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## Quantitative Article Critique

Methods, Results, Data Analysis and Findings   
The quantitative research article chosen to be discussed was entitled Predictive Values of Semi-Quantitative Pro-Calcitonin Test and Common Biomarkers for the Clinical Outcomes of Community-Acquired Pneumonia. The respondent population was mainly composed of people who have been hospitalized as a result of having been diagnosed with Community Acquired Pneumonia between August 2010 and October 2012 using the semi-quantitative serum PCT Test. The objective of the research was to determine whether there is an existing relationship between the semi-quantitative serum pro-calcitonin (PCT) test (BRAHMS PCT-Q) and the clinical outcomes of patients with community acquired pneumonia; as well as to compare the usefulness of the serum PCT Test with that of other severity scoring systems such as blood urea nitrogen to serum albumin ratio (B/A ratio), among others.   
First off, it is important to remember that the semi-quantitative PCT test was never meant to help patients with CAP recover quickly because it is neither a medication regimen nor a treatment approach but a diagnostic procedure aimed at determining whether an individual has CAP and in scaling the severity of the same person’s CAP. If anything, the semi-quantitative PCT test can be used to reliably determine whether the patient has good chances of recovering or not from CAP, by being used as a prognosticating factor. After all, it was meant as a diagnostic tool.   
This was a retrospective study, meaning the phenomenon that was studied has already occurred when the research was implemented. The research instrument used was of course the semi-quantitative PCT test results of the patients while the outcome measuring tool used was the mortality rates within a period of 28 days from admission among the respondent patients and the percentage of those patients who eventually needed intensive care.   
The results of the study showed that of the 213 subjects with CAP observed, 20 died within 28 days of admission and 32 required admissions to the intensive care unit. One important observation showed that elevations of semi-quantitative serum PCT levels were more frequently observed in subjects with proven etiologies of pneumonia . Authors of the paper concluded that the tool used the semi-quantitative serum PCT level on admission was not a good tool to be used in predicting the mortality from CAP as compared to the B /A ratio .

## Discussion

CAP is a common medical condition. It can be akin to hospital-acquired pneumonia only that this type is acquired within a community. Mortality rates greatly vary because it (mortality) depends on a lot of factors such as but may not be limited to the severity of the pneumonia acquired, the integrity of the patient’s immune system, and the effectiveness of the management and treatment strategies being implemented in the hospital.   
In the paper, it has been shown that semi-quantitative serum PCT level was not a good indicator in predicting mortality from CAP as evidenced by the fact that there were significant variations in the mortality rates of the patients who got high and low scores in the tests; meaning, no trend was established, as compared to the B/A ratio.

## Global Issues

Community acquired pneumonia is a medical condition that develops often among people who do not have sufficient access to medical institutions, services, and settings. It is, in general, a condition that is easy to diagnose, treat, and prevent. However, without proper medical attention, mortality rates can shoot up and cause further damage.

## Qualitative Article Critique

Methods, Results, Data Analysis and Findings   
The qualitative research article chosen to be discussed in this section was entitled older women’s experiences of suffering from urinary tract infections. A qualitative descriptive type of research design was used. The authors used semi-structured interviews which were conducted with 20 Swedish women aged 67 to 96 years old who suffered from recurrent urinary tract infections the preceding year. Information was analyzed qualitatively as well.   
Results of the analysis showed that patients were either under in a state of manageable suffering or under a state of suffering based on alleviation. Being in a state of manageable suffering was described in terms of experiencing physical and psychological health problems while at the same time struggling to deal with the illness and being restricted in daily life. The second state on the other hand was illustrated (by the respondents) as having access to relief but receiving inadequate care.

## Discussion

UTI is fairly common among both males and females. In fact, there has been no established trend that can describe or pinpoint what age group suffers from the highest prevalence rates of UTI. However, this as well as other researches has proven that UTI does not only lead to an impaired physical and medical condition but an impaired social and emotional health status as well, as evidenced by the two themes identified in the research. This was, in fact, a somewhat similar finding obtained in other researches about UTI in women .

## Global Issues

For starters, UTI, based on its prevalence rate alone, can already be considered as a global issue. According to an article published in Dis Mon, UTI accounts for at least 7 million healthcare office visits and 1 million emergency department visits resulting to more than 100, 000 hospitalizations annually . Every hospital visit carries a certain economic cost and in fact in this case, it has been proven that UTI among older women at least, also resulted to some emotional and social damages. Therefore, health and medical policy makers must make it a point to improve UTI prevention programs so that fewer patients can suffer from the economic, physical, emotional, and social costs of being diagnosed with the said condition.

## References

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