# The Effect of Clinical Nursing Pathway in Nursing Care of Children with Diarrhea

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**Keywords:** Infectious diarrhea; clinical nursing pathway; incidence of complications

**Abstract:** Objective: To analyze the effect of clinical nursing pathway in the nursing care of children with diarrhea. Methods: 90 cases of children with diarrhea were chosen as the study object in our hospital from December 2017 to October 2018. They were randomly divided into experimental group (45 cases) and control group (45 cases). Results: The indexes of hospitalization in the experimental group were significantly better than those in the control group, and the incidence of complications of the experimental group was significantly higher than that of the control group (P < 0.05). Conclusion: The application of clinical nursing pathway in the nursing care of children with diarrhea can effectively promote the rehabilitation of patients.

Infectious diarrhea is a common disease among children. When children have a diarrhea, the number of their bowel motions will increase or their condition will change<sup>[1]</sup>. Patients are younger and weaker in resistance, it will lead to aggravation of the disease if not treated promptly and effectively. And children with particularly severe conditions will have water and electrolyte disorders, which will seriously affect the growth and development of patients. 45 patients are chosen as the experimental group in this paper to implement clinical nursing pathway in our hospital and analyze the effect of clinical nursing pathway in the nursing care of children with diarrhea. The research contents are summarized as follows.

#### 1. Information and Method

## 1.1 General information

90 cases of children with diarrhea were chosen as the study object in our hospital from December 2017 to October 2018. They are randomly divided into experimental group (45 cases) and control group (45 cases). The ratio of male to female patients in the experimental group was 23:22. The age distribution of the patients in the experimental group was 6 months-2 years old, and the median age was  $(1.2\pm0.2)$  years old. While the ratio of male to female patients in the control group was 24:21. The age distribution of the patients in the experimental group was 8 months-2 years old, and the median age was  $(1.4\pm0.3)$  years old. Compared with the above data, P > 0.05.

# 1.2 Method

In this study, the control group of children with diarrhea only used routine nursing path measures. In the experimental group, the clinical nursing pathway was implemented, and the nursing contents included the following points.

(1) Implementing admission guidance. The medical staff first introduces the overall layout and environment of the hospital to the patients' family members after the patient is admitted, explains the related matters needing attention during hospitalization, and informs the patients' family members of the hospital's accompanying system. At the same time, they also need to do a good job of hospital admission education for patients' family members, send the disease knowledge brochure produced by the hospital to the patients' family members, and tell them the disease knowledge related to the patients' family members. In addition, they should give enough patience to answer the questions raised by the patients' family members, and actively communicate with the them <sup>[2]</sup>, so that the patients' families can trust the medical staff and facilitate the follow-up treatment.

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- (2) Conducting disease observation. During the hospitalization period, the medical staff should pay close attention to the patient's disease changes and keep good records, such as the number of bowel motion per day, and the amount of bowel motion of patients. Besides, they should also carefully examine the vomit of patients, carefully examine the skin elasticity of patients, check whether there is depression in patients' eye sockets and whether there is hypokalemia in patients [3]. If the patient has hand and foot convulsions, they should contact the doctor in time to take effective measures. If the patient has a high temperature, they ought to take the ice pack and lower the patient's temperature.
- (3) Implementing dietary nursing. Medical staff should explain the dietary precautions to the patients' families in detail, and urge them to follow the principle of "Less before more, thinner before thicker" when the family members feed the patients. And they should tell the patients' families how to add supplementary food reasonably, so that the patients' digestive tract could gradually adapt to the changes of feeding. If the patient has mild dehydration, the medical staff can help the patient to take oral QRS rehydration; if the patient has severe dehydration, they will take the way of intravenous channel replenishment for the patient that first to supply the patient with salt, then to give the patient sugar. The speed of intravenous channel replenishment can be faster at first, and then slowly adjust the speed. The medical staff need to make a detailed record of the patient's fluid infusion volume and the amount of incoming and outgoing when helping the patient to take oral QRS rehydration.
- (4) Carrying out discharge guidance. When the patient is ready to leave hospital, the medical staff need to inform the family members of the patient how to feed correctly at home, instruct the patient to add supplementary food according to the patient's digestive tract adaptability. The supplementary food should not exceed the patient's digestive tract tolerance. At the same time, they tell the patient to ensure that the complementary food is clean and hygienic to effectively prevent infection in the intestinal tract of the patient. Finally, they explain the causes of diarrhea and preventive measures for the patient's family [5], so that the family can take effective measures to prevent the patient from recurring diarrhea.

## 1.3 Observation indicators

The observation index of this study is to compare the hospitalization cost and time of two groups of patients, and the incidence of complications such as diarrhea, bowel sounds, and vomiting 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 ( $\pm$  standard deviation). T is measured, and P < 0.05 to prove that the difference is statistically significant, indicating that this experiment is comparable.

# 2. Results

# 2.1 Comparison of the index of hospitalization between two groups of patients

The data analyzed by statistical methods showed that the hospitalization cost and time of the experimental group were significantly less than the control group. The data of the two groups were compared, P < 0.05, and the specific data were shown in Table 1.

Table 1 Comparison of the index of hospitalization between two groups of patients (x±s)

Group	Case	hospitalization cost(RMB)	hospitalization time(d)
Experimental group	45	3540. 5±503.5	4.0±1.2
Control group	45	5523.8±616.8	6.8±2.6
T		11.500	4.694
P		0.001	0.002

# 2.2 Comparison of the incidence of complications between two groups of patients

The data obtained in this research were analyzed by medical statistical software. After analyzing the data, the total incidence of complications in the experimental group was 13.33%, while the total incidence of complications in the reference group was 26.67%. The incidence of complications in the experimental group was lower than that of in the reference group (p=0.005,  $x^2=11.082$ ).

#### 3. Conclusion

Children have not been able to fully develop the various functions of the body, so they only have a relatively low defense and resistance. Compared with adults, children's gastric acid secretion is very small, which makes children more likely to produce diarrhea. There are many causes of diarrhea, such as diet and environment <sup>[6]</sup>. Generally speaking, routine nursing methods are used in the clinical nursing of infectious diarrhea, but it cannot achieve satisfactory therapeutic effect. However, the clinical nursing pathway use targeted nursing measures to make nursing more professional after a comprehensive understanding of the patient's condition. It can help patients recover as soon as possible and effectively improve the nursing ability of medical staff.

In this study, the control group of children with diarrhea only used routine nursing path measures. In the experimental group, the clinical nursing pathway was implemented. The results shows that the hospitalization cost and time of the experimental group were significantly less than the control group, and the incidence of complications in the experimental group was lower than that of in the reference group. Clinical nursing pathway improves the deficiencies of routine nursing, and its nursing intervention is more targeted. In conclusion, the application of clinical nursing pathway in the nursing of children with diarrhea can significantly reduce the incidence of complications, and enable patients to recover and discharged as soon as possible, which can be recommended in clinical practice.

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