**Paragraph 1: Discuss nursing informatics (NI) and the competencies required of NI.**

In today’s times, it is extremely important for the nursing staff to be proficient in the use of technology not only for the effective and efficient service provision. But also to maintain precision, reliability and validity of the interventions being implemented in a justified manner (Nagle et al. 2014). Competencies in information technology further allows the nurses to be more precise, save time and optimizes the service provision schemes. Based on my personal observations and experiences, two of the main functional areas that require critical application of information technology in healthcare institutes are:

1. Patient management i.e. patient record management, queuing, priority setting etc. A patient management system is an extremely important system for the healthcare institutes that is not only for the administrative purposes but also for the nursing use as well. This allows the nurses to review health history, prescription and testing overview and other related details with much more precision and efficiency as compared to paper-based filing system (McGonigle & Mastrian, 2014). This can also eliminate the chances of negligence by nurses; and allows better and more transparent audit and investigation of the staff progress and efficiency (Madsen et al. 2016).
2. Billing and registration of the patients to avoid redundancies, confusion payment procedures for the insured patients, etc. This will also involve saving time for the patients when they have to claim insurances, reimbursements, etc.

Nursing informatics is characterized as the claim to fame that incorporates the study of nursing with numerous information the executives and expository sciences. Its will probably recognize, characterize, oversee and convey information, information, learning and astuteness inside nursing work on, as indicated by the American Nursing Association. A definitive objective of nurse informaticists is to help the quality and security of patient focused consideration through actualizing and assessing electronic healthcare information. A coordinated effort over the controls of nursing and innovation has opened ways to new domains of patient consideration, streamlining everything in the healthcare procedure from electronic clinical documentation to sped up receipt of patient test outcomes. These procedures help medicinal faculty, yet additionally improve patient consideration and now and again even spares lives. The effect of this can't be downplayed. Seeing how to utilize and dissect information prompts the revelation of patterns that can be utilized to help basic leadership, regardless of whether this is assessing the physiologic status of a patient or the staffing needs of a unit.

**Paragraph 2: In your practice, what role do you play in NI and health information technology safety? Please share your experience(s) as a bedside nurse.**

* Basic Computer Competencies: I have grown up in the times when the technology was evolving. Furthermore, my interest in technology and related gadgets also evolved over the period of time. As a result, my basic computer competencies and skills are pretty strong and updated.
* Information Literacy Competencies: During my undergraduate and high school education, I have taken few computer courses that made me proficient in information literacy skills as well. This is the reason that I can quickly learn and adapt to any new technological advancements and implementations in various fields.

Information Management Competencies: This is the field for which I am quite knowledgeable. However, this is also an extremely technical field that requires a combination of competencies related to IT as well as the associated profession and scope. Therefore, I believe that whenever a new system is implemented, it is important to attend its orientation to better understand the processing of the system. Filling in as a nurse informaticist can be somewhat of a takeoff from the run of the mill bedside care typically connected with nurses. Nursing informatics expects nurses to likewise fill in as designers of correspondence and information innovations, notwithstanding functioning as teachers, scientists, programming engineers, approach engineers and that's just the beginning. Professions in nursing informatics incorporate various fluctuating obligations. The Health Information and Management Systems Society (HIMSS) led a nursing informatics workforce study, which uncovered that the three most conspicuous of these obligations are framework execution, streamlining and improvement. This implies nurses inside this strength should completely ace the electronic frameworks with which they work.

**Paragraph 1: What benefits and drawbacks do you see to smartphone use in health care settings and the use of medical apps?**

Health care frameworks are frequently exceptionally scattered, incorporating numerous areas, for example, facilities, inpatient wards, outpatient administrations, crisis divisions, working theaters, escalated care units, and labs (Mosa et al. 2012). Consequently, PORTALSs not just should be mobile themselves, they likewise should probably convey and team up with individuals in various locations (Mosa et al. 2012). Mobile gadgets fulfill this need by offering different methods for correspondence, including: voice and video calling; content, email, and multimedia informing; and video conferencing. Clinical correspondence apps are accessible for mobile gadgets that are explicitly intended to streamline correspondence among clinicians. Mobile gadgets have been demonstrated to improve contact among PORTALSs and their colleagues (Boulos et al. 2011). In one investigation, mobile gadgets were appeared to improve correspondence among specialists and nurses on inpatient wards (Boulos et al. 2011). In an overview of medical school PORTALSs and understudies, over 80% of respondents portrayed utilizing mobile gadgets to speak with associates about patient consideration by means of email, telephone, and content messages. They depicted messaging as a more productive methods for correspondence than telephone discussions or in-person meetings. Mobile gadgets likewise enable fast reaction to email, enabling clients to stay aware of communication. Texting or calling partners straightforwardly on their mobile gadgets, instead of paging them, has additionally been appeared to spare basic time in crisis cases. Mobile gadgets can likewise be utilized by PORTALSs to help long-separate patients by enabling them to content or send pictures in regards to issues or questions. Facebook itself has additionally allegedly been utilized to build up a "nondisclosed" gathering for conferences, discourses, and little addresses among infectious ailment authorities who are enlisted college professors. Such discussions can give an advantageous and effective methods for medical experts to quickly and productively share opinions. Chatting apps that permit content informing and picture trade can be utilized to exchange nitty gritty information during consultations. It ought to be noticed that Facebook, just as numerous other social media and visiting apps, isn't HIPAA consistent.

**Paragraph 2: Do you use a smartphone in your place of employment? If so, which smartphone functions do you use?**

The snappy compromise of mobile contraptions into clinical practice has, to a constrained degree, been driven by the rising openness and nature of medical programming applications, or "apps." Apps are modifying programs that have been made to continue running on a PC or mobile device to accomplish a specific reason. Quicker processors, improved memory, tinier batteries, and exceedingly compelling open-source working systems that perform complex limits have arranged for the headway of a flood of medical mobile contraption apps for both master and individual use. Numerous mobile apps are not expected to replace work zone applications, yet are planned to enhance them in order to give a benefit that can improve results at the motivation behind consideration. The use of medical apps has ended up being visit and wide; 70% of medical school PORTALSs and understudies uncovered using in any occasion one medical app routinely, with half using their most cherished app consistently.

**References**

Nagle, L. M., Crosby, K., Frisch, N., Borycki, E. M., Donelle, L., Hannah, K. J., ... & Shaben, T. (2014, July). Developing entry-to-practice nursing informatics competencies for registered nurses. In *Nursing Informatics* (pp. 356-363).

McGonigle, D., & Mastrian, K. (2014). *Nursing informatics and the foundation of knowledge*. Jones & Bartlett Publishers.

Madsen, I., Cummings, E., Borycki, E. M., & Lacroix, P. (2016). Developing a Framework for Teaching Nursing Informatics Internationally. In *Nursing Informatics* (pp. 783-785).

Mosa, A. S. M., Yoo, I., & Sheets, L. (2012). A systematic review of healthcare applications for smartphones. *BMC medical informatics and decision making*, *12*(1), 67.

Boulos, M. N. K., Wheeler, S., Tavares, C., & Jones, R. (2011). How smartphones are changing the face of mobile and participatory healthcare: an overview, with example from eCAALYX. *Bio medical engineering online*, *10*(1), 24.