



RESEARCH ARTICLE

ACADEMIC EXPERIENCE IN SUPERVISED CURRICULAR INTERNSHIPS

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ABSTRACT

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The present work seeks to present reports of the experiences of supervised internships in the hospital, in the Intensive Care Unit and emergency and emergency of the Regional Hospitals of Sousa and Cajazeiras-PB, and aims to present experience throughout the supervised internships in the environment. Hospital. The supervised internship is of fundamental importance for academic life, as this experience offers the relationship between theory and practice.

INTRODUCTION

The supervised internship allows the future professional to know, analyze and reflect on their work environment. For that, the internship student needs to face the reality equipped with the theories he learns along the course, the reflections he makes from the practice he observes, experiences he lived and lives as a student, the conceptions he carries about teaching and learning, in addition to the skills you learned to develop over the course you chose (ANDRE e ABREU, 2006; SILVA e SCHNETZLER, 2008; CORTE E LEMKE, 2015; AMARAL, et al 2018;).

The internship improves our knowledge, making it possible to carry out the possible mediations between theory and practice, to the same extent that it contributes decisively in this training to professional life, making people qualified to work in their area of training (SILVA, 2015)..

It is worth noting that the internship or practical activity should not be seen as a mere instrument to provide the student with the application of the theory learned in the classroom, however, as a moment for him, through theoretical knowledge, to use the practice in practice. Attempt to modify reality - both in the place where the internship is being developed, and in the student's own - becoming, therefore, praxis and breaking with the existing dichotomy between practice and theory, to build the profile of a critical professional and reflective in the search for a more just Society (COSTA, 2019).

The internship experience is essential for the integral formation of the student, considering that more and more professionals with skills and well-prepared are required. Upon arriving at the university the student is faced with theoretical knowledge, however, it is often difficult to relate theory and practice if the student does not experience real moments when it will be necessary to analyze everyday life (MAFUANI, 2011; BERNARDY e PAZ, 2012; CHISTÉ, 2016).

According to Bianchi et al. (2005) the Supervised Internship is an experience in which the student shows his creativity, independence and character. This step provides you with an opportunity to see if your professional choice matches your technical aptitude. This activity is offered in undergraduate courses from the second half of the same, when the undergraduate is already inserted in academic discussions for teacher training and it is only temporary (MAIA, 2020).

The Supervised Curricular Internship began in February 2019 and ended in June 2019. The internship fields were: the Intensive Care Unit (ICU) and Urgency and Emergency at Sousa and Cajazeiras Regional Hospitals (HRS and HRC, respectively), the Banco de Leite, the Management, the Emergency Care Unit (UPA) of Cajazeiras, Pediatrics and the Medical Clinic.

The purpose of this report is to present the experience throughout the supervised internships in the hospital, seeking to emphasize the importance of paying

attention to the needs of the user, and also to the needs of the entire health team that needs dignified conditions to perform your work even with the great demand demanded.

DEVELOPMENT

Intensive Care Unit (ICU)

The Intensive Care Unit (ICU) is the place where clinical or surgical patients of the highest complexity are concentrated, these patients may need monitoring and ventilatory support and control of their vital functions due to the high degree of complexity that the patient may present, this patient profile presents diseases or clinical conditions predisposing to infections (JÚLIO; TERZI, 2013).

Based on what was said by Júlio and Terzi, Camelo (2012), explain that the nurse's work in an ICU is characterized by complex care and managerial activities that require technical and scientific competence, whose decision-making and adoption of safe conducts they are directly related to people's lives and deaths (CAMELO, 2012).

On February 11, 2019, the first internship was performed at the ICU of the Regional Hospital of Cajazeiras (HRC), which had the following activities developed: gasometry, exchange and Nasoenteral Probe (SNE), administration of food by gavage and medication by SNE, observation of debridement of Pressure Injury, and finally, it was made to the Nursing Evolution. On February 18, we returned to the HRC ICU and made dressings, patient admission, explanation of mechanical ventilation, Central Venous Pressure (PVC), installation of AUNI, a hypertensive complication and another of Acute Lung Edema (EAP) and the Evolution of Nursing from the Systematization of Nursing Assistance (SAE).

