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CLINICAL JUDGMENT & HUMAN RESPONSES

I continue to get questions about how to shift from using nursing diagnoses, which are no longer used clinically or on NCLEX®.*

The argument against shifting away from nursing diagnoses seems to be “nurses diagnose and treat human responses, not medical diagnoses”.

We must move on from being stuck in this argument.

The ANA and many state practice acts state that “nurses diagnose and treat human responses”. However, the term “human response” is a philosophical one, that hasn’t been clearly defined. For example:

- *Anxiety* and *fear* are human psychological responses.
- *Kidney failure* (a medical diagnosis) due to dehydration is a human physiological response. Struggling to find lesser-used, poorly defined terms, that “can fit” for kidney failure muddies issues and complicates learning.

Another way to look what nurses diagnose and treat is teaching the concept of LEGAL ACCOUNTABILITY and SCOPE OF PRACTICE:

- What are nurses’ legal responsibilities related to detecting and reporting abnormal signs and symptoms?
- What problems/complications are nurses legally accountable for preventing?
- What are nurses’ legal responsibilities related to addressing *individual* patient needs, such as communication, education, safety, infection transmission, and other priority problems?

Teach your students the concepts of scope of practice, legal accountability, and qualifications EARLY in the first semester. (Ethical responsibilities addressed in next post).

You can find out how to do this, in the current edition of my textbook (<http://www.alfaroteachsmart.com/books.html>). If you want a peer-reviewed guide to help students determine their scope of practice, send an email to TeachSmartAlfaro@aol.com (put **PRACTICE SCOPE** in the subject line).

* See Shifting from Nursing Diagnoses (<http://www.alfaroteachsmart.com/docs/ShiftingFromNursingDiagnoses.pdf>)

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