

# MENTAL SNAPSHOTS: CREATING AN ORGANIZED PLAN FOR HEALTH ASSESSMENT



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Beginning nursing students enter a rapidly moving and changing health care climate. Multiple stimulations can frighten and overwhelm the student's ability to find order of essential patient information. Students need to know how to collect, process, and manage important health data accurately and efficiently in the clinical setting. An integrative method for teaching nursing students to walk into the patient's room and construct a patterned sequence of focused assessments assists students in creating an organized plan for health assessment. The *Mental Snapshots Method* includes three components for health assessment: (a) sequential assessment steps of the patient; (b) color-coded visual images of the patient representing a bodily condition; and (c) focused assessment questions of primary health complaint(s) with a plan for nursing care. This mental snapshots strategy employs an information processing model of sensory, memory, and motor functioning, which enable students to maintain patient quality and safety. (Index words: Mental snapshots; Health assessment; Quality & safety) *J Prof Nurs* 31:416–423, 2015. © 2015 Elsevier Inc. All rights reserved.

**K**EEPING THE PATIENT safe at the bedside has become a real challenge for the nurse educator working with beginning nursing students in the clinical environment. The typical medical–surgical patient arrives at the acute care hospital presenting with multiple health and socioeconomic complaints, extensive comorbidities, and up to 10 or greater medical diagnoses ([National Center for Health Statistics, 2012](#)). Acute care hospitals are also a setting for the aging and the chronically ill populations with sudden onset of illness, exacerbation of disease, and long-term health care needs. Patients require numerous diagnostic screening tests, invasive procedures, advanced monitoring, and aggressive medication and

treatment plans ([NCHS, 2012](#); [Pickett, 2012](#)). This article addresses an effective and innovative teaching strategy entitled the *Mental Snapshots Method*, which equips the students to collect, organize, and process health data during patient encounters.

## Aim of the Article

The purpose of the article is to introduce the nursing student to the practice of health assessment with complex patients on the medical–surgical unit. Nursing students come to clinical prepared in classroom theory of fundamental nursing care, the role of the professional nurse, hands-on health assessment, and begin the study of patho-pharmacology. Then, the students learn to transfer their knowledge into application of health information to safely care for the patient at the bedside ([Barnsteiner, Disch, Johnson, 2013](#)). Students enter the clinical environment exposed to multiple stimulation, technology advances, and complex patient demands ([Benner, Sutphen, Leonard, & Day, 2010](#)). The nurse educator partners with the beginning nursing student to help alleviate anxiety and fears as they orient the student to the new health care environment. As the nurse educator demonstrates good eye contact and true presence, makes the patient feel valued, and communicates care with the patient and families, the students learn the foundational steps of interacting with patients ([Palmieri & Kiteley, 2012](#)). The

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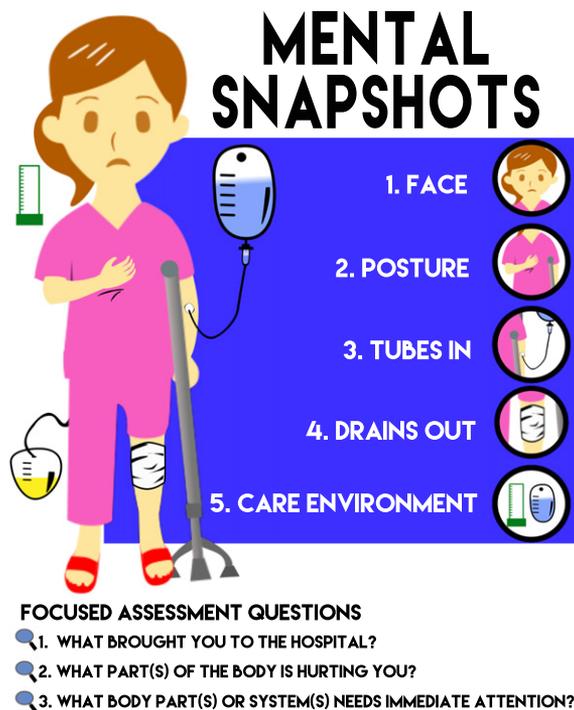


Figure 1. Mental Snapshots Graphic.

student–patient relationship is enhanced and guided by partnership and communication between the student nurse/nurse educator and student nurse/primary nurse relationships.

