

Abordagem situacional do enfermeiro no exame fisico hematológico: uma reflexao com faye abdellah

Situational approach of the nurse in hematological physical examination: a reflection with faye abdellah

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RESUMO

Objetivou-se refletir acerca de como o enfermeiro deverá realizar o exame físico em clientes hematológicos a partir da compreensão de uma situação problema. Trata- se de um estudo de reflexão fundamentado na base teórico-filosófica de Faye Abdellah, discutindo pontos principais desta linha de pensamento diante de uma situação problema. Os enfermeiros devem usar o método de solução dos problemas-chave de enfermagem relacionada às necessidades de saúde das pessoas. Os problemas podem ser evidentes, através de uma condição aparente, ou ser encobertos, quando relacionados às esferas emocionais, sociológicas e interpessoais por natureza. Conclui-se que se faz necessário que os enfermeiros, na realização do exame físico, identifiquem e resolvam os problemas, satisfazendo as necessidades do cliente. **Palavras-chave:** Enfermagem; Exame físico; Hematologia.

ABSTRACT

The objective was to reflect on how the nurse should perform the physical examination in hematological clients from the understanding of a problem situation. It is a study of reflection based on the theoretical-philosophical basis of Faye Abdellah, discussing main points of this line of thought in the face of a problem situation. Nurses should use the method of solving key nursing problems related to people's health needs. Problems may be evident, through an apparent condition, or be overt, when related to the emotional, sociological, and interpersonal spheres by nature. It is concluded that it is necessary for the nurses, in performing the physical examination, to identify and solve the problems, satisfying the needs of the client.

Keywords: Nursing; Physical examination; Hematology.

NOTA

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INTRODUCTION

The nursing process represents the main methodological model for the systematic performance of the professional practice, or technological instrument that is used to favor care, to organize the necessary conditions to perform care and to document professional practice. This process is organized in interdependent stages, such as: nursing history (consisting of anamnesis and physical examination), nursing diagnoses, prescription and care implementation, evaluation and recording of activities performed⁽¹⁾.

Thus, the physical examination preceded by anamnesis compose the nursing history phase. It refers to a cephalopodal revision of the human body for the investigation of each client's body system, through inspection, palpation, percussion, auscultation, smell and the use of some instruments and apparatus, providing objective information on the body and allowing the nurse to make clinical judgments⁽²⁾.

Regarding the evaluation of clients with hematological alterations, these present aggravations to the immune system that come from both the pathology itself and the therapeutic regimen. Therefore, the nurse's role should aim at the prevention and early detection of complications, fundamental points of care in order to guarantee the survival of the individual.

It is known that in the nurses' daily practice, their client needs care based on specific knowledge that determines the nursing interventions aiming at solving the problems found in a professional perspective. In health-care institutions, when providing care, nurses face a reality in which the population requires care measures, which involve, first and foremost, the identification and resolution of clients' health problems. Thus, care-related learning based on client needs becomes necessary. This is because nurses, being committed to the development of a peculiar and directed care, and simultaneously working with competence, are able to change the hematological alterations found. That is, through knowledge, they end up reformulating their professional practice, contributing, then, to qualitative changes in the client's situations.

Therefore, it can be considered that it confers to Nursing the sense of problem, those elements that need to be solved by the nurse. In these determinants, the term "problem-situation" involves many elements, covering aspects that transcend what can be perceived, what we know or experience at any moment in life⁽³⁾.

Nursing situations are the set of circumstances of the spatial and temporal reality that affect the health of individuals, groups or communities and in the sphere of the nurses' encounter with their client⁽⁴⁾. With this, it is noted that problem situations sometimes differ in degree of complexity not only because they are related to the client's symptomatology, but perhaps because of the sum

of the difficulties in the proportion of elements present in the plot of what occurs around the client, elements perceived in practical experience and that give the sense of problem to the nursing situation - also understood as a clinical and care situation - that involves the client, with a certain degree of complexity⁽³⁾.

Thus, the application of nursing theories in the field of care promotes the construction of a more solid, critical and reflexive knowledge, providing scientificity to the profession, improving theoretical-practical skills and contributing to improved care.

In addition to this, Faye Abdellah's theory of nursing's 21 problems describes the nurse's job requirements and the therapeutic goals of the profession in its development and focused on the client's main needs and nursing problems.

