

The International Classification for Nursing Practice (ICNP[®]) in the Nursing Consultation to the Puerperal Woman

REVIEW

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Abstract

Introduction: The International Classification for Nursing Practices (ICNP) articulated to the Systematization of Nursing Assistance (SNA) in the puerperal consultation is necessary in view of the importance of offering quality care for mother and child.

Objective: Discuss the contributions that ICNP[®] brings to the nursing consultation and the quality of care to the puerperal woman.

Method: This is a descriptive, qualitative study, the integrative review type, performed by the BDNF and LILACS databases.

Results: The databases returned 45 publications, but only 10 responded to the proposed objective of the study.

Discussion: The collected data were analyzed and point to the importance of conducting effective interventions for the monitoring of puerperal women and children. Another observed point was the deficit in the knowledge of nursing professionals on the ICNP.

Conclusion: Thus, one understands that using SNA and implementing ICNP enable the strengthening of the unified language, favoring

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the assistance in a universal way and, therefore, a better quality of health of the population.

Keywords

Nursing; Nursing Consultation; Puerperal.

Introduction

Supported by Law No. 7,498 of June 25, 1986, the nursing consultation is considered private of the nursing professional. That law came to consolidate the nursing consultation considered the main nurses' action to achieve the objectives of the institution and customers, the nursing consultation creates spaces for the work of nurses and contributes to improving the health of the population. [1]

In this sense, the nurse needs to recognize the consultation as the possibility of communicative dialogue, strengthening the relational and interpersonal bonds, for therapeutic ambience, thus validating the procedure, not just being a technical procedure. Therefore, the clients must interact with nurses, sharing their afflictions and doubts in accordance with their perception of the world.

Thus, systematization of nursing assistance (SNA) is a working tool that can significantly contribute to the quality of care, as it enables the planning of nursing actions directed to the real and potential needs of the individual, family or community. It serves as a link for communication between professionals, provided it is in accordance with reality and the needs of its users, thus providing a clear and objective communication between members of the healthcare team. [3]

Thus, nursing has sought the unification of language through various initiatives for the development of classifications for their professional practice. The International Classification for Nursing Practice

(ICNP[®]) represents the unifying framework of all systems to classify the elements of nursing practice (diagnosis, interventions and nursing outcomes) available in the area in professional domain. [4]

In this perspective, in Brazil, the Federal and Regional Nursing Councils have warned the category of the relevance of implementing the nursing consultation in vital cycles, especially after the consolidation of the Family Health Strategy (FHS) in Primary Health Care (PHC) in Brazilian municipalities. [5]

Corroborating those assumptions, through the return of the dyad to the health service and home visits, which should occur within 42 days after delivery, the FHS team performs the activities of health care of the puerperal woman and the newborn. Therefore, that step includes the involution of the woman's body after pregnancy and childbirth, and the period of greatest vulnerability to maternal and infant complications. [6]

In this sense, understanding the importance of implementing the nursing consultation to the puerperal woman based on assumptions of ICNP[®], one formulated the following research question: what are the contributions that ICNP[®] brings to the nursing consultation and the quality of care to the puerperal woman?

The nursing consultation is considered a key tool for health education because of the guidelines for disease prevention and promotion of mother and child health. Thus, there is a need to broaden the

participation and empowerment of women in the care of their health and their son's. [7]

Thus, the postpartum period is a period of uncertainty and risks, and, for those reasons, the nurse should have sensitivity and confidence to create the bond, identifying the needs of women, especially in the home environment, providing greater protection to the puerperal woman through complete assistance, such as some important factors: the history of the patient's life, the environment she lives in and her feelings. [8]

Thus, understanding the relevance of puerperal consultation in the establishment of mother and child's quality of life, this study aims to discuss the contributions that the ICNP® brings to the nursing consultation and the quality of care to the puerperal woman.

