開顱手術病患急性混亂相關因素及定義性特徵之臨床效度測定

Clinical Validation of the Related Factors and Defining Characteristics of Acute Confusion among Craniotomy Patients

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摘要

本研究旨在探討開顱手術病患急性混亂相關因素及定義性特徵之臨床效度測定。研究工具為研究者所發展的「急性混亂相關因素評量表」及「急性混亂定義性特徵評量表」。研究對象包括測試相關因素及定義性特徵之診斷內容效度（DCV）之神經科護理人員 60 名，為測試臨床效度的開顱手術病患 52 名，經迷你精神狀態量表（MMSE）評量結果分為無異狀組（MMSE-negative）計 17 名及有異狀組（MMSE-positive）計 35 名。研究結果發現，經專家效度及考量診斷內容效度及臨床效度結果，保留七項相關因素；而二十五項定義性特徵在考量其專家效度、診斷內容效度、及因素分析檢定之結果，最後保留十六項。經因素分析萃取出兩個因素：因素 I「認知功能障礙或行為失常」；因素 II「意識、睡眠紊亂暨負向行為」。為能有效區辨急性混亂，兩組個案經對數迴歸分析，顯示十六項定義性特徵具有良好的預測能力，可提供臨床護理人員正確、有效的評估急性混亂。

Abstract

The purpose of this study was to explore the clinical validation of the related factors and defining characteristics of acute confusion among craniotomy patients. Two study methods were used for clinical validation: (1) diagnostic content validity (DCV) and (2) clinical observation. Two scales used to examine the reliability and validity in this explorative study were related factors of acute confusion scale and defining characteristics of acute confusion scale. The samples for this study included 60 nurses of neurological wards for DCV of related factors and defining characteristics, and 52 craniotomy patients for CDV of related factors and defining characteristics. According to the Mini Mental Status Examination (MMSE), fifty-two craniotomy patients were divided into a MMSE-negative group (n=17) or a MMSE-positive group (n=35). Results of this study showed that the DCV scores of seven related factors were greater than 0.5. Five of 21 defining characteristics were deleted based on the results of DCV, clinical observation and factor analysis. Two factors extracted from

16 defining characteristics were "cognitive impairment or behavior disturbance" and "consciousness and sleep disturbance or negative behavior."