Value of Clinical Nursing Pathway in Perioperative Nursing Care of Patients with Breast Cancer

Qi Junyan
Baoji Vocational Technology College, Baoji City Shaanxi Province 721013

Keywords: Breast cancer; clinical nursing pathway; nursing work

Abstract: Objective: To analyze the effect of clinical nursing pathway in perioperative nursing care of patients with breast cancer. Methods: 90 cases of patients with breast cancer were chosen as the study object in our hospital from October 2017 to October 2018. It is randomly divided into experimental group (45 cases) and control group (45 cases). Results: The indexes of hospitalization and treatment in the experimental group were significantly better than those in the control group, and the nursing satisfaction of the experimental group was significantly higher than that of the control group (P < 0.05). Conclusion: The application of clinical nursing pathway in perioperative nursing care of patients with breast cancer can significantly improve the satisfaction of patients with nursing work, and effectively reduce the operation time and treatment cost of patients.

Breast cancer is one of the most common types of malignant tumors in women. It has a relatively high incidence. In recent years, with the rapid development of economy and the improvement of living standards, the pressure of social competition has increased, especially for women. The tremendous pressure increases the risk of breast cancer in women, and breast cancer poses a threat to the safety of patients. At present, the most effective way to treat breast cancer is to perform surgery. Perioperative nursing care of patients with breast cancer is of great significance for the treatment. 45 patients are chosen as the experimental group in this paper to implement clinical nursing pathway in our hospital, and the research contents are summarized as follows.

1. Information and method
1.1 General information
90 cases of patients with breast cancer were chosen as the study object in our hospital from October 2017 to October 2018. It is randomly divided into experimental group (45 cases) and control group (45 cases). The study was approved by the Medical Ethics Committee of our hospital, and all patients have filled in the informed consent form. The age distribution of the patients in the experimental group was 22-46 years old, and the median age was (32.6 ± 1.8) years old. The number of cases of stage II breast cancer and stage III breast cancer were 35 cases and 10 cases respectively. While the age distribution of the patients in the control group was 23-47 years old, and the median age was (33.68± 1.7) years old. The number of cases of stage II breast cancer and stage III breast cancer were 33 cases and 12 cases respectively. Compared with the above data, P > 0.05.

1.2 Method
In this study, the control group of breast cancer patients only used routine nursing path measures, including the daily infusion care of the patients, monitoring the vital signs of the patients, and the care of diet, psychology, wounds and postoperative position. In the experimental group, the clinical nursing pathway was implemented, and the nursing contents included the following points.

(1) Evaluating the actual situation of patients. After the patient is admitted to the hospital, the medical staff leads the patient to the ward and evaluates the patient's health status effectively and comprehensively. In the ward, they explained the knowledge related to breast cancer for patients and their families, and helped patients build confidence.

(2) Making content of clinical nursing pathway. After evaluating the health status of patients, the
clinical nursing pathway table was scientifically made according to the actual situation of patients, and the horizontal axis was the time point. The contents, such as admission examination, rehabilitation exercise, psychological guidance, diet nursing and discharge nursing, were all set vertically and horizontally. The medical staff care for the patient according to the prepared content.

(3) Conducting clinical nursing pathway. Medical staff assisted patients with admission checks, skin preparation before surgery, and told patients the correct methods of urination, defecation and cough, and carried out certain training for patients. After completing the operation, the frequency of monitoring the vital signs of patients should be increased. Medical staff should appropriately raise the patient's upper limbs, and keep the patient in a semi-recumbent position. What’s more, they should use a bandage at the patient's armpit, and adjust the appropriate tightness to prevent the tightness to prevent that the inappropriate tightness will affect the blood circulation of patients. It is necessary to ensure that the bandaged skin flaps and the blood circulation of patients will be affected by the inappropriate tightness, which can promote the healing of the incision. After the operation was completed, the nursing of drainage tube should be appropriately strengthened. The medical staff should pay close attention to whether the drainage tube was clogged or slipped. The medical staff should ask patients whether there is any pain in time. If there is a pain, it is necessary to pay close attention to it. If the patient had severe pain, they can provide the patient with analgesic medication to carry out the care to help the patient to alleviate the pain. One day after the operation, the patient can eat food, but it is necessary to adhere to the principle of eating small meals and not eating too much at one time. Medical staff advised patients to take more rest to ensure a certain amount of sleep, and told patients to clean their mouth and skin every day to avoid upper respiratory tract infection. In addition, medical staff also need to give scientific guidance to the patient's postoperative upper limb rehabilitation exercise to effectively prevent that scar contracture will affect the upper limb function of the operation side. When the patient is ready to be discharged from the hospital, the medical staff should tell the patient to take a rest after discharge, and to insist on exercising on the upper limb every day at home and regularly checks the upper limb function.

