Conducting a physical assessment

Health & Medicine, Nursing



A PHYSICAL ASSESSMENT (On a Selected Client over the Lifespan) of (affiliation) Introduction The client I had chosen is Mr. Smith Black, who is now 58 years old, born in the South, male black American, divorced and now single; he has been recently retired from his 30-year job and living alone by himself, subsisting on his government Social Security pension. He is staying in an assisted-living retirement facility, enjoys a few sports like bowling and chess, goes out in a while for shopping and other activities of daily living (ADL) to while away his time. He keeps in touch with his extended family of grandchildren only occasionally. His support system consists mainly of his new-found friends at the same seniors facility, including those much older than him and who may have slightly different viewpoints on life and on other more important matters. His attitude is generally positive, looking to enjoy the rest of his life in a guiet manner.

Discussion

In this portion of the paper, the client is assessed based on a variety of factors which can affect his physical, emotional and mental health, either positively or negatively. Each factor is a reflection of how this factor impacts on a person throughout a certain period in his life.

Two social factors – the first is making new friends at the seniors facility, which is quite a positive impact and the other factor is engagement in various leisure activities such as playing games of bowling or chess. Bowling is a relatively mild physical activity, while chess stimulates the brain and helps prevent or delay mental ailments, like Alzheimers or dementia. Any social or mild physical activity is encouraged to keep the client fit, as a potential nursing diagnosis.

Two cultural factors – the client is not a native English speaker, and therefore speaks the dialect of his birth or his mother tongue. His English language proficiency skills is average, so he longs for people who can speak his own language. He also feels homesick at times, and he wants a nurse assigned who speaks the same language, as it can affect health (Andrews & Boyle. 2008, p. 265). The impact of this inability to return before he dies is negative, causing sadness or depression. In his old country, smoking is generally considered acceptable, especially among the males. It has a negative impact on his health as he had smoked for decades; he stopped smoking recently. An actual nursing diagnosis is to make smoking cessation a permanent fixture.

Two economic factors – the client is well provided for, considering his children are well off and working in good paying jobs. Besides, he also has an adequate pension, augmented by a private savings plan while he was still actively working. This positively impacts on his mental or emotional health, as he does not have to worry about financial matters, such as buying medicine.

Two political factors – the client is considered as a liberal democrat, and he is strongly in favor of relaxed immigration rules for new would-be immigrants to the country, to benefit like he did many years ago. The fight for equal access to facilities like education or in public housing consumes him to a certain point, and causes his blood pressure to shoot up when someone strikes a discussion or debate on these sensitive topics. He is usually given the prescribed medicines for hypertension whenever this happens. Political views and behaviors can have an impact on stress, health, levels of anxiety,

etc. (Peterson, 1990, p. 84) like support for social change or advocacy.

Conclusion

Living in retirement requires changes in viewpoints and perspectives, what Erikson had termed as the eight and last stage in the complete life cycle or entire lifespan (Gines, 1998, p. 23) which translates into resignation of mortality and acceptance of many bodily ailments and aches. It is a matter of having the right frame of mind and a positive attitude; see crisis as turning point.

References

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