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Validation of the nursing diagnosis of impaired walking in elderly

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BMC Health Services Research 2018, **18(Suppl 2):**P176

Background
The increase in longevity causes restriction of activity in the elderly, causing changes on the execution of daily activities and consequently on the quality of life [1]. Walk is an activity that requires using a variety of skills and can be highly complex particularly for the elderly people [2]. The nursing diagnosis impaired walking is part of NANDA International since 1998 and requires further validation to improve the clinical evidence [3].

Objective
To validate the nursing diagnosis impaired walking in a sample composed of elderly.

Methods
Observational, cross-sectional and quantitative study. After the first research phase of systematic literature review several defining characteristics and related factors of the diagnosis impaired walking have been listed.2 Then, the translation, linguistic and cultural adaptation of the nursing diagnosis was conducted, and finally, the clinical validation of the diagnosis using the clinical validation model of Richard Fehring [4], in a sample of elderly and counting on the collaboration of registered nurses and rehabilitation nurses to collect the data and fill the questionnaires, which comprised demographic data, the defining characteristics, related factors and falls efficacy scale international [5]. The study was approved by the ethical committee of SESARAM. E.P.E (Madeira Island Healthcare System).

Results
In the systematic literature review 17 defining characteristics and 34 etiological factors of impaired walking have been identified. A European Portuguese version was obtained to validate in a sample of 126 elderly, whose average age was 73.86 years, mostly female, with the primary school, in a situation of retirement, widowed and with history of falls. The prevalence of "impaired walk" was 64.3% according to the expert's opinion and 67.5% according to the elderly. All defining characteristics and related factors have been validated. The most sensitive defining characteristic was nine (e.g. impaired ability of gait speed) and also four related factors (fear of falling, physical deconditioning, medication and feminine gender).

Conclusions
This study justifies the need to review the defining characteristics and related factors of impaired walking. The identification of the most sensitive defining characteristics facilitates nurses' clinical reasoning and interventions towards effective nursing outcomes.

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Validation of the nursing diagnosis risk for falls in elderly

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BMC Health Services Research 2018, **18(Suppl 2):**P177

Background
Falls and their consequences are critical for for elderly well-being quality of life, for caregivers, and for health care providers [1]. The nursing diagnosis risk for falls is listed in NANDA International since 2000 [2]. This diagnosis seems particularly important in planning effective nursing care for the community-dwelling elderly.

Objective
To validate the nursing diagnosis risk for falls in a sample of elderly.

Methods
Observational, cross-sectional and quantitative study conducted in three phases. The first phase, corresponded to a systematic literature review to identify the risk factors of risk for falls [3]. The second phase consisted of the translation, linguistic and cultural adaptation of the nursing diagnosis for European Portuguese language. The third, was the clinical validation of the diagnosis using the clinical validation model of Richard Fehring [4], in a sample of elderly and counting on the collaboration of registered nurses and rehabilitation nurses to collect the data and fill the questionnaires, which comprised demographic data, the risk factors and falls efficacy scale international [5]. The study was approved by the ethical committee of SESARAM. E.P.E (Madeira Island Healthcare System).

Results
A total of 50 risk factors of risk for falls have been identified in the systematic literature review. A European Portuguese version was obtained and submitted to the clinical validation in a sample of 126 elderly, whose average age was 73.86 years, mostly female, with the primary school, in a situation of retirement, widowed and with history of falls. The prevalence of risk for falls was 68.3% in the expert's opinion and 63.5% in the opinion of the elderly. All risk factors have been validated. The most sensitive risk factor was history of falls, co-morbidities, feminine gender, polymedication, difficulty with gait, and drugs.