

Heart Team approach in cardiovascular specialty nursing----Opportunity or Challenge 心脏团队模式对心血管 专科护理的机遇和挑战

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- □Heart team Approach (心脏团队模式)
- **Cardiovascular Specialty Nursing**
 - development (心脏专科护理发展)
- New Opportunity (机遇)
- □Challenges (挑战)

It is a team of health care professionals who works together to solve heart problem for patient.

多学科的团队一起解决病人的心脏问题。

Why?

- The management of complex cardiovascular disease has changed markedly with the development of new strategies of care, an increasing amount of scientific evidence-based data and appropriate use criteria.

复杂心血管疾病的治疗已经发生了显著的的变化:

- 1。新技术的发展
- 2. 科学循证数据的数量增加
- 3. 在此基础上建立起来的运用依据



Heart Team Approach

Why?



• Patient centric evidence-based care multidisciplinary Heart Teams have become identified as cornerstones

以病人为中心的 以循证为基础的多学科的心脏团队模式已经被认证 是坚实的基石。

 The central goal of patient-centric care requires that the patient and family be sufficiently educated about the alternatives available so that their expectations can be met as fully as possible.

以病人为中心的诊疗目的需要病人和家属有足够的不同诊疗方案的信息,以致于选择的诊疗方案在最大程度上达到他们的期望。

Why?

• Given the wide range of information available from different cardiovascular specialties and the potential for individual physician biases, team-based care has great potential merit.

针对于心血管各项专科知识的广度和有可能存在的医生的偏见,心脏团队模式有巨大的价值。

Why?



 This has now been codified in guideline documents, and the Heart Team has emerged as a class 1 indication in both the 2010 European Society of Cardiology and the European Association for Cardio-Thoracic Surgery Guidelines for Coronary Revascularization and the 2012 ACC/AHA Guidelines for Coronary Artery Bypass Grafting surgery.

心脏团队模式已经作为欧洲 和美国心脏内科和心胸外科临床诊疗的 必备指导方针。

Why?

 The goal of the multidisciplinary Heart Team is to offer a balanced and complementary approach to patient care by joint and shared decision making among different medical care stakeholders such as cardiac surgery and interventional cardiology.

多学科合作的心脏团队模式目的是为了提供一个平衡的,互相补充的 方式,让临床医疗团队在作出诊疗方案之前,大家互相讨论,以长 不短,共同决定最佳诊疗方案·



When to apply ? Who are the team member? 什么时候· ? 谁组成了心脏团队 ?

- Complex cardiac disease and patient care issue
- Heart Team Approach can help to put these issues into perspective for patients and their families.
- This multidisciplinary team, including an experienced cardiac surgeon, interventional cardiologist, and primary cardiologist, working together can help to focus on specific patient considerations and expectations.

 This team can then evaluate the specific clinical setting in the context of evolving data from both RCTs and registries, as well as their individual experience to fully inform the patient and family about the risks/benefits ratio of any specific recommendation.







How to apply ?

• Coronary revascularization therapy

斯卡斯大利

• TAVR



Heart Team Approach--- Application -----Coronary revascularization therapy

an acute coronary syndrome with an isolated single discrete distal right coronary artery stenosis

-----PCI

a patient with significant angina, multiple coronary occlusions, and other severe complex disease (with a high SYNTAX score: >33) with adequate target vessels and viable myocardium -----**surgical revascularization**

How about those cases in between?

Revascularization Approaches for Coronary Artery Disease: Comparison

CABG

Advantages Compared with PCI

- Survival benefit in more complex disease particularly with left internal mammary artery (LIMA) use
- More complete revascularization
- Reduction in subsequent myocardial infarction
- Reduction in need for subsequent revascularization procedures

Disadvantages

- More invasive
- Longer recovery
- Increased periprocedural stroke
- Low use of multiple arterial grafts resulting in placement of venous conduits with potential development of subsequent vein graft disease
- Subsequent surgical procedures if needed are more difficult.

How about those cases in between?