Method

This is an integrative review, which aims to gather and synthesize the data on a particular phenomenon. Therefore, it is necessary: definition of the objective; establishment of inclusion and exclusion criteria of articles; definition from the analysis of the results of the information to be extracted from selected articles; and presentation of the discussion and the results found. [9]

In order to guide the search, the following question arose: what are the contributions that ICNP® brings to the nursing consultation and the quality of care to the puerperal woman?

Data collection was performed through databases BDNF (Nursing Database) and LILACS (Latin American Literature in Health and the Caribbean Sciences), using the Health Sciences Descriptors: nursing consultation; puerperal woman; Nursing.

The inclusion criteria were articles available in English, Spanish and Portuguese, which discussed issues related to puerperal nursing consultation and complete online texts with free access. Thus, they excluded up publications that had duplications and were available in the form of summary and letters to the editor.

For the critical analysis of articles, one performed the reading, classifying the article per: database, year of publication, study design and main conclusions, presented in table format.

The used data were in accordance with the ethical principles, properly referenced when identifying the authors and other research sources, emphasizing the ethical rigor and intellectual property of the researched texts, regarding the use of the content and citation of parts of the consulted works.

Results

There were 45 publications, but only 10 responded to the proposed objective of the study. After analysis of the material, **Table 1** was prepared, covering database, year of publication, type of study and main conclusions.

Table 1. Distribution of the analyzed studies according to the database, year of publication, type of study and main conclusions.

Database	Year of Publication	Type of Study	Main Conclusions
BDNF	2013	Experience report.	Performed an experience report about the construction of guidelines for nursing consultations using the Nursing Diagnoses in view of the International Classification for Nursing Practice in Collective Health articulated to the Systematization of Nursing Assistance. Thus, the classification of practices is an important innovative activity in public health for research and teaching, as it reveals potentialities such as diagnosis and nursing interventions.

Database	Year of Publication	Type of Study	Main Conclusions
BDENF	2012	Qualitative.	Identified the reasons favoring the return of women to the postpartum consultation. Among the reasons that drove the deponents to return to the postpartum consultation, they highlighted the search for the welfare of the child, the feeling of gratitude and the receptiveness received during prenatal care. Thus, they recognized the puerperal consultation as a means to prevent diseases and promote the health of theirs and of the neonate.
	2013	Integrative review.	Identified in scientific publications the development initiatives and the use of the terminology subsets of ICNP®. In the meantime, the development and practical use of terminology subsets of ICNP® are still incipient despite the methodological process of those subsets being promising.
	2013	Qualitative.	Described the conceptions of nursing professionals on the nursing process in order to base the process of implementation of actions at the studied institution. Therefore, the study reinforces the importance of including members of the nursing team, in the implementation of the steps of the nursing process, and points out the challenge of facing the technician routines.
LILACS	2014	Qualitative.	Seize the contents of the social representations of puerperal women on health education in pregnancy and childbirth in primary health care. The representations of puerperal women on the health education are linked to institutional educational practices, especially the lectures, family and school education, community education. The traditional pedagogy prevails, with transmission of information, specific and widespread.
	2013	Qualitative	Described attributes of the organizational structure of postpartum care in the Family Health Strategy, from questions present in national health policy related to infrastructure, staff and care and management activities. Thus, there are limitations in the provision of nursing consultations, group education and postpartum oral contraceptive. There is not always material available for preventative cervical cancer and doctors in the units. Therefore, it is necessary to invest in improving the organizational structure for the improvement of the postpartum care quality.
	2014	Qualitative	Identified the care provided to women in the postpartum by nurses. The results show that, during the home visit, the nurse examined only the neonate. The guidelines were to care for the newborn and the use of oral contraceptives. Thus, one observed little surveillance focused on the health of the puerperal woman and attention directed almost exclusively to the child.
	2013	Qualitative	Understood the meaning attributed by women about postpartum and puerperal revision in the context of the Family Health Strategy. Thus, women attributed a meaning to the postpartum period and recognized the importance of rest, as well as the puerperal revision to prevent complications. In an interactional process, postpartum acquired meaning focused on the rest.
	2015	Methodological study.	The validation of the terms of the special language of nursing used in physical-motor rehabilitation, identified in records of rehabilitation nurses, mapping them to the terms of ICNP® 2.0. Therefore, the terms in ICNP® and those validated are part of a database of terms that is currently being used to build a subset of concepts for nursing in physical-motor rehabilitation.

