# FUNDAMENTAL Nursing Skills and Concepts

# **Barbara Kuhn Timby**



# Fundamental Nursing Skills and Concepts

EDITION 11

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### Eleventh Edition

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# Fundamental Nursing Skills and Concepts



This edition of **Fundamental Nursing** Skills and Concepts is dedicated to all student nurses who will join the ranks of practicing nurses to meet the nation's present health care needs and those that arise in the future.

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## Preface

*undamental Nursing Skills and Concepts* is designed to assist beginning nursing students in acquiring a foundation of basic nursing theory and developing clinical skills. In addition, its content can serve as a ready reference for updating the skills of currently employed nurses or those returning to work after a period of inactive practice.

### PHILOSOPHICAL FOUNDATIONS OF THE TEXT

Several philosophical concepts are the bases for this text:

- The human experience is a composite of physiologic, emotional, social, and spiritual aspects that affect health and healing.
- · Caring is the essence of nursing and is extended to every client.
- Each client is unique, and nurses must adapt their care to meet the individual needs of every person without compromising safety or achievement of desired outcomes.
- A supportive network of health care providers, family, and friends promotes health restoration and health promotion. Therefore, it is essential to include the client's significant others in teaching, formal discussions, and provision of services.
- Licensed and student nurses are accountable for their actions and clinical decisions; consequently, each must be aware of legislation as it affects nursing practice.

In today's changing health care environment, nurses face many challenges and opportunities. The 11th edition of *Fundamental Nursing Skills and Concepts* has been written to help nurses meet these challenges and take advantage of expanding opportunities.

### **NEW TO THIS EDITION**

- **Integration of Gerontologic, Pharmacologic, and Nutritional Considerations**. Information that focuses on gerontologic, pharmacologic, and nutritional considerations is integrated within the text of each chapter where they are more applicable to the immediate content rather than appearing at the end of each chapter. Their location is identified by unique, recurring icons.
- Current NANDA diagnoses and terminology. The NANDA diagnoses labels and definitions found in the Nursing Implications and accompanying Nursing Care Plans throughout the text have been updated according to the latest NANDA-I publication, *Nursing Diagnoses 2015–2017*.
- **New Content**. The entire text has been revised and updated to reflect current medical and nursing practice. Additionally, several skills and sections contain pertinent content. The following are some highlights:
- Chapter 1, "Nursing Foundations," traces the origin and growth of nursing practice in the United States. It provides the current definition of nursing from the American Nurses Association and other theorists' explanations about the practice of nursing from Florence Nightingale to more contemporary nurses. This chapter introduces the term *evidence-based practice* and relates its significance to current nursing practice. Based on data provided by the US Bureau of Labor Statistics, this chapter reinforces the projected increase in the demand for licensed practical nurses in a variety of health care settings. Because licensed practical nurses (LPNs), as well as registered nurses (RNs), work with unlicensed assistive personnel (UAPs), Chapter 1 expands the criteria for appropriate delegation. Updated statistics on enrollments and numbers of licensed nurses in various nursing programs demonstrate a continuing shortage of nurses as well as trends toward a demand for higher levels of nursing education, specialty certifications, and continuing education. The Institute of Medicine's goal for 80% of nurses to acquire

a baccalaureate degree by 2020 is reiterated. The content describes the crises in health care and how efforts to extend the Nurse Reinvestment Act or create similar federal legislation would somewhat help relieve the shortage of nurses in the United States. One example is the effort to continue designing ladder programs to advance the education of nurses from one level of practice to the next. The chapter identifies how The 2010 Affordable Care Act funds innovative models of community-based care for older adults with chronic illnesses, creating many new roles for nurses. In addition, it notes that the American Nurses Association and the National Council of State Boards of Nursing have endorsed the delegation of supportive nursing care to UAP, emphasizing that such delegation demands supervision and ultimate accountability on nurses who work with them.

