

Anxiety Signs/Symptoms

Setting: **Behavioral Health** Population: **Adult** Keywords: **panic, phobia, GAD, anxious**

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Clinical Description

Care of the hospitalized patient experiencing signs/symptoms of anxiety.

Key Information

- Antidepressant discontinuation syndrome is a set of symptoms associated with the abrupt termination (or drastic reduction) of an antidepressant medication. Symptoms can resemble those of a persistent anxiety disorder.
- Many tools are available to assist in assessment and reassessment; however, these should not replace the clinical interview.
- Clinicians should avoid behaviors that could promote transference of anxiety, such as a hurried manner or talking too fast.
- The presence of cognitive symptoms can impact learning. Education should be reinforced and retention assessed.
- The coexistence of anxiety and substance use disorders is common. Concurrent treatment is the “gold standard” model of care.
- Anxiety must be reduced to a mild or moderate level before working on problem-solving and coping.

Clinical Goals

By transition of care

A. The patient will demonstrate achievement of the following goals:

- Optimized Energy Level
- Optimized Cognitive Function
- Improved Mood Symptoms
- Improved Sleep

B. Patient, family or significant other will teach back or demonstrate education topics and points:

- Education: Overview
- Education: Self Management
- Education: When to Seek Medical Attention

- Enhanced Social, Occupational or Functional Skills
- Improved Somatic Symptoms

Correlate Health Status

Correlate health status to:

- history, comorbidity, substance use, co-occurring disorders
- age, developmental level
- sex, gender identity
- baseline assessment data
- physiologic status
- response to medication and interventions
- psychosocial status, social determinants of health
- barriers to accessing care and services
- health literacy
- cultural and spiritual preferences
- safety risks
- family interaction
- plan for transition of care

Activity and Energy Impairment (Anxiety Signs/Symptoms)

Signs/Symptoms/Presentation

- edginess
- fatigue
- freeze response
- hypervigilance
- jumpy
- pacing
- restlessness

- tremors

Problem Intervention(s)

Optimize Energy Level

- Encourage activities to promote self-care.
- Provide structured exercise options.
- Encourage participation in expressive and recreational services.
- Utilize stress management and applied relaxation techniques, such as progressive muscle, release-only, cue-controlled or rapid relaxation.

Associated Documentation

- Activity (Behavioral Health)
- Diversional Activity
- Patient Performed Hygiene

Cognitive Impairment (Anxiety Signs/Symptoms)

Signs/Symptoms/Presentation

- concentration poor
- confusion
- detachment from oneself
- difficulty thinking
- distorted perception of reality
- distractibility
- feelings of unreality
- mind going blank
- racing thoughts
- rumination

Problem Intervention(s)

Support and Promote Cognitive Ability

- Perform cognition assessment; identify the nature of deficit, degree of impairment and modifiable risk factors.
 - Utilize an unhurried and calm approach.
 - Communicate clearly; utilize short and concise words, speak slowly, maintain eye contact and allow time for response.
 - Provide orientation or reorientation; use reminders and memory aids.
 - Utilize cognitive behavior therapy and techniques, such as cognitive-restructuring, cognitive-processing or exposure therapy, to evaluate and modify beliefs and challenge automatic, distorted, maladaptive and irrational thoughts and images.
 - Utilize acceptance and commitment therapy, as well as attention-process training to encourage recognition of thoughts as merely thoughts, not necessarily grounded in reality and truth.
 - Utilize motivational-interviewing techniques to promote specific behavior changes, such as treatment adherence and relapse prevention.
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Mood Impairment (Anxiety Signs/Symptoms)

Signs/Symptoms/Presentation

- anxiety or fear about a specific situation or object
- anxiety or fear of social situations
- crying
- depressed mood
- disproportionate fear
- dread
- excessive or persistent worrying
- fear of dying
- fear of losing control
- feeling of emptiness
- feeling on edge
- guilt
- inability to identify or describe emotions

- inability to regulate emotions
- irritability
- nervousness
- shame
- terror

Problem Intervention(s)

Optimize Emotion and Mood

- Assess subjective and objective presentation of mood and emotional state.
- Encourage and promote emotional awareness, acceptance and expression of feelings.
- Provide psychoeducation and supportive therapy interventions to improve mood and emotions.
- Utilize motivational interviewing techniques to promote motivation for change, treatment adherence and relapse prevention.
- Support medication adherence; monitor response and side effects; monitor laboratory values for therapeutic levels.
- Discuss the nature and complexity of anxiety; utilize positive communication to encourage, affirm and acknowledge progress.
- Utilize strengths, resources and positive psychology techniques to enhance wellbeing.
- Encourage participation in psychodynamic therapy.