1.3 Observation indicators

The observation index of this study is to compare the nursing satisfaction of two groups of patients. It is divided into three indicators: very satisfied, satisfied and unsatisfactory. The nursing satisfaction is the sum of the percentage of very satisfied and satisfied. The index, including average hospitalization time, average medical expenses, health education score and surgical compliance score, were compared between the two groups.

1.4 Statistical methods

All the data obtained in this paper were processed in SPSS19.0 software. The presentation of the counting data relies on percentage and is measured by chi-square. The measurement data is presented as mean (+standard deviation). T is measured, and P < 0.05 to prove that the difference is statistically significant.

2. Results

2.1 Comparison of the nursing satisfaction between two groups of patients

The data obtained in this study were analyzed by statistical method. The analysis data showed that the nursing satisfaction of the experimental group was 95.56% (43/45), and that of the control group was 77.77% (35/45). The nursing satisfaction of the experimental group was significantly higher than that of the reference group (P = 0.001, X² = 13.682).

2.2 Comparison of hospitalization and treatment indicators between two groups of patients

Statistical method was used to process the research data. According to the data processed, the average hospitalization time and the average medical expenses of the experimental group were significantly less than those of the control group, and the health education score and the surgical
compliance score were significantly higher than those of the control group ($P < 0.05$). The specific data are shown in Table 1.

Table 1 Comparison of hospitalization and treatment indicators between two groups of patients (x±s)

<table>
<thead>
<tr>
<th>Group</th>
<th>Case</th>
<th>Average hospitalization time(d)</th>
<th>Average medical expense(rmb)</th>
<th>Health education score</th>
<th>Surgical compliance score</th>
</tr>
</thead>
<tbody>
<tr>
<td>experimental</td>
<td>45</td>
<td>20.50±2.30</td>
<td>6715.50±10.38</td>
<td>95.83±3.46</td>
<td>97.63±3.68</td>
</tr>
<tr>
<td>control group</td>
<td>45</td>
<td>34.69±3.89</td>
<td>9986.83±19.28</td>
<td>82.40±2.50</td>
<td>83.38±2.50</td>
</tr>
<tr>
<td>T</td>
<td>--</td>
<td>12.861</td>
<td>13.450</td>
<td>8.916</td>
<td>8.167</td>
</tr>
<tr>
<td>P</td>
<td>--</td>
<td>0.001</td>
<td>0.001</td>
<td>0.034</td>
<td>0.012</td>
</tr>
</tbody>
</table>

3. Conclusion

At present, most of the clinical treatments for breast cancer are surgical treatment. Usually, surgical treatment requires perioperative nursing to promote the recovery of patients. Clinical nursing pathway is a kind of nursing mode applied in clinic in recent years. Compared with conventional nursing pathway, the nursing time of clinical nursing pathway is shorter, but it has higher nursing effectiveness. At the same time, it also has the advantages of coordination, planning and foresight. It is mainly to develop the clinical nursing path content in the early stage, and carry out targeted nursing operations in the nursing process to make breast cancer patients be more satisfied with the nursing work.

In this paper, patients in the control group were given routine nursing pathways, and patients in the experimental group were clinically treated. The results of statistical analysis showed that the total effective rate of treatment in the experimental group was significantly higher than that of in the control group, and the indexes of hospitalization and treatment in the experimental group were significantly better than those in the control group. Therefore, the application of clinical nursing pathway in perioperative nursing care of patients with breast cancer can significantly improve patient satisfaction and reduce medical costs and operation time, which can be recommended for clinical use.

References


