

# A reflective clinical assignment nursing essay



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The students questioning the practice of controlling infections in the community arise due to the infections seeming to be a less significant part in the policy formation. It is common in some hospitals for only patients in admission are thought to have MRSA are the only ones who will undergo screening. This is in the work of Simone, et al. (2005). This shows that the hospitals main concentration is on patients they see as threats to spreading the infections. I think the tests should be done for all patients in the hospital and the people who visit the hospitals as a compulsory mechanism to detect the infection early.

Dobzhansky (1973, p. 67) states that, “ Nothing in biology makes sense except in the light of evolution”. Thus, they should get funds to conduct research on various infections. There are similar approaches done for other infections like the H1N1 flue. There was a case of H1N1 in 2009, in America that gave them a scare because they were not in preparation for the disease. This is in the work of Fridskin (2005). This shows that they were not ready with the right policies to eliminate the infection. The topic is indeed a continuation of the various explorations of infections in the country. This is because there are various articles and journals providing extensive information on various approaches on treating infections.

## Section 2

The literature does relate to the main topic of infection in a direct way by providing a method to deal with the health care infections. For example, this Antiseptic technique ensures that individuals live in an environment free of microscopic pathogens. The department of Health states that, “...healthcare

professionals must apply rigorously and consistently the measures known to be effective in reducing the risk of healthcare-associated infection (HCAI) and that clinical team must demonstrate high standards of aseptic technique”.

The antiseptic method is made up of two methods that include surgical aseptic and aseptic non-touch technique. The two methods allow control of infection in hospitals as well as outside the hospital. There is the aspect of reducing infection by using comprehensive methods. This means that not only the hospitals should be aware of the dangers of infections but also the public at large.

I think, it is possible that, patients who undergo surgery to get noscomical MRSA. This is in support of Fridiskin (2005). Thus, the diseases that cause the infection do not always originate from the hospitals but the general public is prone to the diseases as much as hospital patients. In conducting my study, it was evident that the literature does indeed consider the aspect of getting a better understanding of infection. My study does provide grounds for the statistical data in numbers those with infections. There is also the aspect of the literature emphasizing the inclusion of new agents in the process of research. This is as a result of adapting to the current change state of viruses and the discovery of more elusive viruses.

There are many cases where Gram-positive species have become increasingly resistant to previously effective medicines. This is in the work of Murugan and Peter (2004). The topic understands that in turn to be able to be critical in reflecting one has to understand first that there are new methods available.

According to me the literatures are in agreement with infections taking over the community and hospitals at large. This is as the following aspects of the literature speak the type of infections. This is in identifying the infection of it is MRSA (Methicillin-resistant *S. aureus*) or *Pseudomonas aeruginosa*. This helps in better treatment of the infection, unlike if the knowledge on the infection was absent. There is also the aspect of understanding the gravity of the infections. That is that the statistics show that 30% of the population fall victims to the MRSA infections when they are carriers without knowing.

Simone, et al. (2005, p. 65) state that, " During the 1950s hospital strains of *S. aureus* showed increasing resistance to penicillin". This showing that treatment of infections has to gain improvement by introducing new drugs and treatment methods. This could be made possible by the researchers reflecting on how the infection is able to mutate and flourish in the community. There is also the facet of having the knowledge on how to treat infections. The literature also acknowledges that not all schools of thought are on the same page.

The methods that I may decide to use may be in support of one group and controversial to the other. This is in the work of Simone, et al. (2005). In this case, one school proposes that MRSA eradication should be done in terms of colonization while the other says that colonization is not an effective method. This is an essential aspect of the programs suitable to reduce the prevalence of infection. Thus, both the school of thoughts should be put into consideration, and the course of action should weigh which school they support or integration of both. In my process of removing infections in the community and hospitals, there are challenges. These are in terms of the <https://assignbuster.com/a-reflective-clinical-assignment-nursing-essay/>

circumstances as the literature suggests. The environment where the infection originates dictates how the methods in use will be effective. For example, if screening is at the hospital the infection will gain identification.

