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Special Issue on

**INTERNATIONAL
VIRTUAL CONFERENCE
28-30 JANUARY 2021**

**AMELIORATION IN NURSING EDUCATION,
RESEARCH AND CLINICAL PRACTICE-
FOCUSSING ON E-HEALTH IN DIGITAL
NATIVE ERA**

Organised By:

PANNA DHAI MAA SUBHARTI NURSING COLLEGE



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SWAMI VIVEKANANDA
SUBHARTI
UNIVERSITY
UGC Approved Meerut
Where Education is a Passion...



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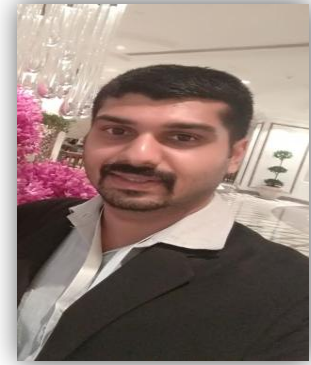
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About Swami Vivekanand Subharti University

Swami Vivekanand Subharti University (SVSU) is a University under section 2(f) of the University Grant Commission (U.G.C.) Act, 1956 set up under the Swami Vivekanand Subharti Vishwavidyalaya, Uttar Pradesh Adhiniyam, 2008 (U.P. Act No.29 of 2008) as passed by Uttar Pradesh Legislature and assented by the Hon'ble Governor of Uttar Pradesh in September 2008. The University has been established under the aegis of Mahayana Theravada Vajrayana Buddhist Religious and Charitable Trust, Meerut, which has acquired a commendable record of service in the field of Education, Health Care and Social Welfare. The University éclat of highly qualified, dedicated and competent faculty from all walks of life, world class infrastructure, well equipped laboratories with latest state-of-the-art equipment and a vast library with recent knowledge resources including e-resources. The unparalleled uniqueness of Subharti University lies in providing an environment fully conducive to the holistic development of students. Thus, maintaining a balance between academic excellence and moral perfection.

The University has been awarded the membership of Association of Indian Universities in 2013. "All India Conference of Intellectuals and School of Educators" have conferred "Outstanding University of the Year 2013-2014" to The University for its outstanding contribution in the fields of education, science, healthcare, national integration, social empowerment and preservation of cultural heritage. The University has been accorded grade 'A' by NAAC in 2016.



About Panna Dhai Maa Subharti Nursing College

Panna Dhai Maa Subharti Nursing College (PDMSNC) is a pioneer in imparting nursing education in western U.P. it is established in January 2000 with GNM course (3 years duration), in the name Panna Dhai Maa – a vet nurse who sacrificed her own son in order to save the life of the prince of Rajasthan and the B.Sc. Nursing degree course was established in the year 2008 under swami Vivekanand Subharti University. In response to the dire need of the professional Nurse leaders and nurse educators, Post – Graduate degree programme in nursing, was started in 2011 in 5 specialties and Nurse Practitioner in Critical care in 2017 under Swami Vivekanand Subharti University.



Panna Dhai Maa Subharti Nursing College has excellent infrastructure with state-of-the-art laboratories and spacious library with internet and e-learning facilities. Advanced teaching learning activities are supported by experienced teaching faculties with wide areas of expertise in clinical, academic and social settings. For clinical training of students, there is a parent hospital with name Chhatrapati Shivaji Subharti hospital in the campus having 1097 beds and own Rural & Urban health centers for community health nursing practice.

The Institution was awarded “Excellence Award in Nursing Education” from TNAI UP State Branch, Uttar Pradesh. A total of 1680 alumni working inside and outside the country are the golden feathers of our institution.



Message from Chief Patron



Dr. Mukti Bhatnagar

Founder of SVSU

I am elated to learn that Panna Dhai Maa Subharti Nursing College, Subharti University, Meerut is hosting an International Virtual Conference on theme: "Amelioration in nursing education, research and clinical practice-focusing on e-health in digital native era" and observing the annual college day from 28th January to 30th January 2021.

The theme of this international virtual conference is relatable to the existing circumstances of the pandemic COVID 19 where the health care workers particularly the doctors and nursing care providers has been labeled as the front line warriors and have been serving the mankind keeping their own priorities at the last. The COVID 19 scare however has not been able to deter the field of education and the focus has shifted from the classroom era to the virtual mode. With the world shrinking to a global village and the things available at the click of a button, the health care providers also has seen a sea change in the way they are communicating with the world around. The focus has shifted from visit to hospital until and unless absolutely necessary to consultation by means of telemedicine. The nursing field has also caught up with the changing scenario and has kept itself abreast be it in the field of education, research or clinical practice. They have adapted to the new normal and have devised e ways of communicating amongst themselves as well as with the patients. The nursing care is more of a quality nor over quantity by electronic means of communication and this has indeed proven to be a boon in these testing times.

I am sure that through this international virtual conference the participants will be able to update themselves with the recent advances and latest happenings in the field of nursing and how the world is coping up with the pandemic and so that they are ready to take the world head on. The galaxy of learned speakers should be able to mesmerize the participating delegates with their discourses and knowledge related to diverse fields of nursing.



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I would like to extend my best wishes to unswerving and arduous efforts of Capt. Dr. Geeta Parwanda and her team whom I am in no doubt will be able to uphold the name of the institute as well as that of Subharti University in the minds of the participating delegates.

Dr. Prof. Mukti Bhatnagar
MBBS, MD (Medicine), PGDMCH, PGDM

Message from Patron



It gives me an immense pleasure to congratulate Panna Dhai Maa Subharti Nursing College for organizing “Annual College Day Celebration and International Conference from 28 – 30 January 2021”.

Virtual International Conference on “Amelioration In Nursing Education, Research and Clinical Practice-Focusing On E-Health In Digital Native Era”, not only bring all the researchers, students at one platform but also inculcates the research culture among the entire fraternity of education in the country, thereby contributing to the development of nation. I hope that this conference would certainly induce innovative ideas among the participants paving way for new inventions in clinical practice.

On behalf of university, I wish all delegates have thought provoke in session and assure you to provide a healthy experience and warmhearted memories to cherish.

I would like to convey my best wishes to organizing team for a grand success

Prof. Dr. V. P Singh

Hon’ble Vice Chancellor,

SVSU, Meerut



Message from Patron



I would like to congratulate Panna Dhai Maa Subharti Nursing College for organising the International conference, with the theme “Amelioration in nursing education, research and clinical practice- focusing on e-health in digital native era”.

Digital education is increasingly used for clinical practice guideline dissemination and adoption all over the world. It has been increasingly employed in continuing medical education and professional development, offering a suppler, nominal and approachable substitute to traditional learning that transcends the impediments of terrain and time. Nowadays, utilization of diverse media and delivery devices allows for engaging and interactive learning resources beneficial for the learning needs of healthcare professionals. Evidently the studies on nursing and medical students have demonstrated that satisfaction is consistently higher in a blended learning environment compared with a traditional lecture setting.

I believe this conference will be one of the finest opportunities for academicians, scientists, professionals and researchers from all over the world to share and express their views also, the research concepts discussed during the International Conference will evaluate interactive, simulation-based and spaced forms of digital education and report on outcomes such as skills, behaviour, patient outcomes and cost.

Hope it will be a splendid event, both in terms of intellectual quality and social gratification.

All the Best!

Jai Hind!

Dr. Shalya Raj

Chief Executive Officer

Swami Vivekananda Subharti University

Meerut



Message from Patron



I am happy to know that Panna Dhai Maa Subharti Nursing College is celebrating 20 years of excellence and is organizing an International virtual conference from 28 -30 January 21 to commensurate the occasion.

The alumni of Subharti University spread across the globe have made not only their alma matter but are making the University proud through their achievements. I am sure that the virtual conference shall provide an opportunity for the alumni to network with one another and connect with the younger generation.

I extend my warm greetings and wishes to the college and the participants for making the conference a success.

Dr. Krishnan Murty

DMS, CSSH

Trustee, MTVBRC Trust

SVSU, Meerut



PRESIDENT

THE TRAINED NURSES ASSOCIATION OF INDIA
UTTAR PRADESH STATE BRANCH



MESSAGE

I am Happy to learn that **Panna Dhai Maa Subharti Nursing college**, Meerut is organizing an International Conference on the theme “AMELIORATION IN NURSING EDUCATION, RESEARCH AND CLINICAL PRACTICE- FOCUSING ON E-HEALTH IN DIGITAL NATIVE ERA” from 28 - 30 January 2021. The conference schedule is itself self-explanatory with the focus on nursing fraternity for developing their technical expertise in the digital platform which will enhance the use of digital expertise in learning and patient care. It gives the nurses the right platform to have an insight into various contemporary professional issues.

I extend my warm greetings and felicitations to the Principal, Dr.Geeta Parwanda and her entire team and wish the conference all success.

Mary J Malik
President, TNAI, UP state branch

Lucknow



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It is with great pleasure that I am penning down these few lines for this prestigious virtual conference - “Amelioration In Nursing Education, Research And Clinical Practice– Focussing On E-Health In Digital Native Era”.

First, my congratulations to Panna Dhai Maa Subharti Nursing College for thinking so innovatively and pinning down a very apt theme for the conference.

2020 has forced many establishments, especially the education sector to think of learning delivery in ways that we were not used to. Not that the technology was not existing. However, the not so planned and sudden lockdown due to the novel corona virus, did propel us into advanced and innovative solutions for education. Nursing colleges have aptly risen to virtual learning methodologies and the nurses and nursing students have become much more adept at handling technology. This in turn must lead to newer areas of specialization for nurses.

This conference I see has brought together some very August faculties to make it an extraordinarily rich experience. Wishing this conference organizer all the best and wishing the delegates to take the best out of each session, which are so thoughtfully curated by the nursing leaders at Panna Dhai Maa Subharti Nursing College.

I also bring you the best wishes from all members of Association of Nurse Executives (India)

An incredibly Happy and Progressive 2021

Thankam Gomez

President, Association of Nurse Executive (India)



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QUALITY OF LIFE OF HEALTH WORKERS ON PROVIDING CARE TO COVID-19 PATIENTS

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Abstract:

Health-care providers are vital resources for every country. Their health and safety are crucial not only for continuous and safe patient care, but also for control of any outbreak. **Objectives:** To assess the Quality of life of Health Workers on providing care to Covid-19 patients. **Methodology:** Quantitative descriptive research design was adopted for the study. Purposive and snowball sampling technology was used. A semi-structured survey questionnaire was formulated in Google forms and made accessible online for self- administration. **Results and Discussion:** Finally, it has been found that 40.7% of the health worker reported low Quality of life, 51.1% reported moderate quality of life and 8.2% reported good quality of life. **Conclusion:** In the current scenario of difficult situations, health workers showcased marvellous strength and resilience. They hooked up with varieties of support ideas and self-adjustment skills to relieve stress, because they knew they needed to be powerful and focus on their duty in order to save more lives. At the final, every health care workers expressed that they were proud to be the health workers.

Keywords: Quality of Life, Health worker, Care to Covid-19 patients.

Introduction:

Coronavirus disease 2019 (COVID-19) is rapidly spreading worldwide. The rapidly evolving epidemic has stressed the entire world. When fever clinics and respiratory and infectious disease units were overwhelmed by the increasing number of suspected and confirmed cases in the early stages of the outbreak, general wards were

Image

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Panna Dhai Maa Subharti Nursing College, Swami Vivekanand Subharti University,
Meerut, Uttar Pradesh, India

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quickly modified into isolation wards, and health-care providers who did not have infectious disease expertise stepped up to provide care for patients with COVID-19.

