

# The pico question

[Health & Medicine, Nursing](#)



PICO QUESTION IN NURSING (A work for Nursing) of (affiliation) Location of  
PICO QUESTION IN NURSING

The patient population of interest (P) are diabetic patients. In this case, the patient is having his blood sugar tested because it is very high for his age.

The question is: “ Why is this particular patient already receiving medications for diabetes? What happens if the patient will not be given diabetes medications but instead just undertakes some lifestyle changes? These can include avoiding sweet or sugary food such as ice cream and cakes (to include soft drinks), stop smoking, and engage in more physical activities like walking daily or go jogging at least once a week?” Moreover, a collateral question is: “ What happens if the patient is given another kind of diabetes medication and undertakes the lifestyle changes as suggested earlier?” Is his diabetes Type I or Type II to know if the correct medications are given? (Campbell & White, 2003).

The intervention or indicator or the area of interest (I) will be in managing the effects of diabetes since diabetes is a chronic lifestyle disease and hence incurable and progressive. There is a need to check first if it is Type I or Type II so the proper interventions can be implemented. If the type of diabetes is now known, then the medication can be tailor-fitted to the patient in his particular case, depending on the circumstances that triggered his diabetes in the first place since there are risk factors to the onset of diabetes. The question is: “ If it is Type I, then is it juvenile diabetes (affecting around 5% of the general population) as diagnosed among children and young adults” (American Diabetes Association, 2014). The key will be to adopt a twin approach to the management of this type of diabetes using hormone therapy

(injectable insulin) together with the changes in diet (avoidance of sugary foods and drinks) and increased physical activities together with constant monitoring of possible hyperglycemia (high blood glucose) or probable low blood glucose (hypoglycemia) as an adverse reaction to the insulin hormone treatment or therapy.

For the purpose of comparison and control (C) the diabetic patients are divided into their type of diabetes and then subdivided again into smaller groups based on their knowledge of diabetes (if the patients know what type of diabetes they have and what the treatments are there). While the general knowledge is that diabetes is caused by too much sugar, there is little literacy among diabetic patients on what interventions are available for them, how to avoid certain foods to prevent worsening the effects of diabetes, and how to live long and useful lives through proper management despite diabetes being a lifelong ailment (Gerrish & Lacey, 2013). Question: “ How much do these patients know about diabetes and how accurate is their knowledge based on the source of their information?” Did these patients research on their own or someone told them?

For the outcome of this research, the question is: “ Did the diabetic patients knowledge of their ailment improved or deepened by a literacy campaign to disseminate more information on the risk factors (etiology) of diabetes, how to manage their ailment, and what type of drugs or medications are suitable for the type of diabetes they have?” The outcome of interest (O) can be determined by using a survey or questionnaire for patients to fill out on diabetes (Bradley, 2013).

To reiterate, the PICO can have an element added which is time, to make it

## PICOT:

P – population of interest are patients suffering from all types of diabetes (15 or more)

I – indicator or interest area is on patients knowledge of diabetes, etiology, treatments

C – comparison or control group will reveal the level of diabetes knowledge among the patients although there is no direct correlation between age of onset and level of this knowledge. Other confounding factors include educational attainment, social status, and economic level.

O – outcome of interest will be the level of diabetes knowledge at the start of research and then compared with the survey results at the end of this research project to determine if the knowledge (etiology, treatment regimen, lifestyle changes, insulin, etc.) had improved or not.

T – time involved will be on how long it takes for patients to absorb new knowledge of diabetes as based on an educational or literacy campaign about this chronic lifestyle ailment. The patients should know more about diabetes in a matter of days or weeks and at the end should be able to monitor their blood sugar levels, identify symptoms of hyperglycemia and hypoglycemia.

## References

American Diabetes Association (2014). Type I diabetes. Retrieved May 24, 2014 from [http://www. diabetes. org/diabetes-basics/type-1/](http://www.diabetes.org/diabetes-basics/type-1/)

Bradley, C. (2013). Handbook of psychology and diabetes: A guide to psychological measurement in diabetes research and practice. New York, NY, USA: Routledge.

Campbell, R. K. & White, J. R. (2003). Medications for the treatment of diabetes. Ann Arbor, MI, USA: University of Michigan Press.

Gerrish, K. & Lacey, A. (2013). The research process in nursing. Hoboken, NJ, USA: John Wiley & Sons, Incorporated.

Due: May 25, 2014 @ 9: 00 p. m.