

VTE 风险评估+分级护理干预在 aSAH 术后昏迷患者中的应用价值

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【摘要】：目的：探究静脉血栓栓塞（venous thromboembolism, VTE）风险评估联合分级护理干预，在重度动脉瘤性蛛网膜下腔出血（Severe aneurysmal subarachnoid hemorrhage, aSAH）术后昏迷患者中的价值。方法：回顾本院 2021.1--2021.12 月之间本院收治的 aSAH 术后昏迷患者 17 例展开调查，依据双盲法分组，分入对照组（n=13）中施行针对 aSAH 术后昏迷患者的常规护理，分入观察组（n=14）中施行针对 aSAH 术后昏迷患者的 VTE 风险评估+分级护理干预。以 VTE 风险评估表统计患者不同风险等级占比；自制调查问卷统计两组患者反馈的护理满意度；采取格拉斯哥昏迷评分量表（Glasgow coma scale, GCS）对比患者护理后的意识状态。结果：观察组无风险占比 50%；低风险占比 28.6%；中风险占比 14.3%；高风险占比 7.1%；对照组无风险占比 30.8%；低风险占比 38.5%；中风险占比 15.4%；高风险占比 15.4%。观察组整体风险低于对照组。观察组总满意率为 92.9%，对照组总满意率为 84.6%。观察组轻度昏迷 71.4%；中度昏迷 21.4%；重度昏迷 7.1%；对照组轻度昏迷 38.5%；中度昏迷 38.5%；重度昏迷 23.1%。观察组患者整体意识水平高于对照组（ $P<0.05$ ）。结论：aSAH 术后昏迷中开展静脉血栓栓塞风险评估以及分级护理干预，可促使患者意识清醒，有效降低血栓风险，对术后昏迷患者提供安全保障。

【关键词】：VTE 风险评估；分级护理干预；aSAH 术后昏迷

Application Value of VTE Risk Assessment and Graded Nursing Intervention in Patients with Coma after aSAH

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Abstract: Objective: To explore the value of risk assessment of venous thromboembolism (VTE) combined with graded nursing intervention in coma patients after severe aneurysmal subarachnoid hemorrhage (aSAH). Methods: A retrospective study was conducted on 17 patients with postoperative coma after aSAH admitted to our hospital from January 2021 to December 2021. According to the double-blind method, they were divided into the control group (n=13) for routine nursing care of patients with postoperative coma after aSAH, and the observation group (n=14) for VTE risk assessment and graded nursing intervention of patients with postoperative coma after aSAH. VTE risk assessment table was used to calculate the proportion of patients with different risk levels; Self made questionnaire was used to analyze the nursing satisfaction of the two groups; Glasgow coma scale (GCS) was used to compare the consciousness of patients after nursing. Results: 50% of the patients in the observation group had no risk; Low risk accounted for 28.6%; Medium risk accounted for 14.3%; High risk accounted for 7.1%; The control group had no risk accounting for 30.8%; Low risk accounted for 38.5%; Medium risk accounted for 15.4%; High risk accounted for 15.4%. The overall risk of the observation group was lower than that of the control group. The total satisfaction rate was 92.9% in the observation group and 84.6% in the control group. 71.4% of the patients in the observation group had mild coma; Moderate coma 21.4%; Severe coma 7.1%; 38.5% of the control group was in mild coma; Moderate coma 38.5%; Severe coma 23.1%. The overall consciousness level of patients in the observation group was higher than that in the control group ($P<0.05$). Conclusion: The risk assessment of venous thromboembolism and graded

nursing intervention in postoperative coma of aSAH patients can make them conscious, effectively reduce the risk of thrombosis, and provide security for postoperative coma patients.

Keywords: VTE risk assessment; Graded nursing intervention; Postoperative coma after aSAH

VTE

aSAH

aSAH

VTE +

1 资料与方法

1.1

2021.1—2021.12

17

n=13 / 7/6 49-77

aSAH

n=14 5000IU

aSAH

GCS

[1-2]

7

VTE +

6 7

7

P>0.05.

1.3

1 VTE Autar

<6

7-10

11-14

>15

[3]

1.2

2

= + / *%

3

scale,GCS

Glasgow coma

3-15

+4 +3

+2 +1 +5

+4 +3 +2 +1

+6 +5 +4

+3 +2 +1 13-14 9-12

3-8 [4-6]

1.4

VTE +

Autar

Statistical Product and Service Solution21.0

x²

t x ± s mean ± standard deviation
P<0.05 P>0.05

2 结果

2.1 VTE

50% 28.6%
14.3% 7.1% 30.8%
38.5% 15.4% 15.4%

1. 1 aSAH Autar

	n	[n/%]			
	14	7/50%	4/28.6%	2/14.3%	1/7.1%
	13	4/30.8%	5/38.5%	2/15.4%	2/15.4%
X ²	-	2.856	2.415	2.356	2.856
P	-	<0.05	<0.05	<0.05	<0.05

2.2

92.9% 84.6%

2.

	n	[n/%]			
	14	9	4	1	13/92.9%
	13	4	7	2	11/84.6%
X ²	-	2.856	2.745	2.395	2.174
P	-	<0.05	<0.05	<0.05	<0.05

2.3 GCS

71.4% 21.4%
7.1% 38.5% 38.5%
23.1%

3.

3 aSAH [n/%]

	n			
	14	10/71.4%	3/21.4%	1/7.1%
	13	5/38.5%	5/38.5%	3/23.1%

X ²	-	2.845	2.639	2.548
P	-	<0.05	<0.05	<0.05

3 讨论

aSAH

aSAH

2

aSAH

DVT

79%

VTE

aSAH

aSAH

VTE

VTE

+

aSAH

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