Health-care providers are vital resources for every country. Their health and safety are crucial not only for continuous and safe patient care, but also for control of any outbreak. However, health-care providers caring for patients during the severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS) outbreaks were under extraordinary stress related to high risk of infection, stigmatisation, understaffing, and uncertainty, and comprehensive support was a high priority during the outbreaks and afterwards. Quantitative studies have shown that frontline health-care providers treating patients with COVID-19 have greater risks of mental health problems, such as anxiety, depression, insomnia, and stress.

Frontline physicians and nurses who had no infectious disease expertise had additional challenges when they adjusted to an entirely new working environment in this stressful situation. To support them effectively, it is necessary to gain insights into their lived experience.

Objectives:

To assess the Quality of life of Health Workers on providing care to Covid-19 patients.

Methods:

Study Design and Participants: Quantitative descriptive research design was adopted for the study. Purposive and snowball sampling technology was used. A structured survey questionnaire was formulated in Google forms and made accessible online for self administration. An informed consent was provided at the beginning of the survey. Variation in years of work experience, number of support days in Covid 19 wards, and hospital of employment were considered to obtain diversity in the experiences of caring for patients with COVID-19. The data was collected from 1 July 2020 to 30 Sep 2020. We used snow ball sampling methodology to send the survey to potential participants. This method is nonprobability sampling and entailed. The semi-structured questionnaire was circulated via e-mail, WhatsApp, and social media to the health care workers. Through the study, we got a clear picture that Health worker's who are at first hand involved in caring for COVID-19 patients at public and private facilities in India were eligible to participate in the study.

The study was approved by the ethics committee of Swami Vivekanand Subharti University, Meerut.

Measures:

Data were collected on demographic characteristics, and quality of life.

Demographic Data: Demographic data collected included Health Care worker age, gender (male or female), marital status, years of experience, duration in covid 19 ward and if the HCW infected with COVID 19.

Quality of Life: We used the validated questionnaire to find out the level of quality of life and scoring interpretation are 21 - 30 – Good, 11 - 20 – Moderate, 0 – 10 – Low quality of life.

Statistical analysis

The data is collected by administering a semi-structured questionnaire. Data analysis and interpretation was done by using both descriptive and inferential statistics. Data were tabulated and summarized in master datasheets. The purpose of data analysis is to organize the data into interpretable forms so that the research problem can be studied and tested..

Results and Discussion:

100 health workers were contacted around India. The survey received 71 responses.

The Participants of the study were the care takers of the patient with Covid 19 in the hospitals when there were deployed. They all were working in the Covid 19 wards at different time in the month of July to September 2020.

Frequency and percentage distribution of the health care workers according to demographic variables:

S.N	Demographic variables	Frequency	Percentage
1.	Age in years		
	20-30	61	85.9
	31-40	6	8.5
	41-50	1	1.4
	>50	3	4.2
2.	Marital Status		



	Married	18	25.4
	Unmarried	53	74.6
3.	Years of Experience		
	0-10	65	91.5
	11-20	2	2.8
	21-30	1	1.4
	>30	2	2.8
4.	Duration in Covid 19 ward		
	0-2 months	17	23.9
	2-4 months	20	28.2
	4-6 months	10	14.1
	>6 months	24	33.8
5.	Have you been infected with Covid – 19		
	Tested positive and hospitalized	8	11.3
	Tested positive and was advised home isolation	6	8.5
	Was on leave and tested positive (Community acquired)	1	1.4
	Was not infected	56	78.9

Data presented in the **table 1** shows the distribution of subjects according to Age, Marital status, Years of experience, Duration in Covid 19 ward, infected with Covid -19.

The table shows that 61(85.9%) of them were in the age group of 20-30 years, 6 (8.5%) were in the age group of 31-40 years, 1(1.4%) of them were in the age group of 41-50 years and 3 (4.2 %) were above 50 yrs of age.

Considering the marital status, 53 (74.6%) were unmarried and 18 (25.4%) were married.



Regarding years of experience, 65 (91.5%) were having experiences of 0 – 10 years, 2 (2.8%) were having experience between 11- 20 years, 1 (1.4%) having experience between 21 – 30 years and 2 (2.8%) having experience above 30 years.

According to the duration of duty in covid 19 ward, 17 (23.9%) were in duty for 0 -2 months, 20 (28.2%) were in duty for 2-4 months, 10 (14.1%) were in duty for 4 – 6 months, 24 (33.8%) were in duty for more than 6 months.

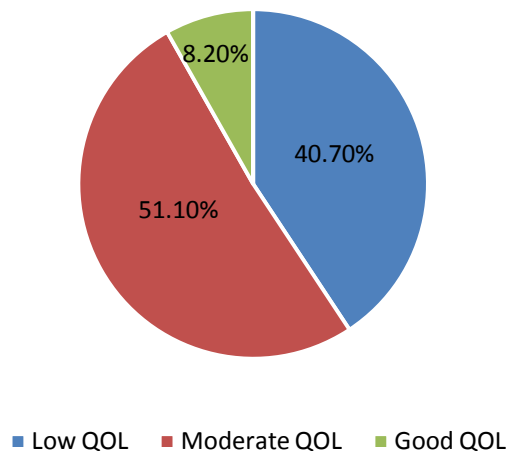
The last demographic data represents whether the health care workers get infected with Covid 19. 8 (11.3%) were tested positive and hospitalised in Covid ward, 6 (8.5%) were tested positive and was advised home isolation, 1 (1.4%) was on leave and tested positive by community acquired and 56 (78.9%) were not infected.

The quality of life of the health care workers who were providing care for Covid 19 patients were observed through 10 sub themes:

- Worries about the family
- Frustration related to overload and PPE
- Stress, anxiety and burnouts impacted the personal life
- Able to manage the feelings of burnout
- The preferred stress relax activity
- Able to concentrate on self being
- Cooperation from the colleagues and the management
- Able to take diet regularly
- Able to share the thoughts with the superiors
- Proud to be the health care worker.

Awareness regarding the need to protect health care workers from getting infected during the COVID- 19 pandemic and maintaining the overall quality of life is also imperative. On assessing with the sub themes 25% of the health care workers had low worries where 53.5 % had moderate worries about their families. On wearing PPE and overload of the duty 11.3 % reported always irritated meanwhile 21.1 % were never got irritated towards their duty. Overall, 40.7% of the health care worker in our study reported low Quality of life, 51.1% reported moderate quality of life and 8.2% reported good quality of life.

Quality of Life of Health Workers providing care for Covid 19 patients



Conclusion:

The study demonstrated a high burden of anxiety among health care workers serving COVID-19 patients. Further, anxiety among Health care workers negatively impacted their quality of life during COVID pandemic. Protecting the normal mental process of frontline Health care worker is paramount to COVID-19 response and control efforts. Rapid development and implementation of interventions to prevent and treat mental health conditions are urgently needed to support the growing number of Health workers caring for COVID-19 patients in India and worldwide. But at the final, every health workers expressed that they are proud to be the health workers.

In the period of various challenges, health workers showcased marvellous strength and resilience. They used various support ideas and self-adjustment skills to relieve stress, because they knew they needed to be stronger and focus on their duty in order to save more lives. However, health-care providers in this study also expressed grief and a strong feelings of powerlessness about patients' suffering and the sudden loss of lives. Although participants in this study thought they were able to deal with their emotional stress without professional support, their mental health should be continuously monitored, support systems strengthened and professional psychological counselling and crisis interventions provided.

Recommendations: The study can be replicated in large samples so that findings can be generalized for a large

population.

Competing interests

The authors declare that they have no competing interest.

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EFFECTIVENESS OF OLIVE OIL ON REDUCTION OF LOW BACK PAIN AMONG PRIMI MOTHERS

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Introduction: The study was focused with the objectives to assess the level of olive oil back massage on low back pain among primi mothers in experimental and control group, to compare the pre and post test score of low back pain between experimental and control group, to assess the effectiveness of olive oil back massage on low back among primi mother, to educate the primi mothers on olive oil back massage on low back pain among primi mother, to reassess the knowledge on olive oil back massage among primi mother, to associate the knowledge on olive oil back massage among primi mother selected demographic variables.

Methodology: One group pre test post test design was adopted .The sample for this study consists of 60 samples selected by non probability convenient sampling technique. Visual analog pain scale was used to assess the pain level among primi gravida mothers during ante natal period.

Results: The pretest mean score of pain level among primi gravida mothers was 7. The post test mean score of pain level among primi gravida mothers was 6. The paired ‘t’ value of experimental group was 12.914.

Conclusion: The study shows that pain during ante natal period was reduced after performing olive oil back massage.



ASSESS THE LEVEL OF DEPRESSION AMONG ORAL SUBMUCOUS FIBROSIS (OSMF) PATIENTS

Ms. Pooja R. Kasturkar*

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ABSTRACT:

Introduction: In several countries, including India, Pakistan, Malaysia, China, Canada, South Africa, Sri Lanka, and other South East Asian countries, the usage of areca nut in its different forms is very widespread and has contributed to the production of a rare generalized fibrosis of the oral tissues called oral submucous fibrosis (OSF). Oral submucous fibrosis (OSMF) can lead to psychiatric morbidity. **Aim:** Assess the level of depression among oral submucous fibrosis (OSMF) patients. **Materials and Methods:** It was descriptive research design, carried out at IPD and OPD patients of Acharya Vinoba Bhave Rural Hospital, Sawangi (M), Wardha, Both males and females with the confirmed diagnosis of oral submucous fibrosis (OSMF) were sample. Total 100 patients were recruited for the present study by purposive sampling techniques. Beck Depression inventory used for assessing the depression level. The sample characteristics and level of depression were described by frequency, percentage and unpaired 't' test and one way ANNOVA were used to find out the association between the level of depression score of Oral Submucous Fibrosis (OSMF) patients with their demographic variables.

Results: The study result revealed that majority of participants (27%) were in 31-40 years of age group, 54% were Hindus, 64% were from rural areas, 59% belonged to joint family, 41% had monthly income of between 5001-10000 Rs, 71% were married, 34% of the OSMF patients were laborer, 29% had habit of chewing betel nut and tobacco and when assess their depression level it was found that 8% of the OSMF patients had mild depression, 91% had moderate depression and only 1% had severe depression.

Conclusion: Oral submucous fibrosis (OSMF) patients suffered from depression so health professionals have to focus on their mental health.

Key Word: Melancholia, Juxta-epithelial fibrosis, Client



AN EXPERIMENTAL STUDY TO ASSESS THE EFFECT OF INFRA RED LIGHT THERAPY ON EPISIOTOMY WOUND HEALING AMONG POSTNATAL MOTHERS

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Abstract:

Introduction: The moment of birth is unique and beautiful process as foetal and maternal physiologies interact symbiotically. In normal process of delivery, the baby is delivered per vagina; an episiotomy is performed on vagina by health care provider or midwife. Episiotomy is a commonly performed surgical procedure during childbirth and considered as an integral part of labour-management for most women. It is a surgical perineal incision to widen the vaginal opening just before the baby is born in order to shorten baby expulsion period and to prevent perineal tears. But sometimes episiotomy is associated with many complications in the postpartum period such as blood loss, edema, hematoma, infection, wound dehiscence and perineal pain.

Objective: The present study was under taken to assess the effectiveness of infrared light therapy on episiotomy wound healing among postnatal mothers at Govt. SMGS Maternity Hospital, Jammu (J&K). The sample consisted of 40 postnatal mothers (20 in experimental and 20 in control group).

