



早期护理对肺叶切除患者术后肺栓塞的预防作用研究

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【摘 要】: 目的: 分析探讨早期护理对肺叶切除患者术后肺栓塞的预防作用。方法: 选取我院 2021 年 12 月-2022 年 12 月接收行肺叶切除患者 80 例为观察对象,随机将其分为观察组与对照组,其中对照组患者采用常规护理,观察组患者采用早期护理,将两组患者术后恢复情况、肺栓塞等并发症发生情况、患者护理满意度以及生活质量进行比较。结果: 观察组术后入住 ICU 时间、下床活动时间以及住院天数用时均低于对照组,数据对比差异有统计学意义 (P<0.05); 观察组术后发生肺栓塞、肺不张等并发症风险低于对照组,数据对比差异有统计学意义 (P<0.05); 观察组扩理满意度调查结果显示高于对照组,数据对比差异有统计学意义 (P<0.05); 观察组生活质量高于对照组,数据对比差异有统计学意义 (P<0.05)。结论: 早期护理对肺叶切除患者具有重要应用价值,能降低术后肺栓塞等并发症发生率,提高护理效果与患者满意度,预后良好,值得应用于临床护理中。

【关键词】: 早期护理; 肺叶切除术; 肺栓塞; 预防作用

Study on the Preventive Effect of Early Nursing on Pulmonary Embolism after Lobectomy

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Abstract: Objective: To analyze the preventive effect of early nursing on pulmonary embolism after lobectomy. Methods: Eighty patients who received lobectomy in our hospital from December 2021 to December 2022 were selected as the observation objects. They were randomly divided into the observation group and the control group. The patients in the control group were given routine nursing care, while the patients in the observation group were given early nursing care. The postoperative recovery, pulmonary embolism and other complications, patient satisfaction and quality of life of the two groups were compared. Results: The time of stay in ICU, time of getting out of bed and time of hospitalization in the observation group were lower than those in the control group, and the difference was statistically significant (P<0.05); The risk of pulmonary embolism, at electasis and other complications in the observation group was lower than that in the control group, and the difference was statistically significant (P<0.05); The survey result of nursing satisfaction in the observation group was higher than that in the control group, and the difference was statistically significant (P<0.05); The quality of life in the observation group was higher than that in the control group, and the difference was statistically significant (P<0.05). Conclusion: Early nursing has important application value for patients with lobectomy, can reduce the incidence of complications such as pulmonary embolism after operation, improve the nursing effect and patient satisfaction, and has a good prognosis, which is worth applying in clinical nursing.

Keywords: Early nursing; Lobectomy; Pulmonary embolism; Preventive effect



[2]

1 资料及方法

1.1

2021 12 -2022 12 80 ①

1.2 1.2.1

1.2.2

5 8-9

1:2 1:3

10-15 3 ICU

> 1-2 5 10

1.3





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100
  1.4
   SPSS 20.0
                      x ± s
                                          [5]
                                 t
                                 P<0.05
  2 结果
  2.1
ICU 1.20± 0.08 d
                             1.51 \pm 0.32
                           ICU
         7.04\pm\ 2.12 d
                                                                          [3]
 1.98± 0.20 d
                          2.53 \pm 0.06 d
       8.62 \pm 2.31 d
                         P<0.05
 2.2
   1 2.5%
                     1 2.5%
 1 2.5%
                   0.0%
   6 15.0%
                    7
                         17.5%
 5 12.5%
                   3
                         7.5%
                                             参考文献:
 P<0.05
 2.3
                                             [1] , ,
                            9.5 \pm 1.32
                                                                   [J].
           9.3 \pm 1.13
                                   8.9
                                            , 2019, 13(17):2.
                       9.11 \pm 1.24
\pm 1.01
                                             [2] ,
         9.45 \pm 1.24
                                                                   [J].
         6.4 \pm 1.21
                            5.2 \pm 1.02
                                          2018,35(5):3.
               5.4 \pm 1.04
                                             [3] .
                                                           [J]. ,2019,6(028):99.
  6.22 \pm 1.35
                           6.35 \pm 2.31
                                             [4] ,
               P<0.05
                                                         [J].
                                                                  ,2021, 027(006):
  3 讨论
                                          1051-1052.
                                             [5] .
                                                                  [J].
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[3-4]