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## NURSING AND CARE OF PATIENTS WITH STABLE CORONARY ARTERY DISEASE

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**Abstract**

***Introduction:*** Stable ischemic heart disease (SIHD) is caused by an insufficient blood supply to the heart. Lifestyle, medications, and interventions significantly influence this process, leading to disease stabilization or regression. This study aims to describe the interventions in nursing health education.

***Methods:*** Design: descriptive and cross-sectional. A representative sociological survey was conducted. A non-standardized questionnaire was used to collect data. The sample consists of 602 nurses selected by quota sampling constructed in a structure corresponding to the composition of the core sample in terms of age, gender, and region. ***Results:*** More than half of the respondents (62.1%) had not undergone any further training focused on education on modifiable SIHD risk factors. 52.2% of respondents said that, in their ward, a doctor provided nutritional education. The average time spent on education was 12.1 minutes. This time was regarded as sufficient by 42.2% of respondents. 38.4% of respondents had no clear opinion on this matter and decided to answer: *"Hard to decide."* In the education on nutrition as a risk factor for cardiovascular diseases, more than 2/5 (60.6%) of respondents answered that at their ward, this education was provided by nurses, and 33.4% chose a negative answer. ***Conclusion:*** The increase in the competence of cardiologic nurses is one of the priorities of the Czech health care system. Nurses must be more involved in educating patients on the influence of SIHD risk factors.

***Keywords:*** Stable ischemic heart disease. Risk factors. Education. Nurse.

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# VÝZNAM A FUNKCE EDUKAČNÍCH SESTER VE FAKULTNÍ NEMOCNICI OLOMOUC

# THE SIGNIFICANCE AND ROLE OF EDUCATIONAL NURSEA AT THE UNIVERSITY HOSPITAL OLOMOUC

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## Abstrakt

***Úvod:*** Edukace je systematický proces výchovy a vzdělávání zaměřený na získávání odborných znalostí, praktických dovedností a rozvoj hodnotové orientace, postojů a volních vlastností jedince. V kontextu zdravotní péče představuje edukace nedílnou součást podpory soběstačnosti pacienta a posilování jeho aktivní účasti na léčebném procesu. Ve Fakultní nemocnici Olomouc působí od roku 2017 specializovaný tým edukačních sester, který hraje klíčovou roli v poskytování kvalitní a individualizované ošetřovatelské péče. Jejich činnost se zaměřuje nejen na edukaci pacientů a jejich blízkých, ale také na metodickou podporu zdravotnického personálu v oblasti edukačních postupů. ***Cíl:*** Cílem příspěvku je představit činnost specializovaného týmu edukačních sester ve Fakultní nemocnici Olomouc, jenž je tvořen 23 odborně vyškolenými sestrami s různými úvazky. ***Metodika:*** Edukace pacientů je realizována dle standardizovaného schématu, přičemž je vždy přizpůsobena individuálním potřebám pacienta a jeho rodiny. Edukační proces je koncipován jako cyklický, strukturovaný a klade důraz na aktivní participaci pacienta s ohledem na jeho zdravotní stav, schopnosti a preference. Před zahájením edukační lekce jsou stanoveny konkrétní cíle vzdělávání, definován obsah, voleny adekvátní metody a formy výuky, určeny podmínky realizace a stanovena evaluační kritéria pro hodnocení efektivity edukace. Skupinová forma edukace se uplatňuje zejména při vzdělávání zdravotnických pracovníků v konkrétních oblastech odborné péče, kde je cílem sjednocení postupů a sdílení dobré praxe. ***Závěr:*** Edukační sestry představují klíčový prvek v poskytování efektivní, komplexní a preventivně zaměřené ošetřovatelské péče. Jejich cílená edukační činnost významně přispívá ke zvyšování zdravotní gramotnosti pacientů, prevenci komplikací, podpoře adherence k léčebnému režimu a celkovému zlepšení kvality života. Včasná a systematická edukace zároveň napomáhá ke snížení rizika opakovaných hospitalizací a optimalizaci zdravotní péče v širším kontextu.

***Klíčová slova:*** Ošetřovatelství. Edukační sestra. Edukace. Komunikace.

**Abstract**

***Introduction:*** Education is a systematic process of upbringing and instruction aimed at acquiring professional knowledge, practical skills, and developing an individual's value orientation, attitudes, and volitional traits. In the context of healthcare, patient education represents an inseparable part of supporting the patient's self-sufficiency and strengthening their active participation in the treatment process. Since 2017, a specialized team of educational nurses has been operating at the University Hospital Olomouc, playing a key role in providing high-quality and individualized nursing care. Their activity focuses not only on educating patients and their relatives but also on providing methodological support to healthcare staff in the field of educational procedures. ***Objective:*** The aim of this paper is to present the activities of the specialized team of educational nurses at the University Hospital Olomouc, which consists of 23 professionally trained nurses with various workloads. ***Methodology:*** Patient education is carried out according to a standardized scheme, while always being individually adapted to the needs of the patient and their family. The educational process is conceived as cyclical, structured, and placing emphasis on the active participation of the patient, taking into account their health condition, abilities, and preferences. Prior to the educational session, specific learning objectives are defined, the content and appropriate methods and forms of instruction are selected, the conditions for implementation are determined, and evaluation criteria for assessing the effectiveness of education are established. Group education is primarily used in the training of healthcare professionals in specific areas of specialized care, aiming to unify procedures and share best practices.

***Conclusion:*** Educational nurses represent a key element in delivering effective, comprehensive, and always preventive-oriented nursing care. Their targeted educational efforts significantly contribute to improving patients' health literacy, preventing complications, supporting adherence to treatment regimens, and enhancing overall quality of life. Timely and systematic education also helps reduce the risk of repeated hospitalizations and supports the optimization of healthcare delivery in a broader context.

***Keywords:*** Nursing. Educational nurse. Education. Communication.

Použité bibliografické zdroje:

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# NUDA NA VŠ? OSOBNOSTNĚ SITUAČNÍ KONSTELACE NUDY NA FZS ZČU V PLZNI

# BOREDOM AT UNIVERSITY? THE PERSONALITY AND SITUATIONAL CONSTELLATION OF BOREDOM AT THE FACULTY OF HEALTH CARE STUDIES OF THE UNIVERSITY OF WEST BOHEMIA IN PILSEN

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**Abstract**

***Introduction:*** This research project responds to the regional shortage of non-medical healthcare workers currently facing healthcare facilities across the Czech Republic. The problem of academic failure in Czech universities has been addressed in studies by Kubíková & Boháčová et al., 2024. ***Objective:*** The main objective of the research is to map the level of boredom and identify personal and situational factors that influence the perception and experience of boredom among university students in the study programs of General Nursing and Midwifery. ***Methodology:*** The research is designed as a quantitative cross-sectional study. The research battery consisted of author-designed questions and the MSBS (Fahlman et al., 2011). The sample consists of students from the 1st to 3rd year of the bachelor's degree programs in General Nursing and Midwifery. The findings from the open-ended questions were subjected to content category analysis, and the quantitative data were evaluated using descriptive and inductive analysis. ***Results***: Based on the results of qualitative and quantitative data analysis, we can confirm that academic failure is linked to both risky personality factors (especially low motivation) and negative situational factors, which are reflected in the experience of boredom at university. Analysis of the concept of boredom suggests correlations between the perception of boredom, its experience, personality traits, and situational factors. ***Conclusion:*** The recommendations arising from the research survey call for discussion with the aim of increasing the number of successful graduates who will be key to maintaining a high level of healthcare not only in the Pilsen Region.

***Keywords:*** Failure. Study. Risky student. Motivation to study. Boredom at school.

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# VNÍMANÉ DÔVODY NEDOKONČENEJ OŠETROVATEĽSKEJ STAROSTLIVOSTI ZO STRANY ŠTUDENTOV OŠETROVATEĽSTVA

# PERCEIVED REASONS FOR UNFINISHED NURSING CARE REPORTED BY NURSING STUDENTS

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## Abstrakt

***Úvod:*** Nedokončená ošetrovateľská starostlivosť zahŕňa oneskorené, neúplné alebo úplne vynechané aspekty potrebnej starostlivosti o pacienta. Zatiaľ čo sa existujúci výskum zameriava najmä na sestry, len minimálna pozornosť bola venovaná skúsenostiam študentov ošetrovateľstva. Pochopenie dôvodov nedokončenej ošetrovateľskej starostlivosti z pohľadu študentov je kľúčové, keďže odráža výzvy spojené s klinickým vzdelávaním a poskytovaním starostlivosti. ***Cieľ:*** Cieľom tejto deskriptívnej prierezovej štúdie bolo preskúmať vnímané dôvody nedokončenej ošetrovateľskej starostlivosti uvádzané študentmi ošetrovateľstva počas ich klinickej praxe. ***Metodika:*** Zber údajov prebiehal od septembra do decembra 2023 pomocou druhej časti slovenskej verzie dotazníka Unfinished Nursing Care Survey for Students (UNCS4S), ktorá sa zameriava na dôvody nedokončenej starostlivosti. Výskumnú vzorku tvorilo 242 študentov ošetrovateľstva z dvoch fakúlt v Slovenskej republike. Údaje boli analyzované pomocou deskriptívnej a inferenčnej štatistiky v programe IBM SPSS Statistics 25.0. ***Výsledky:*** Medzi najčastejšie uvádzané dôvody nedokončenej ošetrovateľskej starostlivosti patrili nedostatočný počet sestier na pracovisku ($M = 4,05$; $SD = 1,173$), nedostatok pomocného personálu, ako sú sanitári ($M = 3,75$; $SD = 1,186$), a neočakávaný nárast počtu pacientov v kritickom stave ($M = 3,62$; $SD = 1,203$). Okrem toho vnímanie dôvodov nedokončenej starostlivosti významne ovplyvňovali viaceré premenné, vrátane veku, počtu pacientov počas poslednej zmeny, počtu študentov na zmene, počtu novoprijatých pacientov, typu supervízie, predchádzajúceho vzdelania a predchádzajúcich skúseností v zdravotníctve ($p \leq 0,05$). Záver. Pochopenie faktorov prispievajúcich k nedokončenej ošetrovateľskej starostlivosti z pohľadu študentov je nevyhnutné pre zlepšenie klinického vzdelávania a bezpečnosti pacienta. Zlepšenie supervízie, klinického prostredia, a podpora študentov predstavujú kľúčové kroky k zníženiu výskytu nedokončenej starostlivosti a k efektívnejšej príprave budúcich sestier.

