132 - EXPERIENCE AND EXPERTISE OF NURSES IN THE PERFORMANCE OF THE NASOGASTRIC AND NASOENTERIC PROBE PLACEMENT PROCEDURE

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INTRODUCTION

The human body requires a daily ingestion of nutrients in an adequate quantity and quality, to perform the organic functions. In cases in which the nutritional state is inadequate due to the presence of health problems, arises the need for the use of the supplementation or dietotherapeutic regime due to the changes which may affect the ability to digests and absorb the food (SANTELLE; LEFÈVRE; CERVATO, 2007).

Among the forms of dietotherapic regime, the enteral nutritional therapy by means of the ingestion of nutrients through probes or orally, in a controlled way, isolated or combined, of a defined or estimated composition and specially formulated. The use of oral feeding in undernourished or not, patients, according to the nutritional needs, in-patients, out-patients or homecare, aiming at the synthesis or maintenance of tissues, organs or systems (BRASIL, 2008).

The multi-professional team working in institutions which use the experience and expertise of nutrition by means of digestive probes and venous catheters must be qualified and demonstrate competence to provide this assistance, and it is up to the nurse to carry out the probe placement, as well as the administration of the food, assessment of the patient and guidance of the patient and families, since feeding a patient by probes needs cooperation of both (FERREIRA, 2005).

In Brazil, the use of enteral probes is a frequent procedure. There are basically two types of probes: nasogastric and nasoenteral. The nasogastric probe placement consists in the insertion of a flexible probe through the nasopharynx to the stomach. The concept of orogastric probe is used when the insertion is though the oropharynx. It is used for the decompression of the stomach, removal of liquids or gases, in surgeries, gastric lavage and enteral nutrition (SANTELLE; LEFÈVRE; CERVATO, 2007; FERREIRA,2005).

The nasoenteral probe placement consists of the insertion of a silicon or polyvinyl probe introduced through the nostrils to the small intestine. This type of probe is basically used for the enteral nutrition. Among the diseases with indications for this type of nutrition, are highlighted: cerebral vascular accident, esophagus neoplasm, and traumatic perforation of the stomach, intestinal inflammatory diseases, short-bowel syndrome, digestive fistulas, burns, cancers and others (CARVALHO et al., 2010).

The nasogastric and nasoenteral probes are used in patients with feeding deficit, aiming to withdraw the patient from this state. It is characterized as an invasive procedure and of responsibility of the nursing staff, for this purpose a humanized assistance is required in order to guarantee comfort, protection and safety, reflected in the patient's well-being. However it is observed by professors in fields of experience and expertise in the nursing care, that in hospitals, clinics and other health sectors, there are difficulties in the delivery of this assistance and, consequently, maximizing the existence of errors during the procedure, such as: lack of aseptic techniques, little knowledge about the stages of this procedure, difficulty to differentiate the nasogastric probe placement from nasoenteral probe placement, among others.

Based on the summarization of this concern, and for being not less important, faced with the integrality of the actions in the nursing care processes and in health, it was cogitated: which experience and expertise of nurses in the procedure of nasogastric and nasoenteral probe placement?

Previously, it is recognized that this investigation may rouse discussions and debates on this subject area, as it is a customary, routinely, standardized and part of the everyday procedures in the nursing care processes, however, its apparent trivialization requires a deepening of knowledge and dissemination in scientific circles, due to its capacity of promoting updating and improvement in the area. From this understanding, it was aimed to identify the experience and expertise of nurses in the nasogastric and nasoenteral probe placement procedure.

METHOD

A descriptive field study, with a quantitative approach, carried out in a public hospital in Patos-PB. The population of this research consisted of 30 nurses stationed in the clinical medical unit of the Patos Regional Hospital, being the only health institution to have available nurses who work in the procedure of probe placement. The sample was composed of all the institution's professionals, who fulfilled the inclusion criteria: with minimum length of professional experience of a year; experience in the handling of the involved technique; presence at work during the six months of data collection. With exclusion, the nurses on medical leave, other absences or regulatory holidays.

