

# [Gordon’s functional health patterns assessment](https://assignbuster.com/gordons-functional-health-patterns-assessment/)

* Lalita bhandari

## Overall Introduction:

I am presenting here my overall health assessment by using the Gordon’s functional health patterns. Then, my stress is presented as focused assessment. This part of assessment assist me in knowing the level of stress while the internet source help me in gaining more knowledge about causes , effects of stress in normal health status and the methods to reduce the stress or its management. Finally essay on the health promotion is presented at the last.

## Part 1: Self Health Assessment and plan

Functional Health Pattern (Gordon)

Biographical Data

Name: Lalita Bhandari

Address: 3/5 Danica Ct., Kearneys Spring

Date of Birth: 13 th Feb. 1992

Place: Nepal

Age: 22 years

Gender: Female

Occupation: Student

Marital status: Single

Qualification: Bachelor in nursing (ongoing)

Contact number: 0404473722

Height: 162 cm.

Weight: 60 kg.

* Health perception and management pattern:
* Past health history: No history of any chronic illness
* Present condition: Stress due to study workload and homesickness

-Immunized all the vaccines which include tuberculosis, all three doses of Diphtheria, Pertusis and Tetanus, polio, measles, BCG, hepatitis and Rubella.

-No habit of alcohol consumption, smoking and chewing of tobacco and no use of other injectable drugs.

* Nutritional-metabolic pattern:
* Good appetite
* Food intake: 2-3 times a day and many snacks
* No any food allergies
* Fluid intake: 3-4 liters of water per day
* Have no difficulties with eating and swallowing
* Vitals (at the time of doing assignment)
* Temperature: 36. 8 deg. centigrade
* Pulse: 74/min.
* Respiration: 78/min
* Blood Pressure: 110/60 mm of Hg.
* Height: 162 cm.
* Weight: 60 kg.

But sometimes get disturbed with stress.

* Elimination pattern
* Bowel: regular bowel at least once daily
* Bladder: normal frequency of menstruation and no problem associated with bladder or urination
* Activity-Exercise pattern
* No planned routine for regular exercise regime
* Depends upon mood and only on leisure time but rare
* Sleep and rest pattern
* Normally no problem of insomnia
* Have 5-6 hours of sleeping pattern
* Never use of any sleeping aids and sedatives to rest

But sometimes, when I get stress, I suffer from insomnia

* Cognitive-Perceptual patterns
* Good sensory and auditory adequacy
* No difficulties in learning
* Good memory
* Oriented
* Self-Perception and self concept patterns
* I am kind, helpful and soft-hearted
* Show positive attitudes towards others
* Respect others feelings

But sometimes I feel losing hope when nobody cares.

* Roles and relationship pattern
* Family life: Recently I live with my friends as a family. I have responsibility towards my parents as a daughter and sister. I can cope with the difficulties that arise among family members and have good bond among all family members.
* Student life: Being a student, I have responsibility towards my studies. As with the case with most of international students I need to cope with various level of difficulties like stress, anxiety and workload.
* Coping-Stress tolerance pattern
* New environment, new face, new rules, new study patterns make me stress. always listen to songs, watch pictures/photos of my cell and also talk to my close friend and family. If the stress is too severe and cannot be controlled, I cry silently and let the stress burst out with tears and feel like relaxed then after.
* Values-Beliefs pattern
* Cultural and religious beliefs
* Goal set to be a qualified and dedicated Registered Nurse
* Punctual, obedient and hardworking
* Never give up and learn from every mistake and move forward

## Part B: Focused Assessment

While performing self health assessment, I found some problems in my behavior, which is mainly caused by stress due to new environment, new place, new rules and regulation. Study and distance between me and my family are the other factors that lead to stress. In this focused assessment, I am focusing in assessing level of stress.

