

## Introduction

- By reviewing past patient satisfaction scores an area of improvement was noted on a Medical/Surgical unit in the area of discharge preparedness.
- Prior to this initiative, patients were not all always provided consistent discharge handouts and education.
- Patients reported that they did not feel adequately prepared or educated on the signs and symptoms of infection at the time of discharge.
- Following a literature review an evidence-based incisional care instruction handout was created, with the objective to increase patient's perception of discharge knowledge regarding the care of their surgical incisions.

## Objectives

- Increase patient knowledge and preparedness regarding the care of their surgical site at the time of discharge.
- Improving HCAHPS Scores in the area of discharge preparedness for discharge surgical patients.

## Clinical Question

Will improved surgical incisional care discharge instructions improve patient perception of preparedness at discharge?



## Project Description

- This scholarly project included the implementation of standardized discharge instructions to surgical patients.
- This handout included information on incisional care, closure for incisions, and signs and symptoms of surgical site infection.

### Education and training for nurses on Medical/Surgical Unit:

- The new incisional care instructional program was implemented by nurses who performed discharge for surgical patients.
- The participating nurses were educated on the new educational plan and tools, and then subsequently used these for surgical patients at time of discharge.
- The study occurred during a twelve-week project implementation period.


### Incisional Care Instruction Content:

- The new incisional care educational tool included strategies on how to prevent infection and care for incisions, care for specific surgical closures, and concerning signs and symptoms to be aware of.

### Patient Population:

- Patients included in the analysis were inpatient, surgical patients with external surgical incisions with a focus on patients who underwent gynecological, urological, and general surgery procedures.

## Patient Education



**How to Care for Your Incision**

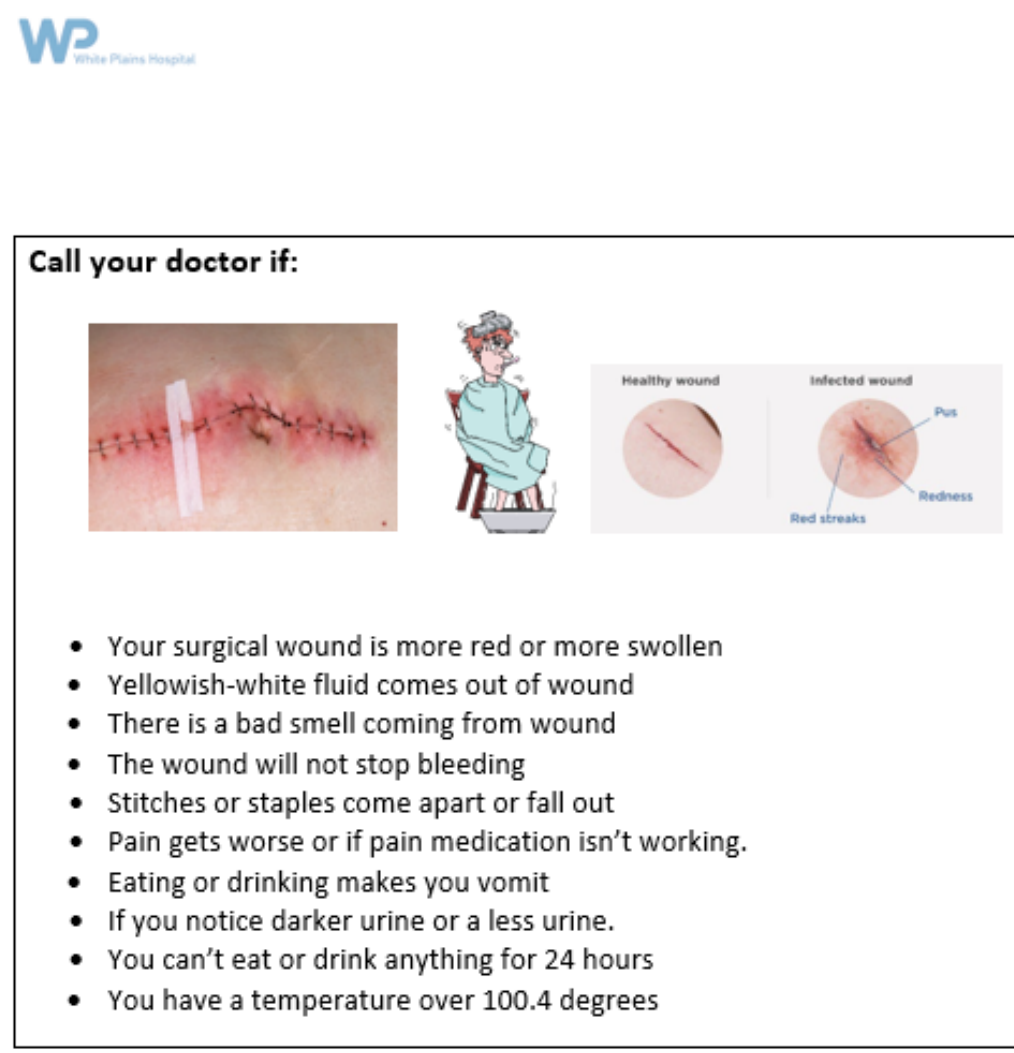
White Plains Hospital is working to improve incisional care instructions and decrease surgical site infections! We have created this tip sheet to help you care for your incision at home.

