



RESEARCH

# Experience of the nursing professional in his relationship with the student during clinical practice

Experiencia del profesional de enfermería en su relación con el estudiante durante su práctica clínica

Experiência do profissional de enfermagem em sua relação com o aluno durante a prática clínica

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#### **Abstract**

**Introduction:** The interaction between the nursing students and the clinical nurses in the practice place influences their learning process, generating possibilities, mental models that will very likely be replicated once the students graduate. **Objective:** Understand the experience of the nursing professional and their relationship with the student during their medical practice. **Methodology:** Qualitative phenomenological study using snowball sampling, until reaching data saturation. Data collection throughout non-structured in-depth interviews; the interviews were recorded and literally transcribed for analysis. **Results:** 19 Nurses participated (4 men and 15 women) which were identified into two categories: currently-around and coexisting with the students. **Conclusions:** The Nursing professional considered that the students should understand and work in a collaborative manner in order to take advantage of their experience and knowledge, prevent crushing remarks, as well as respect individuality. A Good relationship between the students and clinical nurses could lead to a more beneficial practice.

Key Words: Nursing Personnel within Hospitals; Education in Nursing; Nursing practice (DeCS).

#### Resumen

**Introducción:** La interacción de los estudiantes de enfermería con los enfermeros clínicos en su lugar de práctica influye en su proceso de aprendizaje, generando posibles modelos mentales de atención que muy probablemente serán replicados cuando los estudiantes egresen. **Objetivo:** Comprender la experiencia del profesional de enfermería en su relación con el estudiante durante su práctica clínica. **Metodología:** Estudio cualitativo fenomenológico, con muestreo por bola de nieve, hasta llegar a saturación de datos. Colecta de datos mediante entrevista no estructurada a profundidad, las entrevistas fueron grabadas y transcritas literalmente para el análisis. **Resultados:** Participaron 19 enfermeros (4 hombres y 15 mujeres) y se identificaron dos categorías: estar-con y coexistiendo con los estudiantes. **Conclusiones:** El profesional de enfermería considera que los estudiantes deben comprender y trabajar de manera colaborativa para aprovechar su experiencia y conocimientos, evitar las criticas destructivas, así como respetar la individualidad. Una buena relación entre estudiantes y enfermeros clínicos podría llevar a un mejor aprovechamiento de la práctica.

Palabras clave: Personal de Enfermería en Hospital; Educación en Enfermería; Enfermería práctica (DeCS).

#### **Abstrato**

Introdução: A interação dos estudantes de enfermagem com os enfermeiros assistenciais no local de prática influencia seu processo de aprendizagem, gerando possíveis modelos mentais de cuidado que provavelmente serão reproduzidos quando os estudantes se formarem. **Objetivo:** Compreender a vivência do profissional de enfermagem na sua relação com o aluno durante a sua prática clínica. **Metodologia:** Estudo qualitativo fenomenológico, com amostragem intencional, até a saturação dos dados. Coleta de dados por meio de entrevista não estruturada em profundidade, as entrevistas foram gravadas e transcritas literalmente para análise. **Resultados:** 19 participantes (4 homens e 15 mulheres); foram identificadas duas categorias: "Estar-com" e "coexistiendo" com os alunos. **Conclusões:** O profissional de enfermagem acredita que o aluno deve compreender e trabalhar de forma colaborativa para aproveitar sua experiência e conhecimento, evitar as críticas destrutivas, além de respeitar a individualidade. Um bom relacionamento entre alunos e enfermeiras clínicas pode levar ao melhor uso da prática.

Palavras-chave: Pessoal de Saúde; Educação em Saúde; Enfermagem Prática (DeCS).



#### Introduction

Within the professional development of nursing, you can find the theoretical-practical combination immersed, which is aligned throughout the development of promotional, prevention and recovery activities pertaining to health performed throughout the guidance of the professor, developing skills, abilities and living experiences which back up the learning of future professionals<sup>(1)</sup>. In this sense, the clinical practice is extremely important in the training process of future nurses.

