

26 - EMERGENCY ASSISTANCE FOR THE HOSPITALIZED PATIENT IN THE INTENSIVE CARE UNIT

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INTRODUCTION

The ICUs can be defined as "places for the provision of specialized assistance to critical patient, requiring strict control of their vital parameters and assistance for nursing continuing and intensive, to prevent the patient develop a serious state, seriously compromising his life (SOUZA and COLS, 1985).

The creation of the Intensive Care Units (ICU) was around in 60, when the sophisticated techniques of treatment and instrumentation suffered a major breakthrough in medicine, resulting in the need to establish and / or expand a location in hospitals to meet and treating patients with risks of life.

The ICU can be characterized as a place for the care to patients in a critical condition, to receive continuing supervision of the entire team of nursing. It could thus control them more efficiently than in other areas hospital (ANDRADE, 1998).

It is said that the creation of ICUs arose from the need to provide better assistance to patients in serious condition, capable of recovery, focusing human and material resources, capable of providing speed and efficiency in the care provided (ZILBERSTEIN; SILVA and FELIX, 1995).

The institutions in general hospitals are being modernized, with the aim of providing reliable service increasingly qualified to the individual patient. But for this achievement the work of nurse becomes very complex, as well as a whole need in relation to scientific and technical knowledge, this work should have a humanized aspect of the care of nursing. Because the daily routine and involves the complex environment of Intensive Care Unit (ICU), makes the members of the team of nurses most often forget to play, talk and listen to the human being who is the front (VILA and ROSSI, 2002).

As reported GOMES 1988, "the self is a methodical work supported by a broad technical scientific knowledge, essential to the leadership of the group that should be well trained and qualified to handle equipment safely."

The team of nursing especially the nurse, must assume that, in their activities no less important tasks, but few complex, and within that team's work results must be achieved through the efforts of the entire team of nursing, medical, physiotherapy and nutrition and thus an interdisciplinary team, which in this way will the patient providing an improvement in the quality of care, because this should be based on whether the individual human and in the satisfaction of basic needs through the application of the process of nursing. This way the patient has the right to be the focus of the entire team, because their recovery is the goal of working for the intensive care unit (GOMES, 1988).

The professional nurse in the unit should establish the criteria and standards for the department of nursing, develop manuals, and also create standardized methods for the unit succeed in his treatment he should have a great service by the team of nursing, as that the nurse planning should know, exercise dominion over all equipment in the existing plant, but also how to interact with the team.

GOMES (1988) states that, the nurses' must be trained to perform activities of major, which is essential to theoretical reasoning, combined with the ability of leadership, wisdom, hard work, initiative and responsibility. "So the nurse, who has all these qualities and characteristics, must observe if there is emergency assistance in the quality of the patient's ICU and seek remedy with the greatest accuracy possible.

The ICUs evolve much in its technical service, but it only becomes progressive evolution to the extent that there is also concern about the quality of care (EINLOFT, et al., 1996).

This research was focused in the ICU, the identification that the researcher has with the area and the number of complex tasks that exists in the unit involving assistance of nursing.

The goal of the research is to find out if there is emergency in the quality of care of nursing in the ICU, identify the functions of the nurse and the majority of staff is concerned to provide reliable service of Nursing with quality to the customer.

The methodology of this research is qualitative approach "which tends to be targeted over their development, not basing list or measuring events" emphasizes NEVES (1996) that according OLIVERA descriptive study (2001), is the kind of study that allows the researcher to obtain a better understanding of the behavior of various factors and elements that influenced determined phenomenon. This research was performed in a hospital in Curitiba in the month of November 2005. The data were collected through a questionnaire, containing five questions open. Participants signed the term of free informed consent required in Resolution 196/96 of the National Council of Health

NURSING IN INTENSIVE CARE

The nursing as a profession, began in England in the nineteenth century, with the work Florence Nightingale, recruiting and training a group of women to achieve the care and hygiene of the soldiers injured during the Crimea War of the year, 1854 -1,856. It was also during this time that Florence Nightingale came to the degree of dependency, having them in the wards so that the most serious were coming to the area of work of nurses, for greater vigilance and better care.

Florence Nightingale sought know what is practiced in Nursing, said that only the expertise could bring satisfactory results and that it would take a course in Nursing (WESTPPHALEN and CARRARO, 2001).

The activity of care in nursing is old, featuring in particular, for the promotion, maintenance and restoration of basic needs of the individual, especially when it is achieved on their physical and mental integrity.

The Nursing of the twentieth century sought their professionalism, and for that built a body of expertise, and introduced the theories of Nursing and the process of Nursing, as methods of work, with the aim of transforming the work of nurses, making it scientific (PIRES, 1989).