Methods: Purposive sampling technique was used to select the sample. Socio-demographic profile, obstetrical history variables tool and REEDA scale were used to collect the data from subjects.

Result: The results revealed that highest mean score (6.4 ± 2.1) was obtained on day 1 whereas the lowest mean score (0.4 ± 0.6) was obtained on day 3 after providing infrared light therapy. Hence the differences in episiotomy wound healing among postnatal mothers were highly significant in experimental group. It shows the effectiveness of infrared light therapy on episiotomy wound healing among postnatal mothers.

Conclusion: The study concluded that infrared light therapy is an effective way to enhance the healing of episiotomy wound so it should be encouraged as a routine care in hospitals.

Keywords: *Infrared light therapy, Episiotomy Wound, Postnatal Mothers*



**A STUDY TO ASSESS THE CLINICAL COMPETENCY ON POST CARDIAC
CATHETERIZATION AMBULATION PROTOCOL AMONG STAFF NURSES
WORKING IN SELECTED HOSPITALS, MEERUT**

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Introduction: Cardiac catheterization is a valuable diagnostic procedure which does a comprehensive examination of how the heart and its blood vessels function. One or more catheters is inserted through a peripheral blood vessel in the ante-cubital artery or vein or femoral artery or vein with x-ray guidance. This procedure gathers information such as adequacy of blood supply through the coronary arteries, blood pressures, blood flow throughout chambers of the heart, collection of blood samples, and x rays of the heart's ventricles or arteries.

Objectives of the Study:

1. To assess the clinical competency on post cardiac catheterization ambulation protocol among staff nurses.
2. To find out the correlation between the knowledge score with clinical competency on post cardiac catheterization ambulation protocol among staff nurses.

Methodology:

A descriptive exploratory research approach was used in the study to determine the clinical competency on post cardiac catheterization ambulation protocol in terms of knowledge and practice among staff nurses working in selected hospitals, Meerut. The research design selected for the study was descriptive design.

40 Staff nurses were selected in hospital setting by non-probability purposive sampling technique. Semi Structured knowledge questionnaire and practice checklist were used to assess the knowledge regarding clinical competency on post cardiac catheterization ambulation protocol. Data collected and analyzed by using descriptive and inferential statistics.



Result:

The data from section-A (tool) shows that the sample (62.5%) of them were in the age group of 25-30 years, (25%) were in the age group of 31-35 years, (12.5%) of them were in the age group 36-40 years and (0%) of them were in the age group 41- 45 years, (42.5%) subjects were males and majority (57.5%) subjects, majority of samples (45%) subjects were having Diploma in nursing (G.N.M), (55%) subjects were having B.Sc. (N) qualification, (0%) subjects were M.Sc. (N) qualification. Majority of the samples 85% staff nurses have excellent knowledge, 34% of them have very good knowledge, 0% of them have good knowledge and 0% of them have poor knowledge. The majority of the staff nurses 85% of them have effective practice and 35% staff nurses have ineffective practice.

Conclusion: The study concluded that staff nurses were having deficit knowledge and practice regarding clinical competency on post cardiac catheterization ambulation protocol among staff nurses.

**A STUDY TO ASSESS THE IMPACT OF USING COMMUNICATION BOARD
AMONG MECHANICALLY VENTILATED PATIENTS AT A SELECTED HOSPITAL,
MEERUT**

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Introduction: A communication act is a component of communicative behavior, non-vocal or verbal, that is directed from one conversational applicant to another in an attempt to convey a message. An exchange is a group of communication acts related to the communication of a single idea. Interpersonal communication is considered to be a fundamental human behavior necessary for normal psychosocial functioning.

Nurse-patient communication is essential to the development and function of a therapeutic relationship. But most of the critically ill patients who were under the mechanical ventilation were not able to communicate because of anxiety, panic, and insecurity..

Objectives of the Study:

- To prepare and validate the electronic communication board for a patient with a mechanical ventilator.
- To assess the impact of using electronic communication board on the level of satisfaction in the experimental group and as compared with the control group.
- To find out the association between level of satisfaction with their demographic variables in the experimental group & control group.

Methodology:

An evaluative research approach was used in the study to determine the impact of using communication board among mechanically ventilated patients. The research design selected for the study was quasi experimental in experimental and control group test design. 30 mechanical ventilator patient (15 in experimental and 15 In control group) were selected in hospital setting by non-probability purposive sampling technique. Electronic

communication board tools were used to assess level of satisfaction. Data was collected and analyzed using descriptive and inferential statistics.

Major Findings of the Study

- ▶ The post-test mean, Standard deviation score was 48.93,2.56 in the experimental group, whereas in the control group the score was 26.53,3.75. The difference in mean % is 22.4.
- ▶ The calculated unpaired 't' value 18.41 is greater than table value 2.05 at $p \leq 0.05$ level of significance, hence the research hypothesis H_1 was retained
- ▶ There was a significant association between the level of satisfaction with their demographic variables at the $p \leq 0.05$ level in the experimental group. There was a significant association between the level of satisfaction with their demographic variables at the $p \leq 0.05$ level in the control group. Hence The research hypothesis H_2 was retained for weaning duration only in the experimental group and control group.
- ▶ Finally, there was no significant association between the level of satisfaction in the experimental group and control group.

Conclusion:

The study concludes that the ventilator patients having improved level of satisfaction after the intervention i.e. electronic communication board. So in this study intervention (electronic communication board) was found to be an effective method to improve the level of satisfaction.



EFFECTIVENESS OF PROTOCOL ON ENDO-TRACHEAL TUBE SUCTIONING AMONG ICU

STAFF NURSES

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Introduction: Endo-tracheal tube suctioning is a procedure which is done for the purpose to remove the pulmonary secretions mechanically by using suction device. All the clients who is having Endo-tracheal tubes needs removing secretions through Endo-tracheal tube by suction procedure. It is understood that ET suctioning has several complications. Despite this, the method of suctioning the ET persists without adequate justification for the specific methods used. These complications can be prevented by implementing the protocols regarding Endo-tracheal tube suction.

Aim: The aim of this research was to assess staff Nurses' current experience of Endo-Tracheal suctioning before introducing the protocol as well as to determine whether or not the protocol is effective in improving the practice skill of ICU staff nurses regarding suction procedure. **Material and Method:** One Group Pre Test –Post Test Design was used in the study, the study was done in the ICU's of selected hospitals, total 30 registered Staff nurses working in ICU for more than 1year, who gave consent for participation in study and working rotation wise in 3 shifts & was included in the study by using convenient method for sampling. Structured interview & observation checklist on suction protocol used for data collection **Result:** It has been found that the Endo-tracheal suctioning protocol has been observed effective in improving knowledge and practice of Staff Nurses working in ICU. **Discussion:** The findings was consistent with the research conducted by Ozden et al 2012 in order to assess nurses' awareness and experience before and after training and to establish a protocol for open and closed system suction methods in patients with ETTs, which showed significant changes in knowledge and practices. **Conclusion:** This is concluded that the Endo-tracheal Suction procedure has been successful in enhancing awareness and training of nursing staff employed in intensive care units. Staff nurses' knowledge and practice of Endo-tracheal Suction tubes is not associated with demographic variables.

Key words: Effectiveness, Endo-tracheal tube suctioning, ICU staff Nurse, Protocol.



TREATMENT OF PREGNANCY INDUCED HYPERTENSION AND ITS EFFECT ON OXIDATIVE STRESS

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ABSTRACT

Introduction: Hypertension is the most common medical problem encountered during pregnancy, complicating 5-10% of Pregnancies. It is associated with oxidative stress, confirmed by measurement of biomarkers and relevant antioxidant enzymes in the placenta and maternal circulation. In a healthy body, Reactive Oxygen Species (ROS) and antioxidants remain in balance. When the balance is disrupted toward an overabundance of ROS, oxidative stress occurs. ROS affect multiple physiological processes from oocyte maturation to fertilization, embryo development and pregnancy. Pre- eclampsia is a leading cause of maternal and paternal morbidity. It is pregnancy specific disease characterized by denovo development of concurrent hypertension and proteinuria.

Objectives:

1.To Correlate the Management of Pregnancy induced hypertension and its effects on oxidative stress with MDA and SOD estimation.

2.A Study group of 50 patients whose MOD and SOD levels were calculated.

Methodology: 50 pregnant women from AVBRH hospital, in the department of OBGY with PIH, pre eclampsia and eclampsia age group of 20-40 years. Selection cases of PIH were done after assessing for BP > 140/90 mm Hg, proteinurea, edema and within 28-42 weeks of gestation.

Result: MDA in pregnancy induced hypertension, preeclampsia and eclampsia was 109.09 ± 24 , 130.65 ± 43.02 and 141.04 ± 50.95 respectively. . SOD in pregnancy induced hypertension, preeclampsia and eclampsia was 3.24 ± 1 , 2.69 ± 1.34 and 2.59 ± 1.33 respectively.

Discussion: The present study was planned to detect lipid peroxidation products i.e. MDA and SOD in PIH, pre eclampsia and eclampsia. The lipid peroxidation product like malondialdehyde (MDA) levels has been measured in plasma of hypertensive pregnant women. It was found that higher O₂ free radical production, evidenced by increase levels of MDA in hypertensive pregnant women. The present study shows that, there is significant difference between PIH, pre eclampsia and eclampsia regarding serum MDA. Rise in MDA could be due to increased generation of ROS due to the excessive oxidative damage generated in the hypertensive patients. These O₂ species in turn can oxidize many other important biomolecules including membrane lipids. The lipid peroxides & free radicals may be important in pathogenesis of PIH. In similar previous study was done on pregnant women with pregnancy induced hypertension, it was found at there was a significant increase in erythrocytes MDA levels, activates of SOD, & GP level.

Conclusion: The present study has shown a significant increase in serum MDA levels, the indicator of lipid peroxidation, in the 3 groups suggest that lipid peroxidation plays a role in the pathogenesis of hypertensive disorders of pregnancy. Increased lipid peroxidation causes increased consumption of antioxidant free radical scavenging system. In PIH, preeclampsia and eclampsia there is an imbalance between lipid peroxides and the antioxidant system.



**A STUDY TO EVALUATE THE EFFECTIVENESS OF MUSIC THERAPY ON PRE
PROCEDURAL ANXIETY OF CLIENTS UNDERGOING CORONARY ANGIOPLASTY IN
SELECTED HOSPITAL, COIMBATORE**

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Objectives:

- ❖ To assess the level of anxiety among clients undergoing coronary angioplasty in experimental group and control group.
- ❖ To evaluate the effectiveness of music therapy on anxiety among clients undergoing coronary angioplasty in experimental group.
- ❖ To find out the association between the pretest level of anxiety and selected demographic variables among clients undergoing coronary angioplasty in experimental group and control group.

Methodology:

The research design adopted quasi experimental pre and post test design. The sample size was 60. A non-probability purposive sampling technique was adopted to select the desired sample. Modified Spielberger State trait anxiety inventory scale was used to assess the level of anxiety among the clients undergoing coronary angioplasty in experimental and control group. Descriptive and inferential statistics were used to analyze the data.

Major Findings of the Study:

The obtained 't' value (6.768) of the experimental group was significant at 0.05 level. Hence, It was inferred that since the 't' value of the experimental group was significant, so, the stated hypothesis was accepted. The obtained 't' value (0.391) of control group was not significant at 0.05 level. It was inferred that since the 't' value of control group was not significant, the stated hypothesis was accepted. Hence, it was evident that the music therapy was effective in reducing the level of anxiety among the clients undergoing coronary angioplasty.



