

THESIS TITLE : THE 'CLINICAL VALIDATION OF NURSING DIAGNOSIS :

ACTIVITY INTOLERANCE

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ABSTRACT

The purpose of this study was to test the construct validity of nursing diagnosis : Activity Intolerance using on inductive method. This method was combined between the Retrospective Identification Model and the Clinical Model as proposed by Gordon and Sweeney (1979), the procedures of this study are similar to those reported by Lo and Kim (1986).

This study used two sample groups. The first group comprised of 50 patients diagnosed as having a problem of Activity Intolerance and had either cardiovascular, respiratory or neuromuscular disorder or mix type of disorder. The patients were admitted in medical ward at Rajavithi and Bhumibol Adulyadej Hospital. The second group comprised of 50 clinical expertists, all are professional clinical

nurses who either had a master's degree of nursing science or are now completing their master's degree. The nurses had clinical experience for at least 5 years and had experience in using nursing diagnosis for at least 2 years.

The research instrument was divided into 2 parts, the demographic information part and defining characteristics of Activity Intolerance part. The research instrument was reviewed through content validity by 11 experts.

The data was analysed by frequency distribution and percentage for each demographic characteristics. The construct validity of defining characteristics of Activity Intolerance was analysed by Cronbach's alpha, interitem correlation and corrected item-total correlation to test the homogeneity of items and the quality of items. The average of median was designated for selection of essential defining characteristics.

The results are as follow :

1) The defining characteristics of Activity Intolerance which were presented in clinical situation were : item 1) Verbal report of fatigue 2) Discomfort on exertion 4) Fearful to fall or syncope during activity 5) Lack of volition to do activity of daily living 6) Feeling of postural hypotension 7) Desire to sleep most of the time 8) Feeling of palpitation 9) Dyspnea or shortness of breath 12) Profuse sweating 13) Feeling of weakness 14) Confusion 15) Dizziness during changing position 16) Avoidance of activity 17) Decreased activity of daily living performance 19) Change in posture and equilibrium 20) Progressive slowing, decreased dexterity during daily activity 21) Sweating during changing position 23) Excessive increase in respiratory rate 26) Excessive increase in pulse rate 27) Decrease in pulse strength 28) Pulse irregular rhythm 29) Decrease in systolic blood pressure 10-15 mm.Hg 31) Skin color change 32) Skin

The result indicated that:

1. The achievement of the students who used the programmed instruction did significantly higher than the students who used conventional instruction at .05 level.

2. The practice using word processing by using microcomputer of the students who used the programmed instruction did significantly higher than the students who used conventional instruction at .05 level.

3. The students' opinions towards the programmed instruction were average at the high level.