



شبكة المعلومات الجامعية
التوثيق الإلكتروني والميكروفيلم

بسم الله الرحمن الرحيم



MONA MAGHRABY



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شبكة المعلومات الجامعية التوثيق الإلكتروني والميكروفيلم



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جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

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MONA MAGHRABY

Nurses' Performance Regarding Care of Patients with Tracheostomy

Thesis

*Submitted for Partial Fulfillment of Master Degree
In
Medical-surgical Nursing*

By

Isaac Sabry Naeem Beshay

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**Faculty of Nursing
Ain Shams University
2020**

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List of Abbreviations

Abb.	Full Term
AACCN	American Association of Critical Care Nurses
AARC	American Association for Respiratory Care
BUN	Blood Urea Nitrogen
C6	Sixth Cervical vertebra
Cm H₂O	Centimeter of water
CNS	Central Nervous System
CPR	Cardio Pulmonary Resuscitation
ENT	Ear, Nose, Throat
HR	Heart Rate
I.C.U	Intensive Care Unit
IV	Intravenous
LOC	Level of Conscious
MCQs	Multiple of Choice Questions
N	Number
NANDA	North American Nursing Diagnosis Association
NG	Nasogastric
NPO	Nothing per Os
PaCO₂	Partial Pressure of Carbon dioxide
paO₂	Partial Pressure of Oxygen
PCT	Percutaneous Tracheostomy
PVC	Poly Vinyl Chloride
QOL	Quality of Life
ROM	Range of Motion
SaO₂	Oxygen Saturation
SD	Standard Deviation
SO	Significant Other
ST	Surgical Tracheostomy
T5	Fifth Thoracic vertebra
VAP	Ventilator Association Pneumonia
WBC	White Blood Cell

Nurses' Performance Regarding Care of Patients with Tracheostomy

Abstract

Background: Tracheostomy is a surgical incision in the trachea to maintain patent airway. The most common indications for tracheostomy are acute respiratory failure, need for prolonged mechanical ventilation and traumatic or catastrophic neurologic insult requiring airway, or mechanical ventilation or both. Nursing staff must understand the immediate postoperative and long-term management of patients with tracheostomy to provide safe and competent care for these patients. **Aim:** This study aimed to assess nurses' performance regarding care of patients with tracheostomy. **Design:** A descriptive design was utilized for the conduction of this study. **Setting:** the study was carried in general intensive care unit, which is affiliated to Sohag University hospital. **Subjects:** A convenience sample of all the available nurses (50) were included in the study. **Tools:** Three tools ; namely nurses' knowledge questionnaire, nurses' practice observational checklist and nurses' attitude questionnaire. **Results:** the main results of this study showed that, most of the studied nurses were having unsatisfactory total level of knowledge , practice regarding care of patients with tracheostomy, and most of them had negative attitude. **Conclusion:** There were unsatisfactory level of performance among nurses under the study. **Recommendations :** The study should be replicated on large sample and in different hospitals setting in order to generalize the results.

Keywords: Performance, Tracheostomy.

Introduction

A tracheostomy is an opening created by a surgical incision into the anterior wall of the trachea to make an exterior opening or stoma. A tracheostomy tube is inserted at the time of surgery to maintain a patent airway. The aim of tracheostomy is to bypass obstruction in the upper airway; to aid prolonged and assisted ventilation; and to facilitate the removal of respiratory secretions. Tracheostomy can be a temporary solution or a long-term measure which depends mainly on the patients' conditions **(Kim & Julie, 2013)**.

General indications for the placement of tracheostomy include acute respiratory failure with the expected need for prolonged mechanical ventilation, failure to wean from mechanical ventilation, upper airway obstruction, difficult airway, and copious secretions. The most common indications for tracheostomy are acute respiratory failure, need for prolonged mechanical ventilation (representing two thirds of all cases) and traumatic or catastrophic neurologic insult requiring airway, or mechanical ventilation or both. Upper airway obstruction is a less common indication for tracheostomy **(Ran, Pendem, Pogodzinski, Hubmayr, & Gajic, 2015)**.

Decreased level of consciousness, poor airway protective reflexes, and severe alterations in physiology associated with trauma and medical illness are also indications for tracheostomy. The frequency of performing tracheostomy appears to be increasing, so that development of less invasive tracheostomy techniques that can be performed safely at the patient's bedside became a necessary requirement **(Michele, et al., 2019)**.

Basic human needs of patients with tracheostomy such as respiration, communication, and nutrition may be altered due to the presence of a long-term tracheostomy that will be likely impact upon the psychosocial wellbeing and quality of life (QoL) of the individual concerned. Adverse psychosocial alterations may arise due to the inherent disfigurement accompanying a tracheostomy. It is widely understood that acquired disfigurement presents unique psychological and social challenges and may profoundly impact upon an individual's life **(Gul & Karadag, 2010)**.

Patients with tracheostomy are considered to be at high risk and have numerous complexities for nurses to consider. In addition to understanding facility policy regarding tracheostomy care, nurses must possess the specific knowledge and skills to provide successful care for affected patients. Nursing priorities for the patient with a tracheostomy must be supportive, lending focus to