Nursing Process and Critical Thinking

Assessment

- Through interaction with the patient, significant others, and health care providers, collects information and analyzes data about the patient
- Physical examination of ALL body systems
- Cognitive, psychosocial, emotional, cultural, and spiritual components

Figure 5-1

Relationships among the steps of the nursing process.
Assessment

- Subjective
  - Verbal statements provided by the patient
- Objective
  - Observable and measurable signs
  - Can be recorded

Sources of Data

- Primary Source
  - Patient
  - Most accurate
- Secondary Sources
  - Family members, significant other, medical records, diagnostic procedures, and nursing literature
  - When the patient is unable to supply information, secondary sources are used.

Methods of Data Collection

- Interview
  - Reason patient is seeking health care
  - History of present illness
  - Past health history
  - Environmental history
  - Psychosocial history
- Physical Exam
  - Head-to-toe format
Data Clustering

- Related cues are grouped together.
- Attention is then focused on health concerns that need support and assistance.
- This assists in the identification of major problems (nursing diagnoses).

Diagnosing

- Identify the type and cause of a health condition
- A clinical judgment about the patient’s response to actual or potential health conditions or needs. This data provides the basis for determination of a plan of care to achieve expected outcomes.

Diagnosing

- Problem
  - Any health care condition that requires diagnostic, therapeutic, or educational actions
  - Deviations from the population norms
  - Any change in the patient’s usual health status
  - Any dysfunctional behavior
Diagnosing

- Contributing/Etiologic/Related Factors and Risk Factors
  - Conditions that might be involved in the development of a problem
  - May become the focus for nursing interventions
  - Risk factors are those that increase the susceptibility of a patient to a problem.
  - Clinical cues, signs, and symptoms that furnish evidence that a problem exists

Risk

- A clinical judgment that an individual, family, or community is more vulnerable to develop the problem than others in the same or similar situation
- The assessment indicates that risk factors are present that are known to contribute to the development of the problem

Other Types of Health Problems

- Collaborative Problems
  - Certain physiologic complications that a treatment team monitor to detect onset or changes in status
  - Treatment team manage problems using physician-prescribed and nurse-prescribed interventions to minimize the complications of the event.
Medical Diagnosis

- The identification of a disease or condition through a scientific evaluation of physical signs, symptoms, history, laboratory tests, and procedures
- Cancer
- Heart disease
- CVA
- Diabetes

Planning

- The treatment team establishes priorities of care, writes desired patient outcomes, selects and converts nursing interventions into nursing orders, and communicates the plan of care.
- The team must decide what can be done to lessen or solve an actual problem or prevent a risk problem from becoming an actual problem.
- The team decides what interventions will be effective.

Planning

- Priority Setting
  - Interventions are ranked in order of importance for the patient's life and health.
  - Physiologic needs
  - Safety and security needs
  - Love and belonging needs.
  - Actual problems
  - Potential risk problems.
  - Priorities change as the patient progresses in the hospitalization; as some problems are resolved, new ones can be addressed.
Planning

- Establishing Desired Patient Outcomes
  - Goal: This is what the client is personally to achieve.
  - Establish specific nursing interventions for treatment team and client to perform to achieve goal.
  - Outcome: a description of the specific, measurable behavior that the patient will be able to exhibit in a given time frame following the intervention.

Planning

- A Well-Written Patient-Centered Goal/Desired Outcome Statement
  - Uses the word “patient” as the subject of the statement
  - Uses a measurable verb
  - Is specific for the patient and the patient’s problem
  - Is realistic for the patient and the patient’s problem
  - Includes a time frame for patient reevaluation

Planning

- Selecting Nursing Interventions
  - Activities that should promote the achievement of the desired patient outcome
  - May include activities that the treatment team selects to resolve a client problem, to monitor for the development of a risk problem
Planning

• Physician-Prescribed Interventions
  • Actions ordered by a physician for a health care providers to perform
  • Medications, wound care, diagnostic tests
  • Assessing, teaching, and validating the safety of physician orders expected of nursing practice

Planning

• Nurse-Prescribed Interventions
  • Actions the nurse can legally order or begin independently
  • Providing a back massage, turning patient every 2 hours, monitoring for complications
  • When determining interventions, the nurse should consider the contributing/etiologic/related factors; risk factors; patient-centered goal/desired outcome; and the nursing diagnosis label.

Planning

• Communicating the treatment Care Plan
  • It is important to have written guidelines to promote the continuity of patient care.
  • Formats for the written treatment care plan vary among institutions.
  • Treatment care plans are to be designed to a specific problem that individual is having
**Implementation**

- Phase of the nursing process in which the established plan is put into action
  - This phase includes ongoing activities of data collection, prioritization, performance of nursing interventions, and documentation.
  - Documentation is a vital component of the implementation phase.
  - "If it was not charted, it was not done" is a constant principle of nursing.

**Evaluation**

- **A determination is made about the extent to which the established outcomes have been achieved.**
  - Review the patient-centered goals/desired patient outcomes that were established in the planning phase.
  - Reassess the patient to gather data indicating the patient's actual response to the nursing intervention.
  - Compare the actual outcome with the desired outcome, and make a critical judgment about whether the patient-centered goals/desired patient outcome was achieved.

**Evaluation**

- The treatment team should make one of three judgments or decisions
  - The outcome was achieved.
  - The outcome was not achieved.
  - The outcome was partially achieved.
How did the plan work?

- The plan of care is changed during this phase of the nursing process.
- Modifications can be made if the outcome has been achieved, partially achieved, or not achieved.

Managed Care
- A health care system whose aim is to enhance specific clinical and financial outcomes within a specific time frame

Case Management
- A certified nursing specialty; refers to the assignment of a health care provider to a patient so that the care of that patient is overseen by one individual
- Assists the patient and family to receive required services, coordinates these services, and evaluates the adequacy of these services

Critical Thinking
- Critical thinkers think with a purpose.
- They question information, conclusions, and points of view.
- Critical thinking is a complex process, and no single simple definition explains all of the aspects of critical thinking.
- The PT must be able to not only perform skills but also think about what he or she is doing.
- PT's use a knowledge base to make decisions, generate new ideas, and solve problems.
Critical Thinking

- Characteristics of Critical Thinkers
  - Reflect or think about what is being learned.
  - Look for relationships between concepts or ideas.
  - Analyze or critique behaviors.
  - Make self-correction.
  - Realize they do not know everything.
  - Involve creative thinking.

Confucious Thought

- “He who learns but does not think is lost”
- “He who thinks but does not learn is in danger”

Critical thinking

- It is thinking that allows you to think outside of the box and generate some new solutions
- It's getting you point or thought across
- Critical thinking is the central theme for psychiatric technician
The development of critical thinking is your key to success

- It is required or you do not meet the PT Board requirements to sit for the licensure test
- Critical thinking is essential for successfully answering the board exam questions correctly
- As a practitioner you will be required to make decisions in complex situations and quickly identify priorities