

World
Nursing Education and Evidence Based Practice Conference
&
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April 22-23, 2019 Dubai, UAE

Scientific Tracks & Abstracts



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Organizational downsizing, job satisfaction and organizational commitment among nurse educators in Western Visayas

Louie P Hijalda

University of San Agustin, Philippines

Background: Higher Educational Institutions in the Philippines faced low program demand and pressure on competitive advantage because of the full implementation of K-12 and advent of Outcomes-Based Education; downsizing as one of the most popular strategies being used in an effort to compete in the current educational system scenario.

Methodology: The study employed a descriptive-correlational design utilizing a survey method. Qualitative data were obtained to enrich survey results. Ninety-one (91) nurse educators in various College of Nursing in Western Visayas were chosen as actual participants using a stratified random sampling. Data collected were analysed using appropriate descriptive, inferential statistics and qualitative analysis.

Results: The results showed that majority of participants were 41 years old and above (65%), female (88%), married (88%), with master's degree (81%), with a monthly salary of Php21, 000.00 and above (51%), having more than 10 years of service (78%) and assigned in both classroom and related learning experience (69%). The overall interpretation indicates a moderate level of job satisfaction (grand mean of 3.81) and organizational commitment (grand mean of 4.20) among nurse educators in Western Visayas; there is no significant relationship between organizational commitment versus profile variables except for area of assignment ($\chi^2 = 16.217$, $p = 0.013$). There is a significant relationship between job satisfaction versus organizational commitment ($\chi^2 = 100.2$, $p = 0.000$).

Conclusions: The study concluded that nurse educators' perception of organizational downsizing has little effect on their job satisfaction and organizational commitment and that organizational downsizing has no significant relationship to job satisfaction and organizational commitment among nurse educators in Western Visayas.

Biography

Louie Pinuela Hijalda, Ph.D., RN, is currently a clinical instructor at the University of San Agustin, College of Health and Allied Medical Profession. A member of the Department of Science and Technology – Western Visayas Human Resource Development Committee (DOST-WVHRDC) and University of San Agustin – Research Ethics Review Committee.

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The effect of advanced professional programs on nurse's beliefs and implementation of evidence-based practice in Saudi healthcare settings

Thamer Alduraywish

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Nowadays, healthcare systems move rapidly toward Evidence-Based Practice (EBP). Critical care nurses rely on the gained knowledge for patient care rather than any other source. Nurses education has shown to be associated with EBP beliefs, in the same line recent research had found that nurses who held stronger beliefs about the value of EBP reported a higher level of implementation than nurses with weaker EBP beliefs. However, it is challenging to determine if nurses who have received a postgraduate education have developed the further skills to look into research, analyse it, and adopt its findings into their own nursing practice. Hence, the primary aim of this study is to investigate the effect of advanced professional programs in EBP beliefs and implementation in Saudi critical care settings. A cross-sectional descriptive and correlational study will include 150 nurses to ensure results validity. The inclusion criteria will be registered nurses working full-time at Saudi critical care settings for at least two years, nurses that work part-time and those who do not sign the consent form will be excluded. Nurses will be recruited to complete the questionnaire, they will be informed about the objective of the study and will be asked to sign a consent form. This study will investigate how nurse's education and knowledge could affect EBP beliefs and implementation which will be beneficial to patient outcomes and quality of care.

Biography

Thamer Alduraywish is currently working as a lecturer at Prince Khaled bin Sultan college, Saudi Arabia. He is a dedicated RN with more than 10 years of clinical and administration experience, highly motivated, team worker with flexibility and adaptability skills supported by critical thinking. Offer a solid foundation in knowledge of sciences, humanities, ethics, and legal concepts in quality and nursing care.

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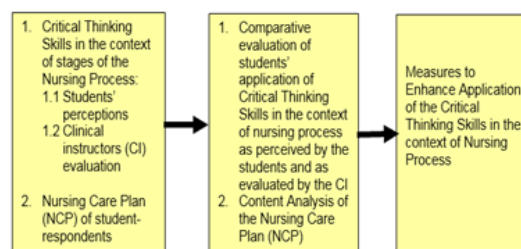
3D printing in cardiovascular disease

Zhonghua Sun
Curtin University, Australia

Statement of the Problem: Three-Dimensional (3D) printing has been increasingly used in clinical practice with promising reports in the cardiovascular disease. Studies have shown that realistic 3D printed models are able to replicate complex cardiac anatomy and pathology with high accuracy. However, comprehensive assessments of 3D printing in cardiovascular disease with regard to model accuracy, clinical value and optimisation of imaging protocols remain to be determined. The purpose of this study is to demonstrate the clinical applications of patient-specific 3D printed models of heart, aorta and pulmonary arteries in terms of quantitative assessment of model accuracy, depiction of cardiovascular disease and development of optimal Computed Tomography (CT) scanning protocols.

