

Analysis on Application Effect of Humanized Nursing on Operating Room Nursing

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Keywords: Humanized Nursing, Operation Room Nursing, Application Effect

Abstract: To explore the application and effect evaluation of humanized nursing in operating room nursing. A total of 92 patients who underwent surgery in the hospital from April 2010 to March 2013 were randomly divided into the experimental group and the control group, with 46 patients in each group. The patients in the experimental group underwent humanized nursing throughout the operation. The control group received routine nursing before, during and after surgery, and then compared the nursing satisfaction of the two groups before and after surgery. The nursing satisfaction of the patients in the experimental group was significantly better than that of the control group, and the difference was statistically significant ($P < 0.05$). Postoperative humanized nursing can reduce the negative emotions of patients and improve the satisfaction of patients. It is worthy of clinical promotion.

1. Introduction

With the development of the times, the acceleration of industrialization, the use of chemical pesticides and other articles, the environmental pollution is gradually becoming serious, the air quality is declining, the diseases caused by it are also increasing, and the health needs of people are getting higher and higher, to a certain extent. Changed the concept of people's care. Traditional care models have been unable to meet the increasing demand for clinical care. The operating room is a key place for the hospital to perform surgical treatment on patients. The quality and efficiency of the operating room care work will have a greater impact on the treatment effect. Therefore, in order to study the application effect of humanized nursing in operating room nursing, this study of 120 patients admitted to our hospital is reported as follows.

2. Materials and methods

92 patients who underwent surgery in the hospital from April 2010 to March 2013 were randomly divided into the experimental group and the control group, with 46 patients in each group. The experimental group was 28 to 59 years old, with an average of 32.2 ± 2.5 years old, the control group was 32 to 58 years old, with an average of (35.7 ± 2.7) years old. There were 26 cases of urology, 21 cases of orthopedics, 15 cases of ophthalmology, 11 cases of brain, 10 cases of obstetrics, and 9 cases of general surgery. All patients had no heart, liver, spleen and lung function disorders. There were no significant differences in the general data of the patients, age, sex, etc. between the two groups ($P > 0.05$), which was comparable.

Patients in the control group received routine care throughout the procedure. The patients in the experimental group were treated with humanized care. The nurses were arranged to inspect the patients before the operation, and the psychological and physiological status of the patients were always concerned. The patient is sent to the operating room by the nurse during the operation to warm the patient. After the operation, the nurse will go to the door of the operating room to pick up the patient and return to the ward. During this period, the nurse should carefully check the patient's physical condition. When the patient is resting after the operation, the nurse should go to the ward every morning, middle and late to check the patient's physical condition. With standardized service

terms, we must actively care for patients, treat patients patiently, and warmly receive patients' families. The data were statistically analyzed using SPSS 15.0 software. The measurement data were expressed as mean \pm standard deviation ($\bar{x} \pm s$), and t-test was used for comparison; count data was expressed as rate (%), and word 2 test was used for comparison. $P < 0.05$ was considered statistically significant.

3. Methods

The routine group is given routine operating room care, including nursing staff to take medication or anesthesia in strict accordance with the doctor's advice. Before the operation, the patient is guaranteed to have sufficient rest time, closely monitor the patient's vital signs, and perform surgical operations with the doctor during the operation. Carefully observe the patient's physical repair and wound healing. The analysis group added humanized nursing measures on the basis of the regular group. The specific contents include: 1 preoperative humanized nursing: when the patient was just admitted to the hospital, the nursing staff did an evaluation of the admission nursing, and detailed information on the patient's medical records and examinations: whether there were drugs History of allergies, assessment of physical and mental conditions, careful monitoring of vital signs, collection of patient's self-conscious symptoms; nursing staff to master the patient's psychological state, timely and detailed explanation of the surgical knowledge to the patient and his family, the necessity of surgical operations, Process, precautions, etc., to improve the patient's and their families' awareness of surgical operations, to alleviate the anxiety and anxiety of patients and their families; to patients who need hysterectomy to explain the necessity of surgery and non-surgery Harmful, to ensure that patients agree to surgery; carefully check all kinds of surgical instruments to ensure that the function is intact, reduce the risk of surgery; to guide patients to master the anesthesia position and the operation of the operation. 2 Intraoperative humanized nursing: the operating room nurses should explain the meaning of each operation to the patient briefly before the operation, in order to alleviate the anxiety and nervousness of the patient; pay attention to obstructing the patient's privacy, if the patient is found to be unwell, need Ask the patient about the uncomfortable part, explain the cause of the discomfort, pay attention to the gentle words, take measures to distract the patient when the patient feels painful, and let the doctor check if the patient is unbearable, and take corresponding treatment measures; According to the patient's condition, the physiological saline solution with appropriate temperature should be selected to flush the surgical field of vision, thereby improving the patient's comfort; according to the doctor's request, the patient should be used to clean the patient's body; in the case of caesarean section, the patient's mood should be calmed and kept. The patient's consciousness is clear, and the patient's physical signs are monitored at any time to prevent complications. 3 postoperative humanized care: timely report the operation effect to the patient and family after the end of the operation, and carefully escort the patient back to the ward; closely observe the recovery of the wound, prohibit the random touch of the wound, if the gauze is contaminated or infiltrated, replace it in time; The nursing staff on duty should pay attention to light walking, light talk, light operation, avoiding loud noise; go to the ward for inspections on time, pay attention to observe changes in vital signs of patients; urge patients to develop good habits and eating habits, life and diet To help the family to clean the patient's body every day, such as soaking the feet and scrubbing the body, to improve the patient's comfort; keep the ward clean, bright and well ventilated.

