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How Nurse Education Impacts Her Career?

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Abstract

A great proportion of healthcare services need high-quality medication and nursery. For high-quality nursery needs best nurses and their education. Gradually, different types of nursery education systems can impact their life and career. In the future, more parameters can be used for judging the quality and promotion of nurses. This editorial addresses different educational efforts for their progresses in medical knowledge promotion, technical capability improvement and salary promotion.

Keywords: Healthcare; Nursing; Medical Service; Personalized Medicine, Obesity; Psycho-Analysis; Cancer Treatment; Pharmacology; Herbal Medicine

Introduction

An overview

A great proportion of healthcare efforts need high-quality medication and nursery. In the past, nurse's career building mainly dependents on their education at schools. Their promotion comes largely from their degree in colleges. It is not very fair for many nurses having rich experience in the hospitals. In our study, several different pathways can provide medical knowledge and technical capability other than medical training in colleges. In the future, more parameters can be used for judging the quality and promotion of nurses. This editorial addresses this part of medical challenges for nursery education and their promotions.

Clinical situation

Medical degree is very important for nursery career advances in most countries. But many nurses living in rural areas commonly have less opportunity to take formal education and training in normal medical colleges. However, they are the major forces for hospitals and health-centers in China. Today, a half of major diseases are chronic diseases. Their treatments and recovery processes are not defined in operation-room (surgery), but getting better in the bedside. Medication (drugs, nutrition, instruments and nursery) play key roles for patients with chronic diseases [1-11]. A great deal of chronic or dying patient in general hospitals or healthcare centers can survive longer by efforts of both doctors and nursing [12-17]. As a result, cooperation between doctors and nursery is very important in the clinic [17].

Methods

Importance of high-quality medical learning for nurses

Nursery education plays key roles for their career [1-11]. Table 1 shows a glimpse of major pathways for medical knowledge acquisition (Table 1). These pathways for knowledge benefiting and learning do not all come from medical schools.

Source	Knowledge benefiting
Degree course	Basic skills
Seminar	Career widening
Medical reference	Excellent custom building
Routine practice	Technical sides & normal work
Teacher training	Career building at beginning
Paper writing	Idea generation
Language learning	Important for further progress

Table 1: Major forms of medical knowledge and technology acquisition

Custom to read references

Taking part in seminar and references are important pathways to get medical knowledge for nurses. With the gradual primary education progresses in developing countries, more nurses can learn medical knowledge from references. A great number of new publications are suitable for nurses. Building the custom to read medical references is a good habit.

Degree for position promotion

In the future, wide-range of criteria and parameters could be used for the hallmark of position promotion, like content in Table 2. For many nurses who have sufficient medical knowledge and low medical degrees, they could also be considered to receive some more important positions.

Disease types	Major targets
Infection	Body temperature, isolation and so on
Obstetric	Child, mother, Fetus observation
Mental disorders	Psychiatric, cognitive, depression, suicide
Neurobiology	Neurodegenerative diseases, epilepsy, depression
Cancer	Chronic body recovery and emergency
Palliative	Incurable diseases
Metabolic disease	Food and exercise assistance
Orthopedics	Immobile and osteoporosis
Cardiovascular	Blood pressure, electrocardiography and angiography
Handicaps	Limb/foot, blind, deaf and speechless
Pediatric	Helping-hands for the children
Gastro-intestinal	Bleed, digests and insomnia

Ref 18-32

Table 2: A nursery service landscapes for major diseases

The limitation of widest degree promotion for nurses

The widest medical degree promotion is not suitable for many countries, like China. More and more students do not choose nursery as major in colleges. Many famous medical colleges close granting nursery degree to students. To adapt this new trend, more competitive management systems should be delivered.

Nurses can improve patient's health care a great deal by different knowledge educations and customs. Excellent health care services and nursery education should be improved by cooperation between doctors and nurses

Crossover in Medical Knowledge

Characterization of mutual benefits

Pathways for enhancing cooperation between doctors and nurses are tabulated in Table 3. Mutual respects and benefiting are indispensable.

