

UNIT 1 The Nature of Nursing

1 The Origins of Nursing

LEARNING OBJECTIVES

1. Explain how certain events in ancient and medieval times influenced the development of contemporary nursing.
2. Discuss Florence Nightingale's influence on modern nursing practice.
3. List at least 10 of Florence Nightingale's nursing principles that are still practiced today.
4. Identify important individuals who contributed to the development of nursing in the United States.
5. Name some pioneer nursing schools in the United States.
6. List important milestones in the history of practical nursing education.
7. Explain war-related developments in nursing.
8. Discuss current trends that are expected to influence the nursing profession in the 21st century.
9. Describe the importance of nursing insignia, uniforms, and the nursing school pin.

IMPORTANT TERMINOLOGY

caduceus

Hippocratic oath

holistic healthcare

insignia

Nightingale lamp

You have chosen to be a nurse. The word *nurse* derives from the Latin word meaning *to nourish*. You are embarking on a career that combines scientific principles, technical skills, and personal compassion. Although people have been performing many nursing skills for centuries, nursing in its present form began to emerge only in the 19th century. Contemporary nursing continues to evolve as society and its healthcare needs and expectations change. Nursing must continue to adapt to meet society's goals and to provide needed services in the changing world.

Nursing is a practical and noble profession. It provides a stable career in the ever-changing world of healthcare, with plenty of career options.

Individual attributes required to be a nurse include a strong sense of responsibility and the highest standards of integrity. Personal conviction and flexibility are necessary foundations of a nurse. A nurse must be well educated and integrate the art and the science of working with people.

Nurses interact with a vast assortment of individuals, including numerous and varied healthcare personnel who have their own fields of expertise. Many of these healthcare fields were originally included in the broader roles and responsibilities of nursing. For example, the nurse was originally responsible for nutrition and diets. Nurses were also responsible for rehabilitative needs of the persons under their care. The role of the nurse became so important to the healthcare system that the functions of the nurse had to become diverse and specialized to meet fast-growing needs. Many of these duties were broken into specialties that are seen today, such as nutritionist, dietitian, physical therapist, or occupational therapist.

As the role of the nurse has evolved, so has the role of the person receiving care. When the physician was the primary manager or leader of health issues, the individual receiving care was typically called a *client*. During the 20th century, the client became more aware of his or her own health issues. Instead of being a passive participant, the client became a more knowledgeable consumer of healthcare and, as in other service industries, the consumer became a client of the primary care provider, nurse, and healthcare system. In the 21st century, all of these terms are currently used to describe the individual who receives

healthcare. This textbook uses the term *client* because the term client reflects the roles of the nurse who actively interacts with individuals, families, and the healthcare system. In everyday conversations, the terms *patient*, *client*, and/or *consumer* may be heard.

NURSING'S HERITAGE

A detailed history of nursing is beyond the scope of this book. All nurses should become familiar with some important people and developments in the history of nursing. Several Internet sites record nursing's heritage. As your nursing career develops, you will be part of nursing's ongoing history.

Early Influences

In ancient times, people often attributed illness to punishment for sins or to possession by evil spirits. Most primitive tribes had a medicine man, or shaman, who performed rituals using various plants, herbs, and other materials, to heal the sick. Tribal rituals included dances, chants, and special costumes and masks. Some groups used human or animal sacrifices. Women had various folk roles in ancient health practices, depending on the culture and social customs. Women were often involved with assisting in childbirth.

Religious images of the nurse developed as care of the sick became associated with concepts discussed in the Bible, the Talmud, and other ancient texts. Centers in India and Babylonia provided care for the sick before the time of Christ. By 500 BC, the advanced Greek civilization had begun to acknowledge causes of disease other than punishment by God or demonic possession. Based on mythical figures, the **caduceus** and the staff of Aesculapius are the modern symbols of medicine (Fig. 1-1). The Greeks began to establish centers, sometimes called hostels or hospitals, for care of the sick and injured. They used warm and mineral baths, massage, and other forms of therapy that priestesses sometimes administered. Pregnant women or people with an incurable illness were not admitted to these hostels.

