

Mental Health Remediation

Confidentiality/Information Security

Legal and Ethical Issues: Client Confidentiality

1. The client's right to privacy is protected by HIPAA
2. As a nurse, information should be shared about the client with only those responsible for implementing the client's treatment
3. The client needs to sign a consent in order for the nurse to share information with others involved in treatment

Establishing Priorities

Medications for Psychotic Disorders: Prioritizing Client Care

1. Suppress acute episodes – Safety is always first
First generation antipsychotics treat positive symptoms
Second & third gen antipsychotics treat positive and negative symptoms
2. Prevent acute recurrence
3. Maintain the highest level of functioning

Ethical Practice

Legal and Ethical Issues: Priority Action for Client Refusing Treatment

1. Determine the reason for refusal
2. Provide information for risks associated with refusal of treatment
3. Notify provider, document refusal, make sure patient and staff remain safe by implementing alternative treatment as necessary

Use of Restraints/Safety Devices

Client Safety: Use of Restraints on a Child

1. Under age 9, restraint can be used for 1 hour
2. Age 9-17, restraint can be used for 2 hours
3. Assess skin integrity, provide ROM, check vitals, offer food/drink and toileting

Legal and Ethical Issues: Applying Restraints

1. The restraints are never to be used for staff convenience, punishment of the client, for clients who are extremely physically or mentally unstable
2. All less restrictive measures should be attempted and failed first
3. Obtain written prescription and re-evaluation from provider every 24 hours

Health Promotion/Disease Prevention

Neurocognitive Disorders: Risk Factors for Delirium

1. Physiological changes including Parkinson's disease, Huntington's disease, hepatic or renal failure
2. Electrolyte imbalances, nutritional deficiencies, infection, surgery, substance use or withdrawal
3. Other factors include older age, multiple co-morbidities, ICU, aphasia, restraint use

Abuse/Neglect

Family and Community Violence: Priority Nursing Action for Suspected Child Abuse

1. Assess for respiratory distress, bruising that is not typical or appropriate for child's age, bruising at different stages and in unusual places
2. Assess the mechanism of injury which might not be in line with the physical appearance of the injury
3. Assess for burns, fractures, human bite marks, altered level of consciousness, nonreactive pupils
4. Document subjective, and objective data obtained during the assessment

Behavioral Interventions

Anxiety Disorders: Caring for a Client During a Panic Attack

1. Keep the client safe
2. Monitor vitals, remain with the client
3. Use relaxation techniques and assist with identifying the trigger

Personality Disorders: Establishing Client Goals

1. Assess - for comorbidities, psychological influences, biological influences
2. Therapeutic communication and interventions - Use a firm but supportive approach and consistent care
3. Milieu management and safety - Offer realistic choices to enhance the client's sense of control, set limits and maintain consistency

Crisis Intervention

Crisis Management: Priority Assessment

1. Assess for presence of suicidal or homicidal ideation
2. Assess the clients perception of precipitating events
3. Assess for present coping skills, possible anger or aggression, physical assessment, inadequate problem solving and support system

Effective Communication: Priority Response to Client Who Is in Crisis

1. Assess for risk or self harm - Safety is always first priority
2. Minimize distractions and provide for privacy

3. Therapeutic communication – offering self, open ended questions, active listening

Suicide: Priority Intervention

1. Focus on suicide preventions through community education and identifying risks
2. Suicide precautions should be in place for individuals who are at high risk for suicide- one on one supervision, checking belongings and environment for safety risks
3. Establish a No suicide contract with the client

Family Dynamics

Personality Disorders: Recommended Therapy

1. Milieu management – social interactions within a group therapy
2. Psychotherapy
3. Cognitive and behavior therapy

Mental Health Concepts

Eating Disorders: Identifying Manifestations of Anorexia Nervosa

1. Preoccupied with food and the ritual of eating, also voluntary refusal to eat
2. Low body weight
3. Fear of gaining weight, disturbed self-perceived weight or shape

Neurocognitive Disorders: Expected Findings of Alzheimer's Disease

1. Difficulty remembering things – gets worse as time goes on
2. Mood and personality changes
3. Inability to care for self

Substance Use and Other Disorders and Dependencies

Substance Use and Addictive Disorders: Caring for a Client Who Has Opioid Use Disorder

1. Safety is top priority – Prevent falls, implement seizure precautions as necessary, provide close observation for withdrawal manifestations
2. Provide emotional support and reassurance
3. Educate on removing any medications in the home that are not being used

Substance Use and Addictive Disorders: Identifying Manifestations of Alcohol Use Withdrawal

1. Use AUDIT test
2. CIWA-Ar assesses for alcohol withdrawal
3. Effects of withdrawal include- abdominal cramping, vomiting, tremors, restlessness, inability to sleep, increased heart rate, hallucinations or illusions, anxiety and tonic-clonic seizures. Delirium can occur 2-3 days after a client stops drinking alcohol.

Adverse Effects/Contraindications/Side Effects/Interactions

Medications for Bipolar Disorders: Adverse Effects of Lamotrigine

1. Blurred vision, dizziness
2. Headache, nausea, vomiting
3. Serious skin rash – Stevens-Johnson syndrome

Medications for Depressive Disorders: Contraindications for Selegiline

1. Transdermal selegiline is contraindicated for clients taking carbamazepine
2. MAOI's are contraindicated in clients who take SSRI's
3. MAOI's are contraindicated in clients who have heart failure, or severe renal insufficiency and should be used with caution in clients who have diabetes or seizure disorders

Medications for Psychotic Disorders: Contraindications for Aripiprazole

1. Should not be used for clients who have dementia
2. Clients who consume alcohol should avoid taking this medication and drinking alcohol
3. Caution should be used with clients who have cardiovascular or cerebrovascular disease, seizures, or diabetes mellitus

Expected Actions/Outcomes

Medications for Bipolar Disorders: Evaluating Effectiveness of Mood Stabilizers

1. Reduction in manic and depressive episodes
2. Helps to prevent recurrent episodes of mania or depression and decrease the incidence of suicide
3. Improved sleeping and eating habits, appropriate interaction with peers and ability to perform ADL's

Laboratory Values

Medications for Anxiety and Trauma- and Stressor-Related Disorders: Reportable Laboratory Results

1. Monitor ALT/AST, BUN, Creatinine for kidney and liver damage
2. Monitor electrolytes
3. When taking concurrently with warfarin PT and INR levels should be monitored
4. Monitor for therapeutic plasma levels