Methodology: Sample CT angiographic images of patients with congenital heart disease, aortic aneurysm and dissection, as well as pulmonary embolism were selected for image post-processing and segmentation for generation of 3D printing files. 3D printed models were created with use of different materials including strong and flexible material, elastoplastic and tangoplus materials. Measurements of dimensional diameters were performed to compare the differences between original source CT images and 3D printed models to determine model accuracy. Thrombus was inserted into the pulmonary arteries to simulate pulmonary embolism with different CT angiographic protocols tested on the model. Findings: 3D printed models were successfully generated with excellent demonstration of cardiovascular anatomy and pathology (image). Complicated cardiovascular pathologies such as ventricular septal defect, aortic aneurysm, or aortic dissection can be clearly depicted on 3D printed physical models. Low-dose CT protocols of 70 or 80 kVp and high pitch 2.2 or 3.2 are recommended for dose optimization.

Conclusion and Significance: Patient-specific 3D printed models have potential value to improve clinical practice by simulating surgical procedures and surgical planning. 3D printed models can be used to optimize CT protocols with low radiation dose but acceptable diagnostic images.



Biography

Zhonghua Sun is a Professor and Head of Discipline of Medical Radiation Sciences at Curtin University, Australia. His research interests include diagnostic imaging, 3D medical image visualization and processing (in particular cardiovascular CT imaging), haemodynamic analysis of cardiovascular disease and 3D printing in cardiovascular disease, and 3D printing in medicine. He has published 3 books, 13 book chapters, and over 240 refereed journal papers in medical/medical imaging journals. He is a Fellow of the Society of Cardiovascular Computed Tomography. He serves as an associate editor/academic editor for 6 journals and editorial board member for more than 30 international imaging/medical journals. Specifically, his research on 3D virtual intravascular endoscopy of aortic stent grafts and coronary plaque features has led to many publications in internationally refereed radiology and surgery journals with high citations, and his recent research on 3D printing in cardiovascular disease has also produced a number of publications.

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Evaluation of the application of critical thinking skills of students in the context of nursing process in the college of nursing of a private university

Gracila V Ucag-Decena

Fatima College of Health Sciences, Morocco

Statement of the Problem: This study aimed to evaluate the application of critical thinking skills in the context of nursing process of the nursing students. It sought answers to the following specific problems: (1) What are the frequency applied in critical thinking skills as perceived by the student-respondents and as evaluated by clinical instructor-respondents in the context of Assessment; Diagnosis; Planning; Implementation; and Evaluation? (2) Is there any significant difference between the student-respondents 'perceptions and the evaluation of the clinical instructor-respondents on the application of the critical thinking skills in the context of nursing process? (3) What measures can be proposed to enhance the application of critical thinking skills of nursing students?

Methodology & Theoretical Orientation: This study applied the mixed method of research and utilized the descriptive design for each quantitative aspect and content analysis for each qualitative aspect. This research was based on the humanistic nursing theory combined with the elements of critical thinking from the more recent studies. It adopted the Transactional Model of Critical Thinking (TMCT) which had successfully integrated humanistic nursing theory into a model of critical thinking.

Findings: Based on the quantitative data, student-respondents perceived that they ALWAYS APPLY critical thinking skills and clinical instructor-respondents evaluation showed students only OFTEN APPLY critical thinking skills needed in all phases of nursing process (assessment, diagnosis, planning, implementation and evaluation). Based on the qualitative data (NCP analysis), student-respondents need to enhance assessment process skills to ensure a complete database; formulated inappropriate diagnosis; need to enhance skills in formulating goals and outcomes; have the skills in identifying appropriate nursing but need to know how to prioritize each identified nursing intervention, and with skills in evaluating the effectiveness of interventions.

Conclusion & Significance: There is a significant difference in the application of critical thinking skills in the context of nursing process as perceived by student-respondents and as evaluated by clinical instructor-respondents. Specific measures must be proposed to enhance the application of the critical thinking skills of nursing students in the context of nursing process.

