

Sam Harris - Schizophrenia

Sam Harris, a 40-year-old male, is brought to the emergency department by the police after being violent with his father. Sam has multiple past hospitalizations and treatment for schizophrenia. Sam believes that the healthcare providers are FBI agents and that his apartment is a site for slave trading. He believes that the FBI has cameras in his apartment to monitor his moves and to broadcast them on TV.

Initial Assessment

The nurse asks Mr. Harris what he would like to be called and he replies, "You've seen me on TV. My name is Sam!" The nurse assesses that Sam's behavior is guarded and suspicious.

1. Based on this assessment, what is the most important nursing intervention?

- Establish rapport and trust.
- Assess for hallucinations.
- Maintain adequate social space.
- Plan to give a PRN antipsychotic.

2. What is the most accurate assessment if the client believes that the healthcare providers are FBI agents and that there are cameras in his apartment to monitor his moves?

- Hallucinations.
- Delusions.
- Confabulation.
- Thought broadcasting.

The nurse understands that Sam has a thought disorder rather than a mood disorder. Thought disorders include psychosis and schizophrenia.

3. Which behavior is characteristic of a thought disorder?

- Blunted affect.
- Irritability.
- Lability of mood.
- Preoccupation with guilty feelings.

Mental Status Exam

The nurse completes the mental status exam and records that Sam's grooming and hygiene are fair. Sam continually paces in the hall and is unable to sit still for longer than 1 or 2 minutes. His speech is rapid and difficult to follow. He describes his mood as "blasÉ." His affect is anxious, and his facial expression is blunted. He is inattentive and appears distracted.

4. The nurse understands that schizophrenia can be differentiated from psychosis by which assessment?

- Disorganized speech.
- Disorganized behavior.
- Auditory hallucinations.
- Negative symptoms.

5. Which finding depicts negative symptoms of schizophrenia?

- Difficulty sitting still.
- Rapid and disorganized speech.
- Flat affect and social inattentiveness.
- Delusional statements.

6. Which nursing problem has priority?

- Ineffective community coping.
- Disturbed thought processes.
- Sensory-perceptual disturbance.
- Ineffective denial.

Medications

Sam is unable to report his current medication regimen, so the nurse contacts his case worker to find out what medications Sam is taking. Additional information from the case worker indicates that Sam has been sleeping only 3 to 4 hours each night for the past few nights. Sam has demonstrated less energy and states that he feels "really bad and pretty down." The case worker reports that Sam was taking fluphenazine (Prolixin) 5 mg in the morning and 10 mg at bedtime, along with benztropine (Cogentin) 2 mg BID because he cannot afford the newer antipsychotics such as olanzapene (Zyprexa).

7. What is the reason that Prolixin is prescribed for this client?

- Disorganized thoughts.
- Difficulty sleeping at night.
- Feelings of depression.

- Stabilize client's mood.

8. The nurse understands that a client with schizophrenia will experience which benefit from fluphenazine decanoate (Prolixin decanoate) if it is administered intramuscularly?

- Prevent more extrapyramidal side effects.
- Maintain long-term medication compliance.
- Minimize side effects from benztropine (Cogentin).
- Prevent risk of cardiac or renal disease.

Legal Issue: Involuntary Admission

Sam refuses treatment and wants to leave the Emergency Department. The client is admitted involuntarily for 96 hours.

9. Which client behavior validates the need for involuntary hospitalization?

- Beliefs about FBI surveillance.
- Diagnosis of schizophrenia.
- Violence towards father.
- Guarded and suspicious.

After 96 hours of involuntary commitment, a client must be asked to sign consent for hospitalization.

10. If a client who has voluntarily chosen to be hospitalized should want to leave the hospital, which assessment would be most important in deciding to release the client against medical advice (AMA)?

- Mental status of client.
- Reason that client wants to leave.
- Response to medications.
- Potential danger to self or others.

Adverse Effects

Sam is admitted to the mental health unit for 96 hours. The nurse reviews the routine admission lab and medication prescriptions and notes that the client will resume the fluphenazine (Prolixin). The benztropine (Cogentin) has not been prescribed.

11. Which nursing action is best?

- Obtain a prescription to begin the Cogentin.
- Monitor Sam for medication side effects.
- Ask Sam if he had any side effects from the Prolixin.
- Do not give the Prolixin and document the reason.

12. Which side effects would the nurse most likely observe with fluphenazine (Prolixin), a traditional antipsychotic?

- High extrapyramidal effects, low anticholinergic effects.
- High anticholinergic effects and low extrapyramidal effects.
- Risk for agranulocytosis, fever, and elevated blood pressure.
- Blood dyscrasias such as thrombocytopenia.

The nurse asks Sam if he has any allergies to medications. He reports an allergy to haloperidol (Haldol). The nurse asks him to describe the type of reaction he experienced. Sam states, "My neck got real stiff, and I couldn't move it."

