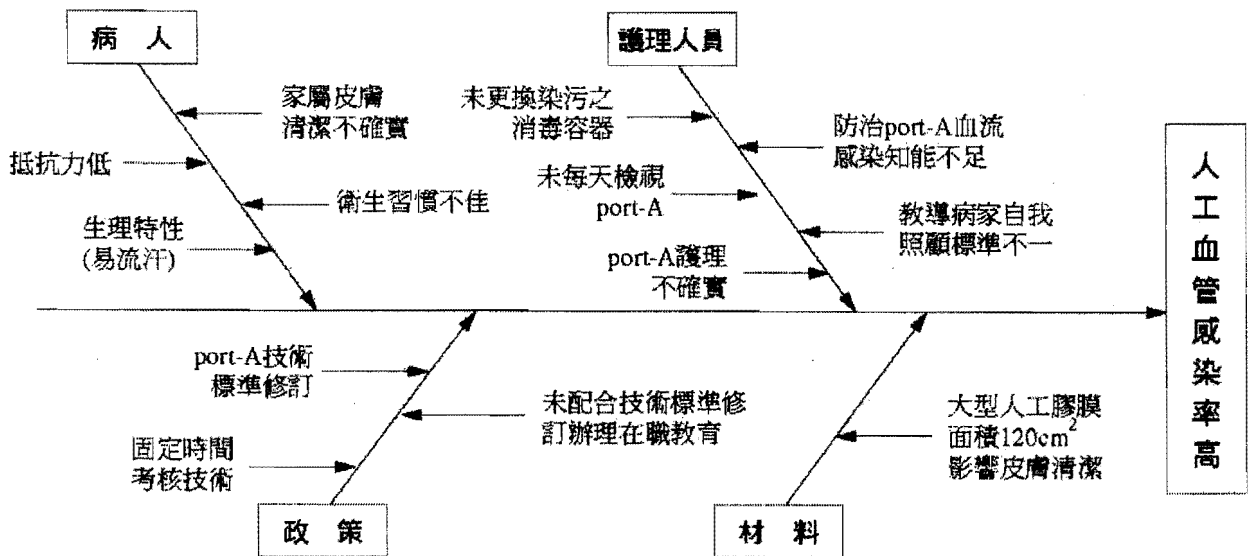一、　　　實證護理為目前臨床積極推動以提昇護理照護品質之概念，請闡述何謂實證護理及運用於臨床護理照護之好處與限制。（30%）

二、　　　為方便血液腫瘤病人進行化學藥物治療，臨床上會植入人工血管（port-A），臨床上該人工血管的感染率可高達 3%~4%。圖一為一研究專案用從改善人工血管血液感染率的特性要因圖，你認為還有那些原因是圖中未呈現的？你覺得要降低 port-A 的感染最有效的方法為何，請說明理由。（30%）

圖一　人工血管血流感染率過高的特性要因圖

陳怡蓉、顏慶雲(2011)‧血液腫瘤病患人工血管照護品質改善專案，護理雜誌，58 (3)，64-75。

(背面仍有題目,請繼續作答)

三、　　以下問題請依照所列的研究回答：

1. 請以中文陳述本研究的目的為何？(10%)
2. 請說明表二統計分析的目的為何？（10%）
3. 依照表二的統計分析內容請說明參與社區的支持團體與未參與者有顯著差異的變項為何？所代表的臨床意義為何？（20%）

Purpose: This study was designed to explore the health status (to measure six physiological indicators), the health related behaviors, and the associated factors among type 2 diabetes sufferers living in rural communities.

Methods: Researchers used a cross-sectional, correlation design and conducted the study at nine local health districts in Chiayi(嘉義) County, Taiwan. A total of 387 participants previously diagnosed with type 2 diabetes were randomly selected and invited to join in the program.

Results: Fifty-nine percent of participants were women; their mean age was 68.7 years, and their mean duration with diabetes was 7.9 years. Most were treated at local health centers and took oral medications (90.7%). More than 40% did not exercise regularly and 33.9% did not practice diet control. Results found a higher percentage of abnormal health indicators in terms of participant body mass index, waist circumference, HbA1C, and peripheral neurovascular function. After controlling for potential confounding factors, researchers found smaller waist circumference, participating in community support groups, better foot self care capability, and frequent exercise to be associated with better health indicators. Diabetes duration, lower education, and being of male gender were found to be negatively associated with health status.

Chen, M. Y., Huang, W. C. ,Peng, Y. S., Jong, M. C., Chen, C. Y., & Lin, H. C. (2011). Health Status and Health-Related Behaviors Among Type 2 Diabetes Community Residents. *Journal of Nursing Research, 19*(1),36-43.

TABLE 2. Health Status and Health-Related Behaviors Associated With CSG

Variable		No		Yes		X^2 (df = 1)	OR	95% CI
		n	%	n	%			
Age (mean, SD)		67.2 (9.8)		70.1		t = -3.08[a]		
Gender	Male	76	47.5	83	52.5	0.43	1.15	0.76-1.72
	Female	116	50.9	112	49.1			
Diabetes (years)	≤8	118	52.7	106	47.3	2.00	1.34	0.89-2.01
	≥9	74	45.4	89	54.6			
WC (cm)[b]	Normal	53	41.1	76	58.9	5.63*	0.60	0.39-0.92
	Abnormal	139	53.9	119	46.1			
MNSI	≤2.5	140	46.5	161	53.5	4.94*	0.58	0.36-0.95
	≥3.0	52	60.0	34	40.0			
SBP	≤130	54	45.0	66	55.0	1.40	0.77	0.50-1.19
	≥131	137	51.3	130	48.7			
DBP	≤85	138	46.3	160	53.7			
	≥86	54	60.7	35	39.3	5.39*	0.57	0.35-0.92
ABPI[c]	≥0.90	160	47.6	176	52.4	3.23	0.57	0.31-1.06
	≤0.89	30	61.2	19	38.8			
Exercise behavior	Regular	100	43.9	128	56.1	7.35**	1.76	1.17-2.65
	Irregular	92	57.5	67	42.5			
Oral care (brush after meal)	Yes	51	39.5	78	60.5	7.86**	1.84	1.20-2.83
	No	141	54.7	117	45.3			
Follow diabetes diet	No	76	58.0	55	42.0	5.59*	1.67	1.09-2.55
	Yes	116	45.3	140	54.7			
Depression score	≤12	149	46.6	171	53.4	6.88**	0.59	0.28-0.84
	≥13	43	64.2	24	35.8			

Note. CSG = community-based support group; OR = odds ratio; CI = confidence interval; WC = waist circumference; MNSI = Michigan Neuropathy Screening Instrument; SBP = systolic blood pressure; DBP = diastolic blood pressure; ABPI = ankle-brachial pressure index.
[a]t(385) = -3.08, p = .002. [b]Normal: male ≤ 89, female ≤ 79; abnormal: male ≥ 90, female ≥ 80. [c]Missing for two cases. *p < .05. **p < .01. ***p < .001.