The development of intervention nursing in China

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ABSTRACT

Intervention nursing emerged in China in the 1980s. It has been developing rapidly since then, along with interventional radiology, and has become an indispensable professional discipline in clinical nursing. In this paper, the author focuses on the initiation and development of intervention wards in a Chinese context and how the development of the topic in scientific research, periodical publications, and academic exchanges shows that intervention nursing in China is moving toward specialization, standardization, and scientificization, and is gradually getting known in the international intervention nursing community via these international conferences which provide a platform for the exchange of innovative ideas.

1. Part 1 introduction

With the rapid development of interventional radiology in China, intervention nursing has grown from non-existent to existence and from a weak discipline to a strong one. It took 30 years for intervention nursing to form as an independent knowledge system and as a new branch of nursing. Nurses in intervention departments are responsible for health education, pre-operation preparation, intra-operation coordination, post-operation care, complication observation, prevention, first aid treatment, and the patient’s physical and psychological care during hospitalization. Intervention nurses can be classified into two types, according to hospital management: operating room nurses and ward nurses. The work of an operating room nurse, including pre-operation preparation, intra-operation coordination and post-operation care, is similar to that of operating room nurses in other countries. Of course, this work also includes infection prevention, medical consumable materials and instrument management, information management, and so on. The biggest difference between intervention nursing in China and intervention nursing in other countries is the existence of intervention wards. Some patients are hospitalized for pre-operative examination and stay in the hospital to be monitored after the intervention. During hospitalization, these patients are given certain symptomatic treatments and discharged after a few days when they are feeling well. Therefore, the setting of the intervention ward is a Chinese characteristic, and China is ahead of the world, in many aspects, in the discipline.

2. Part 2 the development of intervention wards

The intervention ward setting contributes to the development of China’s intervention diagnosis and treatment technology. In other words, the intervention ward plays an important role in interventional radiology and has promoted the rapid development of interventional radiology in China. In the beginning, there was no independent intervention ward; patients were admitted to different clinical areas of the hospital, such as the emergency observation room, oncology department, or gastroenterology department, and were cared for by the staff of those areas. The intervention physicians were not involved in the in-hospital management of the patients. There were also cases where the intervention physicians worked together with other physicians to manage a ward, or with the division of doctors from other departments to perform intervention operations.

In July 1986, Professor Liu Zijiang set up 3 to 5 beds for intervention patients in an emergency observation room at Zhejiang Province Hospital. In April 1988, Professor Lin Gui from Zhongshan Hospital, affiliated with Fudan University, set up a joint ward with Shanghai Eighth Hospital. Professor Yang Haishan from the Third Hospital of Jilin University set up an intervention ward in 1988. In 1989, Professor Wang Zhimin also set up an intervention ward. Afterwards, more and more hospitals began establishing intervention wards. At that time, there were generally only 10 to 20 beds in an intervention ward. However, it was the small number of beds that enabled a foundation to be established in the discipline. The small number of beds significantly promoted the
development of interventions not only in terms of treatment numbers, but also in treatment scope. We conducted a survey on intervention wards in China in March 2017. One hundred seventy-nine hospitals in 23 provinces, 5 autonomous regions, and 4 municipalities took part in the survey. Results indicated that 89.02% of the hospitals were general hospitals, 71.68% of the hospitals had independent intervention wards, 78.61% of the hospitals had developed intervention treatments for tumors, 67.63% of the hospitals had developed intervention treatments for peripheral vascular diseases, and 36.42% of the hospitals had developed intervention treatments for cerebrovascular diseases.

After more than 30 years of development, intervention nursing has gradually got standardized management, and it has become a nursing discipline with professional characteristics.

3. Part 3 the scientific research on intervention nursing

The rapid development of interventional radiology has enriched intervention nursing as a discipline. Gradually an intervention nursing system that matches the interventions has been developed. This system is based on nurses’ active learning, continuous exploration and experience accumulation in clinical practice. Intervention nurses are branching out more and more into evidence-based nursing, procedural nursing, predictive nursing, continuing nursing, scientific research on physical and mental care, nursing reform, and innovation and patent applications.

Li Yan, Xu Xiufang, Wu Xiaoyan et al. conducted an evidence-based study on the subcutaneous injection site of anticoagulants and proposed a method of alternating among 8 areas of the lateral margin of the abdominal wall. Li Haiyan’s evidence-based practice of preoperative preparation for patients undergoing endovascular treatment improves the quality of pre-operation skin preparation, which greatly reduces the incidence of post-operation skin infection. Mo Wei, Xianghua, Yangxiuchun et al. conducted an evidence-based study on the lower-limb braking time after femoral artery puncture. All these studies opened the gate for evidence-based intervention nursing practice in China.

