

NSS	<i>n</i>	<i>M</i> ± <i>SD</i>	Median (range)
Total NSS	297	35.1 ± 15.1	33.0 (4.0–81.0)
NSS subscales			
Death and Dying	307	7.0 ± 3.5	7.0 (0.0–20.0)
Performing procedures that patients experience as painful	316	1.5 ± 0.8	1.0 (0.0–3.0)
Feeling helpless in the case of a patient who fails to improve	316	1.3 ± 0.7	1.0 (0.0–3.0)
Listening or talking to a patient about his or her approaching death	314	0.8 ± 0.8	1.0 (0.0–3.0)
The death of a patient	314	1.0 ± 0.8	1.0 (0.0–3.0)
The death of patient with who you developed a close relationship	312	0.7 ± 0.7	1.0 (0.0–3.0)
Physician not being present when a patient dies	311	0.6 ± 0.8	1.0 (0.0–3.0)
Watching a patient suffer	313	1.2 ± 0.8	1.0 (0.0–3.0)
Conflict with Physicians	310	5.4 ± 2.6	5.0 (0.0–14.0)
Criticism by a physician	316	1.1 ± 0.7	1.0 (0.0–3.0)
Conflict with a physician	313	1.0 ± 0.7	1.0 (0.0–3.0)
Fear of making a mistake in treating a patient	314	1.3 ± 0.9	1.0 (0.0–3.0)
Disagreement concerning the treatment of a patient	311	1.0 ± 0.7	1.0 (0.0–3.0)
Making a decision concerning a patient when the physician is unavailable	314	1.0 ± 0.8	1.0 (0.0–3.0)
Inadequate Preparation	313	3.0 ± 1.8	3.0 (0.0–9.0)
Feeling inadequately prepared to help with the emotional needs of a patient's family	314	0.9 ± 0.7	1.0 (0.0–3.0)
Being asked a question by a patient for which I do not have a satisfactory answer	314	1.2 ± 0.7	1.0 (0.0–3.0)
Feeling inadequately prepared to help with the emotional needs of a patient	315	0.9 ± 0.7	1.0 (0.0–3.0)
Lack of Support	311	2.3 ± 2.3	2.0 (0.0–9.0)
Lack of an opportunity to talk openly with other unit personnel about problems on the unit	313	0.9 ± 0.9	1.0 (0.0–3.0)
Lack of an opportunity to share experiences and feelings with other personnel on the unit	313	0.8 ± 0.9	1.0 (0.0–3.0)
Lack of an opportunity to express to other personnel on the unit my negative feelings toward a patient	315	0.6 ± 0.8	0 (0.0–3.0)
Conflict with Other Nurses	313	3.9 ± 2.8	4.0 (0.0–13.0)
Conflict with a supervisor	316	0.6 ± 0.8	0.0 (0.0–3.0)
Floating to other units that are short-staffed	315	0.9 ± 0.9	1.0 (0.0–3.0)
Difficulty in working with a particular nurse (or nurses) outside the unit	315	0.8 ± 0.8	1.0 (0.0–3.0)
Criticism by a supervisor	313	0.6 ± 0.8	0.0 (0.0–3.0)
Difficulty working with a particular nurse (or nurses) on the unit	315	1.0 ± 0.8	1.0 (0.0–3.0)
Work Load	312	8.7 ± 3.8	8.0 (1.0–18.0)
Breakdown of a computer	316	1.4 ± 0.7	1.0 (0.0–3.0)
Unpredictable staffing and scheduling	315	1.5 ± 1.0	1.0 (0.0–3.0)
Too many nonnursing tasks required, such as clerical work	315	1.5 ± 1.0	1.0 (0.0–3.0)
Not enough time to provide emotional support to a patient	313	1.5 ± 0.9	1.0 (0.0–3.0)
Not enough time to complete all of my nursing tasks	314	1.4 ± 0.8	1.0 (0.0–3.0)
Not enough staff to adequately cover the unit	315	1.4 ± 0.9	1.0 (0.0–3.0)
Uncertainty Concerning Treatment	314	4.9 ± 2.8	5.0 (0.0–13.0)
Inadequate information from a physician regarding the medical condition of a patient	315	1.1 ± 0.8	1.0 (0.0–3.0)
A physician ordering what appears to be inappropriate treatment for a patient	315	0.9 ± 0.7	1.0 (0.0–3.0)
A physician not being present during a medical emergency	315	0.8 ± 0.8	1.0 (0.0–3.0)
Not knowing what a patient or a patient's family ought to be told about the patient's condition and its treatment	314	1.1 ± 0.8	1.0 (0.0–3.0)
Uncertainty regarding the operation and functioning of specialized equipment	315	0.9 ± 0.7	1.0 (0.0–3.0)

Note. Respondents were asked how often they found the situations presented in the NSS to be stressful. Respondents answered each question on 4-point Likert scale where 0 = never, 1 = occasionally, 2 = frequently, and 3 = very frequently.