Database	Year of Publication	Type of Study	Main Conclusions
LILACS	2013	Qualitative	Described the evolution of the International Classification for Nursing Practice (ICNP®), since the International Council of Nurses (ICN) took over, in 1989, the task of developing a classification of elements of professional practice (diagnoses, interventions and nursing outcomes), which had international scope.
	2013	Qualitative	The article presented the analysis of interfaces of the working process of the Family Health Strategy nurses in Santa Cruz/RN, Brazil. It was possible to observe that the establishment of the bond and the creation of commitment ties with co-responsibility between the professionals and the public are essential for achieving the purpose of family health strategy.

Discussion

One notices that, in the Primary Health Care (PHC), especially in units that provide the Family Health Strategy (FHS), nurses find ample space to develop their daily tasks through nursing consultation focused on vital cycle, on the request of routine laboratory tests, on the standardize drug prescription, or through health education, promoting individual and collective care. [5]

Given this reality, the professionals have a role of paramount importance in the health work process, especially nursing, which uses the consultation to promote health and improve the quality of life of those involved in the care process. [10]

Thus, the ICNP® appears in response to the needs recognized by the profession. It is an information tool to describe the acts, as well as to provide data identifying the profession's contribution to health care and promoting changes in this practice through education, administration and search. [11]

It is noteworthy that the nursing consultation should be used as the instrument of the health work process, in which, in the course of that practice, it is relevant to perform an anamnesis focused on collecting data on pregnancy and childbirth. Issues as basic human needs must be addressed, as well as guidance on breastfeeding and family planning; one must investigate complaints about pain, abnormal bleeding and fever, also evaluating the biopsychosocial factors. [12]

Meanwhile, the nurse should assess, in general, the clinical and gynecological status of the patient

focusing on breasts, abdomen, pelvis and external genitals, scanning the presence of abnormalities and signs of inflammation. Thus, there is great importance in the standardization of nursing practices directed to the integral care in the postpartum period, facilitating decision-making and improvements in quality of care. [13] (Table 2)

Table 2. Woman's assessment at the puerperal consultation, as preconized by NANDA.

Clinical findings	Nursing diagnosis
Emotional aspect	Risk of impaired maternity related to the lack of support from family members or significant people, ineffective role model, anxiety and stressors.
Mental distress	Risk of violence directed against others related to hopelessness, intense anxiety, mood swings or deep depression.
Fissures (cracks)	Impaired skin integrity related to mechanical factors, altered nutritional status and local humidity, as evidenced by the report of pain, itching and loss of continuity of the skin surface.
Engorged breasts	Ineffective breastfeeding related to termination of pregnancy, lack of knowledge, as evidenced by inadequate emptying of the breasts at each breastfeeding and poor breastfeeding process.
Mastitis	Acute pain related to erythema and edema in breast tissue, as evidenced in verbal complaints, defensive behavior and changes in vital signs.
Hemorrhage	Bleeding risk related to complications related to pregnancy and the postpartum period and lack of knowledge.

Source: adapted from NANDA. [14]

Table 3. Executed actions and expected results from the performed interventions.

