

PROTOCOL FOR: Individual Coping Impaired: Extended Hospital Stay

DESIRED

PATIENT OUTCOMES: 1. Patient will experience minimal anxiety/emotional distress during hospitalization.

CLINICAL  
ASSESSMENT

AND CARE:

1. Monitor for grieving behavior (for lifestyle that has been put on hold secondary to hospitalization). These include but are not limited to: denial, anger, depression, crying, guilt, withdrawal, disturbed sleeping/eating pattern. Assess non-verbal communication. Consult with Psychiatric Consultation Liaison Service as appropriate.
2. Monitor patients past responses to a major stress. (This may affect his/her response to this hospital stay.)
3. Possible interventions:
  - a. Encourage verbalization of emotions through the use of open-ended questions.
  - b. Involve significant others in patient's care.
  - c. Utilize social workers, chaplain, volunteers, and/or patient relations as appropriate.
  - d. Encourage involvement with Psych OT if appropriate, as per LIP order.
4. Encourage diversional activities based on assessment of patient level of knowledge, activity status, and age appropriateness.

REFERENCES: Medical-Surgical Standards Committee  
Nursing Standards Committee

EFFECTIVE DATE: 2/92

REVISION DATES: 9/03