

# How nursing can contribute to the preparation, development, and interpretation of the urodynamic study. An innovative approach.

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## AIMS OF STUDY

To investigate the role of nursing in the process of education, administration, and assistance in the urodynamic study, in addition to sharing our experience and how it makes a difference, a fact that is represented in the results of nursing attention and care.

## METHODS

A narrative review of the literature was performed in PUBMED and EMBASE using the terms Urodynamics, urodynamic study, nursing, a manual purging of articles with relevance to the proposed thematic was done and those that inquired about the role of nursing in urodynamics were defined to be included in the review.

The presence of nursing staff in a center that performs urodynamic studies is key to the proper development of the same, so it is relevant to conduct a study of this profession and the impact it can have on the preparation, development, and analysis of this diagnostic study. As well as support in the active identification of patients requiring antibiotic prophylaxis to reduce the rate of infections (Table 1.).

## RESULTS

Nursing intervention, as an educator, allows to reduce the anxiety or stress that may be generated by exposure to an invasive procedure (1). In the specific aspect of urodynamics, the role of educating the patient is key, not only in inherent aspects of the procedure but also in emphasizing the moments that the patient should indicate sensations or symptomatology (2).

Finally, at the end of the procedure, it is the nursing staff who reminds the patient of the associated signs and symptoms of infection, in addition to performing a follow-up 24 to 72 hours later for the management indicators of the service and continuing with the key role of guaranteeing patient safety (1).

On the other hand, monitoring and follow-up by nurses allow timely identification of patients at risk of complications, which would allow a guide for the proper management of these complications. Our institution's virtual institutional tool allows us to perform a standardized follow-up of these patients and focus on those who require strict follow-up according to the initial risk assessment.

**Table 1. Indication of antibiotic prophylaxis.**

- Over 70 years of age
- Asymptomatic bacteriuria
- Users of cystotomy catheter, bladder catheter, intermittent clean catheterization or external urine collectors (urocondom).
- Evidence of elevated postvoid residual (greater than 100ml)
- Infravesical obstruction
- Immunosuppressed (especially renal transplant) or use of corticosteroids for more than 3 months
- Neurological disease

## CONCLUDING MESSAGE

Nursing as a profession seeks to respond to patients' individual needs, but its marked contribution to the health system is usually administered in a service. This has allowed aspects such as adequate use of resources, but it is necessary to have a greater impact on the patient with tools such as education, previous assessment, and continuous follow-up. It is essential for the nursing team to have a comprehensive understanding of the different aspects and specific needs of the patients before and during the urodynamic study. This participation allows having a positive impact on patients, with benefits for urological patients. Finally, the continuous accompaniment of the patient, the previous education, and the understanding of the study allow the decrease of anxiety symptoms, allowing results closer to reality.

## References

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