



Service Priorities and Programmes
Electronic Presentations

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Submitting author: Ms WAI PING MAK

Post title: Advanced Practice Nurse, Yan Chai Hospital, KWC

Extended nursing practice in early discharged post total joint replacement patients

Mak WP, Chung E, Yeung E, Lee Q J, Wong YC, Wai YL

Department of Orthopaedic & Traumatology, Yan Chai Hospital

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Introduction

Total hip and total knee replacements are common surgical procedures which had been proven to greatly improve the quality of life in patients with arthritic joints, by providing pain relief and functional improvement. The length of stay in hospital of these procedures had been reduced since an accelerated discharge protocol had been introduced in our units. However, with shorter hospital stays, there is a possibility of an increase in adverse clinical outcome or missed complication. Early follow-up assessment for compliance of pre-discharge education and recognition of complication with timely intervention is important for these patients following discharge.

Objectives

- To monitor patients' compliances for the pre-discharge education - To identify complication early with timely intervention - To provide continuous post-discharge care and support - To reduce the chances of an adverse clinical outcome - To enhance nursing professionalism - To reduce hospitalization cost

Methodology

1. Orthopaedic specialty nurse would conduct ward based follow-up assessment to total joint replacement patients two weeks after surgery. 2. General, wound and post-operative leg assessment were performed in this follow-up session. 3. Post-discharge education, advice and counseling would be provided and reinforced. 4. Early medical advice, physician follow-up or direct referral would be arranged as necessary.

Result

From 1st October 2011 to 31st December 2012, 592 patients had undergone total joint replacement surgery and 99.8% of patients returned directly to their home environment. Five hundred and eighty-four patients attended the ward follow-up by the orthopaedic specialty nurses two weeks after surgery. Patients had expressed great appreciation for the early identification and clarification of any misunderstanding or problems. With this timely intervention, any potential post-operative complications

could be minimized. Patients had given good feedback and were satisfied with the post-discharge follow-up care. With this arrangement, there was no increase in the post discharge complication rate. The nurses' participation in pre and post operative education and assessments can provide improved quality of care and facilitate early discharge of the patients. Their role in such primary and secondary care in monitoring and identifying complications contributes significantly to the cost effectiveness of the service.