The Influence of Hippocrates

One of the early outstanding figures in medicine was Hippocrates, born in 460 BC on the Greek island of Kos. Hippocrates is the acknowledged “Father of Medicine.” Hippocrates denounced the idea of mystical influence on disease. He was also the first person to propose concepts such as physical assessment, medical ethics, client-centered care, and systematic observation and reporting. By emphasizing the importance of caring for the whole person (**holistic healthcare**), he helped to lay the groundwork for nursing and medicine. Contemporary healthcare practitioners preserve the principles of Hippocrates. Typically, a physician will repeat the **Hippocratic oath** when graduating from a school of medicine. The Florence Nightingale pledge and Practical Nurses’ pledge are based on this oath.

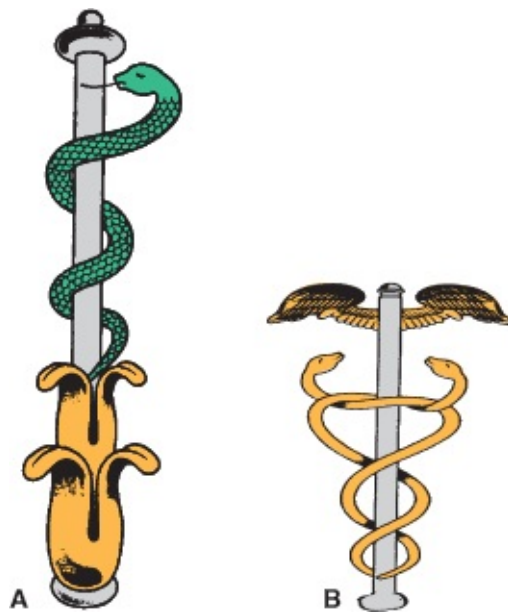


FIGURE 1-1 Symbols of medicine. **A.** Aesculapius, a mythical Greek god of healing and son of Apollo, had many followers who used massage and exercise to treat clients. This god is also believed to have used the magical powers of a yellow, nonpoisonous serpent to lick the wounds of surgical clients. Aesculapius was often pictured holding the serpent wrapped around his staff or wand; this staff is a symbol of medicine. **B.** Another medical symbol is the caduceus, the staff of the Roman god Mercury, shown as a winged staff with two serpents wrapped around it.

Early medical educators helped to solidify the need for practitioners to

be well-educated individuals. Physicians were eventually required to obtain a university degree as a doctor of medicine (MD). Specialized healthcare education and training became standard as scientific knowledge increased. Modern medicine has multiple medical and surgical specializations; for instance, the client can be described as having heart and lung diseases, or injury and trauma. Nursing has developed a role of assistant to the physician, serving his or her needs and following orders regarding care of individuals.

Relatively unchanged from the beginning is the concept that a nurse must be aware of the whole client. The holistic approach translates into the nurse's attentiveness to a client's personal needs from various perspectives. The nurse is aware of the client's emotions, lifestyles, physical changes, spiritual needs, and individual challenges. Nursing is unique in this approach to healthcare.

The Roman Matrons

The first recorded history of nursing begins with Biblical women who cared for the sick and injured. Many were in the religious life. For instance, Phoebe, mentioned in the Epistle to the Romans (about 58 AD), is known as the first deaconess and visiting nurse.

Fabiola, a Roman woman, is credited with influencing and paying for the construction of the first free hospital in Rome in 390 AD. Another Roman woman, Saint Marcella, converted her beautiful home into a monastery, where she taught nursing skills. She is considered the first nursing educator. Saint Paula is credited with establishing inns and hospitals to care for pilgrims traveling to Jerusalem. She is said to be the first person to teach the philosophy that nursing is an art rather than a service. Saint Helena, the mother of the Roman Emperor Constantine, is credited with establishing the first gerontologic facility, or home for the aged.

Monastic and Military Nursing Orders

Beginning in the first century, several monastic orders were established to care for the sick. Sometimes, the monastery itself became the refuge

for the sick; in other cases, members of a religious order founded a hospital. Both men and women of religious orders performed nursing care.

During the Crusades (1096–1291), female religious orders in northern Europe were nearly eliminated. Male military personnel, such as the Knights Hospitallers of St. John in Jerusalem, conducted most nursing care. Because these military men were required to defend the hospital as well as care for the sick, they wore suits of armor under their religious habits. The symbol for this order was the Maltese Cross, which later became the symbol of the Nightingale School. This symbol was the forerunner of nursing school pins worn today.

