Firelands Regional Medical Center School of Nursing
Care Map

Student Name Cassidy Hall **Date** **7-12-22**

Noticing/Recognizing Cues:

Highlight all data from each box relevant to top nursing priority

Subjective Assessment findings:

Stated he was faking trying to kill himself

Denies past hallucinations, anger problems, self injuries, suicide attempts, plans

Mom diagnosed with bipolar

Objective Assessment Findings:

Appearance well groomed

Manic, flight of ideas, tangential

Lab findings/diagnostic tests:

Positive for THC
Bun 7 (L)
Glucose 101 (H)
LDL 110 (H)
25-OH Vitamin D 29.0 (L)
Ur Leukocyte Est-erase 2 (H)
Vs: 98.7F, 98 HR (H), 16 HR, 154/106 BP (H), 98 % RA
EKG: Normal sinus rhythm with sinus arrhythmia

Risk factors:

Manic excitement

Flight of ideas

Repetition of verbalization (complaints, demands, requests)

Increased Agitation

Extreme Hyperactivity

History of suicide attempt

Medication

Interpreting/Analyzing Cues/Prioritizing Hypotheses/Generating Solutions:

Nursing priorities:

Risk for self-directed or other-directed violence r/t threats of violence towards self
Impaired Social interaction r/t disturbed thought process

Potential complications:

Death, harm to others, acts of self harm
Increased depression
Further social impalement
Jail time
Trauma to others who may see self-harm

Responding/Taking Actions:

Nursing interventions:

Remove all dangerous objects from the patients environment now
Rational: Pt should not have access to any dangerous items as he may use them.
Assess Pt's behavior frequently q15mins
Rational: Patient is a high suicide risk due to attempt of hanging himself in jail
Administer Seqouel 25 mg PO QHS SCH
Rational: To aid in decreasing depression, suicidal thoughts and mental disorders.
Redirect pt to other activities if pt becomes agitated and other manic behaviors to escalate PRN
Rational: Can be effective in diffusing escalating and potential harmful behavior
Educate pt on various copies skills to use in unit and upon discharge daily
Rational: Can be useful to calm pt down and effective in social life.

Reflecting/Evaluate Outcomes:

Evaluation:

Pt has not insight to his bipolar disorder, he is still convinced he only has ptsd. Pt adhering to the medication regimen and will continue the same regimen upon discharge. Pt educated on risks, benefits and indications of medication. Pt has done no harm to himself while in unit. Pt recommended to attend groups to aid in coping skills. Continue plan of care.

Discuss pertinent Social Determinants of Health for your patient:

Pt is currently unemployed and does not live in the area. Pt does not have stable relationships and has charges in multiple states and cities pending.