



Theoretical Perspectives of Nursing Education

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Abstract. Nursing theory is defined as "the creative and rigorous structure of ideas that present a temporal, purposeful, and systematic view of events." Through proper investigation, nurses can develop knowledge related to research or practice, improving the care of nurses. Nursing ethics are the functions of the field of nursing. It is a branch of the handling application protocol. Nursing ethics with medical ethics share multiple policies, namely respect for good, harmlessness and autonomy. The importance of relationships, by human dignity and collective care this can be distinguished. The nature of the nurse is to examine the ethics of care rather than the "cure" of nursing ethics by examining the day-to-day interactions between the nurse and the person in care. Preliminary work to define protocols in nursing. Rather than focusing on the nurse's behavior in relation to the person in nurse care, historically involving loyalty to the physician. Focused more on the virtues of making a good nurse. In recent times, nurse ethics has come to respect the human rights and dignity of the patient has further shifted towards the duty of nurse, this is reflected in many professional codes for nurses. For example, the latest code of the International Council.

Keywords: Nursing, Nursing Theory, Nursing Education, Nursing Practice.

1. Introduction

Nursing is the protection of health, skills, and promotion; Disease and injury prevention; Alleviating suffering through the detection and treatment of human responses; Advocating for health care for individuals, families, communities and people. Professional introduction reveals the nurse's responsibility to the patient. It increases the visibility of the nurse's knowledge and expertise, helps to highlight the responsibilities of nurses and the purpose of nursing training, which are often not well understood by the general public. Nursing involves improving health, preventing disease and caring for the sick, disabled and dying. Advocacy, improving the safe environment, research, Participate in health policy making and management, education of patient, health systems are key medical roles. A nurse is a patient caregiver and assists in managing physical needs, preventing disease and treating health conditions. To do this, they need to monitor and monitor the patient and record any relevant information to assist in making treatment decisions. Our compassion, Honesty, daringness, trustworthiness, emotional stability, empathy and compassion these are all part of being human on an individual level, and serve us as nurses. Demonstrate strong communication skills enable patients and co-workers to communicate, sometimes during their worst life moments. Medical science has come a long way in allowing patients to live longer. Nurses are just as important to patients as they are to physicians in the medical process. Nurses provide physician recommendations to improve the health of their patients. Nurses do not acquire their exceptional skills overnight; At the Nursing School they work hard and their patients learn the latest medical information to deal with their health issues.

2. Nursing

The development of nurse knowledge and interventions involves understanding human responses and needs, and the human response to belief has also been identified as a concept of Donficanhan, the purpose of which is to review the definitions and contextual application of the word 'hope'. Answer the ideological question 'What is the literature of faith, theology, philosophy, psychology and nursing have been reviewed for contextual use of the word 'faith'. In addition to the meaning of life, the precursors, attributes and effects of faith have been identified from the literatures that help to understand the concept clearly. [1] The nurse is a caregiver. Concern involves empathy and contact with people. Teaching and modeling Nursing is a curriculum challenge. Including the five core values of professional nursing Care is best demonstrated by the ability of a nurse. The core nursing values required for undergraduate education are human dignity, Includes integrity, autonomy, virtue and social justice. Concerned professional nurse integrates these values into clinical practice. [2] Swenson attributed this change in the doctor-nurse relationship. Brought about three major changes in the negotiation environment, this can directly affect patient care outcomes provided 'space' for nurses to explain organizational rules. First, the prevalence of chronic diseases has changed he argues from preventing death to shifting emphasis on living. Introduces the social dimension of health care. According to Swenson, by focusing 'community' on holistic care Nurses are empowered to contribute to patient management. Second, Swenson says change assignment to group nursing has transformed the nurse-physician relationship. Group-nursing facilitates an intimate nurse-patient relationship, because nurses are responsible for fewer patients. Furthermore, the nurse's knowledge of the patient is not passed on in a two-step process by the ward sister, but is given directly to the doctor. Third, the introduction of multiple wards in the sitting round. Physicians and nurses can discuss their patients before the 'walking' round Swenson argues that provides a forum with nurses talking to the doctor and influencing patient management decisions. [3] The focus of the original study was the professionalism of the nurses. Passed

