

Research on Ophthalmic Day Surgery Process Based on Mixed Management Mode

Zhanhao Gu, Cong REN, Bin GUO*, Bowen Shi, Nannan Ju

Shandong University of Traditional Chinese Medicine, Jinan, Shandong 250000, China

13366268890@189.cn

*corresponding author

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Abstract: With the continuous expansion of the development scale of medical industry, major medical institutions began to put forward higher requirements for their internal management, especially the management of ophthalmic day surgery process with high surgical risk coefficient. Based on the hybrid mode, how to strengthen the management of ophthalmic day surgery management process has become an urgent problem to be solved by the ophthalmic departments of various hospitals at this stage. This paper mainly discusses, studies and analyzes the management methods and results of the mixed management mode in the ophthalmic day surgery process in the hospital, in order to provide more mixed management basis for other medical subjects in the hospital.

1. Introduction

The so-called day surgery refers to the specialized surgical treatment process carried out by patients in the hospital on the same day, including surgery, postoperative recovery and medical observation, which can be observed at home 24 hours later^[1]. At present, most hospitals in China have set up special day operation wards for patients who need day operation. Meanwhile, in order to provide better medical services for patients, relevant medical units have launched a series of nursing services according to the nursing characteristics of professional diseases and the actual needs of patients. Ophthalmic surgery is often characterized by day surgery. With the rapid progress of medical industry, the types of day surgery have been widely used in other diagnostic surgeries, and the operation quality and effect have been significantly improved, which is inseparable from the day surgery management mode in our department. Therefore, Chinese medical researchers started with the management process of ophthalmic day surgery, and analyzed the management process of ophthalmic day surgery under the mixed management mode.

2. Analysis of Ophthalmic Day Surgery Process Management Method Based on Mixed Day Surgery Management Mode

At present, the management method of ophthalmic day surgery process is to carry out pre-admission management, post-admission preoperative management, operation process management, postoperative management and discharge management.

2.1 Pre-Admission Management of Patients

After the patient is admitted to the hospital for various tests and evaluations of his condition, the medical personnel shall effectively and clearly implement his diagnosis scheme. After it is determined that only surgery can treat, the doctor shall issue a series of checklists to be done before surgery for detailed preoperative examination, such as ECG test directly related to surgery, liver and kidney function test, blood pressure test and other related contents. Because it is a day surgery, all the above test contents must be completed on the same day, so that the doctor can implement the next process. The corresponding doctor needs to input and file the actual condition of the patient

electronically, and make it into a medical record, which contains all the basic information of the patient (the patient's actual age, work, gender, payment way and contact information, illness, whether there is family genetic history, etc.). Patients who do not meet the conditions for day surgery shall undergo elective operation, and be known to the patients or their families through a paper handover notice. Patients who need general anesthesia during the operation can go to the anesthesiology department for treatment, while those who have physical diseases need to go to the relevant consulting room for diagnosis, treatment and certification, and preoperative medication shall be carried out according to the actual needs of the operation. Medical staff should do a good job in drug distribution and regular service, so that patients can know the dosage, time and effect of medication in detail. The chief doctor of the inpatient department shall systematically analyze and integrate the test results of patients within one working day. For patients who meet the requirements of day surgery, the chief doctor shall make corresponding day surgery appointment according to the operation time of the doctor. In general, within three to five hours before the operation, the chief doctor of the inpatient department will confirm the operation time and precautions with the patient through face-to-face or telephone communication, and do a good job in the patient's admission work, relevant operation precautions and postoperative maintenance according to the operation date.

