

Medication Template

Name: Micayla clapp

Medication: Risperidol 0.25 mg/po

Expected

Selectively blocks serotonin and dopamine receptors in the mesocortical tract of the CNS to suppress psychotic symptoms.

Pharmacological

Action:

Chart Documentation

Pt was given risperidol 0.25 mg po for the first time today.

Therapeutic Uses

To manage psychotic disorders.

Nursing Interventions

Monitor for orthostatic hypotension

Be aware that oral risperidone or another antipsychotic should be continued for 3 weeks after long acting IM form of risperidone is first admin.

Adverse Effects

Abnormal coordination, aggressiveness, agitation, anxiety, seizures, shaking of head repeatedly, tremor, vertigo, a fib, bradycardia, bundle branch block, cardiopulmonary arrest, chest pain, conjunctivitis, dry mouth, ear pain, nasal congestion, pharyngitis, rhinitis, sinusitis, vision changes, diabetic ketoacidosis, elevated prolactin level, abdominal pain, decreased libido, delayed ejaculation, uti, anemia ,.

Contraindications

Hypersensitivity to risperidone, paliperidone, or its components.

Client Education

Dilute risperidone oral solution with water, coffee, orange juice, or low-fat milk. No cola or tea. Urge pts to avoid alcohol. Caution diabetic pts to monitor blood glucose levels closely because risperidone may increase it.

Medication /Food Interactions

Don't mix oral solution with cola or tea. Antihypertensives increased antihypertensive effects. Bromocriptine, levodopa, pergolide possibly antagonized effects of these drugs. Carbamazepine increased risperidone clearance with long term use

Medication Administration

0.25 mg daily for children ages 5 and older 20kg or less in weight. Increase after 4 days to 0.5 mg daily. Dosage further increased as needed in 2 wk intervals in 0.25 mg increments.

Medication Effectiveness

No effect is noted yet for the pt due to just starting the medication today.

Client Information Cover Sheet to be used for Care Plan. Attach as a cover sheet when turning in for grading.

Pt. Initials

Age

Gender

Other demographic data

Lives with mom, dad, and older brother {11}.

DSM -IV Diagnoses

Axis I: depression, aggression

Axis II: all personality disorders, and OCD, and mental retardation.

Axis III: provides info about any medical condition that might impact pt. mental disorder

Axis IV: educational problems, occupational problems, problems related to social environment

Axis V: 0-100 scale called GAF 100= no symptoms, 90= minimal symptoms, 10= persistent danger to self or others.

NANDA Diagnoses:

Depression

Mental Status Exam Findings (be sure to be VERY descriptive)

Appearance

Behavior- pt was distracted

Attitude- pt stated that he felt helpless

Speech- pt had clear speech that was appropriate for his age

Mood- pt appeared anxious

Affect- pt was blunt

Main Thought Content

Ideations- homicide and suicide

Delusions- N/A

Illusions- N/A

Obsessions- N/A

Compulsions- N/A

Orientation- Alert and oriented times 4

Memory- normal for pt age

Remote- appears intact for pt age

Recent-

Reasoning

Judgment- impulsive, aggressive

Calculations- normal for pt age

Intelligence- normal for pt age

Insight- pt knows he is here because he said he would kill himself.

Allergies: NKDA

Factors that Aggression, and pt stating that he was going to kill himself and others.

Lead to

Treatment:

Significant No psychiatric history

Psychiatric

History:

Family No family history reported

History:

Strengths: Satisfactory living conditions and attending school.

Support System: Mom, dad, and brother

Discharge Plans (YOURS FOR THE CLIENT)

Pt needs to get better control of anger
Would suggest family counseling
Also would suggest individual counseling
Continue medications

Medications (Medication Template): **Medication template is included in this packet*

Medication list: rispidol is only medication child is on currently.

Citation for med templet

2018 Nurses drug handbook (17th ed.). (2018). Burlington, MA: Jones & Bartlett Learning.

Name: Micayla Clapp

CARE PLAN – POC

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Date: 2-18-19

Client Initials JW

Nursing Diagnosis (Prioritized)	Short Term Goal	Interventions	Long Term Goal	Interventions
1. Risk for self-harm	1. pt will discuss 2 triggers to is mood in order to alleviate suicidal and homicidal ideations.	1. evaluate aggressive symptoms to determine if medications are working. 2. assist pt in channeling his anger to more productive activities 3. educate pt on impulse control	1. pt will present with stabilized mood evidenced by fewer explosive outbursts, less defiant behavior, and absence of homicidal and suicidal ideations.	1. evaluate aggressive symptoms to determine if medications are working 2. assist pt in channeling his anger to more productive activities 3. educate pt on impulse control
1. Hopelessness	1. pt starts to recognize his own feelings and deals with them in a healthy way	1. assess unhealthy behaviors used to cope with feelings 2. help pt to identify areas of life that are under his or her control. 3.	1. the pt verbalizes feelings and acceptance of life situations over which pt has no control.	1. teach the importance of taking pt medication every day. 2. help pt to identify areas of pt life that are not under pt control and how to cope with this. 3.

