

1	Question #	Student Name:
	Mental Health HESI IM6	Lauren Beaudain
Based on the "Topic" and "Subtopic," I missed a question about:		
Anxiety and Mood Disorders Protection and Safety		
<input checked="" type="checkbox"/> 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?)		
<ul style="list-style-type: none"> • Nonverbal communication should reinforce and agree with verbal communication. • Removal of dangerous objects shows concern, and one on one observation communicates caring. • Suicidal patients may appear to be feeling much better immediately before making attempts. • No-suicide contracts should be used. • The nurse should monitor any medications patient receives and never leave patient alone. 		

2	Question #	Student Name:
	Mental Health HESI IM6	Lauren Beaudain
Based on the "Topic" and "Subtopic," I missed a question about:		
Anxiety and Mood Disorders Depression in children		
<input checked="" type="checkbox"/> 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?)		
<ul style="list-style-type: none"> • Children depression is similar to adults but are more irritable, fail to gain weight + hide their thoughts and crying. • Suicide is harder to predict in children, assessment for suicidal ideation, plans, and attempts is essential. • Risk factors childhood suicide: depression, sexual abuse, prior ideation or plan, being bullied, substance abuse, aggressive or impulsive behavior, and access to firearms. • Suicidal children are not likely to seek help or self-refer. • Thorough nursing assessment of child's mood is the first line of prevention. 		

3	Question # Mental Health HESI IM6	Student Name: Lauren Braudoin
Based on the "Topic" and "Subtopic," I missed a question about: Substance use + Addictions Implementation		
<input checked="" type="checkbox"/> 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?)		
<ul style="list-style-type: none"> • Sleep is important, sleep deprivation can increase already existing cognitive dysfunction. • Helping the patient do something that is in their hallucination can make them more frightened - instead orient the patient continually to reality of being sick and in the hospital. • Patients with maladaptive cognitive responses need clear messages and instructions with choices - kept to a minimum. • Teaching may need to be repeated several times before patient can understand, written material can be helpful. • Highest priority is given to care that will help patient maintain optimal level of functioning. 		

4	Question # Mental Health HESI IM6	Student Name: Lauren Braudoin
Based on the "Topic" and "Subtopic," I missed a question about: Substance use + Addictions Implementation (dementia)		
<input checked="" type="checkbox"/> 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?)		
<ul style="list-style-type: none"> • A risk benefit analysis is always part of psychotropic medication consideration. • Attention to time, place, and person (reality orientation) is helpful to patients with cognitive impairments. • Verbal communication should be clear, concise, and unhurried with a calm voice. • Yes-or-no questions are best. behaviors should be requested one step at a time. • Nursing approaches should address patients need for social interaction and structured activity. lack of interaction could lead to decline in the patient. 		

5	Question #	Student Name:
	Mental Health HESI 1M6	Lauren Beaudoin
Based on the "Topic" and "Subtopic," I missed a question about:		
Thought Disorders First Generation Agents / conventional Antipsychotic Agents		
<input checked="" 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"> • Haloperidol to treat Schizophrenia/acute agitation has low sedative properties and high EPS risk. • Tardive dyskinesia appears after prolonged treatment, and is not always reversible. • Neuroleptic malignant syndrome treatment consists of early detection, discontinuation of causative agent, fluid balance management, temperature reduction, and complication monitoring. • Mild NMS cases treated with bromocriptine, and more severe cases with dantrolene. • NMS effects include: Severe extrapyramidal effects, Hyperpyrexia (>103°F), and autonomic dysfunction. 		

6	Question #	Student Name:
	Mental Health HESI 1M6	Lauren Beaudoin
Based on the "Topic" and "Subtopic," I missed a question about:		
Thought Disorders Potentially dangerous responses to antipsychotics		
<input checked="" 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"> • Potentially fatal effects of antipsychotics are: anticholinergic toxicity, neuroleptic malignant syndrome, agranulocytosis, and liver impairments. • Second generations can cause unique side effects: Aripiprazole can cause dangerous anaphylaxis, and risperidone may cause prolonged QT. • nonadherence in women often due to weight gain, and in men due to sexual dysfunction. • Patients should be screened every 3 months for tardive dyskinesia. • With NMS treatment drugs consist of Bromocriptine to reduce fever and relieve muscle rigidity, and Dantrolene to try and reduce muscle spasms. 		

7	Question #	Student Name:
	Mental Health HESI 1M6	Lauren Beaudoin
Based on the "Topic" and "Subtopic," I missed a question about:		
Psych Drugs Medications + Interactions		
<input checked="" type="checkbox"/>	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?)		
<ul style="list-style-type: none"> • Lithium is less prescribed now due to side effects, Physicians are now giving divalproex sodium • Divalproex sodium has less side effects than lithium. • Diuretics and NSAIDs increase lithium serum levels. • Lithium levels: Therapeutic = 0.6-1.2, Mild toxicity = 1.5-2, moderate toxicity = 2-3, Severe toxicity = >3mEq/L • Full effect of lithium is not seen until day 6-10 of treatment 		

8	Question #	Student Name:
	Mental Health HESI 1M6	Lauren Beaudoin
Based on the "Topic" and "Subtopic," I missed a question about:		
Case Study: Depression		
<input checked="" type="checkbox"/>	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?)		
<ul style="list-style-type: none"> • Poor concentration, grooming, hygiene, and slow motor activity are consistent with depression. • Major action of SSRI is to increase availability of serotonin. • SSRI's are used more than tricyclics due to TCA's having more dangerous side effects. • Fluoxetine (SSRI) take 1-4 weeks to be therapeutic, and can cause gastrointestinal disturbances. • Headache, nausea, and muscle aches are possible adverse effects of ECT. • Hypothyroidism can lead to feeling sluggish and depressed. • If client is seen trying to harm self, nurse must remain with the client until another staff member arrives. client can not be left alone, and activity should be documented every 15 minutes. 		

