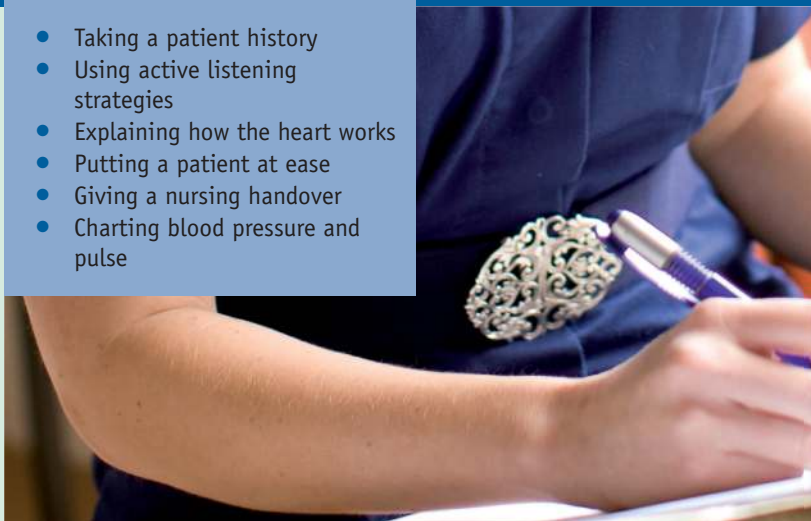


# UNIT 1

## Patient admissions

- Taking a patient history
- Using active listening strategies
- Explaining how the heart works
- Putting a patient at ease
- Giving a nursing handover
- Charting blood pressure and pulse



### Taking a patient history

**1 a** In pairs, look at the picture and discuss the following questions.

- 1 What do you think the nurse is doing?
- 2 What information might you need to collect in this situation?
- 3 Why might this information be important?
- 4 What strategies have you found useful when greeting a patient for the first time?

**b** ▶1.1 Shona, the Ward Nurse, is admitting Mrs Chad. Listen to the conversation and answer the following questions.

- 1 Is Mrs Chad mobile?
- 2 Has she been waiting long?
- 3 Which hospital unit is she being admitted to?

**c** ▶1.1 Listen again and put the following sentences in the correct order.

- ☐ How are you today?
- ☐ I'd like to ask you a few questions, if it's all right with you?
- ☐ Not too bad, thank you.
- ☐ Good morning, Shona.
- ☐ Yes, of course. That's fine.
- ☒ Good morning, Mrs Chad. My name's Shona. I'll be admitting you to the ward today.

**d** ▶1.2 Listen to the rest of the conversation between Shona and Mrs Chad and answer the following questions.

- 1 Why is Mrs Chad in hospital?
- 2 What happened to her last year?
- 3 Does she have any allergies?
- 4 Does she have a relative who can be contacted during an emergency?

**e ▶ 12** Listen again and match the questions (1–7) to the answers (a–g).

|  |   |
|--|---|
| 1 Can you tell me your full name, please?            | a Not that I know of.   |
| 2 Can you tell me why you're here today?             | b No, I'm very lucky. I never have.   |
| 3 Have you had any serious illnesses in the past?    | c It's my son, Jeremy. Jeremy Chad.   |
| 4 Have you ever had any operations?                  | d Yes, I had a mild heart attack last year.                                   |
| 5 Now, are you taking any medications at the moment? | e Well, I've got high blood pressure, and I'm here for some tests.            |
| 6 Do you have any allergies to medications?          | f Yes, my doctor put me on some blood pressure tablets after my heart attack. |
| 7 Can you tell me the name of your next of kin?      | g Yes, it's Doreen Mary Chad.   |

**f** In pairs, take turns to ask and answer the questions from Exercise 1e, using the following information and your own name and next of kin.

- I had my appendix out when I was fourteen.
- I take aspirin every day for my arthritis.
- I'm here for a chest X-ray.
- I had pneumonia two years ago.
- I'm allergic to nuts.

**g** In pairs, discuss how you might change your approach for the following patients.

- 1 An elderly patient who uses a walking aid
- 2 A young patient
- 3 A patient who has been waiting a long time

**Communication focus: using active listening strategies**

**2 a** In pairs, discuss the following questions.

- 1 What are active listening strategies?
- 2 Why do you think they are important?

