Psychiatric Mental Health Journal

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In order to be a well-rounded nurse, psychiatric skills are essential to have within your tool belt. Each kind of patient has the capability to struggle with mental health issues in addition to physical ailments. I personally have encountered one patient who was in the hospital solely for mental health issues, awaiting placement elsewhere. Otherwise, the vast majority of my psychiatric experience comes from people who had a physical illness to accompany their mental illness.

My patient that was awaiting placement, was a younger girl who had attempted suicide by taking an assortment of pills. She wanted help and was willing to go to a facility for treatment. I didn't have very many experiences with her because I was scared, scared to say the wrong thing and make things worse, or afraid to offend her. I regret not leaning into my fears and taking the opportunity to learn more about therapeutic communication.

Some of my patients in clinicals have struggled with addictions, leading to their disease processes. One patient that stuck in my mind was a man with multiorgan failure, leaving him on a ventilator, with severe jaundice, double nephrostomy tubes, and a G-tube. He had struggled for decades with a methamphetamine addiction. I wasn't sure how his addiction would play a role in his care or if it even should, I just know that it scared me. I was nervous to give him pain medicine because I wondered if it would make the addiction worse. I now know that even when your patient has an addiction, you treat the pain they are having in the hospital while they're under your care.

Many of the experiences I have with mental health stem from my own personal life. My mother attempted suicide when I was a freshman in high school. My father came home for his lunch break one day because he had this weird feeling something was wrong and he was able to

stop my mother. She spent a few weeks in a facility to treat her suicidal thoughts and try out some new medications. Since then she has been much better but had not opened up to me about it, she almost pretended like it never happened. It wasn't until my roommate sophomore year of college became suicidal. I called her hoping she would have some advice for me and this is when she shared all about her experience and her stay at the facility. I was so glad she finally felt comfortable enough to open up to me, I gained a ton of perspective from that conversation. I believe the experience with my mom may be the reason for me becoming scared and apprehensive when it comes to suicidal patients at the hospital. I become blinded or triggered by my own experiences, rather than putting them aside to fully understand my patient.

During this module, I'm mainly hoping to gain confidence in talking to a patient with mental health issues and learn skills to improve my therapeutic communication. I want to have more exposure to different kinds of illnesses and learn all about them. I also want to break down some of the stereotypical thoughts I have about people with mental illness because I can't be a non-judgemental nurse without doing so. Specifically the idea that people with mental illnesses are aggressive and may hurt me. I am also wondering if there are wrong things to say. Is there something I can say to make it worse or better? Where is the line between a nurse and a counselor? Does talking about a patient's mental illness too much cross the line into someone else's role? How does mental health nursing differ from a med-surge nurse in the day-to-day responsibilities? I hope to find the answers to these questions and so much more during lectures, clinicals, and simulation experiences! I can't wait to see what this module has in store for us.