For the data collection, the work was submitted to the Ethics Committee of the Integrated College of Patos, and was approved according to the protocol n 115/2011. The demands contained in the Resolution 196/96 which regulates research with human beings were taken into account. The collection of data started in August and September 2011. In this stage, the nurses were previously contacted, and an interview was booked which was carried out using a structured script, in the afternoon or evening shifts. Each participant was clarified about the academic nature of the research, and presented an Informed Consent Form assuring secrecy of the answers and equal treatment. Furthermore, the simple descriptive statistical analysis was chosen, using the Microsoft Office Excel program as a subsidy. The data obtained by means of a structured interview was submitted to a tabulation process, and these were organized and displayed in tables, containing the description of the frequency and percentage.

RESULTS

Initially the people researched answered the question about experience and expertise in the performance of nasogastric and nasoenteral probe placement, as well as the protection measures and difficulties faced in such procedure, being the main categories presented and distributed in frequency and percentage in Table 1.

Table1 – Categorization regarding the experience and expertise of nurses in the procedure of nasoenteral and nasogastric probe placement. Patos, PB, Brazil, 2011

	Yes		No	
	f	%	*f*	%
Performance of procedure during graduation	26	86,7	4	13,3
Use of sterile gloves	30	100	0	0,0
Use of appropriate lubricant	30	100	0	0,0
Washing of the probe before and after the feeding	28	93,3	2	6,7
Washing of hands before and after the procedure	30	100	0	0,0
Difficulties in the performing the procedure	20	66,7	10	33,3
Doubts about the procedure	2	6,7	28	93,3

When questioned about their performance, 26 (86,7%) of the professionals reported having carried out the nasogastric and nasoenteral probe placement procedure as graduate students, while 4 (13,3%) had not done the procedure during the undergraduate studies period. Regarding the professional who carries out the probe placement procedure, the totality of the professionals, 30 (100%) were nurses.

Regarding the use of sterile gloves, it was identified that the 30 (100%) of the professionals assessed opted for the use of the sterile glove. This result demonstrates the care of the nursing staff during the performance of invasive procedures, being of great relevance in the control of infections, once that such procedures bring on serious risks to the patients when these measures are discarded.

With regard to the use of appropriate lubricant on the probe before insertion, it was verified the total adhesion of the professionals, 30 (100%) of the studied. Regarding the washing of the probe before and after the feeding, when the professional uses the probe for the gavage, 28 (93,3%) stated that they carry bout the procedure as recommended by literature, whereas the rest, in other words, 02 (6,7%) did not perform the procedure.

When it comes to the washing of hands before and after the passing of the probe, it was verified that 30 (100%) of the professionals perform the procedure. In the variable difficulty during the performance of the procedure, 20 (33,4%) of the professionals reported not feeling difficulty during the performance of the procedure, while, 10 (33,4%) revealed to experience difficulty, justified by the resistance and absence of cooperation of the patient, mainly those who present deviation of the nasal septum.

As for doubts involving the nasogastric and nasoenteral probe placement procedure, 28 (93,3%) of the professionals demonstrated cognitive and technical domain, translated into dexterity, ability and competence, however, as expected, they did not expose doubts in performing the procedure. Finally, 2 (6,3%) of the nurses attributed doubts and uncertainties regarding the handling of invasive procedures, technologies and innovation of techniques, being necessary periodic professional development training, with the intent of promoting the acquisition and improvement of the experience and expertise.

DISCUSSION

The finding in this group of nurses and in this institution signaled that the majority of the people interviewed performed the probe placing procedure during undergraduate studies, as the procedure is one of the most important and complex ones of their academic life, and the students have a great desire to perform it. The non-performance of the procedure during undergraduate studies is attributed to the lack of opportunity in the field of in-practice training, lack of interest and demotivation, added to the demand for interns for a reduced number of internship fields, especially in this small-sized municipality in the Brazilian northeast.

