

Firelands Regional Medical Center School of Nursing
Nursing Care Map

Student Name ___Cameron Beltran_____

Date ___06/13/24_____

Noticing/Recognizing Cues:

Highlight all related/relevant data from the Noticing boxes that support the top priority problem

Assessment findings*:

- HR= 57 low
- Temperature= 97.5 °F low
- Suicidal Ideation
- Difficult to engage
- Stated "had a really bad day at work"
- Reported anhedonia from low energy
- Denies hallucination
- Stated "plan to overdose on pills"

Lab findings/diagnostic tests*:

- RBC= 6.34, high
- MCV=67.4, low
- MCH= 21.8, low
- MCHC=32.4, low
- RDW= 15.2, high
- Abnormal CBC- mild anisocytosis with a few elliptocytes

Risk factors*:

- Depression
- Anxiety
- Mood disorder
- Hx o/ sexual abuse
- Hx o/ emotional abuse
- Hx o/ verbal abuse
- Suicidal ideations
- Suicide plan: overdose of pills
- hopelessness

Interpreting/Analyzing Cues/
Prioritizing Hypotheses/
Generating Solutions:

Nursing priorities*: *Highlight the top nursing priority problem*

- Risk for Suicidal behavior
- Major Depressive Disorder
- Risk for self-directed or other-directed violence

Goal Statement:
Patient will seek out staff when feeling or thinking of suicidal ideation

Potential complications for the top priority:

- Self-harm
 - Wearing long sleeves or pants
 - Unexplained cuts, bruises, scars, bald spots
 - Refusing to change around others
- Suicide
 - Talks of hopelessness or helplessness
 - Threatens/verbalizes suicidal ideation
 - Giving away prized possessions
- Self-neglect
 - Poor hygiene/wearing dirty clothes
 - Weight loss/malnutrition
 - Avoiding medical attention

Responding/Taking Actions:

Nursing interventions for the top priority:

1. Maintain close assessments every 15 minutes to ensure patient safety
2. Collaborate with care team for ongoing assessments every 15 minutes to watch for changes in behavior
3. Create a safe environment at all times to keep patients feeling safe
4. Ensure a therapeutic milieu at all times to promote optimal care
5. Maintain trust and respect with patient at every interaction to ensure best possible care
6. Administer Trazadone 50mg PO QHS PRN for insomnia
7. Administer Olanzapine 5mg IM/PO Q6H PRN for severe agitation
8. Administer Hydroxyzine pamoate PO 50mg Q6H PRN for anxiety
9. Administer Benztropine 1mg PO/IM Q6H for involuntary movements/side effects from drugs
10. Administer Mirtazapine 7.5mg PO QHS for depression
11. Administer Cholecalciferol 75mcg PO at 0900 for vitamin D
12. Educate patient about the need to take medications every day to get them in the habit of taking them when they leave
13. Teach therapeutic techniques and coping mechanisms at every interaction so that the patient can learn

Reflecting/Evaluate Outcomes:

Evaluation of the top priority:

- Reports no changes in sleep
- Appetite normal
- Reports anhedonia “Anhedonia is the inability to experience joy or pleasure” (Professional, 2023).
- Denies hallucinations
- No side effects to mirtazapine
- Stated “doing good”
- Denies suicidal ideation

Terminate plan of care: Discharged 06/11

Reference:

Professional, C. C. Medical. (2023, July 26). *What is anhedonia?*. Cleveland Clinic. <https://my.clevelandclinic.org/health/symptoms/25155-anhedonia>