

Discharge Training and Telephone Counseling Applied by Nurses to Coronary Artery Bypass Graft Patients: What Is It, Why Is It Important, What Are the Benefits?

Hemşireler Tarafından Koroner Arter Bypass Greft Hastalarına Uygulanan Taburculuk Eğitimi ve Telefon Danışmanlığı: Nedir, Neden Önemlidir, Faydaları Nelerdir?

ABSTRACT

Coronary artery bypass surgery is a complex and widely performed operation. After the operation, there are many problems that the patient may experience in the hospital and at home. In order to solve these problems, take precautions, and intervene quickly, discharge training and telephone counseling are of great importance. Thanks to discharge training and telephone counseling, the patient's self-care power will increase, coping and adaptation will be easier, and he or she will experience a faster and more comfortable recovery period. The primary purpose of this review is to provide information about the discharge training and telephone counseling given to patients after coronary artery bypass graft surgery and to convey its importance and benefits.

Keywords: CABG, discharge training, nursing, surgery, telephone counseling

öz

Koroner arter bypass ameliyatı karmaşık ve yaygın olarak uygulanan bir ameliyattır. Ameliyattan sonra hastanın hastanede ve evde yaşayabileceği birçok sorun vardır. Bu sorunları çözmek, önlem almak ve hızlı müdahale etmek için taburculuk eğitimi ve telefonla danışmanlık büyük önem taşımaktadır. Taburculuk eğitimi ve telefonla danışmanlık sayesinde hastanın öz bakım gücü artacak, baş etme ve adaptasyonu daha kolay olacak, daha hızlı ve daha rahat bir iyileşme süreci yaşayacaktır. Bu amaçla koroner arter baypas greft cerrahisi sonrası hastalara verilen taburculuk eğitimi ve telefon danışmanlığı hakkında bilgi vermek, önemini ve faydalarını aktarmak amacıyla bu derleme yazılmıştır.

Anahtar Kelimeler: Ameliyat, hemşirelik, KABG, taburculuk eğitimi, telefon danışmanlığı

Introduction

The prolongation of life expectancy in the world has increased the frequency and incidence of chronic diseases.¹⁻³ According to the data of the World Health Organization, the cause of 71% of deaths in the world is chronic diseases. According to the same report, the four chronic diseases that cause death, respectively, are (i) cardiovascular diseases, (ii) cancer, (iii) respiratory system diseases, and (iv) diabetes mellitus (DM).⁴

Today, with the increase in coronary artery diseases, which is the most common cardiovascular disease, the number of coronary artery bypass graft (CABG) surgeries is also increasing.^{5,6} According to Türkiye 2011 data, the rate of performing CABG in men older than 15 years was 21.6% and 9.1% in women.⁷ According to the report published by the Turkish Republic of Northern Cyprus State Planning Organization, 8.8 thousand surgeries were performed in 2016 and it was stated that 292 of these surgeries belonged to the category of cardiovascular surgery.⁸

Although the success rates of CABG surgeries have increased, problems and/or complications may develop in the hospital before discharge or at home after discharge. In patients who are discharged home after CABG surgery, respiratory and

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circulatory system problems, possible problems in the operation area, pain (shoulder, back, chest, legs), insomnia, palpitations, weakness, fatigue, mood changes, depression, and loss of appetite can be seen.⁵

In their study, Tuna and Emre⁹ (2020) found that after CABG surgery, patients experienced wound site (75%), pain (56.7%), and respiratory (41.7%) problems at home. Totur Dikmen and Yavuz van Giersbergen¹⁰ determined that patients need help with self-care (4.9%), social (4.4%), psychological (2.2%), and physiological (1.8%) problems. Aydin and Gürsoy,¹¹ on the other hand, determined that patients experienced problems related to pain, sleep, activity, and respiratory and gastrointestinal systems.

The difficulties and problems that the patient and caregiver may encounter at home, their capacity to manage symptoms, and their ability to meet their own needs are among the objectives of discharge training. Discharge training starts with the hospitalization of the patients and includes planned and continuing education to meet the home care needs after discharge. There are many positive aspects of discharge training. These include pain management, reducing home care visits, reducing readmissions to the hospital, accelerating the recovery process, increasing the power of self-care, reducing the cost, reducing the level of anxiety, increasing coping and compliance, and patient satisfaction.^{5,12}

Today, as technology usage grows, various strategies can be employed to enhance patient care and compliance, including telephone-based counseling, home monitoring, drug side effects tracking, appointment reminders, assessing the efficacy of discharge training, identifying training requirements, evaluating performance, fostering communication between healthcare facilities and patients' homes, promoting education engagement, bolstering self-care, improving quality of life, and aiding in coping.^{13,14}

By ensuring continuity in patient counseling over the phone, postoperative care results and the patient's medical condition can be better. It is stated that it is often not easy to evaluate patients discharged after surgery at home and therefore mobile health applications are important in terms of providing timely evaluations and changes that may occur in the home environment.⁹

MAIN POINTS

- Although the success rates of coronary artery bypass graft (CABG) surgeries have increased, problems and/or complications may develop in the hospital before discharge or at home after discharge.
- The difficulties and problems that the patient and caregiver may encounter at home, their capacity to manage symptoms, and their ability to meet their own needs are among the objectives of discharge training.
- Today, individuals who have undergone CABG surgery can be helped more by the rapid development of medicine and technology and the development of products that allow the monitoring of patients more easily, through telephone counseling and discharge training.

