

# Experiences Regarding the First Year Nursing Students' Initial Clinical Practice: A Qualitative Study

## Hemşirelik Birinci Sınıf Öğrencilerinin İlk Klinik Deneyiminde Yaşananlar: Nitel Bir Çalışma

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**ABSTRACT Objective:** The research was carried out to determine the experiences of first year nursing students in their first clinical practices. **Material and Methods:** The study was carried out in the spring term of 2019-2020 using the phenomenology pattern, which is among the qualitative research methods. The population of the study consisted of the students enrolled in the first year of the nursing department of Çankırı Karatekin University. With the purposeful sampling method from the universe, 20 students who comply with the inclusion criteria and who agreed to participate in the study formed the sample of the study. Necessary permissions were obtained before starting the work. Interviews with the "Semi-structured Interview Form", which was used in the collection of the research data, took an average of 30-45 minutes. The program MAXQDA was used in the analysis of the data. **Results:** Of the 20 students participating in the research; 5 of them were men, 15 of them were women and the average age of the participants were 19.3. It was determined that the students measured mostly vital signs and communicated with the patient in their first clinical application, while they faced many problems such as the fear of harming the patient, the patients' aggressive attitude and denying the application, and the patients' desire to seek help from the nurses. It was found that nurses approached the students as a teacher within a context of positive attitude and some of them were indifferent towards the students within a context of negative attitude. **Conclusion:** As a result of the study; it is recommended to support laboratory practices with different methods; in order to increase the support of nurses towards students in clinical education and to provide cooperation between schools and hospitals.

**Keywords:** Nursing students; clinical experience; qualitative research

**ÖZET Amaç:** Araştırma hemşirelik 1. sınıf öğrencilerinin ilk klinik uygulama deneyimlerinde yaşananların belirlenmesi amacıyla yapılmıştır. **Gereç ve Yöntemler:** Çalışma, nitel araştırma yöntemleri içerisinde yer alan fenomenoloji deseni kullanılarak 2019 ve 2020 bahar döneminde gerçekleştirilmiştir. Araştırmanın evrenini Çankırı Karatekin Üniversitesi hemşirelik bölümü 1. sınıfına kayıtlı olan öğrenciler oluşturmuştur. Evren içerisinde amaçlı örnekleme yöntemiyle, çalışmaya alınma ölçütüne uygun ve araştırmaya katılmayı kabul eden 20 öğrenci çalışmanın örneklemini oluşturmuştur. Çalışmaya başlamadan önce gerekli izinler alınmıştır. Araştırma verilerinin toplanmasında "Yarı Yapılandırılmış Görüşme Formu" ile yapılan görüşmeler ortalama 30-45 dk sürmüştür. Verilerin analizinde, MAXQDA programından faydalanılmıştır. **Bulgular:** Araştırmaya katılan 20 öğrencinin; 5'i erkek, 15'i kadın ve yaş ortalamaları 19,3'tür. Öğrencilerin ilk klinik uygulamada daha çok yaşamsal bulguları ölçtükleri ve hastayla iletişime geçtikleri, hastaya zarar verme korkusu, hastaların agresif tutumu ve uygulama yaptırmak istememeleri gibi birçok sorunla karşılaştıkları ve daha çok hemşirelerden yardım istedikleri belirlenmiştir. Hemşirelerin öğrencilere sıklıkla pozitif tutum kapsamında öğretici yaklaştığı, bazılarının ise negatif tutum kapsamında ilgisiz davrandığı bulunmuştur. **Sonuç:** Çalışmanın sonucunda; laboratuvar uygulamalarının farklı yöntemlerle desteklenmesi, hemşirelerin klinik öğretimde öğrencilere desteğinin artırılması ve okul hastane iş birliğinin sağlanması önerilmektedir.