With the advance of procedures, the need to provide more care to the patient during the immediate postoperative period, led to the development of special units of therapy. Initially, the treatment was carried out in special rooms, adjacent to surgery, and the monitoring conducted by the surgeon and then by the anesthesiologist.

Over time, was assigned to nurses and the team direct responsibility for clinical observation and treatment of patients at risk (Ph.D., 1992).

The functions of Nursing are quite diverse and include activities both in nature simple for implementation of which you can count on staff who only received training in service, the nature of complex, whose performance requires the use of

professionals with scientific knowledge, ability to analyze, judge and the decision (MENDES and COLS, 1979).

It is necessary that members of the team of Nursing demonstrating not only improve scientific and technical human attitude, skill and sensitivity to act in situations of emotional overload, even more closed and being an industry that requires much of its officials (MENDES and COLS, 1979).

The establishment of the Intensive Unit in Brazil began in the 1970s. Currently this is a unit in hospitals. The emergence of the practice in ICU was a great progress made by the hospitals in our century, because, before that the patient serious developments were met on their own wards, where area lacked adequate physical, specific materials and staff trained and prepared to carry out the service with quality and humanity.

NURSING

The nursing is a science and an art that aims to provide to humans the best conditions so that their power can be strengthened vital for a healthy living TC apud WESTPHALEN and CARRARO (2001).

As reported LIMA (1994), "in this day and age the Nursing can be defined as social action as an activity to be undertaken by the carers of life, illness, death and the environment"

But the nurses faced many challenges during the years of founding of coronary ICUs. This season the changes were fast and there was no time to prepare appropriate training for employees. Besides the growth of the needs of care to patients, the equipment also demanded much of the attention of the nurse (Ph.D., 1992).

But after all the Nursing is an art, and to carry it out as art, requires a devotion so exclusive, a preparation so rigorous as the work of any painter or sculptor: Then what is treating the screen or dead from cold marble compared to treat the body alive the temple of the spirit of God? It is an art of the arts and I almost say, the most beautiful of Fine-Arts, FLORENCE apud ALMEIDA and ROCHA (1986).

HUMAN RESOURCES

The human resources of an organization, no doubt, are the most important. A major challenge is to put the right person in the right place to provide an environment in which the individual contribute their creativity, talent and motivation which in turn will lead the organization to achieve its objectives (PONTES, 1988).

A team of ICU nursing is in our midst formed by nurses, technicians, nurses and assistant nurses. The allocation of staff is closely linked to the standard of quality required for a particular unit, to a great assistance with appropriate attention and a group cooperative and harmonious (PIVA; CARVALHO and GARCIA, 1997).

According FELDMANN (1993), "Never achieve a service - and good nursing care to patients without the appropriate number of staff. The amount assures us, in parts good quality of work."

The ICUs were created to focus three components: serious patients, highly sophisticated equipment and personnel with knowledge and experience, which allow the use of such equipment in the treatment of these patients (MURTHA and REGUEIRO, 1992).

FUNCTIONS OF THE TEAM OF NURSING

The performance of the team of nursing is better when all work for a common goal, and it should be clear, with integral role of each committed to the welfare of the patient.

What is the nurse: leadership team's work and the responsibility for care of nursing Systematic aimed at the prevention of disease and the maintenance and restoration of health.

It is up to us nurses who are building the Nursing step by step, creating new work processes, innovate, look, not having fear of mistakes, win our conformism and the submission, not never forget that we are people that cares for people, and our work must constantly seek the humanization in the ethical aspects, among others (MARTINS, et al. , 2003). So the professionals of nursing must have a more holistic view of the human being, because it allows the breadth of perspective professional recognize their own responsibilities and their duties to the other. It could then guide in its ethical behavior and be able to provide assistance with quality of nursing humanized.

The nurse is the mediator of the treatment of the patient, and that provide the integration of the elements of the team of nursing, to the success in care, the harmony between all (patient, family and professional), the exchange of information and assistance in quality (WESTPHALEN and CAR, 2001).

Technical and help of Nursing: providing care to patients, according to the systematization of assistance planned by the nurse, following the rules and routines established in the institution.

You can add that in all activities, from the simplest to the planning organization of the ICU care, and high recovery of the patients, must be carried out with proper techniques and professional ethics.

The rules and the project should be addressed by a multidisciplinary group composed of chief doctor, nurse leader of the ICU, hospital administrator principal architect and engineers.

