**RNSG 2371**

**Concept-Based Transition to Professional Nursing Practice**

**Concept – COMFORT**

**Concept Definition**

Comfort- a state of physical ease

**Exemplars**

Phantom limb pain (amputee)

Nerve root compression (chronic pain)

Pre-procedure

Degenerative Disc Disease

Diabetic Neuropathy

Pancreatitis Pain (acute

Sickle Cell Pain (Chronic pain)

Post-operative Pain

Renal Calculi

End Stage Renal Disease

Congestive Heart Failure (also under perfusion and fluid and electrolytes)

**Objectives**

1. Explain the concept of comfort (including definition, antecedents, and attributes).
2. Analyze conditions which place a patient at risk for impaired comfort.
3. Identify when impaired comfort is developing or has developed.
4. Discuss exemplars of common disruptions of patient comfort. (Pain)
5. Apply the nursing process (including collaborative interventions) for individuals experiencing comfort imbalance.
6. Explain the correlation between imbalanced comfort (*Diabetic Neuropathy,*

*Pancreatitis Pain (acute), Sickle Cell Pain (Chronic pain), Post-operative Pain, Renal Calculi, End Stage Renal Disease, Congestive Heart Failure*) to the concept of *Comfort* (including compromised antecedents, deficit measurement in attributes, a list of negative consequences, and the interrelated concepts which may be involved).

1. Identify conditions that place an individual at risk for imbalance leading to a compromised concept(s) resulting in *impaired comfort* [*Diabetic Neuropathy, Pancreatitis Pain (acute), Sickle Cell Pain (Chronic pain), Post-operative Pain, Renal Calculi, End Stage Renal Disease, or Congestive Heart Failure*].
2. Apply the nursing process with collaborative interventions for individuals experiencing *impaired comfort* [*Diabetic Neuropathy, Pancreatitis Pain (acute), Sickle Cell Pain (Chronic pain), Post-operative Pain, Renal Calculi, End Stage Renal Disease, or Congestive Heart Failure*].

**Concept Analysis Diagram**

Note: Diagram on separate page

Explanation of Comfort Diagram:

The defining attributes of Comfort listed as vital signs within normal limits for a patients’ baseline, absence of pain indicated by a zero on a pain scale, and a relaxed body posture are indicators that the concept of Comfort is being manifested in a patient.

The antecedents are the contexts or events which allow the manifestations of a state of Comfort. The patient would have an effective circulatory system; intact neurological/sensory system; absence of noxious stimuli, and be able to identify and convey the difference between comfort and discomfort.

The consequences occur as a result of changes in the state of Comfort. For example a change in the vital sign may present as shock, which is one of the negative consequences listed on the diagram. If the vital signs are within normal limits and the patient has a calm demeanor this would indicate a positive consequence when comfort is being achieved.

Nursing care will be directed at maintaining a state of Comfort by engaging in interventions that ensure that the antecedents optimally exist and thus prevent negative consequences. Interrelated concepts contribute to positive and negative consequences for the patient; and when Comfort is not being achieved it contributes to negative consequences for the interrelated concepts.

**Assignments**

**Prior to class:**

1. Review definitions of inter-rated concepts on concept analysis diagram.

2. Review concept analysis diagram.

3. Review concepts Sensory Perception and Mobility.

4. Assigned reading:

* Berman, A. & Snyder, S. (2012). *Kozier & Erb’s Fundamentals of Nursing*.

Boston: Pearson.

* Chapter 46: Pain Management
* Giddens, J.F. (2013). *Concepts for nursing practice.* St. Louis. MO: Mosby

Elsevier.

* Chapter 26: Concept Pain
* Chapter 23: Mobility
* Chapter 25: Sensory Perception
* Lewis, S.L., Heitkemper, M.M., Dirksen, S.R., O’Brien, P.G., & Bucher, L.

(2011). *Medical surgical nursing* (8th ed). St. Louis: Mosby Elsevier.

* Chapter 10: Pain
* Chapter 20: Postoperative Care: Pain and Discomfort; pg. 374 – 375
* Chapter 31: Hematologic Problems: Sickle Cell Disease; pg.672 – 675
* Chapter 35: Heart Failure: Clinical Manifestations of Heart Failure; pg. 802
* Chapter 44: Liver, Pancreas, and Biliary Tract Problems: Acute Pancreatitis; pg. 1088 – 1093.
* Chapter 46: Renal and Urologic Problems: Urinary Tract Calculi; pg. 1135 – 1141
* Chapter 47: Acute Kidney Injury and Chronic Kidney Disease: Acute Kidney Injury; pg. 1165 – 1181
* Chapter 49: Diabetes Mellitus; Neuropathy; pg. 1249-1250.

5. Internet resources to review:

* Assessing Pediatric Pain

<http://mcom.alexanderstreet.com/view/1744972>

* Treating Pediatric Pain

<http://mcom.alexanderstreet.com/view/1744973>

* Understanding Pediatric Pain

<http://mcom.alexanderstreet.com/view/1744971>

* The Pain Process and Patient Assessment

<http://mcom.alexanderstreet.com/view/1665462>

* Pain Treatment Programs for Special Populations

<http://mcom.alexanderstreet.com/view/1665465>

* Physical and Cognitive Treatment

<http://mcom.alexanderstreet.com/view/1665464>

* Medication Treatment in Pain Management

<http://mcom.alexanderstreet.com/Series/58>

* Acute Pain Management: Operative or Medical Procedures and Trauma

<http://mcom.alexanderstreet.com/view/1665573>

* Acute Pain Management in Children: Operative or Medical Procedures

<http://mcom.alexanderstreet.com/view/1665577>

* Inside Duke Medical Patient Comfort Care alternative for relief

<http://insidedukemedicine.org/news/patient-comfort-cart-providing-alternative-options-for-relief/>

* Post-Operative Pain Management:

<http://www.youtube.com/watch?v=EIyXAaw2Ers>

* Diabetes and Nerve Pain Effects. WebMD.

<http://diabetes.webmd.com/video/diabetes-nerve-pain-help>

* Diagnosis and Treating Nerve Pain. WebMD.

[http://www.webmd.com/pain-management/video/diagnosing-treating- nerve-pain](http://www.webmd.com/pain-management/video/diagnosing-treating-%20%20%20nerve-pain)

6. Review the following Nursing Diagnoses:

* Acute pain
* Chronic pain
* Impaired comfort
* Readiness for enhanced comfort

**Concept content outline:**

Concept: **Comfort**

Sub Concepts: Chronic and Acute Pain

Neuropathic

Theory of Pain Control

Nociceptive Pain

Mixed Pain Syndromes

Risk Factors: Older adults

Neonates

Unable to report pain

Assessment: Comprehensive history

Physical assessment

Cultural, behavioral, social assessment

Physical and psychological clinical manifestations

Pain scale, Wong Baker Faces Pain Rating Scale

Positive Outcomes:

Social interactions

Performs ADL’s

Adapt to stressors

Calm demeanor

Negative Outcomes:  
 Shock

Tissue damage

Limited movement

Hyperventilation

Increased heart rate and blood pressure

Clinical Management:

Nursing interventions

Collaborative interventions

Pharmacological/Non Pharmacological therapy

Procedural therapies

Diagnostic studies

Exemplars: Phantom limb pain (amputee)

Nerve root compression (chronic pain)

Pre-procedure

Degenerative Disc Disease

Diabetic Neuropathy

Pancreatitis Pain (acute)

Sickle Cell Pain (Chronic pain)

Post-operative Pain

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