Nurses should use the method of solving key nursing problems related to people's health needs⁽³⁾. Problems may be evident, through an apparent condition, or be overt, when related to the emotional, sociological, and interpersonal spheres by nature. Abdellah emphasizes that nursing care should consider the individual as a whole, including his physical, social, psychological and spiritual needs and those of his family⁽⁵⁾.

The 21 problems described by Abdellah are: - Maintain good hygiene and physical comfort; -Promote the ideal activity: exercise, rest and sleep; - Promote safety by preventing accidents, injuries or other injuries and by preventing the spread of infection; - Maintain the mechanics of the body and prevent and correct deformities; - Facilitate the maintenance of an oxygen supply to all the cells of the body; - Facilitate the maintenance of nutrition of all the cells of the body; - Facilitate maintenance of disposal; - Facilitate the maintenance of water and electrolyte balance; - To recognize the physiological reactions of the body to the conditions of the disease pathological, physiological and compensatory; - Facilitate the maintenance of regulatory mechanisms; - Facilitate the maintenance of the sensory function; - Identify and accept positive and negative expressions, feelings and reactions; - Identify and accept the interrelationship of emotions in organic diseases; - Facilitate the effective maintenance of verbal and non-verbal communication; - Promote the development of productive interpersonal relationships; - Facilitate progress towards personal spiritual goals; - Create and / or maintain a therapeutic environment; - Facilitate self-awareness as an individual with varied physical, emotional and developmental needs; - Accept the ideal goals possible in the light of physical and emotional limitations; - Use the community resources as an aid in solving the problems that arise with the disease and - Understand the role of social problems as influential in the case of illness⁽⁵⁾.

Thus, the theoretical classifies the main nursing prob-

lems, some as evident and others not evident, and affirms that the development of nursing actions consists in the resolution of these problems⁽⁵⁾.

According to Abdellah⁽⁵⁾, the evident nursing problems are consistent with conditions faced by the client and the family, and in which the nurse can assist or assist them by performing their professional functions (for example, a constipated client, presenting distended abdomen with pain palpation requires care by the nurse to promote an improvement in gastrointestinal motility). But that's not all. A non-obvious nursing problem confers on a hidden, hidden, hidden, but faced by the client, sometimes felt by the family, and by which the nurse can assist them in performing their professional functions (eg an individual with impaired verbal communication related to emotional disturbances)(1).

Therefore, the relevance of the study to the extent to which it reinforces the importance of the situational approach in hospitalized hematologic clients is found. Client-centered nursing assistance facilitates the understanding of problem situations, bringing a more comprehensive approach to what happens when they are exclusively focused on the pathologies and causes of hospitalization.

The reflection was based on the questions: How to perform the physical examination in hematological clients hospitalized from a situational approach? What dimensions of the hematological client should be explored? How to solve nursing problems in the face of Faye Abdellah's theory?

In view of the above, this article aims to reflect on how the nurse should perform the physical examination on haematological clients from the understanding of a problem situation in light of the theory of Faye Abdellah.

METHOD

It is a reflection study based on the theoretical-philosophical basis of Faye Abdellah, which portrays the identification of nursing problems, totaling twenty-one and which are related to the biological, psychological and social of the individual, identified through direct observation from the obvious needs and from the communication and interaction with the client to the not evident needs. The choice of these points was due to its direct link with the proposed discussion. The identification of the problems proposed by the theoretical is extremely necessary for nurses' decision-making, and it is therefore considered opportune to highlight some of their resolutions.

From the discussions, authors and materials worked on in the classes of the Professional Master of Teaching in Health, of the Federal Fluminense University (UFF), during the years of 2017 and 2018, the idea of developing the respective reflection arose.

RESULTS AND DISCUSSION

It was sought to expose the importance of a situation-

al approach and identification of the nursing problems in the physical examination of the hematological client. Based on the questioning of this reflection, the text was organized in front of the theme "The evidence of nursing problems in physical examination". The arguments clarify that from a situational approach, it is possible to identify the 21 problems proposed by the theoretical study, as well as the resolution of them.

The evidence of nursing problems in physical examination

The physical examination in hematological clients from a situational approach involves the observation of elements that influence the accomplishment of the procedure. The nurse must be able to act in different spatial and temporal realities, know how to prioritize and take action in decision making, with the aim of improving care.