I browse internet to gain more knowledge on my stress level. I assessed my stress level using “ life change index scale/ The Stress Test”, written by Thomas H. Holmes and Richard H. Rahel. This stress test has three different rows including event, impact score and my score. As event adds up, there occurs increase in score. The higher the score, the chance of becoming ill will also be higher and also the change of returning back to normal health will decrease.

LIFE CHANGE INDEX SCALE : THE STRESS TEST

|  |  |  |
| --- | --- | --- |
| Event | Impact Score | My Score |
| Death of spouse | 100 |  |
| Divorce | 73 |  |
| Marital Separation | 65 |  |
| Jail Term | 63 |  |
| Death of close family member | 63 |  |
| Personal injury or illness | 53 |  |
| Marriage | 50 |  |
| Fired at work | 47 |  |
| Marital reconciliation | 45 |  |
| Retirement | 45 |  |
| Change in health of family member | 44 |  |
| Pregnancy | 40 |  |
| Sex difficulties | 39 |  |
| Gain of a new family member | 39 |  |
| Business readjustment | 39 |  |
| Change in financial state | 38 | 38 |
| Death of a close friend | 37 |  |
| Change to a different line of work | 36 |  |
| Change in number of arguments with spouse | 35 |  |
| Mortgage over $20, 000 | 31 |  |
| Foreclosure of mortgage or loan | 30 |  |
| Change in responsibilities at work | 29 |  |
| Son or daughter leaving home | 29 |  |
| Trouble with in laws | 29 |  |
| Outstanding personal achievement | 28 |  |
| Spouse begins or stop work | 26 |  |
| Begin or end school | 26 | 26 |
| Change in living conditions | 25 |  |
| Revisions of personal habits | 24 |  |
| Trouble with boss | 23 |  |
| Change in work hours or conditions | 20 | 20 |
| Change in residence | 20 |  |
| Change in schools | 20 |  |
| Change in recreations | 19 |  |
| Change in church activities | 19 |  |
| Change in social activities | 19 |  |
| Mortgage or loan less than $20, 000 | 17 |  |
| Change in sleeping habits | 16 | 16 |
| Change in number of family get-togethers | 15 |  |
| Change in eating habits | 15 |  |
| Vacation | 13 |  |
| Christmas approaching | 12 |  |
| Minor violation of the law | 11 |  |
| Total |  | 100 |

Life Change Units Likelihood Of Illness In Near Future

|  |  |
| --- | --- |
| Life change units | Likelihood Of Illness In Near Future |
| 300+ | about 80 percent |
| 150-299 | about 50 percent |
| less than 150 | about 30 percent |

According to the score interpretation presented above in the table, my level of score is 100 which is less than 150 so I have less risk of illness in my near future. In this way Homes and Rahes stress life change index scale helps me to assess my level of stress and help me in reducing the stress and promote my health.

## References

Holmes, T. H., & Rahe, R. H. (1967). The social readjustment rating scale . Journal of psychosomatic research, 11(2), 213-218.

Retrieved fromhttp://www. dartmouth. edu/~eap/library/lifechangestresstest. pdf

## Part 3 Internet Sources

While doing my individual self assessment, i determine that stress is the main cause for detoriating my healthy living and daily activities. For promoting my own health, I have selected two internet sources to reduce my stress. As per the source, i came to know that stress is determined as the physical reaction to several events of our life in our daily way of living. Both the sources provide brief information about the stress, causes, management and technique to relief or cope with the stress. According to the helpguide. org, “ stress is a normal physical response to events that make you feel threaened or upset balanc e in some ways”. Also with the help of the source i came to know that stress have both merits and demerits . These both explained about the stress and mainly focused on various strategies for stress management which include 4As-Avoid unnecessary stress , Alter the situation, Adapt the streesor and Accept the things cannot be changed. Similarly the article prepared by University of South Australia also has been presented with more information about the management of stress. This source focuses mainly in different strategies of managing stress according to our body, mind, thinking and behaviour.

As both the sources have the name of the author with the date and name of publication with more information , i found these are the reliable and trustworthy for me. I found both the sources important and informative in handling with the stress.

