

Second Edition

NURSING INTERVENTIONS

Essential Nursing Treatments

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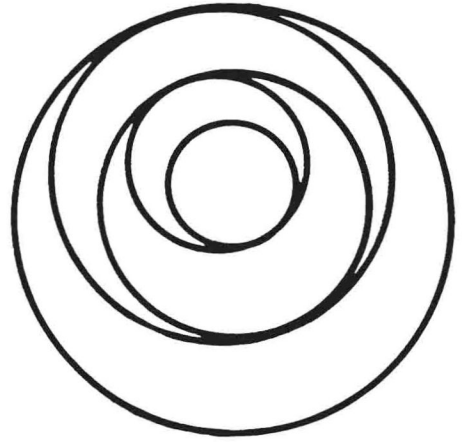
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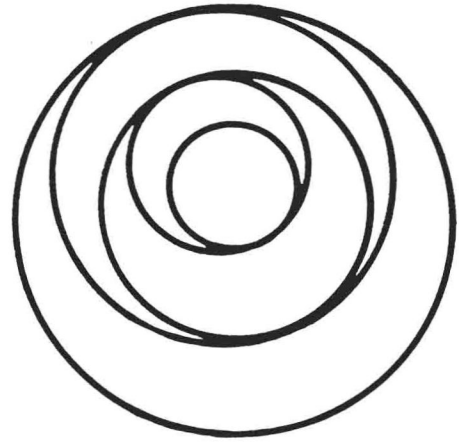
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PREFACE



In 1985 we published the first edition of this book. It included 26 chapters each on a different nursing intervention. It was a pioneering work developed to fill a void. Up until this time, little attention had been paid to the conceptualization and identification of nursing interventions. While nurses had done treatments for patients for decades, the idea of discussing nursing interventions as concepts was new. Our text and another that year were the first to focus on independent nursing interventions.

Much has happened in nursing and health care since the first edition. With the increase in computerization, the need to contain costs, and the emphasis on establishing quality of care, there is recognition among nursing leaders and policy makers that we need to document and evaluate the effects of nursing care. In order to do that, we need to systematically label and define those things that nurses do so that nursing care can be included in information system databases; we need to understand the research base for our current interventions in order to study and add to our body of practice knowledge; and we need to develop a common language about our care that can be used to better educate our new members and can communicate with the language of other health care providers.

New features of the second edition

The second edition of the book has several new features.

1. It has been expanded from 26 to 45 chapters. Seventeen of the chapters are on interventions that were included in the first edition. These were updated by previous authors or have new authors. The remaining 28 chapters are new to this edition. Regretfully, we had to leave out some interventions which were included in the first edition in order to make space for the new ones. The choice of what to include was difficult but it was based on our estimation of frequency of use by clinicians (for example, Culture Brokerage, Role Supplementation, and Music Therapy from the first edition are important and helpful interventions, but they are not used as frequently as others) and elimination of redundancies (for example,

in the first edition we had three chapters on Counseling, Nutritional Counseling, and Sexual Counseling while in this one we only have Counseling).

2. The first edition had chapters organized in four sections: Stress Management, Lifestyle Alteration, Acute-Care Management, and Communication. This edition is organized in five sections: Self-Care Assistance; Acute-Care Management; Life-Style Alteration; Health Promotion; and Life Support. The overviews to each section highlight the material in each of the chapters and can be used to select individual chapters for reading.

All of the chapters in the Self-Care Assistance section are new. The interventions included here are the basics of nursing care, for example, Hygiene Assistance, Feeding, Positioning, and Sleep Promotion. While nurses have always done this care, in the past there has been little conceptualization and research about some of these interventions. The section on Acute-Care Management has been expanded. In this edition it includes both psychosocial (for example, Crisis Intervention and Presence) and physiological (for example, Fluid Therapy and Infection Control) interventions that are commonly used by hospital nurses. Discharge Planning concludes this section as it is chiefly used by hospital nurses to help patients adjust to care needs after discharge. The section of Life-Style Alteration includes 6 chapters that were updated from the first edition and five new chapters. The chapters in this section (for example, Values Clarification and Family Therapy) are used most often by nurses who work with patients and families needing to establish and reach new life goals. The section on Health Promotion is an expansion of the section in the previous edition that was called Stress Management. Chapters in this section include both physical (for example, Smoking Cessation and Weight Reduction) and mental (for example, Relaxation Training and Contracting) interventions to improve the health status of the patient. The final section on Life Support is new. Only one chapter in this section (Surveillance) was included in the first edition; all of the rest are new. The chapters in this section demonstrate the essential life saving role of nurses who work in critical care areas.

