

SER No	CONTENT
(a)	<p style="text-align: center;"><u>LESSON PLAN</u></p> <p style="text-align: center;"><u>LESSON PLAN : H 5</u></p> <p style="text-align: center;"><u>BASICS OF HOME NURSING</u></p> <p>Period - Three Type - Lec/Demo/Prac Code - H 5 Year - III (SD/SW)</p> <p><u>Training Aids</u> 1. Computer Slides, Pointer, Charts, Black Board and Chalk.</p> <p><u>Time Plan</u> 2. (a) Introduction - 05 Min (b) Qualities of a Nurse - 15 Min (c) Bandage & its Application - 15 Min (d) The Sick Room Preparation - 20 Min (e) Recording of Temperature and Pulse - 20 Min (f) Feeding a Helpless Patient - 20 Min (g) Medicines and their Administration - 20 Min (h) Conclusion - 05 Min</p> <p><u>INTRODUCTION</u> 3. Nursing plays a very important role in the recovery of a patient. While the doctors prescribe a course of treatment, it is the nurse who actually translates it into action. It is on the efficient nursing of the case that the whole success of the treatment depends. A large number of people have to be nursed at home either because their sickness is not severe or because on being discharged from hospital they recover at home. It is here that skill in home nursing comes in. A cadet trained in home nursing can be a great asset to a family</p> <p><u>AIM</u> 4. To make all the NCC cadets aware about the basics of Home Nursing.</p> <p><u>PREVIEW</u> 5. The class will be conducted in the following parts:- (a) Part I - Qualities of a Nurse. (b) Part II - Bandage & its Application. (c) Part III - The Sick Room Preparation. 242 (d) Part IV - Recording of Temperature and Pulse. (e) Part V - Feeding a Helpless Patient. (f) Part VI - Medicines and their Administration.</p> <p><u>PART I : QUALITIES OF A NURSE</u> 6. Definition. Home nursing can be defined as functioning of a nurse, in one's own home, taking</p>

care of the establishment and reducing the intensity and the frequency of sickness to the barest minimum. The meaning of the word-**Nurse** is:-

N - NOBILITY, KNOWLEDGE

U - USEFULNESS, UNDERSTANDING

R - RIGHTEOUSNESS, RESPONSIBILITY

S - SIMPLICITY, SYMPATHY

E - EFFICIENCY, EQUANIMITY

7. **Qualities of a Nurse.** A good nurse must possess the following qualities:-

(a) **Honesty and Truthfulness.** A nurse should be honest to her profession. She should confess her mistake whenever she makes any, and not risk the life of the patient by hiding it.

(b) **Sympathy and Understanding.** A good nurse should deal with the patient with understanding and sympathy. She should sympathetically appreciate the pain and suffering of the patient.

(c) **Cheerfulness, Gentleness and Willingness.** A cheerful nurse reduces the sufferings of the patients to half. Her gentleness reduces their pain and discomfort. Her willingness and eagerness to help is instrumental in making them bear their troubles with a smiling face. A warm smile may be more therapeutic than a dose of medicine.

(d) **Obedience and Discipline.** A nurse should have self discipline and should obey the orders of the doctor and carry them out without argument.

(e) **Observant.** A Nurse should observe the minutest details of the patient's condition. If there is the slightest change in the patient's condition, she should immediately report it to the Doctor. She should also observe whether the hospital equipment is functioning properly or not.

(f) **Tact and Sense of Humor.** A tactful nurse can deal easily with the patient who becomes irritable due to disease. Her sense of humor also helps her in bearing the hardships of her profession cheerfully.

(g) **Courage.** To be brave or not to be afraid. He should not be afraid of any situation in professional practice.

(h) **Team Spirit.** Spirit of team work is very essential for a nursing assistant as he is a vital link in the great chain of health work.

(b) **PART II : THE BANDAGE AND ITS APPLICATION**

8. **General.** Bandages are made of various materials and are of various lengths and width according to the part on which they are to be applied. These are:-

(a) Bandage for Finger - 1" wide

(b) Bandage for Head and Arm - 2 ½ —

- (c) Bandage for Trunk - 6ll
- (d) Bandage for Leg - 3 ½ —

9. **General Rules for Application.** The rules for application of bandage are:-

- (a) Face the causality.
- (b) Hold the head of the bandage in the right hand.
- (c) Apply the outer side of the free end to the part and where possible lock it in position by a superimposed turn.
- (d) Bandage firmly from below upwards and from within outwards over the front of the limb.
- (e) Apply the layer of the bandage so that it covers neither too tight nor too loose.
- (f) When completed secure the bandage by a safety pin.