- Chapter 2, "Nursing Process," defines and emphasizes the role of critical thinking in the nursing process. It continues to describe how creating nursing care plans or care maps promotes and refines the ability of students to think critically while gathering data that is significant and organizing the interventions for client care using evidence-based practice.
- Chapter 3, "Laws and Ethics," expands on the significance of the Health Insurance Portability and Accountability Act (HIPPA) in setting standards for ensuring the security of health information. It also reinforces that the National Practitioner Data Bank tracks unfit health care practitioners within a database shared by licensing boards and health care facilities that hire nurses.
- Chapter 4, "Health and Illness," discusses various government-funded health programs. It provides statistics on enrollments in the Patient Protection and Care Act, a health reform law.
- Chapter 6, "Culture and Ethnicity," updates the demographic information on the various ethnic groups that make up the population of the United States. The chapter also discusses various methods for communicating with deaf clients, clients who do not speak English, or those who speak English as a second language, including the use and certification of language interpreters. It introduces and defines integrative medicine, a new term for health care that combines conventional treatment with complementary and alternative medicine (CAM).
- Chapter 7, "The Nurse–Client Relationship," expands its discussion of special techniques to be used in communicating with older adults.
- Chapter 8, "Client Teaching," correlates the domains of client learning with the manner in which test questions on the National Council Licensure Examination (NCLEX) are classified according to their level of difficulty. It supports how questions in the NCLEX-style review questions at the end of each chapter in the text are similarly classified. The chapter recommends using the "teach-back method" as a technique for confirming that a client has understood what has been taught by asking the client to repeat the information in his or her own words.
- Chapter 9, "Recording and Reporting," provides more information on electronic charting as well as its advantages and disadvantages.
- Chapter 10, "Asepsis," differentiates the rationales for broad and narrow spectrum antibiotic therapy. The mechanism of action for antiviral medications is explained. The World Health Organization's campaign identified as "Five Moments for Hand Hygiene" is provided to link hand hygiene with direct client care.
- Chapter 12, "Vital Signs," contains additional information on reasons why infants and older adults have difficulty maintaining normal body temperature. A more detailed discussion is provided on the correct use of infrared temporal thermometers, including circumstances when this type of thermometer is more advantageous than other types of thermometers. Assessing for postural hypotension is expanded with nursing measures for restoring or maintaining normotension.
- Chapter 13, "Physical Assessment," discusses the controversy among various medical authorities regarding the benefit of breast self-examination, and the guidelines for the initial and subsequent screenings for breast cancer using mammography.
- Chapter 14, "Special Examinations and Tests," includes the most revised guidelines from the American Cancer Society, the Association of Reproductive Health Professionals, and the American Congress of Obstetricians and Gynecologists (ACOG) regarding when women should be screened for cervical cancer and human papilloma virus infection.
- Chapter 15, "Nutrition," expands the information on trans fats, also known as partially hydrogenated oils (PHOs), to include the fact that the FDA no longer considers PHOs safe in any human food, and therefore mandates that food manufacturers remove them from their products.

Values and significance for cardiac risk according to lipid laboratory test results established by the American Association of Clinical Endocrinologists has been updated.