The Reformation

In the 1500s, during the European religious movement called the Reformation, many monasteries closed and the work of women in religious orders nearly ended. Until the 1800s, the few women who cared for the sick were prisoners or prostitutes. Nursing was considered the most menial of all tasks, and the least desirable. This period is called the *dark ages of nursing*.

Fliedner in Kaiserswerth

In 1836, Pastor Theodor Fliedner established the Kaiserswerth School for Nursing in his parish in Kaiserswerth, Germany. It was one of the first formally established schools of nursing in the world. Out of it grew the Lutheran Order of Deaconesses, which Fliedner directed. Its most famous student was Florence Nightingale.

By the late 1800s, many schools for trained nurses existed throughout Europe. The status of nursing began to improve, and many women, including members of religious orders, once again became involved in nursing care.

Florence Nightingale

Even during the days when nursing was considered menial and

undesirable, some women continued to care for the sick. Probably the most famous was Florence Nightingale (Fig. 1-2). Most nurses before her time received almost no training. Not until she graduated from Kaiserswerth and began to teach her concepts did nursing become a respected profession.

Nightingale was born in Italy in 1820 to wealthy English parents. When she was still very young, her parents returned to England.



FIGURE 1-2 Florence Nightingale. (Photo courtesy of the Center for the Study of the History of Nursing.)



FIGURE 1-3 The “Nightingale lamp” (also known as the “Lamp of Nursing” or the “Lamp of Learning”) is an insignia of nursing and nursing education. The lamp represents the warmth of caring. The light of the lamp symbolizes the striving for excellence. The oil represents the energy and commitment of the nurse to heal others.

In 1851, Nightingale entered the Deaconess School in Kaiserswerth.

She was 31 years old, and her family and friends were strongly opposed to her becoming a nurse. After her graduation in 1853, she became superintendent of a charity hospital for governesses. She trained her attendants on the job and greatly improved the quality of care. In 1854, the Crimean War began. Nightingale gained fame during this conflict. She entered the battlefield near Scutari, Turkey, with 38 other nurses and cared for the sick and injured. The nurses had few supplies and little outside support. Nonetheless, Nightingale insisted on establishing sanitary conditions and providing quality nursing care, which immediately reduced the mortality rate. Her persistence made her famous, and she and her nurses were greatly admired. Her dedicated service both during the day and at night, when she and her nurses made their rounds carrying oil lamps, created a public image of the lady with the lamp. In time, the **Nightingale lamp** or the “Lamp of Learning” (Fig. 1-3) became a symbol of nursing and nursing education. Today, many schools of nursing display a model of the lamp or a picture of Florence Nightingale carrying a lamp.

Nightingale's Definition of Nursing

Nightingale had definite and progressive ideas about nursing, as discussed in her book, titled *Notes On Nursing: What It is, and What It is Not* (published in 1859). These ideas remain foundations of contemporary nursing. Nightingale states:

The very elements of what constitutes good nursing are little understood for the well as for the sick. The same laws of health or of nursing, for they are in reality the same, obtain among the well as among the sick.....If a patient is cold, if a patient is feverish, if a patient is faint, if he is sick after taking food, if he has a bed-sore, it is generally the fault not of the disease, but of the nursing....I use the word nursing for want of a better. It (nursing) has been limited to signify little more than the administration of medicines and the application of poultices. It ought to signify the proper use of fresh air, light, warmth, cleanliness, quiet, and the proper selection and administration of diet—all at the least expense of vital power to the patient.

Nightingale specified five essential points that are necessary for the maintenance of health and the support of recuperation. These include clean air, clean water, efficient drainage, cleanliness, and light.

The Nightingale School

Building on the respect she had established in the Crimean War, Nightingale opened the first nursing school outside a hospital in 1860. The nursing course was 1 year in length and included both classroom and clinical experience, a major innovation at that time. Students gained clinical experience at St. Thomas Hospital in London. Because it was financially independent, the school emphasized learning, rather than service to the hospital. Some principles of the Nightingale School for Nurses are still taught today:

- Cleanliness is vital to recovery.
- The sick person is an individual with individual needs.
- Nursing is an art and a science.
- Nurses should spend their time caring for others, not cleaning.
- Prevention is better than cure.
- The nurse must work as a member of a team.
- The nurse must use discretion but must follow the physician's orders.
- Self-discipline and self-evaluation are important.
- A good nursing program encourages a nurse's individual development.
- The nurse should be healthy in mind and body.
- Teaching is part of nursing.
- Nursing is a specialty.
- A nurse does not graduate but continues to learn throughout his or her career.
- Nursing curricula should include both theoretical knowledge and practical experience.