Today, individuals who have undergone CABG surgery can be helped more by the rapid development of medicine and technology and the development of products that allow monitoring of patients more easily through telephone counseling and discharge training. With trainings and telephone counseling services, it is possible to decrease the number of applications to hospitals and increase self-care power, quality of life, and coping and adaptation. Based on these factors, in this literature review, it is aimed to give information about the discharge training and telephone counseling given to patients who have undergone CABG surgery and what it is, why it should be done, why it is important, and its benefits.

Discharge Training

One of the most important goals of the pre-, intra-, and post-operative periods is to prepare the patient for discharge. The most basic duty toward this goal belongs to the nurse.¹⁵ In general, the primary nurse of the patient, the nurse in charge of the service or clinic, a nurse with whom the patient can stay in touch, the "super" nurses called clinical care coordinators, nurses in the social work department, nurses working in the inpatient service are responsible for discharge planning and training. It is of great importance that nurses provide information on issues such as increasing the self-care power of patients, facilitating adaptation, preventing complications, and increasing coping power during discharge planning and education stages.^{11,16}

Discharge training is a process that starts with the hospitalization of the individual and takes place to ensure that care is effectively maintained after discharge.¹⁷ The patient and their family who will undergo CABG surgery should be informed about preoperative, postoperative, and home care. With education, the patient actively participates in his or her own active care, gets rid of the feeling of powerlessness about his or her condition, and regains his or her health early, and complications are prevented and regular home care is provided.¹⁸

Discharge training ensures that the recovery period of patients who have undergone surgery continues at home. What is important in discharge training is more about what the patient wants to know and those who need it, rather than what the health-care team knows and conveys. Well-planned discharge training shortens the duration of hospitalization, increases the quality of care provided in the hospital and at home, increases the satisfaction of the patient and their family, enables patients to take responsibility for their own health, and allows the individual to return to their normal life faster.¹⁹

Nurses spend longer time with hospitalized patients than other health-care professionals and get to know patients better. Therefore, they can easily identify the needs of the patient and evaluate the readiness to receive information during the time they provide care.²⁰

Highlights and Standards of Discharge Training

In order for discharge training to be effective, it is necessary to pay attention to some points. These can be listed as follows: (i) the education should be clear, plain, and simple; (ii) the patient should be allowed to ask questions during the

education; (iii) the environment should be well lit and the temperature normal during the education; (iv) the patient should be quiet enough to focus on the subject; (v) the patient's should be privacy should be paid attention to; and (vi) the family should be included in the education according to the patient's wishes.^{21,22}

For patient education and continuity of care, some training standards have been developed that health institutions and organizations must comply with. These are as follows: (i) patients should be informed about the use of drugs, the use of medical supplies, drug–nutrient interactions, and nutrition; (ii) information should be given to increase the level of self-care in sick individuals; (iii) how and when patients will be able to access the treatment and care they will need; (iv) patients and their relatives should be informed about care; (v) information about hygiene should be provided; (vi) discharge training should be given to the patient, their relatives, and the primary caregiver; (vii) plans should be made for education and organization should be provided.²³

The training standards that should be considered during the entire discharge process and education have been developed by the American Medical Association. These include the following: (i) education should meet the physical, social, and mental needs of the patient; (ii) issues that may be needed for discharge should be determined by a multidisciplinary team; (iii) all necessary planning should be made before discharge; (iv) necessary arrangements for the care needs that the patient may need before discharge; (v) discharge training should be given to the patient, patient's relatives, and primary caregiver prior to discharge; (vi) an environment should be created for the patient and their relatives to express themselves comfortably; (vii) effective communication between the patient and their family should be established with the team responsible for the treatment and care of the patient.²³

Benefits of Discharge Training

Discharge training has many benefits for both the patient and the health-care provider. The benefits of discharge training for the patient are as follows: (i) the length of stay in the hospital is shortened; (ii) the quality of care increases; (iii) the satisfaction increases; (iv) the individual meets his/her self-care needs easily; (v) the patient and caregiver gain knowledge and skills about how the care will be; (vi) continuity of care is ensured even after discharge; (vii) patients and their relatives are included in the decision-making process regarding the disease; (viii) adherence to treatment increases; (ix) information about complications that may occur in the early or late period is obtained; (x) the patient is at home with possible minor complications can cope with health problems easily; (xi) both the patient and their relatives' concerns about the disease are relieved.²³

The benefits of discharge training for the health institution are as follows: (i) readmissions to the hospital decreases; (ii) the cost of the hospital decreases; (iii) communication between the health-care team increases; (iv) a trust-based relationship develops between health-care professionals and the patient; (v) the preference of the institution increases as the

satisfaction of the patient increases; (vi) quality increases with the increase in the preference of the institution.^{23,24}

