

## Application of Diversified Preoperative Visit Based On Chain Management in Perioperative Patients

Feng Zhao, Guifen Wu, Caijing Zhao, Xueying Zhou \*

China-Japan Union Hospital of Jilin University, Changchun, Changchun, Jilin, 130033, China

\* Corresponding author

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**Abstract:** **OBJECTIVE:** To investigate the effect of preoperative visits based on chain management on the nursing outcomes of perioperative patients. **METHODS:** From September 2016 to December 2016, 400 cases of elective surgery in the hospital were selected as the control group before the preoperative preoperative visit mode led by chain management. The routine preoperative visit was adopted. Between March 2017 and June 2017, a multi-disciplinary pre-operative visit model led by chain management was adopted. After the elective surgery, 400 patients were selected as observation groups, and a pre-operative visit mode was adopted. The anxiety improvement effect and nursing satisfaction of the two groups were compared. **RESULTS:** There was no significant difference in the Hamilton Anxiety Scale (HAMA) score between the two groups ( $P>0.05$ ). After the visit, the HAMA score of the observation group was significantly lower than that of the control group ( $P<0.05$ ). The total effective rate of visits in the observation group was 90.75%, which was significantly higher than that in the control group (81.25%). The difference was statistically significant ( $P<0.05$ ). The nursing satisfaction of the observation group was 85.25%, which was significantly higher than that of the control group (74.50%) ( $P<0.05$ ). **Conclusion:** Multi-operative preoperative visit based on chain management can alleviate the anxiety and tension of patients during perioperative period, actively cooperate with surgery, improve the nursing effect and nursing satisfaction of the operating room.

### 1. Introduction

Surgery is an important means of treating surgical diseases. With the change of medical models, many scholars recognize that preoperative visits are an important part of the perioperative period. The standardized preoperative visit can not only enable the operating room nurses to fully understand the relevant information of the surgical patients, but also prepare for the operation. It can also reduce the patient's fear of the surgery, anxiety and other negative emotions, so that the patient is the best. The mentality meets the operation and cooperates with the medical work to effectively improve the effectiveness of surgical treatment [1, 2]. High-quality pre-operative visits must have solid professional knowledge and a complete process system to enable patients to feel the quality of medical care in pre-operative visits, demonstrate the strength of the hospital, and improve patient satisfaction. At present, the pre-operative visits in China are single, the form of visits is monotonous, and the results of interviews are not satisfactory. The department team of the author, through the high-quality nursing service engineering activities, improved the pre-operative visits, collected and summarized the problems in the previous visits, and improved them. In January 2017, the chain management-led diversification was established. The pre-visit mode has achieved good results and is reported below.

### 2. Materials and methods

Our hospital is now a comprehensive three-level teaching hospital. There are 36 operating rooms in the hospital. The annual operation volume is more than 40,000, including general surgery, cardiac surgery, thoracic surgery, urology, obstetrics and gynecology, neurosurgery, and vascular surgery. ,

hand surgery, otolaryngology head and neck surgery. From September 2016 to December 2016, 400 cases of elective surgery in the hospital were selected as the control group before the multi-operative preoperative visit mode led by chain management. The routine preoperative visit mode was adopted. From March 2017 to June 2017, a chain of management-led diversified preoperative visits were adopted. After the elective surgery, 400 patients in the hospital were selected as observation groups.

Regular visit mode, on the 1st day before each operation, the visiting nurse visits the patient, the specific contents are: preoperative evaluation, surgical knowledge presentation, surgery introduction and psychological state assessment, and release relevant reading for each patient. material;

Chain management is the dominant pre-operative visit mode. The specific contents are as follows:

(1) Establish a professional visiting team: According to the hierarchical matching of titles, establish a special pre-operative visit team and set up a visit. The leader of the specialist team, the pre-operative visit is under the responsibility of the specialist team leader, and the core content of the different visits is formulated according to each specialty, and the key surgical preparation requirements are listed. Patients were interviewed by a specialist visit team one day before surgery. (2) Develop a new pre-operative visit visit list: redesign a preoperative visit list with special features, including general surgery, orthopedics, ENT, neurosurgery, cardiac surgery, hand surgery, thyroid surgery, obstetrics and gynecology Wait. Make preoperative visits more targeted. At the same time, the content of nursing diagnosis is increased, and the corresponding nursing measures for the subsequent operating room are provided. (3) Develop a diversified visit plan, change the previous leaflet-style preoperative visit, and create an introduction to the operating room environment, anesthesia method and precautions. Audio data such as video and body position video. Produce catalogue materials such as surgery-related knowledge atlas. At the same time, for the special groups such as children, deaf and dumb patients, etc. to make corresponding communication atlas, such as children's cartoon album communication map card, deaf-mute patient communication map card, etc. (4) create a visit technology platform, visit team combined with daily surgery arrangements The SMS platform is created, and the operating room organizes and edits the information such as the patient's operation time and preoperative preparation content, and sends it to the mobile phone of the next-day elective surgery patient at 2 pm every day. At the same time, we use the WeChat public platform to create the WeChat public account, including "surgical knowledge", "surgery instructions" and "about us". The specific content is presented in the form of text, video, picture and audio, and is regularly pushed to the patient. The "surgical knowledge" includes information about disease-related knowledge and surgical procedures. The "surgery instructions" introduces the patient to the surgical instruments, the operating room environment, etc., and explains the personnel's cooperation. "About us" details the surgical team. (5) Regularly conduct systematic training on the visiting nurses of the specialist group, enhance the visiting skills, and unify the process and content of preoperative visits. (6) Pay attention to the patient's psychological care, evaluate the patient's psychological state through the anxiety and depression scale, and actively carry out psychological counseling for patients with anxiety and depression, and enhance the patient's compliance with the treatment.