**Anahtar Kelimeler:** Hemşirelik öğrencileri; klinik deneyim; nitel araştırma

Nursing education is a planned education program consisting of theoretical and clinical education. Clinical education in this training program; has an important place in improving students' critical thinking, problem

solving, decision making, analysis, synthesis, communication and management skills, providing a lifelong learning framework, monitoring the patient's clinical picture and increasing professional self-confidence.<sup>1,2</sup>

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Clinical education, which has important effects on the professional development of students in nursing education, is carried out in a clinical environment, which is a complex and dynamic learning environment. In addition to its many advantages, the clinical environment can be stressful, unpredictable, and difficult for the student.<sup>3</sup> Conditions such as lack of clinical experience, difficulty regarding the adaptation to the hospital, unknown environment, difficult patients, the risk of making mistakes, the fear of harming the patient, the fear of being evaluated by the instructor, cases of communication disorders with patients, patient relatives and hospital staff cause stress in the clinical environment. Such situations that cause stress generally occur in first year nursing students.<sup>4,5</sup>

On the other hand, the number of students are high, while the number of educators is low, the number of patients per student is insufficient, the patients do not want to have their own care and treatment practices, the clinical nurses do not provide sufficient support to the students, the information that students learn theoretically and the information used in the field of application not being compatible with each other and giving off-duty responsibilities to students negatively affect clinical education.<sup>6,7</sup>

Such problems experienced by students in the clinical learning environment may lead to a lack of individual confidence in providing nursing care and a decision to abandon the profession in the future. Evaluating the problems experienced through the eyes of the students and developing effective solutions for these problems are very important in terms of improving the quality of clinical education.<sup>2,4</sup>

The research was carried out to determine what happened in the first clinical experience of first year nursing students. When the studies on the subject were examined, it was seen that the research sample consisted mostly of intern or new graduate nurse groups. There are a limited number of studies in which students express their experiences in clinical practice.<sup>7-9</sup> Therefore, the research is an original study with a different sample group. It is thought that the data obtained from the study will contribute to the literature.

## MATERIAL AND METHODS

### STUDY DESIGN

The research is a qualitative study carried out with a phenomenology pattern in order to determine the first clinical experiences of the first year nursing students.

### PARTICIPANTS

The universe of the research was composed of students enrolled in the first year of the nursing department of Çankırı Karatekin University in the spring term of 2019-2020. The nursing students who constitute the universe received theoretical and clinical education within the scope of Nursing Fundamentals. In the research, purposeful sampling method was used in accordance with the qualitative research method. This sampling method is the inclusion of individuals who are eligible for the research problem. In this context, 20 students who agreed to participate in the study formed the sample of the study. Within the scope of the lesson they took, the students forming the sample carried out their clinical practices in the inpatient units of a hospital affiliated to the Ministry of Health once a week. Participation was provided on a voluntary basis, and students who accepted to participate in the study were informed about the study and permission was obtained with the informed volunteer consent form.

### The exclusion criteria regarding the sample:

In terms of experiencing the first clinical application;

- Nursing students graduated from health vocational high school who have previously experienced clinical practice,
- Students who fail the first class Nursing Fundamentals lesson and retake the course are excluded from the study.

### DATA COLLECTION

“Semi-structured Interview Form” created by the researcher by scanning the literature was used to collect the data in the research.<sup>2-4,6</sup> After the first clinical experience in the first week of March, the interviews were conducted in about a week on days and hours when students’ lesson intensity was low. Each inter-

view was completed in approximately 30-45 minutes.

### STATISTICAL ANALYSIS

In the analysis of data, the MAXQDA program, which is a qualitative analysis program, was also used. A list of codes from the determined codes and themes that describe these codes under similar categories were created. Examples of students' answers to the questions about the content of thematic coding were given.

### ETHICAL ASPECT OF THE RESEARCH

Permission was obtained from the Ethics Committee of Çankırı Karatekin University (27.02.2020, Decision no: 2020/193) before starting the research. Information about the research was given to the school administration where the study was conducted. Participation was provided on a voluntary basis, and students who accepted to participate in the study were informed about the study and permission was obtained with the informed volunteer consent form. The study was conducted in accordance with the Helsinki Declaration principles.

### VALIDITY AND RELIABILITY OF THE STUDY

In qualitative research, the concept of "credibility" is taken into consideration instead of the concepts of validity and reliability.<sup>10</sup> All student statements were recorded during the data collection phase. In the process of organizing data, creating code lists, analyzing data and interpreting the findings, the researcher conducted a comprehensive literature review and all the stages were explained in full detail.

### RESULTS

Of the 20 nursing first year students who participated in the study, 5 were male (25%), 15 were female (75%), the average age was 19.3 and 85% stayed in the dormitory. Of the students 50% chose the nursing department due to the opportunity to find an easy job and 65% loved their department. According to the interview order, the participants were coded as "P" (Table 1).

