

Unit 11



GUIDANCE AND COUNSELLING

LEARNING OBJECTIVES

At the end of this chapter, the students will be able to

- ❖ define guidance.
- ❖ explain the purpose of guidance.
- ❖ enumerate the objectives of guidance.
- ❖ explain types of guidance.
- ❖ describe the importance and scope of guidance.
- ❖ enlist the functions of guidance.
- ❖ discuss the principles of guidance.
- ❖ list the roles of the advisor in guidance.
- ❖ difference between guidance and counselling.
- ❖ define counselling.
- ❖ enumerate the objectives of counselling.
- ❖ explain the need for counselling.
- ❖ explain the scope for counselling.
- ❖ list the principles for counselling.
- ❖ discuss the various types of counselling.
- ❖ explain the steps in the counselling process.
- ❖ enlist the counselling skills.
- ❖ enlist the roles of a counselor.
- ❖ enlist the attributes of a counselor.
- ❖ examples of issues in Counselling.
- ❖ method of Teaching: Lecture, power point presentation, demonstration, role play, field visit.



திருக்குறள்:

அகன்அமர்ந்து ஈதலின் நன்றே முகனமர்ந்து
இன்சொலன் ஆகப் பெறின்.

விளக்கம்:

முகம் மலர்ந்து இன்சொல் உடையவனாக இருக்கப்பெற்றால், மனம் மகிழ்ந்து
பொருள் கொடுக்கும் ஈகையைவிட நல்லதாகும்

EXPLANATION:

Sweet speech, with a cheerful countenance is better than a gift made with a joyous mind.

INTRODUCTION

In today's fast moving world, each and everyone needs help. From a small child to the elderly, the need for help is inevitable in every phase of life. For example, when children finish their schooling, they need help in choosing what course they have to study, after which they need help in choosing their career pathway, adults need help in choosing a good job, a suitable life partner, then in reaching the children, getting them a suitable life partner, then managing the difficulties of life and it goes on till the end of life. Every human being needs help from each other to go on in life as we are a social being.

GUIDANCE

"Be In Tune with Life."

-Anonymous

11.1 GUIDANCE

Guidance means to "direct", "to point out", and "to show the path".



Guidance is providing some help or assistance to an individual by another expert individual.

Guidance is designed to assist a person to decide where he wants to go, what he wants to do, or how he can best accomplish his purpose; it assists him to solve problems that arise in his life. It does not solve his problems, but empowers him to solve them.

The focus of guidance is the individual, not the problem; its purpose is to promote the growth of the individual in self-direction. This guidance can be given to groups or to individuals, but it is always designed to help each individual even though they may be in a group.

Examples	Guidance
<p>Ramesh completes his grade XII successfully with 92 %. He needs assistance in moving in the right direction. He needs somebody to tell him what course he can study to have a bright future.</p> <p>Ramesh needs help and assistance.</p>	

Define Guidance

“Guidance is the assistance provided to individuals to be able to choose, prepare and assume a position and making progress in his/her chosen position” (Frank Parson, 1951).

Guidance is concerned with the maximum development of the individuals to make his/her own decisions, recognizing his abilities and potentialities.

“Guidance is a process of helping young people to learn to adjust to self, to others and to circumstances.” (Skinner.)

Other statements related to guidance are:

- Guidance is a personal assistance.
- Guidance is a process by which individual solves his problems by his own efforts.
- Guidance focuses on the attention of the welfare of the individual.


Purpose of Guidance

- To bring confidence in selecting appropriate course of action for adjustment in various walks of life.
- Helping in a balanced development.
- To help to determine the courses most appropriate to their needs and abilities.
- To plan the future in the individual’s line of interest, abilities and social needs.

Objectives of Guidance

- Explore self
- Determine values
- Set individual goals/objectives
- Explore the world
- Improve the efficiency
- Build relationship
- Accept responsibility for the future

Types of Guidance

Types	Examples
1. Personal <ul style="list-style-type: none"> ❖ It is needed to develop all personal and social qualities that would enable the individuals in solving personal problems and seeking better adjustments. ❖ It is meant for deciding what habits, attitudes and values we should develop. ❖ It is concerned with the total person. ❖ This guidance points out the strengths and weaknesses of every individual or child. 	<p>Mr.Lucas, has 3 adolescent children who are all boys. They are Sam, Sham and Saul.</p>  <p>They are in the stage of attitude formation and are at a risk to go into any habits. Mr.Lucas monitors them closely to see that they develop a favorable attitude and abstain from uncompartable habits. He sometimes seeks guidance in growing up the three children.</p>

2. Vocational

- ❖ Relating to choosing and adjusting in an occupation or employment.
- ❖ Process of assisting the individual to choose an occupation, prepare for it, enter it and progress on it.

Sangeetha, a 22 yr old girl, has completed her B.Sc. Nursing course and has got 3 good jobs in reputed hospitals which are equally good.

She needs to choose among the 3 options. She has to decide what is best for her future.

Sangeetha needs help and assistance.



3. Educational

- ❖ Is a process of assisting the individual student to reach optimum educational development. It is a sort of guidance that is only rendered to the student community of any age.
- ❖ Helps the students to make right choices, as well as make adjustments in relation to schools, curriculum, courses and school life which contributes to the all-round development.



Describe the Scope of Guidance

Implies to the extent, length, breadth, range, comprehensiveness and variety of helping the individual to solve his problems, covering all the aspects of life.

Scope of Guidance service in schools.

- Helps to make a satisfactory transition from home to the school.
- In diagnosing the difficulties in the learning of basic skills.
- To help in avoiding potential dropouts in schools.

- To help in understanding the purpose and meaning of life.
- To plan for further education.

11.1.1 Enlist the Functions of Guidance

- Encouraging and supporting
- Informing
- Advising
- Assessing
- Liaising and representing
- Monitoring and coaching
- Providing feedback
- Counselling

11.1.2 Discuss the Principles of Guidance

Guidance is based on the following principles.
(Gordon *et al*, 2008)

1. *Guidance involves holistic development of the individual.*

It should be given in the context of total development of the personality.

2. *Guidance recognizes individual differences.*

Each individual is different with specific needs, interests, and values. Students come from diverse cultural background. Therefore, it is necessary for teachers to be sensitive to these differences.

3. *Dignity, respect and freedom should remain integral to the guidance process.*

Accept individuals with respect, dignity and freedom.

4. *The guidance should be a continuous process.*
Continued interactions are helpful.

5. *Guidance uses good communication skills.*

Communication is an important skill needed in guidance. It includes both verbal and nonverbal communication.

6. *Guidance is a team activity.*

Besides giving personal tutoring time, incorporating more people, expertise and multiple perspectives is highly effective.

7. *Every contact is a precious opportunity for meaningful interaction.*

Every individual is unique and have their own different style of interaction.

8. *The frequency and quality of interaction with the advisor is critical in helping students adjust to college life.*

9. *Students are expected to map out a path for success.*

10. *The core task is working with students to plot a course of action for their educational success.*

11.1.3 Roles of the Advisor in Guidance



“You just have to have the guidance to lead you in the direction until you can do it yourself.”

- Tina Yothers

11.2 COUNSELLING

Counselling is as old as society. In every-day life we find counselling goes on at many levels in a family set-up, parents counsel their children, in society doctors counsel patients, lawyers counsel clients and teachers counsel students.



STUDENT'S ACTIVITY

- Can practice the types of guidance by doing a Role play.

Counselling is a process of assistance extended by an expert in an individual situation

to needy person. According to **Carl Rogers**, Counselling is a series of direct contact with the individual which aims to offer him assistance in changing the attitudes and behavior. Counselling involves two individuals one seeking help and other a professionally trained person helped solved problems to orient and direct him to words a goals.



Define Counselling

Counselling is a personal and dynamic relationship between two individuals-an older, more experienced and wiser (counselor) and a younger, less wise (counsee). The latter has a problem for which he seeks the help of the former. They two work together so that the problem may be more clearly defined and the counsee may be helped to a self-determined solution. (Wren)

Counselling is an accepting, trusting and safe relationship in which clients learn to discuss openly what worries and upsets they have, to define precise behaviour goals, to acquire the essential social skills and to develop the courage and self confidence to implement desired new behavior. (Merle M. Ohlsen)

Enumerate the Objectives of Counselling

1. Achievement of positive mental health.
2. Resolutions of problems.
3. Improving personal effectiveness.

4. Maximizing change of behavior.
5. Decision making as a goal of nursing.
6. Modification of behavior as a goal.

Explain the Need for Counselling

To help individuals become self-sufficient, self-dependent, and self-directed and to adjust themselves efficiently to the demands of a better meaningful life.

11.2.1 List the Principles for Counselling

Siddiqui (2013) has listed 10 principles of Counselling which are the following:

1. Communicate personal warmth and make the client feel welcome and valued as individuals.
2. Act with care and respect considering the individual and cultural differences and diversity of human experience.
3. Be honest and trustworthy in all of the individual's professional relationships, being open, friendly and not defensive.
4. Respect the confidence with which the individual is entrusted.
5. Be empathetic and sense the feelings and experience of another person.
6. Promote the safety and wellbeing of individuals, families, and communities.
7. Seek to increase the range of choices and opportunities for the clients.
8. Practice within the scope of the individual competence.
9. Treat colleagues and other professionals with respect.
10. Focus on finding solutions to the existing problems and future decisions of the individual.

Explain the Scope for Counselling

Counselling has a lot of scope in this complex world. The scope covers the various services: (Technical and Vocational Training Corporation, 2016.)

S.No.	Services	Explanation
1.	Religious counselling	<ul style="list-style-type: none"> It is done through religious activities such as retreats, lectures, or religious book studies.
2.	Preventive counselling	<ul style="list-style-type: none"> It is used to prevent occurrence of social, psychological, and health problems through awareness program.
3.	Educational counselling	<ul style="list-style-type: none"> It is done for assisting students in studies and development of their talents and capabilities.
4.	Vocational and educational counselling	<ul style="list-style-type: none"> Educating students about the various types of vocation and university education, types of jobs, and conditions of employment.
5.	Social and ethical counselling	<ul style="list-style-type: none"> Is helpful in identifying suitable environment for students to acquire skills and expertise to interact with others in accordance with the institution and spiritual or ethical values.
6.	Student counselling	<ul style="list-style-type: none"> It is one for helping students with personal and behavioral problems, and it also includes employment and career counselling.

