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INTEGRATIVE REVIEW ARTICLE

PROTOCOLS DIRECTED TOWARDS NURSING ACTIONS IN THE PRE-NATAL STAGE: INTEGRATIVE REVIEW

PROTOCOLOS VOLTADOS ÀS AÇÕES DE ENFERMAGEM NO PRÉ-NATAL: REVISÃO INTEGRATIVA

PROTOCOLOS DIRIGIDOS A ACCIONES DE ENFERMERÍA EN PRENATAL: REVISIÓN INTEGRATIVA

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ABSTRACT

Objective*:** to analyze, in the national and international literature, the nurse's pre-natal actions. ***Method*:** integrative review with the intention of responding to the central question, "What is the scientific evidence with respect to nursing actions at the pre-natal stage?" Searches were based on PubMed, BDENF and LILACS in the period from 2003 to 2014, employing the following key-words: pre-natal care, protocols and pregnant women. In the analysis of articles, nine studies were selected for the ideas which guide nursing care. ***Results: activities developed by nurses in pre-natal attention were highlighted. ***Conclusion:*** diverse challenges for qualified pre-natal assistance were evident, tied up with the lack of material resources and continuing education for nursing professionals. The use of protocols for assistance is recommended, in the sense of streamlining procedures to be developed by the whole team, serving as a reference point and an aid in decision making. ***Descriptors:*** Pre-natal care; Pregnant Women; Protocols.

RESUMO

Objetivo*:** analisar, na literatura nacional e internacional, as ações do enfermeiro no pré-natal. ***Método*:** revisão integrativa, com vistas a responder a questão norteadora << Quais as evidências científicas a respeito das ações de enfermagem no pré-natal? >> Realizou-se busca nas bases PubMed, BDENF e LILACS, no período de 2003 a 2014, empregando os descritores: cuidado pré-natal, protocolos e gestantes. Na análise dos artigos buscou-se os eixos que guiam o cuidado de enfermagem de nove estudos selecionados. ***Resultados*:** destacaram-se as atividades desempenhadas por enfermeiros na atenção pré-natal. ***Conclusão*:** evidenciaram-se diversos desafios na assistência qualificada ao pré-natal, atreladas a falta de recursos materiais e educação continuada aos profissionais de enfermagem, recomenda-se o uso de protocolos assistenciais no sentido de padronizar ações a serem desenvolvido por toda a equipe, servindo de referencial e auxílio na tomada de decisão. ***Descritores: Cuidado Pré-natal; Gestantes; Protocolos.

RESUMEN

Objetivo: analizar en la literatura nacional e internacional las acciones del enfermero en prenatal. ***Método***: revisión integrativa, para responder la cuestión de referencia << ¿Cuáles son las evidencias científicas respecto a las acciones de enfermería en prenatal? >> La búsqueda se efectúo en las bases PubMed, BDENF y LILACS, en el periodo de 2003 a 2014, empleando los descriptores: cuidado prenatal, protocolos y gestantes. En el análisis de los artículos se buscaron los ejes que orientan el cuidado de enfermería de nueve estudios seleccionados. ***Resultados***: se destacaron las actividades desempeñadas por enfermeros en la atención prenatal. ***Conclusión***: se evidenciaron diversos retos en la asistencia cualificada al prenatal, relativos a la falta de recursos materiales y educación continua de los profesionales de enfermería, recomendándose el uso de protocolos de asistencia para estandarizar acciones a desarrollar por todo el equipo, sirviendo de referente y base en las tomas de decisión. ***Descriptores***: Cuidado Prenatal; Gestantes; Protocolos.

