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INTEGRATIVE REVIEW OF THE LITERATURE

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## SCIENTIFIC EVIDENCE IN ADVANCED CARE NURSING CONSULTATION AND THE USE OF STANDARDIZED TERMINOLOGIES

Evidências científicas na consulta de enfermagem em cuidado avançado e o emprego das terminologias padronizadas

Evidencias científicas en consulta de enfermería de cuidado avanzado y el uso de terminologías estandarizadas

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#### **ABSTRACT**

**Objective:** to identify, through scientific evidence in the consultation of nurses in advanced care, the use of standardized terminologies in the stages of the nursing process in care contexts. **Methodology:** integrative review carried out in six stages. **Results:** 14 articles were selected. The standardized terminologies most used by nurses during nursing consultations were ICNP® (65%), followed by NNN-NANDA-I, NOC and NIC (21%); NOC (7%); ICNP®, NNN and Omaha System (7%). 43% use standardized language in the stages of diagnosis, outcome and intervention. Regarding the care context, the use of standardized nursing terminologies was used by 36% in a hospital environment, 14% in Home Care, 14% in Primary Health Care, 7% in a private clinic and 29% were not informed. **Conclusion:** the most used standardized terminology was ICNP® (65%), in the stages of diagnosis, outcome and intervention (43%) in the hospital environment (36%).

**DESCRIPTORS:** Advanced nursing practice; Nursing process; Standardized terminology in nursing; Health care.

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#### **RESUMO**

**Objetivo:** identificar, pelas evidências científicas na consulta do enfermeiro em cuidado avançado, o emprego das terminologias padronizadas nas etapas do processo de enfermagem em contextos de cuidado. **Método:** revisão integrativa realizada em seis etapas. **Resultados:** foram selecionados 14 artigos. As terminologias padronizadas mais utilizadas pelo enfermeiro durante as consultas de enfermagem foram a CIPE® (65%), seguida da NNN – NANDA-I, NOC e NIC (21%); NOC (7%); CIPE®, NNN e Omaha System (7%). 43% utilizam a linguagem padronizada nas etapas de diagnóstico, resultado e intervenção. A respeito do contexto de cuidado, o uso de terminologias padronizadas de enfermagem era empregado 36% em ambiente hospitalar, 14% em Home Care, 14% em Atenção Primária à Saúde, 7% em clínica privada e 29% não foram informados. **Conclusão:** a terminologia padronizada mais utilizada foi a CIPE® (65%), nas etapas de diagnóstico, resultado e intervenção (43%) no ambiente hospitalar (36%).

**DESCRITORES:** Prática avançada de enfermagem; Processo de enfermagem; Terminologia padronizada em enfermagem; Atenção à saúde.

#### **RESUMEN**

**Objetivo:** identificar, por medio de las evidencias científicas en la consulta del enfermero en cuidado avanzado, el empleo de las terminologías estandarizadas en las etapas del proceso de enfermería en contextos de cuidado. **Metodología:** revisión integradora realizada en seis etapas. **Resultados:** se seleccionaron 14 artículos. Las terminologías estandarizadas más utilizadas por las enfermeras durante las consultas de enfermería fueron CIPE® (65%), seguida de NNN – NANDA-I, NOC y NIC (21%); NOC (7%); CIPE®, NNN y Omaha System (7%). El 43% utilizó el lenguaje estandarizado en las etapas de diagnóstico, resultado e intervención. En lo que respecta al contexto de la atención, el uso de las terminologías denominadas de enfermería se empleó en un 36% en el entorno hospitalario, en un 14% en la atención domiciliaria, en un 14% en la atención primaria a la salud, en un 7% en clínica privada y un 29% no fueron informados. **Conclusión:** la terminología estandarizada más utilizada fue la CIPE® (65%), en las etapas de diagnóstico, resultado e intervención (43%) en el ámbito hospitalario (36%).

**DESCRIPTORES:** Práctica avanzada de enfermería; Proceso de enfermería; Terminología estandarizada en enfermería; Atención a la salud.

## **INTRODUCTION**

Advanced Practice Nursing (APN) is an innovative proposal capable of responding to clinical indicators of health-disease, strengthening this profession through the Nursing Process (NP), which is operationalized in nursing consultation with the use of standardized terminologies in different contexts of care.<sup>1</sup>

The NP is understood as a methodological tool that guides nurses in clinical reasoning for diagnostic decision making, facing the health problems of the individual, family and community, currently operationalized in five interdependent and recurrent steps: Data collection or nursing history; Nursing diagnosis; Nursing planning; Implementation; Nursing assessment.<sup>2-4</sup>

Applied as a nursing consultation in many care settings, Rewa et al.<sup>5</sup> argue, in several studies, that nursing consultation presents itself as a link for the implementation of the APN for better health outcomes, encompassing the various levels of the care network.