## References :

1. Managing stress Monday (2013). Retrieved April 22, 2013, from

http://w3. unisa. edu. au/counsellingservices/wellbeing/stress. asp

1. Smith, M., Segal, R., Segal, J. (2013). Stress Symptoms, signs and causes. Retrieved

http://www. helpguide. org/mental/stress\_signs. htm

## Part 4. Health Promotion Essay

Health is considered to be the precious wealth of an individual. It is an important aspect of our life. According to the definition provided by World Health Organization, “ Health promotion is the process of enabling people either individually or in group like community to increase control over, and to improve their health” as cited by Selekman,( 2006). Health is affected by various factors so that to promote the health a teamwork is required between health personal, community and other different sectors. Being a health person, Nurses play vital role for accessing the health of patients, identify their health needs and encourage them to promote their health in an effective way. This essay explains about the problems in student nurses health and the programs to promote their health.

Nurses are the key persons to promote the health. They are well experienced either with the knowledge they gain or exposing with the patient of different health condition. According to Dempsey(2009), “ Health promotion model is important for an individual to promote their health”. . According to Mary, Sally and Kathleen (2011) , the student nurse are known as the main person to identify health issues where low school performance and change in health status are found more common , as cited by American Academy of Pediatrics Council on School Health (2008). This explains that the students are found to be more stressed which causes great changes in academic achievement and also their health status will detoriate. The student nurse may face problem like difficulty in identifying the problem in their clinical placement , sometimes hard even to understand the medical term. As per Fethiye and Fatos(2009), there are numerous factors that causes negative influence on decision making and nursing practices such as individual variables such as personal character traits and value , lack of knowledge and sensitivity about ethics and patients rights , limited autonomy and unsatisfactory working .

There are different approaches to health promotion and different health promotion model are in use. Health promotion model include characteristics models to promote environment where healthy decisions can be made about attaining high standard lifestyles reducing. According to Jennifer , fran and janat (2013) explain that the health-promoting behaviors of nursing students might be the key factor for their academic success and also facilitate them for post graduate practices . the health promotion behavior includes change in lifestyle , adjustment with new environment of study as well as hospital and development o, lifestyle, beliefs and thoughts, motivation health and promoting behavior. Practicing nurse can use these health f strength to cope with various people. According to Chambers and Thompson(2009), “ empowerment is the other main focus on health promotion and participate” The student nurses should be encouraged to promote their health, change their behavior and also motivate them in changing their lifestyle and behavior and also reduce stress by avoiding , adapting the stressor and accepting the changes .

At conclusion, there are many factors that cause stress in the student life of the nurses which causes problem in their health. There are many reasons to promote health. Encouragement helps nursing student to promote their health by brining change in their lifestyle

Overall conclusion

I have done my own self assessment with stress as a focused assessment. I found stress as a main factor that chauses change in my normal health status. Finally the essay on health promotion is presented at list of references the end of the assignment.

## List of References :

1. Baisch, M. J., Lundeen, S. P., & Murphy, M. (2011). Evidence-Based Research on the Value of School Nurses in an Urban School System. Journal Of School Health, 81(2), 74-80. doi: 10. 1111/j. 1746-1561. 2010. 00563. x

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1. Bektas, M., & Ozturk, C. (2008). Effect of health promotion education on presence of positive health behaviors, level of anxiety and self-concept: Social Behavior & Personality: An International Journal, 36(5), 681-690. doi: 10. 2224/sbp. 2008. 36. 5. 681

