

Firelands Regional Medical Center School of Nursing  
Nursing Care Map

Student Name \_\_\_\_\_

Date \_\_\_\_\_

Noticing/Recognizing Cues:

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

Assessment findings\*:

- Leg Tapping (Anxiety)
- Hand fidgeting (Anxiety)
- Constantly messing with beard (Anxiety)
- Aggressive thoughts (talking about hurting others)
- 106/65 BP
- 16 RR
- 97.5 Temperature
- 68 Pulse
- 98% RA
- Anxiety 4/10
  - o The pocket guide describes mild anxiety as, "Heightened perception (e.g., noises may seem louder; details within the environment are clearer)
- Insomnia (4 Hours sleep)

Lab findings/diagnostic tests\*:

- BAC .290
- Positive THC
- Vitamin D 16.8 (30-100)
- BUN 6 (7-25)
- Glucose 102 (70-100)
- AST 41 (13-39)

Risk factors\*:

- Homeless
- Sex offender
- Felon (17 Arrest)
- Child abuse
- Domestic Violence
- Alcohol Dependence
- Poor support system
- No Job

Interpreting/Analyzing Cues/  
Prioritizing Hypotheses/  
Generating Solutions

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

- Ineffective Coping
- Altered thought process
- Anxiety
- Substance Abuse

Goal Statement: Understanding how to better deal with stressful situations rather than resort to violence.

Potential complications for the top priority:

- Violence
  - o Clenched Fists
  - o Pacing
  - o Raising Voice
- Suicidal Thoughts
  - o Isolation
  - o Increased Substance Use
  - o Seeking Help
- Self Harm
  - o Cutting Left Arm
  - o Risky Behavior
  - o Excuses for Injury

## Responding/Taking Actions:

### Nursing interventions for the top priority:

1. Determine Specific Stressors Daily
  - a. Homeless, drug dependent, felon, sex offender, money problems
2. Evaluate the ability to understand events and provide realistic appraisal of situation based on Psychosocial development Daily
  - a. Tendency to resort to violence
3. Determine use of defense mechanisms PRN
  - a. Drug use, smoking habits, denial, sleep pattern, eating pattern
4. Compare speech and communication patterns Daily
  - a. Constantly fidgeting with arms, beard, and leg while talking about stressful situations
5. "Provide a safe, non threatening environment." (Skyscape)
6. Determine previous methods or approaches for dealing with life problems Daily
  - a. Previous methods included violence and sexual abuse
  - b. Wants to be around more positive people in order to make better choices
  - c. Ensures patient is dealing with his problems in a therapeutic way
7. Obtain Vital Signs q8H PRN
  - a. Establish baseline vitals to determine if there is a change in the patients' health
8. Administer Nicotine patch 5 mg q24H PRN
  - a. Assist with withdraws from not being able to smoke in 1S and reduce anxiety



## Reflecting/Evaluate Outcomes:

### Evaluation of the top priority:

- Decreased daily stressors since being in 1S
  - Claimed everyone here is very positive and helpful
- Improved handling stressful situations
  - Educated on body mechanics and using words instead of fists
  - Defense mechanisms are the same
    - At discharge was talking about going to “smoke a fat blunt” and get something to drink
  - Sleep pattern remains the same
    - Struggling to sleep at night and has been taking melatonin to help
  - Struggling to find a job remains the same
    - Pt states its hard to find a job with his history of 17 felonies, sex offender, rapist, domestic violence, alcohol dependance, and no address
  - Anxiety Improved
    - Anxiety is still present but wasn’t fidgeting as much during Day 2 of 1S, claims he felt less anxious and didn’t need his Vistaril
  - Reassessed vitals
    - BP 112/72
    - RR 16
    - 74 Pulse
    - 98% RA 97.6 Temperature
- Continue Plan of care

**Reference:** Morgan, K. I. (2023). Davis Advantage for Townsend’s essentials of Psychiatric Mental Health Nursing: Concepts of care in evidence-based practice (9th ed.). F.A Davis Company.

Marilynn E. Doenges (2024) Nurses Pocket Guide: Diagnoses. Ineffective Denial. F.A. Davis Company.