A Patient With Neobladder for the First Time: The Application of Orem's Theory

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Background: The patients who do the Radical Cystectomy with Neobladder suffering from bladder cancer. In addition to being unable to control urination, there will be a problem of urinary incontinence also. There will be a weird smell. Patients often feel inconvenience and disgrace with diaper. All these affect not only interact with others, but also makes the patients physical or mental harm.

Neobladder is constructed from a segment of the small bowel. Because the cells lining the intestines produce mucus. The mucus may become so thick that could causes urine retention. The patients must learn to irrigate to prevent the mucus obstruct the catheter. How to take care of the Neobladder at home is an important process that will be worthy of discussion.

Purpose: Although the appearance is not as obvious change as the colostomy, the urinary function is as abnormal as an adult after neobladder reconstruction. Because the changes of the body image, patient may feel alone and isolated and unable enjoy life again. Additionally, patients were short of knowledge of the symptomatic treatment and self-care. That will be not only challenge but also stress.

Method: Conducting the Assessment of physiological, psychological, social and self-care ability by the application of Orem’s Theory. The self-care needs exceed self-care ability of this case. This leads to the lack of self-care ability. Above all, to establish the mainly healthy problems. The first problem is voiding dysfunction. Next is body image disturbance. The last is knowledge deficit.

1. The establishment of knowledge: To provide health education leaflets and Information & Referral Service such as cancer association.

2. Hands on operation: Teaching technique of the Kegel exercise and the foley single irrigation. Guide the patient to express their feelings with the psychologist.

3. Feedback: Patients can do single irrigation by herself. Set up a discharge plan through a discharge preparation service and take a phone interview.

Conclusion: Above all, the patient has self-confidence and active learning. The self-care ability can be exerted. The biggest limitation is that the patient can carry out the technique, we can provide some advice and concern pass through the phone interview. But we can’t see the patient and know that she take care of good or not after discharge. In America, the nurses will cooperate with home care nurses. When the patient was discharged, the home care nurses will visit the patient and teach technique for them. In this respect, we still have a lot of progressive space.

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References:


Abstract Summary:
I. Introduction: Application of Orem’s Theory to detect self-care needs exceed self-care ability of this case. II. Method: Helping the patient with 3 phases interact. A. The establishment of knowledge. B. Teaching self-care technique. C. Checked the self-care skill of the patient. III. Conclusion: The patient has self-confidence. Key words: Orem’s Theory

Content Outline:
I. Introduction: Application of Orem’s Theory to detect self-care needs exceed self-care ability of this case.
III. Conclusion: The patient has self-confidence and active learning. The self-care ability can be exerted.

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