

Management of Care

Client Rights

- Care is provided with respect, dignity, and without discrimination.
- Freedom from harm related to physical or pharmacological restraint, seclusion, and any physical or mental abuse or neglect.
- Provision of adequate interpretive services if needed.

Ethical Practice

- Beneficence is the quality of doing good; can be described as charity.
- Autonomy is the client's right to make their own decisions. However, the client must accept the consequences of those decisions. The client must also respect the decisions of others.
- Justice is fair and equal treatment for all.

Client Rights

- Clients have the right to informed consent and the right to refuse treatment.
- Freedom from harm related to physical or pharmacological restraint, seclusion, and any physical or mental abuse or neglect.
- A psychiatric advance directive that includes the client's treatment preferences in the event that an involuntary admission is necessary.

Client Rights

- Provision of care with the least restrictive interventions necessary to meet the client's needs without allowing them to be a threat to themselves or others.
- Less restrictive measures such as verbal interventions to calm the client down.
- Use diversion or redirection.

Ethical Practice

- Voluntary admission is when the client or client's guardian chooses admission to a mental health facility to obtain treatment. The 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.
- Under involuntary admission, the client still has a right to refuse medication.
- Freedom from harm related to physical or pharmacological restraint, seclusion, and any physical or mental abuse or neglect.

Ethical Practice

- Informal admission is the least restrictive form of admission for treatment. The client does not pose a substantial threat to themselves or others. The client is free to leave the hospital at any time, even against medical advice.
- For voluntary admission, the client can refuse medication and treatment since they are deemed competent.
- Temporary emergency treatment restricts the client's rights due to the inability to make decisions regarding care.

Establishing Priorities

- Safety is always a priority concern because some clients who have a personality disorder are at risk for self-injury or violence.
- Clients with a personality disorder exhibit inflexibility/maladaptive responses to stress, compulsiveness, and lack of social restraint.
- Some other characteristics are the inability to emotionally connect in social and professional relationships and the tendency to provoke interpersonal conflict.

Safety and Infection Control

Use of restraints/safety devices

- Freedom from harm related to physical or pharmacological restraint, seclusion, and any physical or mental abuse or neglect.

- Nurses must know and follow state/federal/facility policies that govern the use of restraints.
- Complete documentation must be completed every 15-30 minutes or according to facility policy.

Health Promotion and Maintenance

Aging Process

- Protective factors for older adult clients are feelings of responsibility toward partner and children, current pregnancy, religious and cultural beliefs, overall satisfaction with life, presence of adequate social support, effective coping and problem-solving skills, and access to adequate medical care.
- Assess carefully for verbal and nonverbal cues. It is essential to ask the client if they are thinking of suicide.
- Suicidal comments are usually made to someone that the client perceives as supportive.

Psychosocial Integrity

Mental Health Concepts

- The client reports a fear of objects.
- The client reports a fear of a specific situation.
- The client might experience anxiety manifestations just by thinking of the feared object or situation and might attempt to decrease the anxiety using alcohol or other substances.

Therapeutic Communication

- The nurse should provide education to the client on coping skills.
- The client should monitor for manifestations of anxiety.
- The client should notify their provider if their coping skills and/or medications aren't working.
Do not adjust medications themselves.

Mental Health Concepts

- Depression is common in clients 65 years old and older, but the disorder is more difficult to recognize in older adult clients and often goes untreated.
- Some clinical findings of depression that can look like dementia are memory loss, confusion, and behavioral problems.
- Clients may experience anergia, anhedonia, anxiety, reports of sluggishness, change in eating patterns, and somatic reports.

Abuse and Neglect

- Spouse or partner violence follows a predictable cycle of a tension-building phase, acute battering phase, the honeymoon phase, and periods of escalation and de-escalation.
- Make sure clients are safe from physical and psychological harm.
- Provide psychological first aid.

Behavioral Interventions

- The group leader uses therapeutic communication to encourage group work toward meeting goals.
- Members take informal roles within the group, which can interfere with, or favor, group progress toward goals.
- Cohesiveness has been established and the role of leader is gradually diminishing.

Substance Use and Other Disorders and Dependencies

- Manifestations generally start within 4-12 hours of the last intake of alcohol and can continue 5-7 days.
- Benzodiazepines such as chlordiazepoxide, diazepam, lorazepam, and oxazepam are given for alcohol withdrawal.
- For abstinence maintenance after withdrawal disulfiram is given.

Behavioral Interventions

- Cognitive and language development are typically delayed.

- Characteristics behaviors include the inability to maintain eye contact, repetitive actions, and strict observance of routines.
- There is a wide variability of functionality from poor to high.

Behavioral Interventions

- Using positive reinforcement is also known as operant conditioning therapy.
- The client will receive a positive reward for their good behavior.
- The client can then use these rewards toward privileges.

Coping Mechanisms

- Defense mechanisms are reversible, and a client can use them in an adaptive or maladaptive way.
- Altruism and sublimation are examples of adaptive mechanisms.
- When trying to determine adaptive or maladaptive behaviors, consider the frequency, intensity, and duration of use by the client.

Mental Health Concepts

- Suppression and repression can be used in maladaptive behaviors.
- Behaviors become maladaptive if they are being used too frequently or inappropriately.
- Displacement and reaction formation can be used maladaptively as well.

Coping Mechanisms

- Altruism is dealing with anxiety by reaching out to others.
- Sublimation is dealing with unacceptable feelings or impulses by unconsciously substituting acceptable forms of expression.
- Suppression is voluntarily denying unpleasant thoughts or feelings.

Substance Use and Other Disorders and Dependencies

- You should always do a review of systems within your assessment.
- Some clinical findings are blackout or loss of consciousness, changes in bowel movements, weight loss or weight gain, the experience of stressful situations, sleep problems, and chronic pain.

- If a client is experiencing opioid intoxication, you may see slurred speech, impaired memory, pupil dilation, decreased respirations and level of consciousness, and maladaptive behavioral or psychological changes including impaired judgement and social functioning.

Pharmacological and Parenteral Therapies

Dosage Calculation

- Nurses are responsible for administering the correct medication by calculating the precise amount of medication to give.
- 1mg = 1000 mcg
- 1 kg = 2.2 lbs

Adverse Effects/ Contraindications/ Side Effects/ Interactions

- Phenelzine is a CNS stimulant and can cause anxiety, agitation, hypomania, and mania.
- This medication can also cause orthostatic hypotension.
- Educate your client to move slowly especially when getting up from the sitting or lying position.

Adverse Effects/ Contraindications/ Side Effects/ Interactions

- Risperidone is an antipsychotic.
- It is a Pregnancy Risk C Category medication meaning that it should be used during pregnancy.
- Clients should avoid the concurrent use of alcohol.

Medication Administration

- Benztropine is an antiparkinsonian medication.
- It is used to treat extrapyramidal effects such as acute dystonia in 1st generation antipsychotics.
- It is also used in pseudo parkinsonism.

Reduction of Risk Potential

Laboratory Values

- Clients who have diabetes mellitus should have a fasting blood sugar baseline.
- Blood glucose should be monitored carefully.

- Use cautiously in clients with a history of cardiovascular or cerebrovascular disease, seizures, or diabetes mellitus.