基础护理

Fundamentals of Nursing

原 著 LINDA ANNE SILVESTRI



人民军医出版社

护理英语系列教材

美国国家注册护士执照考试指导

(Saunders Comprehensive Review for the NCLEX-RN ® Examination)

基础护理

Fundamentals of Nursing

原 著 LINDA ANNE SILVESTRI

主 译 李 珺

译者储奕顾莉莉林敏

诸琤玮 袁 英 孙婷婷

主 校 林依林



图书在版编目 (CIP)数据

基础护理: 英文/(美)思维特瑞(Silvestri, L.A.)著: 李珺译.-北京: 人民军医出版 社, 2015.3

护理英语系列教材

ISBN 978-7-5091-8275-8

I.①基础··· II.①思···②李··· III.①护理学-医学院校-教材-英文 IV.①R47

中国版本图书馆CIP数据核字(2015)第043988号

策划编辑: 马 莉 孟凡辉 文字编辑: 赵晓梅 薛 彬 责任审读: 陈晓平

出版发行: 人民军医出版社

经销:新华书店

通讯地址:北京市100036信箱188分箱 邮编:100036 质量反馈电话: (010) 51927290; (010) 51927283

邮购电话: (010) 51927252

策划编辑电话: (010) 51927300-8036

网址: www.pmmp.com.cn

印刷:北京天宇星印刷厂 装订:三河市京兰印务有限公司

开本: 850mm×1168mm 1/16 印张: 19 字数: 896千字

版、印次: 2015年3月第1版第1次印刷

印数: 0001-2000 定价: 79.00元

版权所有 侵权必究

Saunders Comprehensive Review for the NCLEX-RN® Examination: Fundamentals of Nursing, 4/E

Linda Silvestri

ISBN-13: 978-1-4160-3708-8

ISBN-10: 1-4160-3708-X

Copyright © 2008 by Saunders, an imprint of Elsevier Inc. All rights reserved.

Authorized Simplified Chinese translation from English language edition published by Elsevier Inc.

Copyright ©2014 by Elsevier (Singapore) Pte Ltd. All rights reserved.

Elsevier (Singapore) Pte Ltd.

3 Killiney Road #08-01 Winsland House I Singapore 239519

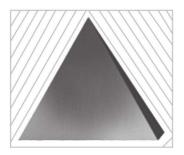
Tel: (65) 6349-0200 Fax: (65) 6733-1817

First Published 2014 2014 年初版

Printed in China by People's Military Medical Press under special arrangement with Elsevier (Singapore) Pte Ltd. This edition is authorized for sale in China only, excluding Hong Kong SAR, Macao SAR and Taiwan. Unauthorized export of this edition is a violation of the Copyright Act. Violation of this Law is subject to Civil and Criminal Penalties.

本书简体中文版由人民军医出版社与 Elsevier (Singapore) Pte Ltd. 在中国境内(不包括香港及澳门特别行政区和台湾)合作出版。本版仅限在中国境内(不包括香港及澳门特别行政区和台湾)出版及标价销售。未经许可之出口,视为违反著作权法,将受法律之制裁。

著作权合同登记号: 图字 军-2010-045号



编者名单

JoAnn Acierno, BSN, RN Assistant Professor Bachelor of Science in Nursing Program Clarkson College Omaha, Nebraska Chapter 55: Gastrointestinal System Chapter 56: Gastrointestinal Medications

Katherine H. Dimmock, JD, EdD, MSN, RN Dean and CEO Columbia College of Nursing, Inc. Milwaukee, Wisconsin

Chapter 7: Ethical and Legal Issues

Chapter 8: Leadership, Delegating, and Prioritizing Client Care

Mary L. Dowell, PhD, RN, BC Professor University of Mary Hardin Baylor

Belton, Texas

Chapter 26: Labor and Delivery

Chapter 27: Problems With Labor and Delivery

Chapter 28: The Postpartum Period Chapter 29: Postpartum Complications

Chapter 30: Care of the Newborn

Chapter 31: Maternity and Newborn Medications Chapter 35: Neurological, Cognitive, and Psy-

chosocial Disorders

Chapter 36 Eye, Ear, and Throat Disorders

Chapter 40: Metabolic and Endocrine Disorders

Chapter 41: Renal and Urinary Disorders

Julie Eggert, PhD, GNP-C, AOCN Associate Professor School of Nursing Clemson University Clemson, South Carolina Chapter 32: Theories of Growth and Development

