Construction Of Nursing Assessment Rehabilitation Tool For Cardiac Medical Ward Patients At Baghdad Hospitals .

بناء أداة التقييم التمريضي التاهيلي لمرضى ردهات الباطنية القلبية في مستشفيات بغداد.

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الخلاصة:
الهدف:الهدف من الدراسة هو بناء أداة التقييم التمريضي التاهيلي لمرضى ردهات الباطنية القلبية في مستشفيات بغداد
المنهجية : اختيرت العينة غرضية من (٦٠) ممرض ممرضة في ردهات الباطنية القلبية للمستشفيات (مستشفى ابن البيطار لجراحة القلب ،مستشفى الجراحات التخصصية المركز العراقي لأمراض القلب ،مستشفى ابن النفيس)في بغداد خلال الفترة من١٥ شباط ٢٠١٣ ولغاية ١٥اب ٢٠١٣ . بنيت أداة التقييم تتكون ثلاثة محاور كان المحور الأول: تم أعطاء استبيان مفتوح (٢٠) ممرض وممرضة حول آلية تقييم أداة التقييم التمريضي التاهيلي لمرضى ردهات الباطنية القلبية. من حيث البعد (الجسمي ،النفسي ،الاجتماعي ،البيئية) .المحور الثاني : معلومات عامة عن الممرضآت والمحور الثالث : أداة التقييم المتكونة من (١٦) استمارة تشمل (المعلومات عامة للمريض ،استمارة تقييم الجلد, الشعر والأظافر ،استمارة تقييم العين ،استمارة تقييم الأذن استمارة تقييم (الفم ،الأنف ،الحنجرة)،استمارة تقييم (ألراس ،الرقبة) استمارة تقييم الجهاز التنفسي ،استمارة تقييم الجهاز القلبي واستمارة تقييم الدورة الدموية المحيطية واستمارة الجهاز البولي واستمارة الجهاز التناسلي واستمارة تقييم الثدي و استمارة تقييم الجهاز الهيكلي واستمارة تقييم الجهاز العصبي استخدمت الإجراءات وأدوات وصفية إحصائية لتحليل البيانات.
النتائج : أشارت النتائج إلى أن معظم أعضاء العينة هم من الذكور وحملة شهادة البكالوريوس في التمريض ومن حملة شهادة الدبلوم وأكدت النتائج بأنهم على الأغلب لم يحصلوا على دورة تدريبية خاصة تتعلق في ردهات الباطنية القلبية، أثبتت النتائج باستجابات العينة لمؤشرات الأداة كانت المعلومات العامة للمريض ٤٤.٧%،استمارة تقييم الجلد, الشعر والاظافر٣٢.٨%،استمارة تقييم العين٣٨.١% ،استمارة تقييم الاذن٤١.٠% استمارة تقييم (الفم ،الأنف ،الحنجرة)٢٨.٧%،استمارة تقييم (الرأس ،الرقبة)٥٢.٣% استمارة تقييم الجهاز التنفسي٦٣.٢% ،استمارة تقييم الجهاز القلبي ٧٦.٣%استمارة تقييم الدورة الدموية المحيطية ٦٠.٢%واستمارة الجهاز البولي٤٥.٥% واستمارة الجهاز التناسلي ٢٥.٤%واستمارة تقييم الثدي١٣.٩% و استمارة تقييم الجهاز الهيكلي٤٣.٧% واستمارة تقييم الجهاز العصبي٣٥.٠%.
الاستنتاج:أكدت النتائج من بناء أداة التقييم التمريضي التاهيلي لمرضى ردهات الباطنية القلبية في مستشفيات بغداد وكان اغلب العينة من الذكور وكان معدل أعمار العينة مابين (٣٠-٣٩)سنة للعينة في ردهات الباطنية القلبية ولم يشاركوا في أي دورة تدريبية في ردهات الباطنية القلبية وأشارت العينة المشمولة بان لهم خدمة تتراوح مابين (١-٥)سنة بصورة عامة.
التوصيات: يوصي الباحث بإقامة دورات تثقيفية للملاك التمريضي حول كيفية تطبيق الأداة التمريضية في ردهات الباطنية القلبية من قبل الممرضات ويوصي أيضا بضرورة تعيين العاملين في ردهات الباطنية القلبية يجب أن يكونوا من حملة شهادة الدبلوم أو البكالوريوس ، وان تطبق استمارات التوثيق التمريضي في جميع أنحاء المراكز.

