

Analysis of Negative Emotions in Outpatients and Advances in Psychological Nursing: Post-print

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Abstract

Outpatients often experience negative emotions throughout the entire medical treatment process, and the role of psychological nursing for such patients is of paramount importance. From the perspective of clinical practice, this article analyzes the function of psychological nursing in regulating negative emotions among outpatients. Due to variations in patients' baseline conditions, encompassing diverse personal experiences, multi-layered social backgrounds, and different educational levels, the characteristics manifested by various types of patients during the outpatient consultation process are entirely distinct. By addressing the negative emotions that arise in outpatients at different stages of their visit through specialized psychological nursing interventions, we can promote psychological stability, enhance the healthcare experience, and improve the overall quality of outpatient nursing services.

Full Text

Preamble

Title: Analysis of Negative Emotions in Outpatient Patients and Advances in Psychological Nursing

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Abstract

Outpatients frequently experience negative emotions throughout the entire medical treatment process, and psychological nursing plays a crucial role in addressing these challenges. From a clinical practice perspective, this article analyzes

the function of psychological nursing in regulating negative emotions among outpatients. Due to variations in patients' fundamental conditions, life experiences, multi-level social backgrounds, and educational attainment, different patient populations exhibit completely distinct characteristics during outpatient treatment. By implementing specialized psychological nursing interventions tailored to the negative emotions that arise at different stages of outpatient care, we can promote psychological stability, enhance the patient experience, and improve the overall quality of outpatient nursing services.

Keywords: outpatient patients; negative emotions; psychological nursing intervention

Introduction

Outpatients exhibit varying degrees of psychological anxiety and depression, with anxiety and irritability being the most prominent manifestations. The accumulation of multiple negative emotions can readily precipitate conflicts during the treatment process, thereby compromising the clinical environment [1]. Negative emotions, also termed adverse emotions, are psychologically defined as anxiety, tension, anger, irritability, frustration, sadness, pain, and emotional lability, with anxiety and irritability being particularly salient. Such emotions represent unconstructive responses that can cause varying degrees of physical and psychological harm. This article reviews the causes and characteristics of different negative emotions in outpatients and discusses the implementation of psychological nursing interventions targeting these emotions at various stages of outpatient care.

1 Main Characteristics of Negative Emotions in Outpatient Patients

The primary manifestations of negative emotions in outpatients include pronounced anxiety, irritability, tension, fear, anger, emotional lability, depression, and pessimism, with anxiety and irritability being the most predominant. Furthermore, the accumulation of multiple negative emotions can readily precipitate conflicts during the treatment process, thereby affecting the therapeutic environment [1].

2 Causes of Negative Emotions

2.1 Causes of Anxiety and Irritability

Due to their physical conditions and resistance to the hospital environment, patients readily develop anxiety and irritability during treatment. Poor emotional states can lead to conflicts with others while waiting, even creating disharmony between patients and medical staff [2]. During treatment, excessive psychological urgency and unrealistic expectations for immediate results, coupled with

an inability to comprehend the actual treatment timeline, make it difficult for patients to accept prolonged recovery periods.

2.2 Causes of Tension and Fear

Unfamiliarity with the environment, medical staff, and diagnostic procedures, combined with uncertainty about one's condition while awaiting test results and the physical suffering caused by illness, readily generate tension and fear. Elderly patients, in particular, are more sensitive about their life expectancy and lack knowledge about their diseases, making them especially vulnerable to these adverse emotions.

2.3 Causes of Anger and Emotional Lability

In outpatient settings, large patient volumes necessitate considerable waiting periods. Based on their already compromised health status, patients urgently desire prompt treatment, fostering anger and negatively impacting subsequent treatment outcomes.

2.4 Causes of Depression and Pessimism

Patients afflicted by disease experience varying degrees of physical discomfort that can affect normal work and life. Those with chronic, recurrent conditions face lengthy treatment cycles and psychological distress, creating substantial pressure. Consequently, patients desperately hope for rapid recovery or even immediate therapeutic effects [3]. When expectations are unmet, they often exhibit depression and pessimism. Additionally, concerns about actual economic conditions, treatment costs, and medication prices contribute to pessimistic moods [4].