Chapter 33: Developmental Stages Chapter 34: Care of the Older Client

Cynthia A. Gaudet, MSN, RN **Nursing Instructor** American International College Springfield, Massachusetts Chapter 49: Integumentary System Chapter 50: Integumentary Medications

Karen Clark Griffith, PhD, RN **Assistant Professor** College of Nursing The University of Iowa Iowa City, Iowa

Chapter 42: Integumentary Disorders Chapter 43: Musculoskeletal Disorders Chapter 44: Hematological Disorders

Sheila C. Grossman, PhD, APRN-BC Professor and Director **FNP Track** Fairfield University School of Nursing Fairfield, Connecticut Chapter 69: Immune Disorders Chapter 70: Immunologic Medications

Amy Zlomek Hedden, RN, MS, NP Associate Professor Pediatric Content Expert Department of Nursing California State University, Bakersfield; Registered Nurse Bakersfield Memorial Hospital Bakersfield, California Chapter 47: Infectious and Communicable Dis-

eases

Beverly K. Hogan, APRN, BC

School of Nursing

University of Alabama at Birmingham

Birmingham, Alabama

Chapter 71: Foundations of Psychiatric Mental Health

Nursing:

Chapter 72: Models of Care

Chapter 73: Mental Health Disorders

Chapter 74: Addictions

Chapter 75: Crisis Theory and Intervention

Chapter 76: Psychiatric Medications

Katje A. Koning, RN

Graduate, Nursing

University of Connecticut

Storrs, Connecticut

Chapter 4: The NCLEX-RN® Examination: From a

Student's Perspective

Lois S. Marshall, PhD, RN

Nurse Researcher Scholar in Residence

Honor Society of Nursing, Sigma Theta Tau

International;

Nurse Education Consultant

LSM Educational Consulting

Miami, Florida

Chapter 37: Respiratory Disorders

Chapter 38: Cardiovascular Disorders

Chapter 39: Gastrointestinal Disorders

Chapter 45: Oncological Disorders

Chapter 46: Acquired Immunodeficiency Syndrome

Chapter 48: Pediatric Medication Administration and

Calculations

Dorothy Mae Mathers, MSN, RN

Associate Professor

Pennsylvania College of Technology

Williamsport, Pennsylvania

Chapter 53: Endocrine System

Chapter 54: Endocrine Medications

Ellyn E. Matthews, PhD, RN, AOCN, CRNI

Assistant Professor

University of Colorado at Denver and Health Sci-

ences Center

Denver, Colorado

Chapter 51: Oncological Disorders

Chapter 52: Antineoplastic Medications

Ellen C. McElroy, BSN, RN

Assistant Professor

School of Nursing

University of Alabama at Birmingham

Birmingham, Alabama

Chapter 71: Foundations of Psychiatric Mental Health

Nursing

Chapter 72: Models of Care

Chapter 73: Mental Health Disorders

Chapter 74: Addictions

Chapter 75: Crisis Theory and Intervention

Chapter 76: Psychiatric Medications

Lolita T. O' Donnell, RN, MSN, PhD

Assistant Professor

George Mason University

Fairfax, Virginia

Chapter 63: The Eye and the Ear

Chapter 64: Ophthalmic and Otic Medications

Kathleen A. Ohman, EdD, MS, RN, CCRN

Professor of Nursing

College of St. Benedict/St. John's University

St. Joseph, Minnesota;

