

Development To Successful Of Discharge Planning In Colorectal Cancer's Patient



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Colorectal cancer is one of the most highly diagnosed cancer in Thailand. The tertiary hospital data is founded that the number of patients had undergone surgery to make a stoma is increasing each year. Finally the surgery is undergone a temporary or permanent colostomy that the patient who have many anxiety from body image, lifestyle and family's economic status. The preparation of the patient who may require a stoma should begin as soon as surgery is considered.

The ET nurse initiates an individual plan of care with patient and family which address both psychological and physical needs. Data of patient without discharge planning was founded incidence complication such as erosive at peristomal skin, patient refused change pouch because lack of confident and depend on caregiver all time. And in complex problem, decided in process of care, they cannot coping problem.

Process of discharge Planning

Step 1: First diagnosed (at OPD/ Ostomy clinic)

Focus: Counselling, Coping problem, Inform to process of surgery



Step 2: Pre/Postoperative (at ward)

Focus: Provided care giver, Empowerment, Teaching, Coping problem and Preparing equipment



Step 3: Continuing care (at Ostomy clinic)

Focus: Problem when their founded at home, Coping problem with ET nurse



Result

Summary of Process In accordance , the discharge planning process could reduce the incidence of complication that patient and care giver have a confident to self- care and could coping to problem when their discharge from hospital.

Conclusion

The successful of discharge planning in colorectal cancer's patient which should begin as soon as surgery is considered. ET nurses is coordination of care between patient and care giver that decrease anxiety, improve skill of care, make a confident and increased quality of life.

Reference

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