10. **Method of Application.** There are three methods of applying the roller bandages :-

- (a) **The Simple Spiral.** This is only used when the part is of uniform thickness, for example, finger or wrist. The bandage is carried out in a spiral direction.
- (b) **The Reverse Spiral.** This is used in bandaging those parts of the limbs where there is varying thickness. This is made by a number of spiral turns in which the bandage is reversed downward upon itself at each circuit of the limb.
- (c) **The Figure of 8.** It is used for bandaging in the neighborhood of a joint such as knee or elbow. This is applied by passing the bandage obliquely round the limb alternately upward and downwards.

(c) **PART III : THE SICK ROOM PREPARATION,**

CLEANING AND VENTILATION

11. **General.** The sick room should be that room of the house, which is away from all noise and through which there is no passage. However, it should have a bathroom and lavatory close by. It should face South or South-West.

12. **Preparation.** A sick room should not have too many things. However, it should be comfortably furnished. There should be a comfortable bed, a bed side table, two chairs and one easy chair. A cupboard for keeping equipment should also be there. A wash basin with jug of water, soap, nail brush and towel must be arranged on a stool or a small table. If possible, a curtain stand may be arranged. A waste paper basket should be kept at a convenient place.

13. **Cleaning.** Dirt and dust are depressing to a sick person and retard his recovery. Moreover, these are the biggest source of illness as they harbor germs of various diseases. Hence, due importance should be given to the daily cleaning of the room. The following points should be kept in view :-

- (a) All cleaning work should be done without disturbing the patient after the toilet is over and the bed remade.
- (b) Light furniture should be removed before the room is swept and dusted. After dusting, each piece should be wiped with a weak solution of disinfectant and then polished with dry cloth.
- (c) Dusting should be done with damp cloth. The floor should be cleaned after scattering damp tea leaves so that dust does not rise.
- (d) At night, flowers should be removed from the vases and fresh flowers arranged in the morning.

14. **Lighting.** The light should not fall direct on the face of the patient. It should come from behind or the sides. There should be a shaded lamp on the side of the patient. There should be another shaded light for the nurse, so placed, that she can do her job without disturbing the patient. A well protected light can quite serve the purpose.

15. **Ventilation.** Ventilation means the availability of pure, fresh air in abundant quantity. It also means bringing inside a house or a place of work, plenty of sunlight. This is done through doors, windows and open spaces. Fresh air is essential for human existence. One of the important processes of living is, inhalation and exhalation. The dirty air exhaled by the breathing process is replaced by clean, fresh air inhaled by nostrils. The foul breath breathed out gets mixed up with fresh air and is to be separated so that air is available for the breathing process to continue.

(d) **PART IV : TAKING / RECORDING OF PULSE AND TEMPERATURE**

Pulse

16. The patient's quick recovery depends very much on the efficient routine care by the nurse. Daily routine should be planned according to the patient's habits and followed regularly unless some sudden change in the patient's condition requires some adjustment. The pulse is the heart beat and is most commonly felt at the radial on the point of the wrist. The average pulse rate is 72 beats per minute. In case of infants, it is 100 to 140 beats per minute and in case of children it is 90 to 100 beats per minute.

17. **Taking Pulse.** The rate or the pulse changes with the change in emotions and while doing exercise. To count pulse, the patient should be made to sit down in bed. The arm must be relaxed and in a prone position. To take pulse, the tips of the first three fingers should be laid down on the radial artery at the base of the palm. The index finger should be nearest to the palm of the patient's hand. The thumb should be placed at the second's hand in your watch. The result should be immediately entered in the pulse column of the TPR Chart.

Temperature

18. The normal temperature of a man is between 97 and 99 degrees F. There are slight $\frac{1}{2}$ F variations between the daily temperature in the morning and evening. The lowest temperature is between 2AM and 4AM.

19. **Measuring Temperature.** It is important to know how to measure temperature. The body temperature is taken by the clinical thermometer which is a device consisting mercury band. The range of the thermometer is 95 F to 110 F. The degrees are indicated by black lines. A figure is written after every 5. An arrow indicates the normal level of level of temperature *i.e.* 98.4 F.

(a) Normal temperature by mouth is 98.4 F or 37 C.

(b) By axilla or groin it is 1 F lower than by mouth.

(c) By rectum, it is 1 F higher than by mouth.