There was no association found between the pre-test level of anxiety and selected demographic variables like gender, religion, occupation status and marital status,.But there was an association found between the age ($\chi^2=21.59^*$), educational status ($\chi^2=15.82^*$), type of family ($\chi^2=34.64^*$), source of financial support ($\chi^2=15.23^*$) and history of previous surgery ($\chi^2=9.98^*$).

Conclusion:

Music therapy reduces the anxiety level, by relaxing body and mind. This indicates that music therapy is an important non pharmacological method to reduce the anxiety level among clients undergoing coronary angioplasty. Hence, the researcher concludes that music therapy can be one of the methods to reduce the anxiety among clients undergoing coronary angioplasty.

Key Words: anxiety, angioplasty, music therapy



**AMELIORATION IN NURSING EDUCATION, CLINICAL PRACTICE AND NURSING RESEARCH
WITH DIGITALIZATION**

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Introduction

India is a global leader in information and communication technology and in other cutting-edge domains, such as space. As per National Education Policy 2020 the Digital India Campaign is helping to transform the entire nation into a digitally empowered society and knowledge economy. While education will play a critical role in this transformation, technology itself will play an important role in the improvement of educational processes and outcomes; thus, the relationship between technology and education at all levels is bi-directional.

Use and integration of technology to improve multiple aspects of education will be supported and adopted, provided these interventions are rigorously and transparently evaluated in relevant contexts before they are scaled up.

NURSING EDUCATION AND DIGITAL ERA

Nurse educators' use of technology in teaching continues to expand at a dizzying pace. It is hard to imagine planning a course or class without thinking about technology that might be used to engage students in learning and meet other instructional goals. The most recent Horizon Report indicates that a shift is taking place across higher education in which students are learning by creating rather than consuming content delivered by the teacher. In more and more nursing programs, students work in groups solving problems, analyzing cases, and discussing higher-level questions about nursing. They create Web sites, podcasts, videos, and other multimedia.



Students are learning together and from each other and developing products of their learning. Price and colleagues described how they used digital storytelling as a means for students to create and share their stories about palliative care concepts, leading to a deep understanding of the concepts.

There was a news item in *Nurse Educator* that presented a simulation game called Terminex in which health providers played each other's roles. Compare that to the use of a multiplayer, virtual simulation for nursing students to develop their leadership skills and to Amster and colleagues' study on using an eye-tracking device for determining errors of nursing students in simulation.

Teaching with technology, however, is not about the latest tools but involves the decisions of nurse educators about when and how to use those tools. Those decisions should be based on the outcomes to be achieved, not because a technology is new and exciting. The main consideration in selecting a technology tool is whether it will facilitate learning and is consistent with the goals of the course.

With available mobile technology, nursing students would be able to access necessary information, independent of time and place. Therefore, it is important that stakeholders and educators facilitate the use of PDAs to support nursing students during their clinical practice, in order to prepare them for their future work, and to continuously improve the safety and quality of healthcare.

Technology is not to be Friend; it is only to be understood.

(Caroline)

CLINICAL PRACTICE AND DIGITAL ERA

We are taking a very light touch, an almost hand off approach. If you have technology that's going to motivate a person to stay healthy

Bakul Patel

Technology is used extensively to provide and deliver health care worldwide e-Health (the application of information, computer or communication technology to some aspects of health or health care) is viewed as



essential for solving problems facing healthcare systems of increasing demand, due to an ageing population and improved treatments, and limited resources.

Technology also exposes students to clinical scenarios they would not encounter in their practice and helps to bridge the gap between theory and practice. With technology, we can add reality to a scenario and make traditional case studies more realistic. Shellenbarger and Robb described how faculty can integrate technology in a case history, for example, by adding podcasts, hyperlinks, video clips, and images, to provide the context for the case, engage students in meaningful learning, and develop their clinical reasoning skills.

Philosophy of technology and nursing is fundamental to discipline development and our role in enhancing health care. Nurses as important contributors to the use and integration of health care technology and identifies nursing as a discipline those societies. Clinical practice guidelines are an important source of information, designed to help clinicians. Integrate research evidence into their clinical practice. Digital education is increasingly used for clinical practice guideline dissemination and adoption. Our aim was to evaluate the effectiveness of digital education in improving.

NURSING RESEARCH AND DIGITAL ERA

The health of populations has improved significantly, with an increase in life expectancy and a reduction of morbidity and mortality from infectious diseases (Beaglehole & Bonita 2004).

New technologies involving artificial intelligence, machine learning, block chains, smart boards, handheld computing devices, adaptive computer testing for student development, and other forms of educational software and hardware will not just change what students learn in the classroom but how they learn, and thus these areas and beyond will require extensive research both on the technological as well as educational fronts.

CONCLUSION

To conclude the use of technologies in nursing education and clinical practice is not recent, these technologies change how nurses plan, deliver, document, and review clinical care; this will only continue as technology advances. The technology has many benefits, but there are huge gaps in technology access and training in nurse education and health settings, and challenges regarding the nature, cost, and high turnover of technology used in

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teaching-learning spheres. To prepare nurses for the challenge of the complex, dynamic healthcare environment, the faculty envisioned curricula infused with technological innovations.

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VIRTUAL SIMULATION

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INTRODUCTION:

The education of nursing students has always been a challenge for governments, health educators, health managers, and the students themselves to ensure the quality and safety of learning and clinical practice.

In the field of health care, knowledge and clinical reasoning are key with regard to quality and confidence in decision making. The development of knowledge and clinical reasoning is influenced not only by students' intrinsic factors but also by extrinsic factors such as satisfaction with taught content, pedagogic resources and pedagogic methods, and the nature of the objectives and challenges proposed.

Nowadays, professors play the role of learning facilitators rather than simple “lecturers” and face students as active learners who are capable of attributing individual meanings to their personal goals, challenges, and experiences to build their own knowledge over time.

COVID-19 ON NURSING EDUCATION:

The COVID-19 pandemic has significantly impacted all nurses and healthcare providers across the world, raising numerous critical questions about the current and future of nursing education. It has not only changed the way that health care providers operate, but also how the next generation of nurses are learning.

Traditionally, Nursing education, it is all about utilizing cognitive, affective, and psychomotor learning domains through structured healthcare education. However, the traditional teaching methods may not meet the emerging needs during major public health crises such as the recent outbreak of COVID-19.

Currently, COVID-19 Pandemic has a critical impact on education system. Meanwhile, it cannot be ignored that clinical mentors and students in all the health professions, working within the most troublesome of circumstances are potential vectors for COVID-19. In this regard, medical education is shifting to virtual universities.

CHALLENGES IN NURSING EDUCATION - 2020



On one hand, the suspension of academic activities along with COVID-19 control measures including social distancing and travel restrictions create a risk to loneliness and psychological problems among students. On the other hand, uncertainty about their clinical education and future due to the pandemic would not lead to a considerable loss of learning time for nursing students, it would also lower their self-esteem, confidence and loss of clinical skills. Under such context, finding an appropriate strategy to minimize such losses, to ensure the safety of students, brought up the need to find other approaches to minimize the impact of lockdown on academics and reduce the risk of stressors in nursing students. This led to making use of a readily available virtual platform, considered as a novel approach to continue delivering nursing education during this pandemic which became the only viable solution for nursing campus.

VIRTUAL LEARNING:

Virtual learning refers to instruction in a learning environment where educators and students separated by time or space or both, and the instructors provide course content through course management applications, multimedia resources, the Internet, videoconferencing, etc. Students receive the content and communicate with the teacher via the same technologies.

NURSING EDUCATION IN VIRTUAL PLATFORM:

While many academic institutions, and nursing programs, may have embraced online education and have well developed plans about how to offer robust online programs, COVID-19 has propelled many faculty to offer online education in the absence of “well-considered, durable learning plans”. Emergency remote teaching is “a temporary shift of instructional delivery to an alternate delivery mode due to crisis circumstances”.

More thoughtful, systematic approaches will be needed to make the transition to online teaching and learning successful and permanent. Nothing beats hands-on experience. But for nurses looking to improve their skills, the right hands-on learning can be difficult to find. Fortunately, there’s a way around this problem: online simulators.

More and more nurses—and more and more nursing programs—are turning to virtual clinical simulation to mimic the experience of treating a wide variety of conditions. And research shows these simulations can make a real difference. So before learning virtual simulation, let us understand simulation and the need of it in nursing education.

Simulation:

An Artificial representation of a complex real-world process with sufficient fidelity minus the risks inherent in a similar real-life experience. It is a practice of realistic scenarios which the nurses may not actually encounter

during their rotations and shifts particularly significant for training to manage emergency situations. Simulation facilitates learning through immersion, reflection, feedback and practice.

Structure:- Prebrief- Orientation of the participants towards the scenario topic, learning objectives, role division, patient's/case information, limitations and possibilities of simulators, environment, equipment and availability of vital parameters. **Scenario-** flow of scenario consist of the process of history collection, assessment, differential diagnosis and treatment according to the learning objectives which promotes experiential learning. **Debrief-** A discussion regarding performance and thought processes of the team during the scenario to promote reflective learning and improve clinical performance'.

CLINICAL VIRTUAL SIMULATION

Clinical virtual simulation is the recreation of reality depicted on a computer screen, and it involves real people operating simulated systems. It is a type of simulation that places people in a central role through the exercising of their decision-making, motor control, and communication skills. Clinical virtual simulation uses virtual patients in dynamic and immersive clinical environments ranging from prehospital environments to environments in the community. The concept is based on the virtual patient being accessed through a variety of multimedia, screen-based interactive and dynamic patient scenarios, which are supported by physiological algorithms.

BENEFITS OF VIRTUAL SIMULATION

- Personalized Learning
- Improved Clinical Reasoning Skills
- 24/7 access to virtual patients
- Engaging Today's Learners
- Measurable Student Success

STEP BY STEP WORKFLOW

1. Suggested Reading
2. Pre-simulation Quiz
3. vSim
4. Post-Simulation Quiz
5. Documentation Assignments
6. Guided Reflection questions/Debriefings



DIGITAL COLLABORATIVE EDUCATIONAL INTERVENTIONS IN NURSING

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Collaborative Learning is an Umbrella term for a variety of educational approaches involving joint intellectual effort by students, or students and teachers together. Groups of 2 or more work together, mutually searching for understanding, solutions or meanings

Collaborative learning is designed from the constructivist approach, which emphasises the active participation of students in the learning process

Teachers and Digital Collaborative Learning

- The aim is not to replace the teacher but to use the technology to increase and improve communication
- Students are encouraged and supported to work together to create knowledge: to invent, to explore ways to innovate and in doing so **seek the conceptual knowledge needed to solve problems rather than recite what they think is the right answer**
- Play a key role-not as a fellow learner, but as the link to the knowledge community
- Learning is defined as conceptual change and is key to building knowledge
- Learning activities are informed and guided by the norms of the discipline and a discourse process that emphasises conceptual learning and builds knowledge

Digital Collaboration and Nursing Education

- The continuous increase and ease of accessibility of information together with rapid changes in working and everyday life pose new challenges in nursing education

