护理专业英语

NURSING ENGLISH

主编　谢　红　李晓玲
主审　林东涛　尹俊波

四川大学出版社

责任编辑:黄新路
责任校对:张　晶
封面设计:米茄设计工作室
责任印制:杨丽贤

图书在版编目(CIP)数据

护理专业英语 / 谢红，李晓玲主编. —成都：四川大学出版社，2005. 6
ISBN 7-5614-3071-X

Ⅰ. 护…　Ⅱ. ①谢…　②李…　Ⅲ. 护理学-英语　Ⅳ. H31

中国版本图书馆 CIP 数据核字（2005）第 052466 号

书名　护理专业英语

主　　编　谢　红　李晓玲
出　　版　四川大学出版社
地　　址　成都市一环路南一段 24 号 (610065)
发　　行　四川大学出版社
印　　刷　郫县犀浦印刷厂
成品尺寸　185 mm×260 mm
印　　张　13.5
字　　数　310 千字
版　　次　2005 年 6 月第 1 版
印　　次　2005 年 6 月第 1 次印刷
印　　数　0 001～3 000 册
定　　价　29.00 元

版权所有◆侵权必究
此书无本社防伪标识一律不准销售

◆读者邮购本书,请与本社发行科联系。电 话:85408408/85401670/85408023　邮政编码:610065
◆本社图书如有印装质量问题,请寄回出版社调换。
◆网址:www. scupress. com. cn

前　言

随着护理专业人才国际化进程的加快，国际间学术交流的日益频繁，我国护理界对护理专业人员具备基本的外语交流能力和专业信息接受能力的要求进一步提高，由此对培养高层次护理人才的高等医药院校也提出了更高的要求。本着教育部“本科教育要创造条件使用外语进行公共课和专业课教学”的有关精神，四川大学华西临床医学院组织护理专业中青年骨干教师于2004年初编写了这套《护理专业英语》，并将其试用于护理专业本科层次的教学。根据教师和学生对本教材的反馈意见，编者对本书作了仔细的修订：突出选文的科学性、可读性和趣味性，内容力求新颖、完整，注重护理新知识、新理论与新方法的介绍。本教材一改以往的固有格式，没有将所有的选文全文翻译，仅对重点词汇和疑难句子作了注释；另外，还编写了相关的日常用语，以增强本书的实用性，提高其对临床护理实践的指导价值。本教材可供护理专业本科生以及护理专业教师使用，也可作为临床护理人员自学专业英语的参考书。

《护理专业英语》共包括37个单元和4个附录，主要介绍护理基本知识与理论、各专科护理操作技能，以及常见疾病的症状和护理措施。同时结合护理工作的实际情况、当代医学和护理的发展趋势，附录部分添加了护理记录、循证医学、进口药品说明书的读法以及医学词根和词缀等内容。本书还针对课文内容编写了5套综合练习题，内容覆盖所有课文，并附参考答案，以便读者测试自己对文章的理解程度。

本书由谢红和李晓玲统稿，各单元编写分工如下：

冯先琼：1，8；宋锦平：12，26；刘素珍：2，7，9；王颖：13，31；李继平：3，5，6；王世平：14，15，22；李晓玲：4，23，32；方进博：16，17，27，附录1；赵秀芳：10，35；李小麟：24，25；谢红：11，28，36，附录2，附录3，附录4；陈红：29，30，37；王艳：18，19，20，21；王玉琼：33，34。