Successively, Advanced Practice Nursing (APN) represents an expanded area of professional practice scope, reflecting the translation of knowledge in interventions to health-sensitive outcomes for the individual, family, and/or community under the care of a certified nurse.<sup>6</sup>

Brazil provides favorable conditions for the development of APN, since it has foundations for the regulation of the practice, especially Law No. 7498/1986, which regulates the exercise of the nursing profession, and Ordinance No. 2488 of October 21, 2011, which approves the National Policy for Primary Care.<sup>7</sup>

The Professional Exercise Law describes the performance of nursing consultation as a private activity of nursing that includes care of greater complexity and requires prompt decision making, through scientific knowledge, allowing the prescription of drugs approved in public health programs.<sup>8</sup>

It is also worth noting that the NP, inserted into the nursing consultation, promotes better monitoring of the user, in the care practice, being able to provide greater coverage for health promotion and prevention services, stimulating changes and improving the quality of management, teaching, research, and evaluation of health care.<sup>9</sup>

However, research is needed to expand this scope, since the use of the NP and standardized terminologies allows the strengthening of nursing consultation through the organization of the work process.<sup>10</sup>

It should be noted that the use of a standardized language in the steps of the NP allows the representation of clinical nursing knowledge.<sup>11</sup>

The use of standardized terminologies allows an accurate logic to be carried out, avoiding inconsistency in nurse's clinical judgment, collaborating with diagnostic reasoning and favoring quality communication, which attributes to make nursing practices visible and effective.<sup>12</sup>

Thus, exploring the literature evidence on the use of standardized terminology for nursing consultation in care settings will strengthen indicators for advanced nursing practice, with the nursing process as a predictor. Nogueira et al. 3

The objective of this study was to identify, based on scientific evidence, the use of standardized terminologies in advanced care nursing consultation and in which stage of the nursing process they are used in the care contexts.

## **METHOD**

This is a subproject of a research proposal approved by the Research Support Foundation of the State of Minas Gerais (FA-PEMIG) in its Scientific Initiation Scholarship Program (PIBIC) modality. As a first step of the aforementioned research, we conducted a scoping review on APN in the Brazilian context, inquiring about the findings of 23 eligible articles, in which only eight articles contemplated the nursing consultation as a predictor for advanced practice.

Therefore, this is an integrative literature review followed in six phases: 1) development of the review question; 2) search and selection of primary studies; 3) extraction of data from the studies; 4) critical assessment of the primary studies included in the review; 5) synthesis of review results; and 6) presentation of the review.<sup>13</sup>

The searches were conducted between February to March 2022, using the advanced search tool in the following electronic databases: Latin American and Caribbean Literature on Health Sciences (LILACS) and National Library Of Medicine (NLM)-PubMed – MEDLINE, with the controlled descriptors from the Health Sciences Descriptors (DeCS) vocabularies, in Portuguese "Classificação", "Enfermeiras e Enfermeiros", "Terminologia padronizada em enfermagem", "Processo de enfermagem" and "Atenção à saúde"; and Medical Subject Heading (MeSH), in English "Classification", "Nurses", "Standardized Nursing Terminology", "Nursing Process", "Delivery of Health Care".

The intersection of descriptors was mediated by the Boolean operator AND.

The search strategy applied to PubMed was: Nurses AND Classification AND Standardized Nursing Terminology AND Nursing Process AND. To LILACS it was: *Standardized Nursing Terminology* [Palavras] and *Nurses* [Palavras] and *Nursing Process* [Palavras].

The study question was "What is the standardized nursing terminology used to record the nurse's consultation and its use in the stages of the nursing process of different health care settings?", that was formulated based on the PICo strategy, in which P was a nurse, I standardized nursing terminologies in the nursing consultation, Co health care settings.

Inclusion criteria: original studies and theses that presented the APN phenomenon in nursing care practice scenarios, published in Portuguese, English and Spanish. Exclusion criteria: studies that did not refer to the theme and that were not original studies.

The initial screening for literature in the databases occurred by two reviewers independently. When differences of opinion were identified, a third reviewer was designated to read and issue a conclusive opinion to ensure methodological rigor to the process of selection and inclusion of studies.