**b** Complete the following active listening strategies using the words and phrases in the box.


eye contact   mm   nodding your head   hm   I see

- 1 Using expressions such as *Really?*, *Is that right?*, \_\_\_\_\_ and *Yes* or *No*.
- 2 Making 'listening noises' like \_\_\_\_\_ and \_\_\_\_\_ shows that you are interested in what the speaker is saying.
- 3 Leaning towards the other person and \_\_\_\_\_ also shows interest.
- 4 Smiling while maintaining \_\_\_\_\_ puts a patient at ease.

**c ▶ 12** Shona uses several active listening strategies whilst taking Mrs Chad's details. Listen again and find examples in the audioscript on page 94.

**d** In pairs, practise taking patient details. Student A, you are Shona; Student B, you are Mrs Chad. Remember to use active listening strategies. Swap roles and practise again.

- e** In pairs, prepare nurse–patient interviews. Student A, you are the nurse; look at the Patient Admission Form and think about the questions you will ask to complete it. Student B, you are the patient; read the patient details on page 86. Swap roles and practise again using the patient details on page 93.

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**PATIENT ADMISSION FORM**

(Patient Identification Label)

| Patient details       |  |
|-----------------------|--|
| Full name             |  |
| DOB                   |  |
| Reason for admission  |  |
| Past medical history  |  |
| Past surgical history |  |
| Medication            |  |
| Allergies             |  |
| Next of kin           |  |

Share your knowledge

- In small groups, discuss the following questions and then feed back your group’s ideas to the class.
- Is the process for taking a patient history the same in your country?
  - How has the introduction of privacy laws and Nursing Informatics changed the way patient information is recorded and used?
  - What do you know about Electronic Patient Records (EPR)?
  - Are you familiar with coding for improved patient identification?

## Medical focus: the heart

### Explaining how the heart works

**3 a** In pairs, answer the following questions.

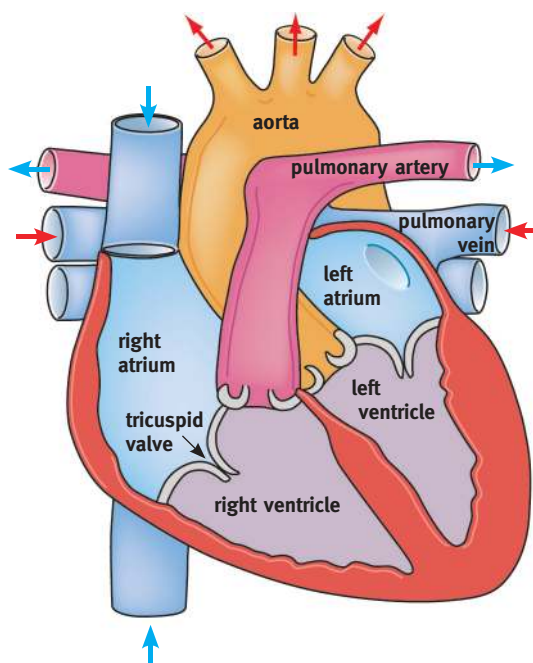
- 1 What is the cardiac cycle?
- 2 What does the heart do during a heartbeat?
- 3 What symptoms does a person have if there is not enough blood flow through the heart?
- 4 Why might nurses in the Cardiac Unit need to explain the cardiac cycle to their patients?

**b** Read the patient information leaflet. In pairs, discuss what the following parts of the heart do.

the atria   the valves   the ventricles   the pulmonary vein  
 the pulmonary artery   the aorta

### How does your heart work?

The blood enters the right atrium, one of the upper receiving chambers of the heart. Blood is pumped through the tricuspid valve into the right ventricle. The right and left ventricles are larger than the right and left atria because they are responsible for the pumping action of the heart. The right ventricle pumps de-oxygenated blood away from the heart through the T-shaped pulmonary artery. By the time blood arrives in the lungs the body has taken out most of the oxygen and made use of it for tissue function. In a healthy heart, the blood flows efficiently through the heart to the lungs, which re-oxygenate the blood and return it to the heart through the pulmonary vein. Oxygenated blood enters the heart through the left atrium and is pumped to the left ventricle. The left ventricle is encased in thicker cardiac muscle than the right side because it has to pump oxygenated blood around the entire body via the aorta, the largest artery of the body. The cardiac cycle relies on the efficiency of the four valves between the atria, the ventricles and the pulmonary blood vessels. These valves open to let in sufficient blood flow to fill each heart chamber and then shut to prevent the backflow of blood. Irregularities in blood flow because of blockages in the blood vessels can lead to heart disease.



**c** In pairs, practise explaining how the heart functions. Student A, you are a nurse; Student B, you are a patient. Swap roles and practise again.

