Napa Valley College
Associate Degree Program in Nursing

NUR 141 – Psychosocial Assessment

Student’s Name: ___________________________ Patient Initials: ___________________

Date of Assessment: ______________________ Room # __________________

Refer to Elkin, Potter & Perry, Unit 5, Psychosocial Basis for Nursing Practice, pp. 540-667.

Identity
1. How would you describe yourself?

Body Image
2. Are there any changes in the way you feel about your body? Yourself?
   If yes, please describe:

3. What aspects of your appearance do you like?

4. Are there any aspects of your appearance that you would like to change?
   If yes, describe the changes you would make

Self-Esteem
5. Describe your outlook on life

6. Tell me about some of the things you do well

7. How do you express yourself (i.e. hobbies, activities…)?

8. Tell me about some of your accomplishments.

9. Describe any future hopes or fears that you have?

Role and Relationship Patterns
10. What are your primary roles (parent, friend, electrician…)?

11. How do you see yourself carrying out each of your primary roles?

12. Do you find it easy or difficult to communicate with others?

13. Do you enjoy family? Friends? Social groups?

14. Do you find it easy or difficult to express love, warmth, and concern to those you care about?

Coping and Stress Tolerance Patterns
15. On a scale of 0 to 10 how much of the time do you feel tense?

16. What are some of the causes of tension in your life?

17. What helps you to reduce tension?
18. What aggravates the situation?

19. Who is most helpful when you are distressed? Are they available to you now?

20. Are there any big changes in your life right now?

21. What do you do to help yourself relax?

22. Do you consider it acceptable to cry, feel sad, angry, afraid?

23. Can you laugh at yourself?

24. Are you able to say no without feeling guilty?

**Value and Belief Pattern**

25. On a scale of 0 to 10 how important is “health” to you?

26. Do you generally get the things out of life that you want?

27. Is spirituality important to you? If yes, please explain how?

28. Are you satisfied with how you spend a typical workday? School day? Leisure day?

**Summary**

In regards to what we have discussed, are there any behaviors that you would like to change?

If so, do you have any idea about how you might take the first step in making change(s) in that direction?

**Summarize person’s strengths:**

**Summarize areas for improvement or concern:**

In addition to the verbal content of the person’s answer, describe the person’s nonverbal behaviors during the assessment:

**Nursing Diagnosis (if appropriate):**