

SAULT COLLEGE NURSING ASSISTANT PROGRAMME

RNA 103

UNIT 2: ACTIVITY AND REST

Part A: Activity

Part B: Rest

SEPTEMBER 1993

OBJECTIVES

REFERENCES

Part A: Activity

1. Discuss fitness as a discipline **and** its role for individuals through the lifespan.

Kozier, Erb & Olivieri:

Ch, 19, p. 426-427

Ch, 25, p. 603-604,

605-607,

p. 614, 621,

625-626,

628, 632

Ch. 26, p. 643

p. 652-654, 656

660-661

Ch. 27, p, 667,

677-678,

2. Identify the risks associated with lack of exercise:

- musculoskeletal, cardiovascular, respiratory, metabolic and nutritional, urinary and endocrine, elimination, integumentary, neurosensory, psychosocial

Kozier, Erb & Olivieri:

p. 843-848

3. Define isometric & isotonic.

Kozier, Erb & Olivieri:

p. 866

4. Define body mechanics and the reasons for using correct body mechanics.

Kozier, Erb St Olivieri:

p. 883, 893-895

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Identify and describe responses that indicate an individual's activity patterns through the lifespan.

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|---|---|
| a) Mobility | Filmstrip #60: Human Development: The First 2.5 Years
Filmstrip: Physical Growth & Development |
| i) How does the individual ambulate (gait)? | |
| ii) Is there a method of assistance (cane, walker, tripod, wheelchair)? | |
| iii) What level of assistance is required? | |
| iv) What are the developmental variations (reflexes, fine & gross motor skills)? | |
| v) Is the individual able to perform/tolerate Activities of Daily Living (ADL's)? | Kozier, Erb & Olivieri:
p. 861-863

p. 883, 886-891 |
| b) Body Mechanics | Filmstrip #238: Body Mechanics |
| c) Body Alignment (posture) | p. 883, 894-897 |
| i) standing, lying, sitting | Review Lab on Body Mechanics & Alignment |
| ii) development variations | |
| d) Range of Motion (joint mobility, size & function) | p. 840-841,
851-858 |
| i) adaptive R.O.M. for each joint, active, passive | Filmstrip #40: ROM Exercises |
| e) Muscle Masses, Tone & Strength | p. 426-427
p. 652 |
| f) Heart - Lung Capacity | p. 652-653 |
| g) Exercise Programme | |
| i) frequency, duration | |
| ii) type (isometric, isotonic) | |
| iii) endurance | |
| h) Diversional Activities | |
| i) usual hobbies or activities | |
| ii) complaints of boredom | |
| iii) daytime sleeping, insomnia | |
| iv) expressed wish for activity | |

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6. Discuss factors (stimuli) affecting an individual's adaptation in Activity.

Kozier, Erb & Olivieri,
p. 891-893

a) Internal Stimuli

- i) nutritional intake vs. energy expenditure
- ii) hydration
- iii) ability to eat
- iv) incontinence of bowel and bladder
- v) elimination needs
- vi) hyper-hypo thermia
- vii) regulation of senses, ability to think, balance, vision
- viii) amount of pain or discomfort
- ix) use of safety devices/aids
- x) age, sex, developmental stage
- xi) psychological conditions (eg: mood, attitude, emotional state, anxiety, motivation, habit
- xii) role expectation
 - female
 - male

b) External

- i) economics/financial situation
- ii) culture
- iii) religion
- iv) education, knowledge
- v) technology
- vi) family structure & support
- vii) community
- viii) health care delivery system
- ix) environment
 - geographical
 - physical
- x) availability and use of human and material resources
- xi) use of medications/drugs/alcohol

7. Determine the individual's adaptation level.

Kozier, Erb & Olivieri,
p. 863-864, 879
p. 900-901

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8. Recognize appropriate nursing diagnosis which are determined from level one and level two assessments.
 - a) adaptive activity patterns appropriate to developmental stage
 - b) activity intolerance (specify level 1-4)
 - c) impaired physical mobility (specify level 1-4)
 - d) diversional activity deficit
 - e) adaptive self care
 - f) self care deficit (feeding, bathing/hygiene, dressing/grooming toileting (specify level 1-4)
9. Identify client centered goals that indicate client adaptation in activity.
10. Identify nursing interventions which promote and maintain adaptation in activity using DTTR format.
 - a) collect data by observing, palpating, interviewing, etc.
 - b) ongoing physical assessment
 - c) promoting mobility by:
 - i) ROM exercises (active and passive)
 - ii) flexibility exercises
 - iii) assisting with ambulation (1 & 2 nurse methods)
 - iv) assisting with devices to assist ambulation (canes, walkers, wheelchairs, crutches)
 - d) maintaining effective body alignment by:
 - i) positioning (Fowler's, supine, prone, Sim's)
 - ii) assisting to use appropriate body mechanics