The connection between health institutions and education is of a great importance for the teaching of Nursing, given that the learning process requires clinical professionals in the place of practice<sup>(2-3)</sup>. Within the health institutions where students perform their practice, they observe and learn from the existing practice between Professors and Professional Nurses with people they are currently caring for, reason why it is expected that throughout their support, the Students will develop professional qualities showing the correct manner of practicing a Profession in a responsible and Scientific manner in regards to the persons being cared for, nonetheless, the learning process within modern Nursing, in some cases is centered on the application of Technical and procedural elements evaluated step by step<sup>(4)</sup>.

Within the didactic-learning process, three actors are involved: the Student, the Professor and the Clinical Nurse<sup>(3)</sup>, therefore, the hospital scenery where the teaching of the students is the ideal place for the application of the epistemological elements that are founded on the science and humanism of care giving<sup>(5)</sup>, reason why the nurse providing care can influence and reinforce the essential elements of the art of caregiving within the teaching and education of new professionals, disconnecting the ideal practice with what is really used in health institutions.

The reason for this present investigation is based on knowledge that can be generated from the experience of Nurses in regards to the student throughout the clinical practice, so that in the future, strategies can be generated so that the clinical nurse can improve the learning of the nursing students and take greater advantage of the practice.

Based on the previously mentioned items, phenomenology was used as an investigative tool, which could give interpretative space to the phenomenon being studied, in order to apply the objective of understanding the combination of experiences lived, circumscribing the meaning that these realities have for the subjects involved, trying to comprehend and not explain<sup>(6-7)</sup>. Throughout theoretical and thematic adjustment, organizing expectations and speculations within the student and specific role with which clinical nurses comply with; the investigative phase is aimed at the clinical nurse.

Understand the quality teaching within the clinical practice from a perspective of the student will be very useful in the offering of better educational experiences, therefore, it is necessary to understand how this experience is acquired and what the teaching of caregiving leaves in students<sup>(8)</sup>.

For this case, the experience of clinical nurses was searched for in regards to students within the clinical field, which means, how the integral course of discernment is given and the level of effectiveness between subjects, understanding the combination of experience acquired for the subjects involved.

Therefore, there are other emerging interrogative factors: How does the clinical nurse react upon receiving studies during the last hours of their shift? Does the clinical nurse feel that being responsible for students is a burden? How is the relationship with the student during the practice time?

# **Objective**

Comprehend the professional Nursing experience in regards to the student during clinical practice.

## Methodology

Qualitative and descriptive study of phenomenological nature; the phenomenon of the study is the experience of the clinical nurses in regard to the nursing students during their practice; phenomenology as an educational tool, allows them to understand their role as educators, in such a manner that they could take into account different situations that are found outside of the school environment, but, that are important within the didactic-learning process of future professionals<sup>(9)</sup>.

The characteristics of the participants were defined as: male nurses and females that work in second level care institutions with three years of work experience within that same institution (the health care institutions that have clinical nurses with greater experience is where they are allowed to practice.

The information was recollected in the beginning and the end of the academic term within the months of March to August of 2018. The sampling was developed throughout the use of the snowball technique, looking for nurses with exclusive clinical practice within a specialized hospital, within the littoral region, due to having a constant flow of students that come from several nursing schools in Ecuador.

Nineteen (19) participants were included, the semi structured interview was employed as a method to gather information; it was performed in an individual manner and recorded by audio with previous authorization of the participants to be used for later interpretation. Prior to the interview, the orientation was performed in regard to the global aspects of investigations, reflecting the phenomenological foundation of the interview, whose clarification allowed no to induce answers, the interviews were performed in an academic space within the health institution, in a time space provided by the nurses, which generally was after performing their priority activities of their shift providing patient care.



The triggering question that helps the participants to be able to develop their presentations was: What experience have you acquired, throughout your career in clinical practice that you should share with nursing students? The analysis of the data of the present study was performed manually, eliminating the categories according to the repetitive elements found within interviews, this assessment was performed in collaboration with investigators from Ecuador and México.

The following research counts with the approval of the bio ethics committee with registry number ADOr001-V6.