Biography

Dr. Gracila V. Ucag-Decena is a registered nurse from Philippines. She completed her Master of Arts in Nursing in Arellano University with taken courses from University of the Philippines Open University. She is a graduate of Doctor of Philosophy (Educational Management) of University of Perpetual Help System, Philippines. She worked as nursing lecturer/ clinical instructor since 2004 and has been an effective lecturer of Medical-surgical Nursing and Nursing Research.

"I believe that students will achieve academic success and build the self-confidence to continue taking risks during the learning process, by enthusiastically engaging student in fascinating lessons. I also believe that learning occurs when a student is fully engaged in the process makes a personal connection with the information taught and applies the knowledge to a variety of experiences. I aim to provide students with a high quality of instruction that meets the individual needs of my students. And to have a legacy which other teachers and students will remember that I was a sincere individual with a true passion of my craft, who always came early or stayed late to help a struggling student succeed"

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Prevalence of heart failure in Menoufia University cardiac intensive care unit

Marwa Ahmed Elgharably, Hala Mahfouz Badra and Naglaa Faheem
Menoufia University, Egypt

Background: Cardiac Care Unit (CCU) is increasingly becoming a very vital part of management of critically ill patients. There is limited information about the prevalence of Heart Failure (HF) and their outcome in this critical population.

Objectives: This registry represents data from CCU of Menoufia University Hospital, as representative to tertiary academic centre in Egypt, and provide an epidemiological snapshot of the HF patients, their risk profile and their short-term outcome during hospital stay.

Methods: This is a local single center cross sectional observational registry of patients admitted to CCU one year from July 2015 to July 2016. Data were collected through special software programme. This registry includes the data of 1006 patients admitted to the CCU. Patients with clinical and laboratory evidence of HF were systematically studied.

Results: Our registry showed that the prevalence of HF was 29.4% of the total CCU admissions. 72.7% were Heart Failure with reduced Ejection Fraction (HFrEF) and 27.3% were Heart Failure with preserved Ejection Fraction (HFpEF) Male patients were the most prevalent (60.1%) with mean age (60.4±10). Hypertension and obesity (59.5%, 54.4%) were the commonest Cardiovascular risk factors in HF patients followed by smoking (41.2%). Diabetes was prevalent in 40.2% and dyslipidemia in 35.8% of patients. Cardiogenic shock was existing in 21.62% (n=64) of HF patients followed by atrial fib/flutter (15.5%, n=46). Acute Coronary Syndrome (ACS) patients was the underlying etiology of HF in 26.7% (n=79). 13.2% of HF patients had prior PCI, 7.8% had Coronary Artery Bypass Surgery (CABG), 3.7% had prior valve surgery. History of prior admission to the hospital was existing in 87.4%. Left Bundle Branch Block (LBBB) was the commonest ECG findings in 24.6%, followed by Atrial Flutter (AF) (22.3%). Ischemic ECG changes were more prevalent in HFrEF type (21%), while voltage criteria were most prevalent in HFpEF type (12.5%). On ECHO examinations, HFrEF showed higher prevalence of severe mitral and tricuspid regurg and higher prevalence of Regional Wall Motion Abnormalities (RWMA). Duration of hospital stay was much higher in HF group, specially in HFrEF type with mean value of 8.91±7. During in-hospital course, HF mortality was 25.7% of the total CCU mortality. Moreover, HFrEF mortality represented 94.4% of HF mortality. Using multivariate regression analysis, the presence of hypertension doubles (2.1; IC at 95%: 1.16-3.76) probability to develop HF, compared to its absence. LBBB and AF increase the likelihood to develop HF by 7 times, each mm decrease in Left Atrium (LA) size reduces the odds of heart failure by 6% (Odds ratio 0.94; IC at 95% 0.9-0.98), each one time decrease in incidence in ACS reduce the probability of HF incidence by 15%.

Conclusion: HF is the primary reasons for admission into the CCU in 30 % of cases. Acute coronary syndrome is the commonest etiology of HF. Mortality among CCU patient was comparable to reports elsewhere. Hypertension, AF and LBBB are independent predictors of HF in such populations.

Biography

Marwa Ahmed Elgharably is a Cardiology specialist in the Egyptian ministry of health. She did her research work in Menoufia university hospital, Egypt.