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Foundations of Clinical Nurse Specialist Practice Janet S. Fulton, Brenda L. Lyon, Kelly A. Goudreau, 2009-10-16 Designated a Doody's Core Title This comprehensive book addresses pertinent issues for clinical nurse specialists from clinical interventions to nursing care delivery and nursing leadership This is a wonderful addition to the field of nursing Score 100 5 stars Doody's *Foundations of Clinical Nurse Specialist Practice* serves as a comprehensive textbook and practice reference for graduate

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latest perspectives on clinical judgment evidence based practice and situation specific theories accompanied by engaging resources that give students the confidence to apply concepts to their own practice

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Theoretical Nursing Afaf Ibrahim Meleis, 2011 An additional assumption was that the processes for theory development were new to nursing and hence nurses in graduate programs learned strategies for advancing knowledge from other disciplines This assumption was debunked with the knowledge that nurses were always engaged in knowledge development driven by their experiences in clinical practice Because of these assumptions most of the early writing about theory development was about outlining strategies that should be used rather than strategies that have already been used in the discipline to develop theories Theorists themselves did not uncover or adequately discuss ways by which they developed their theories therefore the tendency was to describe processes that were based on theories developed in other disciplines mainly the physical and social sciences And an implicit assumption was made that there should be a single strategy for theory development some claiming to begin the process from practice and others believing it should be driven by research Provided by publisher

Middle Range Theory for Nursing Mary Jane Smith, Patricia R. Liehr, Roger D. Carpenter, 2023-01-25 Three time recipient of the AJN Book of the Year Award The completely revised fifth edition of this

authoritative text encompasses the most current middle range theories for graduate nursing students and researchers User friendly and consistently organized it helps readers to understand the connection of research to larger conceptual models in nursing The fifth edition presents three new theories a revised chapter on concept building two published examples demonstrating the concept building process and a new section on the application of middle range theory that addresses its use for practice and education Additional new features include the fresh perspectives of a third editor a two color design to enhance readability and discussion questions concluding each chapter The text describes sixteen middle range theories and elaborates on disciplinary perspectives providing an organizing framework and evaluating the theory Each theory is consistently organized by purpose historical development primary concepts the relationships among concepts and its use in nursing practice and research Understanding of concepts is enhanced by the book s use of the ladder of abstraction for each theory to explain its relationship to philosophical conceptual and empirical theory dimensions New to the Fifth Edition Includes three new theories Inner Strength Unitary Caring and Nature Immersion for a total of 16 theories A completely new section on application of theory to practice New chapter on application of middle range theory to education Extensively revised chapter on building concepts for research Two color design to enhance readability Discussion questions at the end of each chapter to promote class dialogue Nine practice examples relating to application of middle range theory The expertise of a new editor Key Features Delivers theories in consistent format to facilitate comparisons Presents published exemplars demonstrating concept building User friendly and consistently organized Summarizes middle range theories developed between 1988 and 2020

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Planned Change Theories for Nursing Constance Rimmer Tiffany, Louette R. Johnson Lutjens, 1997-12-05 In a groundbreaking publication Constance Rimmer Tiffany and Louette R Johnson Lutjens present a foundation for nurses understanding of planned change Planned Change Theories for Nursing contains overviews of three widely accepted change theories and a new systems oriented planned change theory and shows the implications of these theories for nursing practice The first section of this book offers a thoughtful overview of the issues involved in the use of planned change theories beginning with the rationale for studying planned change theories and important points to

consider in choosing among them The authors then explore the role of power in change and discuss moral and ethical questions involved in planned change The final chapter in this section addresses the diagnostic process innovations as solutions and the evaluation of planned change Chapter 9 serves as a transition in which the authors reflect on the implications of planned change in a representative nursing model the well known Roy Adaptation Model This chapter also provides a nursing orientation for Part II in which the authors examine in turn Lewin s micro theories Bennis Benne and Chin s planned change writings the Rogers Diffusion Model and Bhola s Configurations Model For each of these theories or models the authors present an overview an analysis and critique and a discussion entitled Altering the Peg in which the theories are individually viewed in light of the key concepts in the Roy Adaptation Model The book concludes with a discussion of the theoretical underpinnings for carrying out planned change research and incorporating research findings in nursing practice In addition the appendixes provide a wealth of source information for the theories discussed Planned Change Theories for Nursing makes a significant contribution to the nursing literature and will be welcomed by scholars advanced practitioners and students in nursing administration theory and research

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