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1. Bryer, J., Cherkis, F., & Raman, J. (2013). Health-Promotion Behaviors of Undergraduate Nursing Students: A Survey Analysis. Nursing Education Perspectives, 34(6), 410-415. doi: 10. 5480/11-614 RERIEVED FROMhttp://web. a. ebscohost. com. ezproxy. usq. edu. au/ehost/pdfviewer/pdfviewer? sid= 394eddc7-bbd1-4e40-9b94-3546e235556b%40sessionmgr4004&vid= 1&hid= 4212
2. Dempsey, J., French , J., Hillege, S., &Wilson, V.(2009) . Fundamental of Nursing &midwifery: A person centered approach to care,(5th ed). Lippincott Williams &wilkins, broadway, NWS
3. Erdil, F., & Korkmaz, F. (2009). ETHICAL PROBLEMS OBSERVED BY STUDENT NURSES. Nursing Ethics, 16(5), 589-598
4. Holmes, T. H., & Rahe, R. H. (1967). The social readjustment rating scale. Journal of psychosomatic research, 11(2), 213-218.

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1. Managing stress Monday (2013). Retrieved April 22, 2013, from

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1. Smith, M., Segal, R., Segal, J. (2013). Stress Symptoms, signs and causes. Retrieved

http://www. helpguide. org/mental/stress\_signs. htm

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Student Name | Student Number |  |  |  |  |  |  |  |  |  |
| NUR1200: Concepts in Patient Care |  |  |  |  |  |  |  |  |  |  |
| Assignment: Portfolio of Health assessment / Health promotion marks: 20 (Weight 20%) |  |  |  |  |  |  |  |  |  |  |
| Part One | 0 – . 5 | 1- 2 | 2. 5 – 3 |  |  |  |  |  |  |  |
| Self-Health Assessment | Absent or minimal health data  No framework  Surface approach only  Absent or minimal summary or analysis  Material is presented or written poorly | Data is logically presented but is limited in scope  Utilises and references a framework  Some areas of assessment could be expanded more | Comprehensive assessment includes bio/ psycho/ social parameters  Interprets health status  Assesses and Analyses data | /3 |  |  |  |  |  |  |
| Part Two | 0 – . 5 | 1-1. 5 | 2 |  |  |  |  |  |  |  |
| Focussed assessment | Focussed Health issue does not relate to student’s health assessment in Part 1  No resource(s) used  Minimalanalysis/interpretation  Material is presented or written poorly | Focus is limited in depth  Resource used for assessment  Lacks clarity in focus  Lacks clarity in writing | Comprehensive  Interprets health status  Utilizes and references resource(s)  Analyses data  Organized presentation | /2 |  |  |  |  |  |  |
| Part three: | 0 | . 5 | 1 |  |  |  |  |  |  |  |
| Health resource  Internet Resources (two) | Source not cited  Does not state the health topic being addressed  No analysis  No comment regarding reliability | Includes in-text or other means of citing internet sites  Surface critique only  Comments on reliability but could have more depth | Analysis/critique regarding usefulness of sources  Insightful comment(s) regarding reliability/validity of sources | /1 |  |  |  |  |  |  |
| Part four: Essay section |  |  | | |  |  |  |  |  |  |
| Demonstrates knowledge related to Health promotion | 0 | 1 | 2-3 | 4 |  |  |  |  |  |  |
| Paper is disjointed,  Paper is not related to health promotion | Discussion is a description of published work only – minimal explanation of Health Promotion | Some health promotion or strategies are mentioned (this will vary depending on theme chosen) | Demonstrates a clear articulation of health promotion within chosen topic | /4 |  |  |  |  |  |  |
| Use of theme | 0 | . 5-1 | 1. 5 | 2 |  |  |  |  |  |  |
| Does not establish a context for the issue  Material strays into tangents | States theme well but points are not supportive of this  Some points do not relate to theme | States theme but points are not consistently convincing in support of the theme. | Utilises theme well – all points support this  Theme is clear | /2 |  |  |  |  |  |  |
| Demonstrates ability to collate knowledge | 0 | . 5-1 | 1. 5 | 2 |  |  |  |  |  |  |
