

Question #

1

Student Name:

Cynthia Rodriguez

Based on the "Topic" and "Subtopic," I missed a question about:

Therapeutic relationships



I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.

(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- Identify the needs of the patient and explore them
- establish clear boundaries
- encourage alternate problem-solving approaches
- help the patient develop new coping skills
- support behavioral change

Therapeutic encounter = brief, limited relationship *

Question #

2

Based on the "Topic" and "Subtopic," I missed a question about:

postpartum depression



I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.

(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- Folate and vitamin B12 are needed for the synthesis of serotonin and other neurotransmitters
- loss of appetite or odd cravings (sweets)
binges w/ abnormal appetite
weight gain
- Sleep disturbance - Sleep deprivation is a factor in development of PPD can worsen with symptoms
- Greatest risk PPD are women w/ Hx of anxiety or depression
younger aged, unintended pregnancy
Family Hx
- poor nutrition can also contribute

Question # 3	Student Name: Cynthia Rodriguez
Based on the "Topic" and "Subtopic," I missed a question about: Use of Silence	
<input type="checkbox"/>	I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content
<p>List five or more bullet points with your "take-aways" from this packet. (What is most important for you to remember as you prepare for the NCLEX and future patient care?)</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Silence is not the absence of communication <input checked="" type="checkbox"/> Silence might provide meaningful moments of reflection for both participants <input checked="" type="checkbox"/> Nurses who feel compelled to fill every void with words often do so bc. of their own anxiety, self-consciousness, embarrassment <input checked="" type="checkbox"/> Prolonged and frequent silence by the nurse can hinder an interview that requires <u>verbal articulation</u> <input checked="" type="checkbox"/> open-ended questions/techniques with empathetic statements, close-ended statements = clarify issues 	

Question # 4	
Based on the "Topic" and "Subtopic," I missed a question about: Withdrawn Patients	
<input type="checkbox"/>	I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content
<p>List five or more bullet points with your "take-aways" from this packet. (What is most important for you to remember as you prepare for the NCLEX and future patient care?)</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Keep contact w/ withdrawn pt's <u>brief</u> but <u>frequent</u> <input checked="" type="checkbox"/> Spending time w/ pt's is constructive <ul style="list-style-type: none"> - allowing isolation is <u>NOT</u> <input checked="" type="checkbox"/> Increase physical activity b/c they are able to verbalize issues <input checked="" type="checkbox"/> Locking a pt's room during the day might be required to keep a pt from disappearing for hrs <input checked="" type="checkbox"/> sitting in silence is better than ruminating in isolation <p>Remember pt's wishes are <u>NOT</u> a good indicator of what should be done.</p>	

Question # 5 Student Name: Cynthia Rodriguez

Based on the "Topic" and "Subtopic," I missed a question about:
Implementation

I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.
(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- ▣ When a pt is not ready to talk, direct questions can raise the pts anxiety
- ▣ use simple, concrete words
- ▣ Slowed thinking necessitates time to form a response
- ▣ Avoid saying "Things will look up" = minimizes feelings and increases guilt
- ▣ Encourage activities that raise self-esteem
- ★ Sometimes spending time w/pt w/o conversation can show they matter ★

Question # 4

Based on the "Topic" and "Subtopic," I missed a question about:
Sleep and Insomnia

I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.
(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- ▣ periods of rest after activity - fatigue can intensify feelings of depression
- ▣ Minimizing sleep during the day ↑ likelihood of sleep at night
- ▣ encourage relaxation measures in the evening (tepid bath, warm milk)
- ▣ ↓ caffeine and epinephrine levels
- ▣ reduce environmental and physical stimulants
- ★ Music also helps pt relax

Question #

Student Name:

Cynthia Rodriguez

Based on the "Topic" and "Subtopic," I missed a question about:

Nutrition - Anorexia

I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.

(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- ☑ Small, frequent snacks are easily tolerated than large plates of food
- ☑ high-protein - high calorie fluids frequently through out the day
(prevents dehydration)
- ☑ encourage family to remain w/pt during meals
- ☑ Weigh the pt weekly and observe eating patterns
* asking the pt which foods or drinks they like - pt more likely to eat
- ☑ Low weight and poor nutrition render the pt susceptible to illness

Question #

Based on the "Topic" and "Subtopic," I missed a question about:

TCA's pt & family teaching

I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.