Revascularization Approaches for Coronary Artery Disease: Comparison

PCI

Advantages compared with CABG

- Less Invasive
- Treatment of focal ischemic producing lesions leaving other lesions for later (targeted revascularization)
- Shorter recovery
- Can be repeated if needed
- Patient preference

Disadvantages

- Not shown to have a survival advantage or to decrease subsequent MI outside of primary PCI
- Less complete revascularization
- Vascular access bleeding
- Potential for stent thrombosis and need for dual antiplatelet therapy
- May need to be repeated
- Placement of very distal stents may preclude subsequent ability to place surgical grafts

Hybrid coronary revascularization

Advantages

- Minimally invasive
- LIMA to LAD with long term survival benefit
- Placement of DES rather than vein grafts to circumflex and right coronary artery
- Heart Team approach
- Completion angiography after surgery
- Excellent choice in patients with limited conduit availability
- Excellent choice in patients who have difficult to approach lesions with traditional grafting (e.g., AV groove lesions with multiple branching small epicardial coronary arteries subtending significant myocardial territories)

Disadvantages

- Need for hybrid operation room/catheter laboratory or two procedures
- Reimbursement issues
- Still requires a surgical procedure
- Not shown to have a survival advantage or to decrease subsequent MI versus standard of care CABG when
 possible
- No long-term randomized clinical trial data on relative safety/efficacy versus conventional CABG

How to make the best decision for patient?



Specialty Nursing development 专科护理的发展

1. Nurses are responsible for the direct care delivery and the consequential outcomes, specified in that ANA foundational document. 护士负责直接的临床护理和对临床效果负一定的责任,这在美国护士协会文件中有证可循。

2. Grounded in the profession of nursing, areas of focused nursing practice have emerged as nursing specialties. 根深蒂固的在护士职业的发展中,专科护理的发展已经演变和发展成型。

3. Registered nurses at the national and international level, as well as other stakeholders engaged in legal, regulatory, administrative, education, and research activities, value scope and standards documents. 无论在国内还是国外,注册护士已经和医生还有其他临床专业在法律,规定,行政,教学,科学研究领域扮演不同的角色。

Specialty Nursing development----Roles and grading

RN

Senior Nurse Nurse specialist Advanced Practitioner Nurse Nurse Practitioner Clinical Nurse Educator Clinical leader-Nurse Clinician Clinical Manager



Specialty Nursing development---- Roles and grading ------UK

Staff Nurse Senior staff Nurse Clinical Nurse specialist Nurse consultant Nurse Practitioner Lecturer practitioner Clinical manager

All specialty nursing requires credentialing just like doctors.

Specialty Nursing development---- Clinical Discipline -USA

cardiovascular

perinatal gynecology critical care: cardiovascular intensive care cardiac intensive care unit medical surgical intensive care neonatal intensive care trauma and neurosurgical intensive care diagnostic imaging laboratory services emergency gastroenterology community and family practice gerontology IV service

infection control

Specialty Nursing development---- Clinical Discipline USA

infection control mental health nephrology neurology neurosurgery nursing informatics occupational health oncology orthopedics palliative care perioperative trauma respirology cardiology



Specialty Nursing development---- Clinical Discipline UK

Ambulatory care nursing Advanced practice nursing **Burn nursing** Camp nursing Cardiac nursing Cardiac Intervention nursing **Dental nursing** Medical case management Community health nursing Correctional nursing Critical care nursing **Emergency** nursing Environmental health nursing Faith community nursing Flight nursing Forensic nursing Gastroenterology nursing Genetics nursing Geriatric nursing Health visiting Holistic nursing Home health nursing Hospice and palliative care nursing Hyperbaric nursing Immunology and allergy nursing Intravenous therapy nursing Infection control nursing Infectious disease nursing Legal nursing

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Specialty Nursing development---- Clinical Discipline UK