The opinion on the literature in provision is that it tackles the main aspects of the infections providing new methods and remedies. It includes all the individuals from who are prone to infections, which is essential in the study. This is in support of Ruddy (2001). This ensures that the wealth of information is vast and highly useful in combating the diseases. There are statistical data that help in better understanding of the infections coverage. The literature covers MRSA in a broad manner from what it is to viable treatments. Thus, the literature is a valuable backbone for further research on infection and adapting better therapeutic methods. There is research done on the aseptic methods of treating infections, and it finds that, Hart (2007, p. 65) states, “ The importance of adopting an ANTT by all healthcare workers for all patients should be emphasized”. This is as a result of studies that show that aseptic non-touch techniques are viable this is because they include the households.

### Section 3

The literature shows that the community and hospital are on the way to adopting change. Simone, et al. (2005, p. 85) states that, “...only patients admitted from hospital wards where MRSA is known to be present are screened for MRSA prior to transfer. Hence the investigators were keen to study patients transferred from settings other than this”. The medical

system has come to the realization that other individuals outside the hospital are indeed carriers of infections.

Various authors are making it known that the mutation of infections is detrimental. That the hospital needs to, set funds aside to aid, in researching on remedies to combat infections. Fedtke (2004, p. 24) states that, "...the bacterium bolsters its defenses against antibacterial attack". The bacteria do evolve at a much faster rate faster than humans do. Thus, there should be constructive research progressing in order to even the odds. The techniques in use, in the literature, also encourage individuals to adapt to the new therapies and technique. For example, the Newer Treatment Options for Skin and Soft Tissue Infections.

These changes can gain realization by the hospital and community. In the case of the evolution and the rapid change of the bacteria, the possibility is high. There is the availability of up to date technology that will aid in the research of the various bacteria. Nevertheless, even though the bacteria mutate fast the technology is also changing rapidly. The data will also be made out in a clear and constructive way that will allow the flow of ideas on the various methods to eradicate infections.

It is true that rational antimicrobial and awareness of infection control measures is vital to avert the emergence of multidrug-resistant organisms. This is in support of Murugan and Peter (2004). The education system is also favorable as the clinical research courses are extensive thus a number of individuals can work together.

Fridkin (2005, p. 67) states that, “ In some American cities, for example, Baltimore and Atlanta, community-associated MRSA infections are now common and serious”. This shows that not only the patients in the hospital but the community fall victims to infections. Thus, it is easy to change the focus of the research. The policies that hospitals use should be consistent with the severity of most infections, for example, pneumonia. Pneumonia is an infection that attacks the larger population. In the past, it was not a major threat, but today it is. Susan (2007, p. 56) states that, “ Patients are at increased risk for either type of pneumonia”. Thus, medical systems in the hospitals should not hesitate to change the way they treat, diagnose and screen patients.

The three approaches in combat evolution focus change and adaptation are in the literature. Charleboiset (2004, p. 89) states that, “ Presumably patients and visitors export MRSA from the hospital to the community and vice versa”. This supports the notion that the focus should change and the community to be part of the research. Thus, new adoption of policies and medicines will be the way to go for eradication of the infections.

There is an area that the literature has not put finance. In this area of finance, the figures for the adoption of the various techniques are not present. Hence, the techniques and procedures will be difficult for implementation if the researcher does not have the numerical value estimates that the management requires.

The issues that arise at my level as the practitioner include the grasp of the knowledge. In the study, of the various infections, which are numerous, it is

tiresome and time consuming. This may deter the morale of the practitioner to produce results correctly and quickly.

The issues that may arise at the level of the organization may include efficiency. This is where the research undergoes judging according to the way it was done. That is if the research abides to the rules and if it is right.

The recommendation is that the hospitals should collaborate with each other in order for the research to be fruitful.

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