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The Clinical Application of Quality Nursing Service in Urological Nursing

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Abstract: Objective: To explore and analyze the clinical application effect of high-quality nursing service in urology nursing. *Methods:* 400 patients who received treatment in the urology department of our hospital were selected as the study object and randomly divided into two groups. The control group and nursing group, had 200 patients in each group. The control group received the usual nursing mode, while the nursing group received high-quality nursing services. *Results:* Through comparative analysis, the complication rate of the nursing group was significantly lower than that of the control group, and the satisfaction rate was significantly higher. *Conclusion:* The application of high-quality nursing service in the nursing of urological patients is remarkable.

Keywords: Quality nursing service; Urology; Clinical application

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1. Introduction

In recent years, with the remarkable improvement in people's quality of life, the public's demand for medical services has not only been limited to the treatment of diseases but also the pursuit of high-quality experience in the service process ^[1]. In response to this change, China's medical policy continues to optimize and put forward more detailed and humanized requirements for hospital clinical nursing. Among them, patient-centered quality nursing service has become an important direction of hospital reform. Urology, as one of the key departments in the hospital, has a large number of daily visits, and the majority of patients are elderly, who are often faced with urinary system diseases such as frequent urination ^[2], urgent urination, urination pain and incontinence, which affect the quality of life. These diseases not only bring discomfort to the patient's body but also easily cause emotional fluctuations and psychological pressure. Therefore, it is particularly important to provide high-quality nursing services in the urology department, which can not only effectively relieve patients' physical and mental pain, but also significantly improve the treatment effect and accelerate the recovery process.

2. Materials and methods

2.1. Basic information

This study collected the data of 400 patients who underwent urologic surgery under general anesthesia in the hospital recently, including 290 male patients and 110 female patients, ranging in age from 30 to 50 years old, with an average age of (43.5 ± 1.5) years old. Various types of operations were performed, including 72 renal cyst decapitation, 102 ureterolithotomy, 92 adrenal neoplasms, 100 radical nephrectomies, and 34 high spermatic vein ligation.

To assess the effects of different modes of care on postoperative recovery and satisfaction, these 400 patients were evenly divided into control and experimental groups, with 200 patients in each group. The control group ranged in age from 31 to 59 years old, including 62 women and 138 men; the experimental group ranged in age from 32 to 61 years old. There were 48 female patients and 152 male patients. There was no significant difference in gender, type of surgery, age distribution and other baseline data between the two groups (P > 0.05), which ensured the clinical comparability and scientific rigor of the study.

Patients in the control group received traditional nursing intervention, while patients in the experimental group received high-quality nursing services. Through comparative analysis of the two groups of patients in postoperative recovery, complication rate, nursing satisfaction and other aspects of differences, in order to provide reference for clinical nursing work.

2.2. Nursing methods

(1) Organize quality nursing teams and implementation activities

In order to build and efficiently implement high-quality nursing services, the study has carefully set up a high-quality nursing team led by key members of the department, who are fully responsible for in-depth understanding of the treatment progress and needs of each patient in the department and customize personalized and accurate high-quality nursing strategies and processes accordingly ^[3]. In addition, the study also implements a flexible scheduling system, which closely combines the number of patients and the professional ability of nurses, to achieve a balanced distribution of workload and maximize the utilization of nursing resources. At the same time, the nursing work responsibility system has been strengthened, and the responsibility and rigor of the nursing staff have been enhanced by clarifying the post responsibilities, to ensure that every nursing task can be carried out in detail ^[4]. As the core manager of nursing work, the team leader is not only responsible for the supervision and coordination of daily operations but also responsible for the detailed task allocation to ensure that the expertise of each nurse is highly compatible with the specific needs of patients, to promote the nursing work to be more scientific, orderly and efficient.

