N1:

NURSES' PROCEDURES OF DAILY SURGERY IN OPHTHALMOLOGY

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INTRODUCTION: Daily surgery implicit surgical procedures with patient retention of 23 hours in the hospital. Significance of daily surgery reflected in: early release of the patient, comfort, and cost saving of the treatment. From professional aspects we are experiencing challenges because of the demands for a higher (safer) degree of surgical skill and team coordination.

AIMS: 1. Emphasis of daily surgery

- 2. Nurses' procedures
- 3. Importance for patient education

METHODS AND MATERIALS: We have affirmed advantages of daily surgery with retrospective studies of protocols for daily surgery at the Clinic for Ophthalmology of the University Clinical Center Tuzla and have provided insight in a clinical way.

RESULTS: At the Clinic for Ophthalmology daily surgery is performed since December 3th, 2007 through October 1st 2009, with 1002 operations were conducted. Surgeries performed daily are: phacoemulsification cataract operations, Xanthelasma operations, Pterigium, Ectropion, Entropion. Each of these surgeries is performed according to a specially adapted clinical way.

CONCLUSION: Daily surgery is accepted worldwide because of more advanced microsurgical operation techniques, cost saving expenses and hospitalization of the patient. Furthermore daily surgery is accepted because of administration cost saving. The nurse is an important part of the team in providing health care and educational health of the patient. The nurse is a key factor for the orderly flow of postoperative, rapid recovery and prevention of postoperative complications.

N2: POSTOPERATIVE CARE OF CHILDREN AFTER SURGICAL CORRECTION OF STRABISMUS

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introduction: postoperative medical care of ophtalmologic patients represents all procedures taken by medical stuff in order to ensure successfull recovery of patients after surgery.

aim: to describe the procedures in recovering the patiens after surgery.

methods and patients: 20 patients undorwent strabism surgery age 8-25, 11 girls and 9 boys. In our study patients were treated with midazolam syrup or capsule while other 5 patients were not treated. Postoperative period in first group of patients was without copmlications, while in the second group patients had high temperature, vomiting and troubles in communication.

CONCLUSION: treating children with preoperative midazolam as a normal procedure is especially desirable with children who cannot cooperate with medical stuff because they have problems in pscyhomotoric development or mental retardation.

N3:

OPERATIVE TREATMENT OF CATARACT IN THE OPHTHALMOLOGY DEPARTMENT

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INTRODUCTION: The Ophthalmology Department Healthcare Team of General Hospital Prijedor consists of: two ophthalmology specialists, one ophthalmology resident, one senior nurse and six nurses. Capacity of the service is 18 beds. A Service has two specialist dispensaries, eye ultra sound cabinet, and operation room in operation block. Besides offering healthcare for patients with glaucoma, inflammatory and degenerative conditions of the eye, injuries, we treat patients with cataract.

AIM: To present the numbers of cataract operations from 2004 to 2008 and procedures which are used in the ophthalmology department for operative treatment of cataract.

METHODS AND MATERIALS: Analysis of operative protocols of Ophthalmology Department General Hospital Prijedor from 2004 to 2008 and analyses of procedures which are used in ophthalmology department for operative treatment of cataract.

RESULTS: The number of operative treatment of cataract in 2004 on Ophthalmology Department General Hospital Prijedor was 61 operations, and up to 2008 number increased 6, 5 times, which is 385 operations. Average number of days in hospital after operation of cataract for 2004 was 10,9 and for 2008 that number decreased to 6,1 days.

CONCLUSION: Considering that the number of operations is increased for 6,3 times and the number of the staff remained the same, and with regard to work enlargement it is necessary to increase the number of the physicians and nurses. The phacoemulsification apparatus is obtained, so there is need for further education of the staff.

N4: CREDENTIAL STANDARDS IN SURGICAL DISCIPLINES

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INTRODUCTION: standards are statements of expectations. Expectations need to reconcile interests of health professionals, health management, patients, health insurance, public health system, law members and others. OBJECTIVES: to show adjustments of existing and development of new standards in surgery which are approachable, real and measurable, acceptable, flexible and applicable in Clinical centre Tuzla.

MATERIAL AND METHODS: Adapted written policies and procedures relating to surgical services (standard 39) are used.

RESULTS: System of improving the quality represents a collection of procedures, measures and planned actions that make health care fulfill certain criteria described by standards and ensure constant improvement of quality.

CONCLUSION: Fulfilling the credentials standards influenced the change in the behavior of staff, building new organizational culture and inner system of quality improvement. Improving quality is a part of entire strategic planning and it helps clinical centre to achieve organizational gods. Management at the establishment leads the quality improvements and supports inner system of quality improvement.

N5:

APPLICATION OF NURSE DIAGNOSIS IN PRACTICE

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INTRODUCTION: Nurse diagnosis is actual or potential health problem which nurses are able and empowered to treat.

OBJECTIVES: To indicate the importance of nurse diagnosis in practice.

MATERIALS AND METHODS: During the three year period of nurse diagnosis application at the Clinical center of Tuzla we wanted to show how is it applied, where and how important they are for nurse practice.

RESULTS: The interest of nurses and introduction of nurse diagnosis in their files varies. After overcoming the resistance to accepting new ways in nursing practice, we continue to introduce nurse diagnosis into practice. CONCLUSION: Nurse diagnoses are important for they advance the practice, after unique terminology and classification, research and teaching.

