

Part 1

Nursing Foundations

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ADMISSION OF THE PATIENT

KEY TERMS

- Interpersonal relationship
- Observation
- Hospitalization

INTRODUCTION

Admission to a hospital means allowing a patient to have a stay in the hospital for various health reasons like observation, investigations, and treatment. A patient might experience a lot of fear as given below:

Fear of:

- Treatment
- Pain and loss of body part
- Being experimented on
- Being neglected
- Being alone and away from family members
- Lack of knowledge and outcome of disease

PURPOSES

- For observation
- For investigations
- For treatment

Points to Remember

The following points are to be kept in mind:

- The admission to a hospital can be either on routine basis or emergency basis
- Due to sudden change and strangeness in the environment, patient can feel anxious
- The first personnel who meets the patients, should be polite and friendly and should have a courteous and sympathetic approach toward the patients
- Every person should be considered as unique in terms of both personality, needs, and extent of illness
- The patient should be allowed to use his own articles as far as the hospital policy allows
- Once admitted to the hospital, the following things are supposed to be remembered:
 - ◆ There is tendency among the nurses to identify the patients either by the bed number or by their disease they suffer from. It is a wrong practice. The nurses should always address them by their names
 - ◆ If there is a hospital routine to wear hospital gown or dress, some patients may not feel comfortable to wear that. If there is no real urgency, the comfort of wearing one's own dress and bed clothing may give a lot of satisfaction to the patients, hence, they should be allowed to wear dress according to their comfort
 - ◆ The nurse should understand the behavioral pattern of patients according to their age, sex, race, caste and socioeconomic conditions. Their needs should be met accordingly. They should be assisted to develop good health habits and to retain their mode of behavior as far as they do not cause any harm to their health
 - ◆ The needs of the patient should be met according to Maslow's law:
 - Proper explanations should be given to the patients about their illness, prognosis, and complications in the vernacular language
 - Proper care should be taken in psychological terms as patient may use ego defense mechanisms to cope with the anxiety related to his/her illness.

TYPES OF ADMISSIONS

- Emergency admission
- Routine admission/elective admission

Emergency Admission

In this, patients are admitted in acute condition requiring immediate treatment, e.g., poisoning, burns, cardiac and respiratory emergencies.



CLINICAL NURSING PROCEDURES

Routine Admission

In this type of admission, patients are admitted for investigation, diagnostic and medical or surgical treatment. Treatment is given according to patient's problem, e.g., patient with hypertension or diabetes mellitus.

ARTICLES

The various articles required at the time of reception of a client in unit vary according to different departments. The general equipment required are as follows:

- Hospital bed with adjustable height
- Bed side locker
- IV stand
- Top sheet/blanket
- Documentation chart
- Suction machine
- Oxygen cylinder
- Resuscitation trolley

STEPS OF PROCEDURE

Preprocedural Steps

Reception of the Patient

It is a totally different experience, most likely to be vivid and not easily erased, hence, it is important that the patient and those who are with him, should receive the most courteous attention and care in the outpatient department.

In emergency conditions, time should not be wasted to initiate the treatment.

Nursing Admission Activity

- Welcoming the client
 - Preparation of the client's room
- Orienting the client to ward/policies/procedure/equipment/of the respective unit/department
- Safeguarding valuables and clothing
- Helping the client in investigations/giving history and helping to adjust in the hospital environment.

Psychosocial Responses on Admission

- Anxiety and fear
- Decisional conflict
- Situational low self-esteem
- Powerlessness
- Social isolation
- Risk for ineffective therapeutic regimen compliance

Intraprocedural Steps

The clerk at the reception counter is responsible for admission, he/she performs the following procedure:

- Records the identification data (name, age, sex, religion, education, qualifications, occupation, family members, income, marital status, address and telephone number) of the patient
- In emergency situations, the identification data can be asked from the patient's family members or relatives
- In order to provide proper services and immediate care, it is important to know the diagnosis or suspected diagnosis and the name of physician to whom the patient is referred to
- The patient is then assigned an outpatient number/CR No. for future reference
- He is then given necessary directions to proceed further
- After completing formalities at reception counter, patient is sent to the particular ward and further formalities are carried out there.

Responsibilities of Physician

Once admitted **to the ward**, the patient is attended by the physician and the following steps are carried out:

- Detailed medical and social history is taken
- Vitals signs (blood pressure, pulse, temperature, respiration) are noted
- Physical examination is done
- Investigations are done.



