



Service Priorities and Programmes
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TAVI-education-video is equal to individual patient education for patients undergoing Transcatheter Aortic Valve Implantation (TAVI)

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Introduction

Patient education enhances patients' knowledge about the Transcatheter Aortic Valve Implantation (TAVI), gains cooperation during and after TAVI, improve compliance after going home. Individual patient education has showed its effectiveness in knowledge enhancement via tailored made information according to patients' needs. Individual patient education, however, requires a designated nurse to be available for TAVI education who may be occupied by other nursing duties and is not always available.

Objectives

In order to ensure the continuity of TAVI patient education it is proposed that a TAVI-education-video is equal to the individual patient education which results in similar knowledge acquisition and retention.

Methodology

Knowledge scores after education (T1) and upon discharge after TAVI (T2) are compared between individual patient education and TAVI-education-video groups.

Result

There were 29 patients received a designated nurse individual patient education before TAVI in a local hospital from April 2015 to March 2017 (M = 17, F = 12; mean age = 80.83). Patients' knowledge scores were 4.52 after education (T1) and 5.14 upon discharge after TAVI (T2). Patients retain the information for a period of time after education.

In June 2017 an alternative method of patient education - TAVI-education-video was produced and shown to patients when they clinically admitted for pre-TAVI-operative workup. The video allowed patients receiving similar education but did not rely on the availability of the designed nurse. Nurses asked patients to watch the video, assessed their TAVI knowledge before watching the video (T0) and after watching the video (T1). From June to December 2017 9 patients (M=4, F = 5; mean age = 76.78) watched the video and their knowledge increased from 2.44 (T0) to 4.78 (T1) ($p < 0.005$) and maintained their knowledge upon discharge after TAVI at 4.89 (T2). Comparing T1 and T2 there is no difference between those two groups (p value = 0.72 and 0.62).

This interim evaluation shows that TAVI-education-video is equal to individual patient education which enables nurses do other nursing care and empowers patients in their self-care after TAVI via watching the video.