The Nightingale School included other innovations:

- Establishment of a nurses' residence
- Entrance examinations and academic and personal requirements, including a character reference
- Records of each student's progress—later known as the "Nightingale

- plan,” a model for current nursing programs
- Records of employment of students after graduation, or a formal register—the beginnings of nursing practice standards

NCLEX *Alert* PrepU

NCLEX questions are based on the contents of the official NCLEX-PN Test Plan which is found in the front of this book on pages vii–viii. Students need to be aware of these general categories because specific questions, better referred to as *clinical scenarios*, can involve one or more components of the Plan. The answers provided by NCLEX are referred to as *options*. When taking the NCLEX, read the clinical scenario carefully and read all of the options. Keep in mind that more than one option may be correct. You must choose the BEST correct option.

NURSING IN THE UNITED STATES

Nursing in the colonial United States was primarily a family matter, with mothers caring for their own families or neighbors helping each other. Throughout the 19th and 20th centuries, historical and nursing developments interacted to build the foundation of modern nursing practice. The establishment and growth of a system of nursing education is the most important development that has shaped today’s nursing.

The First Nursing Schools

The influence of Florence Nightingale and the Kaiserswerth school extended to the United States when Pastor Fliedner came to Pittsburgh, Pennsylvania, with four nurse–deaconesses. In 1849, he became involved with the Pittsburgh Infirmary, the first Protestant hospital in the United States. Today it is called Passavant Hospital. The four deaconesses trained other nurses and started the movement to educate American nurses. The Pittsburgh Infirmary was the first real school of nursing in the United States, although limited training existed in other hospitals in New York and Pennsylvania before 1849.

In 1873, three nursing programs based on the Nightingale plan were formally established: Bellevue Hospital School of Nursing in New York;

Connecticut Training School in New Haven; and Boston Training School at Massachusetts General Hospital.

Notable American Nurses

With the onset of the Civil War (1861–1865), the public need for nurses became more evident. In 1861, the Union Army appointed Dorothea Lynde Dix (1802–1887) Superintendent of Female Nurses. Her job was to recruit volunteer nurses to treat men injured in the war. Dix is especially remembered for her campaign against the inhumane treatment of the mentally ill. One of Dix's volunteers was Louisa May Alcott (author of *Little Women*). Another was Clara Barton (1821–1912), who in 1881 founded the organization now known as the American Red Cross.

Melinda Ann (Linda) Richards (1841–1930) was the first trained nurse in the United States. She graduated in the early 1870s and organized the school of nursing at Massachusetts General Hospital, then called the Boston Training School.

Isabel Hampton Robb (1860–1910) was the founder of the school of nursing at Johns Hopkins University. She is credited with founding two national nursing organizations, one in 1911, which eventually emerged as the American Nurses Association (originally called the Alumnae Association). She and Lavinia Lloyd Dock (1858–1956) founded the American Society of Superintendents of Training Schools of Nursing in 1894, which in 1903 evolved into the Education Committee of the National League for Nursing. Robb wrote one of the earliest nursing textbooks, *Materia Medica for Nurses*, and coauthored a four-volume *History of Nursing*. Robb also founded the *American Journal of Nursing*. She introduced charting and nurse licensure to improve continuity of care. She also initiated the idea of graduate nursing study in the late 1800s.

Lillian Wald (1867–1940) is considered the founder of American public health nursing. She is best known for founding the Henry Street Settlement Visiting Nurse Society (VNS) in New York City in 1893. The Henry Street Settlement was a neighborhood nursing service that became a model for similar programs in the United States and other countries. Wald also convinced New York City schools to have a nurse

on duty during school hours. She persuaded President Theodore Roosevelt to create a Federal Children's Bureau and insisted that nursing education occur in institutions of higher learning.

Mary E. Mahoney (1845–1926) promoted fair treatment of African Americans in healthcare. She was the first African-American graduate nurse, and promoted integration and better working conditions for minority healthcare workers in Boston.