In May 2019, internships started to be developed in the HRS ICU. On the first day of the internship in the ICU (May 7th), blood gas analysis was carried out, where the parameters of normality and changes in the examination were observed; SAE and nursing evolution were also carried out. May 14 was marked by simple procedures: passage of SNE, dressing, SSVV and blood gas analysis. On May 16, we actively participated in the care of the patient who had suffered a Cardiorespiratory Arrest (CRP) and performed the cardiopulmonary resuscitation maneuvers; we also assisted in the passage of SNE and SVD and made an ECG; after all procedures were carried out, we ended with the evolution of nursing.

Urgency and emergency

The role of nurses in urgent and emergency services requires a variety of knowledge, which is essential for the care of patients with complex needs. The present technologies, the permanent need for scientific improvement and the humanization of care configure particularities to nurses' actions (MORAIS FILHO et al., 2018).

In the months of February and May 2019, the

internships were carried out at the Urgência e Emergência of the Hospital Regional de Cajazeiras (HRC) and the Hospital Regional de Sousa (HRS).

On February 13, the internship in Urgency and Emergency of the HRC took place, where the bladder tube was administered, medication administration, dressings, restraint, an Electrocardiogram (ECG) was performed, it was also possible to monitor the passage of the SNE, carrying out the check-list of the stop cart, we discussed about the sedation scales and Glasgow after we were presented with a clinical case of urgency and emergency, and later, the Nursing Evolution was made. On February 20 at the Urgency and Emergency of the HRC, dressings, tutoring, observation of the passage of the Central Venous Catheter (CVC), monitoring of hemorrhoids assessment, identification of UTS, care in an intercurrent event of Acute Myocardial Infarction (AMI) were performed and Nursing Evolution.

On the 2nd of May it was possible to change the bladder catheter (SVD) and the bladder catheter (VAS), in addition to assisting in small surgeries, performing dressings, administering medications, collecting blood gases, vital signs (SSVV) and the occurrence of an EAP.

Emergency Care Unit (UPA)

The Emergency Care Units (UPAs) occupy the intermediate level of complexity between the Basic Health Units (primary care) and medium and high complexity, integrating the Fixed Pre-Hospital Network. Created in 2002, the proposal was based on successful experiences in cities such as Campinas-SP, Curitiba-PR, Belo Horizonte-MG and Rio de Janeiro-RJ. They operate 24 hours a day, performing risk classification screening, providing resolute care to patients affected by acute or chronic conditions, cases of low complexity, both at night and on weekends, when the basic network and the Health Strategy of the family members are not active, building coherent and effective referral and counter-referral flows with other health institutions and services in the locoregional system (OLIVEIRA et al., 2015).

The internship at the Cajazeiras UPA was carried out between February 26th and March 19th, 2019 and was supervised by professor Margarida Maria Lima Rolim de Oliveira. On February 26, 2019, the risk classification and medication administration were carried out; on February 28, the risk classification, medication administration and an electrocardiogram (ECG) were performed. In March the internships started on the 12th with risk classification and medication administration; on March 14, among the activities carried out, risk classification, medication administration, an electrocardiogram and the monitoring of a transfer to the Regional Hospital of Cajazeiras (HRC) stood out; finally, on the 19th of March the risk classification and administration of medications were carried out.

Pediatrics

Between March 21 and April 4, 2019, the internship in Pediatrics was carried out. At this stage, in particular, we

feel the family's participation in the hospital environment closely. In this sense, Xavier et al. (2014), say that the insertion of the family in the hospital environment has demanded new forms of organization in the dynamics of nursing care. In the case of pediatric hospitalization, in order to provide comprehensive care to the child, it is essential to return attention to the needs of the family, developing a care proposal centered on the child-family dyad.