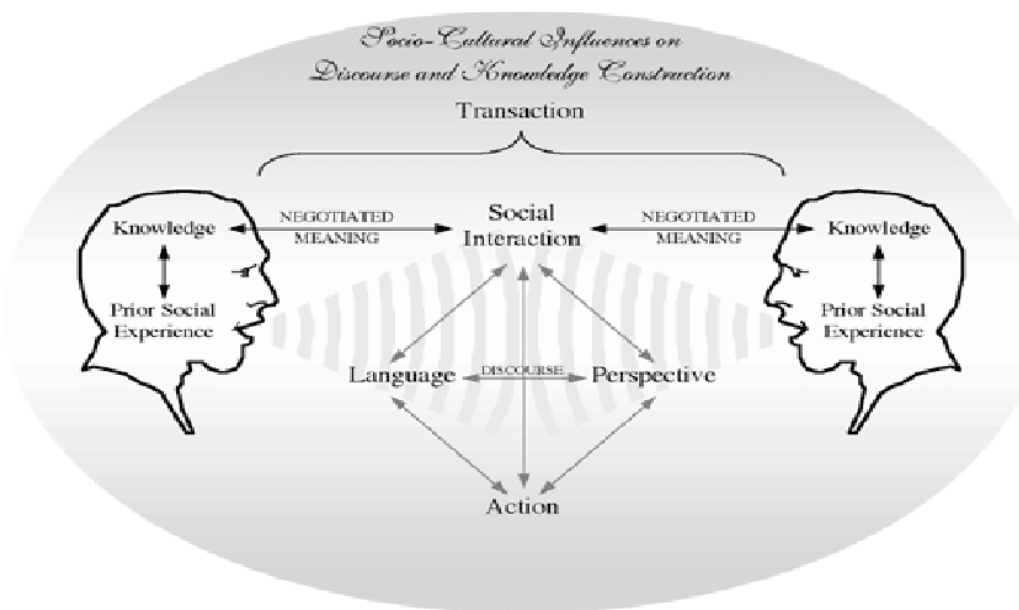


- Traditional learning- face-to-face can be time consuming, costly and inaccessible
- Printed , self-learning resources are easily overlooked by busy healthcare professionals
- Increasingly employed in continuing medical education and professional development
- May offer a more flexible, affordable and accessible alternative to traditional learning as it transcends geographical and time constraints
- Use of diverse media and delivery devices allows for interactive and engaging learning resources that can be easily updated with new evidence and customised to the individual healthcare professional's learning needs
- Nowadays, students need to develop greater skills of various kinds including, innovative thinking, effective working and digital tools management
- Exposure to strong collaborative-based problem solving, critical thinking environments and work in complex new patient-centred situations that directly exploit existing knowledge and demand further thinking

Socio-Constructivist Theory

- Collaborative learning is strongly based on this theory
- Learning is seen as a process where individuals' knowledge and understanding develop through supportive interaction with peers in a learning community, built on common group understanding and guidance (or collaboration) of others
- Construction of one's learning begins with engaging learners in the meaning-making process and ends with enabling them to handle real-world problems
- Emphasises the role of social interaction in individuals' learning and knowledge construction
- Socio-constructivism is a student-centred educational paradigm that releases students' autonomy and freedom using collaborative learning approaches

- Considers learning is a result of disagreement between two points of view in social interaction- co ordination of two points of view-resulting in an enhanced understanding at an individual level
- Verbal interactions activate several cognitive processes, including perception, comprehension, information processing, representation and anticipation among others



Nursing Reflections

- Recent studies show that digital collaboration promotes nursing students' reflection on experiences and thinking together with peers leading to deeper understanding of information and skills
- Previous educational studies show that students have difficulties effectively planning, monitoring and adapting to collaborative efforts
- Interaction during collaborative learning has both cognitive and emotional aspects
- To support collaborative learning, learning environments should have a student-centred design, taking into account factors that prevent and promote collaborative learning
- Including socio-emotional aspects that promote or hinder productive collaborative efforts



DIGITALIZATION AND NURSING RESEARCH

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Digital technology in Nursing Research

- Communication and dissemination
 - Google scholar
 - Data bases
 - Social Media- Researchgate, LinkedIn
 - E-mail
 - Research Summaries

All these databases serve as useful communication routes for researches to publish evidence and also practitioners to analyze and use the evidence

Challenges

- Varying digital knowledge and expertise
 - Digital literacy
 - Few are aware
- Perception
 - Thinking that, World wont change
- Institutional Support



- Digital Library, telemedicine
- Validity of technology
- Regulatory barriers- Laws from Govt
- No one is aware of future. The only way to adopt for the future is changing according to the trend. Technology is boon for everyone if used optimally and appropriately.
- Despite of its many advantages, many are mis using it, abusing it.
- As like in addiction, it may lead to addiction if misused.
- Developing a skill is an art. Need time and patient to master it.

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IMPACT OF TRANSITION TO BLENDED MODE IN NURSING EDUCATION

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Blended learning is a combination of digital learning, which can be accessed anywhere the student has internet access, 24 hours a day, seven days a week; face-to-face instruction with a certified instructor; and project-based learning activities

Unprecedented need for Blended mode globally

Covid 19 Pandemic:

- New normal
- Inability to travel due to lock down
- Onsite restrictions due to social distancing
- Resource management
- Hospitals focused on patient care burden
- Limited PPE supply

Challenges due to sudden thrust into Blended mode

- Lack of Online teaching experience
- Lack of time in training every staff quickly



- Technological scarcity
- Lack of infrastructure

Advantages of Blended Learning Methodology

- A LMS is where the instructor puts all the lessons and activities that students must work through to successfully complete the course.
- Better prepared students for their future learning.
- Students can work at their own pace
- teachers have the autonomy, and be as innovative as possible
- Students with learning difference do better
- Introverted kids do well
- Flexibility in terms of availability of resources
- Ability to tailor to each specific student's need
- Ability for online discussions
- Maintaining privacy

Disadvantages of Blended learning Methodology

- Lack of training and support for both teachers and students
- Inadequate technological know –how
- Technological glitches
- Distractions (pets/kids/family)
- IT support timely



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**EFFECTIVENESS OF PLANNED TEACHING ON KNOWLEDGE AND PRACTICE REGARDING
GROWTH MONITORING OF UNDER FIVE CHILDREN AMONG ANGANWADI WORKERS IN
RURAL AREA OF WARDHA DISTRICT.**

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Introduction:

Development Monitoring will begin in the child's life, right from birth, at an early age. The Anganwadi Worker (AWW) will clarify the importance of weighing a newborn baby ideally on the same day of birth to the mother and other older people in the home.

Objectives:

1. To identify the existing level of knowledge of anganwadi workers regarding growth monitoring.
2. To assess the existing practice of the anganwadi workers regarding growth monitoring.
3. To assess the effectiveness of planned teaching on growth monitoring among anganwadi workers through post test.
4. To find the association of knowledge and practice scores of anganwadi workers and their demographic variables.

Methodology:

Research Design: - A pre-experimental pre-test,post-test research design. **Sample:** - Anganwadi Workers of selected rural area. **Sample size:** 60 Anganwadi workers. **Sampling technique:-** Non probability convenient sampling. **Method and Material:-** This consists of two sections

Section 1: Structured questionnaire Part I: demographic variable Part II: knowledge questionnaire and Section 2: the observational checklist.

Result: The study revealed that, overall mean pre and posttest knowledge scores of Anganwadi workers in the rural district of Wardha, showing that post-testing means knowledge score was higher than the mean pretest

knowledge score of 10.40 with SD of ± 1.86 , with SD of ± 1.10 . Among 65% of Anganwadi workers had a very good level of practice score and 35% had an excellent level of practice score. Mean practice score of the Anganwadi workers was 12.26 ± 1.20 and mean percentage score was 81.77 ± 8.03 . Therefore, the proposed teaching program on awareness of growth monitoring is statistically interpreted.

Conclusion: - It was concluded that The importance of nutrition in child growth and survival can be guided through growth monitoring of mothers, family and community, ultimately leading to better child-rearing practices. It is important to give health education and teaching to the Anganwadi workers to improve the skills and upgradation of the new knowledge to the mothers/parents and family.

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EFFECTIVENESS OF BLENDED LEARNING IN NURSING EDUCATION: A NARRATIVE REVIEW

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New educational approaches are necessary to enhance competency in the Novice Nursing students. The revolution in technologies, introduced new methods of teaching and managing education. Blended learning, (BL), also known as hybrid learning, an approach in educational planning is a method of teaching that integrated technology and digital media with traditional instructor- led classroom activities, giving students more flexibility to customize their learning experiences. The aim of the current review is to investigate the effectiveness of blended learning in nursing education and on Nursing student's knowledge, skills and satisfaction. Twenty seven research studies from various databases regarding effectiveness of blended learning in nursing education were extracted and reviewed by using PRISMA guidelines concluded that there is significant increase in the learning outcomes by nursing students with higher significance of satisfaction, improved clinical performance and decision making skills. BL has the potential to foster innovative and flexible learning opportunities and can be included in nursing education.

Key words: *Blended Learning (BL), Nursing Education, Hybrid learning, Nursing Students.*



**INFLUENCES OF COGNITIVE REPRESENTATIONS OF CANCER ON EMOTIONAL
RESPONSES AND COPING STRATEGIES WITH RELATION TO THEIR COMFORT
LEVEL AMONG BREAST CANCER WOMEN**

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Introduction: Cancer remains a life-threatening situation and often has profound emotional impact even years after treatment has started. Emotional distress is considered as a normal response around the time of cancer diagnosis. Number of cancer patients is rising due to a higher incidence rate and increased survival rates resulting from multiple Treatment options available. Depression, anxiety and adjustment disorder contribute to increased hospital stay, reduced adherence to medical care and reduced quality of life, and increased mortality rates.

Objectives: 1. To evaluate of cognitive representation on emotional responses and coping strategies with relation to their comfort level among breast cancer women.
2. To assess the emotional responses of the women having breast cancer. 3. To find out association between the emotional responses with selected demographical variables among the women having breast cancer.

Research Design:- Analytical survey design

Sample :- Adult women with breast cancer who had undergone chemotherapy and mastectomy in the age group of 20 years to 70 years and women with first, second and third stage.

Sample size: 250

The sampling technique:- Purposive Convenience Sampling. **Method and Material:-** Questionnaire method used to assess the knowledge sibling rivalry. It consists of three sections. Section I consists demographic variables, Section II consists of 10 questions on Cognitive assessment
Section III **Emotional response** – Structured checklist based and modified

Result: Cognition of study participants regarding breast cancer. It reveals that 17(6.5%) participants had poor cognition, 199(79.6%) had average cognition and only 34(13.6%) had good cognition regarding breast cancer.

Number of cases who have moderately negative emotions have been converted to mild negative. This may be due to the positivity generated by the treatment they received and Although it was observed a slight decline from 2nd to 3rd interview but it was not found statistically significant. There was decline of feeling positive behavior with time but there was increase in the feeling better category, this indicates that they probably assumed that all problem would solve after treatment but due to the post complication persisting there was slight dipping in their positivity.

Discussion: Association of positive emotional status with demographic variables of the study participants. It shows that positive emotional status was significantly associated with age, residence, education, occupation, monthly family income, age at menarche, marital status, years of marriage, number of children, type of family, health insurance status, duration of diagnosis, current status of cancer and line of treatment and management given to the participant as $p=0.05$ for all of them.

This indicates that positive emotional status was influenced by almost all demographic characteristics of the study participants. Association of negative emotional status with demographic variables of the study participants. It shows that negative emotional status was significantly associated with age, education, occupation, marital status, age of marriage, number of children, H/o of breast cancer in family if yes then relationship with patient and current status of cancer as $p=0.05$ for all of them. This indicates that age, occupation, education, marital status, age of marriage, number of children and current status of cancer are predictors of negative emotional status in women suffering from Breast Cancer.

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EFFECTIVENESS OF LISTENING TO BACKGROUND MUSIC ON RECALL ABILITY AMONG HIGH SCHOOL STUDENTS

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Introduction:

More than 2000 years ago Greeks understood the positive influence of music on the human body and got the place in their curriculum. But music therapy was not used routinely except as a supplemental note in conventional medicine traditional care protocols. Music was used as a method of instruction in early teaching-learning. Cognitive benefits of both active and passive music list.

