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• 計畫中文名稱	應用個案管理於控制消化性潰瘍病患照護品質及成本效益之探討	
• 計畫英文名稱	Application of Case Management on Patients with Peptic Ulcer and Bleeding: Examining Quality of Care and Cost Effectiveness	
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• 中文關鍵字	消化性潰瘍；品質管理；成本效益；個案管理；護理照顧	
• 英文關鍵字	Peptic ulcer；Quality management；Cost effectiveness；Case management；Nursing care	
• 中文摘要	<p>本研究的目的是探討應用個案管理對控制消化性潰瘍合併出血病患於住院後自我照顧認知程度、服務滿意度、住院天數與醫療費用之成效。採準實驗法,共 79 名病患符合選樣條件,實驗組 42 名,對照組 37 名,實驗組病患接受個案管理護理方案,對照組則接受一般常規照護方案。研究工具為自我照顧認知程度量表及服務滿意度量表,採專家內容效度,信度分別為 K-R20=0.81 及 Cronbach's alpha 為 0.96,研究者間一致性信度 Kappa 值為 0.89,並從研究機構取得醫療費用。研究者於病患住院 24 小時內收集前測資料,後測資料於出院當日完成。資料以卡方檢定、t-檢定、pair-t 進行檢定分析。研究結果發現:實驗組病患自我照顧認知程度及服務滿意度均較對照組病患高,且達顯著差異。平均住院天數縮短 2.85 天及平均醫療費用減少 5411.21 元,亦達顯著差異。由此可見,針對消化性潰瘍合併出血病患採行個案管理方案,可有效控制照護品質與醫療費用。於因應保險給付制度變革之時,提供給護理行政主管,作為管理品質與成本之參考。</p>	
• 英文摘要	<p>The purpose of this study was to investigate the application of case management in self-care knowledge, satisfaction with health care, length of stays, and medical cost. A quasi-experimental design was used in this study. Based on the hospitalization diagnosis and the study inclusion criterion, the total sample consisted of 79 subjects with UGI bleeding. The subjects were divided into two groups, 42 subjects in the experimental group and 37 subjects in the control group. Subjects in the experimental group were handled with the case management method, where as subjects in the control group received routine care. Content was examined to determine the validity in this study. The Kuder-Richardson 20 method, was used to evaluate of self-care scale (KR20=0.81); and Cronbach's alpha method was used for the satisfaction scale (.alpha.=0.96). Inter realizability for agreement among the researchers was examined using the Kappa method and the coefficient was 0.89. Data were collected</p>	

by using the demographic data sheet, the self-care knowledge scale, the satisfactory questionnaire, and the patient's chart. Data also were collected from the center of research institution. The pre-test was done by researcher within 24 hours after patient's hospitalization, and the post-test was done on the day of patient's discharge. Data were analyzed by using the chi-square test, t-test, and pair t-test. The results indicated that the experimental group was significantly higher in self-care knowledge and patient's satisfaction with medical health care. The experimental group was significantly less in the average length of stays (reduced 2.85 days) and medical cost (reduced by NT\$5411.21). Based on the study results, it was concluded that the case management method could effectively control quality of care, length of stays and medical cost in UGI-bleeding patients. In addition, when insurance payment policies undergo change, the findings of this study will provide nursing administrators as a reference on managing quality and cost.