## **Results**

Nineteen (19) participants were included, (5 men and 14 women); table 1 shows the most noticeable sociodemographic data. Of the assessment performed, 2 categories emerged, which are described hereunder:

Table 1. Socio-demographic data of the participants

Participant	Age	Gender	Experience	Marital Status
N1	34 years	Female	7 years	Single
N2	35 years	Female	9 years	Single
N3	29 years	Female	6 years	Common Law
N4	30 years	Female	5 years	Common Law
N5	44 years	Female	15 years	Single
N6	46 years	Female	14 years	Single
N7	29 years	Masculine	3 years	Married
N8	41 years	Female	11 years	Single
N9	26 years	Female	4 years	Common Law
N10	30 years	Female	6 years	Married
N11	28 years	Female	7 years	Married
N12	45 years	Female	13 years	Married
N13	52 years	Female	20 years	Widowed
N14	54 years	Masculine	21 years	Divorced
N15	52 years	Female	19 years	Married
N16	44 years	Female	10 years	Married
N17	33 years	Masculine	9 years	Single
N18	29 years	Masculine	5 years	Common Law
N19	29 years	Masculine	13 years	Married

Source: Own development.

#### Category 1: Currently- around, in regards to the students

The nursing relationship – the student is characterized for having a rational perspective in complex environments, within which there exists an interexchange of knowledge, autodidactic learning, and reflection of the meaning of



certain phenomenon and what leads to such effects. Many clinical nurses assume the role of an instructor during practice with the students without having any type of relationship with the educational institution, perhaps due to vocation, being able to develop skills for the teaching of nursing when being able to reach and establish a relationship of empathy with the students:

N1: "...assumption of knowledge acquired, sharing with students while I finish my work shift". "we share our experience acquired on a daily basis with the student and they put it into play...".

N4: "...the opportunity of being – with, allows me to learn and teach..."

N3: "...we learn together, because we have a cordial relationship ...".

The nurses and the students during the phase of "being-with" show empathy and worry about the development of skills within clinical practice. But, this does not succeed with all of the nursing personnel who work in the health institution and have students assigned, given the fact that some narrations state that some of them do not have a natural ability for teaching.

N3: "... my colleagues, the ones that forget their student phase..."

N7: "...when students are humiliated, I put myself in their shoes..."

N9 "...you need to have certain skill in order to know how to treat students..."

Several nurses explain that not all of them can teach, but they do not exclude themselves and continue helping the students in regards to how to act and what to do throughout the activities.

N3:" I do what I can, I am no expert teaching, but I like to share what I can with the newer generations... I remember what it was like to not have someone to teach me, but, also, my responsibility is with the hospital and not the university."

N4:"I do not like being a teacher, but when asked to by the students, I explain as much as I can to them."

Positive and negative experiences can be attained, those that verbally express that teaching activities in areas where patients are cared for is difficult, since this activity is not wanted by the nurses, however, it is not imposed either, but they do it as gratitude to the education they received.

## Category 2: Co-existing with students

Coexistence personifies each one individually, when common aspects of daily living participate, all in the same time, location and space. Pragmatic channels of communication are established, conditioned to verbal expressions, written or copied, in similar or analogical situations.



N4: "for me personally, coexistence exists in an irrational manner..., when the students arrive, we are already prepared or conditioned that they will be conflictive, that's why the dominant part is expressed."

N7: "ignite attention action for students, which implies that we are going to confront conflicts..., I sometimes prefer that those activities are not assigned to them, therefore, cancelling out the act of coinciding, I do not like it, sometimes they think they are on our level."

N5: "I express to them previously, if they want to stay on good terms with me, ask everything, that way we avoid conflict and are able to coexist, continuous improvement."

The declarations declare that co-existence exists in a rational manner, due to the fact that it is mentally established that as soon as the students arrive, so do the problems and that is the reason why there exists a dominant relationship on behalf of the nursing professional provided by hospital service; only in this manner, can some of the nurses co-exist with the students.