- Chapter 16, "Fluid and Chemical Balance," contains more depth in explaining facilitated diffusion of glucose. The consequences of blood donation by individuals who have been actually or potentially exposed to Ebola are discussed.
- Chapter 17, "Hygiene," contains information on various types of assistive listening devices that amplify sounds, reduce the effect of distance between persons with loss and the sound source, minimize background noise, and compensate for poor acoustics.
- Chapter 18, "Comfort, Rest, and Sleep," discusses how inadequate sleep is increasingly identified as a risk factor for obesity and is now considered an important lifestyle behavior linked to health. The stages of sleep and their characteristics have been revised to correlate with information from the American Academy of Sleep Medicine. Sleep requirements for various age groups have been revised to coincide with information from the National Sleep Foundation.
- Chapter 19, "Safety," reinforces the risk for latex allergy and measures that must be taken to prevent its occurrence. The chapter provides updated statistics on fires in health care facilities from National Fire Protection Association, and introduces the mnemonic **PASS** to help recall the sequence of actions when using a fire extinguisher. The pathophysiology of carbon monoxide poisoning is described as well as actions to take when victims succumb to its inhalation. Fall prevention is emphasized not only because falls are a leading cause of injury and death but also because the Center for Medicare and Medicaid Services (CMS) will no longer cover the cost of care that was incurred by a fall. Private insurers are following a similar nonpayment policy.
- Chapter 20, "Pain Management," describes several pain theories that explain how pain is transmitted, perceived, and ameliorated. The list of common reactions of others who are in relationships with persons with chronic pain has been revised. The discussion of surgical approaches to pain relief has been updated in the light of more recent less invasive techniques.
- Chapter 21, "Oxygenation," adds a discussion of the tripod position to improve breathing and the use of a Bi-Pap mask.
- Chapter 22, "Infection Control," elaborates on various classifications of infectious diseases with an emphasis on health care–associated infections. It refers readers to the Centers for Disease Control and Prevention (CDC) guidelines for infection control practices for Ebola when caring for exposed or infected health care workers returning to the United States from Africa. It also clarifies the sequence for removing personal protection equipment.
- Chapter 23, "Body Mechanics, Positioning, and Moving," added an algorithm for the safe transfer of clients to and from bed, and integrated actions within related skills.
- Chapter 24, "Fitness and Therapeutic Exercise," has been retitled to reflect the current discussion on maintaining and improving general health and stamina. A table has been included for assessing fitness using a walking pedometer or FitBit<sup>TM</sup> device, and a discussion has been added on isokinetic exercise.
- Chapter 27, "Perioperative Care," removed information on checking Homan's sign because this assessment is no longer considered valid.
- Chapter 28, "Wound Care," adds to the discussion on wound healing. It includes additional information on types of dressings; describes maggot therapy and negative pressure wound therapy (vacuum-assisted closure); and notes that wet-to-dry dressings are now considered a substandard practice.
- Chapter 29, "Gastrointestinal Intubation," revises the information on determining tube location and the reasons why former assessment methods are no longer recommended. It revises information about gastric residual measurements and recommended actions, and provides new information on methods for clearing an obstruction within a tube.
- Chapter 30, "Urinary Elimination," discusses the rationale for using soap and water versus antiseptic swabs when a clean catch urine specimen is required. It eliminates the need to test the balloon before inserting a retention catheter because this is no longer necessary.
- Chapter 31, "Bowel Elimination," adds a discussion about fecal immunologic and stool DNA tests to detect colorectal cancer. It identifies current guidelines for endoscopic screenings for colorectal cancer.
- Chapter 32, "Oral Medications," includes a discussion about The Joint Commission's *Medication Management Standards* that requires hospitals to develop a list of look-alike/sound-alike medications they store, dispense, or administer to promote the safe administration of

medications. It includes a reference to The Institute for Safe Medication Practices for a List of Confused Drug Names as well as error-prone abbreviations, symbols, and dose designations. It elaborates on the circumstances in which verbal and telephone orders are justified and on precautions the nurse must take in regard to these types of medication orders.

- Chapter 34, "Parenteral Medications," adds to the discussion about insulin pens. It provides new information on insulin pumps and discusses the reasons why the dorsogluteal injection site should be avoided.
- Chapter 36, "Airway Management," elaborates on the parts of a tracheostomy tube. It adds information on how to obtain a sputum specimen using a suction catheter and mucous trap.
- Chapter 37, "Resuscitation," reflects the most recent changes in the American Heart Association's (AHA's) International Cardiopulmonary Resuscitation (CPR) and Emergency Cardiovascular Care (ECC) Guidelines of 2016 for performing basic life support techniques.
- Chapter 38, "End-of-Life Care," provides the most recent guidelines for determining brain death as identified by the American Academy of Neurology. It describes the difference between a medical examiner and a coroner; identifies what types of deaths are reported to a medical examiner or coroner; explains the difference between a clinical autopsy and forensic autopsy; and includes the variations in preparing a body during postmortem care when a forensic autopsy will be performed.
- Art and Photography Program. Contemporary nursing practice is illustrated by the many new full-color photos and line drawings. These illustrations assist visual learners to become familiar with the latest equipment, techniques, and practices in today's health care environment.



