

**1. What are the seven categories that emerged from the content analysis?**

The seven categories that emerged from the content analysis include symptom management, activities of daily living, encouragement, emotional support, nurturing relationship, respect for religious beliefs, and concern for cultural differences.

**2. For each category provide an explanation of what was confirmed, reported, perceived, expected, or believed by nurse's or patient participants.**

Category 1: Symptom management: This category involved a nurse assessment of the patient, along with providing care to relieve or reduce physical signs and symptoms and is considered as critical nursing care quality. The nurse assessed the patient comprehensively from head to toe upon admission to the unit. The goal was to reduce or relieve physical suffering such as pain, nausea, edema, and shortness of breath. The patients reported gratitude as many of their physical problems disappeared after receiving treatments and good nursing care. Examples of patient reports include, "The nurse took care of me and asked if I had any pain or uneasiness", and "Treatment and nursing care are good because now I can eat meals; otherwise, I throw up anything after a drink or eat due to acute gastric ulcer."

Category 2: Activities of daily living: In category 2, the nurses confirmed that the QNC involves providing an opportunity for patients to complete their daily physical activities independently, as if they were healthy. An example of this includes a statement by a nurse saying, "We do primary nursing care for the patients such as bathing, toileting, feeding, dressing, just the same as healthy people do every day without assistance." The patients reported that essential primary nursing care was accomplished along with treatments from the nurses. An example of a patient's report includes, "When I got thirsty, the nurses helped me to drink and eat and even moisturize my lips with a wet cloth."

Category 3: Encouragement: In category 3, nurses perceived that giving encouragement included inspiring patients to get well or administering self-care and enhancing their self-confidence to assist in optimizing their health and managing their illness as an aspect of QNC. A report from a nurse states, "Patients get happy when I say you look nice today or you are getting better. So, I say many inspiring words to my patients to support them psychologically. The patients expected nurses to exhibit sincerity and engage them in

discussions with a view to inspire them to have willpower to overcome illness. A patient reported, “Sometimes, nurses have to talk sincerely and reassure patients in building more willpower to assist them in overcoming illnesses.”

Category 4: Emotional support: In category 4, the participants reported that relieving a patient’s negative moods could be assisted by a nurse who shows empathy, and giving indulgent care by gently touching the patient, and giving particular time to patients to express their emotions while providing nursing care. From a nurse’s perspective, they mentioned, “I always remain patient, tolerant and actively listen when patients are upset, then patients will calm down and things can improve shortly.” A patient reported their perspective and stated, “Although nurses seemed to be overwhelmed most of the time, I see a nurse keep a constant kind and cheerful disposition.”

Category 5: Nurturing relationship: In this category, the patients reported that the nurse helps the patient’s ability to connect with family, friends, and healthcare providers, which is essential for delivering and receiving QNC. A nurse reports, “The contribution of the family is significant in contributing toward the patient’s sense of well-being and is effective for enhancing care quality.” A patient mentioned, “Sometimes we need particular nurse assistance to arrange consultation with the doctor or the social worker about some medical issues or ongoing care after hospital discharge which are vital for providing quality care.”

Category 6: Respect for religious beliefs: In category 6, the patients perceived that nurses provide the patients and their families with opportunities to perform religious activities in the unit, and that respecting the patient’s traditional and cultural beliefs is important for providing QNC. A nurse reported, “In many cases patients and their family asked us to bring a monk to the hospital to call the patients’ spirit back, or use spring water from a monk, and we allow it.” The support from the nurse allows the patient to feel comfortable with their cultural practices. From a patient’s perspective, one reported, “Nurses assist if patients and their family desire to perform religious activities in the ward; they even provide a suitable room.”

Category 7: Concern for cultural differences: In this category, the patients believe that when nurses develop a nursing care plan, they should consider the patients’ different health-related attributes, cultural needs and the need to discuss any restrictions with them related to their culture, religious and traditional beliefs, or dietary, hygiene or gender preferences. It is important for a nurse to consider these qualities to provide the preferred care based on each individual patient. From a nurse’s perspective, one reported, “Some patients from the countryside tend to not take a bath because they believe they must keep warm during the treatment, otherwise it would clear out the treatment benefits.” Keeping these beliefs in mind is essential in nursing care.

**3. How can you use the information obtained from this article as you become a registered nurse? How will this affect the quality of care you provide? (explain)**

I can use the information obtained from this article as I become a registered nurse because it is important to take patients feelings into consideration and accommodate their personal and cultural beliefs. This will affect the quality of care I provide by improving it as I will fully consider every patient belief and idea. I will make sure I relieve their symptoms to the best of my ability, provide emotional support, encourage and motivate them, build rapport, and have respect for my patients.