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Class 1

Foundation of Nursing

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Nursing: is autonomic and collaborative care of individuals of all ages, families, groups and communities, sick or well and in all settings.

Nurse: The nurse is a person who has completed a program of basic, generalized nursing education and is authorized. Basic nursing education is a formally recognized Programme of study providing a broad and sound foundation in the behavioral, life, and nursing sciences for the general practice of nursing, for a leadership role, and for post-basic education for specialty or advanced nursing practice.

Aims of nursing:

- Health promotion by increase quality and years of healthy life.
- Prevent illness, reduce risk of illness.
- Restore health, perform **Pathology** diagnostic measurements and assessments
- Facilitate coping with disability or death.

History of Nursing

In the early 7th century, Rufaidah bint Sa'ad (also known as Rufaida Al-Aslamia) became what is now described as the first Muslim nurse., she learned her medical skills from her father., she had led a group of women to treat injured fighters on the battlefield.

Nursing as a profession has existed throughout history, despite its great development over time. In the current healthcare system, nurses are one of the most trusted healthcare professionals with a significant role to play in the treatment and medical care of the sick.

Early history

The first known documents that mention nursing as a profession were written approximately 300 AD. In this period, the Roman Empire endeavored to build a hospital in each town that was under its rule, leading to a high requirement for nurses to provide medical care alongside the doctors.

The profession of nursing became considerably more prominent in Europe in the middle ages, due to the drive for medical care from the Catholic church. In this period, there were many advancements and innovations that took place, which eventually went on to form the base of modern nursing, as we know it.

Modern nursing

Florence Nightingale was a nurse who tended to injured soldiers in the Crimean War in the 1850s and played a significant role in changing the nature of the nursing profession in the 19th century.

During this time, the role of nurses continued to expand due to the need for their presence on the front lines of wars, where poor hygiene standards often led to fatal infections in the injuries. Nightingale campaigned for improved

hygiene standards in the hospital attending the wounded soldiers, which drastically reduced the number of deaths from infections.

The profession of nursing was pushed further forward in 1860 with the opening of the very first nursing school in London. This was the beginning of many other schools for new nurses so that they received appropriate training and education before they began practice on the field.

However, the need for nurses expanded with the world wars in the twentieth century, and many nurses were required to begin providing care without adequate training. Since this time, education institutions for nurses have continued to expand.

The profession has also branched out into various specializations with further education in particular fields of nursing care, such as pediatrics or oncology.

Roles of the Nurses

- 1. Care provider. "Clinician role"**
- 2. Educator**
- 3. Advocate**
- 4. Manager**
- 5. Collaborator**
- 6. Leader**
- 7. Researcher**

Nursing process:

Nursing process is a critical thinking process that professional nurses use to apply the best available evidence to caregiving and promoting human functions and responses to health and illness.

Nursing process is a systematic method of providing care to clients.

The nursing process is a systematic method of planning and providing individualized nursing care.

Purposes of nursing process:

- To identify a client's health status and actual or potential health care problems or needs.
- To establish plans to meet the identified needs.
- To deliver specific nursing interventions to meet those needs.

Components of nursing process

It involves **assessment** (data collection), nursing **diagnosis**, **planning**, **implementation**, and **evaluation**.

Characteristics of Nursing Process

- **Cyclic.**
- **Dynamic nature.**
- **Client centeredness.**
- **Focus on problem solving and decision making.**
- **Interpersonal and collaborative style.**
- **Universal applicability.**
- **Use of critical thinking and clinical reasoning.**

1-Assessment:

Assessment is the systematic and continuous collection, organization, validation, and documentation of data (information).

Collection of data:

Data collection is the process of gathering information about a client's health status. It includes the health history, physical examination, results of laboratory and diagnostic tests, and material contributed by other health personnel.

Types of Data:

Two types:

1. Subjective data, also referred to as symptoms or covert data, are clear only to the person affected and can be described only by that person. Itching, pain, and feelings of worry are examples of subjective data.
2. Objective data, also referred to as signs or overt data, are detectable by an observer or can be measured or tested against an accepted standard.

They can be seen, heard, felt, or smelled, and they are obtained by observation or physical examination.

For example, a discoloration of the skin or a blood pressure reading is objective data.

Sources of data

A. Primary: It is the direct source of information. The client is the primary source of data.

B. Secondary: It is the indirect source of information. All sources other than the client are considered secondary sources.

Family members, health professionals, records and reports, laboratory and diagnostic results are secondary sources.

Methods of data collection:

The methods used to collect data are **observation, interview and examination.**

- **Observation:** It is gathering data by using the senses.(Vision, Smell and Hearing are used).
- **Interview:** An interview is a planned communication or a conversation with a purpose.

Documentation of data:

To complete the assessment phase, the nurse records client data.

Accurate documentation is essential and should include all data collected about the client's health status.

2-Diagnosis:

Diagnosis is the second phase of the nursing process. In this phase, nurses use critical thinking skills to interpret assessment data to identify client problems.

Formulating Diagnostic Statements The basic three-part nursing diagnosis statement is called the PES format and includes the following: **PES**

- 1. Problem (P): statement of the client's health problem.**
- 2. Etiology (E): causes of the health problem**
- 3. Signs and symptoms (S): defining characteristics manifested by the client.**

3-Planning:

Planning involves decision making and problem solving.

It is the process of formulating client goals and designing the nursing interventions required to prevent, reduce, or eliminate the client's health problems.

Planning process

- **Planning includes:**
- **Setting priorities**
- **Establishing client goals/desired outcomes**
- **Selecting nursing interventions and activities**
- **Writing individualized nursing interventions on care plans.**

Nursing interventions

A nursing intervention is any treatment that a nurse performs to improve patient health.

Types of Nursing Interventions

A. Independent interventions are those activities that nurses are licensed to initiate on the basis of their knowledge and skills.

B. Dependent interventions are activities carried out under the orders or supervision of a licensed physician.

C. Collaborative interventions are actions the nurse carries out in collaboration with other health team members.

4- Implementation consists of doing and documenting the activities.

5-Evaluation is a planned, ongoing, purposeful activity in which the nurse determine