## Features and Learning Tools



**Table of Contents.** Based on market feedback, Section I in the 11th edition provides chapters that relate to Fundamental Nursing Concepts. Section II, "Fundamental Nursing Skills," begins with Chapter 10, "Asepsis," to underscore the importance of hand hygiene and other aseptic practices when providing nursing care.



**Words to Know.** These key terms are listed at the beginning of each chapter and set in boldface type within the text where they appear with or near their definition. Additional technical terms are italicized throughout the text. Words to Know and their definitions can also be found in the glossary in alphabetical order.

#### Learning Objectives

- On completion of this chapter, the reader should be able to 1. Name one historical event that led to the demise of nursing in England before the time of the renors Nightinglie is responsible 3. Describe at least fine ways in which early US training schools deviated from those established under the direction of Forence Nightinglie 4. Name three ways that nurses used their skills in the early history of US nursing.
  - A. Name was a strain.
     S. Explain how an, science, and nursing theory have been incorporated into contemporary nursing practice.
     Discuss the evolution of definitions of nursing.
  - List four types of educational programs that prepare students for beginning levels of nursing practice.
  - Identify at least five factors that influence choice of educational nursing program.
  - State three reasons that support the need for continuing education in nursing.
     List examples of current trends affecting nursing and health
  - Care. Care. 11 Discuss the shortage of nurses and methods to reduce the
  - Crisis
     Describe four skills that all nurses use in clinical practice

**Learning Objectives.** These student-oriented objectives appear at the beginning of each chapter to serve as guidelines for acquiring specific information. They are now numbered so that the corresponding student and instructors resources can be easily matched.

**Nursing Process Focus.** The focus on the Nursing Process continues to be strong. The concepts and paradigm for the nursing process appear in Chapter 2. The premise is that early familiarity with its components will reinforce its use in the Skills and sample Nursing Care Plans throughout the text. Each skill chapter has the most recent Applicable Nursing Diagnoses that correlate with the types of problems recipients of the respective skills may have.

NURSING CARE PLAN 20-1	Acute Pain
Assessment	
intensity, location, characteristics; and related factors such as what makes the pain better or worse.	<ul> <li>Measure the client's vital signs.</li> <li>Note pain-related behaviors such as gromacing, ordyng, moaning, and assuming a guarded position.</li> <li>Perform a physical assessment, taking care to getily support and assot the clients to turn as various structures are examined by high physical assessments with the selfer. Spain society more morphicity usessments and the client's pain. The pone mappricity usessments and the client's pain is reduced.</li> </ul>
Nursing Diagnosis Acute pain related to cellular injury or disease at a 10 using a numeric scale, describing the pain as being "continuo known cause	as manifested by the statement, "I'm in severe pain," rating pain as and stabbing that started the previous night" without any
	r her tolerable level of "5" within 30 minutes of implementing a
pain management technique.	
pain management technique.	e her tolerable level of "5" within 30 minutes of implementing a Rotionales
pain management technique. Interventions	
	Rationales
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**Nursing Care Plans.** Nursing Care Plans are now accompanied by a representative photo of a client and a description of a clinical scenario. This feature has been added to help students identify with a "real person" and his or her subsequent individualized care. The diagnostic statements contain three parts for actual diagnoses and two parts for potential diagnoses. A double-column format lists interventions on one side and corresponding rationales on the other. The evaluation step is reinforced by evidence indicating expected outcome achievement.