(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- ☑ improvement in mood may take 7-28 days after initiation
6-8 wks full effect
- ☑ Drowsiness, dizziness, hypotension subside after the first few weeks
- ☑ if possible pt should take full dose @ bedtime *
helps reduce side effects during the day
- ☑ if bedtime dose or once a day dose is forgotten, take next dose within
3 hours otherwise wait until next day
- * No double dosing *
- ☑ Don't stop abruptly
- * TCA's can be lethal in OD *
- * SSRI more widely prescribed *

Question # _____ Student Name: Cynthia Rodriguez

Based on the "Topic" and "Subtopic," I missed a question about:

Stages of Schizophrenia

I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.

(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- prodromal phase - begins in adolescence
lack of energy, motivation, withdraw
- prepsychotic phase - quiet, passive behavior
hallucinations and delusions
- acute phase - disturbances of thought, perception, emotion
and behavior
- residual phase - follows the acute phase
- remission period - experience some relief of symptoms

Question # _____

Based on the "Topic" and "Subtopic," I missed a question about:

Working w/ pt's w/ Dementia

I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.

(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- they forget things quickly
- usually unable to learn new things
- sometimes agitation indicates pain, hunger, stress or need
for toileting.
- Adapt to the environment of patient not ~~vice versa~~ vice versa
ex: create a safe environment instead of keeping them out
of environment.
- recognize irrational fears; arrange alternative ways

Question #

Student Name:

Cynthia Rodriguez

Based on the "Topic" and "Subtopic," I missed a question about:

Normalizing vs Dementia

I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.

(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- Slight forgetfulness is common aging process
- memory loss that interferes w/ADL's is NOT
- poor judgement and decision making is sign of Alzheimer's
- Difficulty having a conversation is Alzheimer's
- Losing track of date or the season is NOT part of aging
- the health of the brain is closely linked to overall heart health

Question #

Based on the "Topic" and "Subtopic," I missed a question about:

Benzodiazepines

I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.

(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- should be used for acute situations, not long term
- risk of falls, impaired cognition, addiction for older pt's
- short term use or one time dose for acute agitation or combativeness
- more commonly used than barbiturates
- for Anxiety use = give lowest possible dose

Question #

Student Name:

Cynthia Rodriguez

Based on the "Topic" and "Subtopic," I missed a question about:

Lithium carbonate

I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.

(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- ☑ highly effective in the control of bipolar disorder
- ☑ Alters the metabolism of Norepinephrine
- ☑ full effect not seen until 6-10 days after treatment
- ☑ Serum lithium levels should be measured frequently
- ☑ fine hand tremor, polyuria, thirst, nausea and diarrhea are seen @ therapeutic levels
- ☑ can cause fetal toxicity

Question #

Based on the "Topic" and "Subtopic," I missed a question about:

Medications

I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.

(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- ☑ Divalproex can be prescribed instead of lithium
- ☑ Lithium is similar to sodium that the nervous system can mistake it for sodium
- ☑ Lithium reacts slowly than sodium so it can be given to slow down nervous system
- ☑ After long term use of lithium blood draws become less frequent
- ☑ Atypical antipsychotics can treat bipolar disorder too but can cause substantial weight gain

Question #

Student Name:

Cynthia Rodriguez

Based on the "Topic" and "Subtopic," I missed a question about:

Interactions (drugs)

I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.

(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- ☑ Diuretics decrease lithium excretion and elevate lithium levels
- ☑ Indomethacin & NSAIDs reduce renal elimination of Lithium
- ☑ Switching to a low-salt diet also elevates serum lithium levels
- ☑ Agents that increase lithium excretion ↓ lithium levels (Acetazolamide, caffeine, alcohol)
- ☑ Combining Lithium w/antipsychotic drugs or benzo's is common

Question #

Based on the "Topic" and "Subtopic," I missed a question about:

Moderate to Severe Lithium toxicity

I have reviewed each of the excerpts/activities listed under the Packet > Remediation Content

List five or more bullet points with your "take-aways" from this packet.

(What is most important for you to remember as you prepare for the NCLEX and future patient care?)

- ☑ Ataxia
- ☑ giddiness
- ☑ tinnitus
- ☑ blurred vision
- ☑ Large output dilute urine
- ☑ Delirium
- ☑ nystagmus

> included w/ mild to moderate symptoms

* Remember Diuretics and NSAIDs ↑ lithium serum levels

✓
(2-3 MEQ/L)