Responsibilities of a Nurse at the Time of Admission

Assessment

Nurses should perform the following assessment:

- **Documentation:** Name, medical record number, age, date, time, probable medical diagnosis, chief complaint, the source of information and verify patients identity.
- **Past medical history:** Any past history of hospitalization and major illness or surgeries.
- **Assess pain:** Locations, severity and use of pain scales (Wong Baker scale in pediatric patients and the faces pain scale, numerical rating scale).
- **Allergies:** Any allergies related to medication, foods and environment; nature of the reaction and seriousness; intolerances to medications; apply allergy band and confirm all pre-populated allergies in the record book.
- **Medication:** Confirm accuracy of the list, names and dosages of medications by reconciling all medications promptly using the medication prescription.
- **Valuables:** Ask the patient or the patient's relative to take care of the valuables and explain the responsibility to keep them safe.
- **Rights:** Orient patient, caregivers and family to location, rights and responsibilities; goal of admission and discharge.
- **Activities:** Check daily activity limits and need for mobility aids.
- **Nutritional:** Assess for appetite, need for nutritional consultation, changes in body weight, body mass index (BMI) and weight on admission.
- **Falls:** Assess risk for falls related to altered level of consciousness, restlessness, hallucination, depression, suicidal ideation, or substance abuse.
- Any other information from other departments.
- Physical assessment and system-wise assessment should be done in detail.

Reception of the Patient by the Ward Sister

- The ward sister should introduce herself to the patient and should make effective steps to establish interpersonal relationship.
- Patient is received in the bed and further required things (blankets, lockers, etc.) are handed over to the patient.
- Proper orientation of the unit should be given to the patient.
- Explain the hospital policies, procedures and routines to the patient and his/her relatives.
- Inform about timings of doctor's round, meal servings, the visitors timings, prayer services, etc.
- Make arrangements for paying bills.
- Explain the use of stay passes, if any, given to the patient's relatives and should be renewed on time.
- Many hospitals have small booklets supplied to all patients on admission, which explain about all rules and regulations of the hospital.

Helping the Patient to Occupy the Bed

- A closed bed is converted into open bed on admission of the patient (Fig. 1)
- Vital signs are checked and recorded.



FIGURE 1: Open bed for patient



CLINICAL NURSING PROCEDURES

- Orders by doctor are checked and carried out immediately
- Ask the patient to wear clean clothes or hospital dress as per hospital rules and regulations
- Check patient for any pediculosis, injuries, rashes, swelling, oral complications and mental disorders
- Never leave a seriously ill patient alone in a private room
- Inform the doctor in-charge of the unit about the newly admitted patient in the hospital
- Care of valuables and clothes should be taken
- Take specimens and send for investigations.

Once patient has been admitted to hospital, it is the responsibility of the patient to take care of his/her belongings.

- Provide identification band for any specific allergies or precautions.

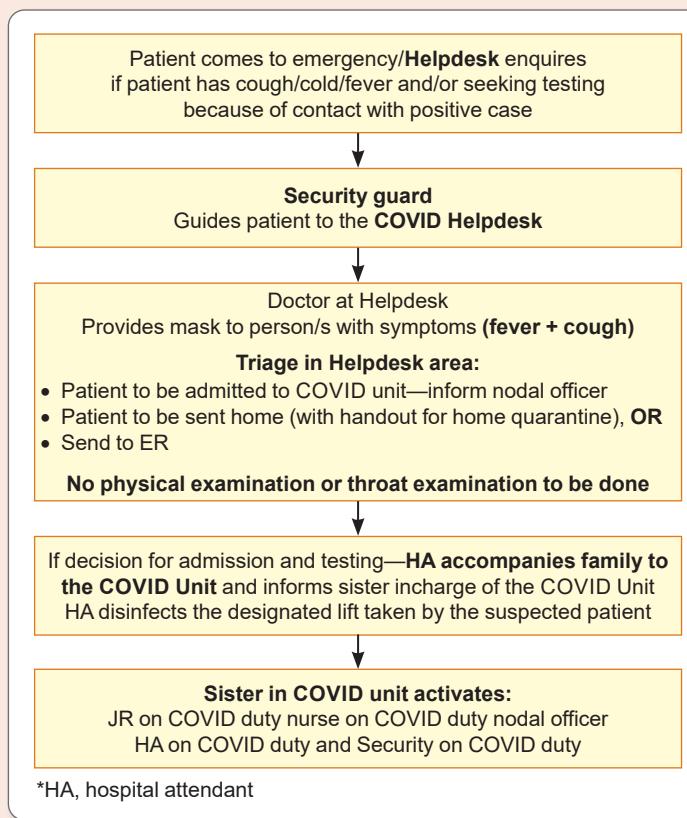
Points to Remember

The following points are to be kept in mind:

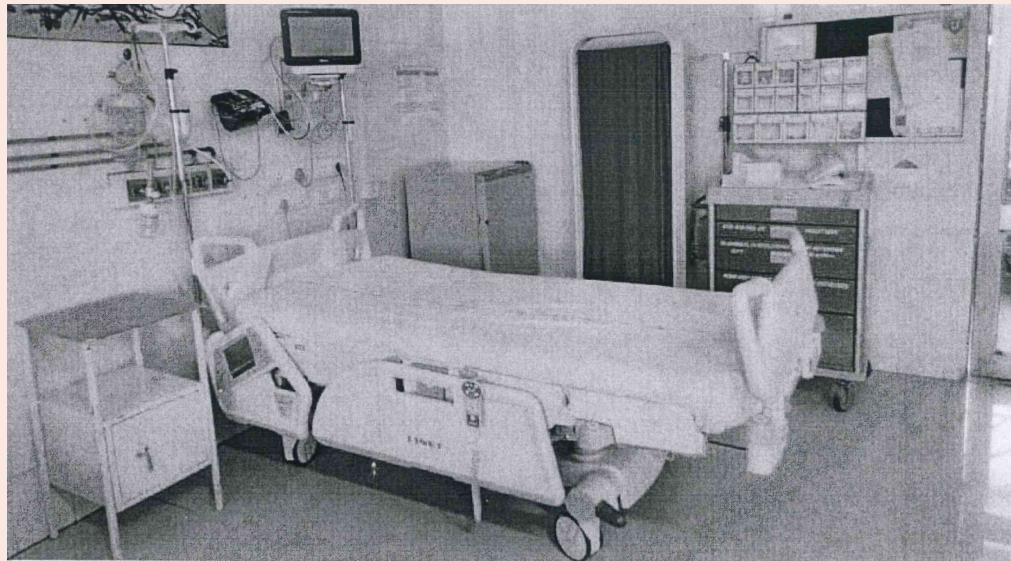
- If a patient is suffering from a communicable disease, the clothings are supposed to be first disinfected properly and then washed
- Never throw away the things, which belong to the patient
- Encourage the patient to send away the jewellery to home and not to keep any valuable with them in hospital. Make him understand that if he keeps anything with him, it is at his own risk
- In emergency, the patient's belongings are handed away to patient's relatives and a receipt or in writing is taken what all is handed away.

SPECIAL CONSIDERATION

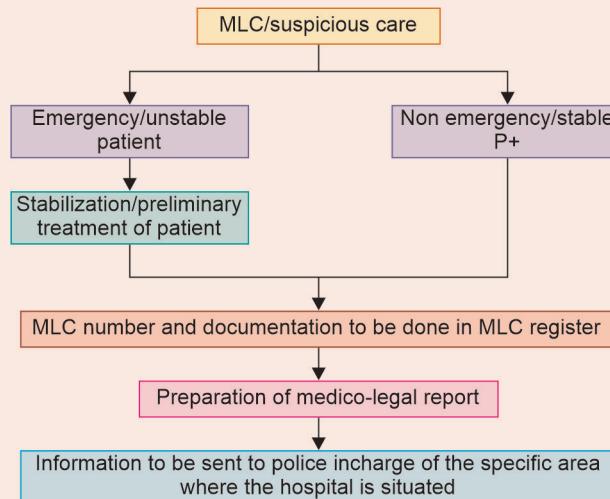
Flow of Suspected COVID-19 Patients Visiting Emergency



Contd...



Administration work flow for medicolegal cases brought to emergency



Documentation

When all the formalities are completed, it is the responsibility of a nurse to write a report in report book, which includes all details about patient (time of admission, general condition, and any other significant thing) and make entries in the census book.

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