Therefore, the physical examination, like any other procedure carried out by the nurse, has different influences within a health scenario, and is not limited to practical theoretical knowledge for the execution. Such emotional, psychological, managerial, environmental influences, among others, need to be resolved so as not to prejudice the care taken⁽⁶⁾. Therefore, a situational approach comprises learning and understanding all the barriers and impediments that can arise during a care, having the initiative and knowledge in the prioritization of situations.

Like other clients, the hematological changes require specialized nursing assistance in which nurses see them in the bio-psycho-social dimensions. In this way, it becomes the center of its interventions, with a view to its adaptation and self-care. Therefore, a faithful record of the clinical evolution information makes a difference in hematological client care and the monitoring of the signs and symptoms that the disease causes. With this, nurses, as members of the health team, play a vital role in client recovery(7).

Considering the image below, it is possible to reflect that during the physical examination, nursing problems can be identified. Such problems can still be classified as evident or not evident depending on whether the customer's condition is apparent or hidden.

Hematological diseases are expressed by changes located in the blood or tissues forming it. Physiologically, it is known that the changes that the disease produces and the intense protocol of treatment, translate into manifestations of debilitating signs and symptoms to the client(8).

In addition, hematological clients may present with varying signs and symptoms resulting from changes in various organ systems, since the modifications present in the blood crises generate disturbances in the nutrition, oxygenation, coagulation and defense system of the

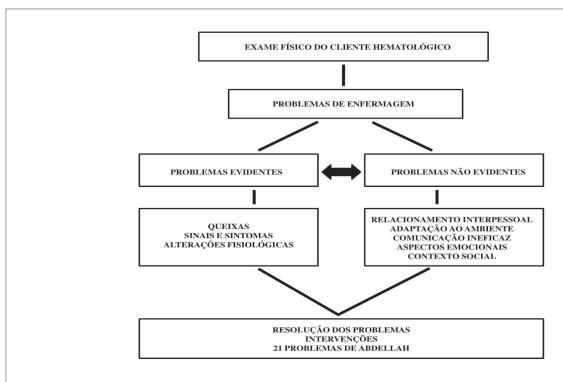


FIGURE 1 – Situational Approach of the Nurse in the Physical Examination of the Hematological Client. Rio de Janeiro, RJ, Brazil, 2018.

Source: research data.

organism, often provoking weakness, physical weakness, weight loss, fever, ulcerative skin and mucous lesions, paraesthesia, pain, bleeding and infections⁽⁹⁾.

Thus, evaluating the condition of the pathological process of the hematological client, it was possible to associate eight nursing problems according to Abdellah. Such problems permeate the improvement of the physiological state of the client in question as to maintain the mechanics of the body and to prevent and to correct the deformities; facilitate the maintenance of mechanisms of regulatory functions, sensory function, an oxygen supply to all cells of the body, nutrition of all cells of the body, elimination, water and electrolyte balance; besides recognizing the physiological reactions of the body to the conditions of the disease - pathological, physiological and compensatory.

Disserting on the merits of the not obvious nursing problems, these present themselves in great number in the haematological clients. Due to the complexity and severity of the health picture, as well as all aggressive treatment, clients of haematological pathologies accumulate factors of an emotional, sociological and interpersonal nature that are often perceived incorrectly or not perceived⁽¹⁰⁾.

On the other hand, the nurse to perform a thorough physical examination, must break the possible barriers between communication and touch, achieving trust and respect, performing the procedure that involves not only knowledge of anatomy and physiology, but also perceptions humanism that involves respect, attention, qualified listening,

among other aspects. It is necessary to promote a better interpersonal relationship with the clients, generating a feeling of trust between the assisted and the one that assists⁽¹¹⁾.

In addition, a client who experiences a hospital stay in a hematological scenario can witness several situations that negatively influence his emotional health, such as: low self-esteem, fear of death, complications related to diagnosis and treatment. Therefore, all the mechanisms that generate tension and anxiety should be softened.

The Nursing professional can do a lot in the hospital environment, with small adjustments and better adaptations, to reduce the stress of the clients and satisfy their needs⁽⁸⁾. Florence Nightingale's theory, for example, means taking care of a quieter and more pleasant environment, moving away from the negative image and charged with a hospital setting where suffering is set in motion⁽¹²⁾.

Therefore, when performing the physical examination, measures should be implemented so that no external factor influences the findings of the procedure. The execution of the procedure in a place that guarantees privacy and tranquility favors the receptivity of the client in relation to the techniques performed by the nurse.