When the first clinical application experiences of the students were analyzed, 9 codes were created from the data obtained. The names of the codes and

**TABLE 1:** Demographic features of the participants.

Participants	Gender	Age	Place of Residence	Reason for Choosing Nursing Department	Liking the Nursing Department
P1	Female	20	With her family	Easy job finding opportunity	Yes
P2	Female	19	At the student dormitory	By family request	No
P3	Female	18	At the student dormitory	Easy job finding opportunity	Yes
P4	Male	19	At the student dormitory	Voluntarily	Yes
P5	Male	19	At the student dormitory	Voluntarily	Yes
P6	Female	18	At the student dormitory	Voluntarily	Yes
P7	Male	19	At the student dormitory	Because the score is enough	No
P8	Female	21	At the student dormitory	Voluntarily	Yes
P9	Female	19	At the student dormitory	Easy job finding opportunity	Yes
P10	Female	19	At the student dormitory	Voluntarily	Yes
P11	Female	18	At the student dormitory	Easy job finding opportunity	Yes
P12	Male	19	With friend	Because the score is enough	No
P13	Female	21	At the student dormitory	Easy job finding opportunity	No
P14	Female	21	At the student dormitory	Easy job finding opportunity	Yes
P15	Female	19	At the student dormitory	Easy job finding opportunity	No
P16	Female	19	At the student dormitory	Easy job finding opportunity	Yes
P17	Female	21	With friend	Voluntarily	Yes
P18	Male	19	At the student dormitory	Voluntarily	Yes
P19	Female	19	At the student dormitory	Easy job finding opportunity	No
P20	Female	19	At the student dormitory	Easy job finding opportunity	No

their frequency:  $f$  (repetition frequency) numbers were also indicated in Figure 1.

In the first clinical application, the students experienced the measurement of vital signs ( $f=14$ ) and established an open communication with the patient ( $f=13$ ) (Figure 1). Some of the expressions of the participants which were repeated frequently are as follows:

*"I tried to chat with the patients and reduce their anxiety. It was the first time that I measured fever, pulse and blood pressure. It was my first experience. I got a little rattled. I also had experiences such as opening a serum set, giving medication with the syringe method "*(P1, Female).

*"I experienced that nursing is a service art since I had the chance to talk to patients. I also experienced wearing serum, subcutaneous and intramuscular needles, measuring vital signs and opening a vascular access "*(P12, Male).

When the data regarding the problems faced by the students in the clinical practice and the problem solving methods against these problems are analyzed, the expressions of the participants ( $n$ =number of people) are given in Figure 2.

Students stated that they feared harming the patients more in clinical practice ( $n=4$ ), patients did not want the student to apply practice on them and that the students faced aggressive attitudes ( $n=3$ ). When the solution methods against the problems were examined, the students generally said that they explained the application to the patient ( $n=6$ ) and asked

the nurses for help ( $n=6$ ) (Figure 2). Some of the expressions of the participants regarding the created codes are given below:

*"Since I had my first internship experience, I was hesitant when measuring vital signs such as blood pressure. In addition, the patient's excess weight and immobility made it difficult for me to measure vital signs. I repeatedly measured and checked. I asked the nurses for help. I told the result I measured, but I said I wasn't sure. I do not want to harm the patient "*(P14, Female).

*"The patients were biased because we were trainees. They did not want me to make any applications. In addition, many applications that nurses made were different from what we learned. The patients therefore judged me for not knowing anything. I shared this problem which happened to me with her responsible nurse. In solving the problem, I did what the nurse sister and brother said "*(P17, Female).

In addition, some participants; stated that the patient had a communication problem with his relatives ( $n=2$ ): *"It put me in a difficult situation when patients made requests about situations that were not in my jurisdiction. At the same time, the relatives of the patient scolded me to do the medicine a little faster while I was on medication. I reported the problem to the nurse because I had no experience with the service "* (P4, Male) and problems regarding theory and practice differences ( $n=2$ ): *"Nurses working in the hospital had different practices than we learned. This situation confused me a lot. In this case, I continued to practice the way our teacher showed us "* (P12, Male) stated. In solving the problems experienced by the participants; he used the methods to ask for help from the clinical nurse and practice as he learned in theory (Figure 2). Some of the participants; ( $n=2$ : P1, P20) stated that they did not encounter any problems in clinical applications.

