Nursing diagnoses and interventions in patients with Parkinson's Disease: cross mapping study

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ABSTRACT

Aim: To build a validated affirmative databank incorporating the language used by the International Classification of Nursing Practice (ICNP®) with regard to nursing diagnoses and interventions for the rehabilitation of patients with Parkinson's disease. **Method:** This is a cross mapping study that is descriptive and documental. The sample is composed of nursing procedures described in the medical records of 351 patients with Parkinson's disease, who participated in a rehabilitation program from May 2009 to May 2014, in a rehabilitation center located in the city of Rio de Janeiro, Brazil. The validation of the affirmatives will occur as a result of the analysis of nurses who specialize in the area of rehabilitation. **Expected Results:** It is expected that the affirmatives of nursing diagnoses and interventions that are not standardized will be compared with the ICNP® language (version 4.0) within the context of the rehabilitation of patients with Parkinson's disease.

Descriptors: Nursing; Classification; Nursing Diagnosis; Rehabilitation; Parkinson Disease.

INTRODUCTION

Parkinson's disease (PD) is a neurodegenerative disorder characterized by an association with motor disorders such as resting tremors, rigidity, bradykinesia and postural instability; and non-motor disorders such as vesicle, intestinal, sexual and mental dysfunction[1]. Around the world, there are more than 10 million people with PD; in Brazil, there are around 300,000 individuals[1]. These numbers demonstrate the importance of the role performed by the rehabilitating nurse regarding the prevention and treatment of motor and non-motor changes in DP. Within this context, the standardization of language as found in the International Classification of Nursing Practices - ICNP® which is now in its most updated version, the 4.0 (2013) [2] is an essential tool to implement such care practices[2].

Therefore, this study will aim to build a databank of diagnosing affirmatives and nursing interventions validated under ICNP® Version 4.0 (2013) language, in the context of the rehabilitation of patients with PD.

METHOD

This is a descriptive study involving cross-mapping and documentary research. The cross-mapping was chosen as it allows the comparison of ICNP® language with that found inside the studied institution[3].

The sampling technique used is one of simple random probability, with a margin of error of 4% for the calculation of the sample. The sample will be selected from the nursing proceedings described in 351 medical records of patients with PD that participated in the program of rehabilitation between May 2009 and May 2014. Records that present, besides the PD diagnosis (G20.0) other medical labels that detail elements related to other Parkinsonian syndromes, will be excluded.

The research will occur in five steps.

First, there will be the extraction of the content of nursing diagnoses and interventions present in the proceedings. During this step, demographic information about the patients such as age, period of evolution of the disease, type of PD, and level of incapacity – based on Hoehn & Yahr Scale - will be extracted.

In the second step, the cross-mapping will take place. This will compare the affirmatives of diagnoses and nursing interventions with the ICNP® version 4.0 taxonomy.

The third step will develop the definitions of each diagnosis affirmative and nursing intervention based on the scientific literature of the area, with their appropriate signs and symptoms.

The fourth step is designed to validate the affirmatives and the definitions. In order to proceed as such, the opinions of nurses who are considered to be specialists will be obtained, based on Fehring's criteria. The validation will be based on the calculation of the Content Validation Index (CVI).

In the fifth and last stage there will be the validation of the diagnosing affirmatives and nursing interventions according to the language used in the ICNP® version 4.0. The CVI will again be used as a methodological tool to validate the experiment. In this stage, the affirmatives that do not match the CVI as expected will be excluded. The pertinent suggestions of the participants (regarding the definitions designed for the diagnosis affirmatives and nursing interventions that achieve the desired CVI during the first stage of the evaluation) will be analyzed and taken into consideration whenever possible. The definitions of diagnosis affirmatives and nursing interventions that do not achieve the desired CVI will be rewritten based on the suggestions

provided by the participants and resubmitted for a new validation.

The descriptive analysis of the diagnosis titles, the nursing actions, and of the demographic information of the nurses and patients will be performed using absolute and percentage frequencies. On the other hand, the affirmatives sent for validation by the specialist nurses will follow the steps described: (1) in each rule, there will be a summing of the scores given by each specialist; (2) the scores for each rule will be added to achieve a final, general score; (3) the maximum score achieved will be considered as evidence of agreement among all specialists regarding the rules analyzed; (4) the CVI will be found by dividing the total general score by 100. To analyze the results of the validation, three categories will be generated: Category 1: Disagreement with the structure of the rule with justifications and suggestions; Category 2: Disagreement with the structure of the rule without justifications and suggestions; Category 3: Disagreement with the definition proposed by ICNP®, version 4.0.

To evaluate the medial records, Free and Clear Consent Agreement (FCCA) was not necessary. This document will be required only for the specialists who will participate in the process of validation of the affirmatives and nursing diagnoses.

EXPECTED RESULTS

We expect to compare the non-standardized affirmatives of nursing diagnoses and interventions with the standardized language of the ICNP® version 4.0, through the definition of phenomena and actions. The construction of a databank of affirmatives with regard to diagnoses and interventions may facilitate the application of those tasks by a rehabilitation nurse, by using a standardized language relating to the care of patients with PD.

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