Communication focus: putting a patient at ease

Before discussing important lifestyle changes with a patient, it is important to put the patient at ease. Sensitive topics can be broached more easily if the patient feels relaxed and comfortable.

- 4 a ▶1.3 Listen to a conversation between a Nurse Educator, Susanna, and her patient, Mr Hockings. What is the topic of their discussion and why is it important?
- b Susanna uses several informal expressions to create a friendly and relaxed relationship with the patient. Match the expressions from the dialogue (1–7) to their meanings (a–g).

|                          |                         |
|--------------------------|-------------------------|
| 1 have a chat            | a monitor               |
| 2 a bit of a shock       | b I'm going to sit down |
| 3 a bit flushed          | c ruddy/red complexion  |
| 4 watch for              | d take notice of        |
| 5 I'll just grab a chair | e discuss               |
| 6 fired up               | f enthusiastic          |
| 7 keep an eye on         | g unpleasant surprise   |

- c Complete the strategies for putting a patient at ease (1–4) using the words in the box. Then match them to the rationales (a–d).

judgemental   rapport   positive   same level

|   |  |
|---|--|
| 1 Sit at the _____ as the patient.                        | a This encourages patients in their attempts at learning new information.                    |
| 2 Make _____ responses whilst nodding your head.          | b This shows respect for the patient's right to make decisions about healthcare.             |
| 3 Don't make _____ comments.                              | c This can lighten the atmosphere and help patients relax.                                   |
| 4 Use humour to establish a good _____ with your patient. | d This helps patients feel that you are interested in talking to them rather than over them. |

- d ▶1.3 Listen again and find examples of the strategies in Exercise 4c in the audioscript on page 94.
- e In pairs, practise putting a patient at ease. Student A, you are Susanna; Student B, you are Mr Hockings. Remember to use active listening strategies. Swap roles and practise again.

Share your knowledge

In small groups, discuss the following questions and then feed back your group's ideas to the class.

- What strategies do you use for putting a patient at ease?
- What difficulties have you encountered with anxious patients?
- What role does cultural sensitivity play when putting a patient at ease?

## Charting and documentation: a nursing handover

Healthcare professionals write entries about patients in their care in the Patient Record. The Patient Record documents patient care and, as such, forms a permanent legal record of treatment. At the end of each nursing shift, the outgoing nurses give a verbal handover to nurses on the incoming shift. The nurses on the incoming shift are briefed on changes in patient progress and patient care. The handover is usually performed face-to-face but some institutions use recorded handovers. The information which is reported during the handover is gathered from the Patient Record, the Care Plan and any other charts which document specific patient care.

- 5 a** In pairs, discuss the following questions.
- 1 What do you think are the features of a good handover?
  - 2 What information does not have to be repeated in a handover? Why not?
  - 3 What can happen if handovers do not communicate important information from one shift to another?
- b** ▶ **1.4** Listen to Emily, a Ward Nurse, handing over a patient, Mrs Cho, and answer the following questions.
- 1 What is her present medical problem?
  - 2 What is her past medical history?
- c** ▶ **1.4** Listen again and mark the following statements True (T) or False (F).
- 1 She does not manage her ADLs at home by herself.
  - 2 She has been quite distressed.
  - 3 Her BP at 10 am was 200/105.
  - 4 Her pulse was 88 at 10 am.
  - 5 The porter has been booked for tomorrow.
- d** Abbreviations are often used in both Patient Records and verbal handovers. Some are only found in written documents. It is important to check which abbreviations are approved at the hospital where you are working, as there may be some variance.


Match the abbreviations (1–14) to their meanings (a–n).

|                   |   |
|-------------------|---|
| 1 BP              | a activities of daily living                    |
| 2 P               | b four times a day                              |
| 3 qds             | c Senior House Officer                          |
| 4 MI              | d electrocardiogram                             |
| 5 GTN             | e sublingual, or under the tongue               |
| 6 SHO             | f myocardial infarction, or heart attack        |
| 7 4°              | g blood pressure                                |
| 8 c/o             | h complain of                                   |
| 9 sl              | i observations                                  |
| 10 O <sub>2</sub> | j four hourly, or every four hours; also 4/24   |
| 11 ECG            | k patient                                       |
| 12 ADLs           | l glyceryl trinitrate; also called nitrolingual |
| 13 Pt             | m pulse   |
| 14 obs.           | n oxygen  |