Objectives To evaluate the recall ability of high school students from the influence of background music and associate the efficacy of background music with high school pupils' ability to remember with selected demographic variables

Research Design:- True experimental Posttest-only without control group design.

Sample :- A total of sixty high school students were randomly assigned through a simple random sampling technique using a chit method.

Sample size: 60 high school students age 14-16 years studying in school of Wardha district

The sampling technique:- Non-probability purposive sampling.

Method and Material:- A list of Nonsense word tests consists of 15 nonsense words and instructed them to read it in silence for 5 minutes and then they turned the list and recalled whatever they read for 5 minutes and then they were asked to write it down whatever they remember from the list of Nonsense words. After fifteen days the same list of Nonsense words was given to the same students, the same protocol followed but the only change which was done was given background music while students were reading and recalling the list of Nonsense words

Result: Findings revealed that in this study, majority of the students 29 (48.3) were in the age group of 15 years, 39 (65%) were female students, 51 (85%) students were residing in a rural area and 9 (15%) were from the urban area. The recall ability among high school students without background music in test 1 shows that 90% of the high school students had a poor level of recall ability and 10% had an average level of recall ability. In test 2 with background music, 13.33% of the high school students had good recall ability and 56.670% had average recall ability after background music

Discussion: The present study found that the majority of the sample 56.670% had average recall ability and 13.33% of the high school students had a good level of recall ability with background music test 2 as compared to without background music test 1. Such results were identical to those from the study Arumagam Indira et.al in the year 2018 conducted study on the effectiveness of music therapy on academic performance of nursing students using experimental and control group suggested that the music is effective in academic performance of a student's. **Conclusion :-** The study findings have shown that background music is effective in enhancing recall capacity and can be used as a useful measure to build interest and focus among students in their academic performance.

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A STUDY TO ASSESS THE EFFECTIVENESS OF CLINICAL PRACTICE GUIDELINES ON COMA STATUS MONITORING IN TERMS OF KNOWLEDGE AND PRACTICE AMONG STAFF NURSES WORKING IN SELECTED HOSPITALS

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Introduction:

Coma is defined as a deep state of unconsciousness. Coma or unconsciousness is a state of a person where an individual cannot respond to the internal and external stimulus. We can't say coma as a brain death. A person in the coma state is alive but could not move or respond to the environment. An individual in coma state appears normal but they could not respond to the external commands.

Objectives

1. To develop and validate the clinical practice guidelines on coma status monitoring.
2. To assess the pre-test knowledge and practice score of clinical practice guidelines on coma status monitoring among staff nurses in both experimental and control group.
3. To evaluate the effectiveness of clinical practice guidelines on coma status monitoring in terms of knowledge and practice among staff nurses in experimental group.
4. To compare the post-test knowledge and practice score of clinical practice guidelines on coma status monitoring among staff nurses between experimental and control group.
5. To find the association between post-test knowledge and practice score on coma status monitoring among staff nurses with their selected socio- demographic variables in experimental and control group.

Research Methodology:

An evaluative research approach was used in the study to determine the effectiveness of clinical practice guidelines on coma status monitoring in terms of knowledge and practice among staff nurses working in selected hospitals, Meerut. The research design selected for the study was Quasi-experimental non-equivalent control

group post-test design. 40 Staff nurses (20 in experimental and 20 in control group) were selected in hospital setting by non-probability purposive sampling technique. Demographic variables, structured knowledge questionnaire and practice checklist were used and data was collected and analyzed by using descriptive and inferential statistics.

Result

The data shows that the sample (35%) of them were in the age group of 20-25 years, (50%) were in the age group of 26-30 years, (15%) of them were in the age group 31-35 years. (45%) subjects were males and majority (55%) females. Majority of samples (60%) subjects were having Diploma in nursing (G.N.M), (40%) subjects were having B.Sc. (N) qualification.

30% staff nurses have excellent knowledge, 60% majorities of them have very good knowledge, 10% of them have good knowledge whereas 90% of staff nurses have adequate practice and 10% samples have inadequate practice. Mean post test knowledge score (19.55) was significantly higher than mean pre test (13.25) calculated with mean difference of 6.3. The obtained paired calculated t-value was $21.6 >$ tabulated value 2.09. The mean post test practice score (0.9) calculated by mean difference of 0.4. calculated t-value was $3.49 >$ tabulated value 2.09

Conclusion:

The study concluded that staff nurses were having deficit knowledge and practice regarding clinical practice guidelines on coma status monitoring among staff nurses and teaching programme was found to be an effective method to improve the knowledge and practice of staff nurses.

Keywords:

Assess, Effectiveness, Clinical practice guidelines, Coma, Knowledge, Practice, Staff nurse



A STUDY TO EVALUATE THE EFFECTIVENESS OF VIDEO ASSISTED TEACHING PROGRAMME ON DISPOSAL OF DOMESTIC WASTE IN TERMS OF KNOWLEDGE AND ATTITUDE AMONG RESIDENTS OF SELECTED URBAN COMMUNITY AREA AT MEERUT.

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Objectives:

1. To develop and validate a video assisted teaching programme in terms of knowledge and attitude regarding domestic waste disposal method in selected urban community area, at Meerut.
2. To evaluate the level of knowledge and attitude before and after administration of video assisted teaching programme regarding domestic waste disposal method in selected urban community area at Meerut.
3. To find out the correlation between knowledge and attitude regarding domestic waste disposal method among selected urban community people at Meerut.
4. To find out the association between the knowledge and attitude score regarding video assisted teaching programme on domestic waste disposal in selected urban community at Meerut.

Research Methodology:

The evaluative study was conducted using pre experimental (1 group pre-test and post-test) research design. The independent variable was video teaching programme and the dependent variable was knowledge and attitude of the Residents of the community regarding disposal of domestic waste. The total sample size was 60. The setting



of the study was at selected community, Meerut. Simple random sampling technique is used to select the subjects. The tool used for the study was structured knowledge Questionnaire and attitude scale checklist to assess the knowledge and attitude of the community Residents. Content validity of the tools was given to experts and tool was found to be reliable and feasible.

Result:

The difference between the mean pre-test and the mean post-test knowledge and attitude scores was found to be statistically significant ($t'_{29} = 5.0$) at 0.05 level of significance, was greater than the table value (2.05) and the difference between the mean pre-test and the mean post-test scores was found to be statistically significant ($t'_{29} = 9.8$) at 0.05 level of significance, was greater than the table value (2.05). This indicates that the structured teaching programme was significantly effective in increasing the knowledge and attitude of community people on disposal of domestic waste.

Conclusion:

Hence, video assisted teaching programme is an effective strategy for providing information and improving the knowledge of subjects. Educating the residents of community would help them to handle the problems by supporting them as a counsellor as well as an educationist.

Keyword:- knowledge and attitude of community residents, Structured teaching and video assisted teaching programme and Attitude scale.

CASE REPORT ON PAPILLARY THYROID CARCINOMA

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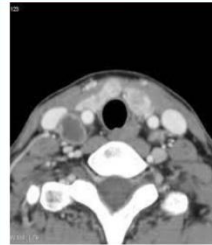
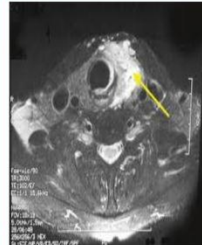
INTRODUCTION

Papillary thyroid carcinoma (PTC) presenting as an isolated cervical lymphadenopathy is not uncommon. Update to date, it can happen in less than a quarter of total case. However, it is rare to exist in the absence of primary foci in the thyroid gland itself. Majority of cases are found in mid-jugular and low-jugular chains with 51% and 33% of the incidence respectively. Only 1.7% happens in the posterior cervical groups showing its remarkable rarity.



CASE REPORT INFORMATION

A 54-years old man admitted in hospital with the complains of dysphagia, dyspnea, hoarseness, hematemesis. In past he has 2 years' history of right neck swelling was progressively increasing in size. Upon examination he was noted to have firm, hard, well-defined mass located at the posterior edge of the sternocleidomastoid muscle, extending below the clavical measuring 10cmx15cm. Fine needle aspiration cytology of the nodes showed cohesive papillary cluster of neoplastic epithelial cells and overlapping of nucleoli and nuclear grooving; suggestive of metastatic PTC.



Contrast enhance computed tomography of the neck revealed two lobulated enhancing soft tissue mass with area of non-enhancement within necrosis measuring 7.5 cm x 7.9 cm, displacing the right sternocleidonastoid muscle and right trapezius laterally.

The patient then underwent a total thyroidectomy and the right modified radial neck dissection type III. Intraoperatively, there was noted to be a single nodule within the right thyroid gland, and firm and enlarged, necrotic level v cervical lymphnode involving the posterior body of sternocleidomastoid muscle, internal jugular vein and extending beneath the right clavical. multiple enlarged level I to IV nodes were also removed.

INTERVENTION AND TREATMENT

The contrast enhance computed tomography of the neck revealed two lobulated enhancing soft tissue mass measuring 7.5cmx7.9cm. The mass was removed surgically by total thyroidectomy. Post-operative changes are noted in the patient. The patient is in hospital surgical ICU with uneventful course with frequent checking of vital signs shows Temperature-98.4F, Pulse-80 beats/min, Respiration-20 breath/min, Blood pressure-120/70 mmHg. position management and post-operative medications are given to the patient.

RESULTS

After surgical resection the patient was admitted in surgical ICU with constant observation. Steroids, analgesics, antiemetic, antacids, antibiotics and vitamin D and calcium supplementation medication regimen is going on. Supine position is given to the patient.

DISCUSSION

PTC is the most common type of thyroid malignancy. Imaging is paramount to assist in the diagnosis. Ultrasound of the metastatic lymph nodes with depict malignant feature should be followed up by repeat clinical and ultrasound assessment within 6 to 12 weeks' time in the case of occult metastasis in the cervical lymph nodes, FNAC enables to confirm the primary source based on its tumor morphology complemented by immunohistochemistry of the thyroglobulin and TTF-1. If the cytology is inconclusive, open biopsy of the lymph nodes is obligatory.

CONCLUSION

The recommendation has suggested that the patient with isolated cervical lymphnode metastases in the posterior or lateral aspect requires total thyroidectomy with ipsilateral, lateral and central lymph node dissection. Postoperative RRA and thyroxine suppressive therapy should be followed in order to ensure a promising and excellent outcome. Any lymphnode recurrence during follow-up requires node sampling and subsequent selective lymphnode dissection.

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TOPIC: AIRWAY MANAGEMENT



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INTRODUCTION

Airway management includes a set of manoeuvres and medical procedures performed to prevent and relieve airway obstruction. Airway management must be rapid and effective for the patient to survive. A stepwise approach to airway management, starting with the simplest and most rapidly applied, will ensure that the most suitable method for securing the airway is used.

Common causes of airway obstruction

- The relaxed tongue falling back in the throat;
- Foreign material, such as blood, vomitus, saliva,
- Food,
- Small toys;
- Excessive secretions;
- Pulmonary haemorrhage;
- Aspiration of regurgitated gastric contents.

Indications

- Respiratory failure (hypoxic or hypercapnic
- Apnea,
- Gcs less than or equal to 8
- Rapid change of mental status,
- Airway injury or impending airway compromise
- High risk for aspiration,
- Trauma to the larynx, which includes all penetrating injuries to the neck, abdomen, or chest.