***Kľúčové slová:*** Bezpečnosť pacientov. Klinická prax. Nedokončená starostlivosť. Ošetrovateľstvo. Študent ošetrovateľstva.

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**Abstract**

***Introduction:*** Unfinished nursing care involves delayed, incomplete, or omitted aspects of required patient care. While existing research highlights this issue among registered nurses, limited attention has been given to nursing students' experiences. Understanding the reasons behind unfinished nursing care from the student perspective is crucial, as it reflects challenges in clinical learning and care delivery. ***Aim:*** This descriptive cross-sectional study aimed to explore the reasons for unfinished nursing care as reported by nursing students during their clinical placements. ***Methods:*** Data were collected between September and December 2023 using the second section of the Slovak version of the Unfinished Nursing Care Survey for Students (UNCS4S), which focuses on reasons for unfinished nursing care. The sample included 242 nursing students from two faculties in the Slovak Republic. Data were analyzed using descriptive and inferential statistics with IBM SPSS Statistics 25.0.***Results:*** The most frequently reported reasons for unfinished nursing care among nursing students were an insufficient number of nurses in the workplace (M = 4.05; SD = 1.173), a lack of support staff such as nursing assistants (M = 3.75; SD = 1.186), and an unexpected increase in critically ill patients (M = 3.62; SD = 1.203). Furthermore, several variables significantly influenced students' perceptions of the reasons for unfinished care, including age, number of patients during the last shift, number of students present during the last shift, number of newly admitted patients, type of supervision, previous education, and prior healthcare experience ($p \leq 0.05$). ***Conclusion:*** Understanding the factors contributing to unfinished nursing care from the student perspective is essential for improving clinical education and patient safety. Improving

supervision, the clinical environment, and student support represent key steps toward reducing the incidence of unfinished care and enhancing the effective preparation of future nurses.

***Keywords:*** Patient safety. Clinical practice. Unfinished care. Nursing. Nursing student.

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# "I OFTEN CONSIDER LEAVING": REASONS SUPPORTING NURSES' INTENTION TO LEAVE SOCIAL SERVICES HOMES

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**Abstract**

***Introduction:*** In Slovakia, nurses' intention to leave social services homes represents a critical professional challenge, as it contributes to insufficient staffing levels, thus jeopardizing the sustainability of the system of providing nursing care within this category of long-term care facility. ***Aim:*** Present the preliminary findings of an exploratory qualitative study focused on identifying the reasons supporting nurses' intention to leave social services homes using reflective thematic analysis. ***Methodology:*** Preliminary results are established through the creation of initial themes, derived from the systematic grouping of codes generated from the transcripts of five in-depth semi-structured interviews with five nurses working in three social services homes. ATLAS.ti software was utilized for the rigorous processing of qualitative data. ***Results:*** Initial themes were formulated following the third step of the reflective thematic analysis. These themes suggest that nurses experienced an inadequate mode of nursing care provision, a lack of collegiality within the team, a demeaning and authoritarian approach from the head nurse, impaired cooperation within the multidisciplinary team, excessive workload leading to a lack of time for family life, the perception of high client responsibility, and a simultaneous absence of professional appreciation. These experiences were perceived by nurses as factors contributing to their intention to leave their positions in social services homes. ***Conclusion:*** Initial themes facilitate an interim understanding of the collected data, allowing for the refinement of the interview protocol with new questions to capture the full complexity of nurses' experiences regarding their intention to leave social services homes in the further continuation of the research.

***Keywords:*** Nurse/Sestra. Long-term care/Dlhodobá starostlivosť. Intention to leave/Úmysel odísť. Reasons/Dôvody. Reflexive thematic analysis/Reflexívna tematická analýza.

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# RÓŻNICE PŁCIOWE W MOTYWACJI DO RZUCENIA PALENIA WŚRÓD STUDENTÓW KIERINKÓW MEDYCZNYCH

# GENDER DIFFERENCES IN SMOKING CESSATION MOTIVATION AMONG MEDICAL STUDENTS

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## Abstract

***Introduction:*** Smoking is a major public health problem and one of the leading causes of chronic diseases. Medical students are a particularly important group from the perspective of prevention - they will not only be responsible for their own health, but also serve as role models and educators for patients. Understanding factors motivating smoking cessation in this group is highly significant, particularly in view of potential gender differences in the decision to quit smoking. ***Goal:*** The aim of the study was to determine the factors motivating medical students to quit smoking and to identify gender differences in these motivations. ***Methodology:*** For this study, a proprietary questionnaire and the Test of Motivation for Ceasing Smoking by Schneider were used. ***The results:*** Among 135 medical students using tobacco products, females predominated over males (64.4% vs 35.6%). Respondents with low (<7 points) and high (≥7 points) motivation to quit smoking reported a similar number of motivations. Women most often cited the risk of disease (66.3%), reducing expenses (55.8%), aversion to addiction (53.5%) and concerns about appearance-related changes (39.5%); pregnancy was also a characteristic factor (19.8%). Men were more likely to cite motivations such as reducing expenses (68.9%), concerns about appearance-related changes (48.9%), loss of attractiveness (44.4%), and social campaigns (15.6%).

***Conclusion:*** The results indicate that motivations for smoking cessation differ by gender - women are more often driven by health considerations, while men more frequently emphasize economic and appearance-related aspects. Taking these differences into account may be crucial in planning effective preventive strategies and smoking cessation programs for medical students.

***Keywords:*** Motivation. Nicotine. Students. Smoking.

***Kľúčové slová:*** Motivácia. Nikotín. Študenti. Fajčenie.

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# THE IMPACT OF CAREER ANCHORS AND PERSONAL RESPONSIBILITY ON STUDY SATISFACTION AMONG HEALTHCARE STUDENTS AT A LATVIAN MEDICAL COLLEGE

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**Abstract**

***Introduction:*** Career anchors represent individuals' long-term professional values and motivations that significantly influence career choices and satisfaction (Schein, as cited in Oh & Song, 2024). Misalignment between career anchors and actual work might lead to dissatisfaction, stress, and reduced well-being (Nascimento et al., 2021). In addition to career anchors, personal responsibility has been identified as an important determinant of nursing students' study satisfaction (Ersoy & Ayaz-Alkaya, 2024). ***Goal:*** The research goal was to examine whether career anchors and personal responsibility among healthcare students affect their satisfaction with studies. ***Methodology:*** The authors developed a questionnaire with 49 questions mostly measured on a five-point Likert scale. A total of 186 students (nursing assistants, midwifes, physician assistants, caregivers, pharmacist assistants, dental assistants and dental technicians) participated in the survey conducted in spring 2025 at Riga First Medical College of the University of Latvia. The data were analyzed by descriptive statistics and correlations analysis. ***Results:*** Students were strongly characterized (>4.5 on the Likert scale) by the anchors of job security, service orientation, technical/professional competence and work-life balance. There was a clear positive correlation between personal responsibility and study satisfaction levels. ***Conclusions:*** This study confirms earlier findings that job security, service orientation, and technical/professional competence are dominant career anchors for healthcare professionals. The emergence of the work-life balance anchor possibly indicates prioritizing well-being and mental health. The confirmation of personal responsibility highlights its relevance to students' commitment to studies. Thus, educational programs should be aligned with students' career anchors and should foster personal responsibility to strengthen satisfaction and long-term career commitment, while respecting the students' need to balance education and private life activities.

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# HEALTH LITERACY OF PATIENTS WITH DIABETES MELLITUS IN THE FIELD OF SKIN CARE

# ZDRAVOTNÁ GRAMOTNOSŤ PACIENTOV S DIABETES MELLITUS V OBLASTI STAROSTLIVOSTI O KOŽU

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**Abstract**

***Introduction:*** Patients with diabetes mellitus (DM) are at increased risk of complications, including skin problems. Preventing complications requires patients to be health literate, take an active interest in their health status, be informed and understand self-management. The specific health literacy (HL) about skin care in patients with DM in the research is insufficient. ***Goal:*** To determine the level of HL of patients with DM and understanding of skin care. ***Methodology:*** Quantitative prospective, descriptive, correlational study. The using questionnaire HLS-EU-Q16, focusing on the ability to obtain, evaluate and understand health information regarding DM skin care. The descriptive and inferential statistics at $p < 0.05$ was used. ***Results:*** Inadequate HL was in n=67 (65.7%), n=33 (32.4%) had problematic HL and only n=2 (1.9%) showed sufficient HL. The patients skin problems information searched in internet (44.1%) or asked a doctor (41.2%), some do not solve skin problems and expect them to disappear spontaneously (11.8%). The respondents (56.9%) showed an interest in further education. A statistically significant were found between the level of HL and the frequency of visits to a diabetologist (p=0.049), the use of professional publications as a source of information (p =0.045). ***Conclusion:*** HL showed an insufficient ability to understand health care including skin care of diabetics. The fact that more than 98% of respondents are below the sufficient HL threshold indicates a systemic failure in the education of patients with diabetes. However, more frequent contact with a specialist slightly increases the likelihood of better orientation in health information.