Observation indicators Observed the anxiety scores of the surgical patients in both groups and the evaluation of the satisfaction of nursing work. The Hamilton Anxiety Scale (HAMA) was used to analyze the patient's anxiety. The scoring criteria were: total score <7 divided into no anxiety; total score was 7~13 divided into possible anxiety; total score was between 14 and 20 Then it is judged as anxiety; the total score is 21~28, then it is judged as obvious anxiety; the total score is  $\geq 29$  is divided into severe anxiety. Evaluation criteria: markedly effective: patients' anxiety was significantly reduced, HAMA score <7 points; effective: patients' anxiety was reduced, HAMA score was 7-13 points; invalid: patients with negative emotions did not improve or aggravate [3]. Total effective rate of visits = (effective + effective) / total number of cases  $\times 100\%$

Statistical methods Data were processed using SPSS19.0 statistical software. The count data were analyzed by  $\chi^2$  test, and the measurement data were analyzed by t test.  $P < 0.05$  showed that the difference was statistically significant.

### 3. Results

Comparison of HAMA scores before and after visits between the two groups There was no significant difference in HAMA scores between the two groups ( $P>0.05$ ). After the visit, the HAMA scores of the observation group were lower than those of the control group ( $P<0.05$ ). See Table 1.

Table 1 Comparison of HAMA scores before and after visits between two groups of patients ( $\pm s$ )

Gr	Case	HAMA Score	
		Before treatment	After nursing
Control group	400	24.98 $\pm$ 5.03	15.14 $\pm$ 4.23
Observation group	400	24.53 $\pm$ 4.96	10.76 $\pm$ 4.65
t		1.265	13.935
P		0.206	0.000

Comparison of visits between the two groups The total effective rate of the patients in the observation group was 90.75%, which was significantly higher than that of the control group (81.25%). The difference was statistically significant ( $P<0.05$ ), as shown in Table 2.

Table 2 Comparison of visits between two groups of patients (%)

Gr	Case	Significant effect	effective	invalid	Total effective
Control group	400	195(48.75)	130(32.50)	75(18.75)	325(81.25)
Observation group	400	228(57.00)	135(33.75)	37(9.25)	363(90.75)
$\chi^2$					14.992
P					0.000

### 4. Discussion and conclusion

Surgery is an important means of surgical treatment of diseases. Doctors use medical equipment and instruments to remove and repair the patient's body lesions, so that patients can recover. However, most patients do not understand the surgical procedure, worry about the surgical effect, the patient has anxiety and anxiety, affecting the surgical cooperation and the effect of the operation. With the transformation of the medical model and the implementation of the systematic holistic nursing model, the nursing work in the operating room has also undergone major changes. The work content of the operating room nursing staff is no longer just a matter of staying with the surgeon, but more Place the patient's preoperative psychological needs. The American Nurses Association's Basic Program for Operating Room Nurses requires that the first phase of the operating room care practice benchmark is to conduct preoperative visits to understand the patient's physical, social, and psychological status. The International Association of Surgery Nurses (AORN) states: "Preoperative visits It is regarded as one of the functions and responsibilities of the operating room nurses. [3, 4]. It can be seen that preoperative visits are an important task in the overall nursing of the operating room, which needs to be paid attention to by the operating room nurses and clinicians.

Preoperative visits can increase the patient's trust in the operating room care staff, reduce the patient's fear and anxiety, and detailed preoperative visits, so that patients can fully understand the operating room environment, the entire process of surgery, reduce due to no Understand the anxiety and panic that is caused, and increase the patient's sense of security [5]. The operating room nurses evaluate the patients through preoperative visits, give targeted psychological care, make the patients feel respected and cared, gain psychological satisfaction and security, and have confidence in the surgery. A good preoperative visit can allow the patient to enter the surgery with a relaxed body and mind, and be fully prepared to cooperate with the medical staff, so that the operation can be carried out smoothly, and it is also beneficial to the patient's postoperative recovery.

Diversified pre-operative visits are based on the regular model, using chain management to treat each visit as a management object, and do the operation room nursing work in the corresponding links. Before the work started, a comprehensive and complete visit team was set up. The internal staff structure was reasonable, the professional advantages were clear, and a reasonable visit plan was formulated based on the actual clinical situation. With the help of modern information technology, SMS reminders can support and supervise. Function, guide patients and their families to prepare for preoperative, WeChat platform can transform boring knowledge into vivid content, realize thinking visualization, help patients understand and master knowledge, improve their compliance, and ensure the smooth operation of surgery. High-quality preoperative visits can also improve the professional quality of operating room nurses [6]. In the past, preoperative visits were mostly in the form of simple pre-operative precautions for patients. Operating room caregivers often felt that they did not need to pay attention to preoperative visits [7], and patients were absent during the visit. Psychological care also lacks nursing diagnosis and corresponding care measures. The use of diversified pre-operative visits requires the operating room nurses to master comprehensive professional knowledge, improve their professional quality, and pay attention to the improvement of their knowledge structure and knowledge reserves.

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