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[1]徐灵莉,邓本敏,唐玲,等.护理风险管理能有效提高糖尿病合并恶性肿瘤患者的化疗疗效[J].第三军医大学学报,2013,35(04):351-354.

Xu Lingli, Deng Benmin, Tang Ling, et al. Risk management of nursing improves chemotherapy efficiency for diabetic patients with malignant tumor[J]. J Third Mil Med Univ, 2013, 35(04):351-354.

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# 护理风险管理能有效提高糖尿病合并恶性肿瘤患者 享到:

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Title: Risk management of nursing improves chemotherapy efficiency for

diabetic patients with malignant tumor

作者: 徐灵莉; 邓本敏; 唐玲; 刘玲; 李真华

重庆市肿瘤研究所内科

Author(s): Xu Lingli; Deng Benmin; Tang Ling; Liu Ling; Li Zhenhua

Department of Internal Medicine, Chongqing Cancer Institute, Chongqing, 400030,

China

关键词: 恶性肿瘤;糖尿病;化疗;风险管理

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摘要: 目的 在糖尿病合并恶性肿瘤化疗患者中,评价护理风险管理干预对临床治疗效果及

护理质量的影响。 方法 筛选2010年2月至2011年1月收治糖尿病合并恶性肿瘤化疗患者87例(对照组); 2011年2月至2012年2月收治糖尿病合并恶性肿瘤化疗患者109例,实施护理风险管理(观察组)。对照组按常规实施方法进行护理风险管理,主要包

括:糖尿病知识宣教及对症处理:观察组采用PDCA(计划Plan,执行Do、检查

Check、处理Action)循环式风险管理策略,个体化处置式风险控制方法、化疗全流程式风险预防措施,进行化疗期间的护理风险管理。对比观察两组糖尿病急性并发症发生

情况、化疗药物外渗的发生情况、患者满意度,探讨实施护理风险管理的临床价

值。 结果 实施护理风险管理后,糖尿病合并恶性肿瘤化疗患者的低血糖 (1.83% vs 9.19%)、高渗性痛症酸中毒 (0.91% vs 6.89%)、非酮症酸中毒 (0.91% vs

5.74%) 发生率, 化疗药物外渗情况 (0 vs 3.45%) 及患者满意度 (98.16% vs 91.96%)

均优于对照组(P<0.05)。 结论 护理风险管理能有效提高糖尿病合并恶性肿瘤

患者的化疗效果、较好控制血糖、避免并发症的发生。

Abstract: Objective To evaluate the impact of risk management of nursing on the

clinical therapeutic efficiency and nursing quality in patients undergoing chemotherapy with malignant tumor and diabetes mellitus (DM). Method

Eighty-seven diabetic patients with malignant tumor hospitalized in our institute

from February 2010 to January 2011 were enrolled as control group, and received

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routine nursing risk management, including education of diabetes knowledge and treatment. One hundred and nine patients with DM and malignant tumor recruited from February 2011 to February 2012 were test group, and received the risk management of nursing, with PDCA (Plan Do Check Action) cycling risk management, including individualized risk control, risk prevention program of chemotherapy, and nursing risk management during chemotherapy. The incidences of acute complications of diabetes or extravasation of chemotherapeutic drugs and patients satisfaction were recorded and analyzed. Results The incidence of acute complications of diabetes or (1.83% vs 9.19%), hypertonic ketoacidosis (0.91% vs 6.89%), non-ketoic acidosis (0.91% vs 5.74%) of extravasation of chemotherapeutic drugs (0 vs 3.45%) were significantly decreased, and patients satisfaction (98.16% vs 91.96%) was increased after implementation of nursing risk management. Conclusion Nursing risk management can implement the efficiency in patients undergoing chemotherapy with malignant tumor and DM.

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