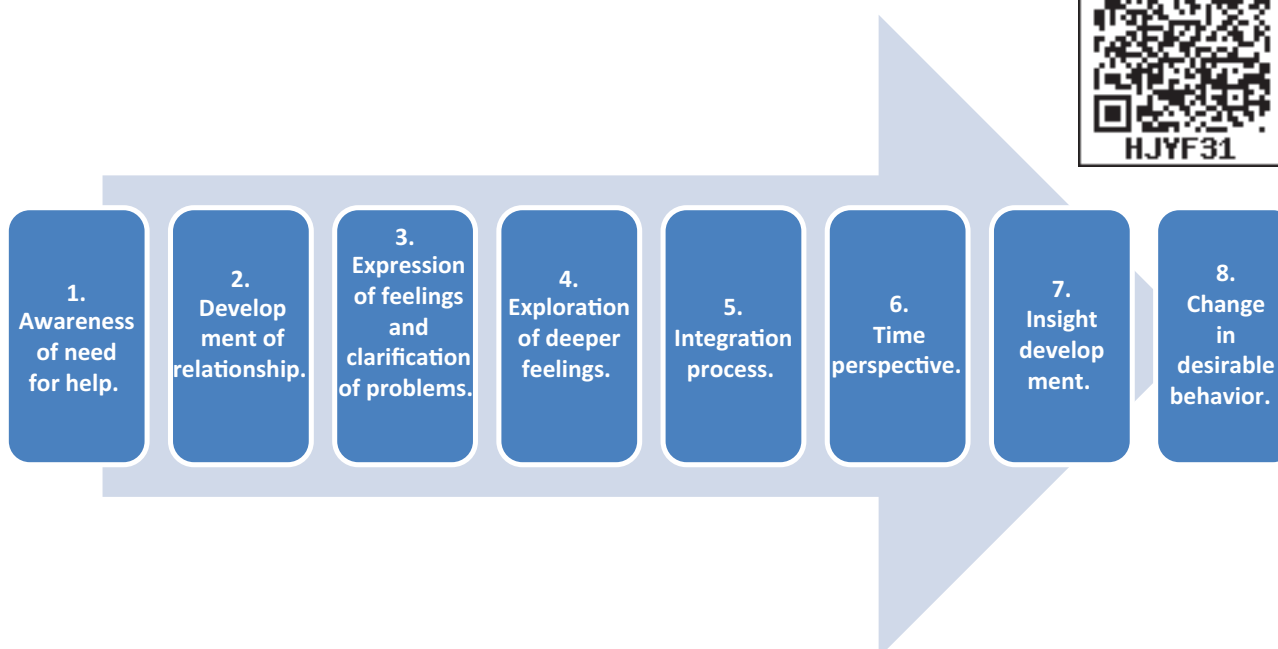
Discuss the various types of Counselling

Siddiqui (2013) has classified the types of Counselling

S.No.	Types of Counselling	Explanation and examples
1.	Individual counselling	It aims to explore and facilitate solving of personal problems and issues. It is a one to one basis. It helps in developing coping strategies.
2.	Group counselling	It provides members of the group to explore and develop personal goals and to promote positive changes in an atmosphere of honest sharing and listening.
3.	Career counselling	It explores individual capabilities and job opportunities .
4.	Marriage counselling	It is done to prepare individuals for marriage to enhance adjustment and acceptance between partners.

S.No.	Types of Counselling	Explanation and examples
5.	Student/Academic counselling	It is done among students to enable them to <i>solve academic and personal problems</i> . It also assists students to make career choices.
6.	Family counselling	This is used when there are critical situations and adjustment problems among the family members.
7.	Geriatric counselling	Is done <i>among the elderly</i> in times of behavioral problems. For example <i>depression</i> .
8.	Genetic counselling	It involves counselling of <i>parents about genetic problems</i> and treatment options in children.
9.	Online counselling	It is offered via <i>email</i> and online applications.

11.2.2 Explain the Steps in the Counselling Process



11.2.3 Enlist the Counselling Skills

1. Attending
2. Observing
3. Active listening
4. Reflecting
5. Questioning
6. Summarizing
7. Silence
8. Independence
9. Concreting
10. Empathy and acceptance
11. Cultural sensitivity

11.2.4 Enlist the Roles of a Counselor

1. Counselling

**2. Consulting
and preventing**

3. Assessing risk



Guidance Vs. Counselling






11.2.5 Differentiate between Guidance and Counselling

Basis for Comparison	Guidance	COUNSELLING
Meaning	Guidance refers to an advice or a relevant piece of information provided by a superior, to resolve a problem or overcome from difficulty.	Counselling refers to a professional advice given by a counselor to an individual to help him in overcoming from personal or psychological problems.
Nature	Preventive	Remedial and Curative
Approach	Comprehensive and Extroverted	In-depth and Introverted
What it does?	It assists the person in choosing the best alternative.	It tends to change the perspective, to help him get the solution by himself or herself.
Deals with	Education and career related issues.	Personal and socio-psychological issues.
Provided by	Any person superior or expert	A person who possesses high level of skill and professional training.
Privacy	Open and less private.	Confidential
Mode	One to one or one to many	One to one
Decision making	By guide.	By the client.





11.3 ENLIST THE ATTRIBUTES OF A COUNSELOR

1. Empathy
2. Understanding
3. Respect
4. Positive acceptance
5. Commitment to values
6. Personal skills
7. Personal knowledge
8. Personal development




11.3.1 Examples of Issues for Counselling

S.No.	Issues	Explanation	Characters.
1.	Love affairs 	Attraction towards opposite sex that is a natural phenomenon.	Lack of interest in studies, bunking classes, running away from home or hostel, and chances of getting infected by sexually transmitted diseases.
2.	Stress management 	Stress is your body's way of responding to any kind of demand or threat.	Examination fear, inability to get admission in desired colleges, job stress, peer pressure, extreme anxiety, leading to suicide, hurting others, and psychiatric illnesses.
3.	Depression and self-harm 	Adolescent find it difficult to balance between independence and dependence, which can lead to depression.	Depression, suicide, physical and sexual abuse, drug abuse, alcoholism, loss of family members, single parent, poor parent child relationships.
4.	Anger management 	Anger or wrath is an intense negative emotion. Emotions have to be controlled and energies directed towards positive ways.	Anger towards family, friends and relatives.
5.	Child abuse/harassment 	Child abuse is when a parent or caregiver, whether through action or failing to act, causes injury, death, emotional harm or risk of serious harm to a child.	Forms of child maltreatment, including neglect, physical abuse, sexual abuse, exploitation and emotional abuse.



S.No.	Issues	Explanation	Characters.
6.	Memory and concentration 	Problems in academic due to lack of memory and concentration.	Watching TV, playing computer games, and unhealthy friendship.
7.	Adjustment with parents 	Children are unable to live up to the parents expectations and consider their advice as interference can lead to maladjustments.	Irresponsible, aggressive, less competitive, and uncooperative.
8.	Adjustment in school/ college 	Students have difficulties to make adjustments in relationship with friends, teachers, course of study and career.	Impulsive decisions, failures, disappointments, and coping problems.
9.	Career guidance 	Deals with enhancing the student's knowledge about the capabilities, interests, intelligence, job opportunities and competitive examinations.	Awareness of their weaknesses and strength.
10.	Domestic violence 	Domestic violence is one person against another in a domestic setting such as a home.	Family problems and behaviors problems among children.



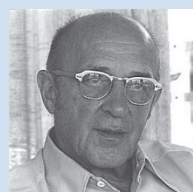
S.No.	Issues	Explanation	Characters.
11.	Gambling 	Gambling is the betting of money or something of value on an event with an uncertain outcome with the primary intent of winning money or material goods.	Loneliness, stress, depression and other problems,
12.	Substance abuse 	Substance abuse, also known as drug abuse, is a patterned use of a drug in which the user consumes the substance in amounts or with methods which are harmful to themselves or others, and is a form of substance related disorder.	Habit formation, failure in examinations, accidents, violence, and unplanned unsafe sex.
13.	Truancy 	Truancy means running away from home, school or hostel.	Unhealthy friendship or relationships.

A recent official note tabled in Parliament by Union home ministry has confirmed that Tamilnadu continues to be one of the leading states in suicide rate, particularly the student community. (April 4, 2018, Deccan Chronicle.)



STUDENT'S ACTIVITY

- Can practice Counselling by doing a Role play.
- Visiting guidance and counselling centre.



Carl Rogers, (1902 – 1987), an American psychologist, emphasized on the person-to-person relationship between the therapist and the client.

CONCLUSION

Guidance is a psychological field that deals with assisting clients in their need to choose the right course of action, while Counselling is a psychological field that deals with research and applied work to provide training and supervision. While both are being used in

organizations and by individuals, Counselling has a broader reach, while guidance is usually being used in schools to guide students towards proper actions. Counselling encompasses several other fields of psychology, while guidance tends to be more specific.

A-Z GLOSSARY

Retreats (புத்துணர்ச்சி முகாம்)	-	Time spend away from one's normal life for the purpose of reconnecting usually in prayer with God.
Professional (தொழிலர் தொகுதி மனப்பான்மை)	-	Exhibiting a courteous, conscientious, and generally businesslike manner in the workplace.
Perspective (தோற்றம்)	-	The capacity to view things in their true relations or relative importance.
Introverted (உள் தோற்றம்)	-	Possessing a reserved or shy nature.
Extroverted (வெளித் தோற்றம்)	-	possessing or arising from an outgoing and social nature.face.
Socio-psychological (சமூக மனநிலை)	-	Relating to, or involving a combination of social and psychological factors.
Confidential (நம்பிக்கைக்குரிய)	-	Secret or private.
Ethical (ஒழுங்குநெறி)	-	Involving or expressing moral approval or disapproval.
Depression (மனச்சோர்வு)	-	A state of feeling sad.
Insight (உள்ளுணர்வு)	-	The power or act of seeing into a situation.
Concreting (திட நிலை)	-	Naming a real thing or class of things.
Attributes (பண்பு)	-	A quality, character, or characteristic ascribed to someone or something
Bunking (விடுபடுதல்)	-	A hurried departure or escape from class.
Habit formation (பழக்க நிலை)	-	The process by which new behaviors become automatic.



EVALUATION



I. Choose the correct answer:

1. The word guidance means:
 - a. To talk to.
 - b. To direct.
 - c. To observe.
 - d. To listen.
2. Guidance is a process of helping young people to:
 - a. Learn to complete their studies.
 - b. Communicate well with others.
 - c. To adjust to self, to others and to circumstances.
 - d. To walk away from situation.
3. The purpose of guidance is to:
 - a. Helping in a balanced development.
 - b. Talk to others.
 - c. Help to communicate to friends.
 - d. Separate from group.
4. Which one of the following is a objective of guidance?
 - a. Build relationship.
 - b. Enhance communication.
 - c. Develop patience.
 - d. Develop anger.
5. Taanika, a 22 yr old girl, has completed her Engineering studies and has got 3 good jobs in reputed companies which are equally good. Which guidance should be taken
 - a. Personal.
 - b. Vocational.
 - c. Educational.
 - d. None of the above.
6. Counselling for helping students with personal and behavioral problems, and it also includes employment and career counselling. Which scope of counselling is it classified under?
 - a. Preventive counselling.
 - b. Student counselling.
 - c. Religious counselling.
 - d. Genetic counselling.
7. Which type of counselling is offered via email, real time chat, and video conferencing?
 - a. Genetic counselling.
 - b. Student/Academic counselling.
 - c. Online counselling.
 - d. Preventive counselling.
8. Watching TV, playing computer games, and unhealthy friendship is classified under what issues which needs counselling?
 - a. Memory and concentration.
 - b. Adjustment in school/college.
 - c. Gambling.
 - d. All the above.



II. Write short answer for the following questions:

1. Define guidance.
2. Write any 3 purposes of guidance.
3. Write any 3 objectives of guidance.
4. Write any 3 roles of the advisor of guidance.
5. Define counselling.
6. List any 3 skills of the counselor.

III. Write short notes for the following questions:

1. Explain any 2 types of guidance.
2. Describe the scope of guidance service in schools.
3. Enlist the functions of guidance.
4. Explain the need for counselling.
5. Explain the steps in the counselling process.

IV. Answer the following questions in detail:

1. Discuss the principles of guidance.
2. Differentiate between guidance and counselling.
3. Explain the scope for counselling.
4. List the principles for counselling.
5. Discuss the various types of counselling.
6. Discuss any 5 issues which need counselling.

REFERENCES

1. Siddiqui, M. H. (2013) Guidance and counselling. New Delhi: APH Publishing Corporation.
2. Sharma, S. K., & Sharma, R., (2012) Communication and educational technology in nursing. New Delhi: Elsevier Health Sciences.
3. Gordon, V. N., Habley, W. R. & Grites, T. J. (Eds) (2008) Academic Advising: A comprehensive hand book: (2nd edition). Jossey-Bass.

