

1. Safety and infection control

Cognitive support of delirium

- Provide adequate lighting in the bathroom at night.
- Encourage physical activity during the day.
- Maintain consistent care givers and keep consistent daily routine.

2. Management of care

Types of admission to a mental health facility

- Informal admission: this is the least restrictive form of admission for treatment. The client does not pose a substantial threat to self or others. The client is free to leave the hospital at any time, even against medical advice.
- Voluntary admission: the client or client's guardian chooses admission to a mental health facility to obtain treatment. This client is considered competent and so has the right to refuse medication and treatment. Before release, a client can be evaluated, and if deemed necessary, the care provider can initiate an involuntary admission.
- Temporary emergency admission: the client is admitted for emergent mental health care due to the inability to make decisions regarding care. The medical health care provider can initiate the admission which is then evaluated by a mental health care provider. The length of admission varies by client's need and state law but does not exceed 15 days.

3. Psychosocial integrity

Types of violence

- Physical violence: occurs when physical pain or harm is involved (shaken baby syndrome, strangling, striking, or kicking, and pushing).
- Sexual violence: occurs when sexual contact takes place without consent, whether the vulnerable person can give consent or not.
- Emotional violence: involves behavior that minimizes a person's feelings of self-worth or humiliates, threats, or intimidates a family member.

4. Health promotion and maintenance

Defense mechanism

- Denial: client and family members can refuse to believe that changes are taking places, even when those changes are obvious to others.
- Confabulation: client makes up stories when questioned about events or activities that they do not remember.
- Perseveration: client avoids answering questions by repeating phrases or behavior. This another unconscious attempt to maintain self-esteem when memory has failed.

5. Pharmacological and parenteral therapy

SSRI client education

- Avoid concurrent use with MAOIs, SNRIS, buspirone or St. John's wort can cause serotonin syndrome.
- Allow two weeks between fluoxetine and MAOIs use.
- Report suicidal ideation to the provider and do not stop abruptly the medication to avoid withdraw.
- syndrome.