

GW25-e0774

Set up quality control circles to reduce the incidence of hematoma caused by subcutaneous injection of low molecular heparin calcium

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Objectives: Through quality control circle activity to reduce the incidence of hematoma caused by subcutaneous injection of low molecular heparin calcium.

Methods: We retrospectively analyzed 256 patients with subcutaneous injection of low molecular heparin calcium hospitalized in our department in June to September, 2013, including 43 cases occurred hematoma after injection, the incidence was 16.8%. In October 2013, we set up QCC activity group (quality control circle, QCC), RCA analysis was carried out on the complications, we determined the nursing problems, nursing plan according to the reasons. Measures include: (1) Reengineer the process, (2) Standard operating procedures, (3) Improve operation skills, Indwelling bubble technique: indwelling 0.1 ml bubbles before injection can effectively control the invalid cavity, avoid liquid infiltration into the subcutaneous after pulling needle, and reduce the incidence of hematoma. The injection site: the abdomen is divided into four quadrants according to the cross division method. Injection sites were 5 cm above the umbilicus, 5 cm below the umbilicus, umbilical about 10 cm (except periumbilical 2 cm), Take turns to inject, avoid scleroma and ecchymosis and formulate the special injection site formula. Vertical injection: It can effectively promote drug absorption and reduce the damage to the subcutaneous tissue and blood capillary. Withdraw blood injection: the advisable injection speed is 30s, Too fast injection may cause bleeding, Too slow injection may aggravate patient pain caused by a long time needle retention in the body. Press method and time: when we pull out the needle, guide patients to use two fingers pressing subsidence 2 cm on the skin for 10 min, If the patient have extended blood coagulation time or a large number of application of anticoagulant drugs, press time should be appropriately extended. (4) Avoid needle stick injuries, (5) Strengthen the drug health propaganda and education. For example, paste posters to strengthen the consciousness of patients in the ward. (6) Hold QCC activity meetings at regular intervals, (7) Regular subcutaneous injection of low molecular heparin calcium operation training for nurses.

Results: Six months after the implementation of QCC, hematoma formation rate in patients with subcutaneous injection of low molecular heparin calcium was 7%, the occurrence rate of hematoma was reduced by 42% compared to review data results.

Conclusions: The QCC activity decreased the incidence of hematoma in patients with subcutaneous injection of low molecular heparin calcium after PCI.

GW25-e3097

Two birds with one stone: α -blocker therapy on LUTS/BPH in men concomitant with mild hypertensionXiao Hengjun¹, Pang Jun¹, Hu Cheng¹, Wu Jiaying¹, Chen Jun², Pu Xiaoyong³, Li Dong³, Gao Xin¹

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Objectives: To assess the clinical efficacy and safety of administering doxazosin as an alpha (1)-blocker in patients with comorbid LUTS/BPH and mild hypertension.

Methods: 156 enrolled men concomitant with comorbid LUTS/BPH and mild hypertension who completed the International Prostate Symptom Score (IPSS >7 points) at the first visit in our clinic were eligible in this trial. All the patients were assessed based on IPSS, IPSS-Quality of Life for LUTS/BPH and received blood pressure (BP) determination. Those men with normotensive and moderate-to-severe hypertension were excluded. Urologic and cardiologic assessment included uroflowmetry (maximum urinary flow rate, Q_{max}), IPSS, and blood pressure measurements. They were administered with 4mg of doxazosin once daily for 12 weeks. Changes of IPSS, Q_{max} , Quality of Life for LUTS/BPH, systolic and diastolic blood pressure were evaluated every 4 weeks. Safety was mainly assessed via spontaneous reports of adverse events.

Results: After treatment with doxazosin, IPSS in those LUTS/BPH men significantly decreased (15.2 ± 4.8 vs 10.7 ± 3.5 points, $P < 0.001$), whereas Q_{max} increased (9.4 ± 2.5 and 11.8 ± 4.3 mL/s, $P < 0.01$), respectively. Doxazosin demonstrated efficacy in lowering IPSS score and relieving LUTS. Of them, systolic and diastolic blood pressure of 124 patients (79.5%) decreased to normal. Most patients were generally well tolerant to the treatment and there was no evidence of additional side effects related to administration. No orthostatic hypotension and other blood pressure-related adverse profiles occurred in all patients.