WEBLINKS

- American Counselling Association. (2016). Consensus definition of counselling. Retrieved from <http://www.counselling.org/knowledge-centre/20-20-a-vision-for-the-future-of-counselling/consensus-definition-of-counselling>.
- British Association for Counselling and Psychotherapy. (2013). Definition of counselling and psychotherapy. Retrieved from www.bacp.co.uk.
- The Free Dictionary. (2016a) Guidance. Retrieved from www.thefreedictionary.com/guidance.
- The Free Dictionary. (2016b) Crisis. Retrieved from www.thefreedictionary.com/crises.
- www.unesdoc.unesco.org/images/0012/001257/125740e.pdf.



CASE STUDY

CASE STUDY: 1

1. Mrs. Kamala, 25 years female has 22 weeks of pregnancy admitted in Antenatal ward with Haemoglobin level of 7.2 gm and complaints of loss of appetite. She is taking prescribed iron tablets daily.
 - (a) As a nurse what type of health education you will give?
 - (b) Prepare a flash cards with iron containing food which is available in the market.

CASE STUDY: 2

1. Mrs. Usha 23 years primi mother who delivered a female baby with 2.7 kg through normal delivery. She is in the postnatal ward.
 - (a) What are the postnatal observations as a nurse you must do?
 - (b) List the nursing interventions for a primi mother in the immediate postnatal period.

CASE STUDY: 3

1. The mother delivered her first baby and getting discharged today.
 - (a) What are the family palnning advices you will give?
 - (b) What are the discharge instructions you will give?

CASE STUDY: 4

1. Mrs. Sita 48 years old female admitted in a hospital for angina pectoris. She has recovered slowly from the condition. She was adviced to get discharge home with mitroglycerine tablets and the nurse should give her the discharge advice.
 - a. What are the general instructions does the nurse include in the teaching?
 - b. What should he insisted for Mrs. Sita to resume her normal routine activities?
 - c. When to approach doctors?

CASE STUDY: 5

1. Mr. Lee and her 8 months old Lavanya visited the paediatric clinic with the

history of recurring attacks of diarrhoea. The baby is on bottle feed only.

1. What are the reasons for diarrhoea?
2. What are the foods can be given to him?
3. How do you advise on bottle feed?

CASE STUDY: 6

1. Mrs. Vasantha and her 12 months old baby Dhinesh came to the hospital at the first time for vaccination. The baby looks very thin. On examination his weight only 6.2 kgs., sitting without any support on enquiry his birth weight was 2.9 kgs. Not yet received a single vaccination.
 1. Is that baby's weight is upto the expectation?
 2. What are the expected milestones in 12 months?
 3. List down the immunization schedule for this baby.

CASE STUDY: 7

1. Meena is a 29 year old female approached to the Emergency Department with dyspnea, myalgia, and rhinorrhea. Her symptoms began approximately 1 day ago and are continuous, steadily getting worse. She is having significant nasal discharge but minimal cough. Her 4 year – old son has experienced rhinorrhea as well over the past 3 days, but is not as ill as she is. She has no significant past medical history, and takes no routine medications. She reports receiving the flu vaccine when her child first fell ill, 3 days ago. Meena was diagnosed with influenza via swab test, she was admitted to the hospital for respiratory problem and started on the antiviral tamiflu (oseltamivir). She was discharged after five days of hospitalization with good improvement in oxygenation.
 1. What health education you will give her to keep other family members safe from flu?



NURSING - THEORY (VOCATIONAL) MODEL QUESTION PAPER – XII STD

Part-III – VOCATIONAL SUBJECTS (Health Area)

Time: 2hrs-30 minutes

Maximum Marks : 90

Instructions:-

- i. Check the question paper for fairness of printing. If there is any lack of fairness, inform the Hall supervisor immediately.
- ii. Use Blue or Black Ink to write and underline and pencil to draw diagrams.

I - CHOOSE THE CORRECT ANSWER (15 x 1 = 15)

1. Paterson filter is an example of
 - a. Slow sand filter
 - b. Rapid sand filter
 - c. Household filter
 - d. Candy's filter
2. The infection spread to the blood stream will lead to
 - a. Lung Abscesses
 - b. Pleural Effusion
 - c. Septic Shock
 - d. All the above
3. Mr. Raju, his BP is 180/100 mmHg his condition can be termed as
 - a. Hypotension
 - b. Hypertension
 - c. Myocardial infarction
 - d. Angina Pectoris
4. Signs and symptoms of diabetes mellitus
 - i) Polyuria
 - ii) Polydipsia
 - iii) Polyphagia
 - iv) Hypoglycaemia
5. Which of the following group of vitamins are fat soluble
 - a. A, B, C, D
 - b. A, D, C, B
 - c. A, D, E, K
 - d. B, C, D, K
6. G₂P₂ could mean
 - a. A woman has had 2 children and is expecting twins.
 - b. A woman has been pregnant 2 times and has 2 children.
 - c. A woman has already had one child and has just had an abortion.
 - d. A woman has been pregnant 2 times and miscarried once (before 24 weeks).



7. Most of the infant double their birth weight by
 - a. 4 to 5 months
 - b. 3 to 4 months
 - c. 6 to 8 months
 - d. 8 to 10 months.
8. Which of the following interventions should be taken to help an older client to prevent osteoporosis
 - a. Decreased dietary calcium intake.
 - b. Increase sedentary lifestyles.
 - c. Increase dietary protein intake.
 - d. Encourage regular exercise.
9. The first phase of disaster management is
 - a. Long term planning
 - b. Preparedness
 - c. Impact phase
 - d. Warning phase
10. Analgesics are used to
 - a. Relieve pain
 - b. Relieve tension
 - c. Both a & b
 - d. None of the above.
11. Barriers of effective communication are
 - a. Being defensive
 - b. summarising
 - c. Perceptions
 - d. All the above
12. Which of the following is the objective of guidance?
 - a. Build relationship
 - b. Enhance communication
 - c. Develop Patience
 - d. Personal
13. Thyroid storm is the complication of
 - a. Hyperthyroidism
 - b. Hypothyroidism
 - c. Hypotension
 - d. Hypertension
14. The amniotic cavity develops
 - a. On the tenth day.
 - b. Within the outer cell mass.
 - c. Within the inner cell mass near the cytotrophoblast.
 - d. In extra embryonic mesoderm.
15. Non-Verbal communication includes;
 - a. Smile
 - b. Smell
 - c. Laugh
 - d. Sharing

II - ANSWER ANY 10 QUESTIONS IN BRIEF (10 x 3 = 30)

16. List down the precautions taken for safe water supply in tanks.
17. Write any 3 complications of Pneumonia.
18. Write the diagnostic investigation for cholecystitis.
19. Write the nursing management of Renal Calculi.
20. Differentiate between balanced diet and malnutrition.
21. What is meant by post natal period?
22. What is meant by Growth and development of a child?
23. What is macular degeneration?
24. Write an expansion for START – in disaster management.
25. Define Toxicology.

26. What is meant by epilepsy?
27. Write the elements of communication.
28. Write any three roles of the advisor of guidance.

III - WRITE SHORT NOTES ON ANY 5 QUESTIONS ONLY (5 x 5 = 25)

29. Discuss in detail the home care management of diarrhoea.
30. Differentiate endemic, epidemic and pandemic.
31. Write the causes of computer vision syndrome.
32. Write diet schedule for your grandmother 75 years old who is a case of Diabetes mellitus.
33. How do you assess the Homan's sign?
34. Write brief note on disaster management kit.
35. How do you plan a balanced diet?

IV - ANSWER IN DETAIL (10 x 2 = 20)

36. Write an essay about Myocardial Infarction.

or

Write in detail about the responsibilities of Home health nurse.

37. Weather forecast announce about heavy and continuous rain for 3 days. What is your role before during & after rain?

or

For an effective communication with your class teacher, what are all the guidelines you will follow?



NURSING

PRACTICAL



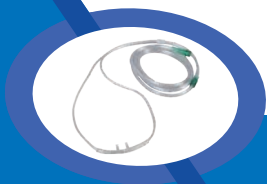
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NURSING VOCATIONAL - PRACTICAL

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Unit 1



OXYGEN ADMINISTRATION

Definition:

Oxygen therapy is the administration of oxygen to patients those who are suffering with respiratory dysfunction and low level of O_2 in blood.

Oxygen cylinder:

1. Oxygen is a gas, which has no smell or colour and is heavier than air
2. It is stored at high pressure in black and white colour cylinders
3. With oxygen there is always a serious fire risk
4. Smoking is not allowed anywhere nearby oxygen cylinder
5. No open fire or any inflammable material should be kept near the oxygen cylinder
6. Oil, grease or alcohol should never be used on the connections of the cylinder
7. The cylinder is mounted on a stand for easy access and should be tested before taking it to the bedside
8. To test it, open the cylinder with the key and then open the valve very little and test the flow of oxygen from the cylinder into a bottle half filled with water. (humidifier)
9. The humidifier bottle is connected with flow meter to know the amount of O_2 being delivered.

10. Oxygen flows into the humidifier and then oxygen is given to the patient



Indications for oxygen Administration:

- ❖ Cyanosis (bluish colour of the skin, nail beds and mucus membranes)
- ❖ Breathlessness or labored breathing
- ❖ An environment low in oxygen content. e.g. High altitudes
- ❖ Anaemia
- ❖ Diseases or conditions in the oxygen across the capillary membrane
- ❖ Shock and circulatory failure
- ❖ Haemorrhage and asphyxia
- ❖ Critically ill patients

Methods of oxygen administration:

The manner in which oxygen is administered depends upon the condition of the patient.

Oxygen can be delivered

1. Nasal cannula



2. Oxygen by nasal catheter
3. Oxygen by mask



4. Oxygen tent



5. Trans tracheal oxygen.



Hazards of oxygen inhalation:

- ❖ Infection
- ❖ Combustion (Fire)
- ❖ Dryness of the mucus membranes of the respiratory tract
- ❖ Oxygen toxicity
- ❖ Atelectasis
- ❖ Retro lental fibro plasia
- ❖ Asphyxia

Administration of oxygen by nasal catheter method:

Oxygen cylinder

- ❖ Stand and accessories. (the regulator, flow meter, humidifier, connecting tube etc)

Articles required:

- ❖ Nasal catheter of appropriate size, clean, sterile or disposable type
- ❖ Water soluble lubricating jelly
- ❖ Bowl of water
- ❖ Mackintosh and towel
- ❖ Flow light and tongue depressor
- ❖ Cotton applicators and normal saline in a container
- ❖ Gauze pieces in a container



- ❖ Kidney tray and paper bag
- ❖ Adhesive tapes

Procedure:

1. Wash hands.
2. Measure the length of the catheter from the tip of the nose to ear lobe. Mark the length with ink.
3. Check the cylinder for the working condition. Open the main valve in an anti clock wise direction. Look for the pressure reading on the gauge. Adjust the flow of oxygen to 2-4 Litres/min for adults.



4. When the wheel valve is opened the oxygen will start bubbling through the water in the humidifier.
5. Lubricate the tip of the catheter sparingly with water soluble jelly and check the flow by immersing it in water.
6. Introduce catheter slowly into one of the nostrils of the previously marked distance. Never use force.

7. Check the position of the catheter in the oropharynx at the level of the uvula.
8. It can be checked by asking the patient to open his mouth widely.
9. Depressing the tongue with tongue depressor and use the flash light to see the throat
10. Fix the catheter over the forehead or at the cheek of the patient with adhesive tapes
11. Save the connecting tube to the bed clothes or patient gown with safety pin

After care of the patient and articles:

- ❖ Stay with the patient till he is at ease
- ❖ Keep the patient warmth and comfortable
- ❖ Assess the vital signs frequently
- ❖ Record the procedure with date and time in the nurses record
- ❖ Check the cylinder for its good working condition
- ❖ Change the nasal catheter by every 8 hours
- ❖ When the oxygen is to be stopped, do it gradually
- ❖ Watch the patient for any deteriorating symptoms after the removal of oxygen



Unit 2



STEAM INHALATION

Definition:

Breathing warm and moist air produced by a vaporizer is called steam and moist inhalation.