The results achieved were analyzed by the reviewers independently, by means of a synoptic table using Excel 2010 software. A subject screening was performed by title and abstract, and then eligible references were completely read and analyzed for inclusion and exclusion criteria. Fourteen articles were included, and 322 articles were excluded.

The sample of articles included in this research was limited due to the systematization of the search, the criteria for the selection of references, and the originality of the theme. The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) flowchart was used to demonstrate the search and selection process, as illustrated in Figure 1.

It is noteworthy that, to conduct this research, it was not necessary to forward a research protocol for evaluation by the Ethics Committee in Research (CEP) according to the Regulatory Standards and Guidelines for Research Involving Human Beings – Resolution CNS 510/2016.

#### **RESULTS**

Of the 14 articles included, regarding the database, eight (57%) were from PubMed and six (43%) from LILACS, being seven (50%) produced in English and seven (50%) in Portuguese, having as the research country, mainly Brazil, with seven studies (50%), followed by Portugal with four (29%), Canada with one (7%), United States with one (7%) and Italy with one (7%).

Regarding the standardized terminology used by nurses during the nursing consultation, the most used were: CIPE $^{\circ}$  n= nine (65%), followed by NNNN – NANDA-I, NOC and NIC n= three (21%); NOC (7%) n= one; CIPE $^{\circ}$ , NNN and Omaha System n= one (7%).

Regarding the use of these standardized terminologies during the stages of the nursing process operationalized by the nursing consultation: six evidences (43%) use standardized language in the stages of diagnosis, outcome and intervention; three (22%) in the stages of diagnosis and intervention; one (7%) in the stages of outcome and intervention; one (7%) in the stage of diagnosis; one (7%) in the stage of intervention and two (14%) did not specify.

With regard to the context of care, this review revealed that five articles (36%) used standardized nursing terminology in hospitals, two (14%) used it in home care, two (14%) used it in primary health care, one (7%) used it in private practice, and four studies (29%) did not report the use of standardized terminology.

Chart 1 highlights the main results of the 14 articles identified.

## **DISCUSSION**

According to the findings, Brazil stood out as the country of research, a fact that is explained by the Brazilian professional nursing legislation. <sup>14</sup> Corroborating this fact is the expanded role in the practice of nurses, which can be seen through autonomous, problem-solving and effective nursing consultation, from the

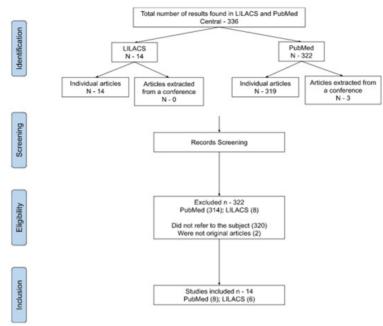


Figure 1 – Flowchart of the selection of studies according to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA). Itajubá, MG, Brazil, 2022

Source: The authors, 2022.

systematization of care, with innovations in assistance through the use of Standardized Language Systems (SLP) and the increase in scientific production on the subject, a predictor variable for the development of the APN in Brazil. <sup>15-16</sup>

Regarding the CIPE® standardized language, more frequent in this study, it stands out for increasing the quality of clinical decision-making by nurses and providing key elements to improve the capacity for self-care in patients under long-term home care. 17-18

In addition, the CIPE\* acts to guide nurses through the process of developing a terminology subset; facilitating systematized documentation and supporting the construction of an electronic medical record.<sup>19</sup>

The findings of this research converge with the results of other studies, in which there is a higher frequency of using the CIPE® standardized language during the nursing consultation, 20-22 constituting itself as a unifying mark of the language of nursing by instrumentalizing the documentation of the clinical practice of nurses, thus enabling greater visibility to the actions of the profession. 23-25

Therefore, nursing care based on CIPE® helps in the standardized recording of the nursing process and clinical decision—making by nurses with greater autonomy, corroborating the implementation of the APN.<sup>26</sup>

Regarding the other standardized language that was NANDA--I, NOC and NIC, present in 21% of the articles evidenced, it is explained by the fact that they are taxonomies internationally

recognized by the American Nurses Association (ANA), included in the international health care standards.  $^{27}$ 

Regarding the use of standardized language in the stages of diagnoses and interventions (22%) using CIPE\*, records indicate that the diagnoses and interventions guide nurses in the management, control and prevention of disease consequences, a fact that predicts an advanced nursing practice, through nursing consultation. <sup>18-19,28</sup>