13. What type of reaction should the nurse suspect?

- Akathisia.
- Dystonia.
- Parkinsonism.
- Synergistic.

Delusional Thoughts and Hallucinations

In addition to Sam's thoughts that the FBI had cameras in his apartment and that his moves were broadcast on TV, reassessment by the nurse indicates that he remains suspicious and guarded with orientation only to day and place. Sam believes that he is a famous movie star and explains to the nurse that a limousine driver will be there to get him later in the day.

14. How should the nurse respond?

- Everything is confidential, so I doubt this will happen.
- I know that this is probably unlikely. What do you think?
- What if the limousine does not get here?
- It sounds like you are anxious to leave here.

15. How should the nurse interpret Sam's belief that he is a famous movie star and that a limousine driver will arrive to get him later in the day?

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- Psychotic thinking.
 - Delusional thoughts.
 - Flight of ideas.
 - Confabulation.

16. In planning this client's care, what is the most important short-term client outcome?

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- Interact without expressing delusional thoughts.
 - Create a support network within the community.
 - Identify at least one symptom management technique.
 - Identify actions to take to prevent relapse.

During reassessment of the client, the nurse notices that Sam sometimes pauses and mumbles something quietly to himself. He tilts his head to one side and then returns his attention to the nurse.

17. What is the best response by the nurse?

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- What are you thinking right now?
 - Tell me about how you're feeling.
 - Are you hearing any voices?
 - I notice that you talk to yourself.

Sam smiles at the nurse but refuses to answer.

Group Therapy

On the third day of hospitalization, the nurse must assign Sam to one of the unit groups.

18. Which group is most therapeutic for Sam?

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- Structured medication group.
 - Unstructured group about personal issues.
 - Psychoeducational group about self-esteem.
 - Supportive therapy group.

Sam agrees to participate in a group that is scheduled to last for 3 weeks. He remains attentive and responds to questions when asked. During the first group he shares, "The medications cause too many side effects. I have been taking them for a long time."

19. Based on Sam's statement, which nursing problem should the nurse document for the group progress note?

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- Ineffective denial.
 - Knowledge deficit.
 - Ineffective coping.
 - Risk for adherence.

Causes and Symptom Triggers

The following week, another client in the group asks the nurse leader why individuals develop schizophrenia.

20. Which understanding is most accurate?

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- There is an imbalance of the brain neurotransmitters dopamine and serotonin.
 - There is a marked increase in brain volume, which causes abnormal functioning.
 - Schizophrenia develops when at least one parent or distant relative has schizophrenia.
 - This brain disorder has many predisposing factors and a biological basis.

Since most of the clients in the group have schizophrenia, the nurse leader decides to talk about symptom triggers in the final group session.

21. How should the nurse explain symptom triggers to the clients?

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- Symptom triggers are stressors that lead to increased difficulty handling anger.
 - Symptom triggers can be related to health, the environment, or attitudes.
 - Symptom triggers are behaviors that lead to medication noncompliance.
 - Symptom triggers are stressors caused by hospitalization.

One client in the group asks, "Why do we need to know about symptom triggers?"

**22. Which explanations are best?
Select all that apply (3 correct answers)**

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- Knowing symptom triggers and how to manage them can help prevent relapse.
 - Identifying symptom triggers may prevent the risk of violence and promote safety.
 - Managing symptom triggers promotes communication with your caseworker.

- Keeping informed about triggers allows you to increase your medications immediately.
- Reducing exposure to triggers helps improve the client's prognosis by minimizing relapses.

Negative Symptoms of Schizophrenia

After 3 weeks of hospitalization, Sam continues to be delusional and talk to himself. The nurse often finds him sitting alone in the dining area. He declines some of the group activities and sits for several hours without initiating any activity. Persistent nursing interventions are required to get Sam to perform routine tasks.

23. Which nursing assessment accurately describes Sam's lack of energy?

- Apathy.
- Anhedonia.
- Avolition.
- Affective.

24. Which nursing problem should be included on the treatment plan?

- Impaired adjustment.
- Social isolation.
- Anxiety.
- Confusion.

Atypical Antipsychotics

Sam's healthcare provider decides to discontinue the fluphenazine (Prolixin) and begin a new antipsychotic, olanzapine (Zyprexa). Sam's caseworker is contacted and financial arrangements are made for Sam to receive the Zyprexa.

25. Which data is most important to obtain before Sam begins the Zyprexa, which is an atypical antipsychotic?

- Baseline weight.
- Orthostatic blood pressure.
- Complete blood count.
- Screening for tardive dyskinesia.

The nurse recalls that the atypical antipsychotics have different side effects than traditional antipsychotics.