7 Ps of RSI

1. Preparation
2. Pre-oxygenation
3. Pre-treatment
4. Paralysis with induction
5. Protection
6. Placement
7. Post-intubation management

confirmation of endotracheal tube placement

- End-tidal carbon dioxide measurement,
- Capnography waveform,
- Chest x-ray,
- Ultrasound
- Clinical assessment.

Contraindications

- severe airway trauma
 - obstruction
- That does not permit the safe placement of an endotracheal tube

Manoeuvres and Equipment

Airway Position and Clearance
Upper airway obstruction can be relieved by head tilt, chin lift, or jaw thrust.

Adjuncts to Upper Airway Obstruction

- Oropharyngeal airway
- Nasopharyngeal airway
- Bag-mask Ventilation

Advanced Airway

Examples are supraglottic devices

- laryngeal mask airway,
- laryngeal tube,
- esophageal-tracheal
- endotracheal tube.

- Oxygen
- Bougie
- Stilet

STEPS

- Pre-oxygenation
- Administration of rapid sequence medications
- Cricoid pressure
- In-line cervical stabilization,
- Direct laryngoscopy (dl)
- Look For The Tip Of The Epiglottis Before The Final Lift
- During laryngoscopy lift upward and away, never rotate the blade back onto the teeth
- Pass The Tube
- Watch The Tube Enter The Trachea
- Always Verify Placement, Assume Nothing
- Ventilation Is More Important Than Intubation
- In the event you can't intubate easily, stop after 30 – 60 seconds. Ventilate the patient briefly before your next attempt in order to maintain oxygenation.

Dosages of RSI medications:

- Sedatives used for induction
- Etomidate: 0.3-0.4 mg/kg
 - Fentanyl: 2-10 mcg/kg
 - Midazolam: 0.1-0.3 mg/kg
 - Propofol: 1-2.5 mg/kg
 - Thiopental 3-5 mg/kg
- Paralytic agents
- Succinylcholine: 1-2 mg/kg
 - Rocuronium 0.6-1.2 mg/kg
 - Vecuronium 0.15-0.25 mg/kg



Complications with intubation

- Failure to secure the airway,
- Esophageal intubation,
- Hypoxic or hypercapnic respiratory failure leading to arrest,
- Injury to oropharyngeal or laryngeal airway including bleeding,
- Soft tissue swelling,
- Injury to vocal cords.

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“Barriers in implication of research evidence into clinical nursing practice”: A Systematic Review.

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TABLE 1: LITERATURE FINDINGS

BACKGROUND: Using research findings in clinical practice is a cornerstone in improving the quality of care, but nurses face different barriers in doing so.

Author's, Year, Place	Source, Title	Sample, Study design	Findings
1. Aljezawi M et al.(2019), Saudi Arabia	Barriers to Integrating Research Into Clinical Nursing Practice	Nurses, Cross sectional survey	The 3 most reported barriers were lack of time, physician cooperation, and other staff support. Nurses working in pediatric and maternity units reported more barriers.
2. Geum Oh E(2008), Korea	Research activities and perceptions of barriers to research utilization among critical care nurses in Korea	63 critical care nurse, survey	Research activities were relatively low. A lack of guidance for clinical implication and insufficient time to implement new ideas in the clinical area were identified as the highest-ranking barriers to use of research in this group
3. Mehrdad N et al.(200), Iran	The spectrum of barriers to and facilitators of research utilization in Iranian nursing	410 nurses, descriptive design	The major barriers to research utilization were that the nurses do not have time to read research; facilities are inadequate for implementation; and nurses do not feel they have enough authority to change patient care procedures.
4. Kajermo KN et al.(2008), Sweden	Predictors of nurses' perceptions of barriers to research utilization	833 nurses, survey design	Dissatisfaction with support from immediate superiors for participating in research and/or development projects, having no academic degree and unclear and unrealistic workplace goals were identified as factors increasing the risk of perceiving barriers to the use of research findings in clinical practice.

AIM: The purpose of this review is to explore barriers to research utilization in clinical practice as perceived by nurses.

METHODOLOGY

- Search strategy: •Pubmed, Google Scholar, MEDLINE, EBSCO host
- Type of study: •Qualitative study, descriptive study, Survey study, Cross sectional study.
- Setting, sample of study: •Hospitals of different settings.
- Inclusion criteria: •Nurses working in clinical setting, Published in peer review journal, English accent .

FIGURE 1: PRISMA FLOWCHART

Ident	Database searching, N=91	⇒	Others additional sources, N=0
Screen	Record screened, N= 32	⇒	Unmatch study excluded, N=59
Elig	Full text articles assessed, N=12	⇒	Irrelevant study, N= 20
Inc.	Studies included, N=4	⇒	Full text not available, N= 8

CONCLUSION: Clinical setting factors are those most perceived by nurses as barriers to integrating research into practice. Reforms in the clinical areas should take place to overcome these barriers.

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SATISFACTION OF PATIENTS WITH TELEHEALTH DURING COVID-19 PANDEMIC: A SYSTEMATIC REVIEW

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BACKGROUND: Due to the COVID-19 pandemic, nonessential clinical visits were greatly limited. The COVID-19 pandemic necessitated a swift adoption of telehealth to avoid patient and provider exposure. Telemedicine is a potentially disruptive innovation.

AIM: This review seeks to gather and examine current evidence on patient 's satisfaction with the use of telehealth during the COVID-19 pandemic.

Methodology

SEARCH STRATEGY

- Pubmed, Google scholar ,MEDLINE,EBSC O host

TYPE OF STUDIES

- A cross-sectional study
- A Prospective Cohort Study
- Retrospective Cohort Study

SETTING, SAMPLE

- Hospitals
- Patients

FIGURE 1-PRISMA FLOWCHART:



TABLE 1: LITERATURE FINDINGS

Author's	Source, Title	Sample size, Study design	Findings
1. Daniel B. Buchalter, et al.	Patient and Surgeon Satisfaction with Telehealth During the COVID-19 Pandemic	108 patients and 33 surgeon,	On average, patients were "satisfied" with telehealth and 37.0% preferred future visits to be conducted using telehealth. Surgeons were similarly "satisfied" with telehealth.
2. Ashwin Ramaswamy, et al.	Patient Satisfaction With Telemedicine During the COVID-19 Pandemic.	38,609 patients, Retrospective Cohort Study,	Patient satisfaction with video visits is high and is not a barrier toward a paradigm shift away from traditional in-person clinic visits.
3. Alexander M Satin et al.	Spine Patient Satisfaction With Telemedicine During the COVID-19 Pandemic.	772 patients, A cross-sectional study	Overall, 87.7% of patients were satisfied with their telemedicine visit and 45% indicated a preference for a telemedicine visit over an in-person visit.
4. Elise J Yoon et al.	Patient Satisfaction with Neurosurgery Telemedicine Visits During the Coronavirus Disease 2019 Pandemic: A Prospective Cohort Study.	590 patients , A Prospective Cohort Study	Telemedicine provided a viable and satisfactory option for neurosurgical patients in the outpatient setting during the COVID-19 pandemic.

CONCLUSION : This systematic review explore that telehealth provided a viable and satisfactory option for all patients during the COVID-19 pandemic.

TOPIC: DIAGNOSING CARCINOID SYNDROME

Mr. Anandh Sam Perera S, Asso. Professor, PhD scholar, PDMSNC, SVSU.

INTRODUCTION:
Carcinoid tumours are slow-growing. Rare type of neuroendocrine tumours originating from the enterochromaffin cells throughout the gut. Carcinoid metastasis can lead to Carcinoid syndrome. This is due to over production of many substance, including serotonin, which is released into the systemic circulation, and which can lead to the symptoms

- ❖ Case Report: A 45yr old male presented with a symptoms of right heart failure episodic flushing and diarrhoea since 6 months.
- ❖ A family history of death of father due to ?Abdominal malignancy
- ❖ Came with reports of FNAC from liver metastasis which were s/o adenocarcinoma.
- ❖ 2DEcho s/o congenital acyanotic heart disease with dysplastic pulmonary valve, moderate PS, severe TR.
- ❖ A diagnosis of carcinoid syndrome was suspected and he was further investigated.

TESTS	RESULTS	
CBC/LFT/RFT	NORMAL	
HHH	NEGATIVE	
USG ABDOMEN	Multifocal HCC or metastatic lesions with cross ascites	
PLEURAL FLUID	NO MELIGNANT CELLS	
ASCITIC FLUID	NO MELIGNANT CELLS	
2DECHO		
CT ABDOMEN	Multicentric hepatoma	
HRCT CHEST	S/O Pulmonary TB	
OGDSKOPEY	NORMAL	
COLONOSKOPEY	Severe narrowing and fibrosis of mucosa of colon	
TEST	RESULT	NORMAL RANGE
Urine 5HIAA	90mg/24hrs	2 to 6 mg/24hrs
Chromogranin A	5045ng/ml	Below 100ng/ml
Serum serotonin	2117ng/ml	40-400ng/ml

DISCUSSION:
Carcinoid tumours are often difficult to diagnose because there are few if any symptoms. But, if metastasis occurs, patient may experience the uncomfortable symptoms of carcinoid syndrome. Unfortunately the symptoms of the carcinoid syndrome are often too vague for doctors and they may mis-diagnose as something else. It leads to high risk of carcinoid crisis and which can be a life threatening complication of patient

COURSE IN HOSPITAL
During his stay in the hospital patient developed GI perforation and was posted for emergency laparotomy. Intra operative findings: sigmoid diverticulum perforated. Multiple liver metastasis seen all over liver

References: Moraes TJ, Langer JC, Forte V, et al. Neuroendocrine tumour: a case report and review of the literature. Apr 2003; 35 to 39. [medline]

*“Difficulties in Clinical Nursing Education - A Systematic Review
Future researches needed in India ”- JENIFER SINGH, NURSING TUTOR IN RAJSHEE
COLLEGE OF NURSING BARIELLY*

INTRODUCTION

Nurses’ competence is based on the knowledge and skill taught to them .Nursing training is a combination of theoretical and practical learning experiences that enable nursing students to acquire the knowledge, skills, and attitudes for providing nursing care . Nursing education is composed of two complementary parts: theoretical training and practical training

AIM - This study aimed to discover the challenges facing clinical nurse educators and nursing students in clinical environment .

METHODOLOGY

SEARCH ENGINES - Pub med, Google scholar , MEDLINE ,EBSCO

TYPE OF STUDY - Survey, cross sectional ,descriptive

TYPE OF PARTICIPANTS - Nursing students , clinical nursing educators

PRISMA CHART

Total records = 1450

Total screened = 450

Full text eligibility = 27

Total studies included = 3

Full text excluded = 350

Studies not included to the qualitative synthesis = 24

Author	Title , sample size	Findings
Yazdannik et al. (2012)	<ul style="list-style-type: none"> Difficulties in clinical nursing education: views of nurse instructors' The study population comprised of 20nurses in different ranks. 	<ul style="list-style-type: none"> Lack of knowledge and skills in the clinical environment can lead to anxiety. Nursing students suffered from an inferiority complex after entering the clinic.
Nahid . J etal (2016)	<ul style="list-style-type: none"> The challenges of nursing students in the clinical learning environment: A qualitative study Sample - nursing students and instructors 	<ul style="list-style-type: none"> Ineffective communications, Inadequate knowledge, Deficient practical skills
Amal A etal (2018)	<ul style="list-style-type: none"> Challenges facing clinical nurse educators and nursing students in Egyptian and Saudi clinical learning environment: A comparative study 	<ul style="list-style-type: none"> Lack of knowledge and skills in the clinical environment

CONCLUSION - Clinical education gives students the opportunity to use and improve the professional knowledge and skills specific to nursing, to make the right decisions, to increase self understanding, and to prepare themselves for professional roles

RECOMMENDATIONS- *Increasing the clinical hours in all nursing curriculums to allow the students to be more involved in clinical work and participate actively and Balance the number of staff to accommodate the number of nursing students*

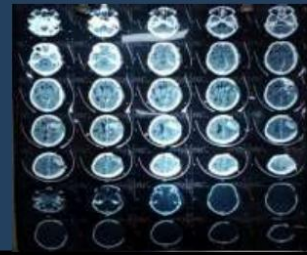
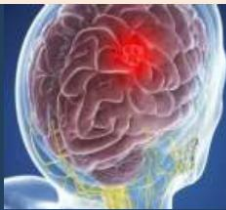
REFERENCES- A. Yousefy, A. R. Yazdannik, and S. Mohammadi, “Exploring the environment of clinical baccalaureate nursing students’ education in Iran: A qualitative descriptive study.” Nurse Education Today, vol. 35, no. 12, pp. 1295–1300, 2015.