Interventions	Results
<ul style="list-style-type: none"> Assess the family composition and development; Involve all available family members in the learning process; Provide information appropriate to the situation, including time control, limit and stress reduction techniques. 	<ul style="list-style-type: none"> Demonstrated behaviors and changes in lifestyle to reduce the potential development of the problem, or decrease or eliminate the effects of risk factors.
<ul style="list-style-type: none"> Assess the contributing factors of the situation; Help women to accept responsibility for impulsive behavior and the possibility of violence; Help puerperal women to control their behavior; Help those involved to deal with the current situation; Ensure security in the face of violent behavior; 	<ul style="list-style-type: none"> Will recognize the reality of the situation; Will participate in the care and meets their own needs assertively.
<ul style="list-style-type: none"> Assess the contributing factors; Do not use soap, alcohol or other dehydrating agents on the nipple; Clear and then let air dry outdoors; Expose to light of the sun or ultraviolet light lamps with extreme caution; Properly position the baby on the breast and nipple. 	<ul style="list-style-type: none"> The skin lesions will heal in due time without complications; Will participate in preventive measures and treatment program.
<ul style="list-style-type: none"> Identify the causative factors related to the mother and infant; Help the mother to develop the skills necessary for proper breastfeeding; Apply heat and/or ice on the breasts, massaging down the chest wall toward the nipples; Recommend home rest to restore the general condition. 	<ul style="list-style-type: none"> Will demonstrates the techniques to improve the process of breastfeeding;
<ul style="list-style-type: none"> Assess the woman's response in relation to pain; Monitor the color and the skin temperature and vital signs; Provide comfort measures; Administer antibiotics; Apply warm or hot wet compresses before and after breastfeeding; Completely empty the breasts. 	<ul style="list-style-type: none"> Will report pain relief or control; Will describe the non-pharmacological methods that offered relief.
<ul style="list-style-type: none"> Evaluate the predisposing factors related to pregnancy, including excessive uterine distention, the birth canal lacerations or retained placenta; Monitor the perineum and the extent of the fundus of the mothers; Evaluate vital signs; 	<ul style="list-style-type: none"> No signs of active bleeding or excessive blood loss; Will have laboratory results of coagulation time and factors within the normal range for their case.

Source: adapted from NANDA. [14]

After the development of nursing diagnoses, a table with the main interventions from the traced diagnosis was made, as well as the expected results from the actions. **(Table 3)**

Therefore, the nurse needs to recognize the consultation as the possibility of communicative dialogue, strengthening the relational and interpersonal bonds, for therapeutic ambience, thus validating the procedure, which is not just a technical procedure. Therefore, puerperal women should interact with

nurses, sharing their afflictions and doubts according to their perception. [2]

At the heart of this discussion, one can see the relevance of nursing consultation to recognize the population's needs, as well as to propose effective interventions. In addition, ICNP[®] configures as a valuable tool for the promotion and organization of care and quality of care in the nursing work process in PHC, also enabling the identification of the health needs of the woman and her son. Consequently, it

is a tool that produces information for the nurse's decision-making through a unified and universal nursing language. [4]

In this perspective, the ICNP arises in order to strengthen and describe the nursing practice in the care of puerperal women. According to the articles used in this study, we can identify that the post-partum care mainly focuses on the care to the newborn in its practice, not corresponding to expectations regarding its services provision to women in that vulnerable phase. [3]

Nevertheless, the Ministry of Health recommends that the puerperal consultation, whether within the basic unit or even in the home visit, must follow a care plan focused on the binomial, allowing a holistic and comprehensive vision. Thus, the implementation of the ICNP will facilitate the development of the nursing work process, supporting the professionals and organizing their actions. [6]

Conclusion

The importance of using ICNP to act in the community health/disease process, in particular, to improve the quality of health of the population, constitutes an instrument for interaction, approach and contact with the human being and the opportunity to uncovering, understanding, discovery, listening, observation and decision-making. Therefore, its practice is essential in any nursing situation in both individual as collective health contexts.

Therefore, implementing ICNP in health services makes easy the monitoring of procedures and actions taken towards the puerperal woman and the child, for it provides a set of sequenced and standardized ideas, enabling the universally understanding of assistance.

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