

Service Priorities and Programmes Electronic Presentations

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Specific Dressing Review To Percutaneous Nephrostomy (PCN) Drain Care

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Introduction

There are some problems regarding the PCN care encountered in surgical units and CNS at Caritas Medical Centre (CMC). After a retrospective reviewed of 77 inpatient charts from Jan to Sept, 2017, we noted the following problems:

- 1. Kinking and twisting of PCN catheter (9.62%) leading to outlet obstruction which poor monitoring of urine output from PCN and deterioration of renal function resulted.
- 2. Easily dislodgement of PCN catheter (42.31%), which increased staff workload due to subsequent management required.
- 3. Soiling around PCN wound (36.54%) which affected patient's general hygiene and might increase risk of infection.
- 4. Patient expressed discomfort with the existing dressing materials (keyhole gauze & Mefix by patient's verbal complaint which was no statistical written down).

Objectives

- 1. To improve patients' level of comfort after revising on the dressing materials and method.
- 2. To enhance patients' awareness of wound / catheter problem.
- 3. To increase both patients and staff's satisfaction towards PCN care.
- 4. To compare the cost-effectiveness between a commercial kit and traditional method on dressing for PCN.

Methodology

After consulting with the wound specialists, the use of Tegaderm was preferable than the traditional Mefix. It was because Tegaderm has made use of transparent dressings, which could enhance the extent of observation done by patients. In addition, trials have been done in decreasing the frequency of dressings from twice weekly to once weekly (plus ad hoc dressing whenever necessary). Changes were introduced in the surgical wards and CNS. Regular reviews and

evaluation on the revised method has been conducted.

Later, Duoderm Extra Thin was being added to the shaft & knot of the pigtail catheter,

while the newly developed Omega dressing method was also applied. In order to allow easy removal of the dressings, a small piece of gauze has been applied in between the PCN catheter and the Duoderm.

Result

A total of 52 questionnaires regarding users' level of satisfaction were sent with 45 responses (41 staff and 4 patients). The response rate was 86.53% while approximately 78% showed their keen on undergoing the revised method. Additionally, despite the decrement in the frequency of dressings as mentioned above, no dislodgement or signs of infection were reported. Finally, the revised dressing method also showed cost effectiveness when comparable to a commercial kit.