Purpose:

1. To relieve the symptoms of cold and sinusitis caused by inflammation and congestion of mucous membrane
2. To loosen mucus secretion and bring out from the respiratory tract
3. To provide heat and moisture to prevent dryness of mucous membranes of lung
4. To aid in absorption of oxygen.

Drugs used:

- ❖ Tincture benzoin 5ml per 500ml of boiling water
- ❖ Eucalyptus 2ml per 500ml of boiling water
- ❖ Camper few crystals per 500ml of boiling water

Methods of steam inhalation:

- ❖ Jug Method



Nelson's inhaler

- ❖ Electric steam inhaler



- ❖ Steam tent





Articles required:

- ❖ Nelson's inhaler with a mouth piece is placed in the neck of inhaler
- ❖ Bowl or basin large enough to hold the inhaler
- ❖ A flannel piece or towel
- ❖ Face towel
- ❖ Bath towel
- ❖ Tincture benzoin or any other inhalant ordered
- ❖ Teaspoon or a measurement glass
- ❖ Gauze piece in a container
- ❖ Cotton swabs
- ❖ Kidney tray and paper bag
- ❖ Back rest or cardiac table

Procedure:

1. The inhaler has a glass mouth piece passing through the cork of the inhaler and an air inlet spout at the side
2. Prepare the patient and get his co-operation. Protect him from cold air. Make him comfortably seated on the bed and table in front
3. Warm the inhaler with a little hot water and pour the water out
4. Pour the boiled water below the air inlet
5. Add the drug ordered
6. Cork the inhaler
7. Turn the mouthpiece away from the air inlet.
8. Wrap the inhaler with flannel or a towel and place it in a small tray or basin.

9. Take it to the bedside together with a towel and gauze piece
10. Wrap the piece of gauze around the mouthpiece of the inhaler
11. Place the inhaler in front of the patient and ask him to keep his mouth in the mouthpiece and breathe in to receive the steam and breathe out removing his lips from the mouthpiece
12. Continue the treatment for 15 to 20 minutes
13. Wipe the patient's face and keep him warm and in the same room for at least an hour
14. Wash the mouthpiece and boil it. Wash the inhaler and replace all the articles
15. Record the procedure and effect on the patient

After care of patient and articles:

- ❖ Continue treatment for 15 to 20 minutes
- ❖ Wipe off the perspiration from the face
- ❖ Remove the back rest and cardiac table
- ❖ Adjust position of patient in bed. Make him comfortable
- ❖ Instruct him to remain in bed for 1 to 2 hours to prevent draught
- ❖ Record the procedure on the nurse's record with date and time

Unit 3

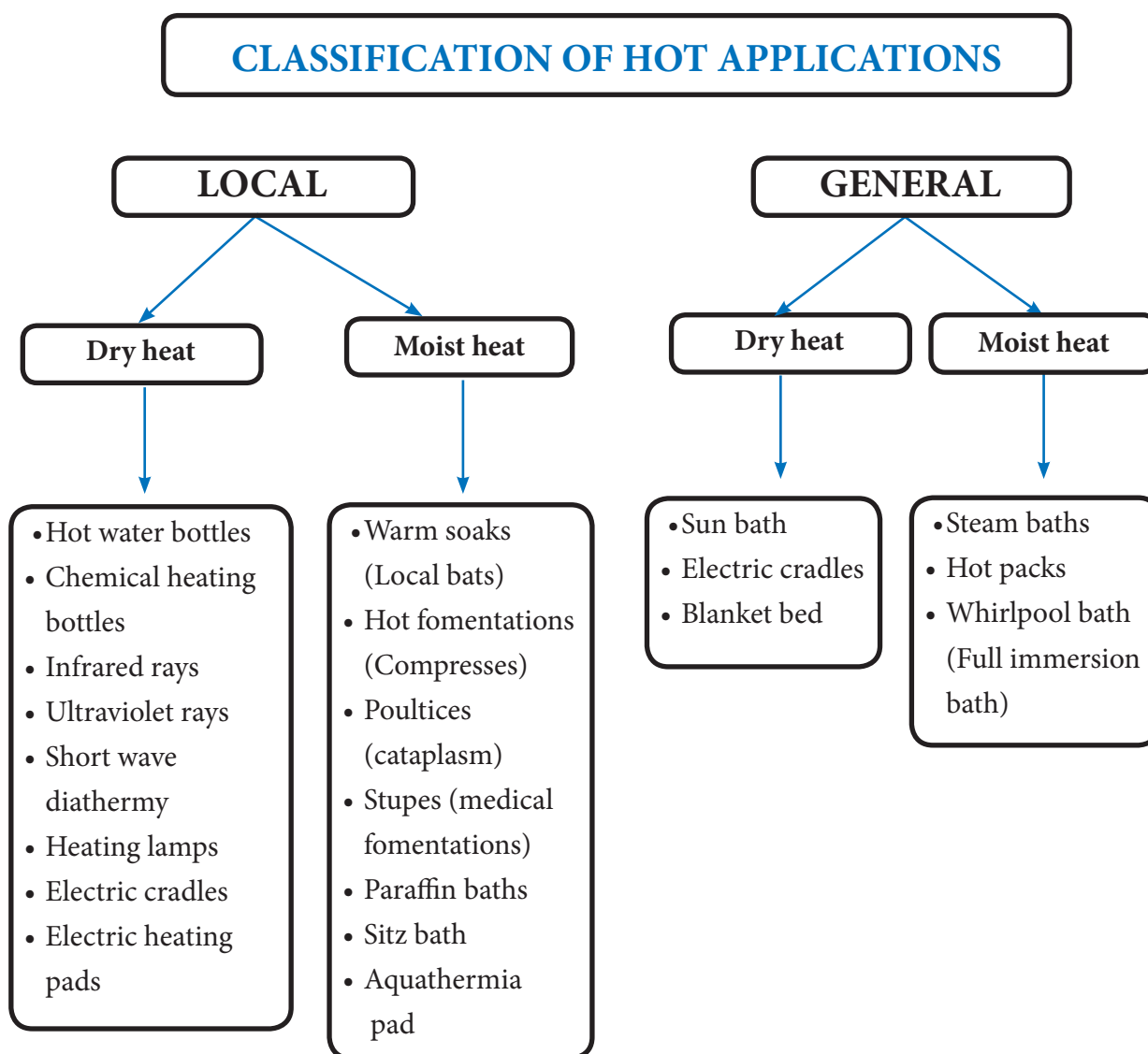


HOT APPLICATION

Definition:

Hot application defines as stimulation of the skin and underlying tissues with heat for the purpose of decreasing pain, muscle spasms, or inflammation.

Classification of Hot Application:



Purpose:

- ❖ To relieve pain and congestion
- ❖ To promote suppuration
- ❖ To provide warmth and comfort
- ❖ To promote healing
- ❖ To decrease muscle tone and to soften the exudates
- ❖ To relieve retention of urine



Articles required:

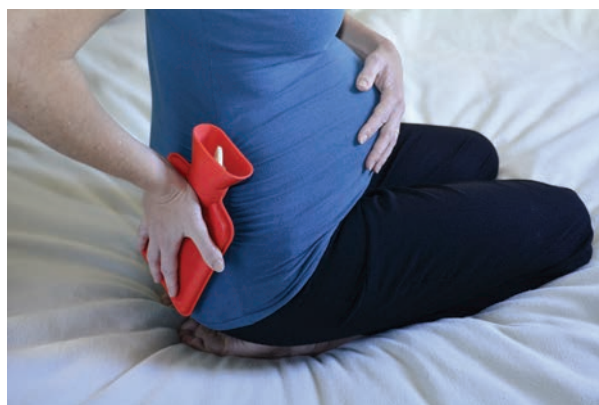
- ❖ Hot water bag with cover
- ❖ Boiled water in a jug and cold water in another jug
- ❖ Duster
- ❖ Lotion Thermometer
- ❖ Towel
- ❖ Vaseline (or) moisturizing lotion

Indications:

- ❖ Local congestion
- ❖ Muscle spasm
- ❖ Fatigue
- ❖ Pain

Contra Indications:

- ❖ Heat is not used in malignancies, because heat increases, the metabolism of both the normal and abnormal cells
- ❖ Heat is not used for client with impaired kidney, heart and lung functions
- ❖ Heat should not be applied to actually inflamed areas. E.g: Acute tooth abscess. the heat may cause them to rupture the surrounding tissues
- ❖ Heat should not be applied on the clients with paralysis, weakness and debilitated clients, because they have impaired perceptions and they may not be responding to hot application resulting in burns
- ❖ Heat should not be applied, when there is oedema, associated with venous or lymphatic disease
- ❖ Heat should not be applied on clients with metabolic disorders. It may increase the hazards of tissues damage
- ❖ Heat should not be applied on clients with high temperature
- ❖ Heat should not be applied to very young and very old people because of the risk of tissue burns



Procedure:

1. Wash hands to prevent cross infection
2. Fill the hot water bag with boiled water half or one - third. Place the hot water bag over a flat surface like table and expel all the air by forcing the water up to the neck of the bag
3. Cork it tightly, dry the outside of the bag and check it for leakage by turning the bag upside down
4. Put on the cover and take it to the bedside
5. Apply to the area as ordered with the towel or sheet
6. Keep the bag for 20-30 minutes intermittently

After care of the patient and articles:

- ❖ Remove the hot water bag after completion of the treatment
- ❖ Observe the area for any redness
- ❖ Provide comfortable position to the patient
- ❖ Take all equipments to utility room
- ❖ Empty the hot water bag and hang it upside down to dry it
- ❖ Clean all articles with soap and water and replace it in the usual place
- ❖ When the bag is dry, fill it with air, cork it and keep it in its proper place

Recording and Reporting:

- ❖ Record the procedure with date, time, effect of application and complication due to procedure etc in nurses record
- ❖ Report to the ward sister about the treatment

