

Health assessment

- **Steps of assessment**
- 1. Collection of data : Subjective and Objective
- 2. Collection of data
- 3. Organization of data
- 4. Recording/documentation of data

- **Types of Data**

- When performing an assessment the nurse gathers subjective and objective data.

- **1- Subjective data (symptoms or covert data):**

are the verbal statements provided by the Patient. Statements about nausea and descriptions of pain and fatigue are examples of subjective data

- **2- Objective Data:**

Objective data (signs or overt data), are detectable by an observer or can be measured or tested against an accepted standard. They can be seen, heard, felt, or smelt, and they are obtained by observation or physical examination. For example: discoloration of the skin

- **Purposes of health assessment**

- 1. Gather data
- 2. Confirm تأكيد or refuse data obtained in the health history
- 3. To identify nursing diagnoses
- 4. To make clinical judgments about client's changing health status
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Health Assessment is a Holistic approach: أسلوب شمولي

1. The interview
2. Psychosocial assessment
3. Nutritional assessment
4. The health history.

1. Interview

Definition: communication process focuses on the client's development of psychological, physiological, sociocultural, and spiritual responses, that can be treated with nursing & collaborative interventions

Major purpose:

- To obtain **health history** and to **elicit symptoms** and the **time course of their development**. The interview conducted before physical examination is done.

Components of nursing interview

- 1. Introductory phase**
- 2. Working phase**
- 3. Termination phase**

1. Introductory phase:

Introduce yourself and explains the purpose of the interview to the client.

Before asking questions, Let client to feel Comfort, Privacy and Confidentiality

2-Working phase:

The nurse must listen and observe cues in addition to using critical thinking skills to validate information received from the client. The nurse identify client's problems and goals.

3-Termination phase:

- 1.The nurse summarizes information obtained during the working phase
2. Validates problems and goals with the client.
- 3.Making plans to resolve the problems (nursing diagnosis and collaborative problems are identified and discussed with the client)

Communications techniques during interview تقنيات الاتصالات خلال المقابلة

1. Types of questions :

Begin with open ended questions to assess client's feelings e.g. what, how, which“

Use closed ended question to obtain facts e.g." when, did...etc.

Use list to obtain specific answers e.g. "is pain sever, dull sharp

Explore all data that deviate from normal e.g. “increase or decrease the problem

2. Types of statements to be use:

Repeat your perception of client's response to clarify information and encourage verbalization

3. Accept the client silence to recognize thoughts

4. Avoid some communication styles e.g.

Excessive or not enough eye contact.

Doing other things during getting history.

Biased or leading questions e.g. "you don't feel bad"

5. Specific age variations :-

Pediatric clients: validate information from parents, Geriatric clients: use simple words and assess hearing acuity

6. Emotional variations:

Be calm with angry clients and simply with anxious and express interest with depressed client

Sensitive issues "e.g. sexuality, dying, spirituality" you must be aware of your own thought regarding these things

7. Cultural variations:

Be aware of possible cultural variations in the communication styles of self and clients

8. Use culture broker: وسيط

Use culture broker as middleman if your client not speak your language.

Use pictures for non reading clients.

2-Psychosocial assessment

Psychological assessment involves person's growth and development throughout his life. Discuss crises **الازمات** with the clients to assess relationship between health & illness. "It depends on multiple G&D theories e.g. Erickson, Piaget, and Freud

Stages of Age

Infancy period: birth to 12 months

Neonatal Stage: birth-28 days

Infancy Stage: 1-12 months

Early childhood Stage: It's refers to two integrated stages of development

Toddler: 1 - 3years.

Preschool: 3 - 6 years.

Middle childhood 6-12 years

Late childhood:

Pre pubertal: 10 – 13 years.

Adolescence: 13 - 19 years

Young adulthood 20-40 years

Middle adulthood 40-65years

Late adulthood 65 and more

3-Nutritional assessment

Nutrition plays a major role in the way an individual looks, feels, & behaves.

The body ability to fight disease greatly depends on the individual's nutritional status

Major goals of nutritional assessment

1. Identification of malnutrition.
2. Identification of over consumption الاستهلاك
3. Identification of optimal nutritional status.

Components of Nutritional Assessment

1. Anthropometric measurement. القياسات البشرية
2. Biochemical measurement.
3. Clinical examination.
4. Dietary analysis

1. Anthropometric measurement

Measurement of size, weight, and proportions of human body.

Measurement includes: height, weight, skin fold thickness, and circumference of various body parts, including the head, chest, and arm.

Assess body mass index (BMI) to shows $BMI = \frac{Wt. \text{ in kilograms}}{(high \text{ in meters})^2}$

Example :- $60 / (1.6)^2 = 60 / 2.56 = 23.4$

BMI RANGE

Rang kg/m ²	Condition
less than 16.0	Very thin
16.0 - 18.4	Thin
18.5- 24.9	Average
25–29.9	Overweight
30-34.9	Obese
≥ 35	Highly obese

2- Biochemical Measurement

In assessment of malnutrition, commonly tests include: total lymphocyte count, albumin, serum transferrin, hemoglobin, and hematocrit, lipid profile ...etc. These values taken with anthropometric measurements, give a good overall picture of an individual's skeletal and visceral protein status as well as fat reserves and immunologic response.

3. Clinical examination

Involves, close physical evaluation and may reveal signs suggesting malnutrition or over consumption of nutrients.

Although examination alone doesn't permit definitive diagnosis of nutritional problem, it should not be overlooked in nutritional assessment

Nutritional assessment technique for clinical examination

A. Types of information needed

Diet: Describe the type: regular or not, special, "e.g. teeth problem, sensitive mouth.

Usual mealtimes: How many meals a day: when? Which are heavy meals?

Appetite: "Good, fair, poor, too good".

Weight: stable? How has it changed?

Food preferences: e.g. " prefers beef to other meats"

Food dislike: What & Why? Culture related?

Usual eating places: Home, snack shops, restaurants.

Ability to eat: describe inabilities, dental problems: "ill fitting dentures, difficulties with chewing or swallowing

Elimination" urine & stool: nature, frequency problems

Exercise & physical activity: how extensive or deficient

Psycho social - cultural factors: Review any thing which can affect on proper nutrition

Taking Medications which affect the eating habits

Laboratory determinations e.g.: "Hemoglobin, protein, albumin, cholesterol, urinalyses"

Height, weight, body type "small, medium, large"

After obtaining information, summarize your findings and determine the nutritional diagnosis and nutritional plan of care.

B. Signs & symptoms of malnutrition

Dry and thin hair

Yellowish lump around eye, white rings around both eyes, and pale conjunctiva

Redness and swelling of lips especially corners of mouth

Teeth caries & abnormal missing of it

Dryness of skin (xerosis):

Spoon shaped Nails " Koilonychia " anemia

Tachycardia, elevated blood pressure due to excessive sodium intake and excessive cholesterol, fat, or caloric intake

Muscle weakness and growth retardation

4. Dietary analysis

Food represent cultural and ethnic background and socio- economic status and have many emotional and psychological meaning

Assessment includes usual foods consumed & habits of food

The nurse ask the client to recall every thing consumed within the past 24 hour including all foods, fluid, vitamins, minerals or other supplements to identify the optimal meals

Should not bias the client's response to question based on the interviewer's personal habits or knowledge of recommended food consumption

Diseases affected by nutritional problems

1- Obesity: excess of body fat.

2- Diabetes mellitus.

3- Hypertension.

4- Coronary heart disease.

5- Cancer.