Abstract
Objective : **:** The study aimed of construction of nursing assessment rehabilitation tool for cardiac medical ward patients at Baghdad hospital.
Methodology : A descriptive, purposive sample of (60) nurses was selected from cardiac medical ward of hospitals (Ibn AL Biter Hospital For Cardiac Surgery , Iraqi center for heart disease and Ibn AL Nafees hospital) in Baghdad city from the 15th of February 2013 to the 15th of August 2013.The constructed tool was continues of three sections: section one included the give open end-question about the physically; psychologically; socially and environmental) for construction of nursing assessment rehabilitation tool for cardiac medical ward nurse (20). section two include the nurses' demographic characteristic; section three was the initial assessment construction tool that contained (16) parts including: (general patient information , evaluation of(skin, hair and nail) , evaluation eye , evaluation ear, evaluation (mouth, nose and throat) , evaluation (head and neck), evaluation (respiratory system**),**evaluation (cardiac) heart evaluation peripheral vascular ,abdomen assessment, assessment urinary system ,reproductive system, breast assessment, musculoskeletal assessment, neurological assessment),descriptive and inferential statistical methods were used to analyze the data
Results: The findings revealed that the most of the study sample were male with nursing institute graduate and the majority of them employed with limited experience in cardiac medical ward in spite of that no one of them got a training course in cardiac medical ward at Baghdad hospital, the present study revealed that, the distribution of nurses' responses to the items indicated that the (general patient information)44.7%, evaluation of(skin, hair and nail) 32.8%, evaluation eye 38.1% , evaluation ear41.0% evaluation (mouth, nose and throat) 28.7% ,evaluation(head and neck)52.3%

,evaluation(respiratorysystem)63.2%,evaluation(cardiac)heart76.3%,evaluationPeripheralvascular60.2 %,abdomenassessment38.9%,assessmenturinarySystem45.5%,reproductivesystem25.4%,breast assessment 13.9, % musculoskeletal assessment 43.7 %, neurological assessment 35.0 %) .
Keywords: Construction, Nursing assessment, Rehabilitation tool, Cardiac medical Ward Patients.

INTRODUCTION:

Clinical assessment of the cardiovascular system requires a rational approach in order to analyses the available information in a coherent manner, assessment of the cardiovascular system is an essential skill when considering patients with cardiac disease. A thorough history and clinical examination will help the practitioner to make an insightful diagnosis for any number of presenting symptoms, the most common being chest pain, the assessment process begins by taking the patients history. Subjective information from the history will provide insight into actual and potential problems and help to guide the physical examination further, the cardiovascular system examination findings, along with results of investigation, support or refute the differential diagnoses for patients who present with cardiovascular symptoms . (Wolters- kluwer 2011) .

The nursing assessment begins at the moment when the nurse establishes initial contact with a client and is a systematic method of date collection which consists of the appraisal of the individual, the family, or the community for the purpose of identifying potential and actual health need helpful in ensuring continuity of care in that each nurse caring for the patient must know exactly when is to be done and when it is to be done. (Perry potter, 2008).It is the method of recording and reporting information elegant to client care has developed as a response to standards of practice, legal and regulatory standards, institutional standard and policies, and societies norms, Recording and reporting are the major way's health care providers communicate, the clients medical record is a legal a document of all activities regarding client care. (white ,2008).

In addition, a complete clinical record contains an accurate and functional representation on of the actual experience of the individual in the facility, it must contain enough information to show that the facility knows the status of the individual, has adequate, Documentation should provide a picture of the residents progress, including response to treatment, change in condition and changes in treatment. The facility determines how frequently documentation on of an individual progress takes place a part from the annual comprehensive assessment, periodic reassessment (Allen, 2008). Depend on each other for providing safe and effective client care. The nursing process lays out a plan of care that quid's not only the care provided but also the accurate recoding of that care, Documentation provides a legal record that all aspects of the nursing process were properly carried out and that professional standards of care, regulatory standards, and a agency policies were met (Besides, white, 2008).

Also, reporting and recording are the major communication techniques used by health care providers to direct client-based decision making and continuity of care, The medical record serves as a legal document for recording all client activities assessed and initiated by health care practitioners. (Daniels,2009). The study aimed of construction of nursing assessment rehabilitation tool for cardiac medical ward patients at Baghdad hospital.