Conclusions: Our data show that doxazosin as an alpha (1)-blocker treatment appears to be efficacious in both relieving bothersome lower urinary tract symptoms and decreasing blood pressure in LUTS/BPH men with mild hypertension.

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GW25-e0587

Research on the clinical application of ultrasound-guided catheterization of deep-vein in cardiac surgical patients

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Objectives: To research the clinical value of the application of ultrasound-guided on deep-vein catheterization in cardiac surgical patients.

Methods: 100 cases with Jugular vein used ultrasound-guided catheterization were enrolled in this study. The time of insertion, a success rate of catheter and the incidence of complications were analyzed respectively.

Results: In Jugular vein puncture group, the one puncturation and intubation success rate with ultrasound-guided catheterization and traditional blind catheterization was 96% (48/50) and 64% (32/50, $P < 0.05$) respectively. The complication rate was 0 (0/50) and 8% (4/50, $P < 0.05$) respectively.

Conclusions: Ultrasound-guided catheterization in the deep-vein puncture is surpass to traditional blind catheterization. It is high success rate, and can avoid complication, has great clinical value.

GW25-e2250

Research to improve nursing execution in "quality control circle" activities

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Objectives: Gradually improve the nurses' execution by management in the QCC activities, so as to better implement various systems and processes, improve the nursing quality and working efficiency.

Methods: (1) Organizing training: Sending someone to learn relevant knowledge and organizing nurses to learn characteristics, activities principles and methods of QCC. Making nurses have full understanding of QCC quality management. (2) Establishment of evaluation: Establishing the Nurse Competition Table, Nurses' execution of QCC will be closely integrated with nurse appraisal. Selecting the best QCC executive team when we finish the building. (3) One point to surface: after dividing into groups, every leader led the members practice various exercises, convey the spirit of QCC, promote the practice, supervise the system and implement, feedback timely. (4) Everyone involved in the management: Each leader is responsible for the problem analyzed, the measures proposed, results tracking and continuous improvement at different stages. (5) Wechat meeting: Making the meeting form is different. Using brainstorm ways, it can make meetings convenient and time-saving, it also can improve participants' enthusiasm. By establishing equality and mutual working relationship and management guidance mode, Enable members to work in a more positive atmosphere. (6) Self check before doing: The teams are given sufficient time to self-check and correct before the problems implementing. After self check, carry out snap check. (7) Sampling check regularly: Counselor and team leader take the action of group supervision, no punishment rating system between groups, flow using sampling check regularly, dynamic scoring position, ensure quality of care continued to improve, if problems found, timely group discussion. (8) Transparent result: Sampling observation results of each group must be published in time. For all the indicators which need to be optimized must provide development trends, all the members must draw fully attention. (9) Team motivation: Encourage team morale by regular meetings. Emphasis on the goals and objectives of the QCC before the meetings. Let us realize the current stage of QCC, achievements and gaps, overcome fatigue and keep in relaxed mood. (10) PDCA circle: Ensure that management means of QCC connected, making full use of the PDCA circle, promoting executive power of nurses steady rapidly improvement.

Results: By implementing all the above measures and using checklists for sampling, the results showed the nurse executive power increased from 86% to 95%, and it also inspired the members' enthusiasm, patient satisfaction, the members' innovation capacity are all improved.

Conclusions: The approach of QCC management is to give nurses sense of responsibility in the management process, effectively tap the potential of nursing management, achieve full participation in quality management to increase their value. The above measures are effective to improve the execution power of nurses in QCC activities, can be extended.

GW25-e4219

Vascular protective effects of early HRT on ovariectomized in female rats and research on the molecular mechanism preliminarily

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Objectives: The purpose of the present study was to observe the effect of early and late hormone replacement therapy (HRT) on vascular functions in ovariectomized female rat models, and to study on the molecular mechanism preliminarily.

Methods: The ovariectomized models were established by removing ovaries in female rats and were divided to early group and late group. There were three groups including sham operation group, ovariectomized model group and HRT group in the early group and the late group. Firstly, we detected the relaxation to acetylcholine (ACh) and sodium nitroprusside (SNP) in isolated thoracic aorta. Next, the morphology of aorta was observed by transmission electron microscope. Furthermore, the serum level of