EFFECT OF NURSING INSTRUCTIONS ON PATIENTS WITH LIVER TUMOR UNDERGOING RADIOFREQUENCY ABLATION

Thesis

Submitted for Partial Fulfillment of the Requirements of the Doctorate in Nursing Science Degree (Medical-Surgical Nursing)

By
Salwa Mahmoud Abd Elwahab Awad
(M.Sc. Nursing)

Faculty of Nursing
Ain Shams University
2013

EFFECT OF NURSING INSTRUCTIONS ON PATIENTS WITH LIVER TUMOR UNDERGOING RADIOFREQUENCY ABLATION

Thesis

Submitted for Partial Fulfillment of the Requirements of the Doctorate in Nursing Science Degree (Medical - Surgical Nursing)

Under Supervision of

Prof. Dr. Tahany El Senousy

Professor of Medical-Surgical Nursing Faculty of Nursing - Ain Shams University

Assist. Prof. Dr. Hanan Sobeih Sobeih

Assistant Professor of Medical-Surgical Nursing Faculty of Nursing - Ain Shams University

Faculty of Nursing
Ain Shams University
2013

Dedication

- **4** To the soul of my father
- **♣** To my lovely mother
- **4** To all my friends

I dedicate this work

Salwa Mahmoud

Acknowledgement

First and foremost, I feel always indebted to GOD, the most kind and the most merciful,

I am deeply grateful to **Prof. Dr. Tahany Elsenousy** Professor of Medical Surgical Nursing, Faculty of Nursing, Ain Shams University, I am indebted to her constructive criticism, expertise, continuous, unlimited help and giving me the privilege to work under her supervision. I appreciate her active participation in providing me with a lot of knowledge.

I am deeply grateful to Assist. Prof. Dr. Hanan Sobeih Sobeih, Assistant professor of Medical-Surgical Nursing, Faculty of Nursing, Ain Shams University, for her meticulous supervision, efforts, fruitful guidance, valuable support and instructions throughout this work all are deeply and heartily appreciated.

I would like to express my deep thanks to all those who contributed by giving their time, effort, and encouragement to the fulfillment of this work.

Salwa Mahmoud

CONTENTS

Title	Page
Abstract	ii
List of abbreviations	iii-iv
List of Tables	v-viii
List of Figures	VX
Introduction	1-10
Aim of the study	11-12
Review of literature	13- 50
Subjects and methods	51-74
Results	75-120
Discussion	121-149
Conclusion	150
Recommendations	151
Summary	152-162
References	163-190
Appendices	191-218
Instruction book	
Arabic Summary	

List of Abbreviations

- ASA: American Society of Anesthesiologists
- **AV:** Atrio-Ventricular
- **BUN:** Blood Urea Nitrogen
- **CBC:** Complete Blood Count
- **CEA:** Carcino-Embryonic Antigen
- **CLD:** Chronic Liver Disease
- Cm: Centimeter
- CPR: Cardio-Pulmonary Resuscitation
- CRC: Colorectal Carcinoma
- **CT:** Computed Tomography
- **ECG:** Electrocardiogram
- **FDG:** Flurodexyglucose
- GSV: Great Saphenous Vein
- **HBV:** Hepatitis B Virus
- HCV: Hepatitis C Virus
- **HCC:** Hepatocellular Carcinoma
- **HRQOL:** Health-Related Quality of Life