(2) Psychological intervention

Urological patients are in physical pain at the same time, but also easily breed anxiety, depression and other negative emotions. Because of this, nurses need to adopt personalized strategies, according to the specific condition of each patient, explain the treatment plan, expected goals, and importance of the disease in detail, and on this basis, conduct in-depth psychological intervention ^[5]. Through patient listening, empathetic response and professional guidance, nurses can effectively relieve patients' anxiety and fear and help them establish a positive attitude. In addition, the nurse will also encourage the patient's family to give more emotional support and understanding, the strength of the family is crucial to improve

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the patient's confidence in treatment ^[6]. When feeling the warmth and encouragement from relatives, patients are more able to maintain an optimistic attitude, actively face the treatment process, enhance compliance with the doctor's advice, and thus accelerate the recovery process.

(3) Environmental care

In the practice of urological nursing, quality nursing services pay special attention to the construction of the treatment environment, and strive to create a high-quality recovery space for patients ^[7]. The ward is carefully equipped with water dispensers to ensure that patients can enjoy warm and appropriate drinking water at any time to meet their daily needs. At the same time, the study strictly controls the temperature and humidity in the ward, keeps in the most suitable range of human comfort, and insists on regular window ventilation, to provide patients with a fresh breathing environment. Nurses regularly change clean sheets and clothes for patients to ensure personal hygiene and comfort. In addition, to ensure the quality of patients' rest, the study reasonably controls the number and time of visitors, and warmly reminds the visiting family members to keep a low voice to avoid any behavior that may interfere with the patient's rest, so that the patient can recover in a harmonious and peaceful atmosphere ^[8].

(4) Special care

In intensive care, the nurse plays a crucial role in guiding the patient to increase water intake and ensure that the daily water intake is about 3,000 mL to effectively prevent the occurrence of urethral obstruction and urinary tract infection. In addition, the nurse should adhere to the strict disinfection of the patient's urethral opening and fistula opening every morning and evening, and pay close attention to the status of the drainage tube and urinary tube to ensure its normal operation ^[9]. In order to prevent the adverse consequences caused by urine backflow, the angle of the drainage tube must be carefully adjusted to avoid it being raised or inverted. In the nursing process, the nursing staff also needs to carefully observe the patient's urine, including color, character and total amount, once there are obvious signs of bleeding in the urine, should immediately take emergency measures, and promptly notify the doctor to come to diagnosis and treatment, to ensure that the patient gets timely and effective medical intervention ^[10].

(5) Pain care

Urological patients often face varying degrees of pain, and for this reason, caregivers adopt a range of pain care measures. First of all, the study guides patients to take appropriate lying positions to reduce the pull or squeeze pain caused by improper position, so as to relieve the discomfort of patients [11]. At the same time, in order to distract the patient's attention and reduce the perception of pain, the study have prepared books, magazines and other reading materials for patients to read in the rest to enrich their spiritual life, and promote physical and mental relaxation. For patients with more serious pain, we strictly follow the doctor's advice, and timely drug analgesics treatment, to ensure that patients get the necessary pain relief [12]. In addition, the study also pay special attention to the comfort of patients, laying soft bedding for patients, not only improves the quality of rest but also effectively prevents the occurrence of complications such as pressure sores, for patients to recover at an early date to create more favorable conditions.

(6) Catheterization care

In terms of catheterization care, for patients with indwelling urinary tubes, the nursing staff meticulously recorded the urine drainage volume and the color change of drainage fluid for each patient [13]. At the same time, in order to ensure a smooth and safe urinary catheterization system, nurses need

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to carefully protect the catheter, avoid its compression or bending, and carefully adjust the height of the urine bag, effectively preventing urine reflux, thus significantly reducing the risk of infection. Patients who find turbid urine or hematuria need to be alert immediately, communicate with the attending physician quickly, and report the abnormal condition of the patient in time [14]. On this basis, according to the doctor's advice, the study may conduct further urine examination for the patient, such as urine routine analysis or bacterial culture to clarify the cause and provide strong support for follow-up precision treatment.