Mary Breckinridge (1881–1965) was a pioneer as a visiting nurse–midwife to the mountain people of Kentucky in the early 1900s, often making her rounds on horseback. She also started one of the first midwifery schools in the United States.

Collegiate Nursing Education

In 1907, Mary Adelaide Nutting (1858–1947) and Isabel Robb were instrumental in establishing the first college-based nursing program at Teachers College of Columbia University. Nutting thus became the first nurse to be on a university staff. She was also instrumental in founding the International Council of Nurses.

In 1909, the University of Minnesota established the first continuous program to educate nurses at the university level, with an enrollment of four students. Isabel Robb strongly influenced the organization of this program, which is considered the beginning of nursing as a profession. This program, however, did not lead to a bachelor's degree until 1919, when several other schools had also initiated college- and university-based nursing programs.

The History of Practical Nursing Education

Practical nursing, also called vocational nursing, has existed for many years. Women often cared for others and called themselves practical nurses. Not until the 1890s, however, was formal education in practical nursing available.

Pioneer Schools

Curricula in all of the early practical nursing schools included child care, cooking, and light housekeeping, in addition to care of the sick at home. Hospital care was not necessarily included.

Ballard School. In 1892, the Young Women's Christian Association (YWCA) opened the first practical nursing school in the United States in Brooklyn, New York. Later, it was named the Ballard School because Lucinda Ballard provided the funding. Practical nursing (attendant nursing) was one of several courses offered to women. This program was a 3-month course to train women in simple nursing care, emphasizing care of infants and children, older adults, and the disabled in their own homes. The Ballard School closed in 1949 because of YWCA reorganization.

Thompson Practical Nursing School. Thomas Thompson, a wealthy man who lived in Vermont during the Civil War, learned that women were making shirts for the army at only a dollar a dozen. In his will, he left money to help them. Richard Bradley, his executor, was a public-spirited man and determined that the local citizens needed nursing service. In 1907, he used some of Thompson's money to establish the Thompson Practical Nursing School in Brattleboro, Vermont. This school still exists today.

Household Nursing School. In Boston, a group of women wanted to provide nursing care in the home for people who were sick. They called on Bradley for advice, and he encouraged them to follow Brattleboro's example. In 1918, the Household Nursing Association School of Attendant Nursing opened. The school was later renamed the Shepard-Gill School of Practical Nursing in honor of Katherine Shepard Dodge, the first director, and Helen Z. Gill, her associate and successor. This school operated until 1984.

In all, 36 practical nursing schools opened during the first half of the 20th century in the United States. Between 1948 and 1954, 260 additional programs had opened. Today, more than 1,500 practical nursing programs exist in the United States. There is a growing need for licensed practical nurses/licensed vocational nurses (LPNs/LVNs) in multiple healthcare settings. Many LPN/LVNs chose to continue their nursing education and become RNs via utilization of resources, such as career ladder programs, which accept LPN/LVN curricula for RN programs. Chapter 2 discusses the education requirements for nurses in

greater detail.

American Red Cross Training

In 1908, the American Red Cross began offering home nursing education to teach lay women appropriate nursing care for illnesses within their own families. Jane Delano (1862–1919) was an Army nurse who was instrumental in this movement. Chapter 7 discusses the Red Cross in more detail.

Practical Nursing in Vocational and Community Colleges

In the early part of the 20th century, nursing schools—training both practical nurses and registered nurses—were traditionally located in or affiliated with hospitals. In 1917, the U.S. Congress passed the Smith-Hughes Act, the funds from which gave impetus to vocational-technical and public education. In 1919, the first vocational school-based nursing program opened in Minneapolis at Minneapolis Vocational High School. Today, the majority of practical nursing and associate’s-degree nursing programs are located in vocational education settings or in community colleges.

Other Milestones in Practical Nursing Education

The Association of Practical Nurse Schools was founded in 1941. It was later renamed the National Association of Practical Nurse Education and Service.

In 1914, Mississippi became the first state to designate LPNs. By 1955, all states had laws to license practical nurses. The first state to have mandatory licensure for LPNs to practice was New York. Chapter 2 discusses permissive and mandatory licensure more fully.

