

significant (for males: waist, weight, FBS, HDL-C, Cholesterol, and TG ($P < 0.001$); for females: FBS, BMI and HDL-C) ($P < 0.01$). CR has the same effects in MS and Non-MS in both sex groups, however in MS males waist circumference decreased more than non-MS males ($P = 0.02$). Having MS was related to abdominal obesity in females and in all the studied population significantly ($P = 0.03$, $R = 0.4$).

Conclusions: The prevalence of MS is high in cardiac patients specially women. CR reduces components of MS. Our study supports the benefits of moderate-intensity exercise for reducing central adiposity and improving cardiorespiratory fitness in both MS and Non-MS Cardiac patients.

GW25-e3386

The application of the transtheoretical model in patients rehabilitative exercise after percutaneous coronary intervention

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Objectives: To explore the effects and outcome of rehabilitative exercise based on the transtheoretical model (TTM) in patients after percutaneous coronary intervention.

Methods: The transtheoretical model provides behavioral and technical support in accordance with the individual needs and stages of behavior change. There are five major physical exercise behavior change stages: precontemplate stage, contemplate stage, preparation stage, action stage maintenance stage. 120 cases of patients after percutaneous coronary intervention in our department were divided into the experimental ($n = 60$) and control ($n = 60$) groups randomly. The patients in the experimental group were received Trans-theoretical Model-based education and planned intervention, health information of the patients were collected, including the assessment of willingness to behavioral change and the movement baseline, they were divided into different physical exercise change stages and received corresponding intervention strategies. Patients and their families are encouraged to participate in the formulating of rehabilitation program together. Patients in the control group were given routine health education and post-operative instructions.

Results: There were significant differences in the patients physical exercise change stages between the two group, 76.67% of the control group have not take action, including 21 cases in precontemplate stage, 17 cases in contemplate stage, 8 cases in preparation stage. 49 cases (81.67%) of experimental group patients began regular rehabilitative exercise, including 27 cases in the action stage, 22 cases in maintenance stage. The frequency, duration of physical activities and total score of "Self-efficacy scale" from the experimental group was significantly improved ($P < 0.05$). **Conclusions:** Considering physical condition and specific situation of the each individual, targeted intervention were applied to the process of cardiac rehabilitation exercise on the basis of TTM, which can effectively improve the patients exercise compliance, promote the willingness of physical exercise and help the patients establish healthy behaviors. As a result, promoting the recovery of cardiac function. The TTM can provide clinical health education and behavior change with theoretical support and behavioral guidance.

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Clinical Nursing Researching in Fibrinolytic Therapy of 152 Pulmonary Thromboembolism Patients

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Objectives: Evaluate the effect of clinical nursing pathway in fibrinolytic therapy in pulmonary thromboembolism patients.

Methods: The clinical data of 152 patients with PTE and receive fibrinolytic therapy were reviewed retrospectively in the First Hospital of Jilin University. All of the patients were grouped into the pathway group and the control group. The pathway group included 82 patients, choose from 2011.1-2013.1, and the control group included 70 patients that have not join the pathway, choose from 2000.1-2002.1. Then do contrast analysis of symptom, treatment effect, mortality, complications, and recurrence rate. The SPSS 13.0 statistical package was applied for statistical analysis, and $P < 0.05$ was considered as significant difference.

Results: There was no significant difference in age, sex, hypertension, diabetes, smoking, DVT history, injury/surgery history, long time in bed history. In symptom, both of pathway and control group, the symptom included dyspnea, hemoptysis syncope, and chest pain. The most common was dyspnea, in the pathway group was 91.6%, and the control group was 89.4%, and syncope was more common in pathway

group (75.4% vs 45.6%). The electrocardiogram had no significant difference in this analysis. Compare the treatment effect, the pathway group was better than the control group (96% vs 68%), had statistically significant ($P < 0.05$). The pathway group had lower rate in complication (5% vs 30%), have statistically significant ($P < 0.05$), and the pathway group had fewer days in hospital, have statically significant ($P < 0.05$).

Conclusions: The clinical pathway of fibrinolytic therapy is helpful in elevate the treatment effect, and can reduce the rate of complication. Nursing pathway is helpful to achieve the high quality of nursing, has scientific and practical.

GW25-e2114

The application of transitional care in community percutaneous coronary intervention patients

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Objectives: To establish a set of procedural, workable transitional care model which can be applied in community percutaneous coronary intervention patients. To evaluate the influence of transitional care on quality of life in community percutaneous coronary intervention patients.

Methods: In this research, literature review and interview with 15 experts were used to form a transitional care model which include: 1. Provide the knowledge of percutaneous coronary intervention, answer question and give health education for discharged percutaneous coronary intervention patients. 2. Exchange information from hospital to community. 3. Community follow-up to offer the information about self-monitor, question answers, medication care, exercise method, diet and so on by telephone or visit regular. 100 cases of discharged percutaneous coronary intervention patients in our hospital from January to June, 2013 were chosen as subjects. All patients were randomly divided into observation group and control group, 50 cases in each group. The control group were treated with routine nursing, the observation group were given community transitional care based on routine nursing. The patients quality of life, self-management ability and the major adverse events incidence at the three-, six- and 8-month were compared.

Results: The scores of quality of life, self-management ability in transitional care group were obviously higher than control group, the differences were statistically significant ($P < 0.05$). The major adverse events incidence in transitional care group were significantly lower than control group, the differences were statistically significant ($P < 0.05$).

Conclusions: The application of transitional care in community percutaneous coronary intervention patients can significantly improve patients' quality of life, self-management ability and can significantly decrease patients' the major adverse events incidence.

GW25-e1427

The impact of cardiac rehabilitation on the risk factors of percutaneous coronary intervention

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Objectives: To discuss and examine the impact of cardiac rehabilitation on the risk factors of percutaneous coronary intervention under the nurse supervision.

Methods: To allocate 120 patients (who previously received PCI treatment during the time August 2012 and August 2013), into intervention and control group equally (60 patients in each group). Both group will involve in a standard drug therapy and a general education in coronary heart disease. Intervention group, however, will be in the rehabilitation program under the medical staff supervision and education, which specially designed by hospital. This program included cardiac rehabilitation and one year family-based cardiac rehabilitation. Two groups will conduct risk factor assessment before and 3 month, 6 month and 12 month after the surgery. They will also be assessed by the postoperative incidence of re-stenosis and cardiovascular event.

Results: Although there was no significant improvement in diastolic blood pressure and body mass index (BMI) in intervention group, there was dramatic reduction ($P < 0.05$) in risk factors, when compared with control group. Additionally, the incidence of postoperative stenosis and cardiovascular event have reduced significantly (both $P < 0.05$).

Conclusions: Long-term cardiac rehabilitation is able to reduce risk factors of post PCI operation, postoperative incidence, re-stenosis and cardiovascular event. It is an effective, safe and high-compliance program which should be widely apply to the clinical work.