Nursing Stress Scale Tool

Michelle Croston, Ian Hodgson

A red circular graphic with a gradient, appearing as a stylized arrow or a partial circle, located to the right of the authors' names.

Nursing Stress Scale Tool:

Providing HIV Care: Lessons from the Field for Nurses and Healthcare Practitioners Michelle Croston, Ian Hodgson, 2021-05-05 This very first book helps nurses and healthcare practitioners working in the field of HIV care across Europe to have practical examples of how they could improve adapt their services to improve outcomes for people living with HIV It provides the reader with both knowledge on a variety of different HIV related topic areas and also helps them to translate this learning into a clinical setting The main focus of the book is to share best practice in HIV nursing with the aim of providing a practical guide from multiple countries to improve outcomes for people living with HIV The book also acts as a resource to healthcare practitioners who are interested in working in many places in the world or carrying out research in HIV care

Reviews on New Drug Targets in Age-Related Disorders Paul C. Guest, 2021-03-16 Aging is an inevitable part of life and is becoming a worldwide social economic and health problem due to the fact that an increasing proportion of individuals in the advanced age category have a higher probability of developing age related disorders New therapeutic approaches are still in need to decrease or slow the effects of such diseases in this aging society Advances in omic technologies such as genomics transcriptomics proteomics and metabolomics have significantly advanced our understanding of diseases in multiple medical areas It is hoped that emerging hits from these analyses might be prioritized for further screening as potential novel drug targets for increasing the human healthspan in line with the lifespan which will in turn lead to new therapeutic strategies and drug development projects by the pharmaceutical industry This new book presents a series of reviews describing studies which have resulted in the identification of potential new drug targets for age related disorders Much of this information has come from omic comparisons of healthy and disease states or from testing the effects of potential new therapeutic approaches Each chapter will be presented in the context of specific chronic diseases or different therapeutic strategies providing important information on disease mechanisms related to the aging process This book will be of interest to researchers in the areas of aging and chronic disease as well as clinical scientists physicians and major drug companies With contributors from Australia Brazil Canada France Germany India Iran Iraq South Africa South Korea Thailand Ukraine United Kingdom United States of America Uruguay and Vietnam this is a timely follow up to Guest's previous book *Reviews on New Drug Targets in Age Related Disorders*

Generating Middle Range Theory Callista Roy, 2013-08-28 As expected this book is complex but it is also engaging thought provoking and exciting because it helps nurses and other readers think deeply about meeting the needs of patients at their most vulnerable moments Score 94 4 Stars Doody's Medical Reviews Callista Roy one of nursing's leading theorists and creator of the widely used Roy Adaptation Model of Nursing presents a unique pathway for developing knowledge for nursing practice Her book distills the most relevant information from 200 published research studies to provide a roadmap for progressing from nursing research to middle range theory to optimum practice regimens It is based on tested knowledge clear evidence and refined caring

perspectives Step by step the text identifies and critiques research suited for developing cumulative knowledge for practice and uses the research to develop middle range theories that apply across all health care settings It then presents the evidence for practice for each middle range theory refocuses EBP within nursing knowledge and within defined levels of readiness for practice and recommends changes for practice based on evidence Grounded in the Roy Adaptation Model of Nursing the book provides a single conceptual basis for synthesis of research into middle range theories for use across all patient populations It clarifies ways to select research from one conceptual basis to build middle range theories how to classify evidence for practice by levels of readiness and recommend research based changes in practice The text includes quantitative and qualitative research designs and offers instruments to measure major concepts for implementation Also included are plentiful examples tables that display values across studies definitions of major terms and concepts and diagrams of concepts Supplementing the text is a faculty guide for using the text to teach critical thinking at multiple graduate levels and videos illuminating each section of the book Key Features Explains clearly how middle range theories grow from research Designed for implementation in practice Uses Roy s five core adaptation contexts as organizing themes coping changing life events loss chronic health condition and traumatic events Constitutes a seminal work from a pre eminent nursing theorist and educator Includes faculty guide and videos elucidating each section of the book