***Keywords:*** Health literacy. Diabetes mellitus. Patient. Skin care.

***Kľúčové slová:*** Zdravotná gramotnosť. Diabetes mellitus. Pacient. Starostlivosť o kožu.

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# PERCEPČNÍ A PROCESNÍ ASPEKTY BEZPEČNÉHO PŘEDÁVÁNÍ PACIENTŮ
# PERCEPTUAL AND PROCEDURAL ASPECTS OF SAFE PATIENT TRANSFER

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**Abstract**

***Introduction:*** Safety culture is a key element of healthcare quality and significantly influences patient and staff satisfaction. Its assessment by healthcare personnel allows for the identification of areas requiring support and targeted measures. ***Objective:*** The aim of the study was to compare the perception of safety culture among employees of surgical and internal medicine departments and to verify the influence of length of practice on its assessment. ***Methodology:*** The research was conducted using a standardized questionnaire covering 12 dimensions of safety culture. The survey included 221 respondents. The data were analyzed using the Mann–Whitney test (interdisciplinary differences) and Spearman's correlation coefficient (correlation with length of practice). ***Results:*** Statistically significant differences were found between disciplines in five dimensions (D2, D3, D4, D5, D6), with surgical disciplines rating more positively. However, no differences were found in most dimensions. The relationship with length of practice was generally weak, but it was significant for several items: more experienced workers were more likely to perceive risky behavior by superiors (D2), were more sensitive to reporting misconduct (D8), and were more likely to feel that mistakes were punished (D12). On the other hand, their confidence in the resilience of systems was higher (D5). In dimension D9, a slight negative relationship with the perception of interdisciplinary cooperation was found. ***Conclusion:*** Length of service is not a universal determining factor in assessing safety culture. Nevertheless, more experienced employees exhibit different attitudes, particularly in the areas of leadership, error management, and cooperation, which should be taken into account when planning training and support interventions.

***Keywords:*** Patient safety. Safety culture. Nurse. Surgical and internal medicine disciplines. Questionnaire survey.

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# NURSES' DECISION-MAKING IN HEALTHCARE

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**Abstract**

***Introduction:*** Motivation of healthcare workers is a key factor in the quality of care provided and job satisfaction in nursing. The importance of autonomy and decision-making as motivational stimuli is often emphasized in professional literature, and individual job positions may perceive these factors differently. ***Objective:*** The aim of the research was to determine the connection between the job position of nurses and whether the possibility of making decisions at work is a motivating factor for them. ***Methodology:*** The research was quantitative in nature. It was conducted in the form of an anonymous questionnaire survey among general and senior nurses in a hospital environment. The data obtained were processed using statistical methods (chi-square test), and the level of significance of the relationships between variables was monitored. ***Results:*** The results showed a statistically significant connection between job position and the perception of the motivating effect of decision-making. General nurses were more likely to state that the possibility of making decisions is not motivating for them, while senior nurses were significantly more likely to identify decision-making autonomy as a factor that motivates them at work. ***Conclusion:*** In conclusion, it can be stated that motivational factors differ between individual nursing positions. For effective management and increasing job satisfaction, it is therefore necessary to adapt motivational strategies to the specific job position. The results can contribute to the optimization of personnel policy in healthcare facilities and support the quality of nursing care.

**Keywords:** Motivation. Nurses. Job position. Decision-making. Nursing.

**Kľúčové slová:** Motivácia. Sestry. Pracovná pozícia. Rozhodnutie. Ošetrovateľstvo

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# DŮVĚRA JAKO ZÁKLAD PRÁV PACIENTA V DOBĚ UMĚLÉ INTELIGENCE - ROLE NELÉKAŘSKÝCH ZDRAVOTNICKÝCH PRACOVNÍKŮ

# TRUST AS THE FOUNDATION OF PATIENT RIGHTS IN THE AGE OF ARTIFICIAL INTELLIGENCE - THE ROLE OF NON-PHYSICIAN HEALTH PROFESSIONALS

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**Abstrakt**

***Úvod:*** Umělá inteligence (AI) se stává součástí zdravotnictví a rozšiřuje možnosti diagnostiky i léčby. Její implementace však přesahuje rámec běžných nástrojů, protože zasahuje do klinického rozhodování a tím proměňuje vztah mezi pacientem a zdravotníkem. Tento posun vyvolává potřebu nové reflexe autonomie pacienta, redefinice odpovědnosti a přehodnocení významu důvěry v procesu poskytování zdravotní péče. ***Cíl:*** Cílem práce je teoreticky analyzovat právní a etické dopady využívání AI na autonomii pacienta a zhodnotit proměnu role nelékařských zdravotnických pracovníků (NLP) s ohledem na jejich kompetence, rozsah právní odpovědnosti a schopnost posilovat důvěru v prostředí digitalizované péče. ***Metodika:*** Práce vychází z teoretické právní a etické analýzy. Zohledňuje evropské (AI Act) a národní právní rámce (zákon č. 371/2011 Sb.) a mezinárodní etické směrnice. Analýza je podpořena systematickým studiem odborné literatury, které umožňuje identifikovat dopady AI na autonomii pacienta a vymezit související proměnu role NLP. ***Výsledky:*** Analýza ukazuje, že autonomie pacienta je oslabována netransparentností algoritmických procesů a obtížností interpretace výstupů AI. V tomto kontextu sehrávají NLP klíčovou roli v komunikaci a edukaci pacientů prostřednictvím strategií, které podporují informované rozhodování pacientů v technologicky orientovanou péči. Identifikována je potřeba rozvoje jejich kompetencí zejména v oblasti digitální gramotnosti, právního povědomí a etické komunikace. ***Závěr:*** Současná právní i etická regulace zatím nepřináší specifické změny právních povinností při využívání AI. Přesto implementace těchto technologií zásadně proměňuje komunikaci, odpovědnost i důvěru ve zdravotnictví. NLP představují klíčovou oporu při ochraně autonomie pacienta a jejich profesní rozvoj je nezbytným předpokladem legitimní a eticky udržitelné integrace AI do zdravotní péče.

***Klíčová slova:*** Autonomie. Umělá inteligence. Právní a etické aspekty. Digitální gramotnost. Důvěra ve zdravotnictví.

***Keywords:*** Autonomy. Artificial intelligence. Legal and ethical aspects. Digital literacy. Trust in healthcare.

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# MOBILE INTERVENTION FOR MAINTAINING HEALTH AND ACTIVITY IN SENIORS AFTER RETIREMENT

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**Abstract**

Sarcopenic obesity is a major health issue in older adults, especially during the transition to retirement, when physical activity often declines, and dietary habits change. The combination of muscle loss and fat gain increases the risk of frailty, falls, chronic disease, and loss of independence. This project aimed to support healthy lifestyles in seniors, maintain physical condition, and prevent sarcopenic obesity through a modern and accessible tool. A further objective was the development and pilot testing of a mobile application designed to promote physical activity, nutrition, and health education tailored to seniors. The prototype application was developed, translated, and adapted for the target group. A pilot survey was conducted among seniors aged 65 and older who actively use a mobile phone. Inclusion criteria were age 65+, basic digital literacy, and informed consent to participate. Most users evaluated the application positively, appreciating its senior-specific focus and motivational features that encourage regular activity. It was regarded as a practical tool to support healthy living. Some critical feedback highlighted difficulties in use among less digitally skilled participants, while more advanced users expected additional functionality. Pilot testing confirmed the potential of mobile applications in preventing sarcopenic obesity among seniors. At the same time, results underlined the need for customizable interfaces, technical support, and, above all, the continued importance of direct contact with healthcare professionals, which remains a crucial motivational factor.

Digital Health. Mobile Application. Prevention. Sarcopenic Obesity. Seniors

Digitální zdraví. Mobilní aplikace. Prevence. Sarkopenická obezita. Senioři

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# THE PUBLIC EXPERIENCES WITH HEALTHCARE PROFESSIONALS OF OTHER NATIONALITIES OR RELIGIONS IN THE CZECH ENVIRONMENT

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**Abstract**

***Introduction:*** According to available statistics, foreigners make up 5.9% of all healthcare workers in Czechia. Slovaks and Ukrainians are most often represented in the healthcare sector. ***Objective:*** The aim of this study was to examine public experiences with healthcare professionals of different nationalities and religions. ***Methods:*** A quantitative research survey was chosen. The self-designed questionnaire was distributed electronically from 1 February to 30 April 2025. ***Results:*** The research group (N = 106) was mainly composed of women (91.5%). A total of 77.4% of respondents did not identify with any religious denomination and 82.1% of respondents reported Czech nationality. A total of 78.3% of respondents reported having experience with healthcare professionals of a different nationality. A total of 18.8% of respondents reported having experience with healthcare professionals of a different religion. The finding that communication with healthcare professionals of a different nationality or religion does not cause any difficulties for respondents can be considered positive; they trust them and perceive them as a benefit for the Czech healthcare system. ***Conclusion:*** The public's experiences with foreign healthcare professionals are largely positive. Given the ongoing staff shortages and demographic changes, the role of foreign workers will likely grow. Supporting their integration and fostering´a tolerant, inclusive environment is essential for the future of Czech healthcare.

