



Preoperativna priprema za planiranu operaciju srca

Preoperative Preparation for Planned Heart Surgery

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Apstrakt

Operacija na srcu je složena hirurška intervencija. U situacijama kada se operacija izvrši na vreme i kod pacijenata sa pravom indikacijom, uspeh je, gotovo, zagarantovan. Ono što utiče na pozitivan ishod operacije, pored vrhunskog operativnog tima, najsavremenijih medicinskih aparata i materijala, edukovanog medicinskog osoblja, pomoćnog osoblja, jeste i dobropreoperativna priprema. Bolesnik se podvrgava dodatnim testovima, analizama, pregledima kako bi kardiolog, a i ostali članovi tima bili do detalja upoznati sa zdravstvenim stanjem pacijenta koji treba da se operiše. Na ovaj način uspeh operacije podiže se na viši nivo.

Preoperativnu pripremu čine više komponenti:

- psihička,
- klinička,
- laboratorijska,
- medikamentozna,
- fizička (sanitarna),
- neposredna,
- premedikacija.

Cilj detaljne preoperativne pripreme je smanjenje rizika od nastanka eventualnih komplikacija, bezbedno i efikasno obavljanje planirane operacije.

Pacijent je postavljajanjem dijagnoze i indikacije za operaciju sasvim razumljivo zabrinut. S jedne strane postoji briga zbog same operacije, a sem toga postoji posebna briga zbog bola, anestezije, ishoda operacije, ali i kvaliteta života posle operacije srca.

Psihička priprema

Važan je kontakt pacijenta sa osobljem koje uliva poverenje u stručnost i znanje, detaljno obaveštenje o operativnom zahvatu i postupcima koji slede preoperativno i postoperativno.

Klinička priprema

Sprovodi se kod svih bolesnika i podrazumeva dodatne kliničke pokazatelje zdravstvenog stanja pacijenta. Ako pacijent ima neku hroničnu bolest, neophodna je konsultacija specijaliste i, po potrebi, određena dijagnostička ispitivanja.

Laboratorijska priprema

Svaki bolesnik treba da odradi određene laboratorijske analize u cilju sticanja uvida u zdravstveno stanje. Kontrolišu se: SE (sedimentacija), KKS (kompletna krvna slika), biohemija (glikemija, elektroliti, urea, kreatinin, hepatogram, gvožđe...), pregled urina (opšti i mikrobiologija), brisevi (nos, usna duplja, pazuh, prepone), virusologija, hemostaza (vreme krvarenja, koagulacije, INR), krvna grupa i Rh faktor.

Abstract

Heart surgery is a complex surgical intervention. In situations where the operation is performed on time and in patients with the right indication, success is almost guaranteed. What affects the positive outcome of the operation, in addition to the top operating team, the most modern medical devices and materials, educated medical staff, and auxiliary staff, is good preoperative preparation. The patient undergoes additional tests, analyses, and examinations so that the cardiac surgeon and other team members know about the health condition of the patient who needs to be operated. In this way, the success of the operation is raised to a higher level.

Preoperative preparation consists of several components:

- psychological,
- clinical,
- laboratory,
- medicinal,
- physical (sanitary),
- immediate,
- premedication.

The goal of detailed preoperative preparation is to reduce the risk of possible complications, and to perform the planned operation safely and efficiently.

The patient is understandably worried about the diagnosis and indication for surgery. On the one hand, there is concern about the operation itself, and in addition, there is special concern about pain, anesthesia, the outcome of the operation, but also the quality of life after heart surgery.

Mental preparation

The patient needs to have contact with a reliable staff that provides expertise and knowledge, as well as detailed information about the surgical procedure and the procedures that follow preoperatively and postoperatively.

Clinical preparation

It is carried out in all patients and includes additional clinical indicators of the patient's health condition. If the patient has a chronic disease, specialist consultation and, if necessary, certain diagnostic tests are necessary.

Laboratory preparation

Every patient should have certain laboratory analyses done to gain insight into their health condition. The following are controlled: SE (sedimentation), CBC (complete blood count), biochemistry (glycemia, electrolytes, urea, creatinine, hepatogram, iron...), urine examination (general and microbiology), swabs (nose, oral cavity, armpit, groin), virology, hemostasis (bleeding time, coagulation, INR), blood group and Rh factor.

Medikamentozna priprema

Odnosi se na lekove koje pacijent redovno uzima zbog hroničnih oboljenja koje leči. Najvažnije je da pacijent ne prekida svoju redovnu terapiju. Kada postoji potreba za korekcijom, pacijent na vreme dobija obaveštenje o daljem postupku. Idealno bi bilo kada bi pušači prestali da puše 2 nedelje pre operacije.

Fizička priprema

Priprema operativnog polja obavlja se dan pre operacije. Vršiti se brijanje, kupanje, oblačenje čistog ličnog veša, pročišćavanje creva. Na dan operacije važno je ne nositi veštačke vilice, kontaktna sočiva, nakit, šminku, lak za nokte.

Neposredna priprema

Dobro je i praktično u nekoliko navrata podsetiti pacijenta da ne jede i ne pije veče pred operaciju (najčešće od ponoći), jer može da se desi da zbog treme, straha, počne da jede ili zapali cigaretu.

Premedikacija ima za cilj da umiri bolesnika, spreči pojačano lučenje pljuvačke i pripremi ga za anesteziju.

Medicinal preparation

It refers to the medicines that the patient takes regularly for the chronic diseases he is treating. The most important thing is that the patient does not stop his regular therapy. When there is a need for correction, the patient receives timely notification of the further procedure. It would be ideal if smokers stopped smoking 2 weeks before the operation.

Physical preparation

Preparation of the operative field is performed the day before the operation. Shaving, bathing, putting on clean personal clothes, and colon cleansing are performed. On the day of surgery, it is important not to wear artificial jaws, contact lenses, jewelry, makeup, or nail polish.

Immediate preparation

It is good and practical to remind the patient on several occasions not to eat or drink the night before the operation (most often from midnight), because they may start eating or light a cigarette due to nervousness and fear.

Premedication aims to calm the patient, prevent increased secretion of saliva, and prepare him for anesthesia.