在本教材编写的过程中，得到四川大学邓洪教授、林东涛老师、尹俊波老师在教材的大纲制定和教材审定方面的大力支持，编者在此表示衷心的感谢。

因编者水平有限，经验不足，书中不当之处，请读者指正。

谢　红　李晓玲

2005年4月15日

于四川大学华西临床医学院

此为试读，需要完整PDF请访问：www.ertongbook.com

Contents

Unit 1 Development of Nursing …… (1)
Unit 2 Health and Illness …… (5)
Unit 3 Health Promotion …… (9)
Unit 4 Nursing Process …… (13)
Unit 5 Communication in Nursing …… (17)
Unit 6 Health Education …… (22)
Unit 7 Community Health Nursing …… (26)
Unit 8 Stress and Adaptation …… (29)
Unit 9 Rehabilitation …… (32)
Unit 10 Growth and Development …… (36)
Unit 11 Vital Signs …… (40)
Unit 12 Health Assessment …… (44)
Unit 13 Isolation and Infection Control …… (48)
Unit 14 Medication …… (52)
Unit 15 Injections …… (56)
Unit 16 Blood Transfusion …… (61)
Unit 17 Wound Care …… (65)
Unit 18 Intubation …… (70)
Unit 19 Suction …… (74)
Unit 20 Cardiopulmonary Resuscitation …… (78)
Unit 21 Nutrition …… (82)
Unit 22 Shock …… (86)
Unit 23 Pain …… (91)
Unit 24 Anxiety …… (96)
Unit 25 Fever …… (100)
Unit 26 Diarrhea …… (104)
Unit 27 Constipation …… (108)
Unit 28 Pneumonia …… (112)
Unit 29 Hypertension …… (116)
Unit 30 Diabetes Mellitus …… (121)
Unit 31 Hepatitis …… (125)

Unit 32 Care of the Client with Surgery …… (129)
Unit 33 Main Changes and Care of Woman during Pregnancy …… (134)
Unit 34 Main Changes and Care of Woman during Postpartum …… (138)
Unit 35 Breast-Feeding …… (142)
Unit 36 Contraception …… (146)
Unit 37 Sexually Transmitted Diseases (STDs) …… (150)

Appendix 1 Documentation …… (153)
Appendix 2 A Brief Introduction to Evidence-Based Medicine …… (156)
Appendix 3 A Brief Introduction to Drug Instructions …… (159)
Appendix 4 Prefixes, Bases and Suffixes …… (165)
Tests …… (170)
Answers to the Tests …… (185)
References …… (187)
Glossary …… (189)

目　录

第 1 单元　护理的发展 …… (1)
第 2 单元　健康与疾病 …… (5)
第 3 单元　健康促进 …… (9)
第 4 单元　护理程序 …… (13)
第 5 单元　交流技巧 …… (17)
第 6 单元　健康教育 …… (22)
第 7 单元　社区护理 …… (26)
第 8 单元　压力与适应 …… (29)
第 9 单元　康复 …… (32)
第 10 单元　生长与发育 …… (36)
第 11 单元　生命体征 …… (40)
第 12 单元　健康评估 …… (44)
第 13 单元　隔离技术 …… (48)
第 14 单元　给药 …… (52)
第 15 单元　注射 …… (56)
第 16 单元　输血 …… (61)
第 17 单元　伤口护理 …… (65)
第 18 单元　插管 …… (70)
第 19 单元　吸痰 …… (74)
第 20 单元　心肺复苏 …… (78)
第 21 单元　营养 …… (82)
第 22 单元　休克 …… (86)
第 23 单元　疼痛 …… (91)
第 24 单元　焦虑 …… (96)
第 25 单元　发热 …… (100)
第 26 单元　腹泻 …… (104)
第 27 单元　便秘 …… (108)
第 28 单元　肺炎 …… (112)
第 29 单元　高血压 …… (116)
第 30 单元　糖尿病 …… (121)
第 31 单元　肝炎 …… (125)

第 32 单元　手术病人的护理 …… (129)
第 33 单元　孕期的主要变化和护理 …… (134)
第 34 单元　产后主要变化和护理 …… (138)
第 35 单元　母乳喂养 …… (142)
第 36 单元　避孕 …… (146)
第 37 单元　性传播疾病 …… (150)

附录 1　护理记录 …… (153)
附录 2　循证医学简介 …… (156)
附录 3　药品说明书的读法 …… (159)
附录 4　医学词缀 …… (165)
综合练习题 …… (170)
练习答案 …… (185)
参考文献 …… (187)
词汇表 …… (189)

此为试读,需要完整PDF请访问: www.ertongbook.com

Unit 1 Development of Nursing

Objectives

1. State the contributions of Florence Nightingale to the development of nursing;
2. Identify the four concepts essential to nursing;
3. State the aims of nursing.