***Keywords:*** transculturalism; nursing; Czechia

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# THE RELATIONSHIP BETWEEN HEALTH LITERACY AND CANCER PREVENTION IN THE 65+ GENERATION

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**Abstract**

***Introduction:*** Cancer is one of leading causes of death in the Czechia. A number of risk factors and an unsatisfactory level of health literacy in this area still significantly contribute to this situation. ***Aim:*** The aim of this presentation is to point out the current state of health literacy related to cancer and prevention of it among the Czech population aged 18+. ***Methods:*** A quantitative survey was used. Questionnaire of our own design were distributed via an electronic way. In the questionnaire were included 35 questions. The questionnaire survey was conducted from January 16 to February 14, 2025. The research group included 180 people aged 18+. The data were processed in MS Office Excel. ***Results:*** The results indicate that the knowledge of the Czech population aged 18+ is unbalanced in the area of cancer prevention. With increasing levels of education, the level of knowledge also increases. Women show a higher interest in prevention in this area. As respondents age, interest in prevention decreases. More significant gaps in knowledge appear in the area of screening programs and in knowledge related to the frequency of preventive examinations. ***Conclusion:*** Our findings point to the necessity of repeated education and the development of educational activities that will help increase awareness of the importance of cancer prevention. At the same time, they point to the necessity of effective and repeated education also in older age categories, where the risk of developing some cancers may be more significant.

***Key words:*** Health literacy. Cancer. Generation 65+. Czechia.

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# EDUCATION VERSUS SELFMANAGEMENT OF THE PATIENT WITH GLAUCOMA

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**Abstract**

***Introduction:*** Glaucoma is a chronic eye disease, caused by increased intraocular pressure. It causes damage to the optic nerve with subsequent, gradual and irreversible loss of vision. Treatment is lifelong with the aim of stabilizing intraocular pressure and visual functions. The first choice of treatment is local application of drugs to the eye (antiglaucoma drugs) in combination with laser and surgical treatment. The development of disease progression and visual impairment are conditioned by education about lifestyle in glaucoma with emphasis on self-management of eye drop application to the eye. ***Objective:*** The aim of the paper is to raise awareness of the importance of lifestyle education in glaucoma, focusing on self-management through topical application of medications to the eye. ***Methodology:*** The article was prepared using the method of a professionally targeted literary and journal review on glaucoma, the challenge of patient education and self-management. The search was conducted in August-September 2025 in the scientific database PubMed. ***Results:*** The aim of education is to teach a patient with glaucoma to master the correct technique and method of applying medications to the eye (antiglaucoma drugs). To achieve the hypotensive effect of antiglaucoma drugs, proper application of drugs to the conjunctival sac is sufficient, significantly reduces the risk of overall side effects, improves the patient's subjective tolerance with a positive treatment outcome. The key figures in the process of information and education are the ophthalmologist, nurse and patient. The ophthalmologist informs about diagnostic conclusions, treatment, and development of the disease. The nurse has the competence to carry out education and self-management of the patient to master the correct technique of applying medications to the eye (correct head tilt, application site, blockage of tear drainage, how to let the drops act for a sufficiently long time, time, hygiene and control regimen, ocular discomfort, lifestyle). A study conducted in Slovakia with the aim of supporting the application of eye drops in oral and written form brought the following results: A total of 47 patients (27 women, 20 men, 21-78 years) participated in the study. The presentation of patients was reviewed for correct application (n 9), incorrect application (n 38) causes: insufficient head tilt (n 29), insufficient duration of drug action (n 26), application of the drug to the wrong place (n 22). Education was implemented in 38 patients. Control group (n 18) only oral education.

Experimental group (n 20) oral and written education. Control after a month 33 patients. Control group (n15) only oral education, correct application n6 (33%). Experimental group (n 18) oral and written education, correct application n 14 (78%). The results of the study point to the need for oral and written forms of education on the correct application of eye drops. In patients with impaired vision, oral and written forms should be supplemented with audiovisual educational aids. ***Conclusion:*** Eye drops are among the most commonly used ophthalmic dosage forms. The success of glaucoma treatment with eye drops is determined primarily by the application specifics, which need to be followed. In addition to oral education, the correct application of eye drops can also be supported by written information - an educational leaflet, which is a suitable tool not only for the patient himself, but also for the healthcare professional. Nurses in the process of educating a patient with glaucoma have a unique opportunity to support the effectiveness of topical eye drop treatment with minimizing damage to the eye and the visual organ.

***Keywords:*** Glaucoma. Patient. Nurse. Education. Self-management.

*Project. KEGA 015PU-4/2024 - 01/2024 - 12/2026 Application of new methods in teaching future health workers to improve patients' self-management of their health*

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# VALIDITA A RELIABILITA NÁSTROJE HEALTH PROFESSIONAL EDUCATION IN PATIENT SAFETY SURVEY (H-PEPSS) U STUDENTŮ OŠETŘOVATELSTVÍ

# VALIDITY AND RELIABILITY OF THE HEALTH PROFESSIONAL EDUCATION IN PATIENT SAFETY SURVEY (H-PEPSS) AMONG NURSING STUDENTS

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Abstakt

***Úvod:*** Bezpečnost pacienta je považována za klíčovou vzdělávací i klinickou prioritu, avšak v regionu střední Evropy stále chybí kulturně adaptované a psychometricky ověřené nástroje pro hodnocení kompetencí studentů ošetřovatelství v dané problematice. Nástroj Health Professional Education in Patient Safety Survey (H-PEPSS) je mezinárodně široce využíván, avšak jeho česká verze nebyla doposud testována. ***Cíl:*** Cílem studie bylo zhodnotit psychometrické vlastnosti české verze nástroje H-PEPSS u studentů ošetřovatelství. Design. Průřezová validační studie. ***Metodika:*** Do výzkumného šetření bylo zařazeno 496 studentů ošetřovatelství ze 13 fakult v České republice od ledna do srpna 2023. Testování psychometrických vlastností nástroje zahrnovalo jazykovou a obsahovou validitu (expertní posouzení, výpočet CVI), konfirmační faktorovou analýzu (CFA) a posouzení reliability prostřednictvím vnitřní konzistence. Data byla analyzována pomocí IBM SPSS a AMOS 29.0. ***Výsledky:*** Obsahová validita byla vysoce adekvátní (S-CVI = 0,97; I-CVI 0,80–1,00). Prostřednictvím CFA byla potvrzena původní šestifaktorová struktura nástroje H-PEPSS, a to jak pro akademické i klinické prostředí s velmi dobrým modelem shody (CMIN/df < 2,0; CFI, TLI, NFI > 0,90; RMSEA < 0,10). Vnitřní konzistence nástroje byla rovněž vysoká (α = 0,935 - 0,939), přičemž dílčí dimenze dosahovaly hodnot Cronbachova α od 0,669 do 0,830. ***Závěr:*** Česká verze nástroje H-PEPSS prokázala adekvátní validitu a reliabilitu a představuje tak vhodný nástroj pro hodnocení kompetencí v oblasti bezpečnosti pacienta u studentů ošetřovatelství. Daný nástroj lze využít k mezinárodní srovnávání, sledování dopadů vzdělávacích intervencí a začlenění ukazatelů bezpečnosti do procesu vzdělávání studentů ošetřovatelství v České republice.

***Klíčová slova:*** Bezpečnost pacienta: Studenti ošetřovatelství. Validita. Reliabilita; Kompetence

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**Abstract**

***Introduction:*** Patient safety is considered a key educational and clinical priority; however, in the Central European region, there is still a lack of culturally adapted and psychometrically validated instruments for assessing nursing students' competencies in this area. The Health Professional Education in Patient Safety Survey (H-PEPSS) is widely used internationally, but its Czech version has not yet been tested. ***Aim:*** The aim of this study was to evaluate the psychometric properties of the Czech version of the H-PEPSS among nursing students. Design. A cross-sectional validation study. ***Methods:*** A total of 496 nursing students from 13 faculties in the Czech Republic participated between January and August 2023. The psychometric evaluation of the instrument included linguistic and content validity (expert review, Content Validity Index), confirmatory factor analysis (CFA), and reliability testing through internal consistency. Data were analyzed using IBM SPSS and AMOS 29.0. ***Results:*** Content validity was highly satisfactory (S-CVI = 0.97; I-CVI 0.80–1.00). CFA confirmed the original six-factor structure of H-PEPSS for both academic and clinical settings, with good model fit (CMIN/df < 2.0; CFI, TLI, NFI > 0.90; RMSEA < 0.10). Internal consistency was high ($\alpha$ = 0.935–0.939), with Cronbach's alpha for individual dimensions ranging from 0.669 to 0.830. ***Conclusion:*** The Czech version of H-PEPSS demonstrated adequate validity and reliability, confirming its suitability as an instrument for assessing patient safety competencies in nursing students. The instrument can be used for international comparisons, monitoring the impact of educational interventions, and integrating patient safety indicators into the process of nursing education in the Czech Republic.

