Application of fast-track surgery in operation room nursing

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Abstract Fast-track surgery (FTS) involves all aspects of surgery, which has significantly changed the pattern of clinical diagnosis and treatment of diseases. Application of FTS in operation room nursing requires nurses to change their concepts, break through the fixed mindset, and carry out nursing practice effectively and scientifically through preoperative communication, intraoperative nursing, postoperative visit and so on, so as to promote rapid recovery.

Key Words fast-track surgery; operation room nursing; rapid recovery

Fast-track surgery (FTS) is a surgical procedure that involves all aspects of surgery, including preoperative communication, intraoperative nursing, and postoperative care. The aim of FTS is to reduce the duration of hospital stay and improve patient recovery outcomes. The implementation of FTS in operating rooms requires nurses to change their traditional concepts, break through the fixed mindset, and carry out nursing practice effectively and scientifically through preoperative communication, intraoperative nursing, and postoperative care. This approach promotes rapid recovery and improves patient outcomes.

1 FTS concept and development

FTS refers to a surgical procedure that involves all aspects of surgery, including preoperative communication, intraoperative nursing, and postoperative care. The implementation of FTS in operating rooms requires nurses to change their traditional concepts, break through the fixed mindset, and carry out nursing practice effectively and scientifically through preoperative communication, intraoperative nursing, and postoperative care. This approach promotes rapid recovery and improves patient outcomes.

2 FTS theory basis and application range

2.1 Theoretical basis Wilmore et al. [1] believe that surgery in the treatment of disease can also be applied to surgical stress. The advantages of this approach include: reducing surgical stress, promoting postoperative recovery, improving patient satisfaction, and reducing healthcare costs. Therefore, the implementation of FTS in operating rooms requires nurses to change their traditional concepts, break through the fixed mindset, and carry out nursing practice effectively and scientifically through preoperative communication, intraoperative nursing, and postoperative care. This approach promotes rapid recovery and improves patient outcomes.

2.2 Application range The application of FTS in operating rooms requires nurses to change their traditional concepts, break through the fixed mindset, and carry out nursing practice effectively and scientifically through preoperative communication, intraoperative nursing, and postoperative care. This approach promotes rapid recovery and improves patient outcomes.
免血栓形成等措施，最终达到缩短患者康复时间、快速康复的效果\(^\text{[1, 17]}\)。

2.2 应用范围及核心内容 FTS 的应用对象是手
术指征明确、手术类型单一、合并基础疾病少、一般
情况较好的患者，对于年龄较大、营养严重不良、合
并多种内外科基础上疾病、不能进行择期手术的患
者，尚不能纳入此范畴。FTS 主要包括以下内容：(1)
术前患者健康教育；(2) 更佳的麻醉、止痛方式
选择及较成熟的外科技术，以减少术中应激反应、
术后疼痛及降低不适反应；(3) 优化术后康复治
疗，包括下床活动提前，较早期进行肠内营养支
持\(^\text{[18-19]}\)。通过良好的护理质量，能够使接受
该疗法的患者更快地康复\(^\text{[20-21]}\)。

3 FTS 理念在手术室护理管理中的应用

FTS 理念的推广和发展离不开护理的支持和
协调，也对手术室护理管理工作提出了新的要
求\(^\text{[20-21]}\)。手术室护理人员必须主动，积极开展有效的
护理实践，积极动态观察、及时发现患者病情，加强与
医师、麻醉师的沟通，有效提高患者舒适度，实施个
性化护理措施，促进患者术后快速康复\(^\text{[20-21]}\)。

3.1 术前沟通 术前沟通是 FTS 理念的重要组成
部分。术前应根据患者不同的疾病特点及心理需
求进行针对性的人性化关怀，并耐心、细致解释，可
有效缓解患者恐惧、焦虑等负面情绪，减轻生理应
激，降低手术并发症的发生率，且能使患者得到尊
重和满足，提高其战胜疾病的信心，有利于术后康
复\(^\text{[21-23]}\)。

3.2 术中护理

3.2.1 提升手术效率 手术延误是影响手术室效
率提升的常见原因。提高护理工作质量、改善手术
室整体工作流程，是缩短患者平均住院时间及促进
患者康复的有力保证。术中手术护士必须与手术医
师、麻醉医师精诚合作，职责明确，体现团队合作
精神，包括术前手术时间、术前手术、体位安置以及
安全有效配置手术用物、器械、耗材的清单等，降低
不在位率，减少非计划查找，管理好手术器械台，辅
助好手术，提高手术效率\(^\text{[24]}\)。

3.2.2 关注术中保暖 保手术期维持正常体温是
FTS 理念中另一个重要方面\(^\text{[25]}\)。术中低体温可诱
发应激反应，导致一系列不良后果，阻碍患者康
复\(^\text{[26]}\)。手术过程中，手术室温度应维持在 22～
24°C，采取积极加温措施。所有补液及胸腹腔冲洗
液体的加温、呼吸器加温，使用升温毯以保持呼吸
道温度和湿度等都是预防术中低体温的有效方法，
能保持患者体温在正常范围内。

3.2.3 配合微创技术 随着医疗水平和手术技
术的进步，微创逐渐成为现代外科学主流的发展方向。微
创手术能明显减轻患者疼痛，降低免疫功能障碍及
术中应激引起的炎症反应。有利于术前器官功能恢
复，缩短总住院时间，促进快速康复。术中组织损
伤被认为是术后的始动因素。微创外科技术能够有
效减轻手术损伤，缓解术后应激反应程度。因
此，我们应将微创理念贯穿于术前、术中、术后的全
过程，做好配合工作\(^\text{[27]}\)。

3.3 术后回访 术后回访必须采用“以人为本”的
理念进行访视，通过询问患者术后恢复情况、术中
舒适度以及对手术室护理工作满意度，发现并解决
临床护理工作中存在的问题\(^\text{[28-29]}\)。对手术室整体
工作作出客观评价，有利于手术室工作的持续改
进，有利于手术室护理质量的终末评价和全面反馈。

综上所述，FTS 理念的推广和发展对手术室护
理管理提出了新的要求和标准，手术室护理人员应
主动积极开展符合 FTS 理念的有效护理实践，从术
前、术中、术后等各个流程贯彻 FTS 个性化护理理
念，促进患者康复。

参考文献

\[\text{[1]}\] WILMORE D W, KEHLET H. Management of patients in fast track surgery\(^\text{[1]}\). BMJ. 2001;322(7284):473-476.