During World War II, people realized that nurses needed a consistent curriculum. In 1942, the U.S. Office of Education planned and advocated the first practical nursing curriculum for the entire country.

In 1966, the Chicago Public School system’s program was the first

practical nursing program to be accredited by the National League for Nursing (NLN).

Nursing During Wartime

Nursing during wartime has long been important. From Florence Nightingale in the Crimea to the American Civil War, Spanish–American War, Korea, Vietnam, and continuing to the wars of the 21st century, nurses have always played a vital role.

World War I marked the first emergency training of nurses. The Army School of Nursing was established; Annie W. Goodrich (1876–1955) wrote the curriculum. Hundreds of women were trained in this abbreviated program; however, nearly all of them left nursing and returned to homemaking after the war's end in 1918.

The U.S. Cadet Nurse Corps was established during World War II, with Lucile Petry Leone (1902–1999) as Director. More than 14,000 volunteer nurses graduated in about 2 years. Originally, the plan was to draft nurses into the Army. A major opponent to this idea was Katherine J. Densford (1890–1978), Director of the School of Nursing at the University of Minnesota. She promised to train expanded numbers of nurses in a short time, if the government abandoned the nurse draft. Because of Densford's efforts, the student population at Minnesota multiplied by five in a matter of weeks; more than 1,200 cadets graduated from that school alone.

World War II also marked the first time that men as well as women were actively recruited into nursing. Male nurses were not given equal rank to female nurses in the Armed Forces, however, until 1954. By the war's end in 1945, the world had changed. Many cadet nurses remained in the field, especially in the military. This employment gave many women a measure of independence that they had not previously known. After this time, emphasis was placed on improved graduate education for nurses. Nurses also began to assume a broader, more responsible role—a trend that continues today.

Current Nursing Trends

Nursing evolved rapidly in the 20th century, which promoted the needs and status of nurses. Technology, economics, and healthcare access continue the evolution of nursing in the 21st century. Many factors influenced trends that are expected to continue in the 21st century. The responsibilities of the nurse have increased as a direct result of these trends. This book has been written with these trends in mind:

Higher client acuity in hospital and long-term settings: Because of limitations on payment for healthcare, hospital stays are markedly shorter than they were in the 20th century. Clients in all healthcare facilities are more acutely ill than in years past. Long-term care facilities also have seen an increase in clients with highly acute conditions because of the growth of home care for those with more manageable conditions. Such developments require nurses working in all care areas to have higher levels of skill, additional education, and more specialization.

Shift to community-based care: Most clients now receive healthcare outside acute care settings. For example, much surgery is now done on an outpatient basis; many clients receive care for chronic or long-term conditions at home; and community clinics provide primary healthcare for many clients. Thus, today's nursing is delivered in a much wider range of settings than in the past.

Technology: Nurses, clients, and family members often must learn to operate highly sophisticated equipment to manage conditions in the home. This equipment makes accuracy in diagnosis and treatment possible. The teaching role of nursing is emphasized to a greater extent.

Social factors: Many clients are homeless, unemployed, or underemployed. Devastating diseases, such as acquired immunodeficiency syndrome (AIDS), tuberculosis, measles, or pertussis are more prevalent. These factors create a need for more healthcare in the public sector. National and state healthcare legislation are promoting the concepts of preventative treatment and universal availability of healthcare.

Lifestyle factors and greater life expectancy: Today's society and the healthcare industry emphasize prevention of disease, healthy lifestyles, and wellness programs. Many people are living much longer and are more active and healthy into their later years than in past

generations. Greater life expectancy is causing huge growth in the areas of extended, long-term, and home care. This growth will require many more nurses to work in such fields.

Changes in nursing education: Today's nursing programs emphasize education over service to clinical sites; they identify specific objectives (outcomes) for students. An earlier edition of this textbook was the first to identify learning objectives in practical nursing. Many LPN/LVNs are returning to school to become registered nurses, and many "career ladder" programs are available.

Autonomy: The social concept that women should have the same access to opportunities as do males has influenced nurses, most of whom are women, to be more assertive and independent. Today's nursing role is a collaboration with others in the healthcare field. Primary care, previously delivered only by physicians, can be delivered by nurses who succeed in advanced educational opportunities and specialized clinical experiences.