Military and uniformed services nursing • Neonatal nursing Neurosurgical nursing Nephrology nursing Nursing informatics 这版新学会 Nursing management Nursing research Nurse midwifery **Obstetrical nursing** Occupational health nursing **Oncology nursing** Orthopaedic nursing Ostomy nursing Pediatric nursing Perianesthesia nursing Perioperative nursing Private duty nursing Public health nursing Pulmonary nursing Quality improvement Radiology nursing Rehabilitation nursing Research nursing Renal nursing School nursing Space nursing Sub-acute nursing Substance abuse nursing

Cardiovascular Specialty Nursing development

Internationally subspecilaization becomes the trend of specialty nursing development:

- Interventional Cardiovascular nurses (Cath Lab)
- Cardiothoracic surgical nurses (Perioperative Care)
- Radiological therapy (Diagnostic imaging)
- Cardiothoracic Intensive care (CTSICU, CCU)
- Cardiac care coordinator (cardiac related clinical pathways)
- Heart failure nurse (HF patients)
- Valve nurses (valve cases)
- Pediatric cardiac nurses (congenital cardiac cases)
- Nurse trained Perfusionist
- Cardiac Nurse practitioner
- ----Cardiac Nursing School/ Campus such as Duke University etc

Opportunity: 机遇

 Nursing profession has greatly benefit from its in-depth development and growth in specialty nursing Practice.
 专科忽视的发展增强了·护理事业的·专业性和职业性。

2. Nurses can more choices in career development. 护士有多方位的职业选择。

3. Nurses' job satisfaction can be enhanced due to diverse practice 护士的工作满意度会因为工作的广度和深度而大大提高。

4. As major population of health care workforce, it helps to recruit more nurses joining this profession. 作为医院的最大需求,护理专科的发展会促进护士的招聘。

5. It will enhance the social position for nurses and strength the social status。 专科护士的发展当然会提高在专业领域的社会地位。

6. It elevates public image and recognition

² 也会促进公共形象和社会的认可。

Challenges

1. It needs resources to develop the specialty nursing practice benchmarking national and international criteria. 需要大量的人力和社会资源来建立国际标准的专科护理。

2. It requires legal professional body to legalize the practice。 它需要强有力的专业法制机构来管理他的合法和权益性。

3. It requires physician's buy-in and acceptance as specialty nurses may take over some practice from them. 需要医生能够接受专科护士将代替他们做部分的医疗工作。

4. It requires hospital management's support to develop this role. 需要医院管理层的支持来发展和实施专科护理的操作性。

5. It requires relevant nursing associations/ government bodies to give administrative and social support. 需要政府给予行政的支持。

6. It requires nurses to change mindset and challenge themselves to take higher responsibilities. 需要护士改变思维方式,事项专业的自主性·



DeltaHealth Hospital · Shanghai



- 由国际知名的斯道资本投资成立的一家立足于创新的综合医院
 致力于服务上海及周边地区
 位于青浦区徐泾镇
- 总建筑面积51,642平方米
- ■一期床位200张,二期床位350张
- 38间重症监护病房,7间手术室,2

间心脏导管室,2间复合手术室





A 楼 : 手术部、住院部 A: Operation Room, Inpatient B 楼 : 门诊、急诊、住院部 B: Outpatient , Emergency, Inpatient C 楼 : ICU、住院部、餐 C: ICU, inpatient , Restaurant D 楼 : 行政管理楼 D: Administrative Building





影像设备 Imaging Equipment



■ 计算机断层扫描(CT) Brilliance ICT (iMR)



DSA大平板探测器(30*38cm) UNIQ Clarity FD20



Ingenia 3.0T 大孔径(70cm)磁共振 Ingenia 3.0T MRI



无线双平板探测器数字X线摄影设备(DR)
 Digital Diagnost Power



国内顶尖团队

每 內 波 心内科 中华医学会心血管病学分会主任委员 中国科学院院士

孙立忠 心外科 中国医师协会心血管外科分会副会长 美国AATS 资深会员

> 刘建实 心外科 中华胸心血管外科学会委员

黄连军 介入治疗与医学影像 中国医师协会介入学术 委员会主任委员











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http://www.agoodme.com/views/mobile.html?tid=154c 987ab509c53a&dataFrom=mobile&from=timeline&isapp installed=0