Occupational Risks of Healthcare Personnel Helena C. Maltezou,Caterina Ledda,Venerando Rapisarda,Begoña Martínez Jarreta,2022-12-15 **Cancer Care for Adolescents and Young Adults** Daniel Kelly,Faith Gibson,2008-04-30 Cancer in Adolescents and Young Adults is a practical guide to cancer care in adolescents and young adults It considers the impact of diagnosis on individuals and their families as well as examining the impact on the health professionals responsible for their care There are sections focussing on the adolescent s experience of cancer and ongoing care needs during treatment and on life after cancer including rehabilitation and palliative care Builds on the forthcoming NICE guidelines on Supportive Cancer Care for Children Young People and recent Department of Health guidelines policy initiatives Adopts an integrated inter professional approach Contains evidence based contributions from leading professionals in cancer care Cancer in Adolescents and Young Adults is an essential resource for all those involved with the provision of care and support for adolescents and young adults with cancer About the Editors Dr Daniel Kelly is Reader in Cancer Palliative Care Middlesex University London Dr Faith Gibson is Senior Lecturer in Children s Nursing Research Institute of Child Health Great Ormond Street Hospital and King s College London **Advances in Human Aspects of Healthcare** Vincent G. Duffy,2012-07-17 Now more than ever the design of systems and devices for effective and safe healthcare delivery has taken center stage And the importance of human factors and ergonomics in achieving this goal can t be ignored Underlining the utility of research in achieving effective design *Advances in Human Aspects of Healthcare* discusses how human factors and ergonomics principles can be applied to improve quality safety efficiency and effectiveness in patient care Topics include the design of work

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Nursing Interventions Gloria M. Bulechek, Joanne McCloskey Dochterman, 1999 The new edition of this AJN Book of the Year provides in depth research based discussions of the major interventions from the Nursing Interventions Classification NIC along with the associated NANDA Diagnoses and Nursing Outcomes Classification NOC for each intervention

Experiences and Challenges of Healthcare Professionals Russell Kabir, Ali Davod Parsa, S. M. Yasir Arafat, 2024-01-08

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understand the many aspects of psychiatric nursing today There are case studies a chapter on mind body spirit therapy and an integration of DSM IV categories throughout *Proceedings of the American Burn Association* American Burn Association. Meeting, **Comprehensive Psychiatric Nursing** Judith Haber,1997 This outstanding text and reference emphasizes the seamless continuity of psychiatric care as well as the variety of settings in which it is now provided As always your students get current and comprehensive information that is presented in a clear accessible visually stimulating format and is now more clinically relevant than ever For example the psychobiological bases of mental disorders and psychopharmacological interventions are now featured in a new chapter depicted in two exciting full color inserts and integrated throughout the book **Advances in Human Factors and Ergonomics 2012- 14 Volume Set** Gavriel Salvendy,Waldemar Karwowski,2012-08-06 With contributions from an international group of authors with diverse backgrounds this set comprises all fourteen volumes of the proceedings of the 4th AHFE Conference 21-25 July 2012 The set presents the latest research on current issues in Human Factors and Ergonomics It draws from an international panel that examines cross cultural differences design issues usability road and rail transportation aviation modeling and simulation and healthcare *NANDA International Nursing Diagnoses* T. Heather Herdman,Shigemi Kamitsuru,Camila Takao Lopes,2024-04-03 The quintessential guide to nursing diagnoses from NANDA I experts in new updated edition Fully updated and revised by editors T Heather Herdman Shigemi Kamitsuru and Camila Takao Lopes NANDA International Nursing Diagnoses Definitions and Classification 2024 2026 13th Edition is the definitive guide to nursing diagnoses as reviewed and approved by the NANDA International NANDA I Diagnosis Development Committee DDC In this new edition of a seminal text the editors have provided a more in depth discussion on diagnosis and its linkage to assessment using Kamitsuru's Tripartite Model of Nursing Practice to differentiate between interdependent interventions based on medical and organizational standards of care and autonomous nursing interventions based on nursing standards of care Functional Health Patterns are used as an assessment framework to guide nurses in collecting relevant data to drive accuracy in nursing diagnosis Ontology classification and taxonomy are described and the axial structure of our diagnoses which has seen significant revision is explained in detail An overview on all changes and revisions in the classification is provided along with updated research priorities and future foci for the Diagnosis Development Committee and the NANDA I Association Additional Key Updates 56 new nursing diagnoses and 123 revised diagnoses Revised diagnostic indicators to decrease ambiguity and improve clarity Updated Axes with consistent assignment of axis values to each diagnosis Assignment of US National Library of Medicine Medical Subject Headings MeSH terms to provide standardized definitions and ensure consistent understanding Revised level of evidence criteria to ensure future diagnoses remain at an appropriate level of evidence to represent the current strength of nursing knowledge Web based resources include reference lists for all new and revised diagnoses Rigorously updated and revised the new edition of this acclaimed text is a must have resource for all nursing students professional

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