When the data on the attitudes of nurses towards students in clinical practice are analyzed, two main categories were determined; Main category names and frequency numbers which they received; It was determined as positive attitude ( $f=16$ ) and negative attitude ( $f=7$ ) (Figure 3).

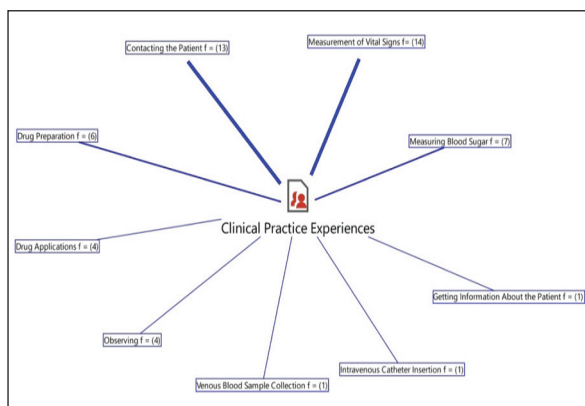


FIGURE 1: First clinical practice experiences of students.

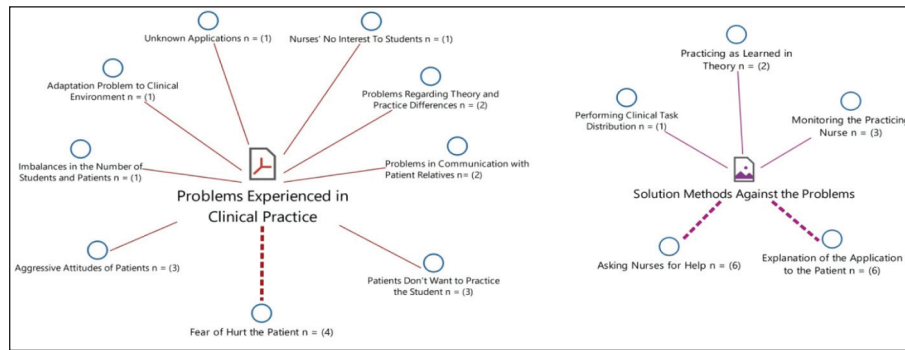


FIGURE 2: The problems faced by the students in clinical practice and solution methods regarding the problems experienced.

Nurses exhibited an instructive approach (f=15) and a friendly approach (f=1) to students in the positive attitude category. In the negative attitude category, they acted indifferent towards the students (f=6) and gave them responsibility which are not related to their occupation (f=2) (Figure 3). Some student statements regarding the codes and categories which were created are as follows:

*“During the clinical practice, the nurses were always willing to teach something and behaved friendly” (P5, Male).*

*“In the clinical practice process, I generally felt that the nurses were like, “Don't be in the way” (P6, Female).*

*“Nurses were neutral towards us. They tried to use the students who knew the job for their own tasks. They never had any contact with the other student group which its members did not know the job” (P9, Woman).*

## DISCUSSION

This phenomenological research was carried out to determine what happened in the first clinical experience of first year nursing students. When the first clinical application experiences of the students were examined in the research; some nursing practices were repeated more frequently and some were less preferred by students (Figure 1). When a qualitative study examining the clinical practice experiences of nursing students is examined; It was stated that the students experienced fear and stress while practicing on the patient and this was due to lack of informa-

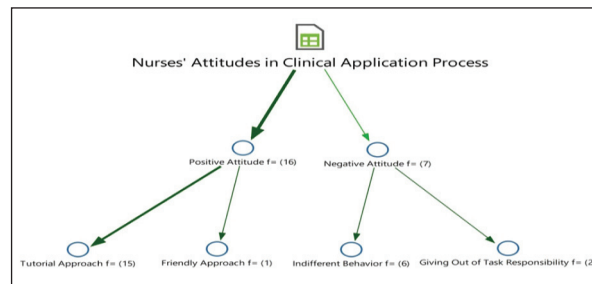


FIGURE 3: Attitudes of nurses towards students in clinical application process.

tion.<sup>11</sup> In the study of Pourghane, it was determined that nursing students began clinical practice unprepared, students who faced the real world of the clinical environment had conflicts with their own expectations and this situation caused fear and stress in students.<sup>12</sup> In the same study, it was found that clinical fear and stress were experienced more in the first year nursing students. Similarly, in the study, it is thought that the students do some practices less or not at all, because of the lack of knowledge and skills and the students' current state of being unprepared for clinical practices because they are first class.

