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Effect of implementing a nursing management protocol on the postoperative health outcomes for patients undergoing radical cystectomy with urinary diversion

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Background: Bladder cancer (BC) is the most common malignancy of the urinary tract, the 7th most common cancer in men and the 17th in women. Radical cystectomy is the primary treatment for patients with muscle-invasive bladder cancer, whereas alternative treatments are reserved for patients with extensive comorbid conditions or poor performance status. Radical cystectomy involves removal of the urinary bladder and associated organs; the prostate in men, and the uterus, ovaries, and part of the vagina in women. It was observed that the numbers of patients with BC requiring radical cystectomy accompanied with urinary diversion are increasing. These patients require meticulous collaborative care to improve the overall physical and psychological well-being. Nursing management protocols are a way of documenting and communicating patient care and should include daily aims, such as mobilization, that increased day by day.

Patient and method: A convenience sample of 50 adult patients admitted to the Urology Department at Alexandria Main University Hospital. The subjects of the sample meeting the previously mentioned criteria were sequentially divided into two equal groups; the first was the study group and comprised 25 patients and they received the nursing management protocol. The second was the control group which, comprised 25 patients and exposed to routine care only. Data collected through; demographic data, knowledge assessment sheet, self-care skills observation, quality of life assessment, and patient's satisfaction. Nursing management protocol was designed by the researcher. It was written and summarized in a simple Arabic language and supplemented by photos and illustrations to help the patient understand the content.

Results: Results showed that the study results revealed that most of the patients of the study and control group had poor knowledge pre-application protocol of nursing care, while most of the study group had fair knowledge after application of proposed protocol of nursing care. Overall total scores of functional mobility & activities with a mean (17.88 ± 1.27), were improved significantly in the study group immediately after application nursing management protocol compared with the control group. Overall total scores of caring for stoma with a mean (18.72 ± 0.98) were improved significantly in the study group after one & half months of application of nursing management protocol compared with the control group. Mean scores for each domain of patient's quality of life, including physical health, psychological health, social relationships, and environment were improved significantly in the study group after one & half month of application of nursing management protocol and the improvement was significant differences between the two groups in post protocol in all items.

Conclusion: Applying the nursing management protocol had statistically significant improvement in knowledge, self-care skills and quality of life for studied patients undergoing radical cystectomy with urinary diversion postoperatively than their controls.

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