Registered Nurse

St. Cloud Hospital

St. Cloud, Minnesota

Chapter 61: Renal System

Chapter 62: Renal Medications

Emily Porterfield, RN, LDN

Consulting Dietitian

Freelance Copyeditor and Proofreader

Greenville, North Carolina

Chapter 6: Cultural Diversity and Health Practices

Chapter 12: Nutrition

Chapter 13: Parenteral Nutrition

Donna Russo, RN, MSN, CCRN

Nursing Instructor

Frankford Hospital School of Nursing

Philadelphia, Pennsylvania

Chapter 59: Cardiovascular Disorders

Chapter 60: Cardiovascular Medications

Shirley Sherrick-Escamilla, PhD(c), MSN, RNC

Assistant Professor

University of Detroit Mercy

Detroit, Michigan

Chapter 22: Female Reproductive System

Chapter 23: Obstetrical Assessment

Chapter 24: Prenatal Period

Chapter 25: Risk Conditions Related to Pregnancy

Fran Soukup, RN, MSN, EdS

Faculty

Excelsior College Albany, New York

Chapter 65: Neurological System Chapter 66: Neurological Medications

Bethany Hawes Sykes, EdD, RN, CEN, CCRN

Adjunct Faculty

Department of Nursing Salve Regina University Newport, Rhode Island

Chapter 16: Provision of a Safe Environment

Chapter 17: Administration of Medication and Intrave-

nous Solutions

Chapter 18: Basic Life Support

Chapter 19: Perioperative Nursing Care

Chapter 20: Positioning Clients

Chapter 21: Care of a Client With a Tube

Linda D. Taylor, PhD(c), RN, OCN

Assistant Professor

St. Anthony College of Nursing

Rockford, Illinois

Chapter 57: Respiratory System

Chapter 58: Respiratory Medications

Laurent W. Valliere, BS

Vice President

Professional Nursing Seminars, Inc.

Charlestown, Rhode Island

Chapter 3: Pathways to Success

Vicki L. Vann, MS, ARNP

Nursing Education Specialist

Department of Nursing Research and Education

H. Lee Moffitt Cancer Center & Research Institute

Tampa, Florida

Chapter 9: Fluids and Electrolytes

Chapter 10: Acid-Base Balance

Chapter 11: Laboratory Values

Chapter 14: Intravenous Therapy

Chapter 15: Administration of Blood Products

Danette Wood, EdD, MSN, RN, CCRN

Associate Professor

Bachelor of Science in Nursing Program Director

School of Nursing

Georgia Southern University

Statesboro, Georgia

Chapter 67: Musculoskeletal System

Chapter 68: Musculoskeletal Medications

ITEM WRITERS

Barbara Cornett, PhD, CNS, RN, CHES

Professor

Otterbein College

Westerville, Ohio

Katherine A. Fletcher, RN, PhD, CS

Clinical Associate Professor

University of Kansas School of Nursing

Kansas City, Kansas

Marilyn Johnessee Greer, MS, RN

Associate Professor of Nursing

Rockford College

Rockford, Illinois

Juanita F. Johnson, PhD, RN

Adjunct Professor of Nursing

School of Nursing

Oklahoma Baptist University

Shawnee, Oklahoma

Susan A. Moore RN, PhD

Assistant Professor

Loewenberg School of Nursing

University of Memphis

Memphis, Tennessee

Bruce Austin Scott, MSN, APRN, BC

Nursing Instructor

San Joaquin Delta College

Stockton, California

Mary M. Smith, MSN, RN

Lecturer

School of Nursing

College of Health and Human Services

University of North Carolina at Charlotte

Charlotte, North Carolina

Sharon Souter, RN, PhD

Director of the Bachelor of Nursing Program

Patty Hanks Shelton School of Nursing

Abilene, Texas

Linda Turchin, RN, BSN, MSN Assistant Professor of Nursing Department of Nursing Fairmont State University Fairmont, West Virginia

Cheryle I. Whitney, RN, MSN ciwhitney & associates, L.L.C. President The Woodlands, Texas

Chris Winkelman, RN, PhD, CNP, CCRN Assistant Professor Frances Payne Bolton School of Nursing Case Western Reserve University Cleveland. Ohio

The author and publisher would also like to acknowledge the following individuals for contributions to the previous editions of this book:

Marion G. Anema, PhD, RN Nashville, Tennessee

Marianne P. Barba, MS, RN, CPC Coventry, Rhode Island

Carol A. Baxter, EdD, RN Philadelphia, Pennsylvania

Eloise M. Brotzman, MSEd, MSN, RNC Bethlehem, Pennsylvania

Reitha Cabaniss, MSN, RN Sumiton, Alabama

Janice Almon Call, MSN, RN, C Gainesville, Texas

Darlene Nebel Cantu, MSN, RNC San Antonio, Texas

Heather Carlson, RN Newport, Rhode Island

Elizabeth M. Carson, EdD, RN Rockford, Illinois

Shannon Chase, RN Newport, Rhode Island Jane Anne Claffy, MSN, RNC Germantown, New York