The nursing teaching is inserted in the current Brazilian educational moment, in which the construction of knowledge and of forms of interaction with practice must added to the development of critical and reflexive attitudes and actions, considering the teaching aspects to overcome the fragmentation and linearity of knowledge, being this constructed in the individual´s context, research or extension for the learning (SILVA; CAMILO, 2007).

The quality of the undergraduate training in nursing requires abilities which are not traditionally part of the clinical practice, once that their development requires scientific knowledge and critical judgment in the professional field, fitting in a construction process, however not arising suddenly (CRUZ; PIMENTA, 2005).

Professional competence is defined as the capacity to articulate and mobilize knowledge, abilities and attitudes, placing them in action to solve problems and face situations of unpredictability in any given situation and cultural context (ROTHBARTH; WOLFF; PERES, 2009). In virtue of the complexity of the execution of this technique, the probe placement must be performed by a qualified and legally certified professional, such as a nurse, who has in his or her curriculum the specific course subject basic procedures of nursing (CERIBELLI; MALTA, 2006).

Among the factors that may affect the nursing professionals, are cited bad remuneration, stress, work overload, physical and emotional distress and dissatisfaction. These motivate nurses to have little commitment to patient care. The thinking about the quality in the nursing treatment demands knowledge from the leader-nurse about the conducts and actions which favor him or herself and the team, in the patients assistance (KIAN; MATSUDA; WAIDMANN, 2011)

The use of gloves is registered as precaution measures which must be used in patient care (LOPES et al., 2008). Despite the probe placement being invasive, it may be performed with procedure gloves (PEDROSO; MAGALHÃES, 2008).

The health professional must be attentive, to the maximum extent, to a precautionary approach, with the intent of not getting infected or serve as a vector for the transmission of diseases to the patients or family members (PENTEADO FILHO; SOUZA; HOEFEH, 2005). Thus, it is considered that the adhesion to sterile glove use during the performance of invasive procedures, reinforces the safety regarding the infection prevention care.

In this perspective, anesthetic in gel form is commonly used to facilitate the introduction of probes, however, when dealing with nasogastric and nasoenteral probes, their only objective is to facilitate the sliding of the probe through the nostril, once that the anesthetic is put around the probe in the moment of the introduction and not previously in the nostril, thereby, the contact time is insufficient to promote local anesthesia (FERREIRA, 2005).

The mentioned author also emphasizes that other adopted measures, also, aim at the reduction of discomfort and the trauma of the insertion of nasogastric and nasoenteral probes, alternatives as implemented proposals. The inhalation of lidocaine by means of nebulization, spray and intermittent breathing, with positive pressure through nebulization via the mouth, has demonstrated a significant reduction of pain associated to the nasogastric and nasoenteral probe installation, but not refraining the use of lidocaine gel, as it facilitates the sliding of the probe.

To avoid the obstruction of the nasogastric and nasoenteral probe as it is very thin, and may get easily obstructed, making it impossible the administration of the enteral diet. It is recommended to inject, with a syringe, 40 ml of filtered boiled and

cooled water in the probe, before and after the administration of the diet or medication; observe the care with the administration of medicine; in case of obstruction, slowly inject 50ml of filtered water so that the probe is not damaged by the excessive pressure, caused by smaller syringes. The guidewire must not be introduced in the probe in the attempt to unobstruct it, because it might perforate it and cause lesions to the digestive mucous (POTTER; PERRY, 2005).

The washing of the probe with water before and after each procedure and the slow administration of the prepared formula are also essential to optimize the absorption and action of the food and also of the pharmacological agent administered via probe (SMELTZER et al., 2008).

