

Bipolar Activity

Psychiatric Nursing 2025

Chapter Objectives:

1. Identify predisposing factors in the development of bipolar disorder. (1, 2, 4) *
2. Identify symptomatology associated with bipolar disorder. (1, 2) *
3. Formulate priority problems and interventions for a patient with bipolar disorder. (1, 2, 3) *
4. Describe appropriate interventions for a patient with bipolar disorder. (1, 2, 3, 4, 5) *
5. Identify various types of bipolar disorders. (1, 2)*

*Course objectives

Directions:

Please complete the following activity and turn it into the appropriate dropbox on Edvance360. This assignment is due at 0800 on **Monday June 23rd**.

This assignment starts with a case study about Noreen. Please read the case study then classify each behavior that is mentioned on the following page. The final part of the assignment is to answer the seven questions on the last page.

This assignment is worth 1 hour of online content. In order to receive full credit for this assignment, it must be completed in its entirety by the due date/time assigned. Any assignment not completed in its entirety will result in missed theory time and must be made up.

Case Study: Bipolar Mania

Noreen, age 32, had always been described as “moody.” Depending on what was happening in her life at the time, she could be very sad and depressed or very lighthearted and happy. During her “down” times she would feel tired, experience loss of appetite, and sleep a lot. During her “happy” times, she would party a lot, be very outgoing, and have a remarkable amount of energy. Noreen did well in college and graduated at age 26 with an MBA. Since that time, she has been employed in the administration department of a large corporation, in which she has had several promotions. Two weeks ago, management was to make the announcement of who would be fulfilling the position of vice president of corporate affairs. Noreen and a male colleague, Ted, were vying for the position. It was a choice position that Noreen desperately wanted. She became very depressed when the announcement was made that Ted had been chosen. She stayed at home, in bed, and slept a lot for several days. On about the fourth day, she got up, feeling exhilarated, and decided to go shopping. She spent over \$1,000 on clothing. She then decided to have a party for several hundred people, ordered the catering, and planned all the details. Tonight, was the party. Noreen wore a new, very expensive dress, drank a lot of champagne, was very jovial and seductive, and bragged to everyone who would listen that she would soon be getting a new job and that the people at her old organization would be sorry they had failed to promote her. She left the party with a man she hardly knew. At 3 a.m., she was picked up by the police under the grandstand at the local baseball stadium, wearing only her underclothes and high-heeled shoes and carrying a half-filled bottle of champagne. She was alone and speaking very loudly and rapidly. The police brought her to the emergency department, where she was admitted to the psychiatric unit with a diagnosis of Manic Episode.

Symptoms of Bipolar Disorders

Next to each of the behaviors listed below, write the letter that identifies the disorder in which the behavior is most prevalent.

- a. Cyclothymic disorder b. Bipolar I disorder c. Bipolar II disorder
d. Manic episode e. Delirious mania

__E_ 1. Clouding of consciousness occurs.

__A_ 2. Characterized by mood swings between hypomania and mild depression.

__D__ 3. Paranoid and grandiose delusions are common.

__D__ 4. Excessive interest in sexual activity.

__D__ 5. Accelerated, pressured speech.

__E__ 6. Frenzied motor activity, characterized by agitated, purposeless movements.

__C__ 7. Recurrent bouts of major depression with episodes of hypomania.

__B__ 8. Recurrent bouts of mania with episodes of depression.

Please read the chapter and answer the following questions:

1. What is the most common medication that has been known to trigger manic episodes?

The most common medication that has been known to trigger a manic episode are steroids that are used frequently for chronic illnesses including multiple sclerosis and systemic lupus erythematosus (SLE). Other medications that have potential for initiating a manic episode include antidepressants, amphetamines, anticonvulsants and narcotics in high doses.

2. What is the speech pattern of a person experiencing a manic episode?

In acute mania, accelerated thinking proceeds to flight of ideas and when severe, an individual's speech may be disorganized and incoherent during a manic episode.

3. What is the difference between cyclothymic disorder and bipolar disorder?

Cyclothymic disorder is characterized by a chronic mood disorder lasting at least 2 years, in which an individual experiences numerous episodes of elevated mood, hypomanic symptoms, that do not meet full criteria for a hypomanic episode and numerous episodes of depressed mood that are not severe or long enough to qualify for major depressive episode. The individual is never symptom free for more than two months at a time.

Bipolar 1 disorder is characterized by experiencing a manic episode or has a history of one or more manic episodes, may experience depression episodes as well. It may be specified by single or current manic episode, hypomanic, mixed, or depressed. Psychotic or catatonic features may also appear.

Bipolar 2 disorder is characterized by repeated episodes of major depression accompanied by hypomania episodes.

4. Why should a person on lithium therapy have blood levels drawn regularly?

A person on lithium therapy needs to have blood levels drawn regularly to ensure they remain in the therapeutic range (0.6-1.2 mEq/L) because when exceeded and individual may experience toxic side effects that are potentially fatal.

5. There is a narrow margin between the therapeutic and toxic serum levels of lithium carbonate. What is the therapeutic range? What are the initial signs and symptoms of lithium toxicity?

The therapeutic range for lithium is 0.6-1.2 mEq/L. The initial signs and symptoms of lithium toxicity include severe diarrhea, persistent nausea and vomiting, excessive urine output, mental confusion, blurred vision, tinnitus, ataxia, and increasing tremors.

6. Describe some nursing implications for the client on lithium therapy.

Some nursing implications for the client on lithium therapy is to educate patient on signs and symptoms of lithium toxicity and notify health care provider if they occur. Others include educating that patient takes medication as prescribed, do not drive or operate dangerous machinery, maintain adequate dietary, sodium intake, drink six to eight large glasses of water per day, and avoid caffeinated beverages. Ensure patient keeps up with follow-up appointments and has serum-level check every one to two months or health care providers preference. Educate patient to carry a card with all medications that they are taking.

7. What are TWO priority problems for this patient? What are THREE nursing interventions for each of those priority problems?

<p>Priority Problem 1: Risk for Violence: Self-Directed or Other-Directed</p>	<p>Priority Problem 2: Impaired Social Interaction</p>
<p>Nursing intervention:</p> <ul style="list-style-type: none"> • Remove all objects that may be harmful to patient from the environment including sharp items, glass, belts, ties, or harmful substances. • Provide an environment with low or minimal stimuli. • Assess for presence of any substance use issues. 	<p>Nursing intervention:</p> <ul style="list-style-type: none"> • Help the patient recognize how manipulative behaviors serve them which is to minimize insecurity feelings by increasing feelings of power and control. • Provide positive reinforcement for non-manipulative behaviors and assist patient to explore feelings and seek alternative ways dealing with the behavior.

	<ul style="list-style-type: none">• Assist the patient to identify positive traits about their self, recognize accomplishments, and feel good about them.
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