Contemporary Nursing Practice- Essay

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# Evolution of Nursing Practice

In earlier centuries, Nursing was much different from formal medical knowledge. Everything about this profession was linked to the willingness of one individual to perform the job. In the very beginning of Nursing, it was considered a women’s job. These women were either trained by their mothers or by trained females already working in same positions. Nursing in the early days was not considered a respectable profession, and neither the females were extended that much respect. Nursing was just a formal extension of the caretaker role. Notwithstanding with all such taboos, Nursing today has drastically changed. Nurses went through extensive training before they take hold of any charge in hospitals or daycare centers. Nursing today is a diversified profession, with a level of prestige and respect associated with it. Lisa believes that Nursing is a formal branch of medicine today, whose essentiality could not be avoided in any manner (Chism 2017, 158). Contrary to earlier practices associated with Nursing, today, there are diversified training programs for nurses, there are better hospitals, and more importantly, Nurses have a sense of responsibility and commitment to their profession.

# Comparison of Differentiated Practice: Competencies of ADN and BSN

The American Nursing Association defines competency as the ability to converge knowledge, practicability, and judgment to perform a certain task (Chism 2017, 23). The competencies of ADN and BSN are not much different, but there exists some difference at various levels. ADN is more of the kind of technical nurse, whereas BSN is regarded as a professional nurse. ADN is trained over clinical skills, whereas BSN takes responsibility for nursing research, leadership, and management-level skills. ADN curriculum and practice is technical and task-oriented (Matthias and Kim-Godwin 2016, 36). The Nurses work over clinical skills with reference to Patient health conditions. At this stage, the standard for data collection and assisting in getting comprehensive data taught to ADN’s; they then make themselves trained to overwork in such manner. Their competencies are judged over the role of caregiver, counselor and educator. BSN’s competency is dependent on their ability of problem-solving, critical thinking, management and leadership. In the start of their career, the BSN’s take charge of the same role assigned to AND’s (Matthias and Kim-Godwin 2016, 41).

# Patient Care Situation to Describe Differences in Approach to Nursing Care

The patient acre scenario most relevant to observe the difference in approach to nursing care is about a patient in labor and delivery. The patient faced a slight increase in the blood pressure before pregnancy, but the patient avoided medication with maintaining her diet and by exercising. When she was admitted to the hospital, blood pressure-related medication was ordered. As she was shifted to labor, her blood pressure faced a slight increase. The ADN who attended the patient, read the orders and dispensed medication since she was trained to perform this. Contrary to this, a BSN enters the room, reads the previous prescriptions, ask the patient about is she feeling the pain or not, and will finally offer her the pain killers as it can also help in lowering the pain. So compared to AND, the BSN would avoid giving her extra medication to lower the blood pressure.

# Application of Evidence-Based Practice and RN-BSN Education in Nursing Care

Since the past two or three decades, the evidence-based practice (EBP) is expanded by integrating many different theories and practical approaches. Such models of EBP has helped educators and nursing practitioners to expand their knowledge about EBP (Matthias and Kim-Godwin 2016). The application of EBP is followed in the following manner

* It starts with the identification of problems
* Review and analysis of the research problem
* Evaluation of the need for change
* Consultation with the relevant stakeholders
* Implementation
* Evaluation of the outcomes

The academic preparation of the RN- BSN supports the application of EBP by implementing such models to standardize the reliability and assuring high-quality care for the patients. Nurses who take parts in the RN- BSN programs get the opportunity to sharpen their skills of research and acquire the management tools which can further their expertise. In order to practically manifest such changes, the Nurses should be able to converge the clinical expertise and integrate the nursing theories for clinical judgments. In performing all such they need to take care of the patient’s preferences.

# Communication and Collaboration with Interdisciplinary Teams to Support Patient Outcomes

The Nurses collaborate and communicate with interdisciplinary teams by allowing some groups of health care professionals to come together to debate over the patient care mechanisms. Such interdisciplinary communications serve many purposes and improve the quality of patient care by reducing hospital-related falls. Such intercommunication and collaboration increase the culture of safety and built among the stakeholders, a sense of mutual responsibility (Reeves et al. 2017, 48). Communication and collaboration with interdisciplinary teams support the outcome by improving patient safety and creating a safer health system. Such steps lead to many changes in patient care and health care system. For example, it provides the chance of interaction which improves the resource management in hospitals (Reeves et al. 2017, 56). It also helps in reducing the potential of error in treating patients. Studies suggest that collaboration and communication among nurses, on one hand, serves the purpose of regularizing the medical care requirements whereas on other hand it affects positively on the patients’ health. The increased practices of communication and practical manifestation ease the operations in health care centers and hospitals.

# References:

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