The washing of the hands aims at the removal of desquamatory cells, sweat, skin oiliness and still, when associated to an antiseptic, promotes the reduction of the resident flora (FELIX; MIYANDAHIRA, 2009). The professional who works caring for sick people must identify the moments and the situations in which he or she must wash the hands, such as when initiating or ending the working day, when attending to patients, before and after manipulating material and others. Thereby, the washing of the hands represents the most important individual procedure in the prevention of contagions (MARTINEZ; CAMPOS; NOGUEIRA, 2009). In fact, clean and healthy hands, as well as soft and smooth skin, trimmed nails and without rings or false fingernails, minimize the risks of contamination.

The nurses need a solid scientific, humanistic, political and ethical formation, which enables them to identify and solve the problems during procedures (DIAS; GUARIENTE; BELEI, 2005). For this purpose, they should seek development courses, training, continued education with the intention of improve techniques and provide assistance befitting the scientific grounds.

Still regarding the difficulties, the same are pointed out when dealing with unconscious patients. It is highlighted that the majority of patients with neurological dysfunctions, geriatric and with neoplasm patients are dependent on enteral nutrition , due to the consequences of the disease itself, thus causing, risks of bad positioning of the feeding tube, as they may present resistance, and being necessary advanced scientific knowledge to identify and solve the problems (CARVALHO et al., 2010)

The health area professionals must learn to learn, as a form of qualifying themselves faced with the technologies and innovations deriving from science from the results and dissemination of research. However, endows an upgrade of their practical and theoretical knowledge in order to better attend the clients (FERREIRA, 2005).

CONCLUSION

The identification of patients with a high risk of malnutrition and the knowledge of the multi-professional team about the techniques of nutritional therapy, offered by probes, guarantee a better recuperation of in-patients in hospitals. The offer of nutrients to the sick person who needs the enteral nutritional therapy, in the proportion of their needs, is fundamental for their recovery. However, this procedure needs to offer security to the sick individual and be performed by qualified and trained professionals, who have received during their professional education, the guiding principle of scientific knowledge of the technique, as the feeding by probes is not free of problems.

Reiterates the importance of the nursing assistance provided in the performance of nasogastric and nasoenteral probe placement procedure when highlighting the conducts adopted in this procedure, as the nurse performs a fundamental role and his or her care is indispensable in providing comfort and security to the patient. Such benefits may be tenuous when this assistance is carried out inadequately.

Regarding the scientific data in this study, part of the professionals assessed had experience and expertise, seen that the had concluded a Bachelor in Nursing and worked in the health institution in periods superior to two and three years, respectively, favoring in this way, the good performance in the probe placing procedure, seen that as well as having performed it in the internship during the undergraduate course, it is a constant procedure in professional performance.

Despite the researched people having presented a favorable performance in the passing of nasogastric and nasoenteral probes, deficiencies were observed regarding the information contained in literature about the procedure. Seen in these terms, is considered necessary the discussion of the nursing techniques, specifically about the passing of the nasogastric and nasoenteral probes, in periodicals in the area, as well as in debates and refresher courses in scientific events, seen that these contribute to the improvement of the developed actions. As it is noticed that the publication involving this theme is still rather scares, needing however, greater attention from the scientific community.

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EXPERIENCE AND EXPERTISE OF NURSES IN THE PERFORMANCE OF THE NASOGASTRIC AND NASOENTERIC PROBE PLACEMENT PROCEDURE

ABSTRACT

Objective: To identify the experience and expertise of nurses in the performance of the nasogastric and nasoenteral probe placement procedure. Method: A quantitative study , carried out with 30 nurses of a public hospital in the municipality o Patos – PB, Brazil. Between the months of August and September 2011, by means of interviews. Results: The majority of the professionals interviewed performed the procedure, still during the undergraduate studies, opted for sterile gloves instead of procedure gloves, used appropriate lubricant; hygenised the probe and washed hands before and after the feeding; denied difficulties and doubts about the procedure. Conclusion: The results were satisfactory in this study, however, it is considered necessary the discussion of nursing techniques , specifically about the passing of nasogastric and nasoenteral probes, in scientific studies, seen as these contribute to the improvement of the developed actions.