Examples of hot applications

Sun Bath



Heating pads



Short wave diathermy



Unit 4



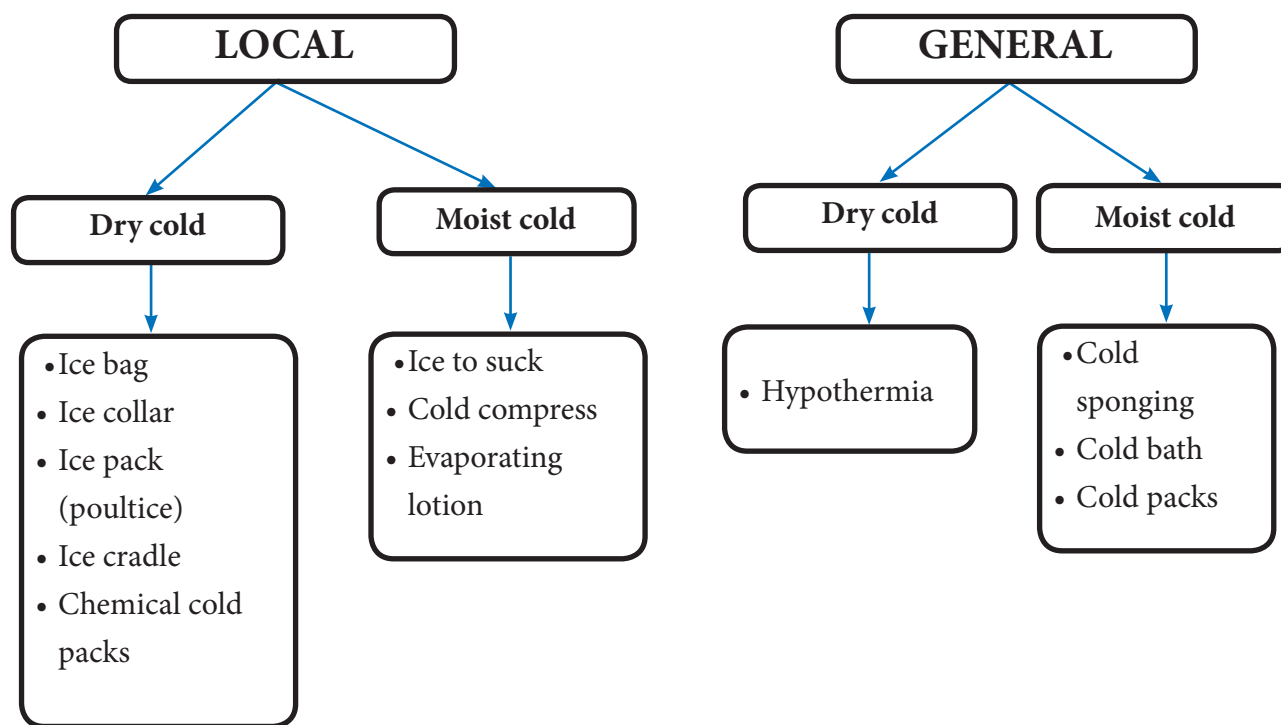
COLD APPLICATION

Definition:

Cold application is defined as stimulation of the skin and underlying tissues with cold for the purpose of decreasing pain, muscle spasms, or inflammation.

Classification of cold application:

CLASSIFICATION OF COLD APPLICATIONS



Purpose :

- ❖ To reduce pain and body temperature
- ❖ To anaesthetize an area
- ❖ To control hemorrhage
- ❖ To control the growth of bacteria
- ❖ To prevent gangrene
- ❖ To prevent edema
- ❖ To reduce inflammation

Local cold application

Ice cap (Dry cold)



Indications

- ❖ Fever
- ❖ Bleeding
- ❖ Allergy
- ❖ To reduce edema

Articles required:

- ❖ Ice cap with cover
- ❖ Ice in bowl
- ❖ Salt
- ❖ Teaspoon
- ❖ Duster to wipe ice cap
- ❖ Treatment mackintosh

Procedure:

1. Explain the procedure to the patient
2. Fill the ice bag with water, put in the stopper turn the bag, upside down to check for any leakage
3. Fill the bag half to two – third with crushed ice

4. Sprinkle salt (NaCl)
5. Keep the bag on a flat surface and squeeze out the air, presence of air will interfere with the thermal conductivity
6. Screw the cap tightly
7. Wipe outside of the bag and put on the cover



8. Apply the ice bag over the area.
9. Clean the area with a bath towel
10. Make client comfortable

After care of the patient and articles:

- ❖ Clean the equipment and replace it in the proper place
- ❖ Discard the crushed ice cubes
- ❖ Wash hands
- ❖ Document the care with date, time, site and duration of the application

Unit 5



MINOR WOUND DRESSING

Definition:

Wound is a cut or break in the continuity of the skin. Cotton or gauze pieces are used to clean the wound. The dressing of the wound with dressing materials is called wound dressing.

Types of dressing:



Dressings may vary by type of material and mode of application. They should be easy to apply comfortably and made up of materials that promote wound healing.



- ❖ **Gauze dressing:** are the commonest. Gauze is available in different textures and shapes e.g. square, rectangle and rolls of various lengths
- ❖ **Non antiseptic dressings:** are sterile unmedicated dressings applied to a fresh wound to protect it from infection
- ❖ **Antiseptic dressings:** are impregnated with some medication and is applied to wounds already infected to limit the septic process
- ❖ **Wet dressings:** are used in infected wounds to soften the discharge, promote drainage and also in wounds that require debridement. It is also used to supply heat to the tissues. Moist heat is more penetrating than dry heat. Therefore moist heat is more beneficial in localizing the infection in an area. For applying wet dressing the contact dressing layer is moistened to increase the gauze ability to collect exudates and wound debris and then apply a dry second layer





of absorbent dressing. This method of application will effectively clean the infected and necrotic wounds

- ❖ **Pressure dressings:** When there is danger of bleeding or when there is oozing from the wound, a pressure dressing may be applied. It is a thick sterile pad made up of gauze or gauze cellulose applied with a firm bandage, Elasto plasts or binder can be used
- ❖ **Non-adherent gauze dressing:** Such as TELFA are used to cover clean wounds. Telfa gauze has a shiny, non adherent surface that does not stick on incisions or wound opening but allows drainage to pass through the softened gauze above
- ❖ **Self adhesive transparent film:** It acts as a temporary second skin. It is ideal for small superficial wounds which do not require debridement

Purposes:

1. Protect the wounds from contamination with micro-organism
2. Promote healing by absorbing drainage and debriding a wound
3. Support the wound site as a splint
4. Prevents the client from visualizing the wound
5. Promotes thermal insulation to the wound surface
6. Maintenance of high humidity between the wound and dressing
7. Provides mental and physical comfort for the patient

Articles required:

A sterile tray containing

1. Artery forcep – 1
2. Dissecting forcep – 2
3. Scissors – 1
4. Sinus forcep – 1
5. Probe – 1
6. Small bowl – 1
7. Safety pin – 1
8. Gloves, masks and gowns
9. Cotton balls, gauze pieces, cotton pads etc as needed



10. Slit or dressing towels

Unsterile tray containing:

1. Cleaning solutions – if needed
2. Ointment and powders – as ordered
3. Vaseline gauze in sterile container
4. Ribbon gauze in sterile container
5. Swab sticks in sterile container
6. Transfer forceps in a sterile container
7. Bandages, binders, pins adhesive plaster and scissors

8. A large bowl with disinfect solution
9. Kidney tray and paper bag
10. Mackintosh and towel

Procedure:

1. Wear face mask
2. Wash hands thoroughly
3. Wear the gown and gloves
4. Open the sterile tray spread the sterile towel around the wound
5. Use a clean forcep and remove the dressing and discard it in the paper bag
6. Disinfect the forcep in the bowl of lotion
7. Note the type and the amount of drainage present
8. Ask the assistant to pour small amount of cleaning solution into the bowl
9. Clean the wound from the centre to the periphery and discard the used swabs after each stroke
10. Follow precautions, while drying the wound with dry cotton
11. Disinfect the used forceps in the bowl of lotion

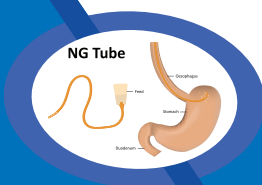


12. Apply medications if ordered
13. Apply sterile dressing, place the gauze pieces first then cotton on the dependent parts. Where the drainage may collect
14. Remove the gloves and put them into the bowl with lotion
15. Secure the dressing with bandages or adhesive tapes

After care of the patient:

1. Help the patient to dress up and to take a comfortable position in the bed. Change the bed garments if soiled with drainage
2. Replace the bed linens after dressing
3. Remove the mackintosh and towel
4. Take all articles to the utility room. Discard the soiled dressing into a closed bin and send it for incineration. Remove the instruments and other articles from the disinfectant solution and clean them thoroughly. Dry them, reset the tray and send for autoclaving. Replace all other articles in the proper place. Send the soiled linen to the laundry for washing
5. Wash hands
6. Record the procedure on the nurses record with date and time. Recording includes the condition of the wound and amount of drainage, condition of the sutures etc on the nurses record. Report to the surgeon any abnormalities found
7. Return to the bedside to assess the comfort of the patient and instruct the condition of the wound to the patient
8. Ensure the cleanliness of the patient and surrounding

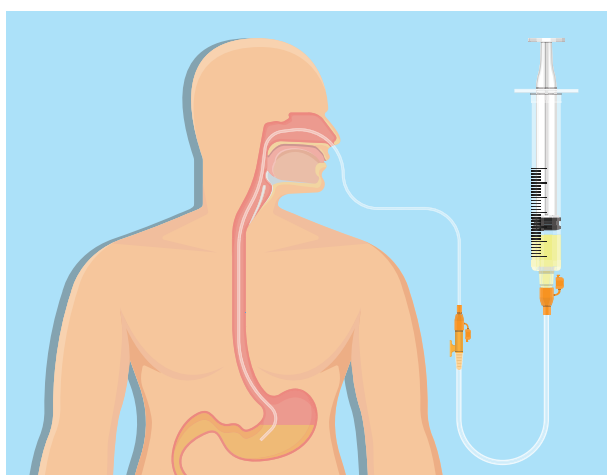
Unit 6



NASOGASTRIC TUBE FEEDING

Definition:

Naso-gastric tube or Ryle's Tube insertion of the plastic tube through the nose via the oesophagus into the stomach for administration of liquid foods is called Ryle's tube Feeding.



- ❖ Lubricating Jelly (or) paraffin
- ❖ Stethoscope
- ❖ Adhesive tape
- ❖ Kidney tray
- ❖ Tongue depressor
- ❖ Bowl of water
- ❖ Artery Forcep
- ❖ Towel
- ❖ Gauze pieces
- ❖ Flash light

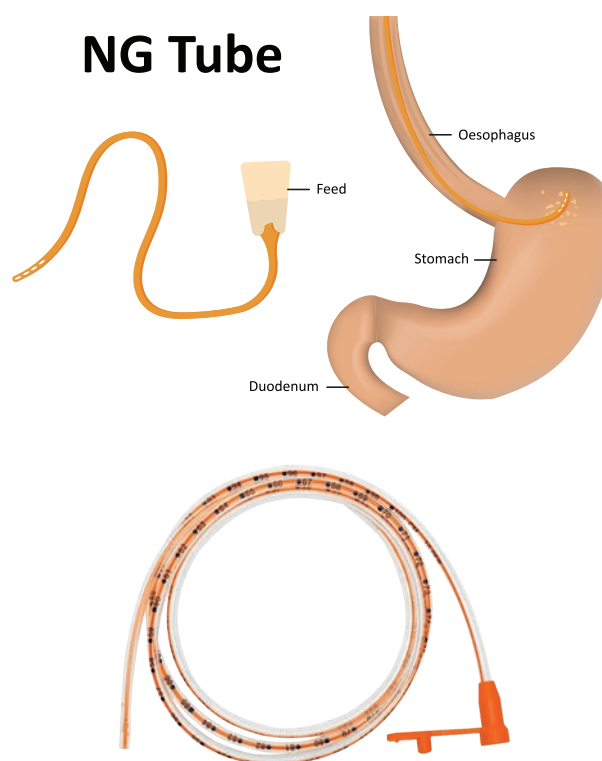
Purposes:

- ❖ Patient who refuses to eat incase of mental conditions like psychosis
- ❖ If patient has cleft palate, swelling in the throat and those who cannot swallow
- ❖ Oral infection or oral surgery
- ❖ Unconscious patient
- ❖ Pre-mature baby

Articles required:

- ❖ Naso-gastric Tube 14 to 16 fr
- ❖ Syringe – 10ml or 20 ml and 50 ml

NG Tube



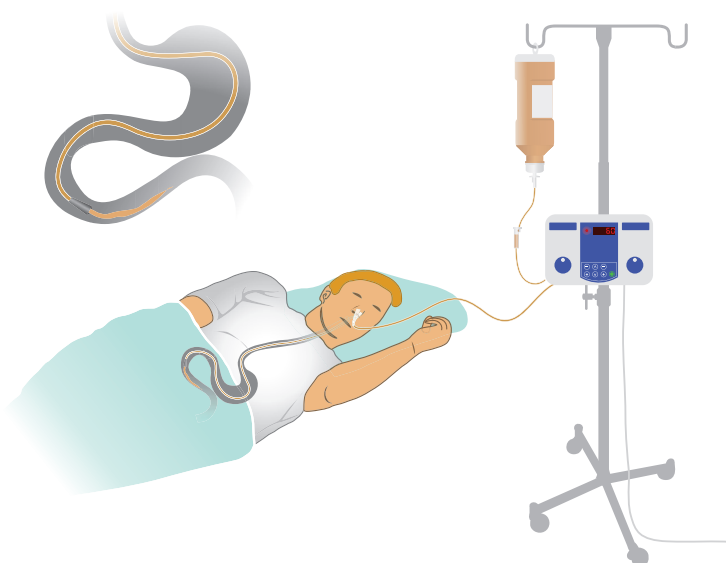
Procedure:

1. Wash hands
2. Explain the procedure to the patient, if patient is conscious
3. Provide privacy to the patient
4. Position the patient in cardiac position
5. Place the mackintosh and towel across the chest
6. Measure the length of the Ryle's tube from tip of the nose to ear lobe to xiphoid process (sternum) and mark with tape
7. Lubricate the Ryle's tube and insert through any nostril posteriorly to the throat
8. Encourage the patient to swallow by giving small sips of water if patient is conscious. For unconscious patient, nurse has to insert tube at the back of throat using tongue depressor
9. Keep the tip of the tube inside the bowl of water and watch for any air bubbles
10. Attach 10/20ml syringe to end of the tube and aspirate back on the syringe gently to obtain gastric juice
11. Push 5-10 ml of air while auscultating the stomach
12. Clean the Ryle's tube after confirming placement
13. Fix the tube with adhesive tape
14. Administer tube feeding, pinch the proximal end of the tube. Attach syringe to the end of the tube and elevate 45cms above head. Fill the syringe with liquid diet, allow to empty gradually
15. And pour water to wash off feed particles

After care of the patient and articles:

- ❖ Remove the mackintosh and towel and disinfect it with antiseptic solution
- ❖ Give comfortable position to the patient
- ❖ Replace the articles
- ❖ Wash hands
- ❖ Record the procedure with date and time
- ❖ Inform any reaction to the incharge sister

The feeding tube controlled by electronic pump passes through the nose, throat and oesophagus, continues through the stomach, and ends in the first section of the small intestine.



Unit 7



NUTRITION - THERAPEUTIC DIET

Introduction :

According to WHO, Health is a state of complete physical, mental, social well being and not merely an absence of disease or infirmity. To maintain good health ingesting a diet containing the essential nutrients in correct amount is very important.

Balanced diet is one, which contains the different types of foods in such quantities and proportion so that the need for calories, proteins, minerals, vitamins and other nutrients are adequately met in small proportion is made for extra nutrients to withstand duration of illness.

Factors:

1. Age
2. Sex
3. Physical work
4. Physiological stress
5. Pregnancy
6. Lactation

Five groups:

- ❖ Cereals, grains & products
- ❖ Pulses and legumes
- ❖ Milk and milk products
- ❖ Fruits and vegetables
- ❖ Fats and sugar



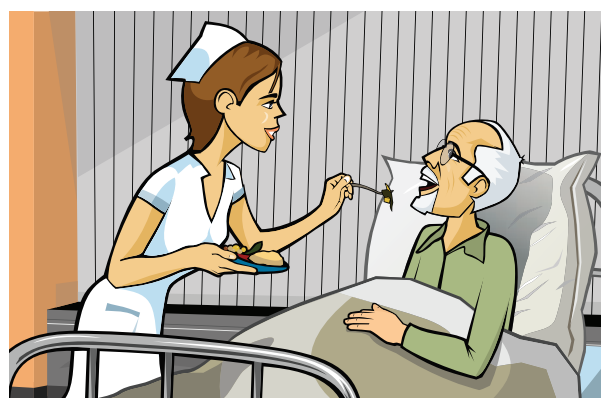
Points to keep in the mind while planning menu:

1. Energy derived from cereals should not be more than 75%
2. Whole grain cereals, parboiled grains or malted grains give higher nutritive value.
3. It is better to include 2 cereals like rice and wheat
4. Flour should not be sieved for chapatti as it will reduce bran content
5. One serving of cereal is 25g. A day's menu may require 2-4 servings
6. Minimum ratio of cereals, proteins should be 4% in terms of the grains it will be 8 parts of cereals and one part of pulses
7. One serving of pulse is 25g. 2 to 3 servings should be taken
8. One serving of vegetables is 75g Green leafy vegetables can be taken more than one serving, if fruit is not included in the diet

9. It is better to serve the fruit raw without much cooking or taking juice out of it. Everyday diet should contain at least one medium size fruit
10. There should be a minimum of milk 100ml/day, one to 2 glasses of milk or curd should be included in balanced diet
11. Energy derived from oils or fats is 15-20% of total calories and 5% from sugar and jaggery
12. One egg weighs around 40g of protein. This can be served along with cereal or pulses to improve the quality of protein. Instead of one serving of poultry/fish, one egg can also be included in the diet
13. Inclusion of salads not only help in meeting the vitamin requirements but the meals would be attractive and have high satiety value, due to the fiber content
14. Fried foods cannot be planned if oil allowance is less or in low caloric diets
15. One third of nutritional requirement atleast calories, protein should be met by lunch and dinner
16. If possible meals should be planned for seven days
17. Usually the number of meals would be four and for every young children and sick persons, the number of meals can be more
18. Ideally each meal should consist of all the 5 food groups
19. For quick calculations average value of calories and proteins from the same group can be taken

Principles of planning a meal:

- ❖ **Meeting nutritional requirement:** A good menu is one which will not only provide adequate calories, fat and protein but also minerals, vitamins essential for the physical wellbeing of each member of a family
- ❖ **Meal pattern must fulfill family needs:** A family meal should cater to the needs of the different members
- ❖ **Meal planning should save time and energy:** Planning of meals should be done in such a way, that the recipes should be simple nutrition. By using pressure cooker, time and energy can be saved
- ❖ **Economic consideration:** Any meals that do not satisfy the budget of the family, cannot be put into practice. The cost may be reduced by using the 1. Seasonal foods 2. Bulk purchasing 3. Substituting greens for fruits 4. Combinations of foods
- ❖ **Meal plan should give maximum nutrients:** Loss of nutrients delivering, procuring, cooking should be minimized. Sprouted grains, malted cereals, fermented foods enhanced nutritive value



- ❖ **Consideration for individual likes and dislikes:** Meal should be planned according to the individual preferences likes vegetarian



or non-vegetarian. If a person does not like particular greens, it can be tried in a different form or substituted by equally nourishing food

❖ **Planned meals should provide variety:**

If the meals are monotonous it is not consumed. Variety can be introduced in colour, texture and taste

❖ **Meals should give satiety:** Each meal should have some amount of fat, protein and fiber to get satiety. Meals should be planned in such a way that intervals between the meals is also considered

The word 'nutrition' comes from the word 'nourish' and it includes all the ways in which the foodstuffs we eat are absorbed by the body for the growth and development, energy and good health.

When a person does not eat the right nutrients in right quantity he or she is malnourished and we call this condition as malnutrititions.

Here is comparison of the effects on the people of good nutrition and malnutrition.

Good nutrition	Malnutrition
<ol style="list-style-type: none">1. Correct weight for height and age2. Strong muscles and straight limbs3. Smooth, clear skin and mucous membranes4. Healthy, bright eyes, clear sight5. Hearing well6. Breathing unobstructed7. Teeth well formed and free from dental caries8. Tonsils are normal and free from infection9. Erect posture in sitting, standing and walking10. Nerves steady, expression calm and cheerful, quick to learn11. They are energetic12. Good resistance to infections	<ol style="list-style-type: none">1. Increased /decreased weight and height not appropriate to age2. Weak muscles and bowlegs or knock-knees3. Dry skin4. Dull eyes, night blindness, poor sight5. Poor hearing capacity6. Mouth breathing and adenoids will be present7. Malocclusion of teeth, dental caries, spongy gums8. Tonsils are enlarged, often infected9. Abnormal gait, twisted spine, protruding abdomen10. Nervous, anxious, irritable, slow to learn11. Tired and restlessness12. Poor resistance to infections

Meal planning

- ❖ Meal planning can be defined as taking the time to plan nutritious meals for a specified time. To plan therapeutic meals, the groups and classes of foods must be put into consideration
- ❖ Meal planning is also the implementation of the principle of nutrition in one day diet in an appetizing manner



TIME	FOOD ITEMS	QUANTITY
6 am	Milk or coffee or tea without sugar	50 ml
8 am	Idli/idiyappam or Dosai/chappathi or Wheat Bread or Uppuma/pongal (with Sambar)	3 no 2 no 4 slices 1 cup
11 am	Butter milk/vegetable soup/lime juice (or) Fruit (small) (or) Veg salad	200 ml (1 cup) ½ plate
Lunch	Rice Chappathi Dhal Rasam with vegetable a group Butter milk	1 cup 2 1 cup 2 cups ½ cup
4 pm	Tea (or) coffee (or) milk Chundal Arraroot biscuit Bread Fruit	100 ml ¼ cup 2 No 2 slices (Small) -1
Dinner	Lunch menu or breakfast menu	
Before bed	Milk	100 ml
Oil for 1 day	Sunola/Suffola/Gingelly oil/refined oil	10-15 g (2½ – 3 tsp)
Non vegetarian	Egg 1 or 2 (white) Chicken/fish/mutton	50 g (without fat)

Vegetable

❖ **Group A:** Vegetables – 3-4 cups/day

Except root all vegetables.

❖ **Group B:** Beet root, carrot, drumstick leaves, beans, turnip, mango ginger, onion (small) Raddish (red) beans lady's finger etc.

Fruits (1 day)

❖ Pooran banana – ½ small

❖ Orange / apple / guava – 1 small

❖ Grape – 10 -20 nos

❖ Lemon /sweet orange – 1-2 No

❖ Pappaya – 4.5 small pieces



Foods to be excluded from diet:

- ❖ Sugar, honey, jaggery, sweet syrup and fried foods
- ❖ All roots
- ❖ Cool drinks
- ❖ Horlicks, Bournvita etc
- ❖ Coconut, coconut oil, palm oil
- ❖ Ground nut and all nuts
- ❖ Tinned food
- ❖ Alcohol
- ❖ Butter, ghee, cheese

Snacks to be eaten in between meals:

- ❖ Butter milk
- ❖ Vegetable soup
- ❖ Vegetable salad
- ❖ Lime/tomato juice without sugar

Hypertension: (High blood pressure)

This is a common condition in middle age. Especially in obese people. It can lead to complications such as heart disease, kidney disease and stroke.

To prevent and treat hypertension:

1. Over – weight people should lose weight
2. Low – fat, salt – free diet is needed.
3. Coffee and other stimulants should be avoided.
4. Tell the person to relax and avoid tension.

A dietary menu for hypertensive patients is as follows:

Morning	Weak Tea one Cup
Break fast	Bread or idli with sugar, or jam fruit one cup, skimmed milk one cup. Nuts one table spoon.
Mid morning	Fruit juice 200 ml
Lunch	Rice or chappati / one serving dhal or meat or fish, one cup vegetable, one serving skimmed butter milk or pudding one cup
Evening	Biscuits two and fruit juice one glass and roasted nuts two table spoons
Dinner	Similar to lunch

Diet

Definition: Diet is an important as medicine in the treatment of diseases. A modification in the diet or in the nutrients can cure certain diseases. E.g a patient suffering from peptic ulcer needs a bland diet for this recovery. A salt free diet can reduce the blood pressure in a patient with hypertension.