Qin Yuelan and colleagues contributed to the design of standardized intervention nursing processes and a communication model. Xu Yang and colleagues, advanced the knowledge on the implementation of predictive nursing by observing and studying the biochemical indicators of patients in perioperative period, predicting the occurrence of symptoms after intervention treatment. In order to ensure the safety of patients, Chen Xiume, Lai Minhuai et al. improved the design of intervention nursing instruments, obtained a national patent, and employed the newly designed instruments in clinical practice. According to statistics, intervention nurses have applied for and have been granted more than 300 national patents in the past 3 years.

Lin Hanying developed the concept of ‘physical and mental nursing’ and provided psychological care to cancer patients by adjusting the overall layout of the intervention treatment room, administering psychological interventions, and providing physical and mental nursing to patients in the perioperative period. Li Xiaorong conducted a longitudinal investigation on depressive symptoms and their influencing factors in 258 patients who had undergone transarterial chemoembolization due to liver cancer. The authors aimed to understand the dynamic changes in patients due to depression at different times and to analyze influencing factors to provide a basis for clinically targeted nursing. Feng Yingpu’s research on empathizing with the patients and continuous nursing practice had improved the quality of humanistic care in intervention nursing.

4. Part 4 works and periodicals on intervention nursing

Under the guidance of Professor Feng Gansheng, Xiao Shuping and other editors published Intervention Therapy and Nursing in 2005. Wang Bin and others edited Intervention Nursing in 2006, which is an early monograph on intervention nursing in China. Mao Yanjun and others edited Intervention Therapeutic Nursing in 2007, under the guidance of Professor Cheng Yongde. Xu Xiufang and others edited Intervention Nursing in 2011, under the guidance of Professor Cheng Yongde as well. These two monographs greatly influenced intervention nursing in China. Li Linsun and Xu Yang edited and published Intervention Nursing in 2015, a systematic and classical monograph on intervention nursing in China. Various publications on intervention nursing, including manuals, were later published.

With support from the chief editor, Professor Cheng Yongde, Journal of Interventional Radiology established a nursing forum since the publication of its fourth issue (November 1994). To date, nearly 300 papers on intervention nursing have been published by this journal and others, which has greatly promoted the development of intervention nursing in China.

5. Part 5 academic exchanges in intervention nursing

The Nursing Academic Group of the Cancer Intervention Professional Committee under the Chinese Anti-Cancer Association was formally established at the Third National Cancer Intervention Academic Conference in Guangzhou in November 2004. Professor Yang Renjie, chairman of the professional committee, announced the establishment of the group, and Wu Meiqi was the first group leader. They later established provincial and municipal intervention nursing academic organizations in Hebei, Jiangsu, Beijing, Shanghai, and other locations. The World Conference on Cancer Intervention held in Beijing in June 2009 was the first to offer international academic exchange opportunities in intervention nursing. Today, formal academic organizations organize academic exchanges through annual conferences.

In September 2015, with the support of Professor Xu Ke, chairman of the Radiology Society of the Chinese Medical Association, a professional committee on radiological nursing was established, chaired by Ms. Qin Yuelan. Intervention nursing has flourished in the past 3 years. Three major academic conferences, enrolling more than 2000 intervention nurses combined, were held in Hunan, Jiangsu, and Henan province, respectively. The professional committee has its own emblem and song, and its own WeChat public platform. The committee organized subprofessional groups, formulated expert consensus statements and guidelines, published professional books on intervention nursing, conducted multi-center large data scientific research, promoted academic exchanges of intervention nursing among provinces, standardized the management of intervention wards and operating rooms, and promoted the development of intervention nursing in terms of professionalization, standardization, and scientificization in China.

Since 2015, intervention nursing in China has entered a stage of rapid development. More than a dozen academic organizations related to intervention nursing have been established by the Chinese Medical Association, Chinese Doctor Association, the Chinese Anti-Cancer Association, and the Chinese Research Hospital Society. Academic exchanges widen nurses’ visions and promote professional advancement. At the same time, Chinese intervention nurses have also begun to go abroad to participate in international intervention academic conferences and Chinese intervention nursing is getting known in the international community.

We can never separate the development of intervention nursing from the support and help of the older generation of intervention medical professor experts. From scientific research to publishing monographs, from the provision of forums in journals to the establishment of academic exchange platforms, all reflect the efforts of the older generation of intervention experts in the development of intervention nursing. Intervention nursing in China will continue to develop along with intervention medicine, together creating a better future.
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