Nursing has been called the oldest art and the youngest profession. The word **nurse** evolved from the Latin word ***nutricius*** which means "nourishing". When looking at the historical development of nursing, most *nurse historians*① agree that nursing or the care of the ill and injured has been done since the beginning of human life and has generally been a woman's role. A mother caring for a child in a cave is an example of early nursing.

Nursing before 19th century was developed slowly and fastidiously. *No special training was provided or required for the person who served as nurses, and the image of nurses was bound to the servant or simple career.*②

*The emergence of professional nursing is usually attributed to the influence of Florence Nightingale.*③ Florence Nightingale, who was born in 1820 in a wealthy and intellectual family in England, was well educated and her education included several ancient and modern languages, literature, philosophy, history, science, mathematics, religion, art and music. It was expected that she would follow the usual path of a wealthy woman of those days: to be married, bearing children and maintaining an elegant home. However, Nightingale chose to become a nurse, and such decision was shaped by three major influences in her life. Firstly, she was dissatisfied with what she viewed as the dull, routine life-style of the up-class women of her day. Secondly, she had received a "classical education which is equal to that of most men of her day". This education provided her with an understanding of the circumstances of the world in which she lived. Thirdly, she became aware of the inadequate care being provided in hospitals as she accompanied her mother on visits to the ill, and she believed that she was "called by God to help others and to improve the well-being of mankind".

At that time, hospitals were terrible places and nurses were, in most cases, the dregs of society. Thus, hospitals were certainly not places for up-class women to go and her family was

① 护理史学家。
② 从事护理工作的人没有也无需经过任何特殊的训练，护士的形象与仆人或从事简单职业的人相提并论。
③ 专业护理的出现多归因于南丁格尔的影响。

in an uproar over her decision. Nightingale studied nursing in secret and she visited *Kaiserswerth*① and received training there for three months at the age of 31.

The outbreak of the *Crimean War*② provided Nightingale an opportunity to organize a small band of nurses to work for the British hospital at *Scutari in Turkey*③. When they arrived, what she found was a hospital "so crowded that patients lay on the floor, still in bloody uniforms, bath equipment, cutlery, and laundry facilities were either non-existent or nearly so". With great compassion, Nightingale and her nurses began to work, they changed the military hospitals by setting up diet kitchens, a laundry, recreation centers, and reading rooms, and organizing classes for orderlies. Through her efforts, Florence Nightingale made a great difference in the care of the British soldiers, and her efforts were largely responsible for *dramatic reductions in the death rate*④ of soldiers from 42 percent to 2 percent. *This great success changed the prejudices against women and elevated the status of all nurses*.⑤

After the war, Nightingale returned to England. *She continued to devote herself to nursing by establishing school of nursing based on her knowledge of what was effective nursing*.⑥ The Nightingale Training School for Nurses at St. Thomas' Hospital in London was the first nursing school which could provide systematic training programs for nurses in the world. And eventually, many schools in Europe and America used the Nightingale model for nursing education.

In addition, Florence Nightingale was a productive writer. She wrote and published countless articles and papers. Her most famous written documents were *Notes on Nursing*⑦ and *Notes on Hospital*⑧. Through those publications, she shared her ideas about nursing and nursing education, thus *her contributions to nursing are numerous and far-reaching*⑨.

Modern nursing has been developed rapidly since Florence Nightingale established professional nursing and now its unique body of knowledge has been formulated and the function or focus of nursing has been defined.

In defining the knowledge base of nursing, four main concepts need to be briefly introduced here since they dominate and shape *professional nursing practice*⑩. The four concepts are: the person, environment, health, and nursing.

