國立成功大學

110學年度碩士班招生考試試題

編　號：306

系　所：護理學系

科　目：成人護理學

日　期：0203

節　次：第 2 節

備　註：不可使用計算機

※ 考生請注意：本試題不可使用計算機。　請於答案卷(卡)作答，於本試題紙上作答者，不予計分。

一、案例評析與應用(50%)

　　台灣知名前電視主播傅先生罹患胰臟癌末期，癌症浸潤導致週遭組織的神經系統侵犯，整個上腹部疼痛感會向背部呈放射狀散開，與家人情感連結緊密，因疾病所苦，在家人陪同下至瑞士協助自殺尊嚴(Dignitas)組織尋求結束自己的生命。他曾在Facebook專頁上寫到：「因為無法忍受疼痛，貼上強烈的嗎啡止痛貼片，結果因為自身過敏體質無法承受，第二天連吐5小袋綠色膽液，現在每天需要總量160毫升的嗎啡才能減緩疼痛，喝多了站著都睡著、跌倒、嘔吐，喝少了就會疼痛難耐！」，「安寧治療就是這樣折騰死！」，他並傾訴：「其實我很想活，雖然我是安樂死的倡導者」。

1. 根據上則新聞，身為臨床專業護理師，請以病生理學及心理社會學觀點提出你的分析論點？(15%)
2. 請根據您所提出的問題，指出需再評估與收集那些相關資料，以釐清或支持您的分析？(10%)
3. 請評析您所提出之問題，列出其優先順序，並解釋該排序的理由？ (5%)
4. 若您可以為傅先生代言，就臨床照護面，請針對您認為目前最重要的護理問題列出具體目標與護理措施。 (15%)
5. 根據上述問題1-4，您會以哪些關鍵字找尋相關資料，提供以實證為基礎之照護？(5%)

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二、研究評讀與應用(50%)

Measurement of Dynamical Resilience Indicators Improves the Prediction of Recovery Following Hospitalization in Older Adults

ABSTRACT

Objectives: Acute illnesses and subsequent hospital admissions present large health stressors to older adults, after which their recovery is variable. The concept of physical resilience offers opportunities to develop dynamical tools to predict an individual's recovery potential. This study aimed to investigate if dynamical resilience indicators based on repeated physical and mental measurements in acutely hospitalized geriatric patients have added value over single baseline measurements in predicting favorable recovery.

Design: Intensive longitudinal study.

Setting and Participants: 121 patients (aged 84.3 ± 6.2 years, 60% female) admitted to the geriatric ward for acute illness.

Measurements: In addition to preadmission characteristics (frailty, multimorbidity), in-hospital heart rate and physical activity were continuously monitored with a wearable sensor. Momentary well-being (life satisfaction, anxiety, discomfort) was measured by experience sampling 4 times per day. The added value of dynamical indicators of resilience was investigated for predicting recovery at hospital discharge and 3 months later.

Results: 31% of participants satisfied the criteria of good recovery at hospital discharge and 50% after 3 months. A combination of a frailty index, multimorbidity, Clinical Frailty Scale, and or gait speed predicted good recovery reasonably well on the short term [area under the receiver operating characteristic curve (AUC) = 0.79], but only moderately after 3 months (AUC = 0.70). On addition of dynamical resilience indicators, the AUC for predicting good 3-month recovery increased to 0.79 ($P = .03$). Variability in life satisfaction and anxiety during the hospital stay were independent predictors of good 3-month recovery [odds ratio (OR) = 0.24, $P = .01$, and OR = 0.54, $P = .04$, respectively].

Conclusions and Implications: These results highlight that measurements capturing the dynamic functioning of multiple physiological systems have added value in assessing physical resilience in clinical practice, especially those monitoring mental responses. Improved monitoring and prediction of physical resilience could help target intensive treatment options and subsequent geriatric rehabilitation to patients who will most likely benefit from them.

1. 請問研究目的為何？ (5%)
2. 請說明此研究的重要發現為何？ (10%)
3. 請說明您會如何運用此研究結果於臨床實務工作？ (15%)

Table 2
Predictors of Good Hospital and 3-Month Recovery

Variable	Hospital Recovery				3-mo Recovery			
	Univariate Analysis*		Multivariate Analysis (n = 97)		Univariate Analysis*		Multivariate Analysis (n = 96)	
	Odds Ratio	P Value	Odds Ratio	P Value	Odds Ratio	P Value	Odds Ratio	P Value
Baseline single measurements								
Age			1.04	.32	NA[†]	NA[†]	1.05	.29
Female (ref: male)			0.56	.23	NA[†]	NA[†]	2.67	.08
Multimorbidity	0.95	.55			0.81	.04	0.84	.17
ADL functioning	1.38	.002	NA[†]	NA[†]	1.08	.49		
Frailty index	0.01	.002	0.56	.77	0.15	.20		
Health-related quality of life	5.06	.02	NA[†]	NA[†]	1.22	.78		
Personal Wellbeing Index	1.21	.25			1.08	.67		
Resilience Scale	0.97	>.99			1.7	.8		
Clinical Frailty Scale score at admission	0.55	<.001	0.88	.55	0.68	.02	0.79	.24
In-hospital gait speed	9.5	<.001	2.90	.14	1.5	.48		
Dynamic resilience indicators								
Heart rate mean	1.0	.62			0.97	.04	0.98	.10
Physical activity mean	1.15	.01	NA[†]	NA[†]	1.01	.83		
Life satisfaction mean	1.24	.13			1.34	.09		
Anxiety mean	0.93	.18			0.96	.55	1.17	.13
Discomfort mean	0.73	.01	1.09	.63	0.81	.16		
Heart rate SD	1.10	.04	1.10	.11	0.99	.72		
Physical activity SD	11.6	<.001	5.23	.04	2.35	.16		
Life satisfaction SD	0.58	.05			0.20	<.001	0.24	.01
Anxiety SD	0.65	.02	0.87	.57	0.49	.002	0.54	.04
Discomfort SD	0.45	.03	0.45	.12	0.55	.16		

Odds ratios indicate the "risk" of being a member of the good resilience outcome group. Values in bold indicate significance.
*Corrected for age and gender.
[†]Not applicable—left out because of multicollinearity.

4.　依據 Table 2 的結果，如何給予高齡病人住院護理計畫？ (20%)