

探讨产科失血性休克危急重症患者的综合护理策略

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【摘 要】:目的:为不断提升对于产科失血性休克危急重症患者的恢复质量以及恢复速率,本次研究将深入探析产科失血性休克危急重症患者的各项护理措施,进而提升对于此类患者的整体护理质量。方法:选取于 2020 年 3 月至 2022 年 4 月,我院收治的产科失血性休克危急重症患者共 110 例,作为本次研究对象。采用随机数字分组的方式,按照随机性原则将 110 例患者随机分为对照组以及观察组。对对照组中的患者采用常规的护理模式进行干预;对观察组中的患者采用常合护理模式进行干预。在完成整套护理措施之后,对比分析对照组以及观察组的护理满意度;患者的失血状况、住院时间、休克纠正时间;围产儿不良结局情况;以及子宫全切除率。结果:经过护理干预之后,观察组在护理满意度;患者的失血状况、住院时间、休克纠正时间;围产儿不良结局情况;以及子宫全切除率方面明显优于对照组,其中(P<0.05),差异具有统计学意义。结论:在对产科失血性休克危急重症患者进行护理干预的过程中,需要明确护理的重点,根据患者实际情况制定出相应的护理计划,进而才能提升患者的恢复质量以及恢复速率,对产科失血性休克危急重症患者采用综合护理模式进行干预,能够有效的提升患者的护理满意度,同时能够显著改善患者的失血状况、住院时间、休克纠正时间;围产儿不良结局情况;以及子宫全切除率,在实际应用中具有优良的效果,值得进一步的推广与应用。

【关键词】: 产科失血性休克危急重症患者; 综合护理; 护理满意度; 围产儿不良结局情况; 子宫全切除率; 失血状况、住院时间、休克纠正时间

To Explore the Comprehensive Nursing Strategy of Critical Patients with Obstetric Hemorrhagic Shock

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Abstract: Objective: In order to continuously improve the recovery quality and recovery rate of critical and severe patients with obstetric hemorrhagic shock, this study will deeply explore various nursing measures for critical and severe patients with obstetric hemorrhagic shock, so as to improve the overall nursing quality of such patients. Methods: A total of 110 critical patients with obstetric hemorrhagic shock from March 2020 to April 2022 were selected as the subjects of this study. 110 patients were randomly divided into control group and observation group according to the principle of randomization. The patients in the control group were intervened with conventional nursing mode; The patients in the observation group were intervened with comprehensive nursing mode. After completing the whole set of nursing measures, the nursing satisfaction of the control group and the observation group was compared and analyzed; Blood loss status, hospitalization time and shock correction time of patients; Adverse perinatal outcomes; And total hysterectomy rate. Results: After nursing intervention, the observation group was satisfied with nursing; Blood loss status, hospitalization time and shock correction time of patients; Adverse perinatal outcomes; The total hysterectomy rate was significantly higher than that of the control group (P<0.05). Conclusion: In the process of nursing intervention for critical and severe patients with obstetric hemorrhagic shock, it is necessary to define the focus of nursing and formulate corresponding nursing plans according to the actual situation of patients, so as to improve the recovery quality and recovery rate of patients. Comprehensive nursing intervention for critical and severe patients with obstetric hemorrhagic shock can effectively improve patient satisfaction, At the same time, it can significantly



improve the bleeding condition, hospitalization time and shock correction time of patients; Adverse perinatal outcomes; As well as the total hysterectomy rate, it has excellent effect in practical application, and is worthy of further promotion and application. Keywords: Critical patients with obstetric hemorrhagic shock; Comprehensive nursing; Nursing satisfaction; Adverse perinatal outcomes; Total hysterectomy rate; Blood loss condition, hospitalization time, shock correction time

前言

[1-2]
[3-4]
1%-3%
[5]

2020 3 2022 4 110

1 资料与方法

1.1 60mmIIg 2020 3 2022 4 110 PLT 110 55 29-38 32.36 ± 2.02 25 30 1-3 $1.64 \pm\ 0.80$ 55 29-38 26 32.36 ± 2.02 29 1-3 $1.36 \pm\ 0.79$ 1.3

P 0.05

1.4

1.2

1.2.1 $x = x \pm s$ 1.4

1.2.1 $x \pm s$ 9

P<0.05

3

1.2.2



2 结果				3.64%			
2.1							10
				P 0.05		18.209	% 2=5.98 P=0.014
					3 讨	论	
		16	29.09	%			
	26	47.27%		13			
23.64%			76.3	66%			
		39	70.91	%			[7-8]
	14	25.45%		2			
	3.64%		96.36	%			
2=9.34	0 P=0.002						
2.2							
P 0.05							
1681.50± 241.40 ml							
1279.62± 248.70 ml t=8.599 P=0.001							
450.10± 43.32 ml							
	374	4.75 ± 30.55 ml	t	=10.542			
P=0.001							
	37.69± 8.61 min				参考:	文献:	
	2	2.43 ± 7.02 min	. t	=10.187	[1]	•	
P=0.001						[J].	,2022(01):117-118.
		11.49 ± 2.13			[2]		
	7.41 ± 1.12	d t=12.57	′3 P=0.	001		[J].	,2021(14):159-160.
2.3					[3]	,	,
				P			[J].
0.05					,2021,3	1(03):142-144	4.
			1		[4]		
	1.8	2%				[J].	,2019,23(02):226-227.DOI:10.
		9 19435/j.1672-1721.2019.02.052.					
	16.	36% 2=	7.040	P=0.008	[5]		
2.4					[J].	,20	18,8(22):160-162+196.
		2					

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