Reflection Assignment

Noticing	Interpreting	Responding	Reflecting
What did you notice during your **mental status examination** of the client? Were there any assessments that were abnormal or that stood out to you?	If something stood out to you or it was abnormal, explain it's potential cause or patterns that you noticed. Describe any similar situations you have experienced / as well as the similarities or differences between the experiences. Is your interpretation of the situation links to pathophysiology at all, if so – briefly explain.	What additional assessment information do you need based upon your interpretation? What can you do as a nursing student? What did you do? What could you do as a nurse? What therapeutic communication techniques did you utilize?	What is something that you learned? What is something that you might do differently in the future? What is something that you did well? What additional knowledge or skills do you need to help you with future situations like this. Describe any changes in your values or feelings based on this interaction.
During the assessment of this client, I noticed that she was very eager to answer questions. The client maintained eye contact throughout the conversation and seemed to be able to anticipate what I was going to ask next. I also noticed that the client would dissociate from the conversation and I would have to repeat what I had said. The client was well groomed and appeared to be in a good mood despite claiming that she was overstimulated and anxious.	The client was anxious and overstimulated due to an altercation she had right before my assessment with a staff member. The client believed the staff member had yelled at her and she became upset. After calming down, I was able to assess the client and she stated that she did not want the staff member to get in trouble and I could tell that she was anxious that he was going to get fired because of the altercation. This obviously upset her, and I believe that she was thinking about this when she was dissociating.	I needed to ensure that the client was calm and comfortable enough to answer my questions. To do this, I first approached the client by asking her about the picture she had colored that she was holding in her hand. I did this hoping that the client may open up to me more and it seemed to work. I also should have asked the client to described what was happening when she dissociated. I did not think about it at the time and I now think that it could have been valuable information to have.	During this assessment, I learned that often times sitting with a patient and talking a little bit about their interests can make them open up more during other conversations. I spent less than five minutes talking to my client and getting to know her, but that time allowed her to feel comfortable enough to answer my questions. I was also able to understand that sometimes simply talking to the patient can be a very effective treatment. Sometimes human connection can be the most powerful tool in a nurse's arsenal.

Mental Status Exam

Client Name	AF	**Date**	2/2/2024

OBSERVATIONS

Appearance	☒ Neat	☐ Disheveled	☐ Inappropriate	☐ Bizarre	☐ Other
Speech	☒ Normal	☐ Tangential	☐ Pressured	☐ Impoverished	☐ Other
Eye Contact	☐ Normal	☐ Intense	☐ Avoidant	☒ Other	
Motor Activity	☒ Normal	☐ Restless	☐ Tics	☐ Slowed	☐ Other
Affect	☒ Full	☐ Constricted	☐ Flat	☐ Labile	☐ Other

Comments: Eye contact was more than normal but not quite intense.

MOOD

☐ Euthymic ☒ Anxious ☐ Angry ☐ Depressed ☐ Euphoric ☐ Irritable ☒ Other

Comments: Client was anxious and overstimulated following an altercation with a staff member.

COGNITION

Orientation Impairment	☒ None	☐ Place	☐ Object	☐ Person	☐ Time
Memory Impairment	☒ None	☐ Short-Term	☐ Long-Term	☐ Other	
Attention	☒ Normal	☐ Distracted	☐ Other		

Comments:

PERCEPTION

Hallucinations	☒ None	☐ Auditory	☐ Visual	☐ Other
Other	☒ None	☐ Derealization	☐ Depersonalization	

Comments: Client would sometime dissociate during our conversation.

THOUGHTS

Suicidality	☐ None	☒ Ideation	☐ Plan	☐ Intent	☐ Self-Harm
Homicidality	☒ None	☐ Aggressive	☐ Intent	☐ Plan	
Delusions	☒ None	☐ Grandiose	☐ Paranoid	☐ Religious	☐ Other

Comments: Client stated the she had thought about killing herself but said she wouldn't have the courage.

BEHAVIOR

☒ Cooperative ☐ Guarded ☒ Hyperactive ☐ Agitated ☐ Paranoid
☐ Stereotyped ☐ Aggressive ☐ Bizarre ☐ Withdrawn ☐ Other

Comments: Client was very eager to answer my questions, sometimes almost to eager.

INSIGHT	☐ Good ☒ Fair ☐ Poor Comments:
JUDGMENT	☐ Good ☒ Fair ☐ Poor Comments: