Patients readiness for early discharge with Radivac drain after mastectomy or wide local excision with axillary clearance

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Abstract

Statement of the Problem: Conventionally, surgical wound drains are removed within 7 to 10 days post operatively. Hospitalization could be shortened to 2-4 days if the patients are discharged with the drain and subsequently return for its removal at the outpatient clinic. Aim: The aim of this study is to examine the readiness for early discharge with a drain amongst post-mastectomy or wide local excision with axillary clearance patients.

Methodology: A sample size of 100 patients, who were newly diagnosed with breast cancer and undergoing operation were recruited. A survey was conducted at an outpatient clinic where patients were attending the clinic for removal of drain. A returned questionnaire implied consent to the study. Descriptive data was reported.

Findings: 100 questionnaires were distributed, achieving a high response of 95% return rate. The results indicated that 75.5% were very motivated to be discharged with the drain, though 30.5% were worried about being discharged with the drain. Findings further showed that prior to discharge, 93.7% and 95.8% agreed that they were given demonstration on how to handle a Radivac drain and briefed about their discharge respectively and 90.5% were confident in managing the drain at home. 81.1% of the participants indicated that they were well-supported at home by the breast care nurses. Overall as high as 96.9% were satisfied with the early discharge planning and 93.7% were favorable about opting for early discharge with drain and 95.8% reported being well-prepared to care for themselves at home.

Conclusion & Significance: Early discharge with drain following breast cancer surgery is definitely feasible for patients provided they are well-prepared pre-and post-operatively and briefed on the expected outcome post-operatively. This study will aid in more indepth review on surgical counseling to the patients.

Biography:

Ruey Pyng Ng is an oncology-trained Assistant Director of Nursing. She is responsible for breast care education and breast cancer counseling, as well as coordinating, directing and evaluating nursing care, including the involvement of nursing research and clinical trials in the department. She is also actively involved with the KK Alpine Blossoms Breast Cancer Support Group and her concern to provide encouragement and emotional support to the patients has generated an increased interest and participation by the patients. Teresa graduated from School of Nursing, Ministry of Health, Singapore, in 1991. Having completed her Certificate in Nursing, she proceeded to Australia and completed her degree in Health Sciences at the University of Western Sydney. She then proceeded to University of Canberra to do her Graduate Diploma in Nursing. She also possessed Master of Education and Master of Arts, and attended a two-month Clinical Nursing Fellowship with the NSW Breast Cancer Institute. Australia.