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Nurses knowledge, practice and strain of care for delirium management among critical care nurses in Kuwait hospitals

Jassim Mohammed Al Barrak

Jaber Al-Ahmad Armed Forces Hospital, Kuwait

This study aim to (i) assess ICU nurses' knowledge of delirium, practice skills of delirium assessment and management, and strain of care when caring for patients having delirium in Kuwaiti ICUs; (ii) identify relations between ICU nurses' knowledge, practice skills, and strain of care for delirium in Kuwait; and (iii) test for significant differences in nurses' knowledge, practice skills, and strain of care between nurses' different demographic characteristics groups. The target population of this study is critical care nurses working in adult ICUs in Kuwaiti hospitals. Study sample selected from the total population which is estimated to be 822 nurses who are working in different critical care units in Kuwait. The study found that (i) the sample ICU nurses of both Group 1 and Group 2 generally have average knowledge of delirium despite generally having several years of experience in ICUs; and (ii) Group 2 nurses have higher levels of knowledge of delirium than Group 1 nurses. The study found that perceptions of the sample nurses of the level of effectiveness of 20 practices in delirium management varied widely amongst members of each group and between the two groups and nurses of Group 1 rank the 20 investigated skills and practices for delirium management as about 60% effective in delirium management. Stated otherwise, almost 60.0% of the 20 listed practices are effective in delirium management. The study found that as nurse's knowledge of delirium increases, his/her perception of effectiveness of the 20 practices for management of delirium listed on the NPSDM instrument increases, and vice versa. The study results of testing for significant differences between the demographic characteristics groups of Group 1 ICU nurses in the main variables of the study (median scores on the NKD, NPSDM, and SCDI instruments) revealed that out of 24 potential combinations of variables and groups, only four significant differences between groups have been detected: Healthcare sector-NKD, ICU Category-NPSDM, Experience in Nursing-SCDI, Experience in ICU-SCDI.

Biography

Jassim Mohammed Al Barrak is currently working as a Critical Care Nurse at Jaber Al-Ahmad Armed Forces Hospital (JAAFH) in Kuwait. He is an experienced nurse with a demonstrated history of working in the hospital & healthcare industry. He is skilled in Clinical Research, Patient Safety, Critical Care Nursing, and Hospitals.

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Utilization of evidence-based practice in comparing the effectiveness of two opposing standards in intravenous therapy

Amor B Calayan

Batangas Medical Center, Philippines

Aim: To compare the effectiveness of 72-hour routine peripheral venous catheter change and clinically-indicated replacement in reducing the incidence rate of catheter-related complications.

Background: A current guideline recommended by the Center of Disease Control and Prevention (CDC) and Infusion Nurse Society (INS) no longer braces the routine replacement of intravenous catheter as supported by various multi-centered and well-conducted studies. Hence, the Association of Nursing Service Administrator of the Philippines (ANSAP) still follows the old concept.

Method: Randomized controlled trial was conducted in the medical ward of Batangas Medical Center for one-month period. Fifty patients were selected and randomized into two groups, the control or routine replacement group and the intervention or clinically-indicated group. The entire procedure from the initiation of peripheral venous catheter, care, site assessment based on phlebitis and infiltration scale, removal and transport of catheter tip to the laboratory for semi-quantitative culture were handled by the nurse-on-duty. Outcome variables were phlebitis, infiltration and catheter related infections. Results were presented using frequency and percentage distribution and data were analyzed using chi-square of independence in order to answer the hypothesis of the study. All data were treated using SPSS version 16 with 0.05 alpha level.

Results: Both groups had a low rate of phlebitis (8% or two cases in intervention/clinically indicated group and 12% or three cases in control/routine replacement group). Infiltration was the common cause of catheter removal (36% or nine cases in intervention group and 40% or 10 cases in control group). No incidence of catheter related bloodstream infections was reported. A chi-square test of independence was performed to examine the difference in occurrence of infiltration and phlebitis between clinically indicated and routine replacement group. Statistics implies that occurrence of phlebitis and infiltration does not differ between clinically indicated and routine replacement group.

Conclusion: The study found no evidence to support changing catheter every 72 hours. Incidence rate of catheter-related complications such as phlebitis, infiltration and catheter related infections did not increase during prolonged catheterization. The results of the study substantiated with those in the international standards. This study is a scientific testament for the nursing administrators to revise the existing guideline since the clinically-indicated replacement of intravenous catheter is a more precisely logical and pragmatic option because it involves less pain to the patient, less staff procedural time, less equipment cost and less environmental waste.

Biography

Amor B Calayan, leader of Health Care Administration, Nursing Education and other related services which ensures Safety and Quality Care, Management, Learning and Development among Professional Nurses, undergraduates so as to other professions from various organizations and other clientele requiring technical knowledge and skills in Organizational Management, Human Resources, Research, Safety Management and Quality Improvement and other Administrative Skills, a catalyst for the strong implementation of good governance and improvement of KSA of an individual in the profession in all aspects.