Alice D. Coomes, MSN, RN Owensboro, Kentucky

Gloria Coschigano, MSN, RN, CS Valhalla, New York

Nancy Wilson Darland, MSN, RNC, CNS Ruston. Louisiana

Jean W. Davis, EdD, RN, CS Miami Shores, Florida

Jean DeCoffe, MSN, RN Milton, Massachusetts

Carole A. Devine, MSN, RN Kingston, Rhode Island

Kerry H. Fater, PhD, RN, CS Newport, Rhode Island

Ginette G. Ferszt, PhD, RN, CS Kingston, Rhode Island

Cathy Fortenbaugh, MSN, RN, AOCN, CNS, C Philadelphia, Pennsylvania

Jane H. Freeman, EdD, RN Jacksonville, Alabama

Rita S. Glazebrook, PhD, RN, CNP Northfield, Minnesota

Kimberly Green, RN Newport, Rhode Island

Joyce Hammer, MSN, RN Detroit, Michigan

Jacqueline Lynne Harris, MNSc, RN, ONC Searcy, Arkansas

Mary Ann Hogan, MSN, RN, CS Amherst, Massachusetts

Mary Kathleen Jackson, BSN, RN, CPN Whiteville, North Carolina

Gail M. Johnson, EdD, MSN, RN, CNAA, BC Trenton, New Jersey

Katherine Theresa Jorgensen, MSN, RN, MA Vermillion, South Dakota

Elisa Mangosing Lemmon, MSN, RN, C Newport News, Virginia

Teresa Leonard, MSN, RN, CCRN Florence, Alabama

Carol O. Long, PhD, RN Tempe, Arizona

Marilyn Lusk, MSN, MS, RN Kingman, Arizona

Linda Ann Martin, MSN, RN, APN-C Trenton, New Jersey

Jo Ann Barnes Mullaney, PhD, RN, CS Newport, Rhode Island

Betsy J. Nield, MS, RNC Warwick, Rhode Island

Tina Nink, MSN, RN, FNP Oglesby, Illinois

Patricia A. Parsons, MSN, MS, RN Austin, Minnesota

Elizabeth Phillip, MSN, RN Bethlehem, Pennsylvania

Tommie Wright Pniewski, MSN, RN, CNAA Hopkinsville, Kentucky

Ethel Pruden, MSN, RN Savannah, Georgia

Marion Sawyier, MSN, RN Albuquerque, New Mexico

Nancy Schlapman, PhD, RN Kokomo, Indiana

Jane Schlickau, MN, RN, ARNP, CTN Winfield, Kansas

Joan Schmitke, DSN, APRN, FNP, BC Richmond, Kentucky

Geneva Scott, MSN, RN, BSS Weatherford, Texas

Shellie Simons, MS, RN Boston, Massachusetts

Marian I. Stewart, MSN, RN Lynchburg, Tennessee

Lynn Tesh, MSN, RN Asheboro, North Carolina

Cheryl J. Vitacco-Grab, MSN, RNC Lancaster, Pennsylvania

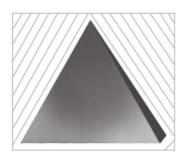
Loretta A. Wack, MSN, PNP, FNP Weyers Cave, Virginia

Mary Hauser Whitaker, MSN, RN Richmond, Kentucky

Terry Yoesting, MS, RN Denison, Texas

ANCILLARY CO-AUTHOR
Lois S. Marshall, PhD, RN
Nurse Researcher Scholar in Residence
Honor Society of Nursing, Sigma Theta Tau
International;
Nurse Education Consultant
LSM Educational Consulting
Miami, Florida

The author would like to acknowledge the book contributors for their assistance with the ancillary materials.