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INTRODUCTION

Pregnancy is a very important experience in a woman's life, being influenced by personal values and beliefs. During the whole pregnancy physiological alterations occur which generate expectations and fears. Knowing this, professionals are expected to know about such changes so that alternatives can be implemented to assist pregnant women, promoting a healthy conclusion as well as attention in the pre-natal phase.[1]

The pre-natal period is considered to be a period of accompaniment for the pregnant woman, where a set of individual and collective actions are developed to benefit maternal health – up until receiving the pregnant woman and her family, and from the moment of the identification of the pregnancy.[2]

In Brazil assistance to women in the pregnancy-puerperium cycle has suffered diverse changes over the years, having been marked principally by the implementation of the Program of Integral Assistance for Women's Health (PAISM), which established assistance for the woman through her entire life cycle, including during pregnancy, in an integral and specific way according to the case, developing not only curative activities but also preventative and educative ones.[3] After this landmark there were also elaborated models of assistance by way of technical manuals directed towards the capacitation of professionals and the normalization of their activities, which contributed to the bettering of pre-natal assistance.[4]

The principal aim of the pre-natal stage is to monitor the woman's and the baby's health during the whole pregnancy (from the moment of childbirth) where professionals identify situations which will potentially increase the risk of unfavorable results, thereby performing interventions which ensure the safety of both mother and child. The approach for each pregnant woman should take into consideration the characteristics of the population under assistance, being alert for risks to pregnancy, the prevalence of the most common illnesses, and evaluating the evidence available and that which is developed by the multi-professional team.[5] Because of all of this the use of care protocols is timely, since it permits the streamlining of actions to be developed by all of the pre-natal team.

Amongst the professionals who are involved with pre-natal care, the nurse is featured as having a fundamental role, using his knowledge and competence for the promotion of a healthy gestation, from diagnosing the pregnancy to the realization of all gestational monitoring. [6]

Under legal practice, the nurse can realize pre-natal monitoring of habitual risk and one hopes, therefore, that these professionals perform gestational monitoring based on principles and practices which are backed up by the best scientific evidence.[6]

The roles of the professional nurse in this monitoring are diverse. Amongst them one can highlight: the registration of the pregnant woman in the System of Information on Health specific to pre-natal conditions (SISPRENATAL); solicitations of exams; performance of the obstetric and gynecological exam; necessary follow up; preparation for birth; orientations on care with the recently born baby and on childcare; vaccination and also the promotion of a link between mother and child.[7] The very same activities are recommended by the Ministry of Health.[8]

The nurse, as an important part of the hospital team, possesses as part of his or her job description the realization of Nursing Consultancy with the complete evaluation of the female individual, delivering nursing care and prescribed medicine in health programs and health institution protocols, being able to maintain, as well, a therapeutic scheme, and carry out educative and other activities; [5] however, to re-organize assistance in nursing in a general way, as well as obstetric assistance, the use of protocols to guide nursing activities is fundamental. A protocol is an instrument elaborated with a view for health professionals to exercise their regulated activities in accordance with professional attributes, reorganizing the work process without hindering assistance. [9]

Some works show the benefit of protocols in assistance for pre-natal nursing and the importance of planning for its elaboration and implantation. A study realized with nurses based on the facilitating points on the use of protocols[2] tells us that nurses see the protocol as a document which backs professional action, and further still, facilitates access to information. The study showed the difficulties in the exercise of the activities proposed by protocols, being it for lack of training or lack of articulation between members of a multi-professional team. [2]

The point of departure is the assumption that the practice of nursing based on scientific evidence is an essential tool in the competent care of obstetric nursing, however a deep reflection is necessary as to the

applicability and constant updating of the protocols applied as they are directed towards the care of the woman, discussing its importance in the systematization of actions.[10]

OBJECTIVE

- To analyze, in national and international literature, the behavior of the pre-natal nurse.

METHOD

This study integrates the study entitled *Integral Health Assistance for People with Chronic Illnesses: Hypertension and Diabetes*, approved by the Ethics Committee for Research at the Federal University of Mato Grosso do Sul, according to Document nº 256.591, March 14 2013; PIBIC/CNPq sub-projects: "Nursing procedures in high risk pre-natal arterial hypertension", "Nursing procedures in high risk pre-natal diabetes" and the extension project "The Promotion of Maternal Health – Education in Maternal Health".

