

Design and Application of Nursing Record Sheet and Operation Registration Form for Ophthalmic Daytime Operation

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Received: January 13, 2022

Accepted: February 15, 2022

Online Published: March 31, 2022

doi:10.20849/ijns.v7i1.1082

URL: <https://doi.org/10.20849/ijns.v7i1.1082>

Abstract

Objective: To explore the effect of nursing record sheet and operation registration form in daytime ophthalmic surgery. **Methods:** the nursing record sheet and operation registration form of daytime ophthalmic surgery were designed and used to evaluate the incidence of adverse events and the satisfaction of doctors in the operating room before and after use. **Results:** from January 2018 to June 2019, there were 15 adverse events caused by unclear handover, wrong record, wrong eye classification, wrong application of antibiotics and waiting for surgical consumables in ophthalmology due to nursing record, with an incidence of 3.71%; From July 2019 to December 2020, there were only 2 cases of ophthalmic defects caused by the record sheet, with an incidence of 0.42%; The difference was statistically significant ($P=0.00095$). When the daytime ophthalmic surgery nursing record sheet was not used from January 2018 to June 2019, the satisfaction of ophthalmic surgeons was 71%, and after using the daytime ophthalmic surgery nursing record sheet from July 2019 to December 2020, the satisfaction of ophthalmic surgeons increased to 96%. **Conclusion** the design of daytime ophthalmic surgery nursing record sheet is reasonable and convenient, which can effectively ensure the quality of daytime ophthalmic surgery nursing, improve work efficiency and improve job satisfaction of surgeons.

Keywords: daytime surgery, nursing records, ophthalmic surgery

1. Introduction

With the continuous development of medical technology and the growth of medical demand caused by population aging, daytime surgery is gradually popularized and popularized in China. Ophthalmic surgery mostly adopts surface anesthesia, subconjunctival anesthesia and retrobulbar anesthesia. The operation time is short, and there are few intraoperative and postoperative bleeding and complications (An, Y., & Wang, Z.-J., 2007). It is suitable for daytime surgery. The ophthalmic clinic found patients suitable for daytime surgery, improved preoperative examination, eliminated surgical contraindications, improved operation on the operation day, discharged on the same day, and returned to the clinic on the second day (Wang, P., Yu, F.-F., & Li, Y., 2020). Although the period of day surgery in our hospital is late and the types of surgery are few, with the development of medical technology and the improvement of surgical skills, the number of day surgery has increased rapidly in the near future. Our department of ophthalmology has carried out daytime operations, including cataract phacoemulsification combined with intraocular lens implantation, pterygium excision combined with tissue transplantation, vitreous cavity puncture and drug injection, eyelid eversion correction, etc. Patients with high-risk surgery are still hospitalized.

Due to the large amount of daytime operations and fast pace of work, a large number of nursing staff are required to participate before, during and after operation, and the incidence of adverse events is high, which brings great challenges and risks to nursing work. How to standardize the management of daytime surgical nursing, improve nursing efficiency and save medical resources. Therefore, we designed and made the ophthalmic daytime surgical nursing form and daytime surgical registration form of Inner Mongolia forestry general hospital. The report is as follows:

2. Data and Methods

2.1 General Information

From January 2018 to June 2019, 404 cases of daytime ophthalmic surgery were completed in our hospital. The nursing record sheet of daytime surgery and the registration form of daytime surgery were not used. It was designed as the control group; Our department began to use the nursing record sheet and operation registration form of daytime ophthalmic surgery since January 2018. From July 2019 to December 2020, a total of 479 operations were completed and set as the experimental group. The included patients included cataract phacoemulsification combined with intraocular lens implantation, pterygium excision combined with tissue transplantation, and vitreous cavity puncture and drug injection. ECG and chest X-ray were improved before operation. Laboratory examination included liver and kidney function examination, blood glucose, blood analysis, urine analysis and coagulation. The abnormal results should be included in the day operation after medical consultation and treatment. Control blood pressure < 150/100 mmHg; Fasting blood glucose was less than 8.3 mmol/L, and the time after cardiopulmonary surgery was more than half a year.

2.2 Method

2.2.1 Ophthalmic Daytime Operation Process

2.2.1.1 Ophthalmic Daytime Operation Process and Specification Development

The design group is composed of 3 nursing staff of ophthalmic nursing professional group, 2 itinerant nurses in ophthalmic operating room, 2 ophthalmic surgeons and 1 ophthalmic outpatient. After discussion, the design summarizes the current workflow of daytime ophthalmic surgery in our hospital from outpatient - preoperative - admission - intraoperative - postoperative - follow-up.

2.2.1.2 Design the Nursing Record Sheet and Operation Registration Form of Daytime Ophthalmic Surgery

The ophthalmic day operation nursing record sheet includes the patient's operation date, basic information, operation name, eye type, operation verification, patient preparation, operation status, nursing handover and verification and personnel signature. See Table 1; The operation registration form mainly includes operation table number, patient information, eye type, operation method, consumables, date and check the signature of doctors and nurses, as shown in Table 2.