使用指南

建议读者遵循以下步骤使用本书:

1. 第一次阅读原文

注意:

- (1) 不要一次读许多页,一次阅读以 $2 \sim 3$ 页为宜,亦可根据阅读速度确定学习量,如第一次读 10 分钟左右后停下来。
 - (2) 不要碰到不认识的生词就去看注释: 尽量根据上下文去猜测或推理生词的含义。
 - (3) 第一次阅读只要能基本看懂(70%左右)就达到了预期目标。
 - 2. 第二次阅读原文

注意:

- (1) 在第一次阅读的基础上重新阅读,重点阅读第一次阅读时没有读懂或似懂非懂的地方。
- (2) 遇到不认识的、阻碍理解的常用英语词汇,用荧光笔标示,并去对照查看相应注释。
- (3) 遇到不认识的医学术语,要用荧光笔标示,但不要去看相应注释。
- (4) 第二次阅读的目标是看懂80%左右的内容。
- (5) 针对本书的英语部分,常用英语词汇与医学术语建议用不同颜色的荧光笔标示。
- 3. 第三次阅读原文

注意:

- (1) 先学习已阅读两遍的, 重点需要掌握的常用英语词汇与医学术语, 建议边学边记忆。
- (2) 在第二次阅读的基础上重新阅读,重点阅读第二次阅读时没有读懂或似懂非懂的地方,并反复记忆理解。
 - (3) 遇到不认识或不熟悉的英语词汇先试着回忆学习过的注释,然后对照检查相应注释。
 - (4) 遇到不认识的医学术语要去对照查看相应注释。
 - (5) 第三次阅读的目标是看懂 90% 以上的内容。
 - (6) 第三次阅读完成后,建议用荧光笔把所有有注释的单词标示出来。
- (7) 如有些不认识或不熟悉的词不在本书注释中,可查字典或请教专业教师并在相应注释页上添上那些词,并加注与上下文相符的注释。
 - 4. 第四次阅读原文

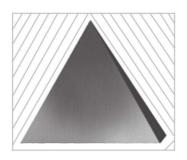
注意:

(1) 在按以上步骤学习完一章内容的基础上进行第四次阅读。

- (2) 遇到不认识或不熟悉的英语词汇先试着尽力回忆学习过的注释,然后与注释核对正确与否。强烈建议:
- · 上课之前按照以上步骤,阅读1~3遍与本次课相关内容。
- · 先尽力猜测词义再去看注释。
- · 带着阅读中遇到的难以解决的问题去听课。
- · 反复阅读还是看不懂的地方一定要及时请教老师。
- · 将注释页空白处当笔记本用。
- · 课后按照步骤视情况复习本书。

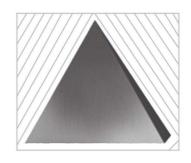
祝您学习成功」

译者



内容提要

本系列教材引自 Elsevier 公司出版的最经典和最畅销、被誉为"护士执照考试圣经"的美国国家注册护士执照考试(NCLEX-RN®)的辅导用书——Saunders Comprehensive Review for the NCLEX-RN® Examination。本书为"护理英语系列教材"的《基础护理》分册,阐述了基础医学和护理方面的内容,包括多元性文化与护理实践,伦理与法律,领导、授权与病人护理的排序,体液与电解质,酸碱平衡,实验室检查,营养,肠外营养,静脉治疗,血液制品的管理,提供安全环境,药物和静脉液体的管理,生命支持,围术期护理,病人体位及管道护理等方面的内容。本套教材在保持原版英语教材原汁原味的同时,对英文原文结合上下文进行了精准词汇注释,使学生既可避免查阅大量英文生词和误查与原著含义不符之烦恼,又可以通过直接阅读理解英文原文、扩大常用及专业词汇量,从而有效提高英语水平。本教材适用于医学本科护理在校生及美国注册护士考生考试辅导。



前 言

随着中国加入 WTO, 我国各行各业日益走向国际化, 医疗行业也不例外。越来越多的国外跨国企业到中国来发展, 向外籍人员提供与国际接轨的医疗服务的任务迫在眉睫。这种对国际化医疗服务扩大的需求既给我国医疗行业在就业和发展方面带来了大好机遇, 又对现有的医疗机构的管理和服务质量以及从业人员的职业素质, 尤其是护理人员的管理和技术水平, 提出了严峻的挑战。我国急需大批与国际接轨的高素质护理人才, 以适应形势发展的需要。

基于培养紧缺的高水平国际化护理人才的目标和各护理院校课程改革的要求,人民军医出版社引进了全球最大的医学图书出版商"爱思唯尔 (Elsevier) 公司"出版的最经典和最畅销、被誉为"护士执照考试圣经"的美国国家注册护士执照考试 (NCLEX-RN®) 辅导用书 —Saunders Comprehensive Review for the NCLEX-RN® Examination,并以此为基础编写了这套《护理英语系列教材》。