N6: CLINIC FOR EYE DISEASES BANJA LUKA

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Development of Clinic for eye diseases starts in 1931. when first ophthalmologist comes to this region.

After World War two Eye Department is formed and in 1978. Clinic for eye diseases forms.

Work goal: To show Clinic for eye diseases in Banja Luka in past and in present. In 1931. Banja Luka had 1 ophthalmologist and today has 15 doctors specialists. Clinic is divided in to two sections and many diagnostic and therapeutics procedures and surgical procedures are done.

Conclusion: By upgrading equipment and education of staff, range of diagnosti cand surgical procedures could be wider. "The most important human right is the right to see" (Sir John Wilson).

N7: YAG LASER CAPSULOTOMY

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OBJECTIVES AND AIMS:To explain the indications for Neodymium (Nd) YAG laser, with the special focus on Nd-YAG laser rear capsulotomy. To verify the importance of Nd-YAG laser-capsulotomy intervention as necessary and successful intervention in case of secundary cataract. To analyse the values of eyesight clearness and intraocular pressure before and after the intervention, the job evaluation.

MATERIALS AND METHODS: In Department for eye diseases at Cantonal Hospital in Zenica, in the Cabinet for eye diseases the retrospective study will be conducted for the period of January 1st till December 31st, 2007. Data will be colected and analysed on the bases of the insight into the patient protocol book for Nd YAG-laser Cabinet regarding the laser intervention for the year 2007. starting from the number 1/2007 up to the number 493/2007. There will be 60 patients from different age groups included into this research, who have undergone Nd-YAG laser rear capsulotomy intervention, and who have been admited to the Cabinet for laser after the Catarakt operation with method of extracapsular extraction and with the implantation of polimetilmetacrilat lens. The indication for needed Nd-YAG laser capsulotomy gives the relevant doctor oftalmologist, three months after the operation.

EXPECTED RESULTS: The eyesight clearness (visus) and eye pressure (tonus) will be analysed before and after intervention, and that will be shown in charts and graphs.

N8: ORGANIZATION OF CLINIC FOR EYE DISEASES IN UNIVERSITY CLINICAL CENTER TUZLA

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INTRODUCTION: Clinic for eye diseases is founded in 1955, as department of general hospital in Tuzla. It has 41 beds and deals with diagnostics and treatment of degenerative and inflammatory eye conditions, and surgical treatment of eye diseases. In past few years Clinic has become recognized in our country by quality and number of cataract operations with method of phacoemulsiphication, vitreoretinal surgery and keratoplasty. Work organization in Clinic for eye diseases is based on principles and standings of modern European ophthalmology.

OBJECTIVE: To show organization of Clinic and given diagnostic and therapeutic services in Clinic for eye diseases PHO UCC Tuzla.

MATHERIAL AND METHODS: For this research we used statute of PHO UCC Tuzla, work places systematization, adopted written policies and procedures which refer to surgical services (standard 39), operative protocols of operating rooms and policlinic protocols.

RESULTS: Following departments enter in structure of Clinic for eye diseases: surgical department, department of operating rooms, department for treatment inflammation and degenerative eye diseases, department for day surgery and policlinic with its cabinets. Following report for 2008. in Clinic for eye diseases 27836 specialist examination were made, 2540 operative procedures, 2323 cataract operations, 88 operations on back eye segment and 129 operations. In 2007 we made 7 successful cadaver transplantations.

CONCLUSION: Clinic team follows science development and tries to implement all modern methods in best interest of our patients. Clinic is place for education of many ophthalmologists and medical sisters/technicians, and centre of professional, scientific, teaching and publicist work. Employees, doctors and medical sisters, have active participation in many domestic and foreign congresses and symposiums.

N9:

PREVENTION OF POSTOPERATIVE INFECTIONS

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INTRODUCTION: Now days we witness more and more people with visual impairment, blind people and people with other eye problems. Visual impairment can be consequence of eye disease or other neurological and systemic diseases, trauma, aging and infections. In these rare situations most common result is permanent visual impairment. Cause for these impairments can be postoperative infections too. In University Clinical Centre Tuzla special care is given to control of intra hospital infections and personnel education trough seminars, expert meetings and written procedures.

OBJECTIVE: In order to prevent postoperative complications, health professionals in Clinic for eye diseases, among other also apply procedures for infection control for high risk departments.

MATHERIAL AND METHODS: Infection control records, standard procedures and nurses' documentation. Analysis of microbiological wound findings in patients in Clinic for eye diseases.

RESULTS: In this research we processed earlier results and the results after application of standard procedures from health care area and area of intra hospital infection control. In operative wounds from patients in 1997 1,2% positive findings were found, and following microorganisms were identified: Coagulate negative Staphylococcus, Streptococcus species, Klebsiela enterobacter. After adaptation and application of standard procedures in 2005, only 0, 1% positive findings were found and following microorganisms were isolated: Coagulate negative Staphylococcus, Streptococcus epidermis and Escherichia coli. In 2008 in Clinic for eye diseases 0,1% positive wounds were isolated and following microorganisms were identified: Coagulate negative Staphylococcus.

CONCLUSION: By control and elimination of infective agents in postoperative procedure we achieved evident successes in infection prevention. It is important to note that application of standard procedure for infection control provided our patients safe and quick cure, and general satisfaction. With team work of all employees we can get wanted professional work results.