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Research Article

IMPROVING THE QUALITY OF NURSE TRAINING THROUGH THE INTRODUCTION OF MODERN NURSING CARE TECHNOLOGIES

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ABSTRACT

With the development of medical science, the role of specialists with secondary medical education is constantly improving and increasing. Now, in order to care for the sick, they must possess more complex medical, natural science, as well as technical knowledge and skills. Therefore, the organization of pedagogical activity for the training of middle-level medical workers should be focused on the introduction of innovative technologies.

KEYWORDS

Professional standards, pain, implementation, standard model, standard monitoring.

INTRODUCTION

Under these conditions, the role of professional standards increases significantly. If we apply the standards and protocols for the activities of nurses, unify the accounting and reporting documentation for working with patients, introduce uniform approaches

to performing manipulations, preparing for research, maintaining patient monitoring protocols and implementing the nursing process, this will significantly improve the quality of medical care.

PURPOSE

To improve the quality of training of nurses through the implementation of the nursing process with the development and use of a standard model for pain management in the postoperative period.

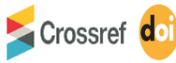
Tasks:

- Develop a model for the standard of pain management in the postoperative period.
- Develop guidelines for nurses.
- Develop a patient questionnaire for pain assessment.
- Develop a dynamic observation sheet for the implementation of the pain problem.
- Monitor the implementation of the proposed standard.

Having studied the possible problems of the patient after surgery for scoliosis and the elements of care in the orthopedic and trauma hospital of the city of Samarkand, using the accumulated materials for the development of nursing in Samarkand, we offer a form of organizing nursing care to solve the problem of pain in the wound area using documents:

1. Model of the standard for pain relief after surgery for scoliosis in children. When compiling it, the following were determined: the relevance of the topic; indications; goal; nursing documentation and equipment; actions in which the nurse is guided by standards of care or algorithms for nursing interventions.

Structural Criteria	Process Criteria	Result criterion
The care staff has modern knowledge on the occurrence of pain quite competent in determining their risk occurrence.	The staff determines the degree of risk of pain, degree of activity and patient mobility. Assesses the psychological the patient's condition. Makes up an individual nursing care card. Conducts a conversation with filling a patient observation sheet, with an assessment of the effectiveness of nursing independent interventions.	Timely systematic assessment of probability occurrence of pain. The patient is informed about upcoming events, will be agree to carry them out.
The staff has the knowledge and skills to reduce pain. Necessary items of care.	The staff guarantees performing nursing interventions to reduce pain.	Reduces the risk of unbearable pain.

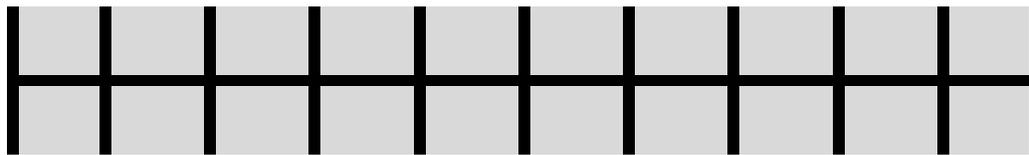


Staff owns knowledge on giving a comfortable position of the patient's body and changing the position of the body.	The staff performs nursing action for giving a comfortable position to the patient, the implementation of a change in body position, and also encourages the patient's own activity.	The volume is increasing active movements.
The staff has special knowledge of epidural anesthesia, special training in the care of the epidural catheter. Owns non-pharmacological methods of non-pharmacological methods of pain reduction.	Personnel supervise the operation of the dispenser. Uses ways psychological impact.	Improves the psychological, emotional state of the patient, a sense of comfort.
The staff is competent owns the technique, has the necessary set of medicines for anesthesia.	The staff is administering painkillers.	Provides a significant reduction in pain until it disappears.
The staff ensures that pain relief activities continue until the patient is fully active. Sends information to the doctor.	The staff performs individual patient care plan. The staff allocates time to educate the patient and his relatives in the method pain reduction.	The risk of pain and the necessary measures to reduce it are known. The patient will notice an improvement in the quality of life.
The staff is knowledgeable in teaching the patient the elements of pain reduction.	The staff conducts a conversation with the patient	The patient is aware and will perform elements of pain reduction.

	and his relatives on the issues of pain reduction.	
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2. Guidelines for a nurse, which explains the concept of "pain", the characteristics of pain in children,

assesses the degree of pain using various scales; nursing interventions to achieve the goal.



0 1 2 3 4 5 6 7 8 9 10

NoMildModerateStrong Very Intolerable
painstrong



10-point scale for assessing the intensity of pain

Scale of subjective assessment of pain (D.Sh.Bikkulova, 2005)					
Indicators	Баллы				
	0	1	2	3	4
Skin	0 pink	1 hyperemia	2 pale	3 gray	4 white

This scale also takes into account indicators - position, mood, facial expression, look, appetite, interest in toys, contact with the environment, sleep, and the sum of points indicates the severity of pain.

- Questionnaire of the patient, which allows you to evaluate his feelings of pain.
- The follow-up sheet allows you to monitor and evaluate the results of nursing interventions.

Indicator	Observation time					
	8.00-12.00	12.00-16.00	16.00-20.00	20.00-24.00	24.00-4.00	4.00-8.00
Mental condition	calm restless	calm restless	calm restless	calm restless	calm restless	calm restless

Other non-verbal signs of pain are also identified and evaluated: position in bed, skin, pulse, respiratory rate, pupil size, speech, emotions, sleep, appetite.

- Nursing card of the patient after surgery for scoliosis allows you to document and analyze the elements of care. It reflects the problems of the patient, the goals and objectives of care, planning (short-term and long-term) taking into account the frequency of nursing interventions, implementation (independent, dependent and interdependent) and evaluates the results.

Theoretically analyzed the benefits of nursing care using evaluation criteria, where the goal is justified, control tools are developed, actions are described step by step, focusing on the standard; documentation, assessment of the quality of care.

The monitoring of the standard was carried out in the postoperative wards of the Orthopedic Traumatology Clinic of the Institute of Restorative Medicine and confirmed that the use of the new technology makes it possible to start providing medical care (pain relief) at an earlier time, preventing an increase in pain intensity. The dynamic observation sheet makes it possible to systematically monitor and document the patient's condition, which ultimately contributes to improving the quality of patient care in the postoperative period.

CONCLUSIONS

Training future nurses in the standards of their practice will improve the quality of nursing care in the modern conditions of high-tech equipment of clinics and will provide an opportunity to combine the concept of continuous quality improvement with an increase in professional responsibility and compliance with the rules of nursing practice.

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