list-style-type: none"> - DSM -5: generalized anxiety disorder - NANDA international 	<p>6. Lab Values That May Be Affected:</p> <ul style="list-style-type: none"> - There are currently none that would be affected. 	<p>7. Current Treatment:</p> <ul style="list-style-type: none"> - Medications - group therapy - family therapy - milieu therapy - psychotherapy - health teachings

<p>8. Focused Nursing Diagnosis:</p> <p>- Fear</p>	<p>12. Nursing Interventions related to the Nursing Diagnosis in #7:</p> <p>1. Encourage patient to share the unnatural fears & feelings with others, especially the nurse therapist.</p> <p>Evidenced Based Practice:</p> <ul style="list-style-type: none"> - Patients are often reluctant to share feelings for fear of ridicule. Once the patient begins to acknowledge & talk about these fears, it becomes apparent that the feelings are manageable. <p>2. Encourage patient to stop, wait, & not rush out of feared situations as soon as experienced. Support patient with the use of relaxation exercises.</p>	<p>13. Patient Teaching:</p> <p>1. Teach patient to be in a quiet environment with minimal stimulation. This will minimize the risk of unawareness in patient.</p> <p>2. Teach patient that walking, or exercising can lessen their tension, fear, and improve their mental well-being.</p> <p>3. Teach patient to acknowledge reality and focus on what is present in the environment to reduce the level of anxiety and fear they're going through.</p>
<p>9. Related to (r/t):</p> <p>- Physiological symptoms, mental/ cognitive behaviors indicative of panic</p>	<p>Evidenced Based Practice:</p> <ul style="list-style-type: none"> - Patients fears loss of control of body & mind when exposed to fear producing stimulus. This fear leads to avoidance response, & reality is never tested. If patient waits out the beginnings of anxiety this will decrease fear by using relaxation techniques. 	<p>14. Discharge Planning/Community Resources:</p> <p>1. Get patient a social worker to help them pay their hospital stay or any other hospital bills. That way they can get Medicaid available to help them with any other costs.</p> <p>2. Help patient get in contact with psychotherapy groups and group therapies. This will help patient mentally and physically with their fear and anxiety.</p>
<p>10. As evidenced by (aeb):</p> <p>- acknowledges and discusses fear</p>	<p>3. Help patient lower fear level & keep it manageable while practicing positive self-talk in a fearful situation.</p> <p>Evidenced Based Practice:</p> <ul style="list-style-type: none"> - This provides the patient with a sense of control over the fear. This will distract the patient from fear so that it isn't totally focused on and allowed to escalate. 	<p>3. Educate patient and family members the importance to keep up with their follow up appointments and see her doctor in a regular basis. I would teach her to stay up to date with her medications.</p>
<p>11. Desired patient outcome:</p> <p>- Patient will be able to function in presence of her situation without experiencing panic anxiety and be able to discuss her phobic situation with me by time of her discharge from her treatment by November 10th, 2021, at 3 pm.</p>		