Reporting the use of SLP in the intervention nursing process step,<sup>29</sup> it was concluded that CIPE\* community nursing interventions identify themes related to gaps in health coverage and support continued advances in understanding the complexities of representing knowledge in standardized clinical terminologies and classifications.<sup>29</sup>

Regarding the use of terminologies in the contexts of care, similar findings were found in other studies, in which there is greater use of terminologies in the hospital setting due to the justification that NANDA-I/ NIC/ NOC is mostly used in this setting, but little documented in PHC and other health settings.<sup>30-32</sup>

Another study states that the use of the CIPE\* in the hospital context enables the collection of standardized information from electronic health records, helping institutions to determine priorities and effective allocation of resources.<sup>29</sup>

In the context of PHC, the CIPE\* also stands out for contemplating most of the terms necessary for the care and promotion of the user's health. <sup>33</sup> From these considerations, the CIPE\* offers many advantages for clinical reasoning and care decisions in both hospital and PHC settings.

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Chart 1 – Standardized terminology, stages of the nursing consultation and contexts of care according to the selected articles. Itajubá, MG, Brazil. 2022

References	Standardized Terminology	Stage of nursing consultation	Care Context
Block LJ, Currie LM, Hardiker NR, Strudwick G. Visibility of community nursing within an administrative health classification system: evaluation of content coverage. J Med	CIPE®	Intervention	Hospital area
Internet Res. 2019;21(6):1-20.  Marcotullio A, Caponetto V, La Cerra C, Toccaceli A, Lancia L. NANDA-I, NIC, and NOC taxonomies, patients' satisfaction, and nurses' perception of the work environment: an Italian cross-sectional pilot study. Acta Biomed. 2020;91(6):85-91.	NANDA-I, NIC and NOC	Not specified	Hospital area
Boyd AD, Lopez KD, Lugaresi C, Macieira T, Sousa V, Acharya S, et al. Physician nurse care: a new use of UMLS to measure professional contribution: Are we talking about the same patient a new graph matching algorithm?. Int J Inform. 2018;113:63-71.	NANDA-I, NIC and NOC	Diagnosis, Outcomes and Intervention	Hospital area
Queirós C, Silva MATCP. Contributions of electronic health records in nursing knowledge representation: diagnoses centered on Orem's universal self-care requisites. BMC Nurs. 2019;18(Suppl 2):S4.	CIPE <sup>®</sup>	Diagnosis	Not informed
Campos MJ, Silva AP. Exploring nursing records using ICNP® in long-term care. BMC Nurs. 2019;18(Suppl 2):S4.	CIPE®	Diagnosis and intervention	Home care
Bastos F, Cruz I, Machado N, Brito A, Silva AP, Cardoso A, et al. What matters for nurses to document in health information systems? The case of hypertension. BMC Nurs. 2019;18(Suppl 2):S9.	CIPE®	Diagnosis and intervention	Not informed
Azzolin K, Lemos DM, Lucena AF, Rabelo-Silva ER. Homebased nursing interventions improve knowledge of disease and management in patients with heart failure. Rev Latino-Am Enferm. 2015;23(1):44-50.	NOC	Outcomes and Intervention	Home care
Silva ITS, Menezes HF, Souza Neto VL, Sales JRP, Sousa PAF, Silva RAR. Terminological subset of the International Classification for Nursing Practice for patients hospitalized due to burns. Rev Esc Enferm. 2021;55:1-8.	CIPE®	Diagnosis, Outcomes and Intervention	Hospital area
Oliveira FA, Almeida ARLP, Gomes APRS, Silva SSA, Damasceno HROC, Silva RS. Termos da Linguagem especializada de enfermagem para pessoas com doença renal crônica. Enferm Foco. 2020;11(5):27-33.	CIPE®	Not specified	Private clinic
Clares JWB, Nóbrega MML, Guedes MVC, Silva LF, Freitas MC. ICNP® nursing diagnoses, outcomes and interventions for community elderly. Rev Bras Enferm. 2019;72(Suppl 2):191-8.	CIPE®	Diagnosis, Outcomes and Intervention	Primary Health Care
Hanzen IP, Zanotelli SS, Zanatta EA. Diagnósticos, intervenções e resultados de enfermagem para a consulta de enfermagem à criança. Enferm Foco. 2019;10(7):16-21.	CIPE®	Diagnosis, Outcomes and Intervention	Primary Health Care
Primo CC, Resende FZ, Garcia TR, Duran ECM, Brandão MAG. ICNP® terminoly subset for care of women and children experiencing breastfeeding. Rev Gaúcha Enferm. 2018;39:1-12.	CIPE <sup>®</sup>	Diagnosis and intervention	Not informed
Melo LS, Figueiredo LS, Pereira JMV, Flores PVP, Siqueira MEB, Cavalcanti ACD. Educational strategies used in standardized language systems by nurses: an integrative review. OBJN. 2017;16(3):366-75.	CIPE®, NANDA I, NIC, NOC,Omaha System.	Diagnosis, Outcomes and Intervention	Not informed
Moorhead S, Macieira TGR, Lopez KD, Mantovani VM, Swanson JE, Wagner C, et al. NANDA-I, NOC, and NIC Linkages to SARS-Cov-2 (Covid-19): part 1: community response. Int J Nurs Knowl. 2021;32(1):59-67.	NANDA-I, NIC and NOC	Diagnosis, Outcomes and Intervention	Hospital area