Types of Diet:

- ❖ Full diet
- ❖ Liquid diet
- ❖ Soft diet
- ❖ Semi solid diet
- ❖ Bland diet
- ❖ High protein diet
- ❖ Low protein diet
- ❖ Salt free diet or salt low diet

- ❖ Low fat diet
- ❖ Low residual diet
- ❖ Low calorie diet

(i) **Full diet:** For the patients who are well, a well – balanced full diet should be served, either vegetarian or non vegetarian as desired (e.g for tuberculosis patients)

(ii) **Liquid diet:** When no solid food is taken, a total of atleast 2000 ml per day. Milk is the basis of a good liquid diet. (e.g Fever patients)

(iii) **Soft and semi – solid diets:** The diet should be equally nutritious and balanced as a full diet. Foods may be minced or mashed to make them soft. (e.g patients in post – operative period)

(iv) **Bland diet:** This is a soft and easily digestive diet without spices and condiments. (e.g. Patients with gastro intestinal disorders)

(v) **High protein diet:** Mixed protein – rich foods like ground nut, grams and dhal may be ground and cooked with the staple cereal. About one litre of milk should be taken each day. (e.g. Burns and protein deficiency diseases).

(vi) **Low protein diet:** Carbohydrate foods with a little ghee or butter may be allowed and boiled sweets. (e.g. Patients with acute nephritis)

(vii) **Salt free diet or low salt diet:** For a salt free diet no salt is allowed in the preparation of foods. Sugar, lime juice may be added for giving taste. (e.g patients with oedema)

(viii) **Low fat diet:** Carbohydrates, vegetables and fruits are allowed no fat is used in cooking. (e.g. Patients with liver and gall bladder diseases)

(ix) **Low residual diet:** This is a diet without roughage or anything that stimulates the bowel.

(e.g. Patients with colitis and colostomy)

(x) **Low calorie diet:** Carbohydrates and fat are minimised to reduce the body weight. (e.g. Patients with obesity or heart diseases).

■ Special food preparations:

1. Vegetable soup:

In this recipe variety of vegetables are used to make it more healthy and tasty.

Ingredients:

ITEMS	AMOUNT
Chopped onion	2 table spoon
Minced garlic	2 table spoon
Chopped carrots	1/3 cup
Chopped cabbage	1/3 cup
Chopped beans	1/3 cup
Ground black pepper	¼ tea spoon
White corn flour	2 table spoon
Butter or oil	½ table spoon
Water	2 ½ cups
Salt	to taste

Preparation:

1. Chop all the vegetables in to small pieces
2. Add 2 table spoons of corn flour in a small bowl
3. Add 2 table spoons water and mix well
4. Heat ½ table spoon oil or butter in a large, heavy bottomed stock pot over medium flame. Add chopped onion and garlic
5. Sauté for 1-2 minutes
6. Add all vegetables
7. Stir and cook for 3-4 minutes

8. Add 2 ½ cups water, stir well and bring the mixture to boil and add salt
9. Add black pepper powder
10. Add corn starch – water mixture and stir continuously for a minute to prevent lump formation
11. Stir and cook until mixture turns thick and no raw smell of cornstarch. It will take around 7-8 minutes
12. Turn off the flame. Transfer hot soup of vegetables into individual serving bowls and serve

Purpose:

Get plenty of nutrients (vitamins and minerals) with low calories

2. Lemon whey water:

Whey is the liquid remaining after milk has been curdled and strained.

Purpose:

1. It provides more vitamins, minerals and proteins
2. It is beneficial for weight loss and lower cholesterol

Ingredients:

ITEMS	AMOUNT
Milk	1 litre
Lemon juice	25 ml
sugar	2 table spoon

Preparation:

1. Pour the milk into a large pot
2. Heat the milk to boil

3. Stir in 25ml of lemon juice
4. Let the solution rest in heat for 20 minutes
5. Transfer the curds and whey into a bowl topped with a lined strainer
6. Add sugar
7. Cool and serve

3. Tomato juice:

Tomato juice is a juice made from tomatoes, usually used as a beverage.

Purposes:

1. It has an anti oxidant property
2. It helps to regularise digestion
3. It helps to prevent blood clotting
4. Lowers cholesterol

Ingredience:

ITEMS	AMOUNT
Tomatoes	900 grams
Sugar	3 table spoon
Salt	to taste
Pepper	to taste

Preparation:

1. Rinse the tomatoes under running water
2. Slice the tomatoes
3. Use a stainless steel or porcelain pot rather than an aluminium one, aluminium will likely react with the acid in the tomatoes. Causing discolouring and possibly loses flavour
4. Use a potato masher or a wooden spoon to press the tomatoes releasing some of the juice

5. If the mixture seems too dry to boil, add a few cups of water until you have enough liquid in the pot to boil
6. Keep cooking until the mixture is ready
7. Add sugar and salt or other seasonings to flavour the tomato juice. The sweetness of the sugar helps cut back the acidity of the tomatoes
8. Remove the tomatoes from the stove and allow them to cool for a few minutes
9. Strain the solids from the juice using a strainer
10. Cover and chill the juice

4. Ragi porridge:

Ragi is an absolutely perfect supplement for any other grain because of its nutritional value.

It has high dietary fibre content a perfect choice for diabetic patients.

Purposes:

1. Provides high amount of dietary fibre
2. Ragi flour reduce the blood sugar level by activating insulin
3. Minimises appetite and induce weight loss

Ingredients:

ITEMS	AMOUNT
Ragi flour	1 cup
Finely chopped cashews	1 teaspoon
Milk	2 cups
Cardamom	2 (powdered)
Water	2 cups
Sugar	1 table spoon

Preparation:

1. Take a medium sized bowl and mix the ragi flour with milk and water. Make sure that there are no lumps in the mixture
2. Heat a pan over medium flame and pour the mixture in it. Keep stirring it continuously and cook until it gets a thick consistency
3. After the mixture turns thick, lower the flame and add sugar in it. Mix once and turn off the stove. Garnish with chopped cashews and serve hot. If the porridge has turned too thick you can add some more milk and cook for 2-3 minutes

5. Dhal rice:

Dhal and rice together are a complete vegetarian protein. The ghee not only enhances the flavour but also helps us absorb the nutrients from the dhal, rice, turmeric and cumin

1. Building muscle
2. Anti inflammatory and healing
3. Rich in antioxidants
4. Boosts metabolisms
5. Rich in nutrients & also helps absorb nutrients

Ingredients:

ITEMS	AMOUNT
Rice	1 cup
Toor dhal	¼ cup
Oil	1 tsp
Mustard	½ tsp
Cumin	½ tsp



Red chilli	5 nos
Curry leaves	Few
Asafoetida	1 pinch
Onion	1 no
Tomato	1 no
Water	2 ½ cups
Salt	to taste

Preparation:

Instructions:

1. Sock rice and dhal together for 30 min wash and keep it aside
2. Chop the onion, tomatoes and slit the red chillies

Cooking:

1. In a pressure cooker heat oil. When hot add mustard. When the mustard crackles add curry leaves, asafoetida, red chilli and chopped onion. Fry till onion turns golden brown
2. Add the tomato and cook till they are done
3. Add the rice, salt, water and allow it cook for 3 whistles

6. Vegetable sandwich:

Two slices of bread with a filling vegetable between them is called vegetable sandwich.

Purpose:

1. Rich in vitamins and minerals
2. A good energy yielding food
3. It is a nutritious and healthy food

Ingredients:

ITEMS	AMOUNT
Brown bread	10 slices
Tomato	1
Onion	1
Cucumber	1
Boiled beet root	1
Boiled potato	2
Butter	2 tsp
Chat masala	½ tsp
Salt	to taste

Preparation:

1. Peel and cut the vegetables into thin slices
2. Apply butter on the bread slices
3. Place 5 slices of all the veggies alternately
4. Sprinkle chat masala and salt on the veggies
5. Cover these with the remaining bread slices. Now toast the sandwiches
6. Remove when done and apply some butter on the top of the hot toast sandwiches

Unit 8



RESTRAINTS

RESTRAINT:

Restraint is defined as 'the intentional restriction of a person's voluntary movement or behavior.

Restraints are physical, chemical or environmental measures used to control the physical or behavioral activity of a person or a portion of his/her body.



- ❖ Should be able to quickly release the device
- ❖ Should be attached to bed frame not to side rails
- ❖ Should be removed a minimum of every 2 hrs
- ❖ Frequent circulations checks should be performed when extremity is used



Indications:

- ❖ Displaying behavior that is putting themselves at risk of harm
 - ❖ Requiring treatment by a legal order, for example, under the Mental Health Act 2007
 - ❖ Requiring urgent life-saving treatment
 - ❖ Needs to be maintained in secure settings
 - ❖ All alternatives must be tried before restraining
 - ❖ Offer bedpan or bathroom every 2 hours
 - ❖ Offer fluids and nourishment frequently, keep water within reach
 - ❖ Provide directional activity
 - ❖ Decrease stimuli and noise
 - ❖ Provide change of position, up to chair, ambulation
- ❖ Should be selected to reduce clients movement only as much as necessary
 - ❖ Nurse should carefully explain type of restraint and reason for its use
 - ❖ Should not interfere with treatment
 - ❖ Bony prominences should be padded before applying it
 - ❖ Should be changed when they become soiled or damp
 - ❖ Should be secured away from a clients reach

- ❖ Have patient wear glasses and/or hearing aides
- ❖ Activate bed alarm

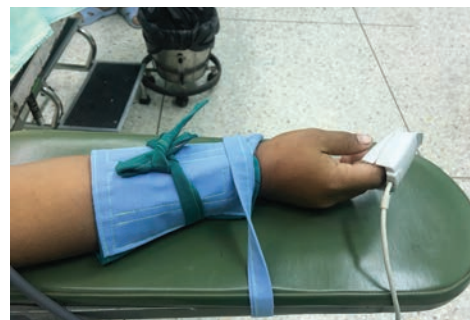


Alternatives :

- ❖ Increase observation

TYPES OF RESTRAINTS:

Definition: Physically that restrict a client's movement. E.g: table fixed to a chair or a bed rail that cannot be opened by the client.