CASE REPORT ON GRADE-I MENINGIOMA

Ms. Anju ,Msc(N) 2nd Year, 2019 Batch, Panna Dhai Maa Subharti Nursing College, SVSU, Meerut

INTRODUCTION

Meningioma is by far the most common primary intracranial tumor in adult. It is a common benign tumor which arises from the arachnoid cap or meningoepithelial cells usually located in the meningeal arachnoid area. Treatment of meningioma is complex due to a tremendous amount of variability in tumor behaviour. Meningioma is usually a slow growing tumor that forms on the surface of the brain. It may cause significant symptoms if it grows and press on the brain of spinal cord. Many patients are incidentally found to have tumor that will remain asymptomatic throughout their lives. It is important to identify these patient so that they can be spared from potentially morbid interventions. When the treatment is necessary, surgical resection is the corestone of meningioma therapy. The prevalence of pathologically conformed meningioma is estimated to be approximately 97.5/100,000 in the united states with over 170,000 individuals currently diagnosed with this tumor. Meningioma is more common in adults than in children with an incidence of 37.75 per 100,000 in the 75 to 84 age group. Whereas 0.14 per 100,000 in children from 0 to 19 years of age.



Extra-axial well defined, lobulated intensely enhancing mass of size 50x25x53 mm facing towards supero lateral convexities of left posterior frontal region.

INTERVENTION AND TREATMENT

The magnetic resonance finding revealed well defined mass with size approximately 50x25x53mm facing towards posterior frontal region. The mass was removed surgically by left temporoparietal craniotomy with total excision of tumor.

RESULTS

After surgical resection the patient was admitted in neuro ICU on ventilator constant observation. Steroids, antiepileptic, diuretics, analgesics and antiemetic medication regimen is going on. Dietary supplement is given by nasogastric tube feeding and supine position with head tilted to right side.

DISCUSSION

Post-operative changes are noted in the form of bony defect in left fronto-parieto-temporal region with overlying soft tissues swelling and air foci. The patient is in hospital neuro ICU with uneventful course with frequent checking of vital signs shows Temp-98.3F, Pulse-84b/m, Respiration-18br/min, BP-110/70mmHg, neuro checks, GCS-5, position management and post-operative medications after five days of surgery.

CONCLUSION

Meningioma's are a common condition and usually benign, although it should not be discarded as a differential diagnosis in patient with headache, diplopia and other neurological symptoms as it can become aggressive and affect significant segments of the tumor is essential in order to predict the course of action and prognosis.

REFERENCES

- Lee JH, editor. Meningiomas: diagnosis, treatment and outcome, 1st edition: springer-verlag London 2009.
- Cancer.Net Editorial Board.
- Journal of Korean Neurosurgical society 1979.
- Meningioma - wikipedia.wikipedia.org

CASE REPORT INFORMATION

54-years male patient admitted in hospital with diagnosis of grade I meningioma. Patient came with the complains of severe headache, blur vision and seizure attacks since one week. The MRI report shows tumor which was arising from the meningeal tissue of the brain in enhancing size approx. 50x25x53mm facing towards posterior frontal region and the case was diagnosed as grade I meningioma. The patient has undergone left temporoparietal craniotomy with total excision of tumor. After the surgery the patient was on ventilator with supine position and head tilted to right side. The medications like emset, mucinac, tramadol etc are given. His vital signs are Temp- 98.3F, Pulse-84 b/min, Respiration-18 breath/min & BP - 110/70 mmHg. Nasogastric feeding was given to the patient when he was unconscious but at present patient condition was improved to some extent as evidenced by GCS score from 3 to 5

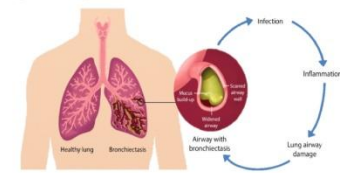
Inpatient Physical Therapy Management for a Patient with Chronic Pulmonary Complications Secondary to Multiple Lobectomies: A Case Report

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Panna Dhai Maa Subharti Nursing College

Introduction

- **Bronchiectasis** is a disease defined by abnormal dilation of the bronchi, which is a result of recurrent infections and/or chronic inflammation.
- A **lobectomy** is the surgical removal of one lobe of a lung and reduces the symptoms of bronchiectasis.
- Patients who undergo this surgery are more likely to have long-term pulmonary limitations³
- There is little to no literature regarding the long-term treatment of patients who underwent multiple lobectomies.

Figure 1: Progression of Bronchiectasis

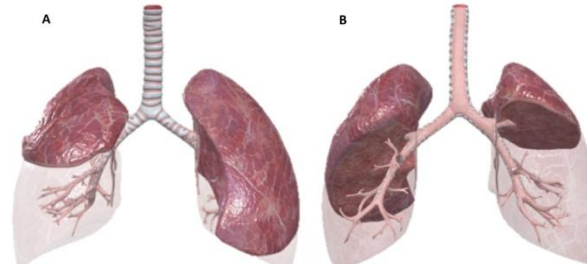


Case Description

This is a case report of a 62-year-old female who suffered from multiple pulmonary complications secondary to multiple lobectomies.

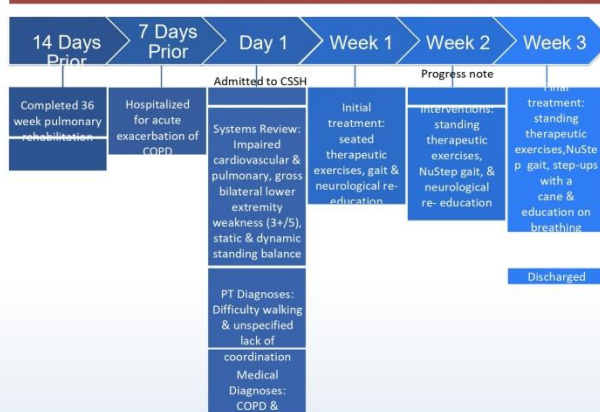
- A 62-year-old female, underwent lobectomy of her bilateral (B/L) lower lobes and right middle lobe secondary to bronchiectasis, COPD, restrictive lung disease, emphysema, recurrent pneumonia, asthma, pulmonary arterial hypertension and cardiomegaly. She had a past medical history of hypothyroidism, osteoporosis. She is non-smoker and non-alcoholic.

Figure 2: Representation of the patient's lungs post-lobectomies



The translucent portions (bilateral lower lobes and right middle lobe) have been surgically removed. (Figure 2A) Anterior view. (Figure 2B) Posterior view.⁴

Timeline



Outcomes

Outcome Measure	IE	PN (Week 2)	DC (Week 3)
6MWT	140.8 m	160.9 m	176.8 m
BLE gross strength	3+/5	4-/5	4/5
Dynamic Standing Balance	Fair +	Fair +	Good
Stairs	N/A	N/A	straight cane
Transfers	CGA	CGA	I
	25% VC	10% VC	0% VC

Patient outcomes: IE = initial evaluation, PN = progress note, DC = discharge, 6MWT = 6 minute walk test, BLE = bilateral lower extremities, CGA = contact guard assistance, VC = verbal cues, I = independent

Discussion/ Conclusion

- Patients who have undergone multiple lobectomies may benefit from PT that incorporates cardiovascular endurance training, dynamic standing balance exercises and bilateral lower extremity strength training in order to improve independence with functional mobility.
- Increasing age and COPD are two factors that increase rate of decline in pulmonary function for individuals who undergo a lobectomy.^{5,6}
- Clinicians should expect a greater decline in pulmonary function when working with older patients who have a pulmonary resection with the comorbidity of COPD.

References

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4. Complete Anatomy 2019. 3D4Medical. Version 4.0.3 (7899). Apple applicat

Cardiovascular Endurance



“When I found that I was Covid-19 positive”: Recount Experiences

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The COVID-19 pandemic is a severe blow to the healthcare system of the entire world and had affected millions of people across the world. COVID-19 has led to a high level of fear and anxiety among people, of getting infected. Resultantly, the pandemic has led to severe restrictions on the free movements of human beings and the lockdown of almost all countries across the World, etc. I am writing this to share the journey of real life experiences about my covid -19 positive status.

It was a usual morning when I have to start my daily routine. But the morning was not fine as suddenly I started experiencing severe body ache along with cold and mild fever. I thought it was a usual seasonal symptom due to climatic variations. As we are into pandemic era, and also being a health care professional, immediately, without any delay, I had been to a nearby PHC, to get myself test. It was 4/01/2021, and that same evening my symptoms worsens and there was spike in the temperature. Suddenly, from very next day, my sense of smell went off and I was getting a bitter taste with full of exclamation. My favourite meal of lemon rice and butter chicken was horrible to gulp and I was wondering how this flu has changed my routine of finding myself sleepy and lethargic. These symptoms continue for the next day too. On the 3rd day there was mild body ache with normal temperature. By this time my report was awaiting, but when I was relating to my symptoms, a strong intellect made me think rationally and I was self-quarantined. That same evening I received a call from the Health Department, Meerut saying that I had contracted the virus and advised me to take the covid medication course and to be in the home isolation for about 21 days. I was advised not to go to the hospital unless necessary. My stomach took a beating as well. I decided to move to a plant-based diet

during this week as it's lighter on the gut. However, I was maintaining my blood oxygen levels. I started having warm water with turmeric and ginger, cut off desserts, and meat from my diet.

Slowly after a week I found some relief. My headaches and fever reduced, and I was able to sleep better. I lost nearly four kgs weight; but still my sense of smell and taste hadn't come back.

I was continuously monitored by the health department for 10 days. They use to enquire for my spo2 levels and body temperature, where both were always shown normal. I got a full support from my college HOI and from the nodal officer of my parent hospital. I kept myself occupied by conversing with my family members on the phone, attended virtual meetings with the college HOI and the colleagues regarding academic activities which made me active and helped me to recover. But I was lethargic and I could slowly regain the sense of taste and smell. I had given the sample again for RT-PCR on 14th day and on 16th day, the result came negative. I re-joined to my work the next day after receiving my negative report. I had a warm welcome given by my HOI and my colleagues.

During this journey, I did not get panic of the situation and my approach to fight the deadly flue was strong, as I was already aware of the signs and symptoms of covid-19 and the treatment. According to me, the key to beating Covid-19 is to maintain a strong mind-set. I emphasized on the positive attitude and improvement in the mental well-being of the oneself and even to the patients when providing care in the hospital.

My takeaway message from the experience was 'no fear' and "don't be panic"

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