#### Client and Family Teaching 20-1 Pain and Its Management

- The nurse teaches the client and the family as follows:
  Ask the doctor what to expect from the disorder or its treatment.
- Discuss pain-control methods that have worked well or not so well before.
- Talk with the doctor and nurses about any concerns you have about pain medicine.
- Identify any drug allergies you have.
- Inform the doctor and nurses about other medicines you take, in case they may interact with pain medications.
   Help the doctor and nurses measure your pain on a pain scale by stating the number or word that best describes
- Ask for or take pain-relieving drugs when pain begins or before an activity that causes pain.
- Set a pain-control goal such as having no pain worse than 4 on a scale of 0 to 10.
- Inform the doctor and nurses if the pain medication is not working.
- Perform simple techniques such as abdominal breathing and jaw relaxation to increase comfort.
- Consult with the doctor or nurses about using cold or hot packs or other nondrug techniques to enhance pain control.

**Skills.** The Skills continue to be clustered at the end of each chapter for ease of access and to avoid interrupting the narrative and distancing related tables and boxes to locations where they previously seemed out of context. In addition, each illustration within the Skills has been closely reviewed to ensure that it complies with Standard Precautions, infection control guidelines from the Centers for Disease Control and Prevention.

NURSING GUIDELINES 20-1	
Aanaging Pain	
New doals for clarify decorption of given on and for relation to the more year years related an utsholding generated and the more year years related and utsholding generated the provide stress model and the stress of the more decorption of the stress of the stress of the stress Additionary provides the stress of the stress of the stress Additionary provides and the stress of th	<ul> <li>When the client's pairs in continuum, advances and pairs or a school has been than its pairs (b). Given a pair of the pairs of the pai</li></ul>

**Nursing Guidelines.** These mini-procedures provide directions for performing various kinds of nursing care, or suggestions for managing client care problems. Illustrations have been relocated or added to the nursing guidelines to facilitate visual learning.

**Client and Family Teaching Boxes.** These specially numbered boxes found throughout the chapters highlight essential education points for nurses to communicate to clients and their families.

#### CRITICAL THINKING EXERCISES

- What actions might protect a nurse from being sued when a client assigned to his or her care falls out of bed?
- A client who fell while ambulating to the bathroom sues the assigned nurse. Based on the elements necessary in a malpractice lawsuit, what must the client's lawyer prove? What defense may the nurse's lawyer offer?
- **3.** What criteria justify assisted suicide?
- 4. Two people need a liver transplant; only one liver is available. What information might a teleologist and a deontologist use to determine who should receive the organ?

#### NCLEX-STYLE REVIEW QUESTIONS

- **1.** What is the first action the nurse should take if there is a suspicion that a colleague is stealing narcotics and recording their administration to assigned clients?
  - 1. Refer the nurse to the ethics committee
  - 2. Notify the local police department.
  - 3. Share concerns with nursing peers.
  - 4. Report suspicions to a supervisor.

Test Taking Strategy: Note the key words, "first action". Select the option that represents the most immediate line of authority, communication, and responsibility within the organization.

- 2. What information is most important for the nurse to obtain in a preoperative assessment?
  - 1. Birth certificate
  - Social security number
     Advance directive
  - 4. Proof of insurance

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**NCLEX-PN Style Questions.** NCLEX-Style questions help students apply their acquired knowledge by answering items that reflect the formats within the 2016 NCLEX-PN Test plan. In this edition, a test-taking strategy has been included after each question. An effort has been made to include many alternate format items to assist students with the types of questions they will eventually encounter on their licensing examination. A cognitive level and classification of the test item accompany each question to demonstrate how the question correlates with the NCLEX-PN test plan.

**Glossary.** Found at the back of the book, this is a quick reference of definitions for Words to Know that are used throughout the text. The glossary provides the key terms in alphabetical order.

**Critical Thinking Exercises.** Critical thinking questions appear at the end of each chapter to facilitate application of the material, using clinical situations or rhetorical questions.



**Bibliography.** This is a comprehensive listing of references and suggested readings, including general recommendations as well as unit-specific citations, which provides a streamlined guide to current literature about topics discussed in the text.