本套教材在保持原版英文教材原汁原味的同时,对每页英文原文都进行了针对上下文的精确词汇注释,使学生既免除了查阅大量英文生词之苦和误查与上下文含义不符之痛,又能通过直接阅读理解英文原文,扩大常用及专业词汇量,从而有效提高英语水平。本套双语教材的中文部分主要是对英文原文中可能阻碍学生阅读理解的常用英语词汇和所有医学术语的逐页注释,编写体例区别于逐字逐句翻译、英汉对照式或只在书末对有难度的专业术语加以注释的双语教材。

全套教材分6册(美国护士执照考试入门、基础护理、内外科护理、妇产科护理、儿科护理、精神科护理)。 本书为系列教材之《基础护理》, 共分16章。

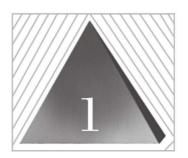
本书教材的读者对象为渴望提高护理英语水平并有志参加国际护理资格证书考试的各级各类医护工作者和在校护理专业(尤其是涉外护理专业)的学生。

在本书编写中承蒙中外护理与语言教育的专家与同仁给予大力支持与帮助,在此一并表示衷心的感谢! 书中若存在错误和疏漏之处,恳请广大读者与各位同仁惠予指正。



目 录

1.	Cultural Diversity and Health Practices	
	多元性文化与护理实践	i Ni
2.	Ethical and Legal Issues	
	伦理与法律	8
3.	Leadership, Delegating, and Prioritizing Client Care	
	领导、授权与病人护理排序4	10
4.	Fluids and Electrolytes	
	体液与电解质	53
5.	Acid-Base Balance	
	酸碱平衡····································	0
6.	Laboratory Values	
	实验室检查	.05
7.	Nutrition	
	营养1	.27
8.	Parenteral Nutrition	
	肠外营养	41
9.	Intravenous Therapy	
	静脉治疗1	.56
10	D. Administration of Blood Products	
	血液制品的管理	.74
11	1. Provision of a Safe Environment	
	提供一个安全环境	.89
12	2. Administration of Medication and Intravenous Solutions	
	药物和静脉液体的管理2	203
13	3. Basic Life Support	
	生命支持	219
14	4. Perioperative Nursing Care	
	围术期护理	233
15	5. Positioning Clients	
	病人体位护理2	256
16	5. Care of Client with a Tube	
	病人管道护理······2	268



Cultural Diversity and Health Practices 多元性文化与护理实践

PYRAMID TERMS

- acculturation Process of learning norms, beliefs, and behavioral expectations of a group other than one's own group.
- **belief** Something accepted as true by a culture.
- **cultural assimilation** Process in which individuals from a minority group are absorbed by the dominant culture and take on the characteristics of the dominant culture.
- cultural competence The acquisition of knowledge, understanding, and appreciation of a culture that facilitates the provision of culturally appropriate health care.
- **cultural diversity** The differences among groups of people that result from ethnic, racial, and cultural variables.
- cultural imposition The tendency to impose one's own beliefs, values, and patterns of behavior on individuals from another culture.
- **culture** The dynamic network of knowledge, beliefs, patterns of behavior, ideas, attitudes, values, and norms that are unique to a particular group of people.
- dominant culture The group whose values prevail within a society.
- ethnic group A group of people within a culture who share an identity based on race, religion,

- color, national origin, or language.
- **ethnicity** An individual's identification of self as part of an ethnic group.
- ethnocentrism An assumption of cultural superiority and an inability to accept the ways of another culture.
- minority group An ethnic, cultural, racial, or religious group that constitutes less than a numerical majority of the population.
- race A grouping of people based on biological similarities. Members of a racial group have similar physical characteristics, such as blood group, facial features, and color of skin, hair, and eyes.
- racism Discrimination directed toward individuals or groups who are perceived to be inferior because of biological differences; often accompanied by oppression.
- **stereotyping** An expectation that all people within the same racial, ethnic, or cultural group act alike and share the same beliefs and attitudes.
- **subculture** A group of people with characteristic patterns of behavior that distinguish the group from the larger culture or society.
- values Principles and standards that have meaning and worth to an individual, family, group, community, or culture.

