



Service Priorities and Programmes
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Pilot study of early detection of asymptomatic Acute Retention of Urine among acute stroke patients

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Introduction

According to HA Guidelines and Specialty Nursing Services - Stroke Care Guidelines, bladder function and post-voided residual urine PVRU of acute stroke patients should be monitored after admission. PVRU(Post void residual urine) screening was suggested to be performed for all patients immediately post stroke, especially in those with aphasia, cognitive impairment, a poorer functional status, and diabetes mellitus. Previous study (Gelber et al, 1994) found that urinary retention was associated with large infarcts, urinary incontinence, and functional disability. The significance of urinary retention included predisposing to UTI which may increase the length of stay. It was found that no catheterization policy or standardized continence assessment tool was in use and documentation was often lacking in the case notes review of acute stroke admissions. Moreover, nurses are given little training and support in continence care.

Objectives

1. Early detection of asymptomatic AROU among post stroke ROU patients.
2. Facilitate prompt nursing intervention to patients with post stroke ROU.
3. Enhance nursing staffs' awareness and knowledge on post stroke ROU management.
4. Improve nursing documentation about post Stroke ROU.

Methodology

1. A flowchart is constructed to facilitate the workflow of prompt assessment of PVRU after the new admission of stroke patients to UCH ward 2C and 9B. All acute stroke patients should be monitor PVRU within 24 hours after admission.
2. Education sessions of nursing management on post stroke ROU is organized.
3. PVRU of acute stroke patient was recorded and the number of patients with ROU, any Foley inserted after MO/HO informed, signs and symptoms of dysuria and any abnormal result of urine multi-stix was analyzed.

Result

Total 25 patients(12 male & 13 female) were recruited and screened. 4(16%) patients

with AROU detected. Among these 4 patients, all had no previous continence problem before admission with urine stix WCC negative finding. 1(25%) out of 4 had no sign and symptoms of dysuria. Conclusions: All acute stroke patients' PVRU should be screened to early detect asymptomatic AROU. Nursing staffs' awareness and knowledge on post stroke AROU management was enhanced. Nursing documentation about Post Stroke ROU was improved. Further study and data collection on post-stroke ROU, correlated to pathology of stroke, is worthy.