

Biomedical model of care in nursing

In the biomedical model, nursing aims at complete recovery. If this goal cannot be met, we see the process as a failure. The usual procedure is a complete work routine, while the patient is supposed to adapt to our regimen. The model approaches the patient impersonally, the patient is taken as a diagnosis. The standards represent exactly the given procedure, we fill medical offices and only then attend to the patient. Performances are prioritized over psychological support of the patient, we deal with the psychological side only if there is time left. Emphasis is placed on personal cleanliness and environmental hygiene. The nurse's work is not based on the needs of the patient. Care is therefore on the same basis as with doctors, but at a different level. The biomedical model highly values healing, good technical skills and backgrounds. A hierarchy of nurses is given and strictly followed. The goal of the biomedical model of nursing is therefore:

- restoration of homeostasis,
- exclusion of disease and adjustment of condition,
- delaying death.

Benefits of the Biomedical Model

- is well developed,
- is guided by the main desire of the sick person, namely the desire to get well, or stabilize

disease,

- is based on evidence Evidence-based nursing is indisputable and objective,
- a doctor is responsible for health care (the benefit is questionable here, see below),
- has a long tradition, which indicates a certain usefulness.

Disadvantages of the biomedical model

- This model is contrary to the philosophy of nursing, it is focused on the sick "part of the patient", i.e. it is contrary to the holistic conception of a person.
- The patient is referred to as a case, a diagnosis, not as a personality with his own needs.

Thus, less objectively assessable psychosocial problems may remain unnoticed.

- The doctor has the main responsibility, other medical staff less so. Therefore, the nurse may not have the effort to take better care of the patient, she does not have the motivation to further her education.
- The patient does not receive treatment alternatives, does not receive enough information and is in a submissive position.

This model was used very often until recently. It is a functional model where each health worker has his own actions and adheres to them. Saving life, the fastest possible cure, relief, good technical knowledge and modern technology are paramount. Man is not taken as a personality with his bio-psycho-social needs, but as a biological individual from cells and organ systems where homeostasis has failed.

In the 70s of the last century, the attention paid to the sick person, as a person for whom it is strongly undignified, if he only becomes the subject of exact science, increased significantly. When a person becomes ill, his life, experiences, opinions and values are suddenly underestimated. Following the development of sociology and other humanities, the biomedical model was supplemented by:

- a sociological model that perceives the social roles of personality,
- a humanitarian model, raising the moral and free side of human existence,
- behavioral model, respecting the importance of people's behavior for their health and trying to use the findings not only to improve health, but also to increase the quality of life.