

**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*:

- Depressed 5/10
- Anxiety 8/10
- **Visual hallucinations:** seeing birds flying, black sparks, and angles on face that would then fly up to the sky when flicked.
- **Auditory hallucinations:** voices giving praise or belittling.
- Increased appetite
- Too much sleep
- Low energy levels
- Uneasy

Lab findings/diagnostic tests*:

- Positive urine test for THC
- TSH 3rd generation 0.90
- Triglycerides 45
- **Vitamin D 29.0 L**
- Cholesterol 143

Risk factors*:

- History of emotional abuse
- History of sexual abuse
- History of acute psychosis
- History of bipolar
- History of PTSD
- History of depression
- Everyday smoker
- Everyday marijuana use
- Meth use
- Auditory hallucinations
- Visual hallucinations
- Suicidal ideations
- Loss of custody of children
- Schizoaffective

**Interpreting/Analyzing Cues/
Prioritizing Hypotheses/
Generating Solutions:**

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

- **Ineffective coping**
- Disturbed thought process
- Disturbed sensory perception
- Risk for suicide
- Disturbed sleep pattern
- Anxiety
- Impaired adherence to medication therapy

Goal Statement: patient establishes effective coping mechanisms.

(Morgan, 2021)
(Morgan & Townsend, 2021)

Potential complications for the top priority:

- **Mood instability**
 - Too much sleep
 - Depression
 - Anxiety
- **Risk of suicide**
 - Mood changes
 - Self-harm
 - Substance use
- **Risk for substance use**
 - Anxiety
 - Depression
 - Lack of support system

(Morgan, 2023)
(Morgan & Townsend, 2021)



Responding/Taking Actions:

Nursing interventions for the top priority:

- 1. Establish a therapeutic relationship on admission and continue daily.**
Rationale: Establishing trust, rapport, and maintaining milieu with the patient provides them with a healing environment to work on improving their psychical and mental wellbeing.
- 2. Assess anxiety and depressive emotions daily.**
Rationale: Allows the ability to identify emotional distress early to implement appropriate interventions, coping skills, and medication therapy.
- 3. Assess for signs of hallucinations daily.**
Rationale: Identify the occurrence of auditory and visual hallucinations to implement interventions and medication therapy to ensure patient safety and decrease occurrence.
- 4. Assess sleep quality and pattern daily.**
Rationale: Identify quality and amount of sleep to determine patients behavior patterns and overall wellbeing along with the need of any additional interventions.
- 5. Administer Aripiprazole 5mg PO QHS nightly.**
Rationale: Reduce occurrence of hallucinations and reduce negative moods.
- 6. Administer Venlafaxine ER 75mg PO daily.**
Rationale: Improve and stabilize patients overall mood, energy, and interests.
- 7. Administer Hydroxyzine Pamoate 50mg PO Q6H PRN.**
Rationale: Reduces symptoms of anxiety.
- 8. Administer Olanzapine 5mg IM Q6H PRN.**
Rationale: Reduce occurrence of hallucinations and depressive episodes, improve overall mood.
- 9. Assess current coping skills and establish effective mechanisms on admission and throughout stay.**
Rationale: Determine effectiveness to establish how patient copes with stressors and support the development of effective mechanisms to aid in healing process.
- 10. Set realistic goals on admission and continue throughout stay.**
Rationale: Establishing goals aid in guiding patient centered care and promotes patient motivation and support.
- 11. Educate on medication adherence prior to discharge.**
Rationale: Ensures safe and effective treatment therapy to aim at reducing the risk of readmission and promotes patients overall health.
- 12. Educate family on illness, symptoms, when to contact healthcare provider, medication treatment/adherence, coping skills, and support systems prior to discharge.**
Rationale: Promote continuance of treatment therapies to enhance patients overall safety and provide family with appropriate information and support to overall benefit the patient.
- 13. Provide the patient and support system with appropriate resources and support at the time of discharge.**
Rationale: Promote patients role in their own care, improve coping skills, and affective transition home and into community.

(Morgan, 2023)
(Morgan &
Townsend, 2021)
(Vallerand, Sanoski,
& Deglin, 2022)

Reflecting/Evaluate Outcomes:

Evaluation of the top priority:

- **Depression:** 2/10
- **Anxiety:** 5/10
- **Visual hallucinations:** no change
- **Auditory hallucinations:** no change
- **Increased appetite:** no change
- **Sleep pattern:** no change
- **Low energy levels:** no change
- **Uneasy mood:** no change

Discontinue

Reference:

Morgan, K. I. (2023). Davis Advantage for Townsend's essentials of psychiatric mental health nursing (9th ed.). Philadelphia, PA: F.A. Davis Company. <https://www.fadavis.com/>

Morgan, K.I. and Townsend, M.C. (2021) *Pocket guide to psychiatric nursing*. Philadelphia: F.A. Davis.

Vallerand, A. H., Sanoski, C. A., & Deglin, J. H. (2022). Davis's drug guide for nurses (18th ed). F.A. Davis Company: Skyscape Medpresso, Inc.