<p>1. Chronic low self esteem</p>	<p>1. pt with demonstrate behaviors consistent with increased self esteem</p>	<p>1. asses pt level of self esteem 2. provide positive reinforcement for all observable accomplishments 3 encourage pt to participate in simple recreational activities</p>	<p>1. pt continues to build self esteem</p>	<p>1. teach thought stopping techniques 2. explore the pts personal strengths and suggest making a list to use as a reminder when negative thoughts return. 3 if pt persists in negativism about self, place a limit on the length of time you will listen to negativity.</p>
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Citation for POC

Swearingen, P. L., & Wright, J. D. (2016). All-in-one nursing care planning resource: Medical-surgical, pediatric, maternity, and psychiatric-mental health (4th ed.). St. Louis, MO: Elsevier.

Nursing Care Plan/Concept Map Rubric - 50 Points Total

Name:

Grade:

	1-4	5-7	8-10	15
<p>Assessment (Cover Page) Includes subjective, objective and historical data that support actual or risk for nursing diagnosis.</p>	<p>Incomplete Assessment portion is incomplete. APA References are incorrect or not used.</p>	<p>Poor Does not include all pertinent data related to nursing diagnosis. May also include data that does not relate to nursing diagnosis. Some APA references are correct</p>	<p>Fair Includes all pertinent data related to nursing diagnosis, but also includes data not related to nursing diagnosis. Most APA references are correct.</p>	<p>Good Includes all pertinent data related to nursing diagnosis and does not include data that is not related to nursing diagnosis.</p>
	1-2	3	4	5
<p>Diagnosis Includes the most appropriate diagnosis for patient and ordinal number that includes all appropriate parts (stem, related to or R/T, and as evidenced by AEB for actual diagnosis) and is NANDA approved</p>	<p>Incomplete Diagnosis portion is incomplete. APA References are incorrect or not used.</p>	<p>Poor Diagnosis is not appropriate for patient and ordinal level (first diagnosis, second diagnosis, etc). May also not be NANDA and may not include all parts. Some APA references are correct</p>	<p>Fair Diagnosis is appropriate for patient and ordinal level, and diagnosis is NANDA approved, but does not include all parts or information is listed in wrong part of diagnosis. Most APA references are correct.</p>	<p>Good Diagnosis is appropriate for patient and ordinal level, and diagnosis is NANDA approved. Diagnosis also includes all parts and information is listed in correct part of diagnosis.</p>
<p>Planning (Short Term Goal) Includes a patient or family goal that is most appropriate for the patient/family and the nursing</p>	<p>Incomplete Goal portion is incomplete. APA Reference</p>	<p>Poor Goal statement is not patient or family oriented and may not have measurable criteria or a</p>	<p>Fair Goal statement is patient or family oriented, and contains at least one measurable criteria or a target</p>	<p>Good Goal statement is patient or family oriented, and contains two measurable criteria and a</p>

diagnosis. Goal should be measurable by at least two criteria and have a target date or time.	s are incorrect or not used.	target date or time. Some APA references are correct	date/time. Most APA references are correct.	target date or time.
Implementation (Short Term Interventions) Includes interventions or nursing actions that directly relate to the patient's goal which are specific in action and frequency.	Incomplete Interventions portion is incomplete. APA References are incorrect or not used.	Poor Interventions portion does not include adequate number of interventions to help patient/family meet goal. Interventions may also not be specific, labeled or listed with rationales. Some APA references are correct	Fair Interventions portion contains adequate number of interventions to help patient/family meet goal, but interventions may not be specific, labeled or listed with rationales. Most APA references are correct.	Good Interventions portion contains adequate number of interventions to help patient/family meet goal, and interventions are specific in action and frequency.
Planning (Long Term Goal) Includes a patient or family goal that is most appropriate for the patient/family and the nursing diagnosis. Goal should be measurable by at least two criteria and have a target date or time.	Incomplete Goal portion is incomplete. APA References are incorrect or not used.	Poor Goal statement is not patient or family oriented and may not have measurable criteria or a target date or time. Some APA references are correct	Fair Goal statement is patient or family oriented, and contains at least one measurable criteria or a target date/time. Most APA references are correct.	Good Goal statement is patient or family oriented, and contains two measurable criteria and a target date or time.
Implementation (Long Term Interventions) Includes	Incomplete Interventions	Poor Interventions portion does not include adequate	Fair Interventions portion contains adequate number	Good Interventions portion contains adequate number

<p>interventions or nursing actions that directly relate to the patient's goal which are specific in action and frequency.</p>	<p>portion is incomplete.</p>	<p>number of interventions to help patient/family meet goal. Interventions may also not be specific, labeled or listed with rationales. Some APA references are correct</p>	<p>of interventions to help patient/family meet goal, but interventions may not be specific, labeled or listed with rationales. Most APA references are correct.</p>	<p>of interventions to help patient/family meet goal, and interventions are specific in action and frequency.</p>
<p>Medications All patients' medications are listed, the student has discussed in his/her words how the medications interact with the clinical presentation of the patient. Student has done medication template on 1 of the patient's medications.</p>	<p>Incomplete No medication information is included in the care plan.</p>	<p>Poor Medications not listed. Medication template incomplete and/or inaccurate information.</p>	<p>Fair Medication section missing medications. Medication template complete.</p>	<p>Good Medication section is complete. The medication template is complete in its entirety with appropriate APA references.</p>
<p>APA format Students should utilize references where appropriate and cite utilizing correct APA format.</p>	<p>Incomplete No APA references utilized. More than 5 APA errors.</p>	<p>Poor 3-5 errors in APA format. References not utilized in all appropriate places</p>	<p>Fair 1-3 errors in APA format, references are utilized where appropriate.</p>	<p>Good No errors in APA format, references are utilized where appropriate.</p>
<p>Additional Comments:</p>				