9 Question # Mental Health HESI 1M6 Student Name: Lauren Beaudoin
 Based on the "Topic" and "Subtopic," I missed a question about:
Case Study Psychosis

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?)

- Response to patient should address underlying feelings, and make no assumption about delusions.
- most important plan of care for hallucinations is to begin sequence of interventions to address them.
- Antipsychotics given with short-acting anxiolytic can increase efficacy of antipsychotic and - provide quick relief of acute agitation.
- Criteria for Involuntary Commitment includes: danger to self/others, unable to provide basic needs, need for immediate treatment.
- Encouraging patients to verbalize the meaning of their delusions is most important when nurse - is addressing patients delusions.

10 Question # Mental Health HESI 1M6 Student Name: Lauren Beaudoin
 Based on the "Topic" and "Subtopic," I missed a question about:
Case Study Alcoholism

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?)

- Priority nursing problems that should be addressed within 72 hrs of admission include: risk for injury, altered nutrition, risk for withdrawal.
- Drinking while on disulfiram = headache, nausea, vomiting, chest pain, and hypotension.
- Patients with alcoholism can have ibuprofen but not acetaminophen due to liver toxicity risks.
- most important goal for alcohol detoxification is physiological stabilization.
- Nurse should begin assessing for withdrawal within 8-12 hours after patients last drink.
- Early withdrawal symptoms include: Tremors, nausea, and vomiting.
- Patients receive thiamine to reduce risk of wernicke disease, and magnesium chloride to - enhance effectiveness of thiamine.

11	Question # Mental Health HESI 1M6	Student Name: Lauren Beaudoin
Based on the "Topic" and "Subtopic," I missed a question about: Neurocognitive disorders Dementia		
<input checked="" type="checkbox"/> 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?)		
<ul style="list-style-type: none"> • Dementia is marked by progressive deterioration in cognitive functioning, and inability to learn new skills. • Declining intellect can lead to emotional changes like - anxiety, mood lability, and depression. • The neurological changes can cause hallucinations and delusions. • Dementia is classified as either mild or major neurocognitive disorder. • The cause of AD is unknown. 		

12	Question # Mental Health HESI 1M6	Student Name: Lauren Beaudoin
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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?)		
<ul style="list-style-type: none"> • Agitation can indicate pain, hunger, stress, fear, or need for toileting. • Patients can sense compassion in caregivers even with major dementia. • Goal is to maintain highest level of functioning possible. • Uncooperative behavior is a symptom of dementia and is best treated with kindness and patients. • First priority for patients with delirium is to meet basic needs, nutrition, fluid-electrolyte balance, sleep, elimination, and hygiene. • Determine patients level of functioning, then provide necessary assistance. 		

13	Question # Mental Health HESI 1M6	Student Name: Lauren Beaudoin
Based on the "Topic" and "Subtopic," I missed a question about: Mental health nursing skills Importance of nurses' self-care		
<input checked="" type="checkbox"/> 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?)		
<ul style="list-style-type: none"> • Frequent, intense, or prolonged exposure to grief and loss places risk for compassion fatigue. • Compassion fatigue is a state of burnout and secondary traumatic stress. • Nurses need resiliency skills to better manage stressors that lead to compassion fatigue and lateral violence. • Nurses need to be self-aware and identify own vulnerability to secondary stressors. • Participating in health promotion activities is effective in identifying and managing stressors. 		

14	Question # Mental Health HESI 1M6	Student Name: Lauren Beaudoin
Based on the "Topic" and "Subtopic," I missed a question about: Psych/Substance use & addictions Psychopharmacology used to maintain sobriety		
<input checked="" type="checkbox"/> 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?)		
<ul style="list-style-type: none"> • Disulfiram (Antabuse) is used to motivate people to stay sober by causing unpleasant side effects when mixed with alcohol. • Naltrexone (Revia, Vivitrol) blocks endorphins released in relation to alcohol = decrease in the "pleasant feel". • Acamprosate (Campral) helps by reducing unpleasant feelings of abstinence like: anxiety, tension, and dysphoria. • Buprenorphine Hydrochloride (Buprenex) is a treatment that can be used outpatient for detoxification and maintenance by specially trained registered physicians. • Two strategies used in treatment are: making alcohol use unpleasant, or reducing its-reinforcing qualities. 		

15	Question #	Student Name:
	Mental Health HESI IM6	Lauren Beaudoin
Based on the "Topic" and "Subtopic," I missed a question about:		
Psych/Anxiety and mood disorders Silence/Suicide/Depression		
<input checked="" 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"> • Silence when used appropriately can be a valuable tool for the nurse-patient relationship. • If a patient goes from sad/depressed to seemingly peaceful, it's often a decision on suicide that provides a relief of emotional pain. • Patients with more developed plans are often at a greater risk of committing suicide. • Care planning for patients with depression is based on - Patients phase of depression, particular symptoms, and personal goals. • Safety is always highest priority, suicide and self-harm assessments are ongoing for patients. 		

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