常用词 Common Words

diversity [n] 多样化 pyramid [n] 金字塔 acculturation [n] 文化适应 norm [n] 标准, 规范 behavioral expectation 行为规范 assimilation [n] (被)吸收或同化 minority group 少数民族群体 absorb [v] 吸收 dominant [a] 占优势的 competence [n] 能力, 技能 acquisition [n] 获得,得到 appreciation [n] 鉴赏, 鉴定 facilitate [v] 使便利 provision [n] 提供, 准备 appropriate [a] 适当的 ethnic [a] 某文化群体的 racial [a] 种族的 variable [n] 变量 imposition [n] 强加 tendency [n] 倾向, 趋势 dynamic [a] 动态的 prevail [v] 流行, 说服 identity [n] 身份,特性 religion [n] 宗教信仰 national origin 民族血统 ethnicity [n] 血统 identification [n] 身份证明 ethnocentrism [n] 种族优越感 assumption [n] 假设 superiority [n] 优越性 constitute [v] 构成 numerical [a] 数字的 racism [n] 种族主义 discrimination [n] 歧视

THE PYRAMID TO SUCCESS

Often, nurses care for clients who come from ethnic, cultural, or religious backgrounds that are different from their own. Awareness of and sensitivity to the unique health and illness beliefs and practices are essential for the delivery of safe and effective care. Acknowledgment and acceptance of cultural differences with a nonjudgmental attitude are essential to providing culturally sensitive care. The belief underlying the NCLEX-RN examination test plan is that persons are unique individuals and define their own systems of daily living, which reflect their values, motives, and lifestyles. The Integrated Processes addressed in this chapter are Caring, Communication and Documentation, Nursing Process, Teaching/Learning.

CLIENT NEEDS

Acting as a client advocate

Safe and Effective Care Environment

Ensuring ethical practices
Ensuring legal rights and responsibilities
Establishing priorities
Maintaining confidentiality
Providing continuity of care
Respecting the client's control of personal environment and property
Upholding client rights

Health Promotion and Maintenance

Considering cultural issues related to family systems and family planning Identifying changes related to the aging process Preventing disease

Promoting health and wellness Providing health screening Respecting lifestyle choices

Psychosocial Integrity

Assisting the client to use coping mechanisms effectively

Identifying the client's support systems

Identifying cultural diversity issues
Identifying end-of-life care issues
Identifying family dynamics as they
relate to the client's culture
Providing a therapeutic environment
Respecting religious and spiritual influences on health

Using therapeutic communication techniques

Physiological Integrity

Identifying the cultural considerations related to alternative and complementary therapies

Identifying the cultural issues related to receiving blood and blood products

Implementing therapeutic procedures Providing nonpharmacological comfort interventions

Providing nutrition and oral hydration (Boxes 1-1 and 1-2)

Providing palliative care
Using cultural concepts in illness management

I. AFRICAN AMERICANS

A. Communication

- Members are competent in standard English and in black English, a variation based on pronunciation, grammar, and vocabulary.
- Head nodding does not necessarily mean agreement.
- Prolonged eye contact may be interpreted as rudeness or aggressive behavior.
- Nonverbal communication is important.
- Personal questions asked on initial contact with a person may be viewed as intrusive.
- B. Time orientation and personal space preferences
 - Time orientation varies according to age, socioeconomics, and subgroups and may include past, present, or future orientation.
 - Members may be late for an appointment because relationships and events may be deemed more

(接上页)

perceive [v] 感觉,察觉 inferior [a] 低等的,下级的 accompany [v] 伴随 oppression [n] 压迫 stereotyping [n] 刻板印象 subculture [n] 亚文化 distinguish [v] 辨别 principle [n] 原则 standard [n] 标准

医学术语 Medical Terms

physical characteristic 体态特点 facial feature 面部特征

常用词 Common Words

client [n] 病人 advocate [n] 拥护者 establish [v] 建立 priority [n] 优先 confidentiality [n] 保密性 property [n] 财产 uphold [v] 维护 promotion [n] 提升,晋升 wellness [n] 保健 health screening 健康检查 integrity [n] 完整, 完善 spiritual [a] 精神上的 influence [n] 影响 alternative [a] 可供选择的 complementary [a] 互补的 implement [v] 贯彻, 执行 intervention [n] 干预,介入 prolonged [a] 长时间的 rudeness [n] 粗鲁 aggressive [a] 挑衅的 nonverbal [a] 非语言的 initial [a] 最初的

医学术语 Medical Terms

nonjudgmental [a] 不偏倚的
underlying [a] 潜在的
reflect [v] 反射
motive [n] 动机
integrate [v] 整合
acknowledgement [n] 致谢,鸣谢

- important than being on time.
- 3. Members are comfortable with close personal space when interacting with family and friends.

