

**Week # 9**

**( GRAND ROUNDS )**

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PRAC 6675: PMHNP Care Across the Lifespan I

Faculty Name: Walden University

Assignment Due Date 07/30/23

# NRNP/PRAC 6665 & 6675 Comprehensive Focused SOAP Psychiatric Evaluation Template

## Subjective:

**CC** (chief complaint): "I need to stop drinking". I need to learn from my mistake "

**HPI:** E.H is a 59 years old white male with a past medical history significant for alcohol abuse disorders, polysubstance abused, Hypertension, presents to the clinic for initial consult after being discharge from the hospital due to alcohol withdrawals, associated symptom nausea, and rectal bleeding at the time of evaluation patient seems to be anxious, poor concentration, disheveled, (urine smelling)  
Patient reports he is homeless, usually hangs out in the Brickell area and has been drinking 3-4 (4 Loko's) per day. He is interested in rehab at this time. He has multiple admissions to the hospital for detox and complications related to alcohol withdrawal. He also reports non-compliance with psychotropic medications, however he used to follow up at New Horizons and plans on re-initiating care. He is not experiencing active withdrawal symptoms. Patient is requesting help and agreed to go to the hospital as voluntary, to receive medical treatment. Reports increased depression, anxiety, lack of sleep, denies, mania or paranoid delusions. Denies a/v/t hallucinations or suicidal ideations.

**Substance Current Use:** hx of alcohol use- 4 Loko's (3-4/day)

hx of daily cannabis use

hx of cigarette smoking- reports 10 a day

-Past Marchman Act.

-Past Detox/Rehabilitation: multiple detox admissions

-AA/NA Participation: denies

-Past Medical Complications: multiple admissions for complication of alcohol

**Medical History:** -Diagnoses: Schizoaffective disorder, Cannabis Use Disorder, alcohol use disorder

-Past Hospitalizations: multiple

-Outpatient: non-compliant, was going to New Horizons

-ECT: denies

**Current Medications:** Abilify 5mg PO daily, Gabapentin 400mg PO TID, Cymbalta 30mg PO daily, Trazodone 100mg PO qhs

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**Allergies:** NKA

**Reproductive Hx:** No issue identified

**ROS:**

- **GENERAL:** Patient in sitting position , looks anxious and guarded.
- **HEENT:** Normocephalic, atraumatic. Pupils equal, round, reactive to light and accommodation.
- **SKIN:** Skin is warm and dry with no edema. Capillary refill is less than 3 seconds. Normal skin turgor with no tenting.
- **CARDIOVASCULAR:** Regular rate and rhythm. No gallops, murmurs, or rubs.
- **RESPIRATORY:** Positive for coughing, dry cough. No thoracic pain. No hemoptysis.
- **GASTROINTESTINAL:** No nausea, vomiting, diarrhea, constipation, or bright red blood per rectum.
- **GENITOURINARY:** No dysuria, hematuria, frequency or hesitancy.
- **NEUROLOGICAL:** Awake and alert
- 1. Cranial nerve #1: Olfactory, smell grossly intact.
- 2. Cranial nerve #2: Optic, vision grossly intact.
- 3. Cranial nerve #3: Oculomotor, eyelid and eyeball movements grossly intact.
- 4. Cranial nerve #4: Trochlear, grossly intact.
- 5. Cranial nerve #5: Trigeminal, chewing grossly intact.
- 6. Cranial nerve #6: Abducens/turns eye laterally, grossly intact.
- 7. Cranial nerve #7: Facial, mouth, facial expression grossly intact.
- 8. Cranial nerve #8: Vestibulocochlear, auditory grossly intact.
- 9. Cranial nerve #9: Glossopharyngeal, gag reflex grossly intact.
- 10. Cranial nerve #10: Vagus, gluteal sounds grossly intact.
- 11. Cranial nerve #11: Spinal, shrug shoulder equally grossly intact.
- 12. Cranial nerve #12: Hypoglossal, sticks tongue out of the mouth straight, grossly intact.
- **MUSCULOSKELETAL:** Moving equally both upper and lower extremities.
- **HEMATOLOGIC:** Anemia
- **LYMPHATICS:** No lymph nodes palpable in the head and neck, no swelling, no asymmetry, no discoloration or increased temperature.
- **ENDOCRINOLOGIC:**WNL

**Objective:**

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**Diagnostic results:** Hemoglobin 11.3 g/dl HCT: 35.0 GGT:119 AST:73 ALT:79  
CK:354 NA:133 K:3.3