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The challenges in managing Heart Failure with preserved Ejection Fraction (HFpEF)

Samer Ellahham
Cleveland Clinic, UAE

Heat failure is a life-threatening disease and addressing it should be considered a global health priority. Approximately half of all patients with Heart Failure have preserved Ejection Fraction (HFpEF) and, as life expectancies continue to increase in western societies, the prevalence of HFpEF will continue to grow. In contrast to Heart Failure with preserved Ejection Fraction (HFpEF), no treatment has been proven in pivotal clinical trials to be effective for HFpEF, largely because of the pathophysiological heterogeneity that exists within the broad spectrum of HFpEF. This syndrome was historically considered to be caused exclusively by left ventricular diastolic dysfunction, but research has identified several other contributory factors, including limitations in left ventricular systolic reserve, systemic and pulmonary vascular function, nitric oxide bioavailability, chronotropic reserve, right heart function, autonomic tone, left atrial function, and peripheral impairments. Multiple individual mechanisms frequently coexist within the same patient to cause symptomatic heart failure, but between patients with HFpEF the extent to which each component is operative can differ widely, confounding treatment approaches. This lecture focuses on our current understanding of the pathophysiological mechanisms underlying HFpEF, and how they might be mechanistically related to typical risk factors for HFpEF, including ageing, obesity, and hypertension.

Biography

Samer Ellahham is a board-certified Internist, Cardiologist and Vascular Medicine Senior Consultant. He is a Fellow of the American College of Cardiology and key member in heart failure and transplant, adult congenital and pediatric cardiology, cardio-oncology and peripheral vascular disease sections. He is the Eminent Editor of The Journal of Cardiology & Cardiovascular Therapy. He has served as Chief Quality Officer for SKMC since 2009. His research includes innovation, digital healthcare solutions, telemedicine, block chain, patient experience and engagement, lean six sigma, change management, innovation, safety, risk management, KPI management, safe surgery, heart failure, molecular biology, genetics, cardiac imaging, sports and nutrition. He is a recognized world-leader in these fields.

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Sharing is caring, a shared governance model in nursing practice

Mohamad Fakh

Fakeeh University Hospital, UAE

The shared governance of nursing practice is a model that encourage nurses and nurse leaders to take ownership of their nursing practice and quality of care delivery. Shared governance is highly correlated to improved nurses work environment, satisfaction, and retention. Whereby nurse's turnover is identified to be costly with a direct effect on staff engagement, and job satisfaction causing role ambiguity, and conflicts, poor communication, work stress, and burnout.

The basis of shared governance in nursing is that staff nurses should have the information, resources, and motivation to be able to take decisions that governs nursing practice. In a shared governance model, nurses are encouraged and allowed to participate in the decision-making process involving administrative issues that might affect their work life balance, a practice that nurses were excluded form. Shared governance models in nursing are meant to empower and engage nurses which can in turn influence nurses' decisions to remain employed.

Nurse leaders and middle manager play a crucial role in the success of shared governance model whereby they act as subject matter experts and catalysts in implementing the model by engaging the teams in improvement activities and initiatives that can directly affect nursing practice.

Work engagement is defined as a positive, fulfilling, work-related state of mind characterized by positive attributes toward work related practices and interests. Nurses engagement is considered a predictor for job satisfaction and low nurses' turnover rates. Improving nurse's satisfaction was positively related to improve financial metrics and patient related quality metrics like patient falls rate, pressure ulcer injuries, and infection control practices.



Biography

Mohamad Fakh has a passion for nursing, care delivery models, quality, and patient safety. Throughout his career of over more than 15 year and 5 countries. Participated in developing nursing practice models and lead teams that developed nursing policies that governs nursing practice at a corporate level. Served as a board member and hospital executive to many healthcare organizations. Expert in team building, staff engagement, and healthcare entrepreneurship. Currently holds the position of Chief Nurse Executive at Fakeeh University Hospital, Dubai.

