



بسم الله الرحمن الرحيم

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بقسم التوثيق الإلكتروني بمركز الشبكات وتكنولوجيا المعلومات دون أدنى

مسئولية عن محتوى هذه الرسالة.

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Assessment of the Patients' Outcome with Acute Myocardial Infarction in the Coronary Care Unit.

THESIS

Submitted in Partial fulfillment of the Master Degree
In Medical Surgical Nursing

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DEDICATION

TO MY FATHER, MOTHER AND
SISTERS

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CHAPTER I

INTRODUCTION & CONCEPTUAL FRAMEWORK

INTRODUCTION

Acute myocardial infarction (AMI) is the commonest cause of death or disability in adults in the world today (Abdel Dayem, 1994 & Rasmussen & Barnason, 2000). At the National Heart Institute, Egypt, a total of 1200 AMI victims were recorded during the year 2001 (personal communication) .

Acute myocardial infarction is one of the most serious diseases that affect the patient's quality of life, finance, family role, sexuality and occupation (Bonneux, Barendreght, Meeter, Bonsel and Vandermass, 1994). AMI is caused by occlusion of one or more of the coronary arteries. This occlusion within the arteries creates an imbalance between the available oxygen supply and the overall demands of the cardiac muscle (Burchfiel, Meed, Marcus, Strong & Hayashi, 1993).

There are several problems that are faced by AMI victims, including severe pain, alteration of cardiac output, activity intolerance, and anxiety (Riegel 1993; Beare & Myers, 1994). Once symptoms start, the clinical course may be either improvement, stabilization, progressive deterioration and/or death (Palarski & Washburn, 1992).

Patients who sustain AMI are acutely ill and at risk of catastrophic complications, primarily due to arrhythmias and cardiogenic shock (Woods, Froelicher & Motzer, 2000). Patients

suffering from AMI have significant problems that can threaten their life. They should be admitted in a coronary care unit (CCU), which is organized to provide a highly specialized care **(Calne, 1994)**. The CCU is well equipped for the patient's state including facilities for monitoring, emergency interventions, diagnosis and treatment of complications and general care **(Curtis, 1994)**. The main objective of CCU is to improve the survival rate and quality of life. This is achieved by early detection of any abnormalities and effective management of rapidly changing situations **(Dennison, 1994)**. The CCU needs specialized qualified and experienced nurses. Their role in caring for the AMI patient is very important, for close observation and early detection of any problem during the whole 24 hours of the day, which make the CCU a distinguished unit than other departments. The work system of the CCU is based on a physician and nurse approach to care **(Al-Gasseer et al., 1992 and Baggs, 1993)**.

The qualified nurse is the person who first receives the patient and his relatives. She is the only person likely to observe early the arrhythmias and other complications. Also, she is the only person likely to be present at the moment of a cardiac arrest **(Cowley, 1993)**. Nurses who care for patients who have had an AMI must understand the disease process and must be able to assess symptoms and complications to relate the complications to physiological or psychological causes, and to initiate or anticipate the appropriate treatment. Nursing care must focus on the prevention of complications **(Alexander, Schlant & Fuster, 1998)**. When complications occur,

the nurse must be able to make the decisions needed to carry out the appropriate nursing actions (**Kinney & Packa, 1999**).

Since complications may lead to further cardiac tissue damage, sudden death may be the end result (**Gardiner & Hallidag 1990**). For this reason, the nurse usually uses sophisticated techniques and operates the complex advanced machines and equipment when needed (**Hammond, 1994**). Accordingly, the nursing decisions in the CCU can make the difference between someone's life and death, (**Meyer, 1992**) .

Significance of the Study

The current study could provide an understanding of the overall quality of care and management for AMI patients, i.e., patient's response in terms of mortality, symptoms, ability to perform daily activities and physiologic measurements. Moreover, it helps to identify poor, as well as good outcomes and to monitor the factors that affect these outcomes. In addition, it provides an understanding of the disease process that assists in the early detection of complications, and their prevention, which can lead to favorable patient outcome.

Aim of the Study

The aim of this study was to assess the outcome of AMI patients during their acute phase in the Coronary Care Unit (CCU) till their discharge from the CCU, in order to be able to identify prognosis, problems and/or unmet needs.