METHODOLOGY:

A descriptive, purposive sample of (60) nurses was selected from cardiac medical ward of main hospitals (Ibn AL Biter Hospital l For Cardiac Surgery , Iraqi center for heart disease and Ibn AL Nafees hospital) in Baghdad city from the 15th of February 2013 to the 15th of August 2013.The instrument was constructed and continues of three sections: section one included the open end-quest for construction of nursing assessment rehabilitation tool for cardiac medical ward nurse (20). section two include the nurses' demographic characteristic; section three was the initial assessment construction tool that contained (16) parts including: (general patient information , evaluation of(skin, hair and nail) , evaluation eye , evaluation ear, evaluation (mouth, nose and throat), evaluation (head and neck), evaluation (respiratory system**),**evaluation (cardiac) heart evaluation peripheral vascular ,abdomen assessment, assessment urinary system ,reproductive system, breast assessment, musculoskeletal assessment, neurological assessment), descriptive and inferential statistical methods were used to analyze the data .

Statistical Analysis : The following statistical data analysis approaches were used in order to analyze and assess the results of the study under application of the statistical package (SPSS) ver. (10.0) :

1. Descriptive data analysis:

a- Tables (Frequencies, Percentages, and Cum. Percent) and arithmetic mean with standard deviation .
b- Summary Statistics tables including: Mean of score (M.S.) with their Standard Deviation (SD), Relative Sufficiency (R.S.%), and their assessment by cutoff points (66.67%) and (75%) due to scores (1, 2, 3) and (1, 2) respectively.
c- Contingency Coefficients for the association tables.
d- Person's Correlation Coefficients.
e- Graphical presentation by using :
- Bar Charts.
- Pie Chart.
- Screening Plot & Component Plot in Rotated Space.

2. Inferential data analysis*:*

These were used to accept or reject the statistical hypotheses, which included the following :

a- Alph Cronbach for the reliability of questionnaire (Internal consıistency).
b- Reliability Coefficient for the Pilot study through using Al-Naqeeb Formula:

$$\textbf{Relibility value} = \left(1 - \frac{\textbf{no. of non coincidences items}}{\textbf{no. of all items} * \textbf{sample size of pilot study}}\right) * 100\%$$

c- Contingency Coefficients (C.C.) test for the causes correlation ship of the association tables.
d- Chi-Square test for testing the independency distribution of the observed frequencies and their non restricted of an expected outcomes.

e- Binomial test for testing the different of distribution of the observed frequencies of two categories nominal /or ordinal scale and their non restricted of an expected outcomes at 50%.

f- Factor analysis Factor analysis (Principle component): However, correlation coefficient is important in studying a phenomenon of interest , but in case of a large number of variables that cause this phenomenon and makes it difficult to explain through multiple correlation coefficients . Advanced methods or techniques should be applied to take into consideration analysis of this net work of correlation in a complete way. One of these technique or procedures is factor analysis and it is as multivariate procedure, a highly, powerful and widely applied.

For the abbreviations of the comparison significant (C.S.), we used the followings:

- NS : Non significant at P>0.05
- S : Significant at P<0.05
- HS : Highly significant at P<0.01

RESULTS:

Table (1): Distribution of nurses Demographical Characteristics with Comparison Significant.