***Keywords:*** Patient safety. Nursing students. Validity. Reliability. Competency.

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# POSUDZOVANIE STAVU VÝŽIVY U PACIENTOV V PREDOPERAČNOM OBDOBÍ

# ASSESSMENT OF NUTRITIONAL STATUS IN PATIENTS IN THE PREOPERATIVE PERIOD

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**Abstrakt**

***Úvod:*** Posudzovanie stavu výživy v predoperačnom období u pacientov významne ovplyvňuje operačné výsledky, čas rekonvalescencie a celkový zdravotný stav. ***Cieľ práce:*** Cieľom práce bolo posúdiť stav výživy u pacientov v predoperačnom období. ***Metodológia:*** Na zber dát sme použili validovaný dotazník NRS 2002, ktorý sme vykonali v spolupráci s pacientmi. Prieskumnú vzorku tvorilo n = 110 (100%) respondentov. Prieskum bol realizovaný vo Fakultnej nemocnici v Trnave v období od decembra 2024 do januára 2025. Získané odpovede z dotazníka sme spracovali a vyhodnotili pomocou programu Microsoft Office Excel. Odpovede sme kódovali pomocou číselných znakov, vypočítali sme absolútnu a relatívnu početnosť a interpretovali ich prostredníctvom grafov. ***Výsledky:*** Nutričný skríning odhalil, že n = 29 (26,4%) respondentov bolo v nutričnom riziku. Najčastejšie sa vyskytujúci faktor, ktorý prispieval k vzniku nutričného rizika, bol znížený príjem potravy za posledný týždeň u n = 38 (34,5%) respondentov. Úbytok hmotnosti za posledné 3 mesiace bol zaznamenaný u n = 33 (30,0%) respondentov. Faktor týkajúci sa závažnosti ochorenia mali n = 14 (12,7%) respondenti. ***Záver:*** Posudzovanie a optimalizácia nutričného stavu v predoperačnom období by mali byť neoddeliteľnou súčasťou komplexnej predoperačnej prípravy. Z pohľadu multidisciplinárnej spolupráce je dôležité, aby sa na hodnotení a riešení výživového stavu podieľali nielen sestry, lekári, ale aj nutriční terapeuti.

**Kľúčové slová:** Posudzovanie výživy. Predoperačné obdobie. Nutričná terapia. Sestra.

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**Abstract**

***Introduction:*** Assessing the nutritional status of patients in the preoperative period significantly affects the surgical results, recovery time and overall health status. ***Objective:*** The aim of the work was to assess the nutritional status of patients in the preoperative period. ***Methodology:*** We used the validated NRS 2002 questionnaire to collect data, which we conducted in cooperation with patients. The survey sample consisted of n = 110 (100%) respondents. The survey was conducted at the University Hospital in Trnava from December 2024 to January 2025. We processed and evaluated the responses from the questionnaire using Microsoft Office Excel. We coded the responses using numerical characters, calculated the absolute and relative frequency and interpreted them using graphs. ***Results:*** Nutritional screening revealed that n = 29 (26.4%) respondents were at nutritional risk. The most common factor contributing to the occurrence of nutritional risk was reduced food intake in the last week in n = 38 (34.5%) respondents. Weight loss in the last 3 months was recorded in n = 33 (30.0%) respondents. The factor related to the severity of the disease was mentioned by n = 14 (12.7%) respondents. ***Conclusion:*** Assessment and optimization of nutritional status in the preoperative period should be an integral part of comprehensive preoperative preparation. From the perspective of multidisciplinary cooperation, it is important that not only nurses, doctors, but also nutritional therapists participate in the assessment and solution of nutritional status.

***Keywords:*** Nutrition assessment. Preoperative period. Nutritional therapy. Nurse.

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# FAKTORY OVPLYVŇUJÚCE ZDRAVIE DIABETIKA

# FACTORS AFFECTING THE HEALTH OF DIABETES

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## Abstrakt

***Úvod:*** V roku 2022 bolo na Slovensku evidovaných 349 595 diabetikov, pričom 91,3 % tvorili pacienti s diabetes mellitus 2. typu. Účinná liečba si vyžaduje komplexný prístup zahŕňajúci diétu, pohybovú aktivitu, farmakoterapiu a edukáciu. ***Cieľ:*** Cieľom príspevku bolo zistiť, do akej miery dospelí pacienti s diabetes mellitus 2. typu dodržiavajú opatrenia podporujúce ich zdravie, so zameraním na stravovanie, fyzickú aktivitu a liečebný režim. ***Metodika:*** Prieskum bol realizovaný formou neštandardizovaného anonymného dotazníka distribuovaného 120 pacientom vo Fakultnej nemocnici Trnava, diabetologických ambulanciách a Zväze diabetikov Slovenska. ***Výsledky:*** Výsledky ukázali, že 94 % respondentov pravidelne navštevuje diabetologickú ambulanciu, 84 % nefajčí a sleduje si hodnoty glykémie a krvného tlaku. Najpočetnejšiu skupinu tvorili pacienti vo veku 65 – 74 rokov (50 %), pričom 51 % vykonáva fyzickú aktivitu nepravidelne a 19 % vôbec. Kuracie mäso konzumuje 46 % a celozrnné výrobky 67 % pacientov, no len 36 % sa stravuje pravidelne. Sacharidové jednotky si nepočíta 45 % a gramy sacharidov 41 % respondentov. Nedostatočná pohybová aktivita sa prejavuje aj v obezite – 41 % má priemerný obvod pása 110 cm. ***Záver:*** Záverom sa odporúča intenzívnejšia edukácia, dôsledné dodržiavanie diétnych odporúčaní a pravidelná fyzická aktivita (min. 150 minút týždenne). V rámci ošetrovateľskej starostlivosti je dôležité zamerať sa aj na wellness diagnózy podporujúce zdravé správanie pacienta.

***Kľúčové slová:*** Diabetes mellitus 2. typu. Diéta. Pohybová aktivita. Liečebný režim. Edukácia.

## Abstract

***Introduction:*** In 2022, 349,595 diabetics were registered in Slovakia, with 91.3% of them being patients with type 2 diabetes mellitus. Effective treatment requires a comprehensive approach including diet, physical activity, pharmacotherapy and education. ***Objective:*** The aim of the paper was to determine the extent to which adult patients with type 2 diabetes mellitus adhere to measures supporting their health, focusing on diet, physical activity and treatment regimen. ***Methodology:*** The survey was conducted in the form of a non-standardized anonymous questionnaire distributed to 120 patients at the Trnava University Hospital, diabetes clinics and the Slovak Diabetes Association. ***Results:*** The results showed that 94% of respondents

regularly visit a diabetes clinic, 84% do not smoke and monitor their blood glucose and blood pressure values. The largest group was patients aged 65-74 (50%), with 51% performing physical activity irregularly and 19% not at all. Chicken is consumed by 46% and whole grain products by 67% of patients, but only 36% eat it regularly. 45% do not count carbohydrate units and 41% do not count carbohydrate grams. Insufficient physical activity is also manifested in obesity - 41% have an average waist circumference of 110 cm. ***Conclusion:*** In conclusion, more intensive education, consistent adherence to dietary recommendations and regular physical activity (min. 150 minutes per week) are recommended. Within the framework of nursing care, it is important to also focus on wellness diagnoses supporting the patient's healthy behavior.

***Keywords:*** Diabetes mellitus type 2. Diet. Physical activity. Treatment regimen. Education.

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# KOMPLEXNÁ OŠETROVATEĽSKÁ STAROSTLIVOSŤ O DIEŤA S LARYNGITÍDOU

# COMPREHENSIVE NURSING CARE OF A PEDIATRIC PATIENT WITH LARYNGITIS

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**Abstrakt**

***Úvod:*** Laryngitída je akútne vírusové ochorenie postihujúce najmä deti vo veku 2 až 7 rokov. Prejavuje sa štekavým kašľom, chrapotom, zvýšenou teplotou a dýchavičnosťou spôsobenou zúžením hrtana. Ošetrovateľská starostlivosť zohráva kľúčovú úlohu pri rozpoznaní príznakov a včasnej intervencii. ***Cieľ:*** Cieľom práce bolo poukázať na špecifiká ošetrovateľskej starostlivosti o dieťa s laryngitídou. ***Metodika:*** Kazuistika bola spracovaná na základe pozorovania dieťaťa, rozhovoru s rodičmi a analýzy ošetrovateľskej dokumentácie. Ošetrovateľské diagnózy boli stanovené podľa vyhlášky č. 306/2005 Z. z., na základe ktorej bol vypracovaný plán ošetrovateľskej starostlivosti. ***Výsledky:*** Počas hospitalizácie sa u dieťaťa prejavili typické symptómy ochorenia. Starostlivosť bola zameraná na monitorovanie vitálnych funkcií, podávanie inhalácií a liekov. Vďaka včasným intervenciám došlo k stabilizácii stavu a k úprave zdravotného stavu bez potreby intenzívnej liečby. ***Záver:*** Ošetrovateľská starostlivosť o dieťa s laryngitídou si vyžaduje rýchlu reakciu, odborné vedomosti a spoluprácu s rodičmi. Edukácia rodičov a včasná intervencia prispievajú k prevencii komplikácií a skráteniu hospitalizácie.