It is based upon integrative review of the literature referring to documents published in the following data bases: Data Bases for Nursing (BDENF), Latin-American Literature in Health Sciences (LILACS), identified by the Virtual Health Library (BVS) and the National Library of Medicine's medline and pre-medline database (PubMed).

The study was orientated by six stages: (1) the identification of the subject and guiding question: What is the scientific evidence with regard to nursing procedures in the pre-natal stage?; (2) the criteria for inclusion and exclusion: works published between the years 2003 and 2014 containing full text, written in Portuguese and which discuss nursing protocols within procedures of the pre-natal stage. References repeated in more than one data base, as well as those which did not respond to the theme, were excluded; (3) the definition of information from studies: the key-words used were "pre-natal care" and "protocols" and "pregnant women"; (4) the evaluation of the studies included in the revision: The types of studies included in this revision were qualitative study, reports on experience and bibliographic review of literature with the time of publication between 2003 and 2014, with themes adequate for the proposal of this work; (5) interpretation of the results; (6) knowledge synthesis.

The collection of data occurred in the following data bases: the Virtual Health Library (BVS), Data Base for Nursing (BDENF), Latin-American and Caribbean Literature in Health Sciences (LILACS), and the National Library of Medicine (PubMed).

After the selection of references the procedure was to consider the reading of titles and abstracts, permitting analysis with the help of a validated instrument which allowed for the assessment of data referring to originality, methodology, interventions, recommendations and the results, as well as the levels of evidence: (I) systematic revisions or meta-analysis of the relevant clinical trials; (II) random clinical trial; (III) clinical trial with no randomization; (IV) cohort studies and control group; (V) systematic revision of descriptive and qualitative studies; (VI) a single descriptive or qualitative study; (VII) the opinion of a committee of specialists.[11]

The results were made available in table form and considered in the light of scientific production published in journals.

RESULTS AND DISCUSSION

Even though the data searches have found more than a thousand references discussing care protocols, many of them referred to general subjects related to a diverse range of issues but not related to pre-natal assistance.

The automatic search made it possible to find 839,891 studies: 233,628 in the BVS, 886 in the BDENF, 217,483 in LILACS, and 387,894 in PUBMED. However, 456,217 were not available, 108,459 were outside of the period under study, 267,202 were not in Portuguese, 7,973 did not treat the proposed subject or did not belong to the nursing area and 31 repeated themselves in one or more data bases. As a result, after the analysis based on inclusion and exclusion criteria, nine publications were obtained.

The results revealed the scarcity of nursing care protocols directed towards pre-natal assistance, be they specific to the pregnant/ puerperium cycle or even being part of wider protocols which include all nursing assistance in the human life cycle.

In Figure 1 the selected publications are presented, contributing as much with the activities developed by the nursing professional as they do with projects developed by students of nursing courses.