Associated Documentation

- Supportive Measures

Sleep Impairment (Anxiety Signs/Symptoms)

Signs/Symptoms/Presentation

- awakening during night with difficulty returning to sleep
- difficulty falling asleep
- difficulty staying asleep

- early morning awakening
- not feeling rested after sleep
- poor quality sleep
- reluctance or refusal to sleep away from home
- repeated nightmares involving separation

Problem Intervention(s)

Promote Healthy Sleep Hygiene

- Assess for psychologic and environmental factors contributing to hypersomnia or insomnia.
- Maintain conducive environment for sleep.
- Encourage sleep diary maintenance.
- Encourage consistent sleep-wake schedule and healthy sleep routine.
- Discourage remaining in bed, daytime napping and isolation; if napping is necessary, limit time.
- Decrease physical and environmental stimulation before bedtime, including activities that increase body temperature.
- Consider limiting fluid consumption in the evening.
- Encourage nonstimulating activities, if nighttime wakening occurs.
- Consider cognitive-behavioral treatment of insomnia or repeated nightmares, such as imagery rehearsal and rescripting.
- Encourage use of relaxation and mindfulness-based techniques.

Associated Documentation

- Sleep Hygiene Promotion

Social, Occupational or Functional Impairment (Anxiety Signs/Symptoms)

Signs/Symptoms/Presentation

- fear of leaving home

- fear or avoidance of a real or anticipated exposure to a situation
- lack of speech in social interactions
- low social competence
- object fear or avoidance
- significant difficulty in interpersonal relationships
- significant difficulty in occupational functioning
- significant difficulty in social functioning
- social situations, fear or avoidance
- social withdrawal

Problem Intervention(s)

Promote Social, Occupational and Functional Ability

- Complete a functional assessment; identify deficit areas, such as hygiene or appearance.
- Explore the effect of symptoms or behavior on academic and occupation functioning; evaluate quality of life.
- Provide family-based services, such as education, emotional support or family coping.
- Assess quality of relationships and work interactions.
- Support social engagement and model appropriate social skills.
- Provide frequent opportunities to increase, resume and repair relationships with others.
- Encourage participation in social skills training to improve day-to-day living, vocational or recreational skills.

Associated Documentation

- Social Functional Ability Promotion
- Trust Relationship/Rapport

Somatic Disturbance (Anxiety Signs/Symptoms)

Signs/Symptoms/Presentation

- abdominal pain
- bowel irritability

- chest pain or tightness
- chills
- diaphoresis
- diarrhea
- difficulty breathing
- dizziness
- dry mouth
- elimination urgency
- fainting
- fatigue
- feeling shaky
- feelings of choking
- skin flushed
- headache
- heat sensation
- lightheadedness
- muscle tension, aches or soreness
- nausea
- neck stiffness
- numbness or tingling
- palpitations
- panic
- shortness of breath
- startle response exaggerated
- trembling
- twitching

Problem Intervention(s)

Minimize Somatic Disturbance

- Assess for pain and the nature of the somatic complaint, as well as patient experience and perception.
- Provide a calm, quiet environment.
- Utilize a biopsychosocial approach; assess for major psychosocial stressors.
- Utilize relaxation-response training, including progressive muscle relaxation and diaphragmatic breathing, to aid in controlling somatic symptoms.

- Utilize mindfulness-based cognitive therapy techniques, such as meditation, breathing, body scanning, listening to sounds, as well as concentrating or focusing skills to increase awareness of present moment experiences.
- Encourage participation in anxiety-management training to decrease anxiety arousal.
- Promote participation in complementary therapies.

Associated Documentation

- Complementary Therapy
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General Education

- admission, transition of care
 - orientation to care setting, routine
 - advance care planning
 - diagnostic tests/procedures
 - opioid medication management
 - oral health
 - medication management
 - pain assessment process
 - safe medication disposal
 - tobacco use, smoke exposure
 - treatment plan
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Safety Education

- call light use
- equipment/home supplies
- fall prevention
- harm prevention
- infection prevention
- MDRO (multidrug-resistant organism) care
- personal health information

- resources for support
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Education: Overview

- risk factors
 - signs and symptoms
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Education: Self Management

- 24 hour crisis hotline
 - adhere to follow-up plan
 - coping strategies
 - rehabilitation therapy
 - self-care
 - sleep/rest
 - supportive relationships
 - trigger identification
 - utilize personal strengths
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Education: When to Seek Medical Attention

- unresolved/worsening symptoms
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Population-Specific Considerations

Pregnancy

- Some anxiety disorders occurring during pregnancy have been associated with increased risks for preeclampsia and preterm birth.
- When anxiety interferes with normal activity, and relationships are affected, treatment is warranted. Treatment may include both pharmacologic and cognitive behavioral therapy.

Table

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Additional Information: BH_Anxiety Signs/Symptoms Adult Table. PDF. Download

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