***Kľúčové slová:*** Laryngitída. Ošetrovateľská starostlivosť. Deti. Edukácia rodičov. Hospitalizácia.

***Keywords:*** Laryngitis. Nursing care. Children. Parental education. Hospitalization.

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# IMPLEMENTÁCIA ELEKTRONICKÉHO MONITOROVACIEHO SYSTÉMU NA HYGIENU RÚK NOSOEX® NA KLINIKE VNÚTORNÉHO LEKÁRSTVA FAKULTNEJ NEMOCNICE TRNAVA

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**Abstrakt**

***Úvod:*** Hygiena rúk (HH) predstavuje základné opatrenie prevencie nozokomiálnych nákaz (NN), avšak jej dodržiavanie v klinickej praxi zostáva suboptimálne. Elektronické systémy umožňujú objektívne, kontinuálne a automatizované sledovanie hygieny rúk, čím prekonávajú obmedzenia priameho pozorovania. Fakultná nemocnica Trnava (FNTT) v roku 2023–2024 implementovala elektronický monitorovací systém NosoEx® (GWA Hygiene GmbH, Nemecko) ako súčasť pilotného projektu digitalizácie programu HH. ***Cieľ:*** Vyhodnotiť dopad implementácie systému NosoEx® na Klinike vnútorného lekárstva na dodržiavanie HH, spotrebu alkoholových dezinfekčných roztokov (ADR) a postoj zdravotníckych pracovníkov k elektronickému monitorovaniu HH. ***Metodika:*** Realizovaná bola porovnávacia štúdia pred a po intervencii („before–after“ design) v dvoch obdobiach: pred zavedením systému (24. 4. – 31. 12. 2023) a po jeho zavedení (22. 4. – 31. 12. 2024). Monitorovaný bol počet aktivácií dávkovačov ADR, spotreba ADR/1000 pacientskych dní (PD) a úroveň compliance HH podľa profesií (lekári, sestry, sanitári, fyzioterapeuti). Na Klinike vnútorného lekárstva bolo do projektu zapojených 41 dávkovačov a 156 zdravotníckych pracovníkov vybavených anonymnými radiofrekvenčnými transpondérmi (RFID) rôznych farieb podľa profesie. Postoje personálu k systému HH boli hodnotené pomocou anonymného dotazníka adaptovaného z validovaných nástrojov GWA Hygiene a WHO Hand Hygiene Perception Survey (digitálna verzia v aplikácii Observe) pred a po intervencii. ***Výsledky:*** Po implementácii systému NosoEx® došlo k signifikantnému zvýšeniu compliance HH z 38,6 % (95 % CI 34,2–43,0) na 55,1 % (95 % CI 52,3–57,9) ($p < 0,0001$; Wilcoxonov test). Spotreba ADR vzrástla o 9,2 L/1000 PD (z 30,5 na 39,7 L/1000 PD; 95 % CI ± 1,8). Najvýraznejšie zlepšenie bolo zaznamenané u zdravotných sestier (+24 %) a sanitárov (+31 %), zatiaľ čo u lekárov zvýšenie dosiahlo 12 %. V analýze zaznamenaný pokles počtu nozokomiálnych nákaz (16,8 → 16,6 NN/1000 PD) nebol štatisticky významný ($p = 0,36$), čo sa vysvetľuje krátkym sledovaným obdobím a nízkou incidenciou. Väčšina respondentov (78 %) deklarovala pozitívne prijatie

systému a podporu jeho trvalého využívania, pričom ako najväčší prínos uvádzali vizuálnu spätnú väzbu, transparentnosť dát a motiváciu k zlepšeniu vlastných návykov HH. ***Záver:*** Zavedenie systému NosoEx® na Klinike vnútorného lekárstva preukázalo významné zvýšenie spotreby ADR a compliance HH. V dôsledku krátkeho časového úseku štúdie sa nepreukázal štatisticky významný pokles NN. Intervencia potvrdila, že elektronické monitorovanie predstavuje efektívny a udržateľný nástroj na podporu hygieny rúk a zvyšovanie bezpečnosti pacientov.

***Kľúčové slová:*** Hygiena rúk. NosoEx®. Digitalizácia. Compliance. Automatizácia.

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# PODPORA PROFESIJNÝCH ZRUČNOSTÍ MENTORA PRI VZDELÁVANÍ V KLINICKOM PROSTREDÍ

# SUPPORT OF THE MENTOR'S PROFESSIONAL SKILLS DURING EDUCATION IN THE CLINICAL ENVIRONMENT

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**Abstrakt**

***Úvod:*** Ošetrovateľstvo ponúka obohacujúce a zmysluplné pracovné príležitosti. Zdravotná starostlivosť sa neustále vyvíja a objavujú sa nové výzvy nielen pre sestry ale aj ďalších zdravotníckych pracovníkov, ktorí musia spolupracovať a navzájom sa v práci podporovať. Na tento účel môžu sestry s menšími skúsenosťami využívať personalizované vedenie a podporu od mentora. ***Cieľ:*** Zámerom projektu je preskúmať a vyhodnotiť aktuálny stav potrieb mentoringu v ošetrovateľstve, zistenie prípravy mentorov ošetrovateľskej praxe a analýza problematických oblastí mentoringu v ošetrovateľstve. ***Metodika:*** Na základe prierezového systematického prehľadu literatúry, analýzy publikovaných článkov v odborných časopisoch a online zdrojoch (PubMed, Googl scholar, ProQuest ...) získať, spracovať, analyzovať výsledky z problematiky mentorstva. Skúsenosti študentov z mentoringu budú overené v pilotnej štúdii dotazníkom A Summative Clinical Teaching Evaluation – Nursing education in the clinical setting. ***Výsledky:*** Na základe zhodnotenia výsledkov bude vypracovaný študijný materiál zameraný na prípravu sestier – mentoriek. Monografia, e-book v elektronickej podobe budú sprievodcom mentoringu a budú obsahovať najnovšie vedecké poznatky z najdôležitejších téz ošetrovateľstva, didaktiky, manažmentu, ošetrovateľskej etiky, práva, komunikácie a mentoringu. Očakávaným výsledkom projektu bude zvýšenie kvality praktickej výučby v ošetrovateľstve a vytvorenie akreditačného spisu "Mentor klinickej praxe v odbore ošetrovateľstvo". ***Záver:*** Mnoho štúdií naznačuje, že mentoring nových sestier absolventiek prechádzajúcich do praxe je jedným zo spôsobov, ako podporiť dlhodobú profesionálnu ošetrovateľskú rolu. Mentorstvo, mentoring a školiace programy sa ukázali vo svete ako základ pre zaručenie adaptácie a odbornej prípravy nových sestier na úrovni zdravotnej starostlivosti, podporu kvalitnej starostlivosti a integráciu teoretického a praktického ošetrovateľského vzdelávania.

***Kľúčové slová***: Mentor. Mentoring. Sestra. Ošetrovateľstvo. Klinická prax.

*Príspevok vznikol ako súčasť projektu KEGA Projekt č. 001TTU-4/2025 Podpora rozvoja praktických zručností mentora v kontexte vzdelávania v klinickom prostredí*

**Abstract**

***Introduction:*** Nursing offers rewarding and meaningful career opportunities. Healthcare is constantly evolving and new challenges are emerging not only for nurses but also for other healthcare workers who must cooperate and support each other in their work. To this end, nurses with less experience can benefit from personalized guidance and support from a mentor. ***Objective:*** The purpose of the project is to examine and evaluate the current state of mentoring needs in nursing, to determine the training of mentors in nursing practice and to analyse the problematic areas of mentoring in nursing. ***Methodology:*** On the basis of a cross-sectional systematic literature review, analysis of published articles in professional journals and online resources (PubMed, Google scholar, ProQuest ...) to obtain, process, analyse results from the issue of mentoring. Students' mentoring experiences will be verified in a pilot study with the questionnaire A Summative Clinical Teaching Evaluation – Nursing education in the clinical setting. Results: Based on the evaluation of the results, study material focused on the preparation of nurses - mentors will be developed. The monograph, e-book in electronic form will be a mentoring guide and will contain the latest scientific findings from the most important theses of nursing, didactics, management, nursing ethics, law, communication and mentoring. The expected result of the project will be an increase in the quality of practical teaching in nursing and the creation of the accreditation file "Mentor of clinical practice in the field of nursing". ***Conclusion:*** Many studies suggest that mentoring new graduate nurses transitioning into practice is one way to promote a long-term professional nursing role. Mentoring, mentoring and training programs have proven to be the basis in the world for guaranteeing the adaptation and professional training of new nurses at the health care level, promoting quality care and integrating theoretical and practical nursing education.

***Keywords:*** Mentor. Mentoring. Sister. Nursing. Clinical practice.

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# DLHODOBÁ INTENZÍVNA OŠETROVATEĽSKÁ STAROSTLIVOSŤ V PODMIENKACH FN TRNAVA – 10 ROČNÉ ZAMYSLENIE

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**Abstrakt**

***Úvod:*** V posledných rokoch a desaťročiach sledujeme prudký vývoj v medicíne a farmakológii vo všetkých odboroch vrátane intenzívnej medicíny. To vedie nielen k zlepšeniu prežívania pacientov v kritických stavoch, ale stavia nás aj pred problém následnej starostlivosti, kedy pacienti zostávajú dlhodobo, niekedy až doživotne závislí od ošetrovateľskej starostlivosti. ***Cieľ:*** Popísať špecifiká dlhodobej intenzívnej ošetrovateľskej starostlivosti a naše skúsenosti z Oddelenia dlhodobej intenzívnej starostlivosti. ***Metodika:*** Analýza 10 ročnej skúsenosti so starostlivosťou o pacientov na Oddelení dlhodobej intenzívnej starostlivosti. ***Výsledky:*** Vo FN Trnava poskytujeme už 10 rokov dlhodobú intenzívnu starostlivosť na 15 lôžkach. Za toto obdobie sme prijali na oddelenie 140 pacientov, z ktorých 48 bolo prepustených a 92 zomrelo. Priemerná dĺžka hospitalizácie bola 402 dní u pacientov bez potreby umelej pľúcnej ventilácie a 225 dní u pacientov na umelej pľúcnej ventilácii. Úlohou dlhodobej intenzívnej starostlivosti je okrem doriešenia akútneho zdravotného problému aj nácvik základných zručností pacienta a snaha o jeho resocializáciu. V prípade progredujúcich ochorení, kde je zhoršovanie klinického stavu nezvratné máme snahu o čo najdlhšie udržanie samoobslužných činností. Tento proces je komplexný a zahŕňa lekársku a ošetrovateľskú starostlivosť ako aj starostlivosť erudovaných fyzioterapeutov, logopédov, alebo ďalších špecialistov z rôznych medicínskych odborov. K špecifikám dlhodobej intenzívnej ošetrovateľskej starostlivosti a zároveň k ich najväčším výzvam patrí:

· Starostlivosť o kožu, ktorá je obrazom aktuálneho zdravotného stavu a zároveň prvá dáva signál, že sa stav mení. Pri príjme sú často prítomné dekubity všetkých stupňov. V ošetrovaní sa nám osvedčili prostriedky vlhkej terapie, ako aj používanie podtlakového systému hojenia rán. Vzhľadom k dĺžke hospitalizácií pacientov vieme z dlhodobého hľadiska posúdiť účinnosť rôznych produktov prichádzajúcich na trh.