Title of the Publication	Authors	Results and registers of evidence	Conclusions
1. The Line of Care for the Pregnant Woman and during Childbirth	State Secretary of Health in São Paulo[12]	This protocol describes the activities of the nurse as part of the multi-professional team, in the elaboration of educative and assistance-based activities. NE: VI	The elaboration of this protocol was based on the guidance of the Technical Manual of the Ministry of Health, to be used for the services of the SUS health network in the state of São Paulo, needing validation and updating according to each reality found.
2. Protocol for Nursing Consultation in the Pre-Natal Stage: Construction and Validation	Jamile Lopes de Moraes[13]	Masters Dissertation which orientates the construction of a care protocol for pre-natal nursing NE: VI	For the protocols to be effective it is necessary that their information be revalidated periodically so that assistance does not become hampered. One limitation in this work was that the authors did not form dialogue groups with the pregnant women to identify the main demands of the pre-natal stage where it is practiced; however it is important that the nurse is receptive to beliefs, values and opinions of the target public so that the process of implantation of the protocol can become concrete.
3. Nursing Protocols in Primary Attention to Health	Nursing Council of Rio de Janeiro, Municipal Secretary of Health and Regional Civil Defense[5]	Describes the procedures of nursing in diverse areas, including pre-natal care, in basic attention at the municipal level with an idea to facilitate access to information for nursing's basic care, since the nurse possesses important characteristics in receiving and care for pregnant women. It describes activities from the diagnosis of the pregnancy until the request for exams, nursing consultation and assistance for the main complaints. NE: VI	The initiative to protocol the Nurse's activities is relevant for awakening in the professional the benefit of legalizing his actions, developing skills in safety, resulting in better assistance. However, one must highlight that the professionals of Family Health should always be obliged to carry out health care in a team. Another advance in the elaboration of nursing protocols has been the participation of the Nursing Council and nurses from health groups, reinforcing the importance of the organization of nursing in the elaboration of documents which guide assistance, taking into account regional particularities.
4. Nursing for the Low Risk Pre-natal Stage: Due Date Calculator with Basic Routines.	Abel Silva de Meneses[14]	A descriptive study that contemplates nursing actions shown on a due date calculator (a diagram which keeps protocol information in the municipality of São Paulo on a single plane) containing clinical and administrative characteristics about the nurse, organized by gestational periods, permitting the planning of assistance in subsequent appointments. NE: VI	The proposed instrument serves as a support for attending to the pregnant woman in accordance with the principal of integrality, presenting a strategic character which considers the pregnant woman in a holistic form, through homely practices which value their complaints and anguish with an end to minimizing as much as possible whatever discomfort and make their quality of life better. Therefore it is in the nurse's hands to manage available resources to benefit the clientele.
5. The Protocol in Pre-birth Assistance: Actions, Opportunities and Difficulties for Nurses in the Strategy for Family Health.	Edilene Matos Rodrigues, Rafaella Gontijo do Nascimento, Alisson Araújo[2]	Qualitative Study developed by way of semi-structured interview with nurses from the basic network of health in Divinopolis (a city in the State of Minas Gerais) with the objective of identifying their perceptions on the use of pre-natal protocols. NE: VI	This article permitted a reflection on points which favor or hamper the use of protocols in daily pre-natal nursing assistance. Even though most consider protocols as important tools, there is still resistance on the part of some. However, for the correction of these flaws it is necessary for there to be a joining of forces between professionals, managers and service users for the protocol to be

			really useful in practice.
6. Nursing Protocol for Attention to Women's Health	São Paulo City Council and the Municipal Secretary of Health[15]	Municipal Protocol of the City of São Paulo directed towards basic attention in health which makes available in texts and flow diagrams pre-natal nursing assistance, highlighting educative actions, family support, nursing appointments and home visits. It describes the main exams solicited, plans for appointments and behavior in the wake of the most serious complaints. NE: VI	The document was elaborated by a group of nurses involved in the Family Health Strategy (ESF). The importance of the professionals taking part in the ESF is highlighted for the construction of assistance protocols. They identify vulnerabilities and opportunities in the territory, being capable of providing better interventions. The document highlights that the subjects treated are issues for capacitation to be based on in ESF teams.
7. Making the Process of Pre-Natal Assistance adequate according to Criteria of the Pre-Natal Program of Humanization and Births of the World Health Organization.	Rúbia Bastos Soares Polgliane[17]	Epidemiological sectional study developed in the municipality of Victoria (State of Espírito Santo) in the Single Health System (SUS). It looks to improve the quality of pre-natal assistance with the assessment of the assistance and capacitation process, reducing maternal and perinatal mortality rates, creating strategies for quality in accompaniment during pregnancy and birth procedures. NE: VI	From the implantation of an adequate and capacitated protocol in assistance during pregnancy and in childbirth with periodic accompaniment, one notes a reduction in the mortality rate and pregnancy complications, always searching for a human and homely attendance.
8. Sisprenatal as an Instrument of Quality Assessment in Assistance to the Pregnant Woman.	Carla Betina Andreucci, Jose Guilherme Cecatti, Camila Elias Macchetti, Maria Helena Sousa[18]	Cross-sectional study realized through hospital childbirths through the Single Health System in the municipality of São Carlos, São Paulo, with the objective of identifying the adequate completion of the pregnant woman's card and of the SISPRENATAL in a synchronized way so as to avoid flaws in documentation with regard to pregnancy and childbirth. NE: VI	The adequate completion of the pregnancy card and the SISPRENATAL is extremely important when worked upon in a synchronized way. It favors the implantation of appropriate protocols for obstetric attention and the capacitation of health professionals, generating special care which is modeled on attending pregnant women.
9. Quality in the Pre-Natal Assistance Process: Basic Health Units and Family Health Strategy Units in a Neighborhood in the South of Brazil.	Elenir Terezinha Rizzetti Anversa, Gisele Alsina Nader Bastos, Luciana Neves Nunes, Tatiane da Silva Dal Pizzol[19]	Cross-sectional study performed in the municipality of Santa Maria (State of Rio Grande do Sul), having as its objective the assessment of the process of pre-natal attention. NE: VI	With this study one perceives whether or not there are diferences in the quality of assistance in the UBS and ESF. The result of the study related to pre-natal quality was favorable, however some improvements are still necessary in the area of basic treatment.