The activities developed in pediatrics were as follows: on March 26, medication administration, nursing evolution, verification of vital signs (SSVV), lecture with mothers and later guidance were performed; on March 28 the duty was received with a bed-to-bed visit, followed by risk classification and drug administration. On April 2, the risk classification was carried out; medication administration; visit to a newborn using phototherapy, explanation of physiological and pathological jaundice, as well as the importance of phototherapy; visit to the foot text; visits the room at the breast milk collection station and approaches the types of milk at each stage of breastfeeding. On April 4, the risk classification was also carried out; medication administration and lecture on child care.

Milk Bank

The Brazilian Human Milk Bank Network is considered the largest and most complex in the world by the World Health Organization (WHO). Among the 292 human milk banks in the world, 72.9% (213) of them are in Brazil. Between 2008 and 2014, the units benefited 88.5% (about 11 million) of all women assisted in the world and had the support of 93.2% of milk donors. Brazilian women were responsible for 89.2% of the collection of the 1.1 million liters of milk donated and benefited 79.1% of all newborns served in these spaces, making Brazil the country with the largest number of donors of human milk in the world (ROCHA et al. 2016).

The internship at Banco de Leite took place in February in the morning. On February 15, 2019, where the nursing consultation was developed; foot test; childcare; guidance on breastfeeding, sunbathing and care for the umbilical stump; explanation of the class; puerperal visits to the maternity hospital. On February 22, 2019, the nursing consultation, childcare, guidance, explanation, visits to the puerperal women and guidance to mothers on baby feet and breastfeeding were carried out.

Hospital management

Hospital management in the 21st century is invariably complex, regardless of the region, the following points must be taken into account: regulation, financing and available technologies. Managerial demands require specific knowledge in the management of human and physical resources. Among the issues that collaborate with the increase in complexity in hospital management at the international level, we highlight the expansion of the potential client base, with the increase of the elderly

population and the continuous increase of patients with chronic diseases, which imply an increase in demand hospitals, regardless of the type of management, public or private, aggravating a situation of scarcity of medical resources and long waits for care (FARIAS; ARAUJO, 2017).

During the month of February, in the afternoon, an internship in Hospital Management was carried out. On February 15, 2019, a visit was made to the management sector, where it was possible to explain the structure and operation of the hospital, compulsory notification diseases, regulation of vacancies, internal assistance networks and regulation, transfer, examinations and agreements. ; we also received guidance on the flowchart, service networks (serving 15 municipalities), Hospital Infection Control Commissions (CCIH) and Internal Regulation Center (NIR). On February 22, there was an explanation regarding billing, treasury and hospital care records.

Maternity

The practice in the maternity hospital was one of the most special stages experienced throughout this time and occurred between May 20 and June 3, 2019.

On May 20, BCG vaccination was monitored and visits to puerperal women and newborns, nursing evolution, assistance to newborns in immediate and immediate care, guidance to mothers about breastfeeding and care for newborns; Assistance to pregnant women in labor; venous puncture; performing a touch exam; auscultation of fetal heartbeat (BCF), administration of medications.

On May 22, the mothers and newborns were again able to visit; assistance to pregnant women in labor; assistance to the NB in immediate and immediate care; venous puncture; medication administration and nursing evolution. On May 27, assistance was given to women in abortion situations; obstetric screening; measurement of vital signs. On May 29, the nursing consultation, medication administration, SSVV measurement and nursing evolution were carried out.

On June 3, 2019, the nursing consultation was made, the SSVV was checked, medication administration, assistance to pregnant women in labor, assistance to the NB in immediate and immediate care and nursing evolution.

Medical clinic

In April 2019, the internship took place at the Medical Clinic (CM) of HRS in the city of Sousa-PB. The medical clinic has 31 beds - male, female and 2 isolations, the Kanban method was implemented, they have 2 nurses and 4 technicians; has a high demand and is considered of medium complexity.

Among the activities developed, on April 9 it was possible to make the evolution of nursing, physical examination, dressings and the discussion about the clinical cases of CM; On April 16, dressings, physical exam, nursing evolution, measurement of SSVV were performed and we

also monitor patients with pathologies, such as: COPD (Chronic Obstructive Pulmonary Disease), Acute Myocardial Infarction (AMI), cardiovascular disease and diabetic foot. On April 23, the last internship day in the sector, nursing evolution, physical examination, dressings, ECG, SSVV measurement and multiple cases of pressure injuries were performed.

