BAPTIST HEALTH SCHOOL OF NURSING
NSG 3037: PSYCHIATRIC-MENTAL HEALTH NURSING
POPULATIONS AT RISK FOR ALTERATIONS IN HEALTH:
PERSONS WITH HIV/AIDS and TERMINAL ILLNESS
Sheryl F. Banak, MSN, RN

LECTURE OBJECTIVES:

1. Discuss the human immunodeficiency virus (HIV) as the causative agent in the development of acquired immunodeficiency syndrome (AIDS).
2. Describe the pathophysiology incurred by HIV.
3. Discuss historical perspectives associated with HIV disease.
5. Identify predisposing factors to HIV disease.
6. Describe symptomatology associated with HIV infection and AIDS and use this data in client assessment.
7. Formulate nursing diagnoses and goals of care for clients with HIV disease.
8. Describe appropriate interventions for clients with HIV disease.
9. Identify topics for client and family teaching relevant to HIV disease.
10. Evaluate nursing care of clients with HIV disease.
11. Discuss various modalities relevant to treatment of clients with HIV disease.

READING ASSIGNMENT:


STUDY TIPS:

1. Complete ALL of the reading assignments.
2. USE the OBJECTIVES as STUDY QUESTIONS; explore each objective fully.
3. Complete the VOCABULARY LIST at the beginning of each chapter; the definitions are in the glossary of your text.
4. REALIZE that when you are studying this material, you are studying for:
   ~THIS TEST ~HESI TEST
   ~NCLEX-RN ~EXCELLENCE IN YOUR NURSING PRACTICE
5. STUDY REVIEW QUESTIONS AND CRITICAL THINKING EXERCISES AT THE END OF THE CHAPTER IN YOUR TEXT.
6. TEST QUESTIONS are derived from READING ASSIGNMENTS AND LECTURE.
7. STUDY RELATED QUESTIONS and MATERIAL IN NCLEX-RN REVIEW BOOK.
8. How do YOU learn best? Reflect on NET, ACT scores and your experiences thus far. Do you study better in a group? Alone? Use a combination? Is the group you are in effective? Make an appointment with your advisor if needed. Beth Nelson can also be of assistance (202-7411). IF YOU ARE HAVING PROBLEMS, GET HELP ASAP! THE ROTATIONS GO FAST IN JUNIOR AND SENIOR COURSES.
9. Spend time after each lecture to reread notes and look at book materials. Cramming is not effective. Daily exposure to notes, reading, practice questions, etc is your best help.
10. Take short breaks to walk, eat, drink water, etc while you study.
11. Get sufficient sleep the night before an exam.
12. Eat a healthy breakfast the morning of an exam.

(You may call me at 501 944-9501 for questions, clarifications, etc. as you study the materials. If you get my voice mail, please leave a message. Ms Banak)
LECTURE:

I. Introduction

II. Pathophysiology
   A. Normal Immune Response
   B. Immune Response to HIV

III. Historical Aspects

IV. Epidemiological Statistics

V. Predisposing Factors
   A. Sexual Transmission
      1. Heterosexual
      2. Homosexual
   B. Bloodborne Transmission
      1. Transmission in Blood Products
      2. Transmission by Needles Infected with HIV-1
   C. Perinatal Transmission
   D. Other Possible Modes of Transmission

VI. Application of Nursing Process
   A. Background Assessment Data
      1. Early-Stage (Category 1) HIV Disease (> or = 500 T4 cells/mm³)
         a. Acute (Primary) HIV Infection
            (1) Seroconversion
         b. Asymptomatic Infection
      2. Middle-Stage (Category 2) HIV Disease (499-200 T4 cells/mm³)
         a. Persistent Generalized Lymphadenopathy
3. Other Symptoms of Middle-Stage HIV Disease
   a. Fever
   b. Night Sweats
   c. Chronic Diarrhea
   d. Fatigue
   e. Minor Oral Infections
   f. Headaches

4. Late-Stage (Category 3) HIV Disease (<200 T4 cells/mm$^3$)
   a. HIV Wasting Syndrome
   b. Opportunistic Infections
      (1) *Pneumocystis carinii* Pneumonia
      (2) Cryptosporidiosis
      (3) Toxoplasmosis
      (4) Candidiasis
         (a) lung, brain infection most common with AIDS
      (5) Cytomegalovirus
      (6) Herpes Simplex
      (7) Herpes Zoster
      (8) Mycobacteria
   c. AIDS-Related Malignancies
      (1) Kaposi’s Sarcoma
      (2) Other Malignancies

5. Altered Mental Status
   a. Delirium
   b. Depressive Syndromes
   c. HIV-Associated Dementia

6. Psycho social Implications of HIV/AIDS

7. Psychiatric Disorders Common in Clients with HIV Infections
   a. Anxiety Disorders
   b. Major Depression
   c. Mania
   d. Dementia and Delirium
B. Diagnosis and Outcome Identification (Care Plans pp. 784-788-Big Townsend; check Little Townsend, too!)
   1. Ineffective Projection
   2. Interrupted Family Processes
   3. Deficient Knowledge
   4. Disturbed Thought Processes
   5. Risk for Suicide
   6. Impaired Adjustment

C. Planning/Implementation

VII. Treatment Modalities

A. Pharmacology
   1. Antiretroviral Therapy
   2. Other chemotherapeutic Agents
   3. Psychotropic Medications
      a. Antianxiety Agents
      b. Antidepressants
      c. Mood Stabilizers
      d. Antipsychotics

B. Universal Isolation Precautions
   1. Standard Precautions (p. 791)
      a. Hand washing
      b. Gloves
      c. Mask, Eye Protection, Face Shield
      d. Gown
      e. Patient-Care Equipment
      f. Environmental Control
      g. Linen
h. Occupational Health and Blood borne Pathogens
   (1) Sharps (Needles, Scalpels)
   (2) Use mouthpieces, resuscitation devices, other ventilation devices rather than mouth-to-mouth.

i. Patient Placement

2. Hospice Care (Terminal Care)

3. Incorporating HIV Prevention In the Medical Care of Persons Living with HIV
   a. Risk Screening
   b. Behavioral Interventions
   c. Partner Counseling and Referral Services, including Partner Notification

VIII. Summary