

Student Name:     Jordan Colley     Date:     10.22.2024    

### IM6 (Acute Psychiatric) Critical Thinking Worksheet

**1. DSM-5 Diagnosis and Brief Pathophysiology (include reference):**

Major Depressive Disorder: A disorder causing a continually feeling of sadness or overall low mood. This disorder can affect how a person completes day to day activities and can make them feel that life is not worth living.

<https://my.clevelandclinic.org/health/diseases/24481-clinical-depression-major-depressive-disorder>

**4. Medical Diagnoses:**  
none

**2. Psychosocial Stressors (i.e. Legal, Environmental, Relational, Developmental, Educational, Substance Use, etc.):**

- Relationships with certain family members as well as overwhelming amount of school work and job.

**3. DSM-5 Criteria for Diagnosis (Asterisk or Highlight Symptoms Your Patient Exhibits and Include References)**

- At least five MDD symptoms during a consecutive 2 week period including
  1. Depressed mood most of the day almost everyday. Subjective data or observations made by others.
  2. Noticeable diminished interest or satisfaction in all or nearly all of activities every day or almost everyday.
  3. Significant weight loss when not dieting or weight gain. There can either be a decrease or increase in appetite almost everyday
  4. **insomnia** or hypersomnia nearly everyday
  5. **psychomotor agitation or retardation almost every day**
  6. **fatigue or loss of energy** almost everyday
  7. **feelings of worthlessness or excessive guilt** almost every day
  8. **decreased ability to think or concentrate, or indecisiveness** almost every day
  9. **recurrent thoughts of death, or suicidal ideation without a specific plan, a suicide attempt, or a specific suicide plan**

<p><b>5. Diagnostic Tests Pertinent or Confirming of Diagnosis</b></p> <ul style="list-style-type: none"> <li>- DSM-5</li> <li>- Severity Scale</li> </ul>	<p><b>6. Lab Values That May Be Affected:</b></p> <ul style="list-style-type: none"> <li>- lack of serotonin</li> <li>- Lack of dopamine</li> <li>- norepinephrin</li> <li>- elevated cortisol levels</li> <li>- decreased dexamethosone suppression</li> <li>- excessive cytokine release</li> </ul>	<p><b>7. Current Treatment:</b></p> <ul style="list-style-type: none"> <li>- group therapy</li> <li>- Sertraline</li> </ul>
--	---	---

Adopted: August 2016, revised October 2018

Student Name: \_\_\_\_\_ Jordan Colley \_\_\_\_\_ Date: \_\_\_\_\_ 10.22.2024 \_\_\_\_\_

<p><b>8. Focused Nursing Diagnosis:</b> Risk for Suicide</p>	<p><b>12. Nursing Interventions related to the Nursing Diagnosis in #7:</b></p> <p>1. Maintain close observation of patient</p>	<p><b>13. Patient Teaching:</b></p> <p>1. Giving the patient other resources to turn toward when they are having feelings or thoughts of suicide/ self harm. Such as, suicide hotline, support groups, coping strategies, etc.</p>
<p><b>9. Related to (r/t):</b> History of prior suicide attempt</p>	<p><b>Evidenced Based Practice: close attention to the patient is vital to preventing any self harm. Remaining alert for any signs of suicidal</b></p>	<p>2. Compliancy with medication used to treat major depressive disorder (Sertraline). Do not stop the medication abruptly. If you are having trouble</p>

**attempts allow for increased opportunity to prevent or interrupt harmful behavior**

taking the medication, having issues with side effects or think you need a change in dose, talk to your doctor about it before doing anything yourself.

2. Encourage expression of honest feelings

3. Explaining good eating, drinking water (nutritional intake), and sleeping accordingly. MDD can cause a disturbance in such things and so it can be easy for patients to establish unhealthy habits.

**Evidenced Based Practice: If patients anger can be verbally expressed in a welcoming/ non-threatening environment, they may be able to eventually resolve their feelings.**

**14. Discharge Planning/Community Resources:**

1. Before discharging establish any recent suicidal ideation from the patient and how they are feeling about leaving the facility.

**10. As evidenced by (aeb):  
none**

3. Spend time with the patient

2. Inform them of the 988 Suicide hotline that they can call at any time if they are struggling with the thought of suicide. It is anonymous and you cant just talk to somebody over the phone.

**11. Desired patient outcome:  
Patient will not harm themselves or alert staff when thinking of harming themselves.**

**Evidenced Based Practice: Spending time with the client and explaining that you want to spend time with them allows for the patient to feel a sense of security and safety.**

3. Life Tree Cafe is a therapy group that meets on the third Tuesday of every month to just talk about what has been going on in your life. It is a free group that accepts anyone. There are many different groups that you can find on the internet that are serious about establishing a nonjudgemental, relaxing and open environment.