

Session 4.8
Informatics Track

Abstract Title:

Experience in the Implementation of the Standardized and Computerized Care Plan for Patients with Total Laryngectomy

Presenter:

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Intended Audiences:

Clinicians, Informaticists

Areas of Focus:

Informatics, Use in Practice

Research Format:

For Research Reports

PURPOSE: To identify the degree of implementation of the care plan for patients with total laryngectomy.

METHODS: This was a descriptive study. The subjects of the study were patients hospitalized during the years 2005 and 2006 in the Otolaryngological Service of the University Hospital Reina Sofía de Córdoba (Spain), for surgical total laryngectomy. The instrument was a standardized and computerized Nursing Care Plan, containing assessment of the health condition, diagnostic labels, according to NANDA taxonomy, expected results according to the NOC taxonomy, nursing interventions according to the NIC taxonomy, possible complications, therapeutic requirements and continued care report at discharge.

FINDINGS: With 120 patients admitted, 92 Nursing Care plans were performed. In the assessment of health condition, 100% of the patients are able to perform daily activities, 95% had dysphonia, 92% smoke more than 20 cigarettes a day, 80% drink alcohol daily, and 100% present with anxiety assessed with the Goldberg scale. The Diagnostic Labels used were: Anxiety, 88.63%; Deterioration of physical mobility, 68.18%; deficient knowledge, 61.36%; Deterioration of verbal communication, 86.63%; Risk of infection, 75%; Deterioration of verbal communication, 86.36%; Risk of situational low esteem, 54%; Risk of deterioration of skin integrity, 63.63%. The most used NOCs were Anxiety Control, 97.43%; Mobility Level, 100%; Infectious Condition, 96.96%; and Risk Control, 84.84%, Capacity to communicate, 97%; Body Image, 100%; Knowledge of Therapeutic Regimen, 61.36%; and Tissue Integrity: 96.42%. With respect to possible complications, interventions showed 75% in drainage care; 100% in surveillance; 98.5% in handling of artificial airways, and 87.5% in pain management. The main nursing diagnoses in the individualization of the care plan was willingness to improve knowledge, 68.14%. In the continued care report, 68% included the willingness to improve knowledge diagnosis, 100% included Deterioration of verbal communication, and 60% included risk of deterioration of skin integrity.

CONCLUSIONS: In seven out of 10 patients, all diagnoses proposed were used in the standardization of the Nursing Care Plan. The main nursing diagnoses were anxiety and deterioration of verbal communication. In the continued care report, six out of 10 included the willingness to improve knowledge diagnosis, 100% included deterioration of verbal communication, and six out of ten include the risk of deterioration of tissue integrity diagnosis.

Citations: None