On the other hand, during the interview, there were some elements remembered of when they were once students and recalled the co-existence lived between them and those that were clinical nurses at that time, manifesting being a bad relationship and a bad example for them at that moment:

N5: "I will always remember..., because it shows that the specific person mentioned has never been a student, due to the fact that the specific person minimizes us, thinking to be better than the rest of us, forgetting to once be a student, pretending to be born a graduate in nursing.

6: "when I was an intern, I stuck close to the most accessible nurses, and I copied there way of guiding me, now I apply that same manner of guidance to young students that arrive in my presence."

N7: "when I approached the professors, I tried to ask them for permission to do more complex nursing procedures, several allowed me, others did not, and that is why I copied those examples of allowing student to act alone, I made several questions to be sure that the student has knowledge of the theoretical part to be able to put it into play."

For example, it is not planned to pass up on the students' faults, cover them up or always give them a smiling face, but provide them knowledge and experience kindly; the student should be actively receptive in order to assume and assimilate the education given that will later be applied within their career, providing quality care and empathy while returning to other students that were received by other peers, so some information given agrees with the foregoing:

N6: "I used to take notes in a little book, the good things and the bad things of each nurse, and I used to reflect at home and think about the future, eliminating the improper actions, according to my criteria at least, I used to choose what I wanted to be and, well, today I am a respected and well liked nurse by all of those who know me."

N6: "I have never wanted to be a professor, because my profession is to give direct attention to the patient, I feel like a teacher, within my daily practice I always have "my students", we exchange science and practice, and they also teach me."

N7: "for my criteria, being a professor, is a high degree, I used to look at my professors and say, I will not be a professor because my patience is limited. Therefore, I was born to be a nurse that is my calling, to die happy, so that others continue living."

#### **Discussion**

Based on the acquired results, we can understand that, assuming the specific work-related competencies (given the fact that none of them have a specific mandatory work related to the students), means that the clinical nurses wish to disconnect relational conjectures and deeply commit to a dynamic process in benefit of the growth of the professional future in nursing.

In a study performed in Chile <sup>(8)</sup> and another on in Nueva Granada España <sup>(9)</sup>, regarding how the nurses are involved in clinical areas and the dynamic relationship of the training process of new professionals, it is shown that there exists pre-disposition due to several factors, the reaction is to contain such action affirming the work load and feeling that work related conflicts can be created, because clinical nurses do not have work-related Independence with the universities. Implicit responsibility of teaching the subject is in great measure the exceptional part and ability to transmit knowledge. IN both studies, the inadvertent recognition of knowledge is coincided upon in regard to the institution where they work which impedes expansion upon receiving and training students<sup>(8,9)</sup>.

Another aspect, shown in the relationship pertaining to "currently- around", is the physical and mental tiredness that can be generated upon working and having students, due to the fact that the direct attention and administrative phases added to the activity with the students can create exhaustion spheres. Within clinical areas, tension causes other challenges, alternating other interpersonal relationships and being Abel to generate inequality within the clinical nurses and the treatment of students.

Becoming responsible of the students is a voluntary role of the clinical nurses, that requires personal skills (technical and emotional competencies) and an adequate behavior on their behalf, besides the service with the hospital itself<sup>(11)</sup>; adding professional competencies to clinical services which implies caring for life, being able to suggest situations that are interpreted in an incorrect manner, for example, the intention of ignoring students during their practice.



The agreements between the academy and health areas, offer opportunities for the students and support for the institutions, but, the investigation suggests to implement upgrade courses and teach clinical tutoring to professors that supervise the practice, in order to implement strategies that impact in the companionship and personalized tutoring for the nursing students within clinical spaces and implement it as a daily reflective instrument within clinical practices so that critical thinking is developed within the student. The daily clinical practices allow for the storage of what was observed being in an organized manner, strengthening the development of strategies to prioritize what is worth noting<sup>(12)</sup>.

Improving the role of tutors or in this case of the clinical nurses, throughout education aimed at the use of skills, abilities and experiences separating from them from the purely repetitive model which lacks reflection could push the students to be able to finish their academic preparation successfully.

