

# JHH ED -Psychiatric Nursing Documentation

## Documenting on behavioral health complaints

The documentation pieces needed for behavioral health patients have been moved from a separate navigator into the ED Narrator. This will allow for less jumping back and forth between activities in the chart.



### Try It Out

1. Open the patient's chart, go to the **ED Narrator** (1), and select the **Behavioral Health** section (2):

ED Narrator

Code Narrator

Sedation Narra...

Trauma Narrator

Disposition

MAR

Manage Orders

Boarders

Stroke

Post Mortem

Assessments

There are no existing LDAs

No orders need to be resulted

IVs

Tubes

Drains

Airways

Wounds

Quick Notes

Procedures

General

Restraints

Blood Administration

Assisted Procedures

Behavioral Health

No signed & held orders need to be released

2. This section is broken up into three activities:

Behavioral Health

+ Behavior Assessment

+ Milieu Documentation

+ Aggressive Management Indicator

3. The Behavior Assessment activities are:

Behavior Assessment

Time taken: 1026 7/22/2014

Show: Row Info Last Filed All Choices

Add Row Add Group Values By Create Note

Target Symptoms

Sleep Pattern No change Decreased Increased Early awak... Nightmares

Appetite No Change Decreased Increased Other (Comment)

Energy / Concentration No Change Decreased Increased Other (Comment)

Anxiety Yes No No change Decreased Increased Other (Co...)

Panic Attacks Yes No Other (Comment)

Delusions Yes No Other (Comment)

Paranoia Yes No Other (Comment)

Racing Thoughts Yes No Yes, after concentration Other (Comment)

Suicide Assessment

Suicidal Ideation Yes No Other (Comment)

Hallucinations

Hallucinations Yes No

Alcohol Use

Alcohol Use ? Yes No

Drug Use

Drug Use ? Yes No

Accept Cancel

4. The Milieu Documentation activities are:

**Milieu Documentation**

Time taken: 1031 7/22/2014 Show: Row Info Last Filed All Choices

Add Row Add Group Values By Create Note

**Patient Orientation**

Patient orientated to unit evaluation process, expectations and participation in plan of care Yes

**Hourly Milieu Note**

Activity Talking ADL's Calm/Quiet Pacing Verbally Aggre... Physically Agg...  
Refusing Meds Sitting Sleeping Standing Taking Meds

Location A B C D E F G Bathroom  
Seclusion ...

With RN CT Psychiatry Resi... PDC ED Attending ED Resident  
PA/NP Psychiatry Atte... Security Medical Student PA Student Other Staff

Accept Cancel

5. The Aggressive Management activities are:

**Day of the Week**

Day Monday Tuesday Wednes... Thursday Friday Saturday Sunday

**Precipitant / Event**

Precipitants (Check all that apply) Dementia Delusions Food issues Hallucinations Insists to leave Mental retardation  
Paranoid behavior / ideation Peer issues Response to environment Smoking issues Visitor / Family issues  
Other (Comment)

Events (Check all that apply) Verbal aggression to staff Verbal aggression to patients Physical aggression - objects  
Physical aggression - self, non-lethal Physical aggression - self, lethal Physical aggression to staff  
Physical aggression to patients Other (Comment)

**Interventions - Post Event**

None None

Medications Post Event Benzodiazepine Neuroleptic Other (Comment)

Verbal Intervention De-escalation techniques Limit Setting Other (Comment)

Restraints / Seclusion 6 point vest 10 point limb Genchair Open door seclusion  
Locked door seclus...

Observation Staff presence in milieu Placed on zoning Placed on observation Active security presence  
Decreased stimulation

Event Follow Up Emergency bell activated Witness contact(Comment)

**Post Event Process**

Process (Check all that apply) Individual nurse intervention Staff intervention Identified leader Team process

Patient Injury Level Assaulted - no intervention required Assaulted - with intervention Resulted in death Other (Comment)

Staff Injury Level Assaulted - no intervention required Assaulted - with intervention Resulted in death Other (Comment)

Accept Cancel