Recently the rules were recommended by the Brazilian Intensive Medicine Association (AMIB) for accreditation of a ICU (ZILBERSTEIN, SILVA and FELIX, 1995):

And yet UENISH (1994) states that the unit must have:

A room for meetings, classes and studies;

A small cup; A room to file; A room of materials sterile and another room for preparation of materials;

Machine with male and female bathroom equipped with shower; A registry; A room for the leadership of nursing; A room for ready use of respirators;

UENISH (1994) emphasizes that the criteria for admission of patients in ICU "is when the patient presents failure of one or more key systems, such as respiratory and / or cardiovascular, if the patient's serious and recoverable," with the following specific conditions:

Patients serious: They are the patients who have compromised the vital function: respiratory failure, state of shock and coma, many burned cardiac arrest, renal failure, tetanus, poli trauma.

Patients with high risk: they are the patients that present imminent possibility of serious commitment to vital function: acute coronary insufficiency, cardiac arrhythmias, and post-operative as special, (cardiovascular, neurosurgery, thoracic surgery, general surgery great).

ASSESSMENT OF ASSISTANCE NURSING

The assessment should be used to check the quality of care in nursing; it is one of the instruments used, and the Questionnaire Evaluation of Services, which should be answered by all patients inpatient (MARX and MORITA, 2003).

In the questionnaire should contain:
 General Quality of Care;
 Preparedness of Care;
 Differentiation of Assistance shift;
 Information provided to the patient during the period of hospitalization;
 Major problems identified.

Based on the belief that the nursing develops an activity interpersonal in nature and that the professionals of Nursing see humans as holistic beings, we must change our eyes to see the world better, and thus began to see new possibilities, impossible to be viewed before a different way of looking at health and disease and to provide assistance with capacity to understand the healing and be part of it and also understand the death.

RESULTS AND DISCUSSION

The people involved in this research include: the team of nursing Intensive Therapy Unit of a hospital in Curitiba, which is composed of 08 experts in nursing, 02 of male nursing assistants and nurse from 01. A team of the ICU nursing is composed by 11 officials from female and a, there are three variables of age: 25 to 30 years, 30 to 40 years, 40 to 45 years. The level of education of the majority of the team is high school.

72.8% replied that it is attending the patient the care provided individualized. And 27.2% said that it is attending the patient. Notice that this poll is that only the assistant nursing replied that it is attending the patient.

On the importance of scientific knowledge to assist, 64% reported that knowledge is of vital importance and influence on the quality of care. On Monday 36% of respondents indicate that knowledge is important but unrelated to the care to the patient. The answer of this question shows that the majority of employees to associate that with the scientific knowledge will be able to develop a differentiated assistance because differentiate know some of the wrong.

The patient hopes that the professionals are competent, and feel unsafe when someone shows little knowledge, both in the implementation of technical procedures as in the operational control of equipment, or even the information provided to their relatives and friends.

When the professionals were questioned about the emergency in the ICU, 100% reported that the major concern was a lack of materials available at the time of emergency, and also said that the lack of material provides a non-assistance of nursing with quality, but we must improvise since our profession in the improvisation is common. The stimulation of the potential for improvisation is an intellectual activity that puts at stake the imagination and encourages innovations of all kinds, often peaked in the production of works and ideas important in the evolution of knowledge to make the nursing an art, but always seeking the welfare of patient.

Of the employees questioned 72.7% said that there is the concern of officials with the assistance of nursing with quality, because the nurse responsible for the unit is the mirror them. And also reported that it is excellent work and it does not tire of saying that assistance with quality makes the patient feel more secure themselves, the treatment of the patient hospitalized in the ICU becomes less aggressive, as it is in a place that for him are all strangers, speaking at the same time and stirring it. And 27.3% reported that there are some people who do not worry about the quality of care. Most officials have awareness and concern on this unit apparently so aggressive to the patient, and they worry about the quality assistance.

When asked about what the roles of Nurse 81.8% of the officials identified the functions of nurses in the view of them as being the most important: do everything so that the patient please feel protected, comfortable, helping to alleviate the fear and the anguish anxiety of the patient, perform the procedures of nursing from medical prescriptions but knowing identify whether for a chance to have a mistake and take the right attitude with professional ethics, administer medication and know the action of drugs, carry out physical examination where you can realize some kind of change or some recovery in the context of the patient, making prescription of nursing, which contains the routine of the day so that we can provide a service appropriate to the patient, but with all this we can only move our scale off where these are the people who will work and who will poems, it is important not to overburden the industry with a shortage of professionals.

It was found that 18.2% of other professionals only carry what is prescribed and routine tasks, not worry about the welfare of the patient in the unit, these professionals do not mind to know what the functions of nurses in the ICU.

