Volume 8, Issue 4 July-Aug 2023, pp: 979-983 www.ijprajournal.com ISSN: 2249-7781

# A Descriptive Study to Assess the Knowledge Regarding Post **Operative Management Of Patient with CABG Among Staff Nurses Working in Post Operative Cardiacunitina Selected** Hospital Chengalpattu District Tamilnadu India.

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Submitted: 15-07-2023 Accepted: 25-07-2023

#### **ABSTRACT**

**Background/AIM:** The care of CABG patient is intense, complex and rewarding. A competent nurse in the post-operative ICCU can facilitate patient adjustment, pain control, donor site care, early mobilization, initiate exercise regimen, ensure adequate nutritional status, coping of family, and also able to identify and report complication effectively which can save the life of the patient and pace up rehabilitation regarding post-operative management of CABG surgery.

**Objectives:** To Assess the level of knowledge among staff nurse regarding post-operative management of patient with CABG.

Methods and materials: Quantitative research approaches with a descriptive research design were used in the study. The study population was staff nurse working in the cardiac unit in selected hospital Chengalpattu district, Tamil Nadu, India. Sample size was 69 staff nurses. Non- probability purposive sampling technique was used, A valid study questionnaire was used to collect data on socio demographic characteristics of staff nurses, The structured questionnaire was used to assess the knowledge of the staff nurses. Descriptive and inferential statistics was used to analyze the data.

Results: The study shows that the staff nurses had the average knowledge scores was 34.8% Good

knowledge score was 34.8%, very poor knowledge score was 8.7%, poor knowledge score was 20.8% and very good knowledge score was 1.4%, the mean and standard deviation of knowledge score was 3.29 and 0.941.

Key words: knowledge, staff nurse, post-operative staff with CABG - Coronary Artery Bypass Graft, Post-operative cardiac unit.

#### INTRODUCTION

Cardio - vascular disease is a world's leading killer, accounting for a 16.7 million or 29.2 percent of total global death. Global cardio vascular disease related deaths now occur in nation which cover most countries in Asia. Coronary artery bypass graft surgery is indicated for patients with coronary artery disease to relieve symptoms ... coronary artery bypass grafting is a surgical procedure performed to relieve angina and reduce the risk of death from coronary artery disease. CEREBRO vascular complication are among the most feared consequences after CABG and other complication involved of hematologic, respiratory, cardiovascular, infection, gastro intestinal and renal system. CABG is extremely effective at prolonging life and relieving angina in appropriately selected hospitals. CABG may be a surgery of a stressor not only to the patient also to those people caring after



Volume 8, Issue 4 July-Aug 2023, pp: 979-983 www.ijprajournal.com ISSN: 2249-7781

them. Today cardio vascular medical care account of not only the individual but also the family, work and leisure from both health and medical care perspective along the complete care chain, training of nurses convenient with the patient and their needs extremely important for improving the standard of life of the patient having undergo cardiac surgery. Angina is taken into account as the stable with its frequency, severity, duration and precipitating factor aren't changing.CABG is one of the interventional treatment to the patient with stableangina many complication will Arise after CABG surgery. The patients may be a risk for angina, myocardial infraction, or stroke also for cognitive deterioration and depression. The goal of the CABG surgery is to resolve the blood supply to the heart muscle by creating a route for the blood to flow around the blockages ,arteries and veins from elsewhere with in the patients body are grafted to the coronary arteries to bypass the atherosclerotic narrowing and improve the blood. During the post operative period patients are more active ,exercise performance increases, they experience less chest pain, less disease related symptoms and they become more socially interactive.

In advanced world the elderly individual are more prone to get CABG surgery on attack of coronary artery disease nursing consent to prepare then self care before and after surgery done to the patient Good operative care is easiest when the operation has been correctly performed. Nurse is the immediate caregiver for the patient.

#### NEED FOR THE STUDY

In CABG patient require prompt support to go through the most crisis situation of their life, the association of the heart with life and death intensifies their emotional and psychological needs it is the responsibility of the nurse to prioritize the needs carefully.

The Immediate post-operative period for the patient who has undergone cardiac surgery presents many challenges to the health care team the goal to achieve is recovery without the complication and adequate pain management.

The care of CABG patient is intense complex and rewarding. A competent nurse in the post-operative ICCU can facilitate patient adjustment, pain, control, donor site care early mobilization, initiate exercise regimen, ensure adequate nutritional status coping of family and also able to

identify and report complication effectively which can save the life of the patient.

And pace the rehabilitation regarding post operative management of CABG surgery patients Coronary artery bypass graft surgery is a lifesaving intervention but the early recovery period presents a number of challenges for the patients, careers and nurses.

Early and adequate discharge planning based on in depth knowledge of the post operative experience will help to ensure optimal recover. In this study need to assess the nurse knowledge regarding the post-operative management and give crucial care to the patient.

