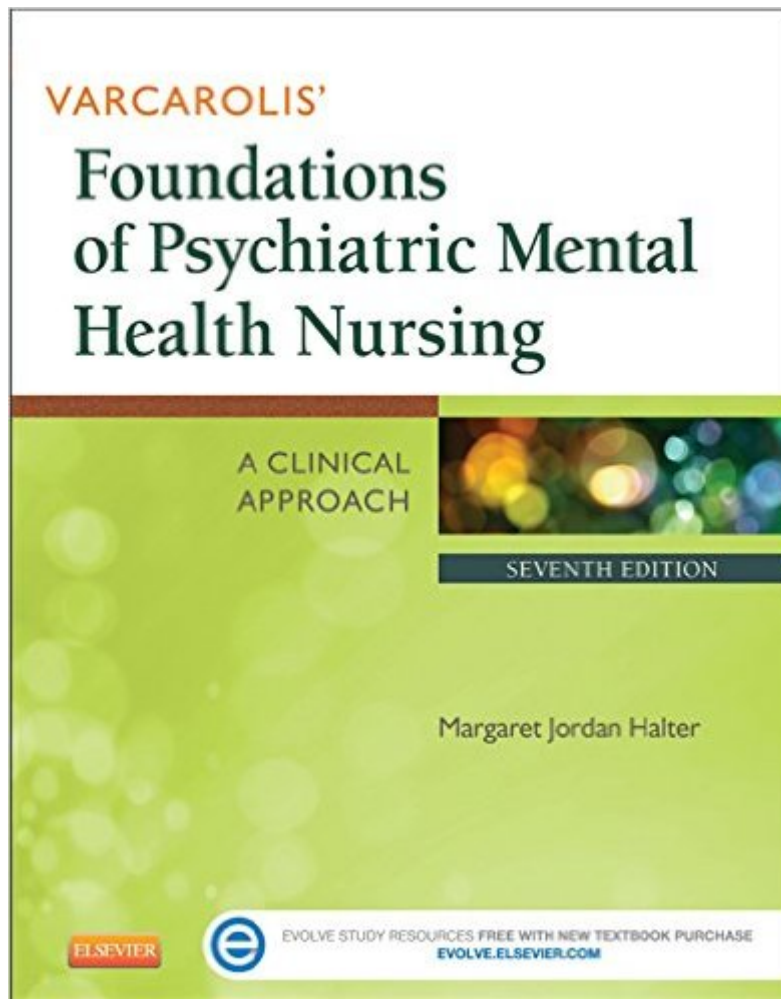


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Varcarolis' Foundations Of Psychiatric Mental Health Nursing: A Clinical Approach



Synopsis

The 7th edition of this market-leading textbook offers a clear, straightforward way to understand the often intimidating subject of psychiatric mental health nursing. Its practical, clinical perspective and user-friendly writing style help you quickly master key concepts. Clinical chapters follow the nursing process framework and progress from theory to application with a wealth of real-world examples to prepare you for practice. **UNIQUE!** A conversational, user-friendly writing style helps you quickly grasp complex psychiatric mental health nursing concepts. Clinical chapters are logically and consistently organized with sections on the clinical picture, epidemiology, comorbidity, etiology, and application of the nursing process. Clinical chapters follow the nursing process, providing you with consistent guidelines for comprehensive assessment and intervention. Vignettes prepare you for real-world practice with personal, descriptive characterizations of patients with specific psychiatric disorders. Coverage of psychopharmacology in clinical chapters familiarizes you with specific drug treatment options, including the most commonly used drugs and important nursing considerations for their use. Assessment Guidelines boxes list essential guidelines for comprehensive patient assessment. Case Studies with Nursing Care Plans present individualized histories of patients with specific psychiatric disorders and include interventions with rationales and evaluation statements for each patient goal. A separate chapter on cultural implications, as well as Considering Culture boxes throughout the text, provides essential information on culture, worldviews, and techniques for providing culturally competent care. Coverage of treatment and recovery in the community addresses the need for successful ongoing psychiatric mental health nursing care in the community setting. A chapter on end-of-life care examines the psychological impact of terminal illness and death on patients, families, and nurses. New content on integrative care âthis content will cover patient centered medical homes, integrated care clinics and the role of advanced practice nurses in psychiatric care *Relevant QSEN competencies will be introduced in Chapter One, Mental Health and Mental Illness, and will be integrated throughout the text. A common sense, and how it applies to practice, approach will be used to highlight the competencies relevant to psych nursing care such as safety, communication, evidence based practice and others. * Include more content and discussion on genetics as the basis for psychological disorders. Will consider a new chapter or add this content to Chapter 3, Biological Basis for Understanding Psychotropic Drugs *Enhance content on the health promotion and prevention of illness in pediatric patients *The author has secured a knowledgeable, expert contributor to develop meaningful, concept maps for the clinical chapters and we will work to revise our current concept map creator on Evolve to be more state of the art *Integrate the DSM-V to the extent that we know prior to publication to make our text as current as

possible. DSM-V content is to be released in Spring 2013 while our text is in production. All relevant and updated NANDA content will be included as well * The number of photos and illustrations will be increased to add to the appeal of the text (per reviewer comments). One example is to include normal brain images in the clinical chapters that are also accompanied by an image demonstrating clinical pathology (eg: schizophrenia)

Book Information

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Customer Reviews

The 3 paragraphs this book has about dyslexia, dysgraphia, and dyscalculia contain underrepresented, inaccurate descriptions of the specific learning disorders. This should not be the case for a mental health book. This book claims that the majority of these "learning disorders" are in 5% of average kids, 25% with (unidentified) special needs. The author claims the disorder is associated with "lower family education, poverty, and male gender" (p 189). Dyslexia is hereditary, which is often why the family may have a lower education or be impoverished. The hereditary element would be an extremely important fact to include in the book; if an adult is dyslexic, they have a 50% chance of their offspring having dyslexia. Further, the adult with dyslexia likely has no

idea he or she is dyslexic due to the fact that states are only now passing legislature require school screenings, and books like these give inaccurate and under-represented. Although the side effects, listed here are mostly accurate, they will be lessened if we can actually educate our medical professionals and teachers with accurate information, so that these kids can be identified and get the help they need! The author should reference that these kids with dyslexia, dyscalculia, & dysgraphia are intelligent, though they have difficulties decoding from paper. Halter makes it sound like they are unintelligent, they come from poor families, and most of them have a whole slew of problems. This is completely inaccurate. Dyslexics are highly intelligent, usually excel in art, building, or. athletics, though show poorly on paper, with reading difficulties which becomes more apparent by 3rd grade. Halter should also recommend Orton-Gillingham based training for these kids.

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