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The elderly and life's channels: The threads of life

Elma Jazz Elma-Macrohon
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This study was undertaken with the aim to validate the assumption in JEM's Theory on Intergenerational Visits to the Elderly, which states that Intergenerational visits promote socialization, that spirals into family solidarity, quality time shared; that affords the elderly parents more meanings, purposes, significance in their lives, the feeling of successfully aging, and make family relationship tighter every time it happens. It is also to come up with narrative materials from the experiences of the informant-elderly during intergenerational visits, together with children, grandchildren, friends and relatives, before, during, and after the visitation. The method used is narrative inquiry. Interview schedules were used both in Filipino and English. There were recorded interviews and later transcriptions of them, then a story was woven entitled: "The Elderly and Life's Channels: The Threads of Life". There were six parents interviewed equal to six families. The characters in the narrations are representatives from these families. Findings proved that, "intergenerational visits to the elderly", is a key factor to improve the social relationship between children and parents and between and among parents and children. Other findings were on the smooth and rough (conflicts) events in the family, but the latter mended by the faithful observance of intergenerational visits, which serve as the knot that binds family members together, because the former promotes socialization. It is recommended that Intergenerational visits be included in the yearly activities for the elderly people or the senior citizens, by their respective family members, often or even far in-between.

Biography

Dr. Jazz is a nurse educator for more than 16 years, dedicated in teaching nursing student in undergraduate and postgraduate levels. During the course of her career as an educator and clinician, she developed an affinity for the older people. Working with older people is one of the most rewarding and challenging opportunities in the nurse's professional career. Sometimes seen as a difficult or depressing specialization, but she is sure Gerontology Nursing offers unique joys and rewards..

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Evolution of surgical treatment of congenital arc hypoplasia and aortic coarctation in the Republican Cardiology Center of Ufa

A R Sharafutdinov¹, I E Nikolaeva¹, V V Plechev², D V Onegov¹, R I Tuguzbaev¹, E V Larionova¹, M I Znobishcheva¹

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²Bashkir state medical University, Russian Federation

The optimal surgical approach of correction of the aortic arch hypoplasia and coarctation is still controversial. Some authors prefer to use a lateral thoracotomy and perform a various type of extended anastomoses. Other researchers believe that a more aggressive approach has better results and prefer reconstruction of the aortic arch made from the median access using different types of perfusion support.

The purpose of this work was to systematize, develop tactics of surgical treatment and show the evolutionary approach in the correction of congenital pathology of the aortic arch and its isthmus, depending on the severity of its hypoplasia and the patient's age.

The history of aortic coarctation surgery in the world begins on 19/10/1944 when C. Crafford first performed a resection with anastomosis. In Russia, surgical treatment begins in 1955 – The first successful correction of the defect was performed by E N Meshalkin.

The approach to the correction of the aortic arch evolved in the form of creating a radically extended anastomosis of the arch and descending aorta from a central access (later we refused from this type of correction) and resection of the isthmus with aortic reconstruction with an autopericardial patch under selective cerebral perfusion in neonates and infants. Among the patients beyond infancy we came to conclusion that the ascending sliding arch aortoplasty had a better result and free from using of patches. Considering the abundance of the above methods and their results, an algorithm has been developed for the surgical treatment of patients with congenital aortic arch pathology: - newborns and infants - resection with aortic arch reconstruction with an autopericardial patch; the older age group is the ascending sliding arch aortoplasty.

Biography

Artur Sharafutdinov is a surgeon, specialized at congenital heart diseases. Arthur takes an active role in identifying, preoperative management, and surgical correction of CHD. Annually attends national and international conferences devoted to the issues of the CHD. Dr. Artur is one of leading specialists in the field of care of patients with CHD in Ufa. He received the highest category due to specialty "cardiovascular surgery" in 2016. He annually performs about 90-100 procedures correction of congenital heart defects.

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A middle-range theory for developing clinical reasoning skills in undergraduate midwifery students

Olivia B Baloyi

University of KwaZulu-Natal, South Africa

Background: Clinical Reasoning (CR) remains central in midwifery care in the light of uncontrollable high maternal mortality rates and errors in midwifery practice. However, there is no consensus, locally and internationally, on how clinical reasoning skills can be developed in undergraduate students particularly within midwifery context.

Aim: This study analysed the processes used to develop clinical reasoning skills within undergraduate midwifery students with the aim of generating a middle-range theory for the production of competent midwifery graduates for optimum patient outcomes. Qualitative and grounded theory approach, underpinned by Social Constructivism Paradigm, was used. Data were collected over twelve months, using multiple methods of observations, interviews and document analysis. The participants comprised of midwifery nursing students, the 2016 and 2017 cohorts as well as midwifery educators. A total of 16 focus group discussions and 12 individuals in depth interviews were conducted.

Methods and analysis: Data collection and initial data analysis occurred simultaneously using coding process, which comprised of three distinct phases (open coding, axial coding and selective coding), with constant comparative analysis at each phase. Ethical clearance was obtained from the University Ethics Committee, with the Protocol reference number HSS/1288/016D.