Person: As the recipient of care, the person is the focus of professional nursing. *The person is viewed as an integrated whole which consists of bio-psycho-social aspects*.⑪ Because

① 德国凯撒斯畏斯城。
② 克里米亚战争。
③ 土耳其斯库塔里。
④ 死亡率显著下降。
⑤ 这一巨大成就改变了社会对妇女的偏见，也提升了所有护士的地位。
⑥ 她继续投身于护理事业，利用她对护理的认识建立了一所护理学校。
⑦ 《护理札记》。
⑧ 《医院札记》。
⑨ 她对护理事业的贡献是巨大而意义深远的。
⑩ 护理专业实践。
⑪ 人被视为是由生理－心理－社会诸方面构成的一个整体。

persons are greater than the sum of their parts,① we cannot simply learn about persons by viewing their components in isolation. The interactions of all the parts are what make persons unique.

Environment: Environment is an important concept in nursing because a healthy environment leads to healthy people. Physical, social, political, economic and cultural environments all influence health. A pleasant and comfortable environment has a significant relationship to health.

Health: Health has been defined in many ways. However, *nurses agree the definition from WHO, that is "health is a state of complete physical, mental, and social well-being, not merely the absence of disease or infirmity"*.②

Nursing: Nursing is both an art and a science. Art may be viewed as the systematic application of knowledge or skills. As a science and a profession, nursing is experiencing evolutional growth of its own. There is no single definition of nursing. However, *the theme of helping and caring is inherent in nursing*.③

The aims or the focuses of nursing have been clearly identified today. Nursing practice involves four areas related to health — *health promotion, health maintenance, health restoration, and care of the dying*④. Health promotion means helping people develop resources to maintain or enhance their well-being. Health maintenance nursing activities are those actions that help clients to maintain their health status. Health restoration means helping people to improve health following health problems or illness. Care of the dying involves comforting and caring for people of all ages while they are dying.

Daily Language

1. When is the Nurses Day?
   护士节是哪一天？
2. It's on May 12 each year.
   每年 5 月 12 日为护士节。
3. Why do people choose the day?
   为什么选择那一天？
4. We choose that day in honor of Florence Nightingale, who established modern nursing. She was born on May 12th.
   我们选择 5 月 12 日是为了纪念南丁格尔，她创立了现代护理学。南丁格尔出生在 5 月 12 日。

---

① 整体“人”的功能大于其各方面机能的简单相加。
② 护理多采用 WHO 对健康的定义：“健康不仅是没有疾病或虚弱，它是一种生理、心理、社会适应的完全良好状态。”
③ 帮助与照顾始终是护理固有的主题。
④ 增进健康、保持健康、恢复健康以及临终关怀。

Vocabulary

1. profession [prəˈfeʃən] *n*. **专业**
2. nourishing [ˈnʌriʃiŋ] *adj*. **有营养的，滋养多的**
3. fastidiously [fæsˈtidiəsli] *adv*. **艰难地**
4. cutlery [ˈkʌtləri] *n*. **餐具**
5. compassion [kəmˈpæʃən] *n*. **同情，怜悯，热情**
6. recreation [rekriˈeiʃ(ə)n] *n*. **消遣，娱乐**
7. orderly [ˈɔːdəli] *n*. **勤杂工，勤务兵**
8. dramatic [drəˈmætik] *adj*. **戏剧性的，生动的**
9. prejudice [ˈpredʒudis] *n*. **偏见**
10. productive [prəˈdʌktiv] *adj*. **能产的，多产的**
11. far-reaching [fɑːˈriːtʃiŋ] *adj*. **影响深远的，有广泛影响的**
12. recipient [riˈsipiənt] *adj*. **容易接受的** *n*. **接受者**
13. integrated [ˈintigreitid] *adj*. **综合的，完整的**
14. interaction [ˌintərˈækʃən] *n*. **交互作用，互动**
15. infirmity [inˈfəːmiti] *n*. **虚弱，衰弱，缺点**
16. maintenance [ˈmeintinəns] *n*. **维护，保持，生活费用，扶养**
17. restoration [ˈrestəˈreiʃən] *n*. **恢复，复位，修补**
18. well-being [ˈwelbiiŋ] *adj*. **康乐，安宁，福利**

Questions on Reading

1. What main contributions has Florence Nightingale made in the development of professional nursing?
2. What are the four concepts essential to nursing? How to describe them?
3. What are the main focuses of nursing?