Another important point to consider is communication. The client with hematologic changes experiences throughout the course of the disease fears and anxieties related to the fear of death, sufferings linked to complications and side effects of the treatment. With this, some end up getting distanced from social relations, remaining isolated, not very communicative and responsive⁽¹³⁾. Such problem can be remedied in the physical examination provided by the health professional. The nurse must be able to improve the communication of the individual, achieving in the clients a sense of security, freedom and affinity to expose all the complaints and anxieties present.

The complexity of the treatment and the different physical and psychological demands that afflict hematological clients, as well as the fear of death, make it necessary to pay more attention to the dimensions related to the quality of life of these individuals. With this, the nurse performing the physical examination must be alert to signs that indicate an emotional suffering, implementing care as therapeutic communication, encouraging clients throughout the treatment stages.

When thinking about social issues, relatives of clients with hematological and chronic complications tend to reorganize and adapt, as the patient will need care, the roles and functions are rethought and redistributed to assist him in his confused and painful feelings caused by the disease process. Not only the client is shaken by the disease, but his entire social network mainly the family cycle due to efforts to adapt to the disease situation⁽¹⁴⁾.

Likewise, when performing the physical examination on haematological clients, the nurse must provide instruction to the client, who will help him to manage his chronic illness, especially with the help of the family. Care is essentially permeated by the relationship with the other, which requires the family member who cares for coping and detachment, which in turn involves different feelings⁽¹⁵⁾.

Thus, it is essential for health professionals to identify and evaluate the client's specific needs, considering cultural, religious, social and psychological factors, as well as the family's capacity to assume the role of care provider.

Likewise, care in these conditions should consider the process of confrontation and personal, family and community adaptation, previous experiences; existence of similar situations, cultural tradition and religious principles, in the diagnostic definition and intervention, as well as physical examination.

Therefore, unlike the acute conditions in which, in general, an adequate recovery can be expected, hematological clients in chronic conditions lead to more symptoms and loss of functional capacity that directly affect the quality of life, which consists of a process of perception and satisfaction of the individual with their family, social and environmental reality⁽¹⁶⁾. Therefore, these non-obvious problems should be identified during the physical examination and resolved during the implementation of the care.

Thus, working with people with chronic illness or disability requires not only dealing with the medical aspects of their disorder and physical examination, but also working with completeness from a physical, emotional

and social point of view. This holistic approach to care requires nurses to use their repertoire of knowledge and skills, including knowledge of the social sciences, in particular psychology, widely used in hematological clients dealing with pain and suffering⁽¹⁷⁾.

Faye Abdellah in his theory describes a method of problem solving that allows to structure a single body of knowledge and skills of Nursing related to his professional practice⁽⁵⁾. With regard to the non-obvious problems described above, we can list with solutions: creating and / or maintaining a therapeutic environment; facilitate the effective maintenance of verbal and non-verbal communication "in order to achieve resolution in the assistance provided to clients; facilitating self-awareness as an individual with varied physical, emotional and developmental needs "and" accepting the ideal goals possible in the light of physical and emotional limitations"; to use community resources as an aid in solving the problems that arise with the disease and to understand the role of social problems as influential in the case of illness.

Likewise, nursing professional problems are phenomena that present themselves in the practice of the profession, it is the needs that the human being have and that require the nursing professional to satisfy them.

CONCLUSION

Based on this proposed reflection, it is possible to perceive that Abdellah's theory describes the 21 nursing problems that are related to the biological, psychological and social of the individual and are identified through direct observation of the evident needs, communication, and interaction with clients for the needs not evident.

The resolution of these problems expresses the capacity of self-care and maintenance of these to obtain well-being. For this, it is necessary that the nurses, during the physical examination, identify and solve the problems, thus contemplating a state in which the clients have their needs satisfied, without real or potential problems.

As a contribution of this reflection to Nursing, it is extremely important that nurses seek a new paradigm in the health care of haematological clients, centered on the holistic vision of the user as a protagonist of rights, as well as on articulated and humanized attention and attitude ethics in intersubjective relations, in addition to using problem solving strategies that favor critical thinking.

A small number of scientific publications and a small number of authors writing on the problem solving issue were faced as limitations of the study. The use of this methodology promotes reflective and able professionals to work in cooperation with the other members of the team in the construction of new ways, possibilities and practices in order to guarantee the integrality of these clients. Therefore, the need for new studies in the area arises.

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