NURSING INSIGNIA

An **insignia** is a distinguishing badge of authority or honor. The symbolism dates back to the 16th century in Europe, when only a nobleman could wear a coat of arms. Later this privilege was expanded to include members of guilds (craftsmen). Certain types of training schools, including religious nursing orders, were also given the privilege. In the past, female nurses wore nursing caps and all nurses were awarded a school pin at graduation. Some schools also had distinguishing capes. The "Nightingale lamp," "Lamp of Nursing," or "Lamp of Learning" remains a standard of nursing insignia (see Fig. 1-3).

Nursing Uniforms

Although the style of uniform has changed throughout the years, nurses have always dressed professionally (Fig. 1-4). Clients usually feel more comfortable when nurses are easily identifiable and distinguishable from other staff. Today, a nametag is required whenever you give nursing care, no matter where you are employed.



FIGURE 1-4 Nursing uniforms have changed throughout the years. (Courtesy of the National Institutes of Health/Department of Health and Human Services.)

The Nursing School Pin

You may receive a nursing pin at graduation that symbolizes your school of nursing. Early nursing symbols were usually religious in nature. Today, many nursing school pins bear some religious symbol, such as a cross (based on the Maltese Cross) or a Star of David, even though the school may not be directly affiliated with a religious organization. The Nightingale lamp is also a common component of the nursing pin.

Key Concept

Remember that as you embark on your nursing career, you continue nursing's history and heritage.

STUDENT SYNTHESIS

KEY POINTS

- Medicine men and women and religious orders cared for the sick in early times.
- Florence Nightingale contributed a great deal to the development of contemporary nursing.
- Establishment of nursing schools in the United States began in the late 19th century.
- The first practical nursing school in the United States opened in 1892 in New York.

- Nursing during the First and Second World Wars contributed to the profession's and to women's evolving roles in society.
- Many current societal and healthcare trends are influencing the nursing profession, including higher levels of client acuity in hospital settings, more community-based care, technological advances, changing lifestyles, greater life expectancy, changing nursing education, and more nursing autonomy.
- Nursing insignia, such as those found on nursing school pins, often symbolize nursing's history and heritage.

CRITICAL THINKING EXERCISES

1. Explain how the changing role of women in society helped contribute to the changing role of nursing.
2. Determine why established standards of nursing practice and education are so important to the development of nursing as a respected profession.
3. A friend interested in nursing asks you about the profession's history and its place in today's society. How would you answer your friend? What developments and milestones would you highlight?

NCLEX-STYLE REVIEW QUESTIONS

1. What trends in nursing are expected to influence nursing in the 21st century? Select all that apply.
 - a. Higher client acuity in hospital and long-term settings
 - b. Traditional nursing education programs
 - c. Shift to community-based care
 - d. Advancements in technology
 - e. Greater life expectancy
2. A client has been involved in a motor vehicle crash and has multiple injuries. What guiding principles of Florence Nightingale would assist this client's recuperation and health maintenance? Select all that apply.
 - a. Clean air and water
 - b. Cleanliness

- c. Blood administration
 - d. Light
 - e. Efficient drainage
3. The nurse caring for a client must be attentive to the client's emotions, lifestyles, physical changes, spiritual needs, and individual challenges. When the nurse attends to these needs, what type of care is the nurse providing?
- a. Behavioral healthcare
 - b. Specialized healthcare
 - c. Caring healthcare
 - d. Holistic healthcare
4. A nurse working in a mental health facility understands that the clients are to be treated respectfully and their rights maintained. What nurse was an advocate for the humane treatment of the mentally ill?
- a. Florence Nightingale
 - b. Melinda Richards
 - c. Isabel Robb
 - d. Dorothea Dix
5. The first practical nursing school was a 3-month course. What was the primary role of the practical nurse after graduation from this program?
- a. Care of infants, children, older adults, and disabled in the client's home
 - b. Care of all client populations in the hospital setting
 - c. Advanced care of adult client's in home and hospital
 - d. Assisting the physician in surgical procedures

CHAPTER RESOURCES

Explore these additional resources to enhance learning for this chapter:

- NCLEX-Style Questions, Web Resources, and other Student Resources on **thePoint** <http://thePoint.lww.com/Rosdahl11e>
- Chapter 1 in *Workbook for Textbook of Basic Nursing, 11e*
- prepU