

Student Name: Adriana Mona

Date: 11-8-23

### IM6 (Acute Psychiatric) Critical Thinking Worksheet

<p><b>1. DSM-5 Diagnosis and Brief Pathophysiology (include reference):</b></p> <p>- Alcohol withdrawal related to abrupt cessation of substance use.</p>	<p><b>2. Psychosocial Stressors (i.e. Legal, Environmental, Relational, Developmental, Educational, Substance Use, etc.):</b></p> <p>Pt reports drinking an average of 56 beers per week. No other psychosocial stressors identified.</p>	<p><b>3. DSM-5 Criteria for Diagnosis (Asterisk or Highlight Symptoms Your Patient Exhibits and Include References)</b></p> <p>- Cessation of alcohol use - nausea + vomiting - autonomic hyperactivity</p>
<p><b>4. Medical Diagnoses:</b></p> <p>Alcohol Withdrawals</p>		
<p><b>5. Diagnostic Tests Pertinent or Confirming of Diagnosis</b></p> <p>both level of 210 upon admissions.</p>	<p><b>6. Lab Values That May Be Affected:</b></p> <p>- BUN - Creatinine - Folic Acid</p>	<p><b>7. Current Treatment:</b></p> <p>- Safely withdrawal pt using CIWA scale.</p>

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<p><b>8. Focused Nursing Diagnosis:</b></p> <p>-Managing/treating withdrawal symptoms</p>	<p><b>12. Nursing Interventions related to the Nursing Diagnosis in #7:</b></p> <p>1. Assess client's level for early symptoms of withdrawal and for level of disorientation to determine specific requirements for safety.</p> <p><b>Evidenced Based Practice:</b> Knowledge of client's level of functioning is necessary to formulate appropriate plan of care.</p>	<p><b>13. Patient Teaching:</b></p> <p>1. Educate patient on long-term risks related to alcohol abuse.</p> <p>2. Educate patient on risks related to alcohol withdrawal and possible death.</p> <p>3. Help patient find healthy alternatives</p>
<p><b>9. Related to (r/t):</b></p> <p>-dependence on alcohol</p> <p>-Sudden cessation of addictive substance</p>	<p>2. Institute necessary safety precautions.</p> <p>-Padded rails in case of seizure</p> <p>-help patient when ambulating.</p>	<p><b>14. Discharge Planning/Community Resources:</b></p> <p>1. Encourage patient to attend support groups such as alcoholic anonymous</p> <p>2. Pt will be moving in with mother to hopefully stop drinking.</p> <p>3. SMART self management and recovery training.</p>
<p><b>10. As evidenced by (aeb):</b></p> <p>-Acute Confusion</p> <p>-Nausea</p> <p>-Risk for electrolyte imbalance</p> <p>-Risk for injury</p>	<p><b>Evidenced Based Practice:</b></p> <p>Client safety is a nursing priority</p>	
<p><b>11. Desired patient outcome:</b></p> <p>-Safely withdrawal patient from alcohol and educate patient to help prevent relapse.</p>	<p>3. Monitor client's vital signs every 15 minutes.</p> <p><b>Evidenced Based Practice:</b></p> <p>Vital signs provide the most reliable information about client condition and need for medication.</p>	