Socio-Demographics	Groups	Freq.	Percent	Cum. Percent	C.S. (*) P-value
Hospital Name	Ibn Al-Beetar	36	60	60	χ^2= 19.600 P=0.000 HS
	Iraqi center	10	16.7	76.7	
	Ibn Al-Nafece	14	23.3	100	
Age Groups	20 - 29	16	26.7	26.7	χ^2= 1.467 P=0.690 NS
	30 - 39	17	28.3	55	
	40 - 49	11	18.3	73.3	
	50 - 59	16	26.7	100	
	X ∓ S.D.	38.18 ∓ 10.62			
Gender	Male	35	58.3	58.3	Binomial P=0.245 (NS)
	Female	25	41.7	100	
Level of Education	Secondary level	13	21.7	21.7	χ^2= 7.900 P=0.019 S
	Institute level	30	50	71.7	
	College level	17	28.3	100	
Years of Experience In Hospital	< 5 yrs.	15	25	25	χ^2= 5.200 P=0.158 NS
	5 - 9 yrs.	13	21.7	46.7	
	10 - 14 yrs.	10	16.7	63.3	
	15 ≥ yrs.	22	36.7	100	
	X ∓ S.D.	13.93 ∓ 10.76			
Years of Experience in Cardiac Medical Ward	1 - 5 yrs.	29	48.3	48.3	χ^2= 8.100 P=0.017 S
	6 -10 yrs.	11	18.3	66.7	
	11 ≥ yrs.	20	33.3	100	
	X ∓ S.D.	1.85 ∓ 0.90			
Number of Course In Iraqi	None	13	21.7	21.7	χ^2= 27.867 P=0.000 HS
	1 - 4	32	53.3	75	
	5 - 9	10	16.7	91.7	
	10 ≥	5	8.3	100	
Number of Course Abroad	None	13	21.7	21.7	χ^2= 54.300 P=0.000
	Once	46	76.7	98.3	

Twice	1	1.7	100	HS

(*)HS : Highly Sig. at P<0.01 ;S : Sig. at P<0.05 ; NS : Non Sig. at P>0.05

Table(1) observed frequencies, percents of the studied " Basis Information and the Sources of Socio-Demographical Characteristics " indicates that most of the nurses who work in the cardiac medical ward ,were between(30-39)years old, the majority of them were male 35(58.3%) and female are accounted 25(41.7%). Most of them from the "Institute level" and they are accounted 30(50.0%),and "College level", and they are accounted 17(28.3%),and low from secondary level and they are accounted 13(21.7%). Concerning the years of experience, most of the nurses had (1-5) years in cardiac medical ward ,that the table shows that all of them had no training in cardiac medical ward . The researcher confirms that the work in the medical department opportunity to male that job needs heavy work .

Table (2): Mean, Standard Deviation ,and Relative Sufficiency for Nurses Responses for Assessment .

Main Parts	No.	G.M.S.	S.D.	R.S.	Ass.
General Patient information	60	0.447	0.160	44.7	Failure
Evaluation of(Skin, Hair and Nail)	60	0.328	0.151	32.8	Failure
Evaluation Eye	60	0.381	0.152	38.1	Failure
Evaluation Ear	60	0.410	0.151	41.0	Failure
valuation (Mouth, Nose and Throat)	60	0.287	0.191	28.7	Failure
Evaluation (Head and Neck)	60	0.523	0.200	52.3	Good
Evaluation (Respiratory System)	60	0.632	0.227	63.2	Intermediate
Evaluation (Cardiac) Heart	60	0.763	0.175	76.3	Good
Evaluation Peripheral Vascular	60	0.602	0.298	60.2	Intermediate
Abdomen Assessment	60	0.389	0.133	38.9	Failure
Assessment Urinary System	60	0.455	0.181	45.5	Failure
Reproductive System	60	0.254	0.234	25.4	Failure
Breast Assessment	60	0.139	0.120	13.9	Failure
Musculoskeletal Assessment	60	0.437	0.154	43.7	Failure
Neurological Assessment	60	0.350	0.147	35.0	Failure
Overall Assessment Nurses Response	60	0.435	0.091	43.5	Failure

*No: number. **M.S: Mean of score,*** S.D: standard deviation,**** R.S: Relative sufficiency.

Most of assessment tool parts have fair levels for nurses responses general Patient information evaluation of(Skin, Hair and Nail) evaluation eye evaluation ear evaluation (Mouth, Nose and Throat) abdomen assessment urinary System reproductive System breast assessment musculoskeletal assessment Neurological assessment and the evaluation (Respiratory System) evaluation (Cardiac) heart evaluation Peripheral Vascular have good level.