Date Time	Temp	Pulse	Resp	B/P	O2	O2 Flow	FiO2
06/29 0800	36.0	91	16	173/90	99		

## Assessment:

### Mental Status Examination:

- Orientation: Ox3
- Appearance and Behavior: 59 y/o white man, appears older than stated age, urine smell, anxious but cooperative
- Motor/Gait: no agitation or aggression noted. No abnormal movements
- Eye Contact: fair
- Speech: low tone
- Mood: "I'm ok"
- Affect: restricted
- Thought Process: organized
- Thought Content: pre-occupied with living situation
- Perceptual disturbances: no a/v/t hallucinations, not ris
- Suicidal thoughts/Intent/Plan: denies
- Homicidal thoughts/Intent/Plan: denies
- Insight/Judgement: Poor.
- Attention/Concentration: fair/fair
- Memory: appears intact
- Language: English
- Fund of knowledge: baseline for level of education

## Diagnostic Impression:

Alcohol dependence with withdrawal delirium (F10.231)  
Schizoaffective disorder, by history  
Cannabis Use Disorder

**Reflections:** Reflection is necessary to the treatment process because it enables those in recovery to really think about themselves and their past to help determine the reasons behind their addiction and how they can remain sober. Through CBT (Cognitive Behavioral Therapy) patient will learn how to use thought journaling technique and mindful meditation to show him the connection between his thoughts, emotions and behavior.

Patient Will Learn The Steps To Being Reflection Like :

# NRNP/PRAC 6665 & 6675 Comprehensive Focused SOAP Psychiatric Evaluation Template

Identification And Awareness Of Emotions And Feelings

The Ability To Stay With And Accept These Emotions Or Feelings To Process Them

Processing The Emotion/Feeling In Order To Act On It Appropriately

Addressing The Emotion Or Feeling

Reflective Writing

## Case Formulation and Treatment Plan:

Psychiatric Consult Recommendations:

Medication recommendations:

Continue Abilify 5mg PO daily- psychosis and mood stabilization

Continue Cymbalta 30mg PO daily- depression

Trazodone 100mg PO qhs prn- insomnia

Losartan Potassium (COZAAR) 100 MG DAILY PO

New medication :

Folic Acid (FOLIC ACID 1 MG TAB) 1 MG DAILY PO

Thiamine HCl (VITAMIN B-1) 100 MG DAILY PO

Labs/imaging recommendations:

Reviewed : Hemoglobin 11.3 g/dl HCT: 35.0 GGT:119 AST:73 ALT:79 CK:354 NA:133 K:3.3

x-ray :WNL

**Safety**

-At risk of harm to self or others: No

-Needs 1:1 sitter: No

-Requires video monitoring: No

-Baker Act status: None

-Marchman act status: No

**Precautions:**

-Fall risk: Yes

-Seizure: Yes

-Elopement: No

-Suicide: No

-Substance use withdrawal: Yes

**Disposition:**

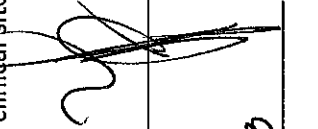
# NRNP/PRAC 6665 & 6675 Comprehensive Focused SOAP Psychiatric Evaluation Template

- Need transfer to a voluntary psychiatry inpatient for alcohol abuse, self-neglect, increased depression and anxiety
- SW to assist with safe discharge planning, aftercare and substance abuse referrals once patient gets discharge from the hospital.
- Outpatient Clinics
  - Miami switchboard number for mental health and social services: 211
  - Jackson Behavioral Health Hospital Adult Outpatient Psychiatry clinic (AOPC): 1695 NW 9th Ave, Miami FL 33136, 305-355-7147
  - Jackson North CMHC Adult Outpatient: 15055 NW 27th Ave, Opa Locka, FL 33054, 786-466-2800
  - UMH Outpatient Psychiatry: 305-243-2301
  - Banyan Health Centers: 305-252-4840
  - Citrus Health Network: 4175 West 20th Ave, Hialeah, FL 33012, 305-825-0300
  - New Horizons: Psychiatrist/Psychologist/Case Management: 1469 NW 36th St, Miami FL 33142, 305-635-7444 or 305-635-0366 (walk-in appointments M-F 8-5)
  - Douglas Gardens CMHC: 1680 Meridian Ave, 5th floor, Miami Beach, FL 33139, 305-531-5341
  - Miami Behavioral Health Center: 3850 West Flagler St, Miami FL 33134, 305-774-3300
  - Community Health of South Florida, Inc. (CHI): 10300 SW 216th St, Miami, FL 33134, 305-252-4840
  - Guidance Care Center (Monroe County): 305-434-7660
- For substance abuse: Central Intake Unit, 3140 NW 76 Street, Miami, Florida 33147, 786-878-6480

## PRECEPTOR VERIFICATION:

I confirm the patient used for this assignment is a patient that was seen and managed by the student at their Meditrek approved clinical site during this quarter course of learning.

Preceptor signature: \_\_\_\_\_



Date: 06/30/23

## References

*American Psychiatric Association. (2022). Diagnostic and statistical manual of mental disorders (5th ed., text*

## NRNP/PRAC 6665 & 6675 Comprehensive Focused SOAP Psychiatric Evaluation Template

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