**Incisional Care Instructions:**

- Keep incision clean and dry
- Wash your hands before eating, after using the bathroom
- You may shower at home, but may not take a bath or go in a pool
- Do not scrub at any surgical incisions, use the water and soap "run over incision"
- Do not apply ointments or lotions to wounds
- Do not allow pets too close to your surgical incision
- Don't peel of "surgical glue" or "steri strips"
- If you require dressing changes, follow the instructions given by your surgeon
- Change bandage if it gets wet or dirty

**Care for specific closures:**

- Stitches or staples:** Once you no longer need to keep these areas dry, clean the wound daily with soap and water. Remove any dried blood or crust. Pat dry with clean towel and cover with a clean new dressing.
- Skin glue:** Avoid activities that may cause heavy sweating. Do not pick or pull off glue. Glue should peel off on its own within 5-10 days.
- Steri Strips:** Keep area dry if it gets wet pat with a dry clean towel. Surgical tape usually falls off within 7 to ten days.
- Silverlon Dressing:** Once you have had the silverlon dressing on for 7 days it can be removed. You may shower with the silverlon dressing but avoid direct shower head pressure on the dressing. Pat dry with a clean towel when finished.
- Dermabond Surgical Glue:**



**Call your doctor if:**

- Your surgical wound is more red or more swollen
- Yellowish-white fluid comes out of wound
- There is a bad smell coming from wound
- The wound will not stop bleeding
- Stitches or staples come apart or fall out
- Pain gets worse or if pain medication isn't working.
- Eating or drinking makes you vomit
- If you notice darker urine or a less urine.
- You can't eat or drink anything for 24 hours
- You have a temperature over 100.4 degrees

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## Project Evaluation

- Each patients' satisfaction was then recorded using the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS).
- Education was implemented in September 2019 through December 2019, and included 105 patients.
- All surgical patients were sent an anonymous follow-up survey the month following discharge, which included questions evaluating their perception of preparedness for discharge.
- The 105 patients in the sample ranged in age from 18 to 93 years old (M = 52.61, SD = 17.03), and 72% were female.
- A one tail independent samples t-test was used to evaluate the data.
- A higher proportion of patients reported they received written information regarding surgical care after the intervention timeframe of September 2019 to December 2019 (M = 95.3%, SD = 4.27) compared to before the intervention timeframe of January 2019 to August 2019 (M = 89.9, SD = 4.00, t(7) = 1.87, p = .05).

## Nursing and Health Implications

- Many patients can leave the hospital feeling unprepared and may not recognize the education they received as part of a comprehensive transition home.
- Utilizing evidence-based patient instructions and consistent nurse to patient discharge education can help increase nurse-to-patient perception of receiving surgical care education which may lead to improved patient experience, confidence and knowledge for self-care.

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