| Material is:   * not cohesive, * does not answer theme * is irrelevant to the assigned topic | Assignment is a listing of quotes or paraphrased material without synthesis of material for the reader | Student is able to synthesize knowledge from several sources to substantiate a logical representation of the theme. | Student is able to consistently and effectively synthesise knowledge and Strategy (ies) or factors presented as health promotion which are supported as evidence for practice from the literature. | /2 |  |  |  |  |  |  |
| Use of literature | 0 | 0 | . 5 | 1 |  |  |  |  |  |  |
| Literature is inappropriate, limited or out of date | Content is not well supported from the literature | Uses some literature but not integrated, relevant or purposeful. | Utilizes at least four sources from literature or texts which are relevant, academic and appropriate | /1 |  |  |  |  |  |  |
| Written expression  Assignment reads as unified whole  Intro/  Conclusion | 0 | . 5-1 | 1. 5 | 2 |  |  |  |  |  |  |
| Lists material – does not collate  Reader must re-read sections to understand content.  Paragraphs move into tangents  Absent introduction – does not describe the material to follow  Inappropriate or absent concluding remarks | Written expression lacks consistency.  Description only –analysis could be developed more  Lists material – does not collate  Poor introduction – does not set paper up or establish a context  Poorly written conclusion | Written expression lacks consistency and does not demonstrate a high academic standard.  Intro present but not effective in leading into paper  Conclusion present but ineffective/ introduces new material | High standard of written expression.  Language is appropriate and of a high academic standard.  Well-written and well-structured paragraphs  Assignment reads as a unified whole  Introduces essay section, outlines points to follow  Concludes essay (briefly) | /2 |  |  |  |  |  |  |
| Technicalities of writing (grammar/  spelling) | 0 | . 5 | 1 |  |  |  |  |  |  |  |
| Uses dot points.  Changes tenses.  Changes ‘ person’ (switches from he/she to ‘ you’).  Uses first person – (okay in parts 1-3 but not Part 4)  Incomplete sentences Misspelled words  Run on sentences  Inappropriate abbreviations | Uses colloquial language  Poor paragraph structure  Paragraphs move into tangential material  Some inconsistencies in grammar and spelling | No breaches of grammar or spelling.  Appropriate use of:   * Punctuation * tenses * person (‘ I’, ‘ you’ ‘ he/she’) | /1 |  | |  |  |  |  |  |
| Referencing  In-text | 0 | . 5 | 1 |  |  |  |  |  |  |  |
| Incorrect acknowledgement of cited material.  Inappropriate paraphrasing from published literature’  Incorrect secondary citation;  Incorrect use of ‘ et. al.’  Format not consistent with APA  Assignment utilizes material from sources without acknowledging source. | Some inconsistencies with style of in-text referencing (those in the body of the paper)  Inconsistencies with reference list  Moderate issues identified with referencing | Consistently correct in-text referencing as per USQ guidelines.  Correct use of APA Referencing.  Correct expression of secondary citations.  Assignment acknowledges source of all referenced materials. | /1 |  | |  |  |  |  |  |
| Reference list | 0 | . 5 | 1 |  |  |  |  |  |  |  |
| Reference List is not in alphabetical order.  Does not maintain APA style  Uses references that are not in body of paper  Includes references that are not in body of paper  Punctuation errors in reference list | Electronically accessed journals are not written correctly  Occasional Punctuation errors in reference list | References are consistently written using APA and the correct format for the type of source | /1 |  | |  |  |  |  |  |
|  |  | | | | |  |  |  |  |  |
| Negative marking:  Significantly Over/under word count (≥ 10%) (minus 1 mark)  Did not submit marking guide on EASE (minus 1 mark) | Neg: |  |  | | |  |  |  |  |  |
| MARKS LOST FOR LATE PENALTY (IF RELEVANT – 5 % per business day) |  |  |  | | |  |  |  |  |  |
| FINAL MARK ( MARKS AWARDED LESS MARKS LOST) |  |  |  | | |  |  |  |  |  |
| Marker: |  |  |  | | |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |

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