Contents	
Compiliation of	UNIT 6
Perface will	Assisting the Inactive Client 507
Paulures and Learning Tools - an	23 Body Mechanics, Posterring, and Moving SW
Accowindpriner() and	24 Fitness and Therapeutic Exercise SD
	25 Mechanical Immobilization 557
UNIT 1	26 Ambulatory Aids 582
Exploring Contemporary Naming 1	UNIT 7
1 Nursing Foundations 2	The Surgical Client 605
2 Nursing Process 19	27 Perioderative Care #07
UNIT 2	28 Wound Care KD
	29 Gastrointestinal Intubation 667
Integrating Basic Concepts 33	
3 Lows and Effect 35 4 Health and Effects 57	UNIT 8
5 Homeostasis Adaptation, and Stress, 42	Promoting Elimination 603
6 Culture and Ethnicity 75	30 Urinary Elimination #99
	31 Bowei Elimination 729
UNIT 3	
Festering Communication 91	UNIT 9
7 The Nurse-Client Relationship 87	Medication Administration 757
8 Client Teaching MV	32 Gral Medications 758
9 Recording and Reporting 117	33 Topical and Inhalant Medications 779
	34 Permeteral Medications 795 36 Intravenous Medications 821
UNIT 4	30 interesting metrications and
Partnesing Basic Client Cara 135	UNIT 10
10 Asepan 137	Intervening in Emergency Situations 841
11 Admission, Discharge, Transler, and Referrais. M7 12 Vital Sizes. 201	36 Anway Managament 843
12 Physical Assessment 237	37 Resublished MI
14 Special Examinations and Testa 257	
	UNIT 11
UNIT 5	Caring for the Terminally III 873
Assisting With Basic Needs 285	38 End-of Life Care #75
15 Nutritor 287	
16 Fluid and Chemical Balance 327	References and Suggested Readings 190
17 Hypene 30	Appendix A. Chapter Summaries 317
18 Cambon, Reat, and Sleep 385 19 Safety 423	Appendix 8 Commonly Obert Althrewatteria
20 Pain Management 425	and Accuryms SS2*
21 Organition 479	Genery 454

**Detailed Table of Contents.** Located at the beginning of the textbook, this provides an outline of each unit's and chapter's subject matter.

### **USE WITH INTRODUCTORY MEDICAL-SURGICAL NURSING**

*Fundamental Nursing Skills and Concepts* may be adopted as a single text for students in a nursing program. Additionally, the book may be adopted with *Introductory Medical–Surgical Nursing* by Timby and Smith, as well as *Lippincott's NCLEX-PN Review Book* by Timby and Rupert. The content, designs, features, and styles of these texts have been coordinated closely to facilitate understanding and to present a consistent approach to learning.

### **TEACHING-LEARNING PACKAGE**

The 11th edition of *Fundamental Nursing Skills and Concepts* features a compelling and comprehensive complement of additional resources to help students learn and instructors teach.

### **RESOURCES FOR STUDENTS**

Valuable learning tools for students are available on the Point:

- Concepts in Action animations and Watch and Learn video clips demonstrate important concepts related to various topics explored in the accompanying text.
- NCLEX-style review questions that correspond with each book chapter help students review important concepts and practice for the NCLEX.
- A Spanish-English glossary lists words commonly encountered or needed in the nurse's practice.
- Journal Articles about relevant topics enable students to stay aware of the latest research and information available in the current literature.
- Case Studies help students apply their learning about nursing concepts and skills to client-oriented scenarios.
- Answer Keys for the Stop, Think, and Respond boxes, NCLEX-Style Review Questions, and Critical Thinking Exercises allow students to check their comprehension of textbook presentations as desired.

### **RESOURCES FOR INSTRUCTORS**

The above student-oriented materials are available for instructors on the Point. Additionally, instructors have access to the following tools to assist with teaching:

- An extensive collection of materials is provided for each chapter:
  - Prelecture Quizzes and Answers are quick, knowledge-based assessments that allow instructors to check students' reading and comprehension.
  - **PowerPoint presentations** provide an easy way to integrate the textbook with students' classroom experience, via either computerized slide shows or handouts.