• **IV:** Intravenous

■ **Kg:** Kilogarm

KHz: Kilo Hertz

• L: Liter

LITT: Laser-Induced Thermal Therapy

MAR: Medication Administration Record

MCT: Microwave Coagulation Therapy

Mg: milligram

MRI: Magnetic Resonance Imaging

• **PEI:** Percutaneous Ethanol Injection

PET: Positron Emission Tomography

• **PDT:** Photodynamic Therapy

■ **PT:** Prothrombin Time

• **PTT:** Partial Prothrombin Time

• **RFA:** Radiofrequency Ablation

• **RN:** Registered Nurse

• **SRMs:** Small Renal Masses

• **SAR:** Specific Absorption Rate

USA: United State of American

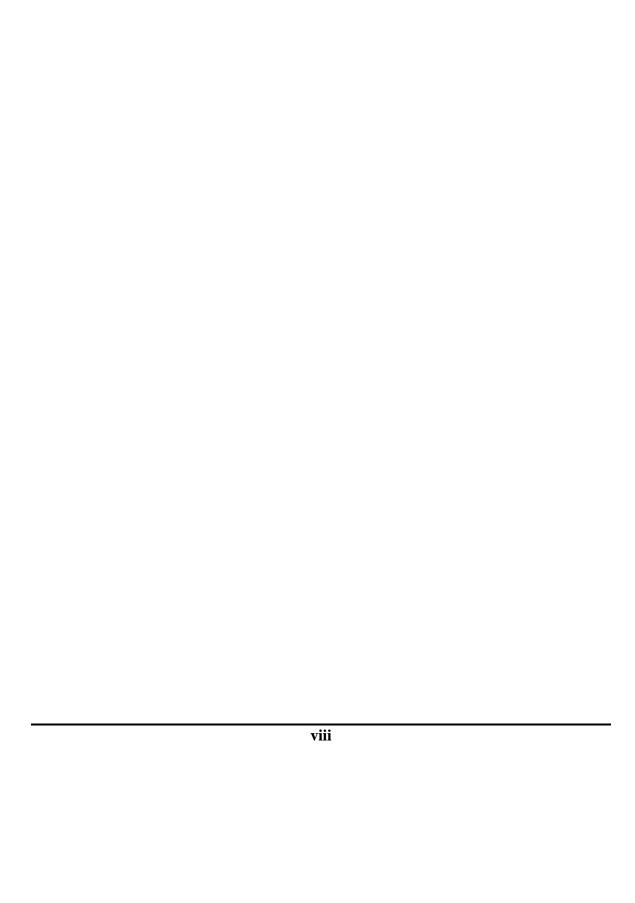
• WHO: World Health Organization

LIST OF TABLES

Table	Title	Page	
1	Demographic characteristics of the studied nurses (n=15)		
2	Demographic characteristics of studied patients in both groups		
	study and control (n=100)		
2	Continue demographic characteristics (medical history) of the		
	studied patients in both groups study and control (n=100)		
3	Nurses level of knowledge pre/post nursing instructions as		
	regards Radio Frequency Ablation (RFA) procedure (n=15)		
4	Total Satisfactory level of studied nurses` knowledge pre/post		
	nursing instructions as regards RFA procedure (n=15)		
5a	Role of nurse before RFA procedure pre/post nursing	84	
	instructions (n=15)		
5b	Continue role of nurse before RFA procedure as regards drugs	86	
	and infection control measures pre/post nursing		
	instruction(n=15)		
5c	Continue role of nurse before RFA procedure as regards	88	

	patient preparation pre/post nursing instructions (n=15)	
6	Role of nurses during RFA procedure pre/post nursing instructions (n=15)	90
6	Continued role of nurse during RFA procedure pre/post nursing instructions (n=15)	92
7a	Role of nurse after RFA procedure as regards patient care pre/post nursing instructions (n=15)	
7b	Continue role of nurse after RFA procedure as regards to procedure related to room environment pre/post nursing instructions (n=15)	96
7c	Continue role of nurse after RFA procedure as regards nursing discharge instructions for patient pre/post nursing instructions (n=15)	
8	Total score of studied nurses` performance pre/post nursing instructions (n=15)	100
9	Patients' level of anxiety in both groups (study &control) pre/post nursing instructions (n=100)	101
10	Total patients' level of anxiety (study & control groups) pre/post nursing instructions (n=100)	
11	Part (A) Level of patients' satisfaction in both group (study &	104

	control) as regards technical competence of nursing care		
	quality (n=100)		
12	Part (B) Level of patients' satisfaction in both groups (study&		
	control) as regards information giving(n=100)		
13	Part (C) Level of patients' satisfaction in both groups (study &		
	control) as regards assurance (n=100)		
14	Part (D) Level of patients' satisfaction in both groups (study &		
	control) as regards empathy (n=100)		
15	Total Satisfactory level of patient among the study and control		
	group (n=100)		
16	Level of patients satisfaction for both patients group (study &		
	control) (n=100)		
17a	Complications of RFA procedure among the study and control		
	groups		
17	Continue complications of RFA procedure among the study		
	and control groups.		
18	Correlations between level of patients' satisfaction and level of		
	anxiety (study & control groups)		
19	Correlation between level of nurses knowledge and	117	
	performance pre /post nursing instructions		



List of Figure

Figure	Title	Page
1	Comparison between total nurses` knowledge pre and post nursing instructions	82
2	Relation between total nurses' performance pre and post nursing instructions	101
3	Relation between number of patients' satisfaction among study and control group	115

INTRODUCTION

Liver cancer has a high prevalence among cancers in general and is the third most common cause of death worldwide. Liver cancer kills almost all patients who have it within a year. It was estimated that there were about 564,000 new cases of liver cancer worldwide, and a similar number of patients died as result of this disease (**Gervais & Arellano**, **2011**).

HCC is a peculiar malignant tumor that is completely different from other solid tumors because of its high recurrence rate after curative treatment about 80% at 5 years. HCC arises in chronically damage liver, i.e., in patients with chronic hepatitis or liver cirrhosis caused by viral hepatitis B or C or with nonalcoholic steatohepatitis related cirrhosis (Yang & Roberts, 2010).

Radiofrequency ablation (RFA) is one of the emerging therapeutic modalities used for the minimally invasive treatment in the management of early–stage of HCC when liver transplantation or surgical resection are not suitable options. In addition, RFA is considered a viable alternate to surgery; for inoperable patients with limited hepatic metastasic disease, especially from colorectal cancer, and for patients deemed ineligible for surgical resection because of extent and location of the disease or concurrent medical conditions (Choi & Lee, 2010).

Radiofrequency Ablation has become the standard of care for the treatment of primary and metastasis tumors. The goal of this treatment is to produce necrosis by raising local tissue temperatures, while limiting the collateral damage to adjacent healthy tissue (Chan; Chiu; Cho; Poon; Luk et al., 2010).

Regarding to advantages of RFA, it is safe, ease to use, effective and requires a minimal hospital stay or can be performed to an outpatient basis. Radiofrequency ablation has shown promise in treating selected solid tumors, particularly those involving the liver, kidney, lungs, rectum,