

Title: Necrotizing Fasciitis wound care bundle of New Concept Postoperative in Outpatient Patients

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Introduction: Necrotizing Fasciitis was the number one and rate of foot amputation was also trending higher in 3 year respectively.(Department of Surgery, Lamphun Hospital, 2019)Situation of the coronavirus outbreak, there is a policy to reduce the number of clients.We develop localized and applied wound management conceptual frameworks, the development of clinical practice guidelines of the National Council for Medical and Health Research, Australia (NHMRC, 1998) translated and applied by Chaweewan Thongchai. (2005) The Care Bundle under Postoperative Wound Management which is Wound bed preparation (Falanga, 2002)

Aim: reduce waste time for wound dressing and protecting contact to each other and the Corona's outbreak

Method

Development care bundle period

1. Determine the issue. 2. Assign a development team 3. Define the objectives and scope of the practice and results. 4. Obtain data and empirical evidence in chronic wound management and evaluate the value of empirical evidence5. Drafting 6. Expert review7. A trial used as a guideline for wound dressing in OPD case postoperative ulcer patients.

Implement period Before development dressing every Monday, Wednesday, Friday, changing to wound dressing on Monday and Thursday

Result: It was found that in 13 days/1 patient has a total of 429 Visits which was reduced. There was 1 case of Infection, Transfer to the doctor considering STSG 2 patients or 8.33%. 5 wounded cases or 20.83%. Transfer to Primary Health center in 5 cases or 20.83%,continued wound dressing 7 cases or 29.17%. If compared with prior to the development of practice, it was not statistically significant at $p\text{-value} > 0.05$.It mean compared to before the development, there was no difference. The patient's satisfaction before the development was 94.67%. After 96.33%.

Conclusion: The research it can reduce patient go to the hospital in the situation of an epidemic. Have no complications and infections compared to before the development. It can reduce the cost and difficult of traveling as well as the tiredness in the wound dressing of caregivers and patients. Leads to a better quality of life and a significant reduction in health care costs.

Reference

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