4. Discussion

With the advancement of society and the development of medical technology, modern medicine has gradually developed in the direction of "people-oriented". The current medical conditions have also enabled patients to have more medical choices. The hospital's service attitude has become an important criterion for patients to choose medical treatment. Therefore, humanized care is particularly important. Humanized care is a preface of the concept of care, the essence of which is "patient-centered, wholeheartedly serving patients". Humanized care can meet the health needs of

patients and improve the quality of hospital services. In terms of hospitalization time, humanized care can give patients the most comprehensive and considerate care, and can provide patients with a good treatment environment, thereby improving patients' the treatment process shortens the length of hospital stay. Humanized care has reduced many unnecessary troubles for patients and their families. Patients with humanized care have reduced their hospitalization time and the cost of treatment has decreased accordingly. Humanized nursing requires the nursing staff in the operating room to continuously improve the professional quality. As the level of nursing continues to improve, the patient's satisfaction rate will also increase, effectively improving the relationship between doctors, patients and patients, thus playing a virtuous cycle. Preoperative medical knowledge and psychological counseling, eliminate patient concerns, so that it can better cooperate with surgery; give patients thoughtful and thoughtful care during surgery, adjust patient mood, and meet patient needs to the greatest extent. After the operation, the patient often produces a lot of factors that are unfavorable to the treatment, and often there are psychological problems such as fear and anxiety. The humanized nursing can create a warm home for the patient and reduce the patient's resistance to the hospital. Humanized care starts from the nuances, increases the patient's confidence in the operation, reduces the negative emotions generated by the patient's surgery, enables the patient to actively cooperate with the surgical process, and accepts the surgery in the best state, thereby improving patient satisfaction. With the development of medical technology, nursing science is constantly developing and changing, and nursing has become more humanized by the previous rigid care. Operating room nursing has also become active care. Humanized nursing has improved the language expression ability of nurses, promoted the development of comprehensive quality of nurses, effectively improved the quality of nursing, and avoided certain risks.

The clinical nursing pathway is the nursing mode during the patient's hospitalization. For the specific patient group, the time is the horizontal axis, and the schedule is based on the admission guidance, the diagnosis, the examination, the treatment, the nursing, and the discharge guidance. , detailing and recording the specific circumstances of the patient during the hospital treatment. The implementation of the clinical care pathway once again shows that the nursing work is not blindly mechanical, but that it is necessary to follow the doctor's advice or at the doctor's instructions, with targeted, predictive and targeted treatment and care plans for the patient. Caesarean section has become a self-selected mode of production for many women. Before the operation, the mother is assisted to complete routine examinations, psychological intervention and psychological counseling can ensure that the maternal body indicators meet the surgical standards and lay the foundation for the successful completion of the operation. Post-operative monitoring and management of the mother can reduce the possibility of postoperative complications, improve the prognosis, and improve the quality of life of cesarean section women. Through effective communication and communication, nursing staff and patients can establish an effective communication bridge, which can reduce the incidence of medical disputes in hospitals and facilitate the harmonious development of doctor-patient relationship. The results of this study showed: (1) in terms of complications: 5.20% in the observation group and 16.90% in the control group. It can be clearly seen from the comparison of this data that the women who performed the clinical nursing path had bleeding after surgery. Infection and incision are less likely to heal. (2) In terms of satisfaction, the observation group was 97.40%, which was significantly different from the control group of 84.42%. This result is similar to the results obtained by Zhang Xiaofeng in the study. It can be seen from this study that compared with traditional conventional obstetric care, the nursing advantage of clinical nursing path is more obvious, and the application value is higher, systemic and prognosis is improved in reducing postoperative complications and improving satisfaction.

5. Conclusion

The clinical nursing path of the operating room for cesarean section has obvious clinical nursing effect. On the one hand, it can reduce the incidence of postoperative complications and improve safety. On the other hand, maternal satisfaction is high, which is conducive to the benign development of doctor-patient relationship.

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