3. The selection of chapters and sections are based on our expanded definition of nursing interventions. In the first edition we defined a nursing intervention as “an autonomous action based on scientific rationale that is executed to benefit the client in a predicted way related to the nursing diagnosis and the stated goals.” Since then we have revised our thinking and our definition: “A nursing intervention is any direct care treatment that a nurse performs on behalf of a client which includes nurse-initiated treatments, physician-initiated treatments, and performance of daily essential functions. These are at the conceptual level and require a series of actions or activities to carry them out.” The revised definition captures both the autonomous and collaborative roles of the nurse. A nursing intervention is the action of the nurse in response to either a nursing diagnosis, a physician diagnosis and order, or the patient who may simply need some help with something that does not require a diagnosis. As we continue to work on the conceptualization of nursing interventions, we anticipate that this definition will continue to be refined.

4. The introductory chapter has been rewritten to reflect the inclusiveness of the new definition. The chapter also has new sections on nursing outcomes and on clinical decision making. We believe that the term “nursing process” is now obsolete and that we should now talk about nursing content (diagnoses, interventions and outcomes) and clinical decision making (the process of choosing these and making relationships).

5. The chapters are more clinically useful than in the first edition. While each of the authors was asked to cover the research base for the intervention, they were

instructed for this edition to define in a clinical protocol what it is one does to carry out the intervention. The book as a whole thus has more clinical application than the first edition, without sacrificing the overview of research. Case studies included in nearly all chapters also illustrate the use of the content.

Who should use this book

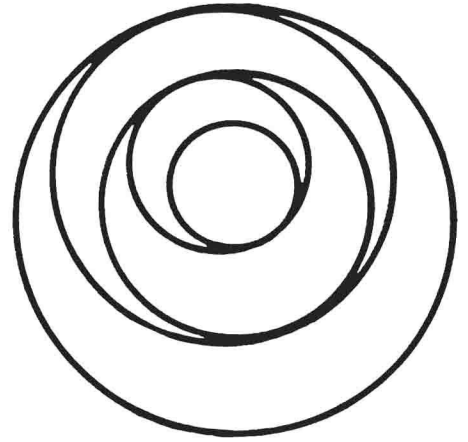
The book is useful for several audiences. While the book was chiefly written with graduate students in mind, it should be useful in both undergraduate and graduate programs. The book can be used as the text in graduate courses that focus on interventions. It can be a supplementary text in a theory course when an instructor desires to provide illustrations of nursing's developing theory. It also can be used as a supplement to undergraduate clinical textbooks. Some undergraduate programs may want to choose this as a text that can be used across the curriculum in several courses. In this case the interventions in the section on Self-Care Assistance would be included in the foundation course, those in Acute-Care Management in the course that focused on acute hospital care, those in the Life-Style Alteration section in the course on chronic illness, those in the Health Promotion section in the course on wellness, and those in the Life Support section would be covered when the student had critical care content and experience. The book could be particularly useful in RN-to-BSN programs, where nurses can approach familiar activities from a conceptual perspective, having already been exposed to them through basic education and clinical practice. As in the past, clinical specialists will also find the book helpful to document their treatments, and researchers developing studies in any of these areas will find the content here an excellent starting point.

The growth in nursing knowledge

All of the contributors made enormous efforts to define and clarify the interventions. Synthesizing the literature and their practical experience, they have made explicit what has previously been implicit. As the movement to define and articulate the treatments that nurses perform grows, this book has expanded. In a few more years it will be impossible to hold all of the nursing interventions in one text. Several of the chapters in this edition will become books in themselves in order to develop the intervention labels in particular specialty areas. We are excited about the book's contribution to the growth in nursing knowledge. We look forward to the response from the professional community.

*Gloria M. Bulechek
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The success of this book is a result of the combined efforts of many people.

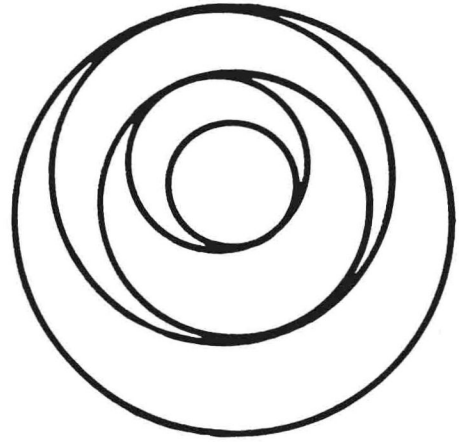
We thank the contributors who have synthesized large amounts of literature and applied excellent conceptual skills to define their interventions. In many chapters they have made explicit what has previously been implicit.

We thank the readers and users of the book for your continued support. We were able to publish this second edition because you found the first helpful.

We thank our colleagues at Iowa who are engaged with us in an effort to define a taxonomy of nursing interventions. This book has benefited from our continuing dialogue with them.

In addition, we thank several individuals. Our editor, Thomas Eoyang and his assistant, Terri Fortiner, at Saunders have provided timely and helpful comments. We particularly appreciate Tom's continued support of this book and his recognition and appreciation of its contribution to the knowledge base of nursing. We also thank Jennifer Clougherty, Sue Templin, and Kara Logsdon, all members of the staff at the College of Nursing at Iowa, who provided administrative and secretarial support for the book. They helped keep us on time and made it possible for busy people to complete this project.

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