A technique for teaching health assessment to nursing students is called the *Mental Snapshots Method* (Figure 1). This tool enables students to observe, interview, and examine while collecting health information at the bedside. Mental snapshots begin as an observation tool of assessment and include inspection, palpation, percussion, and auscultation with hands-on head-to-toe examination. The nurse educator helps students quantify what they see, hear, smell, and feel during patient assessment. Students use the assessment tool while talking with the patient, collecting history, taking vitals, providing morning care and during head-to-toe examination to keep the patient safe at the bedside.

The student is building on previous knowledge from course work to apply in the clinical setting. This integrative tool provides a guide for the student and the nurse educator in applying techniques used in assessment. They include observation, communication, collecting data, interpreting data, designing, and implementing the plan of care.

Students are taught three components of the *Mental Snapshots Method*, which include the following: Component 1 is the five sequential assessment steps of the patient's face, posture, tubes in, drains out, and care environment, which are found on the right of the graphic; Component 2 is a color-coded image of a medical–surgical patient with a bodily condition, which is found on the left of the graphic; Component 3 is the focused assessment questions of primary health complaint(s) with a plan for nursing care. The three focused questions are found at the bottom of the graphic. These three

components can be used on a poster card at the bedside to help students organize their perception and collect important health data. A Mental Snapshots Graphic (Figure 1) example demonstrates a 55-year-old female patient who has just undergone a left total knee replacement (TKR) leaning forward on the crutch and grabbing at her chest with new complaints of chest pain and shortness of breath as a postoperative complication. The patient has a history of cardiovascular disease (CVD), hypertension, smoking and arthritis.

The *Mental Snapshots Method* utilizes a variety of senses and memory and motor responses to rapidly collect data and provide prompt nursing care. Mental processing of essential health information with the mental snapshots combined with pieces of pathology, laboratory, radiology, and medication data helps build the clinical picture (Simmons, 2010). This teaching method can be used in multiple acute care settings such as geriatric, adult, and pediatric care. The tool is applicable to other health care environments such as community, long-term care, urgent care, and health care offices. An assessment exercise using the tool can be implemented with nursing students assigned from one to four patients at a time in clinical.

## Background Theory Support

Beginning nursing students stand at the door of the patient's room with internal questions such as (a) What do I say? (b) What do I do? and (c) How do I talk and help a sick patient feel better? To assist students to enter a complex patient environment, the author studied the information processing model (IPM) to better understand how students think, remember, and grasp information. The IPM is used as the guiding framework of merging theoretical models to enhance student learning and processing of health information at the patient's bedside.

In 1968, the first cognitive theorists, Atkinson and Shiffrin, designed The Stage Theory or Multi-Store Model of Memory in a three-box system based on the IPM. The stage model describes human learning occurring in three different stages/steps with transfer of information in sensory memory, short-term memory (STM) and long-term memory (LTM) storage (Lutz & Huitt, 2003).

The second theoretical model was created by another cognitive theorist, Huitt, in 1999, which is called The Stage Model of Information Processing. Huitt explored how students process information in a continuous and dynamic manner as they receive stimuli from the environment, break down information into organized parts, and create images and connections for memory. Then, the information is stored in sensory memory, short-term or working memory, and builds linkages in LTM before a response occurs (Lutz & Huitt, 2003; Woodman, Carlisle, & Reinhart, 2013).

Third, a nurse educator named Susan Bastable developed the Information-processing model of memory as cited by Braungart, Braungart, & Gramet. This model is a teaching and learning tool that is used for nursing students educating patients at the bedside. Bastable provides a linear design of concepts to trace the processing of the student's mind as

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