Categories	Administrative
Knowledge	Broad-ranges & specificity
Communicating platforms	Regularity
Techniques	Computerization & categorization
Ethical	Clearance & mutual respects
Duty	Classification

Table 3: Pathways for enhancing cooperation

Underlying diseases and co-morbidity

The different patho-physiological conditions and underlying diseases, like body mass index (BMI) [22,23], co-morbidity [24,25], patient's ages and others will be considered to treat with personalized medicine and palliative treatments [33-35]. Nurses should also notice detailed information for helping doctors and patients in this respect.

Nursery science on different disease categories

In summary, different types of nursery play key roles in different clinical trials and circumstances, especially chronic diseases, such as suicide prevention [36-39], bone diseases [40-43], metabolic diseases [44-50], neural and mental diseases [51], emergence [52-57], cancer [58-63], herbal medicine [64-69] and so on. These kinds of medical knowledge can be improved by college study and hospital practices.

Conclusion

Nursery education and clinical service is also cost-effective. To promote these kinds of medical and technical work, cooperation and chemistry between doctors and nurses is the key.

References

1. Lu DY, Chen YZ, Lu DF, Che JY (2019) Patient's care and nursery in different diseases. Hospice & Palliative Med Int J 3: 28-30.

2. Lu DY, Chen YZ, Lu DF, Che JY (2019) Patient's care and nursery in modern medicine. Nursery Pract Health Care 1: 101.

3. Lu DY, Chen YZ, Lu DF (2019) Nursery education, capability and service promotion. Open Access J Nursery 2: 1-4.

4. Lu DY, Chen YZ, Lu DF (2019) Nursery education in schools, significance for career. Biomed Res & Rev 2: 10.31021/bbr.20192113.

5. Iqbal U, Humayyn A, Li YC (2019) Healthcare quality improvement and measurement strategies and its challenges ahead. Int J Quality Healt Care 31: 10.1093/Intqhc/mzz009.

6. Iqbal U, Rabrenovic M, Li YC (2019) Healthcare quality challenges in low- and middle-income countries.10.1093/Intqhc/mzz0031.

7. Leebov W, Scott G (1996) Service quality improvement. The customer satisfaction strategy for healthcare. J Healthcare Quality 18: 35.

8. Lu DY, Chen YZ, Lu DF (2019) Nursery service, quality promotion. Hospice & Palliative Medicine Int J 3: 97-8.

9. Lu DY, Chen YZ, Lu DF, Che JY (2019) Nursery service in modern day. Adv Biomedical Eng Biotechnol 1: 1-2.

10. Ghaffari M (2019) Building a community of learners: Lessons learned. Nurs Prac Healt 1: 104.

11. Lu DY, Chen YZ, Lu DF (2020) Nursery education, narrow-range or wide-range. Nurs Care Open Access J 7: 87-9.

12. Ahmad S (2013) An Old Disease, A New Insights, Springer Science, USA.

13. Zimmet PZ, Magliano DJ, Herman WH, Shaw JE (2014) Diabetes; a 21st century challenge. Lancet Diabetes Endocrinol 2: 56-64.

14. Grimaccia F, Kanavos P (2014) Cost, outcome, treatment pathways and challenges for diabetes care in Italy. Global Health 10: 58.

15. Lu DY (2017) Suicide Risks and Treatments, New Ideas and Future Perspectives. Ed Da-Yong Lu, Nova Science Publishers, 2017, New York, USA.

16. Lu DY (2017) HIV/AIDS Treatments, Fight for a Cure. LAMBERT Academic Publishing, Germany.

17. Lu DY, Chen YZ, Lu DF (2020) Nursery activity and quality, chemistry between doctors and nurses. Nurs Care Open Access J 7: 91-3.

18. Lu DY, Lu TR (2020) Drug sensitivity testing, a unique drug selection strategy. Adv Biomarker Sci Technol 2: 59-66.

19. Lu DY (2014) Personalized cancer chemotherapy, an effective way for enhancing outcomes in clinics, Woodhead Publishing, Elsevier, UK.

20. Lu DY, Chen XL, Ding J (2006) Individualized cancer chemotherapy integrating drug sensitivity tests, pathological profile analysis and computational coordination—an effective strategy to improve clinical treatment. Med Hypotheses 66: 45-51.

21. Lu DY, Lu TR, Che JY, Shen Y, Yarla NS (2018) Individualized cancer therapy, future approaches. Curr Pharmacogenomics Pers Med 16: 156-63.