#### STATEMENT OF THE STUDY

A study to assess the knowledge regarding post operative management of patient with CABG among staff nurses working in post operative cardiac unit in a selected hospital Chengalpattu District Tamilnadu India.

#### **OBJECTIVE OF THE STUDY**

To assess the level of knowledge among staff nurse regarding post-operative management of patient with CABG patients.

#### II. MATERIAL AND METHOD

Quantitative research approaches with a descriptive research design were used in the study. The study population was staff nurse working in the cardiac unit in selected hospital Chengalpet district, Tamil Nadu, India. Sample size was 69 staff nurses. Non-probability purposive sampling technique was used, A valid study questionnaire was used to collect data on socio demographic characteristics of staff nurses, The tool consist of 2 components . Part I is demographic variables .Part II is structured questionnaire was to assess the level of knowledge among staff nurse . the information assortment procedure was in serious trouble amount of one week . The questionnaire was collected directly from the study participants. The variables were assessed victimization the statically activity and response obtained from staff nurse related to post operative management of CABG patients. knowledge was analyzed by descriptive and inferential statistics and given through tables and figures.



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# III. RESULTS AND DISCUSSION:

Table. 1 Distribution of demographic variables among nursing students.

S.No	Demographicvariables	Classification	Number	Percentage
1.		Male	16	23.2%
	Gender			
		Female	53	76.8%
2.		20-24Yrs	16	23.2%
	Age	25-29Yrs	22	21.9%
		30-34Yrs	22	31.9%
		35-39Yrs	8	11.6%
		40and above	1	1.4%
3.		General	14	20.3%
	Educationalqualification	NursingB.scNursingM.scN		
		ursing	49	71.0%
			6	8.7%
4.		Lessthen3years1-3years	28	40.6%
	Total	Greaterthan3years		
	yearsofexperienc		27	39.1%
	e			
			14	20.3%
5.		NoYes	35	50.7%
	Participate			
	anytrainingprogr	•	34	49.3%
	am			
6.	Additionalinformation	NoYes	41	59.7%
			24	40.3%

TABLE 1; Shows the demographic data of the most of the Staff nurses (31.9%) were in the age group of 25-29 years and 30-34 years. Majority of the staff nurses were (76.8%) under the gende rof female staff nurses. The majority of them (71.0%) were B.sc nursing or post certificate B.sc. (50.7%) of

staff nurses didn't participate any special training. The majority of them (59.4%) didn't get any additional information on post-operative management of patient with CABG with last one month.

TABLE 2. Shows the frequency percentage of level of knowledge

Level of knowledge	Frequency	Percentage
verypoor	1	1.4
Poor	14	20.3
Average	24	34.8
Good	24	34.8
Verygood	6	8.7

Shows most of the staff nurses have average knowledge 34.8% and good 34.8% regarding post-operative



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management of patient with CABG.

TABLE 3 .Association of selected demographic variables with level of knowledge score of staff nurses regarding post-operative management of patient with CABG.

	Demographi	icategory	No		Levelofl	<b>Ve management of patient with CAB</b> Levelofknowledge				Pvalue	
cv	cvariable		sample	of	Verypo or	poor	average	good	Verygo od	$\mathbf{X}^2$	
1	Ageinyears	20-24	16		0	3	3	9	1		df=160.575( NS)
		25-29	22		1	5	7	8	1		
		30-34	22		0	4	10	4	4	14.324	
		35-39	8		0	2	4	2	0		
		40andabove	1		0	0	0	1	0		
2	Gender	Male	16		0	3	6	7	0		df=4 0.616 (NS)
		female	53		1	11	18	17	6	2.663	
3	Educational qualification		14		1	3	9	1	0	19.221	df=80.014 (S)
		Bsc nurs ing orpo stcertificateB sc	49		0	10	15	20	4		
		Mscnursing	9		1	1	0	3	2		
4	Totalyearofe xperiences	<1 year	28		1	9	12	6	0	12.393	df=40.015(S
		1-3year	27		0	3	8	12	4		
		>3year	14		0	2	4	6	2		
5	Specialtraini ngprogramm e		35		1	11	13	10	0	12.393	df=40.015(S
		Yes	34		0	3	11	14	6		)
6	Additional information	No	41		1	12	15	12	1	10.223	df=40.03(S)
		Yes	28		0	2	9	12	5		

TABLE 3 Represent the demographic variable characteristics of gender, age, educational qualification, total years of experience in ICC, participate in any program, additional information.

DF=Degree of Freedom; NS=Not Significance; S=Significance.

### IV. CONCLUSION

From this study it shows that the staff nurses had good and average knowledge of post- operative management of CABG patient. There is no

significant association between the level of knowledge with their selected demo graphic variables of staff nurses.

Ethical Clearance; Chettinad Academy of Research and Education ,Institutional Human Ethics Committee on 30.03.2022.

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Volume 8, Issue 4 July-Aug 2023, pp: 979-983 www.ijprajournal.com ISSN: 2249-7781

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