According to Rocha et al. (2018), COPD is preventable and treatable, characterized by resistant and progressive airflow obstruction, being partially reversible. It is usually associated with the inflammatory response of the lungs to harmful particles or gases. Extrapulmonary manifestations are very common in patients with COPD and skeletal muscle weakness is associated with reduced muscle strength and resistance, negatively affecting exercise tolerance, functional independence and deteriorating quality of life.

COPD represents the fourth leading cause of death in the world, with respect to Brazil it is estimated that seven million people over 40 years of age are affected by COPD. The disease is the 12th most prevalent in the world, and the World Health Organization (WHO) considers that it will be the fifth in the year 2020. From the sixth cause of death today, it will pass in that same period of time to the second cause. COPD was the fifth leading cause of hospitalization in the public health system in Brazil, in people over 40 years of age, with 196,698 hospitalizations and an approximate cost of 72 million reais (SILVA, 2012; KERKOSKI; BORENSTEIN; SILVA, 2010).

With regard to acute coronary syndromes (ACS), such as acute myocardial infarction (AMI) and unstable angina, Ding et al. (2019), explain that AMI refers to acute focal myocardial necrosis caused by prolonged and severe myocardial ischemia. Jesus (2019) adds that in 2011, of the 20 million individuals who suffered from CVD worldwide, approximately 12 million were fatal victims of AMI. This has a growing socioeconomic impact and is considered a problem for public health worldwide.

Surgery Center

According to Carvalho et al. (2015), surgical centers (CC) are high-risk scenarios, extremely susceptible to errors. In this hospital environment, work processes are complex, interdisciplinary practices, strongly dependent on individual and team performance in environmental conditions, dominated by pressure and stress.

In view of what was said by Carvalho and collaborators, it is observed that the CC is a very stressful environment and this was followed throughout the practice in the internships carried out in the sector, which started on June 3, 2019 and ended on December 12. June of the current year.

The Surgical Clinic is divided into 2 (two) posts - one female and one male, 20 beds in each post and orthotrauma, gastric and urological care. There is a general surgeon and an orthopedist for evolution every day, a nurse and 2 nursing technicians in each post - where a nurse performs infected dressings, 5 professionals from the social,

nutritional and physical therapy services. It was noticed that the beds are not adapted to change the position.

Regarding the physical structure of the CC, there are three surgical wards (general surgery, obstetrics and orthopedics), however the structure is very old, as it has an entrance door and an exit door. The number of material is reasonable and the boxes are complete, but there are obstacles due to the lack of a satellite pharmacy to replace material, there is no anesthetic recovery room (RPA), the systematization of nursing care (SAE) leaves something to be desired in the process to the patient. As for human resources, there is a nurse at the CME, a daily nurse, a sector coordinator, three nursing technicians from the CC, 2 nursing technicians from the CME - one in the purge and the other in sterilization.

CONCLUSION

In view of this, it is noted that the supervised internships serve so that students can experience in practice the theoretical learning they have obtained throughout academic life. Nevertheless, these experiences allow the student to be able to seek his own look at the reality he observes during the internships.

As mentioned, this work tried to provide a study about the supervised internship activity in the professional training process. It was found in the path of this process through the research carried out, advances, limits, challenges, possibilities for carrying out this activity.

This new context demands commitment and responsibility, especially when it is linked to the most varied fields of internships, such as the ICU, urgency and emergency, the emergency care unit (UPA), pediatrics, surgical center, milk bank, maternity, medical clinic and also in hospital management; launching in the student a new perspective on each of the places where he can develop his practice.

In view of all that has been exposed, it is concluded that the supervised internship is extremely important in the student's life, as it is a period of experience in which the university student can apply the theory in a practical way to eliminate future failures, deepen knowledge in determined area and enable significant learning in relation to the future profession through experiencing the reality observed in the hospital.

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