(7) Prevention of complications

In urological care, attention should be paid to the prevention of complications for patients undergoing electrotomy. Therefore, the nursing staff needs to closely observe the postoperative reaction of the patient, once found that the patient has nausea, limb weakness and other suspected adverse reactions of electrotomy syndrome, immediately report to the attending physician, to take corresponding measures in time. In addition, in postoperative care, the nursing staff should strictly follow the doctor's advice, especially reminding the patient to avoid anal catheter exhaust operation within 5 days after the surgery, because anal catheter exhaust may increase abdominal pressure, and then induce secondary bleeding in the prostate fossa, posing a threat to the patient's rehabilitation.

2.3. Data processing

In the stage of data analysis and processing, the study used SPSS 13.0, a professional statistical software, as a tool to ensure the accuracy and reliability of the results. For measurement data, the study uses the mean \pm standard deviation (SD) to represent the form, this way can directly reflect the central trend and degree of dispersion of data. For the counting data, the study chooses to present in the form of rate (%) to reflect the proportion of each categorical variable.

In terms of statistical analysis methods, the study flexibly used *t*-test and χ^2 test according to different data types. For the comparison of measurement data conforming to normal distribution, the study used *t*-test to analyze whether the difference was statistically significant. For counting data or measurement data that did not conform to normal distribution, the study used the χ^2 test to evaluate the difference between different groups.

When determining whether the difference was significant, P < 0.05 was set as the significance level. When P value is less than 0.05, the study considers the difference to be statistically significant, that is, the difference is significant and has clinical comparative value, which can provide strong data support for subsequent research or practice.

3. Results

The experimental results showed that under the intervention of high-quality nursing, the nursing satisfaction of patients in the experimental group was significantly improved, the average length of hospital stay was significantly shortened, and the incidence of complications was significantly reduced. Compared with the control group, these differences reached the level of statistical significance (P < 0.05), the specific data are shown in **Table 1**. This finding not only validates the effectiveness of the high-quality nursing intervention but also further emphasizes its important role in improving patients' nursing experience, accelerating the rehabilitation process and reducing adverse events.

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Table 1. Comparison of clinical effects between the two groups [mean \pm SD, n (%)]

Group	Number of cases	Patient satisfaction	Average length of stay (d)	Complication rate
Experimental group	200	94.16 ± 4.58	11.18 ± 2.08	2 (1)
Control group	200	83.72 ± 6.72	15.31 ± 4.27	12 (6)
P		< 0.05	< 0.05	< 0.05

4. Discussion

In today's medical environment, continuously improving the practice level of quality nursing services is not only a key path to improve the overall quality of care in a hospital but also an important guarantee to ensure that patients receive high-quality nursing services. On the basis of consolidating basic nursing, actively integrating and promoting high-quality nursing services has immeasurable value for significantly improving the overall efficiency of nursing work and patient satisfaction [15]. Since urology patients are mainly elderly, their disease characteristics such as frequent urination, urgent urination, urination pain, etc., not only bring great physical pain to patients but are also often accompanied by serious psychological burdens. The symptoms of urgent urination often lead to patients who have difficult controlling themselves, frequent wetting of clothes, and painful urination may run through the urination process, seriously affecting the quality of life. Therefore, it is particularly important to implement timely and effective quality nursing services for such patients.

The quality nursing service strategy discussed in this paper covers many dimensions, such as strengthening routine nursing, integrating modern nursing concepts, optimizing human resource allocation and strengthening nursing management. By comparing and analyzing the length of hospital stay, nursing satisfaction and complication rate of patients in the experimental group and the control group, it was found that the experimental group showed significant advantages in the above aspects, and the difference was statistically significant (P<0.05). This result was consistent with previous studies and further confirmed the positive effect of quality nursing services in urological nursing practice.

5. Conclusion

To sum up, the application of high-quality nursing measures in the nursing process of urological patients can not only reduce the probability of complications of patients so that patients can recover faster and get out of the hospital, but also provide satisfactory services for patients and their families, avoid the possibility of medical disputes in the hospital, and improve the treatment effect from the overall process of admission, hospitalization and discharge of patients. This practice model not only reflects the core concept of humanized nursing, but also provides strong support for promoting rapid recovery of patients and improving the quality of medical services, and is worthy of widespread promotion and application in clinical nursing work.

Disclosure statement

The authors declare no conflict of interest.

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