22. Lu DY, Che JY, Putta S (2018) Obese study, keep up the momentum. Int J Endocrinology Res 1: 1-3.

23. Lu DY, Che JY, Yarla NS, Putta S, Lin LP, et al. (2019) Human obesity, pathological and therapeutic advances. EC Pharmacol Toxicol 7: 231-8.

24. Lu DY, Che JY, Shen Y (2018) Clinical treatments of osteoporosis, how to target co-morbidities. EC Orthopaedics 9: 781-2.

25. Lu DY, Che JY, Shen ZM, Tong LJ, Lin LP, et al. (2019) Osteoporosis treatments for old people. EC Orthopeadicis 10: 278-80.

26. Lu DY, Zhu PP, Lu TR, Che JY (2016) The suicidal risks and treatments, seek medications from multi-disciplinary. Cent Nerv Syst Agents Med Chem 16: 231-9.

27. Lu DY, Wu HY, Lu TR (2020) Human suicide study, new insights and drug development. J Community Medicine 3: 1028.

28. Lu DY, Wu HY, Yarla NS, Xu B, Ding J, et al. (2018) HAART in HIV/AIDS treatments, future trends. Infect Disorders-Drug Targets 18: 15-22.

29. Lu DY, Wu HY, Ding J, Sastry N, Lu TR (2016) HIV vaccine for prevention and cure, a mission possible. Rev Recent Clinic Trials 11: 290-6.

30. Lu DY, Lu TR, Wu HY, Yarla NS, Ding J, et al. (2018) HIV/AIDS curable study, new forms of therapeutic trinity. Rec Pat Antiinfect Drug Discov 13: 217-27.

31. Lu DY, Wu HY, Lu TR (2020) HIV/AIDS treatment, therapeutic strategy breakthroughs. Hospice Palliative Med Int J 4: 34-9.

32. Lu DY, Wu Hy, Yarla NS, Lu TR, Xu B, et al. (2019) Ebola therapeutic study and future trends. Infect Disorder Drug Targets 19: 17-29.

33. Prityko DA, Burkov IV, Safonov VV, Klimov DE, Gusev L (2019) Palliative care for children, problems and ways to solve them. EC Clin Experiment Anat 2: 23-9.

34. Lu DY, Chen YZ, Shen Y, Xu B, Lu DF (2020) Medical treatment for chronic or aggressive diseases, palliative therapy and nursery. Novel Res Science 3: 556.

35. Serafini G, Salano P, Amore M (2015) Suicidal ideation: a comprehensive overview. Suicidal Ideation: Predictors, Prevalence and Prevention. Ed. Bradley Weaver. Nova Science Publishing. USA.

36. While D, Bickley H, Roscoe A, Windfuhr K, Rahman S, et al. (2012) Implementation of mental health service recommendations in England and Wales and suicide rates, 1997-2006: a cross-sectional and before-and-after observational study. Lancet 379: 1005-12.

37. Lu DY, Lu TR, Lu Y, Cao S (2017) Introduction for suicide study. J Metab Syndr 6: 227.

38. Lu DY, Shen Y, Cao S (2020) High quality treatments for human suicidal events and mortality. Adv Tech Biol Med 8: 269.

39. Lu DY, Zhu PP, Wu HY, Yarla NS, Xu B, et al. (2018) Human suicide risk and treatment study. Cent Nerv Syst Agents Med Chem 18: 206-12.

40. Melton J (1993) "Hip fracture; a worldwide problem today and tomorrow". Bone 14: S1-8.

41. Silva DMW (2018) Diagnosis of osteoporosis; bone mineral density, risk factors, or both". EC Orthopaedics 9: 500-2.

42. Lu DY, Cao S, Xu B, Shen Y (2020) Bone surgery with bone anatomy analysis. EC Clinical Exp Anat 3: 1-4.

43. Lu DY, Che JY (2020) Bone disease treatment, an editorial. EC Orthopeadics 11: 143-5.

44. Putta S, Peluso I, Yarla NS, Kilari EK, Bishayee A, et al. (2017) Diabetes mellitus and male aging, pharmacotherapeutics and clinical implications. Curr Pharm Des 23: 6321-46.