- Kozier, Erb & Olivieri,
p. 864-865
p. 901-902
- Kozier, Erb & Olivieri,
p. 865-872
p. 902-933

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- e) maintaining muscle tone/strength by:
 - i) doing isometric and isotonic exercises
 - ii) pre- and post-natal exercises (pelvic tilt, Kegals)
- f) assist client as necessary with Activities of Daily Living (bathing, toileting, grooming, dressing)
- g) preventing contractures by using footboards, handrolls, trochanter rolls, etc.
- h) provide diversional activities suitable to the client.
- i) health teach client and the family as appropriate:
 - i) body mechanics
 - ii) muscle strengthening exercises
 - iii) safe use of mobility devices (canes, etc.)
 - iv) purpose of ROM exercises
- j) Referral as appropriate: (interdependent function)
 - i) physiotherapist
 - ii) occupational therapist/recreation therapist
 - iii) adjuvant
 - iv) foot care nurse/Chiropracist/Podiatrist
 - v) Algoma Health Unit
 - vi) Assistive Devices Programme
- k) Chart all relevant information, assessment data, interventions and evaluation.
- l) Evaluate. Were the goals met? What modifications need to be made to meet the goals?

REFERENCES

Kozier, Erb & Olivieri,
p. 878, 933

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Part B: Rest

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| | Kozier, Erb & Olivieri;
p. 940-956 |
| 1. Discuss the purpose of rest and the purpose of sleep. | p. 940-941 |
| 2. Differentiate between REM and NREM sleep and the variations according to age. | p. 942-945 |
| 3. Identify and describe responses that indicate an individual's rest patterns through the lifespan. | p. 948-950 |
| 4. Sleep/Rest Patterns | p. 948-950 |
| a) usual amount of sleep | |
| b) bedtime rituals/routines | |
| c) time taken to fall asleep | |
| d) wakeful periods | |
| e) naps | |
| f) sleep environment | |
| g) physical appearance | |
| - facial expression, eyes, balance, posture, activity level | |
| h) mood, performance of tasks, thought processes | |
| i) developmental variations | |
| 5. Identify some of the common sleep problems in: | p. 947-949 |
| - preschooler (nightmares, night terrors) | |
| - school age child (nocturnal enuresis) | |
| - elderly (insomnia, frequent wakefulness) | |
| 6. Define sleep deprivation and the responses associated with sleep deprivation. | p. 948-949 |
| 7. Discuss factors (stimuli) affecting an individual's adaptation in Rest. | |
| a) Internal Stimuli | Kozier, Erb & Olivieri |
| i) nutritional intake vs. energy expenditure | p. 945-948 |
| ii) hydration | |
| iii) ability to eat | |
| iv) incontinence of bowel and bladder | |

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- v) elimination needs
- vi) hyper-hypo thermia
- vii) regulation of senses, ability to think, balance, vision

b) External

- i) economic/financial situation
- ii) culture
- iii) religion
- iv) education, knowledge
- v) family structure & support
- vi) community
- vii) health care delivery system
- viii) environment
 - geographical
 - physical
- ix) availability and use of human and material resources
- x) use of medications/drugs/alcohol

8. Determine the individual's adaptation level.

9. Recognize appropriate nursing diagnosis which are determined from level one and level two assessments.

a) adaptive sleep/rest patterns appropriate to developmental stage

b) sleep/rest pattern disturbance

10. Identify client centered goals that indicate client adaptation in rest.

11. Identify nursing interventions which promote and maintain adaptation in rest/sleep using DTTR format.

a) collect data by observing, palpating, interviewing, etc.

b) ongoing physical assessment

REFERENCES

Kozier, Erb & Olivieri:
p. 950-951, 954

Kozier, Erb & Olivieri,
p. 951

Kozier, Erb & Olivieri,
p. 951-953

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- c) promote adaptive sleep patterns by modifying negative stimuli and maintaining positive stimuli (eg: relaxation exercises, back rubs, changing the environment, allowing client to discuss concerns/anxieties). Consider all age groups.
- d) health teach client
- e) Referral as appropriate:
(interdependent function)
 - i) Sleep Clinic
 - ii) Algoma Health Unit
- f) Chart all relevant information, assessment data, interventions and evaluation.
- g) Evaluate. Were the goals met? What modifications need to be made to meet the goals?