

Ticket To Enter: Week 4-6 Unit 2

1. What are the different types of stress reduction you can teach a patient?
 - Cognitive techniques, behavioral techniques, journal writing, priority restricting, biofeedback, mindfulness, and assertiveness training.
2. Name 2-3 adaptive coping mechanisms.
 - a. Meditation/ Relaxation techniques
 - b. Exercise
3. Name 2-3 maladaptive mechanisms that can contribute to worsening symptoms (least helpful).
 - a. Denial: Pretending the truth is not reality to manage unpleasant, anxiety-causing thoughts or feelings.
 - b. Substance abuse
4. What are the symptoms of a panic attack?
 - Palpitations, shortness of breath, choking or smothering sensation, chest pain, nausea, feelings of depersonalization, fear of dying or insanity, chills or hot flashes.

Name 3 nursing actions that can help during severe to panic level anxiety.

- a. Provide a calm presence and stay with the patient
 - b. Provide a calm and quiet environment
 - c. Speak slowly and low-pitched
5. What patient education would you provide for a patient starting on an antidepressant?
 - Educate on side effects, safety, onset, and adherence of the medication (dosage, route), and to avoid alcohol.
 6. What are the black box warnings for children and adolescents for SSRIs?
 - Increased risk of suicidal thoughts and behaviors (fluoxetine).
 7. Define the terms below and give an example of use for a mental health disorder in Unit 2.

- a. Cognitive behavioral therapy: Uses both cognitive and behavioral approaches to assist a client with anxiety management. This therapy takes into account what clients think influences their feelings and behaviors.
 - Ex: Depression. Monitor the client's thoughts.
 - b. Dialectical behavioral therapy: Cognitive behavioral therapy for clients who have a personality disorder and exhibit self-injurious behaviors. This therapy focuses on gradual behavior changes and provides acceptance and validation for these clients.
 - Ex: Suicidal ideation. Encourage the client to keep a journal to track feelings and thoughts.
 - c. Guided imagery: The client is guided through a series of images to promote relaxation. Images vary depending on the individual.
 - Ex: PTSD. Teach the client deep breathing.
 - d. Play therapy: In the form of play while talking about a common experience.
 - Ex: Providing art supplies to invite the patient to draw out or color a story about their feelings.
 - e. Exposure therapy: Clients are placed into a virtual controlled environment where the therapist, in person or remote, can help alleviate depression, anxiety, phobias, PTSD, and attachment issues.
 - Ex: A patient has social anxiety. The patient practices speaking in front of trusted people, then eventually a larger group with decreased anxiety.
8. T or F: A ritualistic behavior performed by an individual with OCD helps reduce anxiety. The nurse knows this is a permanent relief of symptoms.
 9. T or F: A nurse is role-playing as a store clerk. This nursing action is beneficial in helping the patient with social skills development.
 10. A nurse is developing a nursing diagnosis for a patient with borderline personality disorder. Give an example of a priority nursing diagnosis and give one outcome.
 - a. Nursing diagnosis: Ineffective coping related to harmful responses to stress, as evidenced by impulsive behaviors.
 - b. Outcome: The patient will not self-harm throughout the hospital stay.
 11. A patient with Anti-social personality disorder can be diagnosed at age 15?
 12. Why is important to know how to demonstrate limit-setting when caring for personality disorders?

- It gives the client clear and consistent boundaries while also promoting their safety by reducing the risk of impulsive and aggressive behaviors.