45. Lu DY, Che JY, Yarla NS, Zhu H, Lu TR, et al. (2018) Type 2 diabetes study, introduction and perspective. The Open Diabet J 8: 13-21.

46. Lu DY, Che JY, Yarla NS, Wu HY, Lu TR, et al. (2018) Type 2 diabetes treatment and drug development study. The Open Diabet J 8: 22-33.

47. Lu DY, Chen YZ, Lu DF (2020) Nursery education for diabetes. Nurs Care Open Access J 7: 35-7.

48. Lu DY, Che JY, Lu Y, Yarla NS, Xu B, et al. (2018) An overview of obesity. Metabolomics 8: 200.

49. Lu DY, Che JY, Wu HY, Yarla NS, Xu B, et al. (2018) Obesity, risks and managements. Metabolomics 8: e156.

50. Lu DY, Che JY, Lu TR, Lu Y, Huang YK, et al. (2018) Pathology and treatments of obesity. Trends in Med 8: 157.

51. Calik T, Yalmaz V, Unalp A (2020) Nursing approaches in pediatric epilepsy and ketogenic diet treatment. EC Paediatrics 7: 110-5.

52. Lu DY, Shen Y, Xu B (2019) Heart and brain stroke, a paramount task for emergency medication. EC Emergency Med Crit Care 3: 785.

53. Khan M, Silver B (2019) Editorial: Stroke in elderly: current status and future direction. Front Neurol 10: 177.

54. Lu DY, Cao S, Xu B, Shen Y (2020) Bone surgery with bone anatomy analysis. EC Clinical Experi Anat 3: 1-4.

55. Lu DY, Shen Y, Xu B (2020) Cardiovascular emergency, future direction. Int J Clin Med Cases 3: 135.

56. Lu DY, Shen Y, Xu B (2020) Cardiovascular emergency, risk factor and improvement. EC Emerg Med Crit Care 4: 1-2.

57. Lu DY, Shen Y, Xu B (2019) Brain stroke, emergency management and drug developments. EC Pharmacol Toxicol 7.

58. Lu DY, Lu TR, Wu HY, Cao S (2013) Cancer Metastasis treatments. Curr Drug Ther 8: 24-9.

59. Lu DY, Xu B, Ding J (2004) Antitumor effects of two bisdioxopiperazines against two experimental lung cancer models in vivo. BMC Pharmacol 4: 32.

60. Lu DY, Huang M, Hu CX, Yang WY, Hu CX, et al. (2005) Anti-proliferative effects, cell cycle G2/M phase arrest and blocking of chromosome segregation by probimane and MST-16 in human tumor cell lines. BMC Pharmacol 5: 11.

61. Lu DY, Chen XL, Ding J (2007) Treatment of solid tumors and metastases by fibrinogen-targeted anticancer drug therapy. Med Hypotheses 68: 188-93.

62. Lu DY, Lu TR (2010) Antimetastatic activities and mechanisms of bisdioxopiperazine compounds. Anti-Cancer Agents Med Chem 10: 564-70.

63. Lu DY, Chen YZ, Lu TR, Xu B, Lu DF (2020) Cancer metastasis, palliative treatment and Nursery. Ann Pharmacol Pharm 5: 1175.

64. Lu DY, Lu TR (2019) Herbal medicine in new era. Hospice Palliative Med Int J 3: 125-30.

65. Yang G, Li X, Li X, Wang L, Li J, et al. (2012) Traditional Chinese medicine in cancer care: a review of case series published in the Chinese literature. Evid Based Complement Alternate Med 10.1155/2012/751046.

66. Lu DY, Lu TR, Putta S, Xu B, Wu HY (2019) Anticancer drug discoveries from herbal medicine. EC Pharmacol Toxicol 7: 990-4.

67. Pattanayak S (2018) Alternative to antibiotics from herbal origin—outline of a comprehensive research project. Curr Pharmacogenomics Personalized Med 16: 9-62.

68. Parasuraman S (2018) Herbal drug discovery: challenges and perspectives. Current Pharmacogenetics Personalized Med 16: 63-8.

69. Lu DY, Lu TR, Yarla NS, Lu Y, Che JY, et al. (2020) Natural drug cancer treatment strategies from herbal medicine to chemical or biological drug. Studies in Natural Products Chemistry. Bioact Nat Prod 66: 91-115.