2.2 Preoperative Management after Admission

For patients with eye diseases who need day surgery, the hospital can carry out electronic management of basic information, reasonably use computer technology to establish a perfect ophthalmic outpatient information management system, and develop clear records, registration and management for the patient's hospitalization time, preoperative medication, operation time, postoperative recovery, postoperative care and medication, medical expenses and other relevant information. In order to shorten the hospitalization time of patients, each department can specially dispatch a medical staff for special bed placement and appointment registration, and make corresponding preoperative preparations (preoperative blood glucose and blood pressure standard measurement, body temperature measurement, treatment of basic diseases, advance payment, help to change the wrist strap, etc.) after the patient has gone through the admission formalities and entered the ward. After the patient has a detailed understanding of all preoperative precautions, the family members or patients sign for confirmation. Different ophthalmic patients need different preoperative examinations. Secondly, patients with underlying diseases should be treated preoperatively. For example, patients with renal transplantation or long-term use of hormone drugs should be treated with antibiotics within 30 minutes before operation. Thirdly, they should do a good job in the preoperative preparation of patients with eye diseases, review and sign the doctor's orders, cut off the eyelashes of the eyes, drop antibiotic eye drops according to the doctor's instructions, use mydriatic drugs to test the intraocular pressure, and timely notify the doctor of the rise of intraocular pressure and take a certain treatment plan. Finally, it is necessary to strengthen the psychological counseling for patients. Most patients will have psychological anxiety before operation. Doctors can carry out operation-related publicity and education for patients, let patients know the specific operation process through short videos or pictures, and have a full understanding of ophthalmic surgery, so as to reduce patients' anxiety and fear of surgery, improve patients' trust and recognition of doctors [2].

2.3 Management during Operation

Generally, two or more operating rooms will be set up in the exclusive ophthalmic hospital for ophthalmic day surgery to improve the efficiency and quality of ophthalmic surgery. Meanwhile, for patients with ocular cataract diseases, special medical and nursing personnel are configured during the operation, mainly responsible for the cleaning and daily management of relevant equipment and medical equipment on the operating table. Special care shall be given to patients with general anesthesia and poor health. In order not to block the patient's line of sight and facilitate them to observe the surrounding things, medicine nursing personnel can use high-back trolleys for transportation, so as to improve the patient's comfort and improve the patient's recognition of

hospital services. In terms of operation time and date, they can follow the principle of giving priority to elderly patients, and postpone the operation patients with infectious problems.

It should be noted that after the patient enters the operating room, the doctor performing the main operation should also clearly check the preoperative examination information of the patient. For example, we should always adhere to a rigorous working attitude in terms of drug allergy history, eye type, name and model of implanted lens. In addition, there should be an ophthalmic operation schedule in the operating room, which clearly indicates the special situation of the patient's implanted lens model. Finally, all kinds of medical instruments and auxiliary materials needed in the operation process shall be carefully inspected, and the ophthalmic day surgery can be carried out only after confirmation, so as to provide an important basic guarantee for the smooth progress of the operation. What's more, the function of the super emulsion apparatus that may be used in cataract surgery should be measured before operation to ensure the normal operation of the mechanical equipment under long-term operation, and the regular maintenance of the equipment should be done well [3]. For the infection that may be caused after operation, doctors should pay attention to the corresponding postoperative precautions. For example, after operation, low concentration povidone iodine solution can be used to wash the conjunctival sac of the eye or soap can be used to wash the eye, which can reduce the incidence of eye infection. The corresponding disinfection and cleaning of postoperative equipment can also be done to ensure the convenience of the next ophthalmic operation.

2.4 Postoperative Management

After the completion of ophthalmic day surgery, if the patient has no other complications or special needs, he can go home 24 hours later. During the period of being in the hospital, the medical staff need to closely observe the patients after operation to see if there are complications. For the actual demands of the patients, they should timely notify the relevant doctors and deal with them. The medical staff also need to carry out regular cleaning and nursing for the surgical site, keep the incision dressing dry and tidy, clearly inform the patients of some precautions, and supervise and manage them [4].

2.5 Discharge Management

If the patient is not discharged within 24 hours, the hospitalization information of the patient can be changed to the general ward for observation. Before hospitalization, the hospital shall issue the corresponding discharge diagnosis certificate, and the patients should follow the doctor's advice before leaving the hospital for convalescence. The doctor should inform the patients and their families of the daily eye care precautions in detail, and conduct regular follow-up visits after the patients' discharge to ensure the effectiveness of the treatment effect, or instruct the patients to go to the clinic for reexamination on time to improve the cure rate of eye surgery [5]. In order to improve the satisfaction of patients, the hospital can also make a telephone follow-up three hours after discharge to complete the telephone follow-up of discharged patients.

3. Conclusion

In conclusion, by strengthening the hybrid day management of the management process of ophthalmic day surgery in the hospital, not only the operation quality and daily operation arrangement efficiency of the hospital are improved, but also the effect of ophthalmic surgery is improved. It not only saves a lot of hospitalization time and operation time for hospitals and patients, but also provides a good hospitalization environment, medical and nursing environment for patients, and provides a significant guarantee for patients' health. It is conducive to the sustainable development of China's medical undertakings.

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