

# Service Priorities and Programmes Electronic Presentations

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A Unique Experience on Educating Parents of Children with Vascular Anomalies in a Paediatric Vascular Anomalies Nurse-led Clinic

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### **Keywords:**

Vascular Anomalies

# **Introduction**

Upon the establishment of a vascular anomalies team at Queen Elizabeth Hospital in 2009, the management of children with vascular anomalies has been standardized through the utilization of a comprehensive clinical pathway. From our experience, children with vascular anomalies and their families usually have some myths and misconceptions on the disease and its management, which are partly attributed to the limited information on this topic in Hong Kong and the fact that most available materials are in English, with full of medical jargons. To address these issues, lengthy discussions during the doctor-led joint clinic are often required, which have been translated into the over-running of clinics. To solve this problem, a nurse-led clinic has been set up in August 2011, with the objective of providing information to children with vascular anomalies, and also their families.

## **Objectives**

We repot our unique experience on educating parents of children with vascular anomalies in our Paediatric Vascular Anomalies Nurse-led Clinic.

#### Methodology

Visual materials are useful in drawing people's attention, and may enhance understandings in education classes. PowerPoint slides on vascular anomalies have been prepared and validated by our paediatric surgery consultant. Etiology of vascular anomalies, investigations, various treatment options, pre- and post-treatment photos, possible complications, and prognosis have been summarized in around 60 slides.

#### <u>Result</u>

From August 2011 to January 2013, a total of 35 paediatric patients were referred to us and their caregivers were invited to attend our clinic. The attendees include 15 fathers, 31 mothers, 1 grandfather, 3 grandmothers and 1 auntie. After the education class, all of them expressed having a better understanding on vascular anomalies. None of them requests further explanation from doctor. In addition, all of them decided to have their children receiving our recommended treatment options in the same clinic session. Although some of them had emotional problems, such as sadness, a sense of isolation and guilty, they felt better after having more information on vascular anomalies, and upon clarification of their misconceptions and ventilating their

previous unpleasant experience. None of them required psychologist referral. All attendees were invited to complete the evaluation form after the clinic visit. Forty-three out of 51 forms were returned for analysis. All of them rated our service as good or above, with 67% and 33% rated as excellent and good respectively. In conclusion, our Paediatric Vascular Anomalies Nurse-led Clinic has been running smoothly for the past one year. Our clinic provides services on education, counseling and post-treatment monitoring; while at the same time reduces the workload of the doctor-led joint clinic.