**Source:** The authors, 2022.

In the context of home care, it shows that standardized terminologies improve nursing care in this setting, reflecting the patient's greater capacity for self-care.<sup>18</sup>

This fact is attributed by COFEN Resolution 464/2014 that regulates nursing care in the home environment and considers

Resolution 270/2002 that approves the regulation of companies that provide Home Nursing Services.<sup>34-35</sup> Added to this fact, article 3 strengthens this idea by saying that the nurse must perform the NP with the use of protocols.

In turn, this study had the limitation of including only samples of articles with online and free access, which justifies the reduced number of studies found. Thus, it is suggested the expansion of the scope of studies aimed to understand the use of SLP in the stages of the nurse's consultation.

Regarding the impossibility of affirming that the use of SLP by nurses in nursing consultation is characterized SLP as a practice of advanced nursing process, we have as a limitation the embryonic state of the APN in Brazil, since it is clear the incipiency on this theme, somehow, even if timid, this study sought to reveal predictive indicators.

This fact makes the research contribute indicators that the nursing process is a predictor for APN.

It is essential to make the nursing consultation visible in the various contexts of care and the use of standardized terminologies that support nurses' clinical decisions. Thus, efforts to apply the NP in the various contexts of care require training of nurses, continuing education, and above all, the supervision of this practice by regulatory agencies.

In addition, it is necessary to have an approximation of theory and practice during graduation, in order to raise greater familiarity with the EP and standardized terminologies. Fostering the formation of critical nurses, with clinical reasoning and autonomy in clinical practice, with appropriate terminologies, ensuring their professional visibility.

The study has great implications for practice, as it will allow society to identify the role of the nurse as an autonomous professional and in advanced practice, through clinical decision-making in the nursing consultation.

It will enable the development of extension activities with practice nurses in the future, training them in the standard languages of diagnostic reasoning.

In education, it will contribute to the incorporation of APN and nursing consultation/NP themes in undergraduate courses and their implementation as curricular extension activities or subjects, also allowing familiarization and understanding of the importance of the use of standardized terminologies as a means for advanced care. In addition to providing indicators for the updating of national curricular guidelines, aiming to form proactive nurses with well-developed cognitive, intellectual, and behavioral skills.

With regard to research, it will provide predictive indicators for discussions with the scientific community about advanced nursing practice, through the nursing consultation and the use of standardized terminologies in the stages of the NP.

Finally, in the social context, the NP, operationalized by the nursing consultation, will benefit patient safety through the nurse's clinical decisions that will contribute to effective actions in identifying accurate indicators of bio-psycho-social-spiritual needs, listing real interventions and contributing to shared actions in the multidisciplinary health team.

## **CONCLUSION**

The standardized terminology most used in nursing consultation evidenced in the 14 articles of this review was the ICNP® (65%), followed by NNN – NANDA-I, NOC and NIC (21%); NOC (7%); ICNP®, NNN and Omaha System (7%). Regarding the stages of the nursing process 43% of the evidence use the standardized language in the stages of diagnosis, result and intervention; 22% use it in the stages of diagnosis and intervention; 7% in the stages of result and intervention, 7% only in the stage of diagnosis, as well as 7% in the stage of intervention and 14% did not specify. As for the context of care, it was verified that 36% occur in hospitals, 14% in Home Care, 14% in Primary Health Care, and 7% in private clinics.

However, due to the sample number of articles analyzed, it is necessary to indicate its limitation for broader conclusions about the object of study of the investigation.

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#### **CONFLICT OF INTEREST STATEMENT**

I hereby declare the absence of conflicts of interest.

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