Verbal and non-verbal communication is basic in learning, promoting collaborative group study providing the opportunity to participate in learning, in the same manner, should assume the responsibility of developing and implementing learning strategies according to the needs of each tutor, evaluating their effectiveness<sup>(13)</sup>.

Moreover, nurses ask themselves and question the teaching practice, considering the work they perform, in the sense of creating conscience, in regards to training, experience and a range of knowledge that should be possessed. The security of the know how in the practice units, that was made by the students, it is the point of interest, therefore, will it be the recent graduates that have the capacity to serve as tutors? Can it be really said and experience nervousness, due to the poor sense of objective reality of the total preparation that a university level professor should possess.

Within the declarations, there is a rational form of coexistence declared, giving a negative definition of students that is basically synonym to problems, founded on a dominant relationship on behalf of the professional nurse providing hospital care; only in this manner, can some of the nurses co-exist with the students, positioning the student as the "present being" that needs excellent preparation in some practice places for health care, requires modification of such definitions given to the students.

The teaching relationship between the student and the nurse is established and it plays an important role in clinical training, developing, clinical reasoning and skills, elaboration of the definition of care, strengthening the relational and ethical qualities as well as the reflections in regards to care within clinical situations<sup>(15)</sup>.

Additionally, the impact of the relationship between the nursing personnel and the students is reflected within the changing experiences exposed in the interview, establishing an empathetic relationship within the workforce of similar experiences, perceiving and interchanging experiences lived and feelings that overwhelm those that are still under training within the clinical practice of nursing. This can also be shown in an investigation performed within



Peru, which indicates that the nursing students expressed that the clinical nurses do not always leave a good example as role models<sup>(16)</sup>.

The nursing professionals who have the opportunity of "being with" the new generations of students and sharing with them their clinical experience, are conscious and constantly reflect upon it mentioning it in interviews, if each and every one of the students have Good or bad memories implanted in them when they were students; at the same time, the nurses "are" and the students "are", giving judgment from the individual perspective due to fear, sometimes, or teaching out of obligation.

In a similar study performed in Mexico, it was shown that the students should be attended, respected and helped in an unconditional manner, without anticipating their performance, considering that a large part of learning is generated within the clinical area, suggesting to assist the student at all moments, in order to allow the development and growth in all of the spheres of the didactic-learning process, adapting behavior for professional development within technical and scientific environments but also human, labeling education from the good living standards, in the role of being an excellent citizen, with results orientated towards social aspects that are existential and reliable towards the condition of offering care quality-human-scientific care<sup>(17)</sup>.

According to Zavala Olalde<sup>(18)</sup>, "the indivisible human is unique and responsible of his own actions, searching for solutions at their own convenience, that nobody modifies or interferes in his/her experiences". The current nursing programs within the country comply with the norms stipulated by the organisms that oversee Higher Education in Ecuador and search for areas of hospital or community practice, that make it easy for students to comply with the integration dynamic involved in health care and the interrelation with the patient, relatives and other people that are members of the health care team<sup>(19)</sup>.

## **Conclusions**

From the experience of clinical practice, the nursing professional considers that the students should understand and work in a collaborative manner in order to take advantage of their knowledge, avoid destructive criticism, in regards to temperament, behavior and character as well as respect individuality.

Conclusion is highlighted in the sense of cooperation between nurses and students, to discover the phenomenological origin that repetitively arrives and disappears such as an indistinct vicious circle.

The nursing study plans developed in the country should analyze the possibility of clarifying the minimum curricular contents to improve the development of the human being, the professional activities and the know-how, focusing on removing negative environments allowing the selection of significant learning throughout dialogue and discussion with the purpose of shape education styles towards professional goals.



The clinical experience is a very important process in the training of professional nurses, within which nursing and/or clinical nursing have a fundamental role; therefore, their experience should be recognized in order to discover what professionals have the competencies and vocation to teach, which could be strength learning when there is not a professor present all the time.

Clinical nurses, the professor and the students play a fundamental role in the training process of the future professional. Therefore, the relationships established in this process will be very useful in providing professional tools for the students.

#### **Conflicts of interest**

The authors state they have no conflicts of interest.

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