The patient has the right to be the center of attention of the team since its recovery is the goal of all the working of UTI. He deserves a perfect attendance, where each element has a role defined, but maintaining liaison, coordination and balance with other professionals, resulting in a combination of knowledge and experience.

FINAL CONSIDERATIONS

With the end of this research objectives have been achieved, whereas with the search results was possible to identify the quality of services provided in ICU, and that employees are concerned about the emergency as provided to the patient. In today the assistance will be getting a little to one side but a nurse with responsibility and awareness is of great benefit to the patient, and that training should take scientific knowledge to be able to assist with quality.

It is important to keep the nurse education in performing services for their employees so that they can be updated if and worry in providing a service appropriate to their patients and family members, and not leave that lack of time and materials is only an excuse for not implement procedures to correct technical and safe.

It is essential to work as a team, from the planning and implementation to the evaluation of results. Efforts should always be directed to assistance to patients, administration, research and continuing education.

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EMERGENCY ASSISTANCE FOR THE HOSPITALIZED PATIENT IN THE INTENSIVE CARE UNIT

ABSTRACT:

To reach the quality in the assistance it must be had the knowledge and the manuscript of the resources, the trained employees and chemical preparations so that they can really develop quality in the assistance. It was through this present time that we carry through a research in the Unit of Intensive Therapy of a Hospital of Curitiba city. The objective was to identify the existence of emergency in the assistance to the patient, and if the employees worry about the quality in the assistance, and identify the functions of the nurse in the UTI. The used methodology was of qualitative character. The results in had shown them that it was possible to identify the quality of the services given in the UTI and that the employees if worry about the emergency in the given quality the patient.

KEY WORDS: Emergency, quality in the assistance, humanization.

UNE AIDE D'URGENCE DANS LE HOSPITALISÉ PATIENT DANS UNE UNITÉ DE THÉRAPIE INTENSIVE

RESUME:

Pour atteindre la qualité de l'assistance, il doit être tenu compte de la connaissance et le manuscrit des ressources, la formation des employés et préparations chimiques afin qu'ils puissent vraiment développer la qualité dans le assistance. Il était heure actuelle par le biais de ce que nous portons à travers une La recherche dans l'Unité de thérapie intensifs d'un hôpital de la ville de Curitiba. L'objectif était d'identifier l'existence d'une situation d'urgence dans l'assistance au patient, et si les travailleurs s'inquiètent de la qualité de l'aide, et d'identifier les fonctions de l'infirmière dans la méthodologie a été utilisée UTI. The de caractère qualitatif. Les résultats ont montré que c'était possible d'identifier la qualité des services donnés dans le UTI et que si les employés s'inquiètent de la situation d'urgence dans la qualité du patient.

MOTS CLES: Urgence, la qualité de l'aide, l'humanisation.

ASISTENCIA DE EMERGENCIA EN EL PACIENTE HOSPITALIZADO EN UNA UNIDAD DE TERAPIA INTENSIVA

RESUMEN:

Para alcanzar la calidad en la asistencia que debe basarse en el conocimiento y el manuscrito de los recursos, los empleados capacitados y preparados químicos para que puedan realmente mejorar la calidad de la asistencia es a través de este momento que nos llevan a través de un La investigación en la Unidad de Terapia Intensiva del Hospital de la ciudad de Curitiba. El objetivo era determinar la existencia de emergencia en la asistencia al paciente, y si los trabajadores se preocupan por la calidad de la asistencia, y determinar las funciones de la enfermera en el UTI. The metodología utilizada fue de carácter cualitativo. Los resultados han demostrado en los que es posible identificar la calidad de los servicios que figuran en la UTI y que si los trabajadores se preocupan por la situación de emergencia en la calidad del paciente.

PALABRAS CLAVE: Emergencia, en la calidad de la asistencia, la humanización.

EMERGÊNCIA NA ASSISTÊNCIA AO PACIENTE INTERNADO EM UMA UNIDADE DE TERAPIA INTENSIVA

RESUMO:

Para atingir a qualidade na assistência é necessário ter o conhecimento e o manuseio dos recursos, funcionários treinados e preparados para que possam realmente desenvolver qualidade na assistência. Pesquisa realizada na Unidade de Terapia Intensiva de um Hospital da cidade de Curitiba. O objetivo foi identificar a existência de emergência na assistência ao paciente, se os funcionários preocupam com a qualidade na assistência e se identificam as funções do enfermeiro na UTI. A metodologia utilizada foi de caráter qualitativa. Os resultados nos mostraram que foi possível identificar a qualidade dos serviços prestados na UTI e que os funcionários se preocupam com a emergência na qualidade prestada ao paciente.

PALAVRAS-CHAVE: Emergência na qualidade, assistência, humanização.