

ABSTRACT

Immobilization syndrome or syndrome of inactivity is a secondary disorder of the body. Causes of immobilization syndrome may be severe pain, nervous, skeletal and muscular system, generalized weakness, psychosocial problems, infectious processes and age. Immobilization syndrome affects not only the musculoskeletal system, but also the cardiovascular system, respiratory system, urinary system, skin, nervous system and overall metabolism.

Thesis on "Activation patients with immobilization syndrome" is divided into theoretical and practical part. The theoretical part deals with the problem of immobilization syndrome and is focused primarily on patient activation. The theoretical part also mentions education of nurses in this field.

The practical part deals with analyzing and evaluating the results of quantitative research obtained on the basis of a questionnaire survey among general nurses from the department of geriatrics, follow-up care and hospice. Responders, who I have chosen, come from both state departments of health facilities and the private sector.

The main aim of the thesis was to find out what is used in long-term care, for subsequent care departments and the Department of Geriatrics methods of activation in patients with immobilization syndrome. Individual objectives were to find out what is the usual number of paramedical staff present in one shift and how often patients with immobilization syndrome on a daily shift energize and which activation devices for activating the patient's individual devices use. The last objective was to determine whether there is a difference between the activities of patients with immobilization syndrome in the public and private sectors in the frequency and methods of activation.

In the conclusion I recommend activation techniques for practice intended for paramedical staff. It is also created educational material activation of patients, which will serve as a support tool for setting and achieving educational goals. The function of educational resources should be motivational, informational and logical, visual, activation and linking theory with practice.

keywords:

Activation of the patient, geriatrics, follow-up care, hospice, mobility aids.