



# Sociodemographic and clinical profile of maternal and child clientele: a descriptive study

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### **ABSTRACT**

**Aim:** to characterize the sociodemographic and clinical profile of maternal and child clients in federal maternity hospital. **Method:** A descriptive, quantitative study with documentary research in medical records. Data collection occurred from July to December 2015. The research scenario was the rooming of the Maternity School of the Federal University of Rio de Janeiro (ME/UFRJ), located in the city of Rio de Janeiro. **Expected results:** patients with pregnancy in later adulthood, the predominant housing in the south of the city, level of education of at least completed high school and prenatal with number of appropriate consultations and performed in the own study institution or delimited area of coverage, a history of up to two pregnancies and low percentage of abortions, dominant type of cesarean section and high blood pressure and diabetes mellitus, prodromal labor as prevalent diagnosis on admission.

**Descriptors:** Health Profile; Hospitals, Maternity; Maternal-Child Nursing; Pregnant Women; Postpartum Period; Infant, Newborn.

# PROBLEM SITUATION AND IT'S SIGNIFICANCE

Among the development and improvement of many processes that occur in nursing care alone in ME/UFRJ, we identified the need to organize care, train professionals for a systematic and quality assistance, reformulating the nursing care in the institution.

Assuming that the Systematization of Nursing Care (SAE) helps to organize care, making possible the implementation of the nursing process, the implementation of the SAE was defined in the institution as priority to structure nursing care lines (1).

The characterization of the user population of a specific health service is relevant, in that defines priorities of intervention and consequently enables the health care organization. However, in the national literature, there are few recent studies that describe the characteristics of patients admitted to specific services (2).

Other studies related to the epidemiological profile in maternal and child health could not subsidize precisely and practical actions to be implemented during the SAE. In this sense, there was a situational diagnosis of maternal and child clientele served at the institution, to define diagnoses and nursing interventions peculiar to the population served.

The initial hypothesis of the study is that the socio-demographic profile has an influence on clinical data of maternal and child clientele.

## **AIM**

Going to meet with the above, this study aimed to characterize the sociodemographic

and clinical profile of maternal and child clients in a federal maternity school.

#### **METHOD**

This is a descriptive study, with documentary research in medical records, cross-sectional, of a quantitative nature, held in ME / UFRJ. The population was estimated from the data obtained from the medical records of hospitalized patients from January to December 2015 in the rooming unit.

The sample size calculation was obtained for discrete variables using the formula  $n = N.Z2.p. (1-p) / Z2.p. (1-p) + e2. (N-1), where n refers to the calculated sample, N to the population (1610 patients hospitalized in the given period), Z the standard normal variable associated with a confidence level of 95% (1,96), p the true probability of event, in this case 50% (0,5) since it does not have this information, and sampling error of 5% (0.05) (3). 311 records were investigated, number obtained from the following expression: 1610.1,96<math>^2$ .0,5. (1-0,5) / 1,96 $^2$ .0,5. (1-0,5) + 0,05 $^2$ . (1610 -1).

The choice of records sample was for convenience, which was adopted as inclusion criteria: medical records of mothers for over 24 hours in the rooming unit. The study excluded the records of patients hospitalized for abortion due to lack of mother-child binomial information.

The data collection tool presents questions for gathering information regarding demographic characterization (age, gender, area of residence, marital status, literacy) and clinical (diagnostic admission, the current pregnancy data and previous pregnancy history).

The collected data were stored in the Google Docs® form and sent to a spreadsheet

in Microsoft Office Excel 2010® that worked as a database. Will be subjected to a statistical treatment by absolute and relative frequencies, averages and standard deviations. In addition, Fisher and chi-square test will be used (assumed significance level of 5%) of the Statistical Package for Social Science® (SPSS), version 2.0 and discussed based on literature related to the topic. All results will be organized and presented through tables and graphs.

The research was authorized and approved by the Ethics Committee of the ME / UFRJ, under opinion No. 1.165.734, respecting the ethical principles related to research on human subjects according to Resolution 466/2012.

### **EXPECTED RESULTS**

Know and characterize maternal and child clients in the institution in order to establish strategies within the SAE context in order to improve the quality of provided nursing care.

Some preliminary data point to a clientele with pregnancy in later adulthood, with predominant dwelling in the South Zone (high socioeconomic level area in the city), with education level of at least completed high school. As for prenatal care, the data imply that most of the clientele studied presents appropriate number of consultations performed in the own study institution or delimited area coverage. A history of up to two pregnancies and low percentage of abortions with a predominance of cesarean delivery. The presumption of hypertension

and its variations during pregnancy, diabetes mellitus, prodromal or labor were identified as prevalent diagnosis on admission.

#### **REFERENCES**

- Esteves APVS, Almeida VS, Vigo OS, Querido DL, Amim Júnior J, Bornia RBRG. Nursing care systematization in child service care: an action research. Online braz j nurs [internet] 2015 Dec [cited 2016 Aug 30]; 14 (suppl.): 423-6. Available from: http://www.objnursing.uff.br/index.php/nursing/article/view/5315.
- Tiensoli SD, Bonisson, RL, Matozinhos FP, Meléndez GV, Velásquez, FSL. Situational diagnosis: sociodemographic and clinical profile of patients admitted to a clinical medicine unit. Rev Min Enferm 2014 Jul/Sep; 18(3): 579-84.
- 3. Querido DL, Esteves APVS, Almeida VS, Bornia RBRG, Amim Júnior J, Silva RWP. The quality of nursing records at a maternity hospital: a descriptive study. Online braz j nurs [Internet] 2015 Dec [Cited 2016 Sept 29]; 14 (0): 437-9. Available from: http://www.objnursing.uff.br/index.php/nursing/article/view/5366. doi:http://dx.doi.org/10.17665/1676-4285.20155366.

Participation of the authors in the article:

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