Figure 1. Description of selected studies (n=9), according to title, authors, results and conclusions. Três Lagoas, MS, 2014.

The results revealed that the nurses were involved in pre-natal assistance. To this effect they performed the consultancy of nursing where procedures like soliciting diagnostic exams for pregnancy, the classification of risk to pregnancy, clinical assessment, the analysis of exams results, and assessment of vaccination measures, checking vital statistics such as weight, blood pressure and symphysis-fundal height, as well as the prescription of medicines from health ministry programs, have a part in the routine of these professionals and appear in protocols.[12]

Emphasized is the fact that protocols guide qualified assistance to the pre-natal stage. In this way secure help is given to the pregnant woman and her family, always referring to a document containing the best scientific evidence, which should be periodically updated.[13]

All the works show that the protocols were elaborated with the intention of reorganizing and improving the nursing assistance proposed in technical manuals of the Ministry of Health, making it adequate for local realities. However, what falls under discussion are the difficulties confronted by putting these protocols into practice. The lack of specific theoretical-practical capacitation and the clarification of the importance of the use of protocols and creation of guidelines which facilitate multi-professional interaction are factors described in the literature as limiting for the actions developed by nurses in adequate pre-natal care. [2]

Protocols are important tools which act to regulate the quality of the assistance as well as guaranteeing safe health practices, promoting health and quality of life in the people assisted. They require, however, technical capacitation and improvement in infrastructure at the health centers in order to realize the procedures proposed in these documents.[16]

The literature recommends the construction and use of protocols, intended to standardize good practices in pre-natal care. Nonetheless, the rational use of all documents which discuss pre-natal procedures and their individual use for diverse situations is fundamental, for these situations may not be accounted for in protocols and will demand decisions by the pre-natal procedure's team.

CONCLUSION

This study was limited by the fact of not having explored all literature with respect to the existence of nursing protocols in pre-natal procedures, considering that other data bases were not investigated.

However, evidence emerged that in certain localities pre-natal nursing actions are normalized by protocols, serving as a reference frame for other places to establish this strategy as a facilitator for safe and quality assistance.

The literature concluded that in the implantation of protocols, one requires a variety of activities such as knowledge of local reality, review of current literature on the subject, meetings with professionals acting in health and capacitation units to put into practice activities included in the document, besides the awareness of professionals as to the importance of the use of protocols.

There are many challenges to the implantation of documents to guide assistance, falling into the hands of nursing professionals to know legislation related to their profession: norms proposed in government technical manuals and the organization of this knowledge according to the given reality, uniting to elaborate local protocols so that nursing assistance in the pre-natal stage can be given in a holistic form and directed towards the necessities of each pregnant woman, permitting a healthy conclusion to gestation.

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