When the problems experienced by the students in clinical practice are examined; problems such as fear of harming the patient, aggressive attitudes of the patients and the patients' reluctance for the student to practice on him/her not wanting to practice the student were found to be more frequent. In the solution of the problems experienced, students stated that they asked nurses for help and explained the practices to the patient (Figure 2). In the study by Acar and Bul-

dukoglu, the problems that students encounter with patients in clinical practice and the concept of difficult patient are examined and it was determined that 78.5% of the nursing students encountered difficult patients, patients who had difficulty in communicating were expressed as difficult patients and needed consultancy services in communication with these patients.<sup>13</sup> In a qualitative research carried out by Santos, it has been determined that nursing students were afraid of making mistakes that may harm patient safety and quality of care in clinical practices.<sup>5</sup> In the study in line with the research results; nursing students' fear of harming the patient and having communication problems with the patient is thought to be due to their being in the first class, having no previous clinical experience and not wanting to harm the patient.

In the study, the students also stated that they had communication problems with their relatives in clinical practice (Figure 2). The communication and nursing skills of the students develop in the communication process which they establish with the patients and their relatives. The development of mutually effective communication skills enables both the student's clinical learning process to improve and the patient and his/her relatives to have positive experiences.<sup>14</sup> In a qualitative study of Sarıgöl Ordin et al. examining the learning experiences of students from the reflection report results in surgical clinics; The students stated that they had communication problems with their relatives and felt insufficient in communication.<sup>9</sup> According to Arkan et al., it was concluded that the overprotective approaches of patient relatives affect the clinical learning process of students in a negative fashion.<sup>15</sup> In the study, the negative experiences of the students during the communication process with the patients and their relatives were experienced since it was thought that the students do not have enough experience in communication and patient care and because of their relatives who had a tendency to show overprotective attitudes.

Another problem that nursing students experience in clinical practice were identified as; problems related to theory and application differences (Figure 2). When the studies on the difference of theory and

practice are examined, in a study conducted by Martínez-Linares et al. with qualitative research method, it was found that students experienced differences between the knowledge they learned in theory and clinical practices, and that this situation revealed the theory application gap.<sup>7</sup> Karadağ et al. stated that 33.8% of the students are the main reason for the problems experienced in clinical practices because they do not have the opportunity to apply their theoretical knowledge.<sup>16</sup> In the qualitative study of Sharif and Masoumi, students stated that they experienced a discrepancy between theory and practice in their clinical experience.<sup>17</sup> Students' theoretical application of the information they have learned in a clinical setting contributes to improving the quality of clinical education.<sup>2,8</sup> In the research, the students did not have the opportunity to apply the information they learned in the classroom to the clinical setting. It is thought that the quality of clinical learning may be affected negatively and this situation may be perceived by the students as a clinical problem.

In the study, it was found that nurses showed more positive attitudes to students during the clinical application process and that they approached the students in a friendlier fashion within the scope of this attitude (Figure 3). Clinical nurses should be role models for nursing students to transform theoretically learned knowledge into psychomotor skills and acquire these skills. Clinical nurses are a guide for students to observe nursing practices.<sup>2,8,16</sup> As stated in the Nursing Regulation published in the Official Gazette on March 8, 2010, providing support to the clinical education of nursing students is among the duties and responsibilities of nurses.<sup>18</sup>

When the approaches of nurses towards students in clinical practices are examined; in the study of Jansson and Ene, it was found that the support of the health personnel to the student contributed significantly to the clinical learning process.<sup>19</sup> Dikmen Aydın et al. found that 58.8% of the students contributed to the theoretical knowledge of nurses.<sup>1</sup> Polat et al. reported that 73.4% of students stated that "nurses contribute to students' clinical education".<sup>20</sup> In the study where Bolukbas and Uzunsoy approached nurses to students in clinical practices, it

was determined that 54.5% of nurses helped students partially and 39.2% contributed to theoretical knowledge and 46.1% to gain skills.<sup>21</sup> According to Akgun Kostak and others similarly, 20.6% of students stated that nurses contributed to their theoretical knowledge.<sup>8</sup> As a result of the study, it was concluded that the nurses are eager to accept and support the student. Similar to the literature, in the study, nurses showed more positive attitudes to students; it is thought to be due to their acceptance of students in the clinical setting and their adoption of clinical teaching as one of their duties.