· Starostlivosť o dýchacie cesty, ktoré sú zabezpečené cez tracheostomické kanyly. U pacientov na umelej pľúcnej ventilácii je potrebné, aby sestry ovládali základné nastavenia ventilátora, zvlhčovanie privádzanej zmesi plynov, odsávanie sekrétov cez uzatvorené okruhy, rôzne spôsoby nebulizácie. V prípade spontánne ventilujúcich pacientov používame zvlhčovacie

filtre a tracheostomické masky s možnosťou prívodu O2. Neoddeliteľnou súčasťou je pľúcna rehabilitácia, vyklepávanie, masáže a drenážne polohy.

Po stabilizácii stavu pacienta a jeho adaptácii na nové prostredie a personál prichádza obdobie, kedy sa snažíme zlepšovať zručnosti v denných aktivitách. Začíname nácvikom prehĺtania tekutej a postupne aj tuhej stravy s cieľom prechodu z chemicky definovanej na plnohodnotnú kuchynskú stravu. Ak je tento proces úspešný pristupujme k zrušeniu PEGu. Veľkou výzvou býva komunikácia s pacientom, ktorá je hlavne neverbálna a pomocou odčítania z pier. Na uľahčenie komunikácie používame abecedné tabuľky a tabuľky s predpísanými najčastejšími vetami a slovami. V snahe o resocializáciu zapájame podľa preferencie rodinných príslušníkov do niektorých činností (kŕmenie, čítanie kníh, strihanie nechtov, atď.). Ak to stav pacienta dovoľuje umožňujeme im krátke pobyty v nemocničnom parku, stretnutia s maloletými rodinnými príslušníkmi, alebo domácimi miláčikmi. Spoločne oslavujeme nielen sviatky a narodeniny, ale často aj svadby detí a narodenie vnúčat. ***Záver:*** Dlhodobá intenzívna starostlivosť je často pokračovaním veľmi nákladnej resuscitačnej a intenzívnej starostlivosti. Je dôležité, aby jej kvalita bola na takej úrovni, aby nezmarila pôvodný zámer vrátiť pacienta späť do života.

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# PANDEMIC MANAGEMENT IN A HEALTHCARE FACILITY

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**Abstract**

Pandemics represent a major challenge for healthcare systems, which must respond rapidly to a rapidly changing epidemiological situation. The aim of this article is to analyze the principles and procedures of effective pandemic management in the context of a healthcare facility, with a focus on planning, organization, coordination, and the protection of healthcare personnel and patients.

The article describes three levels of pandemic management:

· Strategic – the development and implementation of the facility's pandemic and crisis plans;

· tactical – management of human and material resources, communication, and cooperation with public health authorities;

· operational – the practical organization of care delivery, patient triage, implementation of control measures, and infection prevention.

The analysis is complemented by insights and experiences gained during the COVID-19 pandemic, which highlighted the need for systematic preparedness, adequate stockpiles of personal protective equipment, and psychological support for healthcare personnel.

The conclusion emphasizes the importance of a flexible and regularly updated pandemic plan that must be linked to the institution's crisis management system and continuously tested through exercises. Effective pandemic management requires a coordinated approach involving hospital leadership, healthcare workers, public health authorities, and emergency services.

**Keywords:** Pandemic. Management. Healthcare facility. Pandemic plan. Crisis management.

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# TELEMEDICINE AND TELENURSING AS A TOOL FOR SUPPORTING MENTAL HEALTH IN PATIENTS WITH CHRONIC HEART FAILURE

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## Abstract

***Introduction:*** Chronic heart failure (CHF) is a serious condition associated with high morbidity, mortality, and significant psychological burden. Depression, anxiety, and feelings of uncertainty are among the most common accompanying issues that negatively affect treatment adherence, self-management, and patients' quality of life. Telemedicine and telenursing have emerged over the past decade as effective tools for providing continuous remote care and may significantly contribute to supporting mental health. ***Aim:*** The aim of this paper is to analyze the significance and potential of telemedicine and telenursing in supporting the mental health of patients with chronic heart failure, and to identify their contribution to improving psychological stability, self-management, and quality of life. ***Methods:*** This paper is based on a review of current scientific literature, focusing on the results of clinical studies and meta-analyses published in the last ten years. The effectiveness of telemonitoring, virtual nursing interventions, remote education, and digital self-management support in patients with CHF was evaluated. ***Results:*** The results of available studies indicate that telemedicine programs significantly reduce depressive and anxiety symptoms, enhance the sense of security, and enable rapid responses to changes in health status. Regular telemonitoring and virtual nursing interventions lead to better treatment adherence, lower rehospitalization rates, and improved overall quality of life. Nursing interventions delivered remotely also reduce subjective psychological burden and strengthen patients' self-management. ***Conclusion:*** Telemedicine and telenursing represent a promising and effective approach to supporting mental health in patients with chronic heart failure. Integrating these tools into comprehensive nursing care may contribute to improved psychological well-being, greater health stability, and an overall enhancement of patients' quality of life. Their use supports a modern, accessible, and holistically oriented model of care for individuals with chronic illnesses.

***Keywords:*** Chronic heart failure. Mental health. Telemedicine. Telenursing.

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# POSUDZOVANIE PACIENTA PODĽA MODELU DOROTHEY ELIZABETH OREM
# ASSESSMENT OF THE PATIENT ACCORDING TO THE DOROTHEA ELIZABETH OREM MODEL

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**Abstrakt**

***Úvod:*** Príspevok sa zaoberá využitím koncepčného modelu Dorothey Elisabeth Orem v ošetrovateľskej praxi. Model sebaopatery poskytuje systematický rámec na identifikáciu potrieb pacienta a určenie, kedy je potrebná ošetrovateľská intervencia na podporu sebestačnosti. ***Cieľ:*** Cieľom je obsahová analýza vybraných vedeckých článkov týkajúcich sa aplikácie Oremovej teórie v klinickej praxi. ***Metodika:*** Realizovaná bola obsahová analýza odborných štúdií publikovaných v rokoch 2019 – 2024 v databázach BioMed Central, PubMed Central a Google Scholar, doplnená spracovaním PRISMA diagramu. ***Výsledky:*** Výsledky odpovedajú na prieskumnú otázku: „Aké sú praktické prínosy teórie Dorothey Elizabeth Orem a ich použitie v rámci ošetrovateľskej praxe pre sebaopateru pacientov?“ odpoveďami: „podpora sebestačnosti pacienta, identifikácia deficitu sebaopatery, individualizované plánovanie starostlivosti, aktivizácia a edukácia pacienta, zlepšenie kvality života a zdravotného stavu, systematický ošetrovateľský proces, flexibilita a univerzálnosť použitia“ a prieskumnú otázku: „Aký je význam koncepčného modelu Dorothey Elizabeth Orem pre ošetrovateľstvo?“ odpoveďami: „systematický rámec pre hodnotenie a plánovanie starostlivosti, podpora profesionality a odbornosti sestier, zvýšenie efektivity starostlivosti, uľahčenie komunikácie a koordinácie v tíme, flexibilita aplikácie v rôznych prostrediach“. Záver: Oremovej model patrí medzi najpoužívanejšie v ošetrovateľstve. Jeho aplikácia umožňuje efektívne identifikovať potreby pacienta, cielene plánovať intervencie a zvyšovať kvalitu ošetrovateľskej starostlivosti naprieč rôznymi klinickými odbormi.

***Kľúčové slová:*** Ošetrovateľský model Dorothey Elizabeth Orem. Sebaopatera. Deficit sebaopatery. Sebestačnosť. Ošetrovateľská starostlivosť.

**Abstract**

***Introduction:*** This paper focuses on the application of Dorothea Elisabeth Orem’s conceptual model in nursing practice. The self-care model provides a systematic framework for identifying patient needs and determining when nursing interventions are required to support patient autonomy. *Aim:* The aim is to conduct a content analysis of selected scientific articles

addressing the application of Orem's theory in clinical practice. ***Methodology:*** A content analysis was carried out on professional studies published between 2019 and 2024 in the BioMed Central, PubMed Central, and Google Scholar databases, supplemented by the development of a PRISMA diagram. ***Results:*** The findings address the research question: "What are the practical benefits of Dorothea Elizabeth Orem's theory and its use in nursing practice for patient self-care?" The identified benefits include: supporting patient autonomy, identifying self-care deficits, individualized care planning, patient activation and education, improved quality of life and health status, a systematic nursing process, and flexibility and universality of use. The second research question: "What is the significance of Dorothea Elizabeth Orem's conceptual model for nursing?" was answered by identifying the following: a systematic framework for care assessment and planning, support for nursing professionalism and expertise, increased care efficiency, improved communication and coordination within the healthcare team, and flexible applicability across various settings. ***Conclusion:*** Orem's model is one of the most widely used frameworks in nursing. Its application enables effective identification of patient needs, targeted planning of interventions, and improvement of nursing care quality across diverse clinical specialties.