Table 1. Daily operation nursing record

Essential Information:	Name:	Male or Female	Age:	Eye type: OD OS OU
Operation name:	Phaco+IOL Pterygium excision + tissue transplantation Conbercept Lucentis Zaltrap			
Surgical verification:	Eye; Surgical identification; Antibiotic; Consumables; Informed consent for surgery			
Patient preparation:	Blood glucose and blood pressure were stable; Bladder emptying; Surface hemip; Mydriasis; Isolation suit			
Operation:	Start time:	End time:		
Handover signature:				
Operation date:				

Table 2. Daytime operation registration form

Ophthalmic day surgery registration form							
Checked by: nurse:							
Operating table times	Name	Gender	Age	Eye type and operation method	Consumables	Remarks	
1							
2							
3							
...							

2.2.1.3 Clinical Application

The daytime ophthalmic surgery nursing record sheet and daytime surgery registration form designed by our department more clearly and accurately indicate the patient’s operation date, basic information, operation name, eye type, operation verification, patient preparation, operation situation, nursing handover and verification and personnel signature, so as to avoid nursing handover errors and waiting for consumables during operation. Objective quantitative data can reduce the recording errors of nursing supervisors and improve the efficiency and quality of nursing records.

2.2.2 Statistical Methods

Use SPSS 20.0 statistical software was used to evaluate the incidence of adverse events (eye mark error, wrong point, missing point antibiotics, intraoperative waiting consumables, etc.) and the satisfaction of surgeons before and after the use of daytime ophthalmic surgery nursing record sheet and operation registration form. Chi square test was used for comparison between groups. $P < 0.05$ was regarded as the statistical difference.

3. Results

From January 2018 to June 2019, there were 15 adverse events caused by unclear handover, wrong record, wrong eye classification, wrong application of antibiotics and waiting for surgical consumables in ophthalmology due to nursing record, with an incidence of 3.71%; From July 2019 to December 2020, there were only 2 cases of ophthalmic defects caused by the record sheet, with an incidence of 0.42%; The difference was statistically significant ($P = 0.00095$), as shown in Table 3. When the daytime ophthalmic surgery nursing record sheet was not used from January 2018 to June 2019, the satisfaction of ophthalmic surgeons was 71%, and after the daytime ophthalmic surgery nursing record sheet was used from July 2019 to December 2020, the satisfaction of ophthalmic surgeons increased to 96%.

Table 3. Comparison of nursing adverse events

Group	Number of daytime operations	Eye mark error	Wrong point and missing point	Intraoperative waiting consumables	Total adverse events	Incidence of adverse events
Control Group	404	2	2	11	15	3.71%
Experience Group	479	0	1	1	2	0.42%
P						0.00095

4. Conclusion

4.1 Improve Work Efficiency and Surgeon Satisfaction

The results showed that the ophthalmic daytime operation nursing sheet and ophthalmic operation registration form could effectively reduce the occurrence of adverse events, including eye marking errors, errors and missing antibiotics, and improve the nursing efficiency. The marking, preparation and verification of surgical

consumables in advance reduce the waiting for consumables during operation, significantly improve the job satisfaction of surgeons, reduce the recording errors of nursing supervisors with objective quantitative data, improve the efficiency and quality of nursing records, reduce the complicated verification items of nursing work, and improve the work efficiency. This study is consistent with the comprehensive process management reported by Wu Xiuyuan and others, which can effectively reduce the incidence of nursing adverse events; And it can reduce complicated and repeated check items and improve work efficiency. (Wu, X.-Y., & Wang, Y.-L., 2005)

4.2 Standardize and Guide Clinical Nursing Work

The application of ophthalmic day operation nursing record sheet and operation registration form, with the help of electronic and network office means, ophthalmic nurses's self-examination and nursing department quality control, can standardize and guide clinical nursing work. The daytime operation nursing record sheet and the daytime operation registration form clearly mark the key items. It is more convenient for the nursing department, doctors and sensory control personnel to review the patient's vital signs, operation items, eyes, medication, consumables, special tests and other key items. The standardized and unified record sheet can effectively show the standardization of ophthalmic nursing workflow, which can avoid the randomness and subjectivity of ophthalmic nurses, making nursing records more objective and accurate. (Song, J.-P., Cheng, Y.-J., & et al., 2003)

4.3 It Is Conducive to Patient Safety Management and Reduce Doctor-Patient Disputes

Nursing record is an objective manifestation of the nursing process during operation and an important legal document. When medical disputes occur, the text content in nursing records can become a legal basis. Ophthalmic daytime surgery has a large workload, tight rhythm and high risk of surgical nursing, which has become an important entry point for doctor-patient disputes, and the safety of surgical patients is related to all links of diagnosis and treatment (Ji, A.-Q., & Xie, B., 2007; Zhang, M.-Q., Wu, Y.-J., & et al., 2010). The daily ophthalmic surgery nursing record sheet has a clear and detailed process, and the operation of each node is more standardized. The nurses check and check according to the form, reduce work errors and omissions, ensure the safety of surgical patients to the greatest extent, improve the Department's patient safety management, increase the positive role, better serve patients and improve patient satisfaction. (He, X.-X., 2015)

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