

# Critical thinking part 4

[Health & Medicine](#), [Nursing](#)



Critical Thinking Part 4 The information from the book excerpt forms the bulk of this paper. The irrefutable information from the articles is laden with substantial information about cancer survivors who are inevitably at a higher danger of developing cancer than the common population. Though not compulsory, scores of cancer survivors receive no customary cancer screening. Cancer survivors' views of their second cancer are glaringly alleged to manipulate their participation in cancer screening. The chief objective of this research was to investigate how cancer survivors classify and understand second cancer risk. The authors clearly and openly recognize the subjects of the research, but have failed to indicate whether their Human Rights were protected. However, I feel that the subjects' Human Rights were protected to prevent them against any exploitation or discrimination. Yes, the authors have acknowledged that they were given the permission to carry out this study which was approved by local university and hospital moral review committees. Also, the authors obtained informed consent from all the participants (Wilkins & Woodgate 458).

In interpretive account, participants' conscription focused on persons having the knowledge under study. In view of that, the insertion standards were as follows: cancer survivors who were out primary cancer diagnosis for 5 or more years, 19 years of age at the time of interview, taking residency in the region where the interviews were to be conducted, and fluent speakers of English. Research participants were conscripted from hospital based catalog and regional cancer registry. The regional cancer registry was consulted to exclude persons with malignant tumor diagnosis, second cancer diagnosis, amid others. Although the authors tell us that the participants were

recruited, they have not indicated that the subjects received any money. There was no unseemly conflict of interest during recruitment. Most of the participants were from the vulnerable cancer survivors. Ideally, after one is diagnosed with cancer, the danger of developing a second cancer is an ingredient of day after day life. All the research subjects accounted that they had the full knowledge of their second cancer. Second cancer was expressed in terms of probable danger features for cancer, providing detailed information to the cancer survivors with a view to preparing them to conceptualize the theoretical nature of danger. This information forms the bulk of the argument that the subjects came from the vulnerable population (Wilks & Woodgate 458).

The authors did not specifically indicate that they ensured the data collected from the subjects remained secure. However, the authors have stated that all the interviews were digitally recorded to preserve their authenticity. Either way, there was no outside funding that was used to conduct the study. Yes, there is a disclaimer refuting any funding of the study. The research is clinically important to physical activities and quality life of cancer survivors. Additionally, the study is clinically important as the results wire the requirements for nurses to analyze and comprehend how cancer survivors view and take strategic action on their own cancer risk. The study has detailed information about the methodology which the authors used to collect data.

The study result glaringly fails to generalize all cancer survivors but, instead, fosters a comprehension of cancer survivors' views on second cancer risk. Interview statistical data were gathered at only one point in time. This study

failed to conceal any differences in the second cancer danger views by demographic and ill health variables including age, cancer diagnosis, amid others. Furthermore, a sample including ethnic unpredictability may have concealed information about cancer survivor's second cancer risk views.

#### Work Cited

Wilkins, Krista & Roberta Woodgate." Life After Cancer: Living with Risk." Jan. 2011.

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