***Keywords:*** Dorothea Elizabeth Orem's nursing model. Self-care. Self-care deficit. Autonomy. Nursing care.

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# MENTOR V OŠETROVATEĽSTVE AKO ZÁKLAD VZDELÁVANIA V KLINICKOM PROSTREDÍ

# MENTOR IN NURSING AS A FOUNDATION OF EDUCATION IN A CLINICAL ENVIRONMENT

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**Abstrakt:**

***Úvod:*** Mentoring – označuje vzťah medzi *„mentorom“* a *„mente“* pri príprave na budúce povolanie alebo pri nástupe do pracovného procesu. Mentori majú odborné znalosti z klinickej praxe a z pedagogickej oblasti, zohrávajú kľúčovú úlohu pri integrácii študentov do pracovného prostredia. ***Cieľ:*** Poukázať na význam mentorstva pri vzdelávaní študentov v klinickom prostredí. ***Východiská:*** Článok 31 Smernice Európskeho parlamentu a Rady 2013/55/EÚ a systematický prehľad dostupných literárnych zdrojov. ***Metodika:*** V teoretickom príspevku sa venujeme problematike mentoringu. Príspevok bol vypracovaný na základe analýzy publikovaných informácií o danej problematike. ***Výsledky:*** Mentori klinickej praxe pôsobia ako vzory pre študentov a pomáhajú im rozvíjať ich odbornosť a kompetencie pri poskytovaní vysokokvalitnej, bezpečnej starostlivosti zameranej na pacienta. Podporujú odborný rast a zodpovednosť študentov. Zaoberáme sa hlavnými aspektami mentoringu, predstavujeme rolu mentora, prepojenie teórie s praxou, rozvojom zručností, integráciu študentov do multidisciplinárneho tímu. ***Záver:*** Vysoká kvalita klinickej praxe má zásadný význam pre prípravu budúcej udržateľnej pracovnej sily v sektore. Práve v tomto prostredí študenti uplatňujú nadobudnuté vedomosti, osvojujú si kľúčové zručnosti a dosahujú požadované kompetencie potrebné v ošetrovateľskej praxi.

***Kľúčové slová:*** Mentor. Študent. Klinická prax. Zručnosti. Vedomosti.

*Podporené projektom KEGA 001TTU-4/2025*

*Podpora rozvoja praktických zručností mentora v kontexte vzdelávania v klinickom prostredí*

**Abstract:**

***Introduction:*** Mentoring – refers to the relationship between a *“mentor”* and a *“mentee”* in preparation for a future profession or when entering the work process. Mentors have expertise in clinical practice and pedagogical field and play a key role in the integration of students into the work environment.

***Aim:*** To highlight the importance of mentoring in the education of students in a clinical environment. ***Background:*** Article 31 of Directive 2013/55/EU of the European Parliament and of the Council and a systematic review of available literature. ***Methodology:*** In this theoretical paper, we address the issue of mentoring. The paper was prepared based on an analysis of published information on the issue. ***Results:*** Clinical practice mentors act as role models for students and help them develop their expertise and competences in providing high-quality, safe patient-centered care. They support students' professional growth and responsibility. We address the main aspects of mentoring, introducing the role of the mentor, linking theory with practice, developing skills, and integrating students into a multidisciplinary team. ***Conclusion:*** High quality clinical practice is essential for preparing a future sustainable workforce in the sector. It is in this environment that students apply their acquired knowledge, acquire key skills and achieve the required competencies needed in nursing practice.
***Keywords:*** Mentor. Student. Clinical practice. Skills. Knowledge.

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# BEZPEČNÁ A EFEKTÍVNA OŠETROVATEĽSKÁ STAROSTLIVOSŤ O INVAZÍVNE VENÓZNE VSTUPY

# SAFE AND EFFECTIVE NURSING CARE FOR INVASIVE VENOUS ACCESSES

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**Abstrakt**

***Úvod:*** Zabezpečenie intravenóznej kanylácie slúži na bezpečné podanie intravenóznych liekov, tekutín, krvných produktov a výživových doplnkov. Je jednou z najčastejšie používaných invazívnych vstupov. Táto činnosť vyžaduje odborné znalosti, praktickú zručnosť a skúsenosť. ***Cieľ:*** Poukázať na možnosti bezpečnú a efektívnu ošetrovateľskú starostlivosť o invazívne venózne vstupy. ***Východiská:*** Systematický prehľad literatúry a publikovaných vedeckých článkov a štúdií. ***Metodika:*** Príspevok teoretického charakteru bol vypracovaný na základe analýzy publikovaných informácií o danej problematike za použitia kľúčových slov vo viacerých vedeckých databázach. ***Výsledky:*** Problematika ošetrovateľskej starostlivosti o venózne vstupy v súvislosti s bezpečnou ošetrovateľskou starostlivosťou je aktuálnou témou. Pre sestru je dôležité ovládať správnu techniku zavádzania venóznych vstupov, vybrať správne miesto vpichu a zavedenia venózneho vstupu za dodržia aseptických podmienok. Je preukázateľne dokázané, že prísne dodržiavanie bariérovej ošetrovacej techniky zavádzania cievnych vstupov minimalizuje vznik katétrových infekcií. Pri nesprávnom zavedení kanyly do periférnej žily môžu vzniknúť mnohé komplikácie napríklad paravenózne podanie liečiva do periférnej žily alebo zavedenie infekcie pri nesprávnom zavádzaní a ošetrovaní intravenóznej kanyly. Dôležitá je aj správne vedená ošetrovateľská starostlivosť, pravidelná kontrola a ošetrovanie miesta vpichu, zabezpečenie priechodnosti a používanie bezihlových konektorov. ***Záver:*** Intravenózne katétre sa stávajú odporúčaným cievnym vstupom pre široké spektrum pacientov. Indikovaný a správne zavedený venózny vstup zlepšuje komfort a zároveň predstavuje vyššiu bezpečnosť pre pacientov s ohľadom na výskyt katétrových infekcií. S rozširujúcim využitím stúpajú nároky na ošetrujúci personál, rovnako je nevyhnutné dodržiavať zásady ošetrovateľskej starostlivosti o cievny vstup po celú dobu jeho zavedenia

***Kľúčové slová:*** Venózny vstup. Kanyla. Sestra. Ošetrovateľská starostlivosť. Bezpečnosť.

***Abstrakt:***

***Introduction:*** Intravenous cannulation is used to safely administer intravenous medications, fluids, blood products, and nutritional supplements. It is one of the most commonly used

invasive accesses. This activity requires professional knowledge, practical skills, and experience. ***Aim:*** To highlight the possibilities of safe and effective nursing care for invasive venous accesses. ***Background:*** Systematic review of literature and published scientific articles and studies. ***Method:*** The theoretical contribution was prepared based on the analysis of published information on the given issue using keywords in several scientific databases. ***Results:*** The issue of nursing care for venous access in connection with safe nursing care is a current topic. It is important for a nurse to master the correct technique of introducing venous access, to choose the right injection site and to introduce the venous access under aseptic conditions. It has been proven that strict adherence to the barrier care technique of introducing vascular access minimizes the occurrence of catheter infections. Incorrect introduction of a cannula into a peripheral vein can lead to many complications, for example, paravenous administration of a drug into a peripheral vein or introduction of an infection in the event of incorrect introduction and care of an intravenous cannula. Properly conducted nursing care, regular inspection and care of the injection site, ensuring patency and the use of needle-free connectors are also important. ***Conclusion:*** Intravenous catheters are becoming the recommended vascular access for a wide range of patients. Indicated and correctly inserted venous access improves comfort and at the same time represents higher safety for patients with regard to the occurrence of catheter infections. With the expanding use, the demands on nursing staff are increasing, and it is also necessary to adhere to the principles of nursing care for vascular access throughout its insertion

***Keywords:*** Venous access. Cannula. Nurse. Nursing care. Safety.

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# DEFINING CHARACTERISTICS OF THE DIAGNOSIS "FRAILTY SYNDROME IN OLD AGE" IN SLOVAK NURSING PRACTICE

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## Abstract

***Introduction:*** Some nursing diagnoses, including Frailty Syndrome in Old Age (00257), still lack a strong theoretical and conceptual foundation, which may reduce clinical confidence and increase the risk of diagnostic inaccuracies. Several defining characteristics do not fully correspond to real clinical manifestations, highlighting the need for validation studies to improve diagnostic precision and practical applicability**.** ***Aim:*** The study aimed to identify and assess the defining characteristics of the nursing diagnosis Frailty Syndrome in Old Age from the perspective of expert nurses experienced in geriatric care. The objective was to determine which characteristics represent major and which minor indicators of the diagnosis. Methods: The Diagnostic Content Validity Model (DCV) by Fehring was applied. A purposive sample of nurses with experience in caring for older adults, particularly those with frailty, was used. Forty-eight nurses met the inclusion criteria. Data collection occurred between February and September 2025 in various clinical and academic settings in Slovakia. ***Results:*** Three defining characteristics achieved a weighted score > 0.80 and were identified as major indicators of Frailty Syndrome in Old Age: Impaired memory (0.90), Impaired physical mobility (0.90), and Impaired walking (0.90). Fourteen characteristics scored between 0.50 and 0.80 and were classified as minor indicators, including Bathing/hygiene self-care deficit (0.80), Fatigue (0.80), Decreased cardiac output (0.70), and Anxiety (0.60). Characteristics with scores ≤ 0.50—Excessive nutrition (0.40), Disturbed sleep pattern (0.50), and Disturbed body image (0.50)—were considered non-relevant. ***Conclusion:*** The validated diagnostic profile shows that frailty in older adults is primarily characterized by cognitive decline (impaired memory) and reduced physical function (impaired mobility and walking). These areas should be prioritized in nursing assessment and care planning. Developing interventions that support cognitive functioning and physical activity is essential for effective management of frailty.

***Keywords:*** frailty, ageing, nursing diagnosis, defining characteristics, validation

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