

NR 547 Week Five Exam Review

Review Depression screening across the lifespan.

Depression screening across the lifespan: Depression can occur at any age, and it is important to screen for depression at regular intervals throughout the lifespan. Screening for depression can include a patient interview, a depression rating scale, or a combination of both.

When do you consider Unipolar versus Bipolar depression.

Unipolar versus Bipolar Depression: Unipolar depression is characterized by symptoms of depressed mood, while bipolar disorder is characterized by alternating periods of depression and mania. It is important to differentiate between these two types of depression as the treatment approaches can be quite different.

Review Geriatric Depression Scale, indications, scoring and indications for treatment.

Geriatric Depression Scale: The Geriatric Depression Scale (GDS) is a widely used tool for screening for depression in older adults. It consists of 30 self-rated items and is designed to identify depression in older adults. The GDS has a scoring range from 0 to 30, with higher scores indicating a greater likelihood of depression. Treatment for depression in older adults should be considered if the GDS score is greater than or equal to 5.

Review DSM5 TR diagnostic criteria for depression and adjustment disorder with depressed mood

DSM-5 TR diagnostic criteria for depression and adjustment disorder with depressed mood: The DSM-5 TR provides diagnostic criteria for depression, including persistent feelings of sadness or hopelessness, loss of interest in activities, changes in appetite or sleep patterns, fatigue, and difficulty concentrating. Adjustment disorder with depressed mood is diagnosed when an individual experiences symptoms of depression in response to a specific stressor.

Review differentials for depressed mood including physical illnesses and medication/substance use.

Differentials for depressed mood: Differentials for depressed mood can include physical illnesses such as hypothyroidism, and the use of medications or substances such as steroids, benzodiazepines, or alcohol. It is important to consider these potential causes and to perform a thorough physical and mental health evaluation before making a diagnosis of depression.

When can anxious distress be used as a modifier?

Anxious distress as a modifier: Anxious distress can be used as a modifier when an individual is experiencing both symptoms of anxiety and depression. This modifier indicates that the individual is experiencing significant symptoms of anxiety in addition to symptoms of depression.

Which non-pharmacological measures are effective in treatment of depression and when are they appropriate

Non-pharmacological measures for the treatment of depression: Non-pharmacological measures such as psychotherapy, exercise, and mindfulness practices have been shown to be effective in the treatment of depression. These measures are appropriate for individuals who prefer non-pharmacological approaches, or for those who cannot tolerate or have contraindications to pharmacological treatments.

Antidepressant dosing including starting doses

Antidepressant dosing: Antidepressant dosing should be individualized based on the patient's symptoms, response to treatment, and tolerance of side effects. Starting doses for common antidepressants such as selective serotonin reuptake inhibitors (SSRIs) are typically in the range of 20-50 mg per day.

Review Bipolar screening across the lifespan

Bipolar screening across the lifespan: Bipolar disorder can occur at any age, and it is important to screen for bipolar disorder at regular intervals throughout the lifespan. Screening for bipolar disorder can include a patient interview, a bipolar rating scale, or a combination of both.

Review DSM5 TR diagnostic criteria for bipolar I versus bipolar II versus cyclothymia - how to differentiate

DSM-5 TR diagnostic criteria for bipolar I, II, and cyclothymia: Bipolar I disorder is characterized by manic or hypomanic episodes and depressive episodes. Bipolar II disorder is characterized by hypomanic episodes and depressive episodes. Cyclothymia is characterized by cyclical mood swings, with episodes of hypomanic symptoms alternating with depressive symptoms.

Review differentials for bipolar including physical illnesses and medication/substance use.

Differentials for bipolar disorder: Differentials for bipolar disorder can include physical illnesses such as hypothyroidism, and the use of medications or substances such as stimulants or alcohol. It is important to consider these potential causes and to perform a thorough physical and mental health evaluation before making a diagnosis of bipolar disorder.