Findings: Developing clinical reasoning skills emerged as the main concept in the middle-range theory that was generated in this study. This main concept was supported by major concepts, which included context, nature of the curriculum, clinical reasoning process, pillars including individual and system related outcomes.

Discussion and Conclusion: Quality midwifery care is what is founded on the clinical reasoning abilities of the midwives. The process of developing clinical reasoning skills is a hypothesis-oriented inquiry, hinged by process-product, relevant and responsive curriculum.

Biography

Dr Baloyi is a faculty member in the School of Nursing, College of Health Sciences at the University of Kwa-Zulu Natal, Durban, South Africa. Her research focusses on midwifery with specific interest midwifery education. In her PhD, she developed a model to guide the development of clinical reasoning skills within undergraduate midwifery students. She also has a passion for qualitative and grounded theory research. Dr Baloyi is the author of 4 peer reviewed articles all published in International Journals. As an emerging academic, Dr Baloyi is supervising two (2) PhD students and four (4) Masters.

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Gugma sang isa ka iloy: The other end of parenting experience by Ilonggo mothers with empty nest syndrome

Louie P Hijalda

University of San Agustin, Philippines

Background: Mention the term empty nest and one's mind immediately conjures up a picture of an empty house. The mother-child relationship has now evolved into that of an adult to adult relationship. For others, they feel that change is happening more rapidly than ever before and further watching their youngest child move out of the house was difficult for mothers especially in letting go and moving on.

Methodology: Descriptive phenomenology of Husserl was used. The saturation point was based in the participant's answer. Purposeful sampling was utilized to select participants, informed consents were discussed and in-depth face to face semi-structured interview was used. Colaizzi methodological approach was used for analysis. The anonymity and confidentiality of information was upheld.

Results: Several themes and supports emerged in relation to their experiences. Emotional support in the provision of caring, empathy and love; informational support by comparing their experiences to others and appraisal support from constant communication of information that is relevant to self-evaluation. The participant's spirituality was also well defined and had adjusted their selves very well.

Conclusions: The empty nest syndrome gave them mixed feelings and a challenge yet Ilonggo mothers accommodated themselves with supports and resiliency to achieved condition of wellness in letting go and moving on.

Biography

Louie Pinuela Hijalda, Ph.D., RN, is currently a clinical instructor at the University of San Agustin, College of Health and Allied Medical Profession. A member of the Department of Science and Technology – Western Visayas Human Resource Development Committee (DOST-WVHRDC) and University of San Agustin–Research Ethics Review Committee

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Coronary computed tomography angiography in coronary artery disease: From diagnosis to prevention

Zhonghua Sun

Curtin University, Australia

Statement of the Problem: Coronary Computed Tomography Angiography (CCTA) has been increasingly used as a less invasive modality in the diagnosis of coronary artery disease. With rapid technological advances in CT scanning techniques, clinical applications of CCTA in coronary artery disease have shifted from the traditional visualization of coronary lumen stenosis to physiological assessments of functional significance of coronary plaques and plaque features. This allows for identification of high-risk plaques or high-risk patients for developing adverse cardiac events.

Methodology: This presentation provides an overview of clinical value of cardiac CT in coronary artery disease with a focus on five stages of cardiac CT applications ranging from angiographic evaluation to physiological assessment of coronary plaques.

Findings: CCTA applications are presented to demonstrate the quantitative assessment of coronary plaques in terms of plaque features, such as calcified, non-calcified and mixed plaques with the aim of identifying high-risk plaques. CCTA is also able to provide functional assessment of myocardial ischemic changes, thus predicting cardiac events. Furthermore, CCTA-derived Fractional Flow Reserve (FFR_{CT}) allows for detection of lesion-specific ischemia, with high accuracy than CCTA alone. Latest developments including 3D printing and artificial intelligence further advance the diagnostic value of CCTA in coronary artery disease.

Conclusion and Significance: CCTA has played an important role in the diagnostic assessment of coronary artery disease due to its reliability and high diagnostic value. It presents challenges to invasive coronary angiography due to its less invasiveness but with similar diagnostic accuracy or even better plaque characterization. Current evidence indicates that CCTA has revolutionized patient screening and management.