C. Social roles

- Large extended family networks are important; older adults are respected.
- 2. Many households are headed by a single-parent woman.
- 3. Religious **beliefs** and church affiliation are sources of strength.

D. Health and illness

- Religious beliefs profoundly affect ideas about health and illness.
- Members believe that illness can be prevented by nutritious meals, exercise in fresh air, and cleanliness.

E. Health risks

- 1. Sickle cell anemia
- 2. Hypertension
- 3. Heart disease
- 4. Cancer

BOX 1-

Dietary Preferences

AFRICAN AMERICANS

Fried foods Pork, greens, rice Some pregnant African-American women engage in pica.

ASIAN AMERICANS

Soy sauce Raw fish Rice

EUROPEAN (WHITE) ORIGIN AMERI-

Carbohydrates (potatoes) Red meat

HISPANIC AMERICANS

Beans Fried foods Spicy foods Tortillas Carbonated beverages

AMERICAN INDIANS, ALEUTS, ESKI-

Blue cornmeal Fish

Game

Fruits and berries

Navajos prefer meat and blue cornmeal and tend to avoid consumption of milk.

- 5. Lactose intolerance
- 6. Diabetes mellitus
- 7. Obesity
- 8. Human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS)

F. Interventions

- Recognize the presence of many individual and subgroup variations.
- 2. Build a relationship based on trust.
- Clarify the meaning of the client's verbal and nonverbal behavior.
- 4. Be flexible and avoid rigidity in scheduling care.
- 5. Encourage family involvement.
- Alternative modes of healing may include herbs, prayer, and laying on of hands.

II. ASIAN AMERICANS

A. Communication

- Languages include Chinese, Japanese, Korean, Vietnamese, and English.
- 2. Silence is valued.
- 3. Eye contact may be considered inappropriate or disrespectful.
- Criticism or disagreement is not expressed verbally.
- 5. Head nodding does not necessarily mean agreement.
- 6. The word "no" may be interpreted as disrespect for others.
- B. Time orientation and personal space preferences
 - 1. Time orientation reflects respect for the past but includes emphasis on the present and future.
 - Preference is for a formal personal space, except with family and close friends.
 - 3. Usually, members do not touch others during conversation.
 - 4. Touching is unacceptable with members of the opposite gender.
 - 5. The head is considered to be sacred; therefore, touching someone on the head is disrespectful.

C. Social roles

- 1. Members are devoted to tradition.
- 2. Large extended-family networks

(接上面)

consumption [n] 消费,消耗 pork [n] 猪肉 Hispanic [a] 西班牙的,西语国家的 tortilla [n] 玉米粉圆饼 carbonated beverage 碳酸饮料

医学术语 Medical Terms

psychosocial [a] 社会心理的 coping mechanism 应对机制 therapeutic [a] 治疗的 physiological [a] 生理的 nonpharmacological [a] 非药理的 nutrition [n] 营养 oral hydration 口服补液 palliative care 姑息治疗 pica [n] 异食癖 carbohydrate[n] 糖类(碳水化合物) sikle cell anemia 镰状红细胞 hypertension [n] 高血压

常用词 Common Words

Aleut [n] 阿留申人 Eskimo [n] 爱斯基摩人 cornmeal [n] 玉米粉 berry [n] 浆果 Navajo [n] 美国最大的印第安部落 affiliation [n] 联系, 从属 strength [n] 力量,体力 profoundly [adv] 深刻地 variation [n] 变化 clarify [v] 澄清 flexible [a] 灵活的 rigidity [n] 死板 scheduling [n] 时间安排 herb [n] 草药 prayer [n] 祈祷 vietnamese [n] 越南语 criticism [n] 批评, 批判 emphasis [n] 强调, 重点 gender [n] 性别 sacred [a] 神圣的,不可冒犯的 devote [v] 奉献

医学术语 Medical Terms

pregnant [a] 妊娠的