

EFFECTIVENESS OF INFORMATION BOOKLET ON MANAGEMENT OF URINARY DRAINAGE SYSTEM AMONG CLASS IV WORKERS.

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Abstract:

Background of the study: Urine is collected in drainage bags. The catheter (tube) in your bladder will serve as the attachment point for your bag. Because of urinary incontinence (leakage), urinary retention (inability to urinate), a surgery that required a catheter, or another medical condition, you can have a catheter and urine drainage bag. **objectives:** 1. To assess Pre-test knowledge score regarding the management of urinary drainage system among class IV workers. 2. To assess Post-test knowledge regarding management of urinary drainage system among class IV workers. 3. To find an association between socio-demographic variables and knowledge regarding management of urinary drainage system among class IV Workers. **Methodology:** A Descriptive study was conducted through non probability purposive sampling technique. Demographic data was collected by questionnaire method, Knowledge questionnaire and information regarding the Management of urinary catheterization given thorough Information booklet. **Results:** pre-test outcome Class IV workers had poor knowledge in 90% of cases, average knowledge in 10%, and good knowledge in 0% of cases. Following the distribution of an information booklet, we conducted a

post-test. Following a test, the results showed that 20% of participants had bad knowledge, 20% had average knowledge, and 80% had strong knowledge.

Keywords: urinary incontinence, urinary retention,

Introduction: Urine is collected in drainage bags. The catheter (tube) in your bladder will serve as the attachment point for your bag. Because of urinary incontinence (leakage), urinary retention (inability to urinate), a surgery that required a catheter, or another medical condition, you can have a catheter and urine drainage bag. ¹ The procedure of switching the indwelling urinary catheter's big sterile drainage bag to a small-size leg drainage bag in the post-acute and long-term care context aims to preserve a person's comfort, mobility, and dignity. Since using a leg bag intermittently disrupts the closed urine drainage system, there is little data evaluating the effect of this on the frequency of urinary tract infections. ²

Urinary catheters, both intermittent and indwelling, are used by people all over the world to treat bladder dysfunction, although it is generally known that these devices can be harmful. Current catheter designs can result in urethral and bladder damage, urinary tract infections, septicemia, and commonly obstructed indwelling devices. Additionally, the gadgets can drastically disrupt users' life, restrict their ability to go about their daily business, and can be expensive for healthcare providers to manage. Despite this, only a small amount of meaningful design was examined; frequent catheter-related issues were listed and design areas that could use better were suggested. High potential exists for reducing the personal and financial costs associated with catheter use..³

Urinary catheters have been used to drain the bladder when it doesn't empty for more than 3500 years. Clean intermittent self-catheterization is the best method for those with limited bladder function and for whom it is practical.⁴

Five hundred and thirty-two adult patients of both sexes were studied in three groups, with an infection incidence of 38.9 percent using an open drainage system. The prevalence of urinary tract infection in catheterization patients inside the hospital was examined in relation to the type of drainage bag used. Closed systems had a 25.1 percent infection rate, whereas closed systems with chlorhexidine added had a 15 percent infection rate. There were 29.8 percent more infections than usual.⁵

Material & Methodology:

The study was conducted utilising a descriptive research design and a quantitative research approach. 40 workers from the class IV were chosen using a non-probability sampling technique. Age, gender, educational attainment, income, marital status, place of residence, family structure, and other demographic factors were used to collect the data. Following the content evaluation by experts, data was gathered using a knowledge questionnaire and an educational booklet on the maintenance of the urinary drainage system. Using descriptive statistics, data analysis and interpretation were performed.

Result:

Resulting from a demographic factor Class IV workers are divided into two genders: 72.5 percent of them are women and 27.5 percent of them are men. Worker diversity is 90 percent Hindu and 10 percent Muslim. And in terms of class IV workers' educational standing, 15% of workers are enrolled in secondary education, compared to 85% who are enrolled in elementary education. 95 percent of class IV employees are married, while 5% are single. number of class IV worker's family members 40% of families have more than 4 individuals, 45% of families have four members, and 15% of families have five or more members.

Pre-testing and post-testing are both used to conduct studies. To analyse and understand data, descriptive statistics were utilised as a result. 90% of class IV workers who took the pre-test had poor knowledge, 10% had average knowledge, and 0% had good knowledge. Following the distribution of an information booklet, we conducted a post-test. Following a test, the results showed that 20% had bad knowledge, 20% had average knowledge, and 80% had good knowledge.

Level of Knowledge	Frequency(f)		Percentage (%)	
	PRE-TEST	POST-TEST	PRE-TEST	POST-TEST
Poor	36	00	90.00%	00.00%
Average	4	08	10.00%	20.00%
Good	00	32	00	80.00%

Discussion:

The present study was undertaken to assess knowledge and practice of urinary drainage system among class IV workers. Descriptive study with single group test design approach was adopted in order to achieve the objective of the study. The sample 40 and data was collected from them by using structure knowledge questionnaire and providing information booklet.

A randomized controlled trial was undertaken to test the effects of an education programme, which included an information booklet and demonstration, on the management of urine drainage systems by patients and carers. A total of 45 patients, new and established users, were included. Data were collected at pretest, test and follow-up visits. The education programme was found to improve significantly the performance of handwashing after bag emptying and before and after bag changing, although this effect did not persist over time. The findings are discussed with a number of conclusions drawn and recommendations for nursing practice.⁶

An evaluation of four urine drainage systems available for use by patients with indwelling urethral catheters and prescribed by general practitioners was performed. Twenty-four patients in the community of one health district tested each system for a

number of weeks. Both users and carers responsible for the management of the urine drainage system tested their acceptability and reported on preference, methods of support, ease of use and comfort. The significance of the results and their implications for nursing are discussed.⁷

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