Abstract	024		
Category:	Research	on	nursing	diagnosis	
	
TITLE:		 Clinical	validation	of	risk	for	decreased	cardiac	tissue	perfusion	after	percutaneous	
coronary	intervention:	a	retrospective	cohort	study		
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Introduction	with	problem	statement:			
After	percutaneous	coronary	intervention	(PCI),	patients	are	susceptible	to	a	new	decrease	in	cardiac	
(coronary)	circulation,	which	may	compromise	health,	i.e.,	risk	for	decreased	cardiac	tissue	perfusion	
(RDCTP	-	00200).(1-2)	Therefore,	nurses	should	be	aware	of	significant	predictors	of	RDCTP	in	order	to	
detect	a	possible	complication	and	intervene	early.	The	aim	of	this	study	was	to	clinically	validate	the	
nursing	diagnosis,	RDCTP,	by	identifying	its	predictors	after	PCI.			
	
Methods:			
A	retrospective	cohort	study	with	data	from	1,542	adults	undergoing	PCI	in	São	Paulo/Brazil,	from	
March/2008	to	July/2015.	Demographic,	anthropometric,	clinical,	and	procedural	variables	were	
collected	as	explanatory.	Patients	with	elevations	of	cardiac	biomarkers	above	three	times	the	upper	
reference	limit	normal	for	the	laboratory,	within	24	hours	of	procedure,(3)	
were	diagnosed	with	the	
endpoint	periprocedural	myocardial	infarction	(PMI),	equivalent	to	decreased	cardiac	tissue	perfusion	in	
this	study.	Associations	between	the	explanatory	variables	and	the	endpoint	were	investigated	by	the	
unpaired	Student	t-test,	Mann-Whitney	test,	Chi-square	test,	Fisher’s	exact	test,	or	likelihood-ratio.	
Those	variables	with	p<0.20	and	that	were	clinically	relevant	were	submitted	to	multivariate	logistic	
regression,	to	determine	the	predictors	of	PMI,	expressed	as	odds	ratios	(OR)	and	95%	confidence	
intervals	(CI).