26. Which side effect(s) are characteristic of atypical antipsychotics?

Select all that apply (2 correct answers)

- Increased tardive dyskinesia.
- Less incidence of weight gain.
- Fewer extrapyramidal effects.
- More extrapyramidal effects.
- Dry mouth.

27. The nurse understands that an atypical antipsychotic like olanzapine (Zyprexa) requires what period of time to reach a steady state?

- 2 weeks.
- 4 or more weeks.
- 1 week.
- 2 days.

The nurse is hopeful that Sam will respond favorably to the new antipsychotic. The nurse recalls that another client with schizophrenia was treated with olanzapine (Zyprexa) without a positive response. When that client failed to respond, several other atypical antipsychotics were given to manage the client's symptoms.

28. Which medication with potentially life-threatening side effects should the nurse expect the healthcare provider to prescribe for clients who do not respond to the use of other antipsychotics?

- Clozapine (Clozaril).
- Haloperidol decanoate (Haldol decanoate).
- Fluphenazine decanoate (Prolixin decanoate).
- Perfenazine (Trilafon).

Speech and Thought Processes

After several weeks, Sam begins to demonstrate more initiative to attend daily groups without prompting by the nurse. He awakens in the morning for the community meeting but continues to answer questions only when asked. Answers to questions are simple, one-word answers without any elaboration.;

29. Which speech process should the nurse document on the daily mental status exam record?

- Loose associations.
- Tangential.

- Monotone.
- Poverty of speech.

When the nurse asks Sam to share one goal for the day in community meeting, he states, "I'm going to take a shower and . . ." He pauses for several seconds and begins talking again.

30. Which thought process does this exemplify?

- Concrete thinking.
- Flight of ideas.
- Word salad.
- Thought blocking.

Evaluation of Goal Achievement

The nurse further assesses Sam's mental status to determine if he still has thoughts about FBI agents spying on him and hiding cameras in his apartment. The long-term goal is that Sam will not experience delusional thoughts by discharge.

31. Which intervention by the nurse will best assess if this goal has been met?

- Observe Sam for signs of talking to himself.
- Talk to Sam for at least 20 minutes.
- Ask Sam to describe how he feels.
- Ask Sam to explain how the medication helps him.

Because Sam was violent with his father prior to admission, another long-term goal is that the client will not verbalize the desire to harm himself or others.

32. Which statement will assist the nurse to assess if this goal has been met?

- Do you have a history of violence?
- Tell me about the relationship with your father.
- How do you feel about your father now?
- Do you think about hurting anyone now?

Symptom Management Techniques

Sam talks to the nurse for nearly 30 minutes without mentioning FBI agents in his apartment. When the nurse asks him about plans for discharge, Sam states that he wants to return to his apartment. He denies having any thoughts of hurting himself or others.

The treatment team meets to review Sam's discharge plan and his response to the new atypical antipsychotic medication. The discharge plan is to dismiss the client in 1 week. A criterion for discharge is that Sam will attend a weekly wellness group.

33. What will be the most important group activity to promote wellness in the community?

- Explore symptom management.
- Review education about medications.
- Practice social skills.
- Identify community coping resources.

The nurse plans to teach the group members about symptom management techniques.

34. What is the first step the nurse should use to teach about effective symptom management?

- Talk about specific support systems.
- Review current ways to manage symptoms.
- Identify problem symptoms.
- Discuss other ways to manage symptoms.

35. After implementing the first step, what step is taken next?

- Identify current ways to manage symptoms.
- Talk about specific support systems.
- Discuss other ways to manage symptoms.
- Develop a new symptom management plan.

A behavioral intervention that the nurse plans to teach the clients includes ways to cope with symptoms such as hallucinations and delusions.

36. Which strategy is best for clients who hear voices?

- Avoid certain situations.
- Smoke more cigarettes.
- Decrease caffeine use.
- Take more medication.

Relapse Prevention

The nurse plans to talk about relapse prevention.

37. What is the most common cause of relapse in a client with schizophrenia?

- Symptom management.
- Medications.
- Lack of community support.
- Health practices.

A client in the wellness group states that he was taking his medications every day and started hearing voices more and had to be hospitalized.

38. What is the nurse's best response?

- This can happen even if you are taking medications every day.
- Maybe you forgot to take some of your medication.
- How long have you been taking your medications?
- Compliance with medications will prevent relapse.

One week later, Sam has achieved the long-term goal to be free of delusions, and he has attended the wellness group to promote wellness in the community. Sam's community case worker has been contacted about the discharge plans and the need for transportation to Sam's apartment.

39. What is the greatest benefit of a caseworker for this client?

- Coordinate services for Sam.
- Make sure Sam takes his medications.
- Empower Sam to be independent.
- Provide guidance for disability income.

Case Outcome

Sam returns to his apartment. He continues to attend the wellness group. He shares with his caseworker that he is not happy with the weight he has gained, but for the present he is willing to remain on his medication.