KEYWORDS: Nursing. Nursing Care. Gastrointestinal Intubation.

EXPÉRIENCE ET EXPÉRIENCE DES INFIRMIÈRES ET INFIRMIERS DANS LA FOURNITURE DE LA PROCÉDURE ET ENQUÊTE NASOGASTRIQUE NASOGASTRIQUE

RÉSUMÉ

Objectif: identifier les compétences et l'expérience des infirmières dans la réalisation et sondage nasogastrique nasogastrique. Méthode: L'étude quantitative, menée auprès de 30 infirmières dans l'hôpital public de la ville de Patos-PB, Brésil, entre Août et Septembre 2011, lors d'une entrevue. Résultats: La plupart des répondants effectuées la procédure encore étudiant; opté pour des gants stériles à la place de la procédure; utilisé lubrifiant approprié; higienizava la sonde et lavé les mains avant et après avoir mangé; les difficultés et les doutes quant à la procédure refusée. Conclusion: Les résultats ont été satisfaisants dans cette étude, cependant, il est considéré comme nécessaire discussion des techniques de soins infirmiers, en particulier sur le passage des tubes naso-gastriques et nasoentérique dans les études scientifiques, car ils contribuent à renforcer les actions développées.

MOTS-CLÉS: soins infirmiers. Soins infirmiers. Intubation gastro-intestinal.

EXPERIENCIA Y VIVENCIA DE ENFERMEROS EN LA REALIZACIÓN DEL PROCEDIMIENTO POR SONDA NASOGÁSTRICA Y NASOENTÉRICA

RESUMEN

Objetivo: identificar la experiencia y vivencia de enfermeros en la realización de procedimiento por sonda nasogástrica y nasoentérica. Método: Estudio cuantitativo, realizado con 30 enfermeros del hospital de Patos-PB, Brasil, entre agosto y septiembre de 2011, a través de entrevista. . Resultados: La mayoría de los encuestados realizó el procedimiento todavía en la graduación; ha optado por guante estéril en lugar del procedimiento, que se utiliza lubricante adecuado; higienizaba la sonda y se lavaba las manos antes y después de la alimentación; negó dificultades con acceso denegado y dudas sobre el procedimiento. Conclusión: Los resultados fueron satisfactorios, sin embargo, es necesaria discusión acerca de las técnicas de enfermería necesarias, específicamente sobre el paso de las sondas nasogástrica y nasoentérica en estudios científicos, ya que contribuirá a mejorar acciones desarrolladas.

PALAVRAS CLAVES: Enfermería. Cuidados de Enfermería. Intubación gastrointestinal.

EXPERIÊNCIA E VIVÊNCIA DE ENFERMEIROS NA REALIZAÇÃO DO PROCEDIMENTO DE SONDAGEM NASOGÁSTRICA E NASOENTERAL

RESUMO

Objetivo: identificar a experiência e vivência de enfermeiros na realização da sondagem nasogástrica e nasoenteral. Método: Estudo quantitativo, realizado com 30 enfermeiros de hospital público do município de Patos-PB, Brasil, entre agosto e setembro de 2011, por meio de entrevista. Resultados: A maioria dos entrevistados realizou o procedimento ainda na graduação; optava pela luva estéril em vez da de procedimento; utilizava lubrificante apropriado; higienizava a sonda e lavava as mãos antes e após a alimentação; negava dificuldades e dúvidas sobre o procedimento. Conclusão: Os resultados foram satisfatórios neste estudo, todavia, considera-se necessária discussão de técnicas de enfermagem, especificamente sobre a passagem das sondas nasogástrica e nasoentérica, em estudos científicos, uma vez que contribuem para aprimorar ações desenvolvidas.

PALAVRAS-CHAVE: Enfermagem. Cuidados de Enfermagem. Intubação Gastrointestinal.