**e ▶ 1.4 Listen again and complete the following extract using the abbreviations in Exercise 5d.**

Right, now Mrs Cho in bed number five. Mrs Cho was readmitted yesterday because of uncontrolled hypertension. You'll probably remember her from last week. She went home but couldn't manage her (1) ADLs by herself. Her daughter had to come in every morning to give her a shower and help her during the day. She's been quite distressed about it, according to her daughter. She presented to the unit with uncontrolled hypertension, despite a change in medication. She has a past history of (2) \_\_\_\_\_ this year in June. Um, this morning she complained of chest pain. The (3) \_\_\_\_\_ was called. Her (4) \_\_\_\_\_ at the time – er, that was 10 am – was two ten over one oh five, and her pulse was one hundred. She had an (5) \_\_\_\_\_ done and was given (6) \_\_\_\_\_ sublingually. We gave her some (7) \_\_\_\_\_ via the mask and she seemed to settle. She's in for cardiac catheterisation tomorrow to assess the extent of the damage to her heart. I've booked the porter already. Strict four hourly BP and pulse and report any chest pain immediately, of course. She's had no chest pain this shift.

**f A Patient Record contains entries from every member of the patient's team. As a nurse, you must read all entries in order to plan patient care efficiently. Another patient, Mrs Smits, is handed over. Use information from the Patient Record to complete what was said.**



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**PATIENT RECORD**

U/N: 732910  
Surname: Smits  
Given names: Livia  
DOB: 10.12.31    Sex: Female

| DATE & TIME            | Add signature, printed name, staff category, date and time to all entries<br>MAKE ALL NOTES CONCISE AND RELEVANT<br>Leave no gaps between entries  |
|------------------------|--|
| 18.5.2008<br>22.30hrs. | Mrs Smits c/o chest pain at 22.00hrs. SHO informed. O <sub>2</sub> administered via a mask. BP 220/100 P 120 at 22.00hrs. SHO ordered ECG, attended by nursing staff. GTN sl administered at 22.05hrs, chest pain relieved within 2 minutes.<br>J Keene (RN) KEENE |

Mrs Smits (1) complained of chest pain at (2) \_\_\_\_\_.  
The (3) \_\_\_\_\_ was informed. (4) \_\_\_\_\_ was administered via a mask. Her blood pressure was (5) \_\_\_\_\_ and her (6) \_\_\_\_\_ was (7) \_\_\_\_\_ at (8) \_\_\_\_\_. The (9) \_\_\_\_\_ ordered an (10) \_\_\_\_\_, which was done by nursing staff. GTN (11) \_\_\_\_\_ was given with good effect. The chest pain was relieved within a couple of minutes.



- g** ▶ **1.5** Listen to Nick handing over Mrs Smits and check your answers. In pairs, practise the handover using only the written Patient Record.
- h** In pairs, practise giving a handover using the Patient Record. Student A, look at the record on page 86; Student B, look at the record on page 93.

**Charting blood pressure and pulse**

*Mrs Small has been admitted with hypertension, which has been poorly managed at home. Her doctor decides to review the medication she is taking to control her high blood pressure. For the first day after admission, her blood pressure and pulse will be observed regularly. The admitting doctor has placed her on four hourly observations of blood pressure and pulse.*

- 6 a** In pairs, look at the chart on page 86 and discuss the following questions.
- 1 Are you familiar with this type of chart?
  - 2 What other styles of Observations Chart are you familiar with?
  - 3 Who has access to the chart?
  - 4 Who is responsible for completing the chart?
- b** ▶ **1.6** Jenny, the Ward Nurse, is handing over Mrs Small to the afternoon shift. Listen to the conversation and answer the following questions.
- 1 How long will Mrs Small be in hospital for?
  - 2 Why did Dr Fielding come to see her?
  - 3 What did Jenny do just before handover?
- c** ▶ **1.6** Some of the information in the Obs. Chart on page 86 is incorrect. Listen again and correct any mistakes.
- d** Blood pressure readings are spoken as the first number *on* or *over* the second. For example, 90/60 is *ninety over sixty* or *ninety on sixty*. How would you say the following blood pressure readings?
- 1 110/70            3 142/99
  - 2 150/90           4 86/40
- e** Look at Mrs Small’s handover in the audioscript on page 94 and find phrases describing changes in her pulse or blood pressure readings. What other phrases could you use? Add them to the table.

|          |           |          |
|----------|-----------|----------|
| ↑        | →         | ↓        |
| increase | stabilise | decrease |

- f** In pairs, practise handing over Mrs Small. Student A, you are Jenny; Student B, you are a nurse on the afternoon shift. Use the Obs. Chart on page 86, the audioscript on page 94 and the phrases in Exercise 6e. Swap roles and practise again.