此为试读，需要完整PDF请访问：www.ertongbook.com

Unit 2 Health and Illness

Objectives

1. Define health and illness;
2. Describe the characteristics of health definition of WHO;
3. Differentiate illness and disease;
4. Identify the factors that influence health.

Health is a multidimensional concept. Traditionally, health has been defined as a state of presence or absence of disease. *Nightingale defined health as a state of "being well and using individual's every power the person has to the fullest extent".*① In 1980, health was defined by the *American Nurses Association*② (ANA) in its social policy as "*a dynamic state of being in which the developmental and behavioral potential of an individual is realized to the fullest extent possible.*"③

The World Health Organization (WHO) takes a more holistic view of health, and defined health in 1947 as "*a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity.*"④ This is the most widely accepted definition of health. The natures of this definition are: to reflect concern for the individual as a total person functioning physically, psychologically, and socially; to place health in the context of environment; and to equate health with productive and creative living. Generally, health, which is a positive state, is *a wide variation in personal meaning and perceptions of health.*⑤ It considers the dimensions of the person, which include the physical, intellectual, emotional, socio-cultural, spiritual, and environmental aspects composing the whole person.

The definitions of illness are also individualized to each person who experiences an alteration in health. The terms "illness" and "disease" are often used to mean the same process, but they are different. Illness is the personal experience of feeling unhealthy. It is a state in which *the person's physical, emotional, intellectual, social, developmental, or spiritual function is reduced or impaired compared with previous experience.*⑥ It involves

① 南丁格尔将健康定义为"身体处于良好状态并最大限度发挥个体所有的能力"。
② 美国护士协会。
③ (健康是) 一个能尽可能发挥个体发展和行为潜能的动态过程。
④ (健康是) 一种生理、心理和社会适应的完好状态，而不仅仅是没有疾病或虚弱。
⑤ 在个体的健康含意和感受方面的一个大范围的变异。
⑥ 人的生理、情绪、智力、社会、发展或精神活动方面与以前相比有所减退或削弱。

changes in the person's state of being and in social function, and is highly subjective; only the individual can say he or she is ill.

*Disease is an interruption in the continuous process of health, manifested by abnormalities or disturbance in the structure and function of body parts, organs or systems.*① When these abnormalities *appear clustered together*②, the signs and symptoms of a particular disease come into view. Disease can result in a reduction of capacities or a shortening of normal life span. Opposite to illness, disease is objective. It may be diagnosed by physicians through specific inspections.

A person may feel ill or just not feel well because of a disease. Whereas a person may also not feel ill even he has specific disease. Therefore, illness may or may not be related to disease.

People's health is influenced by many factors, which are generally divided into 5 groups: physical, psychological or emotional factors, environmental factors, lifestyle, and social factors.

Physical factors include *genetic makeup*③, age, race, developmental level, and sex. Genetic makeup affects biologic characteristics, innate temperament, activity level, and intellectual potential. The susceptibility of some specific diseases is related to genetic makeup.

Psychological or emotional factors contain *mind-body interactions*④ and self-concept. Interaction of individual's mind and body and emotional responses of individual may impact health status positively or negatively. The manners and attitudes with which people view and deal with situations can be affected by *self-concept*⑤.

The environmental factors are housing, sanitation, climate, food, air, water, soil, sunshine and so on. Environmental pollutants, which can change normal components of life substances, include fire, smoking, waste water, exhaust gas, residue of industry and human life, radiation such as X-ray, electromagnetic wave and microwave, nitrogen oxides from vehicles, "greenhouse effect" caused by carbon dioxide, pesticides and chemicals used by farmers and so on.