On the other hand, it was found in the research that nurses display negative attitudes to the students in clinical practices and that nurses are more uninterested in students within the scope of this attitude (Figure 3). Three hundred and one nurses provide care to 100,000 patients in our country.<sup>22</sup> Considering this situation, it is inevitable that clinical nurses will have limited support for students. In addition, due to the fact that nurses hold faculty members responsible for student education and do not regard this as a duty, sufficient support is not provided to students.<sup>8</sup>

When the researches on the subject are examined; Karadag and others stated that 53% of the students were not able to get support from nurses in any problem they experienced in clinical practice, and 47.3% of them stated that the problems experienced in clinical practices were caused by nurses.<sup>16</sup> Dikmen Aydın et al. found that most of the students sometimes helped nurses to reflect theoretical knowledge into practice (60.7%).<sup>1</sup> Akgun Kostak et al. stated that 47.9% of students stated that nurses were indifferent to students, 23.6% of students showed negative attitudes and only 5.5% of students were a good role model for nursing care.<sup>8</sup>

When the issue of not providing adequate support to students by clinical nurses is evaluated from another perspective; in Turkey, nurses are expected to be role models to the students at different educational levels (high school, undergraduate, such as licenses). This is an undeniable fact. This difference affects many situations, from supporting the student to communicating with the lecturer and the student. The per-

spective of a job-oriented nurse and a nursing-oriented nurse can vary depending on the level of education.<sup>23</sup> O'Mara et al. associated with the fact that the nurses do not know the difference in education and the nursing education program, and that they do the applications themselves rather than being a teacher during clinical practices, and that the students do not have problems.<sup>23</sup>

Another scope of the negative attitude of nurses to students in the study is that the student was given off-duty responsibility (Figure 3). Giving the student responsibility outside the office causes stress and communication problems between students and nurses.<sup>16,19,24</sup> In a qualitative study investigating the clinical practice experiences of nursing students in Saudi Arabia, it has been determined that the assignment of non-duty responsibilities to students negatively affects clinical practice.<sup>25</sup> In the study of Polat et al., 28.2% of the students participated in the discourse of the nurses stated that "the work that is not related to the patient in clinical practice is expected to be done by the students".<sup>20</sup> In the work of Aydın and Argun, it was determined that the students took responsibility outside their duties (such as taking documents) (36.8%).<sup>26</sup> In the study of Karadag et al., 15.9% of the students were shown to be the main reason for the problems experienced in clinical practice by giving the student non-duty responsibility by their clinical nurses.<sup>16</sup> In the research, the negative attitude of nurses to students is thought to result from the fact that the number of patients per nurse is high and the associated work intensity due to the fact that the nurses are responsible for the clinical education of the students by the nurses and the education levels of the nurses are different.

## CONCLUSION

As a result of the study; in order to reduce the fear and stress that occur in students, it is recommended to increase laboratory practices and to support students continuously. In laboratory education, it will be useful to use different training methods such as simulation laboratories that reflect the real clinical environment. In addition, it is necessary to provide clinical diversity that allows students to do all nurs-

ing skills. Thus, almost all of the basic nursing skills can be achieved or observed by students.<sup>11</sup>

In the study, it was determined that the students asked for help more from the nurses in solving the problems encountered in clinical practices. It is known that the positive relationship between students and nurses significantly affects the quality of clinical learning.<sup>2</sup> For this reason, it is recommended to provide clinical nurses with the necessary trainings to contribute to the education of students within the scope of their duties, to carry out inspections and evaluations after the trainings and to provide school-hospital cooperation between nurses and lecturers in order to increase the quality of clinical education.

### Source of Finance

*During this study, no financial or spiritual support was received neither from any pharmaceutical company that has a direct connection with the research subject, nor from a company that provides or produces medical instruments and materials which may negatively affect the evaluation process of this study.*

### Conflict of Interest

*No conflicts of interest between the authors and / or family members of the scientific and medical committee members or members of the potential conflicts of interest, counseling, expertise, working conditions, share holding and similar situations in any firm.*

### Authorship Contributions

*This study is entirely author's own work and no other author contribution.*

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