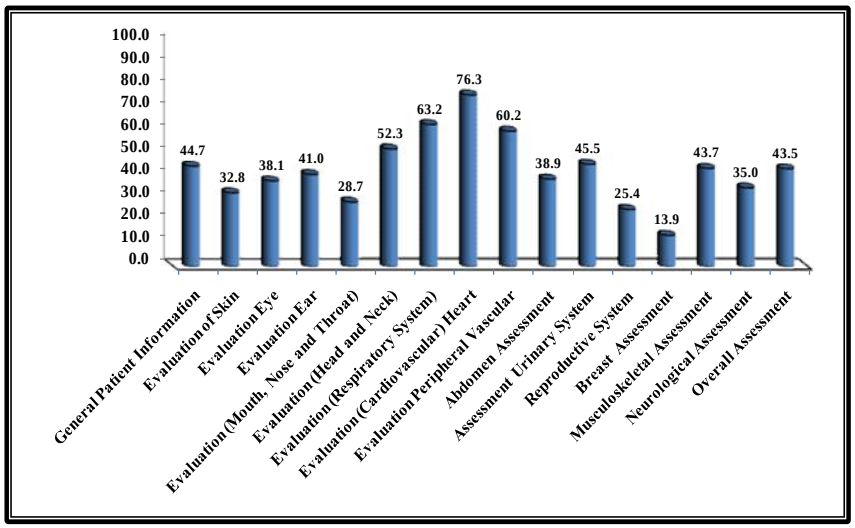

Figure (3): Nurses Responses level for Assessment tools

Figure 3 shows that the highest levels for nurses responses about the assessment tools were cardiovascular evaluation sheet, evaluation of respiratory sheet, and peripheral vascular evaluation sheet is full inside good assessment.

DISCUSSION:

Also showed that there was a statistically significant influence between the nurses' responses to the items with the age variable except in the construction tool, Moreover, the level of education patterns significantly influences the entire sample responses, the researcher shows that the level of education the greater number of institute level and they are accounted 30 (50.0%),and college level , and they are accounted 17(28.3%),and low from secondary level and they are accounted 13 (21.7%) the college level and Institute level more than the secondary level, the researcher confirms that the work in the cardiac medical ward opportunity to male and female are accounted college and Institute because level of education is beast as knowledge and practice , this result agree with AL-Barody (1999),the study presented that regarding time consuming factor than educational level up the studied sample found that the more higher educational level (professional nursing) application were less time consuming , The researcher shows that the Years of Experience In Hospital in cardiac medical ward is low and no training in Iraqi and Abroad, the result of study agreed with Al-Botany (2007), who mentioned in her study, that in spite of the complexity and expanding of nurses responsibilities ,with the importance of documentation for their professional work , the results indicated that no nurse of the sample got a training course in documenting their daily activities, the result of study agreed with(Elhart,2008)emphasized that the nursing profession must have many nursing training courses to obvious problems and to solve it according to each

specialty and requirement for her practice field, the researcher confirms that the work in the medical department opportunity to male that job needs heavy work ,this is supported by a study applied by(Ali ,2004) mentioned that the majority of the health care workers in cardiac wards were young male nurses graduated from nursing institution as a reason of extension in the health care services and the changing in nursing work environment which lead to a more stress regarding the patient and their high level of illness, so critical decision and work need to be carried in less time, the researcher show Concerning the years of experience, most of the nurses had (1-5)years in cardiac medical ward ,that the table shows that all of them had no training in cardiac medical ward ,this results will agree with Gardi (2005) revealed in his study that the majority of Erbil nurses in cardiac ward are young male nurses at a degree of institute educational level, had experience ranged between(1-5)years, the researcher show such characteristics can provide a clear view concerning nurses of these in cardiac medical ward that they were young male with nursing institute graduate and the majority of them employed with limited experience , which ranged between (1-5) years as general experience in cardiac medical ward, this result is strongly supported by the AL-Barody,(1999) indicated that there is a highly significant relationship between nurses responses according to (appropriateness, clarity and comprehensiveness) of the designed assessment tool with their years of experience, the researcher confirms that the transition of nurse from unit to another causes the nurses not to wish to work in the medical department because this department needs difficult duty.

CONCLUSIONS:

The study aimed at construction of nursing assessment rehabilitation-tool in cardiac ward medical patients at Baghdad hospital, Most of the sample was male more than female between (30-39 year)age group and graduated from nursing institutions, most of the samples have not involved in training course concerning cardiac medical ward in Baghdad, concerning the years of experience the highest percentage of nurses have (1- 5) years of experience in cardiac medical ward .

RECOMMENDATION:

According to the results of the study the investigator recommended to a training course in cardiac medical wards to enhance the nurses practice in construction tool information completely and the nursing staff working in cardiac medical ward must be of bachelor or diploma level of education to apply care provided to critical resuscitated patient completely and applying the modified construction tool on all center cardiac medical ward.

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