(d) Fahrenheit is changed to centigrade by the formula. $F - 32 \times \frac{5}{9} = C$.

20. **Method.** Keep the bulb of the thermometer pressed under the armpit or beneath the tongue or in the groin for 2 minutes. Take the reading and record in the Temperature column of the TPR Chart.

21. **Recording of TPR Chart.** The TPR Chart is a morning and evening record of the patient's temperature, pulse and respiration with some other details such as the number of times the patient had motions and the amount of urine passed. This helps the doctor in learning about the latest condition of the patient at one glance.

22. **Fever.** Whenever there is an inroad of disease germs in the body, due to some infection, it raises its temperature to put up a fight against the invasion. The state of more than normal temperature is called Fever.

23. The normal temperature of the body is 97° F to 99° F. The temperature above 99° causes pain, restlessness, headache and body ache. Moderate temperature from 99° F to 103° F is called PYearxia. High temperature from 103° F to 105° F is called High PYearxia. Very high temperature over 105° F is called Hyper-PYearxia. Fever may be :-

(a) **Constant.** In this the temperature remains the same all the 24 hours as in pneumonia and scarlet fever.

(b) **Intermittent.** The temperature rises very high and falls very low. It appears when there is severe infection.

(e) PART V : FEEDING A HELPLESS PATIENT

24. While feeding a helpless patient, the bed and the table should be properly and neatly arranged. The nurse should give full attention to the patient so that patient does not feel that he/she is being hurried through a meal.

(a) **Feeding a Patient on Fluid Diet.** The mouth of the patient should be washed and wiped. If the patient can sit up, the fluid can be given in a cup or in a glass. If the patient wants to take fruit juice

with a straw he/she should be given that. But it should be ensured that the straw is absolutely clean. If the patient cannot sit up, he/she should be fed with a feeding cup or a feeder. The bed clothes should be protected by placing a clean napkin beneath the patient's mouth. The nurse should place her left arm, under the first pillow to raise the patient's head slightly. The flow of the fluid should be regulated so that too much of it does not flow into the patient's mouth. One mouthful should be done with a tea spoon also. In case of jaw injuries, a small rubber tube is attached to the spout of the feeding cup and then put between the teeth. The patient should be given small quantity to swallow at one time. After feeding the patient, lips should be wiped with a clean towel.

(b) **Feeding with Solid Food.** Food should be served in an attractive manner arranged attractively on a side table. One dish should be brought at one time. The food should be served hot. It should be put in a plate in the kitchen before bringing to the patient. Patient should be fed with a spoon. As soon as food is finished the plate should be removed.

(f) **PART VI : MEDICINES AND THEIR ADMINISTRATION**

25. A Nurse has to take great care with medicines. She should fully understand the doctor's prescription and keep the medicines well labeled and properly stored. There should be three separate shelves of a cupboard, one for lotion, one for medicines and the third one for poisons.

26. **Administering Medicines.** Proper administration of medicines is most important, as on it depends, the very life of the patient. Hence, if there be any doubt the doctor should be asked to clear it. The following points should be kept in mind while giving medicines:-

(a) **While Giving Liquid Medicines.**

(i) Check the label with the prescription. If handling a new medicine read the instructions carefully. Shake the medicine well.

(ii) Put your thumb near the correct marking of dosage on the medicine glass. Hold the glass in level with the medicine bottle. Pour away from the label so that it does not become illegible. Replace the cork immediately.

(iii) Read the instructions once again before actually giving the medicine to the patient.

(iv) Take the medicine on a tray with a glass of water and spoon in case the medicine requires stiffing. If the medicine has a bitter taste, give the patient some sweet drink.

(v) Never pour back any unused medicine, throw it away.

(b) **Other Medicines.**

(i) In case of pills, tablets, capsules and powder, remember that a pill has a sugar coating and a capsule has a gelatin coating and hence can be easily swallowed with water. Tablets if not swallowed by the patient may be crushed and put on the back of the tongue for swallowing. Powder must be poured at the back of the patient's tongue and water poured in his mouth.

(ii) Iron mixture should be given with straws so that the teeth are not stained. If the patient is not too weak, he/she should be asked to clean his/her teeth.

CONCLUSION

27. Home nursing is a common household practice prevalent in the society. NCC cadets can be of tremendous assistance at their homes or neighborhood whenever such the need arises for extending assistance to our relations and friends during sickness or injury. Knowledge of this subject is essential for cadets to be of assistance to other cadets during camps and adventure activities as also to victims during disaster management.