

Preventing the Septic Shock in an Oncological Patient with Febrile Neutropenia Submitted to Chemotherapy: The Nurse's Responsibility

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Abstract : The main purpose of the present study is to understand the nurse's responsibility in preventing the septic shock in an oncological patient with febrile neutropenia submitted to chemotherapy. In order to do it, an integrative review of literature has been conducted. In the research done in many databases, it was concluded that only 7 out of 5202 articles compiled the entire inclusion standard present in the strict protocol of research, being this made up by all different methodologies. On the research done in the 7 articles it has resulted 8 text macro-units associated to different nursing interventions: 'Health Education'; 'Prophylactic Therapy Administration'; 'Scales Utilization'; 'Patient Evaluation'; 'Environment Control'; 'Performance of Diagnostic Auxiliary Exams'; 'Protocol Enforcement/Procedure Guidelines'; 'Antibiotic Therapy Administration'. Concerning the prevalence/result's division there can be identified many conclusions: the macro-units 'Patient Evaluation', 'Performance of Diagnostic Auxiliary Exams', and 'Antibiotic Therapy Administration' present themselves to be the most prevalent in the research - 6 in 7 occurrences (approximately 85.7%). Next, the macro-unit 'Protocol Enforcement/Procedure Guidelines' presents itself as an important expression unit - being part of 5 out of the 7 analyzed studies (approximately 71.4%). The macro-unit 'Health Education', seems to be in the same way, an important expression unit - 4 out of the 7 (or approximately 57%). The macro-unit 'Scales Utilization', represents a minor part in the research done - it's in only 2 out of the 7 cases (approximately 28.6%). On the other hand, the macro-units 'Prophylactic Therapy Administration' and 'Environment Control' are the two categories with fewer results in the research - 1 out of the 7 cases, the same as approximately 14.3% of the research results. Every research done to the macro-unit 'Antibiotic Therapy Administration' agreed to refer that the intervention should be strictly done, in a period of time less than one hour after diagnosing the fever, with the purpose of controlling the quick spread of infection - minimizing its seriousness. Identifying these interventions contributes, concluding that, to adopt strategies in order to prevent the phenomenon that represents a daily scenario responsible for the cost's increase in health institutions, being at the same time responsible for the high morbidity rates and mortality increase associated with this specific group of patients.

Keywords : febrile neutropenia, oncology nursing, patient, septic shock

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