- Guided Lecture Notes walk instructors through the chapters, objective by objective, and provide corresponding PowerPoint slide numbers.
- **Discussion Topics (and suggested answers)** are organized by learning objective and can be used as classroom conversation starters.
- Assignments (and suggested answers), also organized by learning objective, include group, written, clinical, and web-based activities.
- An **Image Bank** provides the photographs and illustrations from this textbook to be used in a way that best suits instructor needs, including in PowerPoint slides.
- A sample syllabus provides guidance for structuring an LPN/LVN course.
- The Test Generator lets teachers assemble exclusive new tests from a bank containing more than 900 questions to help assess students' understanding of the material. These questions are formatted to match the NCLEX, so students can practice preparing for this important examination.

### **STUDENT WORKBOOK**

The Workbook for Fundamental Nursing Skills and Concepts, 11th edition, is available for purchase and provides an engaging review of important material. Featuring **images** from the text, **review exercises, application activities**, and more **NCLEX-PN practice questions**, the Workbook complements this textbook and provides dynamic reinforcement of everything students need to learn from it. Answers to the exercises in the Workbook are available to instructors through thePoint.



# Acknowledgments

t is my belief that this text and its ancillary package will facilitate learning and produce safe, effective practitioners, capable of providing quality care for diverse clients in a variety of settings. Thanks go to the following people at Lippincott Williams & Wilkins for their help in preparing this book and for supporting the revision and new ideas and organization of the text material:

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## Contents

Contributors vi Preface viii Features and Learning Tools xii Acknowledgments xvi

### UNIT 1

### Exploring Contemporary Nursing 1

- **1** Nursing Foundations 3
- 2 Nursing Process 19

### UNIT 2

### Integrating Basic Concepts 33

- 3 Laws and Ethics 35
- 4 Health and Illness 51
- 5 Homeostasis, Adaptation, and Stress 63
- 6 Culture and Ethnicity 75

### UNIT 3

### Fostering Communication 91

- 7 The Nurse–Client Relationship 93
- 8 Client Teaching 107
- 9 Recording and Reporting 117

### **UNIT** 4

### Performing Basic Client Care 135

- 10 Asepsis 137
- **11** Admission, Discharge, Transfer, and Referrals *167*
- 12 Vital Signs 189
- 13 Physical Assessment 233
- **14** Special Examinations and Tests 257

### UNIT 5

### Assisting With Basic Needs 285

- 15 Nutrition 287
- **16** Fluid and Chemical Balance 331
- 17 Hygiene 353
- **18** Comfort, Rest, and Sleep *385*
- **19** Safety 413
- 20 Pain Management 435
- **21** Oxygenation 479
- 22 Infection Control 489

### UNIT 6

### Assisting the Inactive Client 507

- 23 Body Mechanics, Positioning, and Moving 509
- 24 Fitness and Therapeutic Exercise 537
- 25 Mechanical Immobilization 557
- 26 Ambulatory Aids 583

### UNIT 7

### The Surgical Client 605

- 27 Perioperative Care 607
- 28 Wound Care 633
- 29 Gastrointestinal Intubation 661

### UNIT 8

### Promoting Elimination 693

- 30 Urinary Elimination 695
- 31 Bowel Elimination 729

### UNIT 9

### Medication Administration 757

- 32 Oral Medications 759
- 33 Topical and Inhalant Medications 779
- 34 Parenteral Medications 795
- 35 Intravenous Medications 821

### **UNIT 10**

### Intervening in Emergency Situations 841

- 36 Airway Management 843
- 37 Resuscitation 861

### **UNIT 11**

### Caring for the Terminally III 873

38 End-of-Life Care 875

References and Suggested Readings 890 Appendix A Chapter Summaries 917 Appendix B Commonly Used Abbreviations and Acronyms 932 Glossary 934 Index 952