3 Psychological Nursing Interventions at Different Stages

3.1 Pre-Consultation Interventions

First, establish an information desk in the outpatient department where senior nurses from various departments provide proactive, enthusiastic service, helping patients identify their condition type and facilitating registration, thereby reducing the probability of negative emotions before consultation [5]. Second, place prominent signage at clinic entrances displaying physicians' personal information to keep patients fully informed about consultation progress, enabling better time management while enhancing trust in doctors and alleviating tension and fear. Third, install televisions in waiting areas to broadcast relevant medical knowledge continuously, which can reduce treatment-related stress, improve anxiety and irritability caused by long waits, and address concerns arising from knowledge deficits. Fourth, create a clean, comfortable waiting environment that is quiet and warm, helping patients maintain a calm, relaxed mindset during waiting periods. Fifth, nurses should intensify patrols to pay adequate

attention to patients in waiting areas, particularly elderly or severely ill patients under substantial psychological pressure, ensuring timely detection and management of any emergent situations [6].

Stratified patient management is simple, efficient, and easy to implement. In clinical practice, this approach has demonstrated positive significance for cancer outpatient chemotherapy patients, can significantly improve negative emotions in outpatients, and warrants broader clinical promotion.

3.2 During-Consultation Interventions

During consultation, patients require high-level attention. As most patients find themselves in unfamiliar environments while dealing with illness, they are prone to feelings of helplessness and loneliness, inevitably experiencing extreme anxiety. Under these circumstances, medical staff must demonstrate deep concern, using warm language to allay patients' fears about their conditions and helping them feel genuine care and consideration, thereby improving their tension [7]. Additionally, staff should respect the emotions of patients with special conditions, provide clear explanations of new diagnostic and treatment measures to dispel concerns, and ensure patients feel secure during treatment [8]. Medical personnel should also patiently explain the significance and function of various examinations to reduce unfamiliarity with the disease process and enhance subsequent treatment outcomes. When addressing patient inquiries, maintain effective communication and provide professional answers to foster trust [9].

For patients with milder negative emotions, encourage active self-regulation through meditation, deep breathing, music listening, reading, and other psychological adjustment methods [10]. For those with more severe negative emotions, increase communication while using kind language, smiling expressions, and courteous terminology. Listen patiently to their inner appeals to comprehensively understand their psychological and physiological needs, identify causes of negative emotions, seize appropriate communication opportunities, and guide family members to participate in psychological interventions alongside nurses [11].

3.3 Post-Consultation Interventions

As patients have different conditions, medical staff should provide appropriate psychological guidance based on individual circumstances. Supportive psychotherapy can correct patients' inappropriate cognitions through counseling, support, encouragement, and comfort while guiding them in active treatment and relaxation training, which can reduce sympathetic nervous system excitability and effectively improve adverse emotions. Research indicates that rhythmic music has immediate and fluctuating effects on individuals' spiritual and emotional states, effectively adjusting respiratory frequency and blood circulation to maintain relatively stable endocrine levels [12]. Additionally, music can effectively divert attention from examination results and procedures, thereby reduc-

ing negative reactions during waiting periods [13]. Studies have also shown that background music therapy can effectively alleviate patients' negative emotions, stabilize heart rate, blood pressure, and respiratory frequency, and help them face post-consultation examinations and treatments calmly, making it worthy of broader application [14].

4 Conclusion

With the transformation of modern nursing models, outpatient nursing services have expanded beyond mere consultation and reception to focus increasingly on patients' psychological state changes. By providing guidance and encouragement tailored to patients' specific negative emotions and psychological needs, psychological nursing can be organically integrated into high-quality outpatient care, meeting patients' diverse needs, enhancing their experience of quality nursing services, and improving overall outpatient nursing standards.

Effective psychological nursing interventions for outpatients can reduce psychological anxiety and depression. Such interventions have significant positive effects on patients' emotional changes, ensuring they feel comfortable and reassured during outpatient care, developing high levels of trust in the medical process, promoting harmonious relationships between medical staff and patients, establishing a positive hospital image, safeguarding rehabilitation outcomes, and facilitating comprehensive physical and mental health development. Overall, focusing on patients' psychological and emotional changes during outpatient treatment, analyzing the positive impacts of psychological nursing interventions from a clinical perspective, developing feasible implementation plans, and realizing their concrete value can effectively solve practical problems for all types of patients, create diversified coping mechanisms, address shared concerns of doctors and patients, and promote the healthy development of the medical industry.

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