*Lifestyle involves aspects of persons' behavior and surroundings that they control.*⑥ It may affect health positively or negatively. Lifestyle with positive effects on health is a healthy lifestyle, such as regular exercise, alcohol and smoking avoidance, immunization update, regular dental checkups and so on. Lifestyles with potentially negative effects on health are often defined as risk factors, such as smoking, frequently staying up all night or lying in, etc.

---

① 疾病是健康连续过程的中断，通过机体各部分、器官或系统的异常或紊乱表现出来。
② 集中出现。
③ 遗传构成。
④ 身心的交互作用。
⑤ 自我概念。
⑥ 生活方式涉及人的行为和可控制的环境等方面。

There are many social factors influencing individual's health, such as stable marriage or intimate family relationship, economic level, occupational situations and culture, health care system, social violence and traffic accident, people's cultural background, etc. These factors may be risk factors for illness, or healthy factors that can promote health.

Daily Language

1. You look pale. What's wrong with you?
   你脸色苍白，怎么了？
2. I didn't sleep a wink last night.
   我昨晚一夜没睡。
3. Do you have anything in your mind? You look so concerned!
   你在想什么？你看起来好像有心事。
4. I'm worried about my husband. His snoring is getting worse and worse.
   我为我的丈夫担心。他打鼾越来越严重了。
5. Maybe you need to consult a doctor about it.
   也许这个问题你需要看医生。
6. I am ill with a common cold.
   我生病感冒了。
7. Don't worry. I will make an arrangement for you to see the doctor.
   别担心，我会帮你预约医生的。
8. I don't feel well today. I think I am ill.
   我今天觉得不舒服，我想我是生病了。
9. He has been diagnosed to have pneumonia.
   他被诊断患了肺炎。

Vocabulary

1. multidimensional [ˌmʌltidiˈmenʃənəl, -daiˈm-] *adj*. **多面的，多维的**
2. holistic [həuˈlistik] *adj*. **整体的，全盘的**
3. infirmity [inˈfəːmiti] *n*. **虚弱，衰弱，缺点**
4. variation [veəriˈeiʃ(ə)n] *n*. **变更，变化，变异，变种**
5. intellectual [intiˈlektjuəl] *adj*. **智力的，有智力的** *n*. **知识分子**
6. spiritual [ˈspiritʃuəl] *adj*. **精神上的**
7. abnormality [æbnɔːˈmæləti] *n*. **变态；畸形，异常性**
8. disturbance [diˈstəːbəns] *n*. **骚动，动乱，打扰，干扰，骚乱，搅**
9. inspection [inˈspekʃ(ə)n] *n*. **检查，视察；望诊**

10. genetic [dʒi'netik] *adj*. **遗传的，起源的**
11. temperament ['tempərəmənt] *n*. **气质，性情，易激动，急躁**
12. susceptibility [səsepti'biliti] *n*. **易感性，感受性，感情**
13. radiation [reidi'eiʃ(ə)n] *n*. **辐射，放射，放射线，放射物**
14. electromagnetic [ilektrəu'mægnitik] *adj*. **电磁的**
15. microwave ['maikrəuweiv] *n*. **微波**
16. nitrogen ['naitrədʒ(ə)n] *n*. **氮**
17. pesticide ['pestisaid] *n*. **杀虫剂**

Questions for Reading

1. In your opinion, what is health? What is illness?
2. What's the difference between illness and disease?
3. What are the factors that influence health? And how do they influence health?

Unit 3 Health Promotion

Objectives

1. Describe the purposes of health promotion;
2. Understand the roles of nurses in health promotion;
3. Apply the nursing process to health promotion.

