Firelands Regional Medical Center School of Nursing
Nursing Care Map

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Noticing/Recognizing Cues:

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

Assessment findings*:

*Flat affect

*Blood pressure:119/58

*Denial

*Respiratory rate:16

*Circumstantiality

*pulse rate:69

*euthymic mood

*flustered

*anxiety

*withdrawn

Lab findings/diagnostic tests*:

*Triglycerides:59

*Cholesterol:154

* LDL Cholesterol: 75

*Vitamin D: 25.5L

*HDL Cholesterol: 67

*TSH 3rd Gen:1.29

-no other lab was out of range

Risk factors*:

*unspecified psychosis

*mood (affective) disorder

*22 years old

*female

*Post traumatic stress disorder (PTSD)

*paranoid thoughts

Interpreting/Analyzing Cues/
Prioritizing Hypotheses/
Generating Solutions:

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

- ***Disturbed sleep pattern**
- ***Fatigue**
- ***Hopelessness**
- ***ineffective denial**
- ***ineffective coping**
- ***insomnia**
- ***Post traumatic syndrome and risk for post-trauma syndrome**
- ***Social isolation**
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Goal Statement: Patient will be acceptance of their mental health illness

Potential complications for the top priority:

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  *Delusions
  -patient does not want to take medications such as Geodon because they don't want to be "labeled"
  -persistently holding grudges
  -feelings of being exploited
  *Anxiety
  -heart pounding
  -sweating
  -muscle tension
  *stress
  -headaches
  -nausea
  -irritable

Nursing interventions for the top priority:

*Assess the patient's anxiety every hour

Ensure the patient levels of anxiety are not elevating

*Assess Patient's duration of denial and any other defense mechanism used by client Q6h

-Clients in early stage of denial may be more amenable to intervention than those who are well enriched in their beliefs

*Assess skills to meet goals and problem solve Q24H

-want to see the patients moving forward in treatment and is looking actively of ways to reach goals they have set

*assess patients levels of fatigue and amount of sleep Q24H (Wagner, 2023)

-Patients with ineffective denial have often a hard time with sleep

*Assess vital signs every 12 hours

-patients with denial may present with anxiety and some levels that may be elevated would be is blood pressure, heart rate, and elevated respirations

*provide a safe, non-threatening environment q4h

-Therapeutic milieu encourages client to talk freely without fear of judgment

*Present accurate information about clients diagnosis/situation and treatment regimen without insisting that the client accept what has been presented q2hrs

-avoids confrontation, which may further make the client in denial

*Encourage client to participate in group activities q2hrs

-patients in denial need ongoing support to move forward with accepting the reality of life

*Involve patients in group sessions Q2hrs

-So patient can hear others views of reality to test her perceptions

*Educate patient on deep breathing exercises and calm stimuli q2hrs

-patients that are in a state of denial can be anxious and need coping skills to to help alleviate that

*educate on the importance of medication therapy Q1hr

-patient did not want to be "labelled" so they refused their Geodon and this is an important medication for their treatment

Evaluation of the top priority:

*Patients in denial

*Patient able to maintain focus in conversation

*Patient still appears withdrawn

*Patient has a broad affect

*patients Vitamin D level Is the same:25.5L

*Patient is involved in therapy group

-Will continue plan of care

Reference: Wagner , M. (2023, November 21). *Ineffective coping nursing diagnosis & care plans*. NurseTogether.
https://www.nursetogether.com/ineffective-coping-nursing-diagnosis-care-plan/#signs-and-symptoms-as-evidenced-by