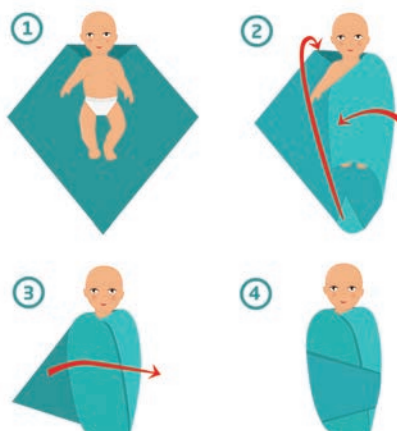


TYPES OF PHYSICAL RESTRAINTS

1. Mummy restraint
2. Elbow restraint
3. Extremity restraint
4. Abdominal restraint
5. Jacket restraint
6. Mitten or finger restraint

Mummy restraint

- ❖ It is a short-term type of restraint used on infants and small children during examinations and treatment of head and neck. It is used to immobilize the arms and legs of the child for a brief period of time



Elbow restraint

- ❖ This restraint is used to prevent flexion of the elbow and to hold the elbow in an extended position so that the infant cannot reach the face
- ❖ Plastic elbow restraint, elbow cuff and well padded wooden splint can also be used

Extremity restraint

- ❖ It is used to immobilize one or more extremities. One type of extremity restraint is clove-hitch restraint which is done with



gauze bandage strip (2 inches wide) making figure-of-eight and knot it

- ❖ The end of the gauze to be tied to the frame of the crib/bed
- ❖ This restraint should be used with padding of wrist or ankle
- ❖ Precautions to be taken to prevent tightening of the bandage



Abdominal restraint

- ❖ This restraint helps to hold the infant in a supine position on the Bed



Mitten or finger restraint

- ❖ Mitts are used for infants to prevent self-injury by hands in case of burns, facial injury or operations, eczema of the face or body
- ❖ Mitten can be made wrapping the child's hands in gauze or with a little bag putting over the baby's hand and tie it on at the wrist



Disadvantages;

Psychological/Emotional:

- ❖ Increased agitation & hostility
- ❖ Feelings of humiliation, loss of dignity
- ❖ Increased confusion
- ❖ Fear

Physical:

- ❖ Pressure ulcers, skin trauma
- ❖ Decreased muscle mass, tone, strength, endurance contractures, loss of balance, increased risk of falls
- ❖ Reduced heart and lung capacity
- ❖ Physical discomfort, increased pain
- ❖ Increased constipation, increased risk of fecal impaction
- ❖ Increased incontinence and urinary stasis
- ❖ Obstructed and restricted circulation

- ❖ Reduced appetite, Dehydration

- ❖ Death

Restraint guidelines:

- ❖ Doctors order
- ❖ Informed consent
- ❖ Follow proper technique
- ❖ Least restrictive



- ❖ Pad bony prominence
- ❖ Maintain Good body alignment

Restraint Orders

Situational

- ❖ Initiation of Restraints
(ALWAYS after alternatives tried)
- ❖ Renewing Order

Medical

- ❖ Obtain written or verbal order within 12 hours of initiation, physician assessment within 24 hours.
- ❖ Every 24 hours to be changed.

Behavioral

May apply in emergency, but get Doctor order within 1 hour.

Doctor must do face-to-face assessment within 1 hour of restraint initiation.

- ❖ 4 hrs for adults 18 yrs and above, 2 hrs for children 9-17 yrs of age, 1 hr for children below nine yrs

NURSES ROLE

Monitor a patient in restraint every 15 minutes for:

- ❖ Signs of injury
- ❖ Circulation and range of motion
- ❖ Comfort
- ❖ Readiness for discontinuation of restraint

Documentation in every 2 hours for:

- ❖ Release the patient, turn and position
- ❖ Institute a trial of restraint release
- ❖ Hydration and nutrition needs
- ❖ Elimination needs
- ❖ Comfort and repositioning needs

RESPONSIBILITIES OF THE NURSE

- ❖ Assess the patient's behaviour and the need for restraint & applies as a last resort
- ❖ Get written order and obtain consent as per hospital policy
- ❖ Must communicate with the client and family members
- ❖ Complies with institutional policies and guidelines for restraint

- ❖ Explain the client the reason for the restraint and cooperation
- ❖ Arrange adequate assistance from competent staff before carrying out the restraint procedure
- ❖ Apply the least restrictive, reasonable and appropriate devices
- ❖ Arrange the client under restraint in a place for easy, close and regular observation particular attention to his/her safety, comfort, dignity, privacy, physical and mental conditions
- ❖ Attend the client's biological and psychosocial needs during restraint at regular intervals
- ❖ Reviews the restraint regularly, or according to institutional policies
- ❖ Consider the earliest possible discontinuation of restraint
- ❖ Document the use of restraint for record and inspection purposes
- ❖ Explore interventions, practices and alternatives to minimize the use of restraint
- ❖ Nurse must maintain his/her competence in the appropriate and effective use of restraint through continuous education

Unit 9



HOME CARE MANAGEMENT

Home nursing is that component of continuum of comprehensive health care, where by health services are provided to individuals and familiar in their places of residence for the purpose of maintaining, promoting, restoring health to the maximum level of independence with minimal illness.



Concepts:

Client: is being a Rational, biological, emotional, social desiring to the use of home care services.

Family: The loved one and any other individuals present in the home, who is willing to participate in care providing to the client to maintain self **care at home**.

Professional nurse: Individual with license to practice professional nursing at state.

Quality of care: Care means standards for home health practice, certification, accreditative standards.

Self care capability: Ability to perform activities of daily living that permit the individual to live independent tautly at home.

Guidelines:

As much as possible you learn the culture of the patients with whom you work, so you will understand the cultural practices and values that influence their health care practices.

Provide culturally and linguistically competent assessment by understanding the meaning of language and non verbal behaviour of a patient's culture.

Be sensitive to the fact that the individual or family you are assessing has other priorities that are more important to them. These may include financial or legal problems. Do not provide financial or legal advice. But make sure to connect the patient to someone who will help them.

Purposes:

- ❖ To prevent disease
- ❖ To treat the patient
- ❖ To relief their suffering and make them comfort
- ❖ To support the patient, family
- ❖ To utilize and to adapt the home equipment
- ❖ To respect the families beliefs and ways of doing things as far as possible

Principles:

- ❖ Build a good rapport to family
- ❖ Collect information about the family size, occupation, education, religion, customs etc
- ❖ Identify the problems.
- ❖ Discuss the problems with the family members
- ❖ Guide them to carry out problems

1. Fever: When a person body temperature is too warm, he may have fever. Fever itself is not a sickness. However high fever can be dangerous, especially in a small child. The normal body temperature is 98.4° F or 37°C. More than 100°F is consider as fever.



Home management:

- ❖ Uncloth the patient, if it is an infant uncover the entire body
- ❖ Ventilate them with fresh air
- ❖ Apply cold compress wet sponge
- ❖ Provide lot of water or juices
- ❖ Administer tablet paracetamol according to the weight of the person

- ❖ Check temperature every half an hour
- ❖ If not reduced refer the child to health centre

2. Diarrhoea: When a person has loose or watery stools, it's known as diarrhoea. Lack of water in the body due to diarrhoea is called dehydration.

Signs of dehydration:

Thirst is often a first sign of dehydration

- ❖ Diminished urination
- ❖ Dark yellow urine
- ❖ Sudden weight loss
- ❖ Dry mouth
- ❖ Sunken eyes
- ❖ Loss of elasticity of the skin

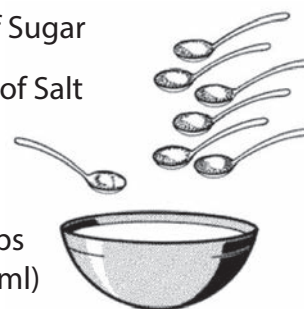
Home management:

- ❖ Give lots of liquids to drink and give rice porridge
- ❖ Food intake – as soon as the sick child or adult will accept food. Give frequent feeding of food what he/she likes and accepts
- ❖ For babies feed breast milk often

6 Level Tea Spoons of Sugar

Half Level Tea Spoon of Salt

1 Litre of Water- 5 Cups
(each cup about 200 ml)



- ❖ Give sips of ORS every 5 minutes
- ❖ Fluid requirements – For adults 3 litres of water per day, For child 1 litre per day



- ❖ Give boiled smashed potato and oatsmeal or well cooked food

3. Tooth ache:

- ❖ Remove the food particle and clean the teeth
- ❖ Rinse the mouth with warm salt water
- ❖ Garlic, clove oil, or Guava leaves can be used
- ❖ If the tooth infection (swelling, pus, large tender lymph nodes) is severe get dentist opinion

4. Constipation:

- ❖ A person who has hard stools and has not have a bowel movement for three or more days is said to be constipated causes

Causes:

- ❖ Poor fluid intake
- ❖ Poor fibre intake
- ❖ Less intake of fruits, green vegetables and green leaves.
- ❖ Lack of physical activity

Home Management:

- ❖ Drink more than 3 litres/day
- ❖ Eat more fruits and vegetables rich in natural fibre (whole grain, bread, carrots, raisin, nuts, pumpkin, wheat bran)
- ❖ Exercise
- ❖ Regularise bowel pattern

- 5. **Fits:-** A sudden violent jerking marked with loss consciousness is known as fits or convulsions

Causes:

- ❖ High fever
- ❖ Severe dehydration
- ❖ Meningitis
- ❖ Cerebral malaria

- ❖ Poisoning
- ❖ Epilepsy

Home Management:

- ❖ Try to keep the person from hurting himself
- ❖ Move away all hard or sharp objects
- ❖ Don't put any object in person's mouth while he is having fits (no food, drink, medicine or any object)
- ❖ After the fits the person may be dull or sleepy
- ❖ Loosen the garments around the neck
- ❖ Make sure he/she is well ventilated.

- 6. **Conjunctivitis:** Inflammation of the membrane covering the surface of the eye ball. It can be a result of infection or irritation of the eye. It also known as pink eye.

Home management:

- ❖ To relieve the discomfort give warm or cold compress. Apply moist wash cloth or hand towel on the closed eye lids three or four times a day
- ❖ Avoid contact lenses
- ❖ Rinse the eye with warm salt water
- ❖ Avoid rubbing the eye
- ❖ Avoid touching the uninfected eye

- 7. **Wheezing:** Breathe with a whistling or rattling sound in the chest as a result of obstruction is the air passages.

Causes:

- ❖ Allergies
- ❖ Infection
- ❖ Medications
- ❖ Asthma



- ❖ COPD
- ❖ Upper and lower respiratory diseases.

Home management:

- ❖ Drink enough fluids or coffee
- ❖ Get plenty of rest.
- ❖ Quit smoking
- ❖ Inhale moisture/steam inhalation
- ❖ Try pursed lip breathing
- ❖ Don't exercise in cold and dry weather
- ❖ Eat fruits and vegetable rich in vitamin A and vitamin C
- ❖ Keep them in fowlers' position (sitting forward supported by a table)
- ❖ Standing with supported bed
- ❖ Sleeping in a relaxed position
- ❖ Age 1 year and older use ½ -1 teaspoon honey as headed. Call the doctor if the patients is cyanosed or asphyxiated

8. Muscular cramps: A muscle cramp is an involuntarily and forcibly contracted muscle that does not relax

Causes:

- ❖ Injury
- ❖ Vigorous activity
- ❖ Rest cramps
- ❖ Dehydration
- ❖ Body fluid shift
- ❖ Low blood calcium or magnesium
- ❖ Low potassium

Home Management:

- ❖ Dry heat over the area - E.g. Hot water bottle, heated bran (or) application sand

- ❖ Food rich in minerals like calcium, potassium and magnesium
- ❖ Stop the activity and relax the muscle
- ❖ Massage the area gently
- ❖ Drink adequate fluid

Advantages of Home health care:

- ❖ Home health care offers many advantages to patients, particularly older adults.
- ❖ Patients recuperating from acute illness / accident recover faster in a home environment.
- ❖ Home can give an older adult a some of independence by offering an important measure of control over day to day events.
- ❖ Home care improves quality of care provided and increased patient satisfaction.
- ❖ Home care is of low cost.

Disadvantages of home health care:

- ❖ The person who is simply too ill or complex to be cared at hospitals.
- ❖ Home environment may be unsafe.
- ❖ There is shortage of home care providers (especially nurses).

REFERENCES

1. Park J.E & Park, Text Book of preventive and social medicine, Jabalpur, BB publishers, 1989 community
2. Brunner & Siddarth, Text book of Medical and Surgical Nursing J.B Lippincott. Co., Philadelphia, 2000

WEB LINKS

- <https://www.mdpi.com>
- <https://www.nchi.nlm.nih.gov>
- <https://www.msdmanuals.com>
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primi Gravid woman.**

**When your sister is suffering from chicken box What
type of preventive measures you will follow to product
your family from viral infection.**