Health promotion is defined as "activities directed toward increasing the level of well being." It is considered to be an approach to maintain healthier behavior for the population of society. *Positive health promotion is the process of enabling people to increase control over and improve their own health, aimed primarily at improving health potential and maintaining health balance.*①

The nurses play a very important role in health promotion. Changes in the health system, the demands of the society, environmental and social issues, and the increasing use of modern technology have all influenced the role of nurses. Today, more and more clients are spending less time in *acute care facilities*②. The focus of care is shifting from hospital setting to community and preventive nursing. *As the largest group of health care workers, nurses must prepare for shift in emphasis and anticipate the nursing services that consumers will require in society.*③ They must act as advocates, teachers, or coordinators of health care services.

In health promotion, a nurse must apply nursing process. The steps of nursing process are health assessment, formulation of a nursing diagnosis, development of a health promotion/protection plan, implementation of the plan, and evaluation.

A thorough assessment of the client's health status is basic to health promotion. Components of this assessment are the health history, physical examination, physical-fitness assessment, nutrition assessment, health risk appraisal, life-style assessment, health beliefs review, and life-stress review. Assessment skills are essential to provide the meaningful data needed for health planning.

Following assessment and summarizing of data, nursing diagnoses are identified. The nurse and client may agree on potential nursing diagnoses that will assist the client in decreasing

① 健康促进是一个促使人们更好地控制和改善其健康状况的过程，其主要目的在于挖掘健康潜力，维持身体的平衡。
② 医疗急救机构。
③ 作为医务人员中最大的群体，护士必须对工作重点的转变做好准备，同时能预见服务对象对护理的要求。

the risk of developing specific disease. *Nursing diagnosis statements that describe motivation and wellness behavior*① will identify patient strengths, recognize self-care potential, reinforce healthy life-style, assist the nurse in providing comprehensive meaningful nursing care, and achieve the goals of health promotion and the prevention of illness. *During the diagnosis phase, the client has determined areas of potential problems and risks as well as areas of strength or positive health.*② The client then determines a health promotion plan.

A health promotion plan needs to be developed according to the needs, desires, and priorities of the client. The emphasis of health promotion is to strengthen *self-care*③ responsibility of patients or population. It is the patients who decide the goals of health, determine the health promotion plans, and take the responsibility for the success of the plans.

*During the planning process a nurse acts as a resource person rather than as an adviser or counselor.*④ The nurse provides information when asked, emphasizes the importance of small steps to behavior change, and reviews the client's goals and plans to make sure they are realistic, measurable, and acceptable to the client. The main activities in the planning phase include: identifying health care goals, identifying possible behavior changes, assigning priorities to behavior changes, making a commitment to behavior change, identifying effective reinforcements and rewards, *determining barriers to change*,⑤ and developing a schedule for implementing the behavior change.

Implementing is the "doing" part of behavior change. Self-responsibility is emphasized for implementing the plan. In this stage, the nurse will assist the patient to make decisions about their health problems. The nurse ascertains that the assessment has been accurate and complete and that the goals are individualized and attainable. The nursing strategies may include supporting, teaching, consulting, coordinating, facilitating, and enhancing the behavior change.

Evaluation takes place on an ongoing basis,⑥ both during the attainment of short-term goals and after the completion of long-term goals. In this stage, the patient may decide to continue with the plan, reorder priorities, change strategies, or revise the health promotion contract. Evaluation of the plan is a collaborative effort between the nurse and the patient or client.

*Health promotion programs can be categorized as information dissemination, health appraisal and assessment, life-suyle and behavior change, work-site health, and environmental control programs.*⑦ The nurse can help patients change their health behaviors

① 描述动机和健康行为的护理诊断陈述。
② 在健康促进的诊断阶段，消费者已经确定其潜在的健康问题和危险因素以及健康的优势和积极的方面。
③ 自我护理。
④ 在计划阶段，护士是资源提供者而不是一名指导者或顾问。
⑤ 确认影响其行为改变的因素。
⑥ 评估应动态进行。
⑦ 健康促进项目可分为信息传授、健康测评和评估、生活方式及行为改变、工作环境健康以及环境控制几种类型。