Discharge Training After Coronary Artery Bypass Graft Surgery

It is extremely important to provide discharge training to patients who have undergone surgery for cardiovascular diseases and their relatives.²⁵ There is a need for discharge training on issues such as preventing complications that may develop in the postoperative period and eliminating the anxiety and fears of patients and their relatives. Especially nowadays, a phase of the recovery period takes place at home. For this reason, effective discharge training is required on issues such as preventing problems, preventing readmissions to health institutions, and reducing costs.²³

There are studies in the literature in which discharge training has been applied. Akbari²⁶ examined the effects of discharge training and counseling given to patients who underwent CABG surgery on the quality of life and the problems experienced after discharge. Salık Asar²⁷ investigated the effect of discharge training given to patients who underwent total hip replacement in the pre- and postoperative period on their daily living activities and quality of life, and it was found that the quality of life of the patients included in the experimental group increased and their daily life activities were positively affected.

Avcı Işık,²⁸ on the other hand, provided discharge training and counseling services to patients who had undergone CABG surgery, thus examining the effects on patients' self-efficacy, caring behaviors, and questions experienced. According to the results of the study, it was determined that the patients included in the experimental group increased their care behaviors to the desired level, the problems experienced decreased, and their self-efficacy levels increased. Yaman Aktaş et al.²⁹ examined the effects of discharge training on anxiety and depression in patients who had undergone CABG, and it was determined that depression decreased in patients who received the training.

The discharge training to be given to individuals who have undergone CABG surgery should include issues such as illness, health problems, and home care. All content should be comprehensively prepared with the short, medium, or long term in mind. Education should be organized by considering not only the patient but also their family and relatives. Thanks to the discharge training prepared in this way, patients will be trained in the subjects they need to be knowledgeable of and thus satisfaction will increase.¹⁷

Healing in the case of illness, protecting and/or improving the health of the patient, patient's family and the whole society, and trying to give individuals healthy life behaviors are realized within the educational role of the nurse. Using this role, the nurse conveys information to the patient, family, society, colleagues and nursing students. In particular, nurses should provide discharge training on the care rules and other issues that patients and their families should follow at home, who are discharged after major and complex surgeries such as CABG. Thanks to the discharge training given by the nurse, recovery is

accelerated, hospital admissions are reduced, a cost-effective way is followed, and communication and trust between the patient and the nurse increase.

Patient Counseling with Telephone After Coronary Artery Bypass Graft Surgery

Today's health-care practices also include technology.³⁰ Nurses, in order to meet the physical, psychological, and social needs of patients while dispensing care, increase their quality of life and self-care power by providing follow-up or counseling services by telephone as well as providing education to the patient.⁹ Thanks to the telephone counseling service, the anxiety of the patient and/or their relatives is also reduced, unnecessary admissions to the hospital are prevented, and patients' control over care increases.³¹

Consultancy is one of the most modern and autonomous nursing roles. Along with the role of counseling, the nurse increases the awareness of the patients and their relatives; teaches the course and effects of the disease or the care that will continue at home; specifies the people, institutions, and organizations that patients can get support from due to their situation; teaches the practices that should and should not be done in home care practices and makes patients repeat these.³² According to the results of the study conducted by Bikmoradi et al. (2017),³³ a significant and positive difference was determined between individuals who received counseling service by telephone and those who did not. The quality of life of the individuals in the experimental group increased more than that of those in the control group. In the study of Kaya and Dal Yılmaz (2022),³⁴ it was determined that the patients who received both discharge training and telephone counseling service had higher scores on self-care and coping and adaptation compliance at the end of the 2-month period than those who did not.

In the telephone counseling service to be given to patients after CABG surgeries, there are general topics and topics included in the discharge training. Among them are the medications to be used after surgery, things to be considered in daily life, pain, exercise, wound care, hygiene, nutrition, constipation, sleep, daily activities, possible problems, smoking/alcohol use, avoiding stress/anxiety, and communication with the health institution.¹⁴

According to the results of the study conducted by Bikmoradi et al. (2017),³³ a significant and.

Advantages of Telephone Counseling Service

Among the benefits of telephone counseling service are the following: (i) repetition of the information needed by patients increases their quality of life, (ii) anxiety decreases, (iii) unnecessary applications to hospitals are prevented, (iv) patients do not interrupt their examinations and controls, (v) problems that may be encountered can be prevented, (vi) care behaviors develops positively, (vii) knowledge levels increase, (viii) more responsibility is assumed, and (ix) coping with problems becomes easier.⁹

Conclusion

Healing of the illness, protecting and/or improving the health of the patient, his or her family and the whole society, and

trying to give individuals healthy life behaviors are realized within the educational role of the nurse. Using this role, the nurse conveys information to the patient, family, society, colleagues, and nursing students. In particular, nurses should provide discharge training on the care rules and other guidelines that patients who are discharged after major and complex surgeries such as CABG and their families should follow at home. Thanks to the discharge training given by the nurse, recovery is accelerated, hospital admissions are reduced, a cost-effective way is realized, and communication and trust between the patient and the nurse increase.

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