Biography

Zhonghua Sun is a Professor and Head of Discipline of Medical Radiation Sciences at Curtin University, Australia. His research interests include diagnostic imaging, 3D medical image visualization and processing (in particular cardiovascular CT imaging), haemodynamic analysis of cardiovascular disease and 3D printing in cardiovascular disease, and 3D printing in medicine. He has published 3 books, 13 book chapters, and over 240 refereed journal papers in medical/medical imaging journals. He is a Fellow of the Society of Cardiovascular Computed Tomography. He serves as an associate editor/academic editor for 6 journals and editorial board member for more than 30 international imaging/medical journals. Specifically, his research on 3D virtual intravascular endoscopy of aortic stent grafts and coronary plaque features has led to many publications in internationally refereed radiology and surgery journals with high citations, and his recent research on 3D printing in cardiovascular disease has also produced a number of publications.

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Curcumin as potential cholesterol-lowering compound in mice fed a high cholesterol diet

Sepide Farahiniya and Masoud salehipoor
Ministry of Education, Iran

Atherosclerosis is the primary pathological process that leads to Cardiovascular Diseases (CVD), and Macrophages are the first inflammatory cells that linked with atherosclerosis transforming them into foam cells. SR-BI is one of the including genes involved in cholesterol metabolism. In this study, blood samples were collected, and monocytes were isolated. The effect of curcumin on the expression of SR-BI in mice with hyperlipidemiya who had received 15 mg / 5ml / Kg curcumin garbage using Real Time -PCR measuring the serum levels of cholesterol, were analyzed by Analysis of Variance (ANOVA) relationship data each group of test. The average estimate showed that the expression of SR-BI in the control group to 14.47, in the group (cholesterol) is equal to 12.70, in the group (cur cumin) 12.35 and in the group (Curcumin - cholesterol) 13.22, calculated using statistical software. The level difference between the expression of SR-BI in the control group and experimental groups ($P \leq 0.05$) does not exist. But to significantly reduce levels of plasma cholesterol, LDL and TG in the experimental group were fed with curcumin and increase HDL. It seems that curcumin has a unique effect on lipid metabolism and can be effected on prevention of atherosclerosis.

Biography

Sepideh Farahiniya currently works as a Teacher at Ministry of Health, Iran. She has completed her MasterDegree and research interests include Immunology, Microbiology, Molecular Biology, Pathology, Pharmacology, Physiology, Anatomy, Biochemistry, Biology, Biotech, Ecology, Genetics, Genomics, Health Sciences, Zoology. Her publications include: Curcumin as potential cholesterol-lowering compound in mice fed a high cholesterol diet; The effect of curcumin on NAFLD; Compilation of the book in 6 volumes; Translation of MicroRNAs: Key Regulators of Oncogenesis.

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Role of nursing staff in patient's safety

Rabie'e Al Rashdi

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Patient safety is one of the world's most pressing healthcare challenges. Indeed, worldwide there are an increasing number of patients that suffer injuries, disabilities and deaths as a result of safety lapses while receiving treatment, surgeries and hospital care. Estimates show that in developed countries as many as one in 10 patients is harmed while receiving hospital care. In developing countries, the probability of patients being harmed in hospitals is higher than in industrialized nations. The sad thing is that the majority of these incidents could have been avoided had there been a strict adherence to standards of care as well as awareness and compliance among healthcare staff to patients' safety regulations and protocols.

As the primary caregivers in hospitals, nurses are best positioned to improve quality and patient safety. Indeed, nurses are often the closest to the patients and the majority of their activities and procedures at work involve patients' safety risks. This in turn necessitates extra efforts, cautions, and responsibilities among nursing staff in order to appropriately prevent and manage patients' safety incidents and to provide a (risk-free) quality care to their patients at all times.

In the midst of the above this presentation will aim to achieve the following objectives:

- Provide understanding of patients' safety concept.
- Highlight the principles of patients' safety.
- Present some tips for strengthening patients' safety.
- Highlight the legal issues associated with patients' safety.
- Present an effective incident reporting system.

is a fundamental principle of health care. Every point in the process of care-giving contains a certain degree of inherent unsafety. Patient safety is a serious global public health issue.

Patient safety is described as a process by which an organization makes patients care safer or free of harm. This should involve:

- Risks assessment
- The identification and management of patients related risks
- The reporting and analysis of incidents
- And the capacity to learn from and follow up incidents and implement solutions to minimize the risk of them recurring.

Consider why patients feel safe in hospitals: i.e. they observe the nurses the way they act, talk (trg, confidence). Also consider nurse role as monitors: to patients' deterioration; organizational faults; resources; maintenance.

Consider nurses obligation: to adhere to their professional code of conduct; standards; training and cpd; Also, their role to supervise & monitor students; juniors & new comers; delegation.

In striving to achieve good practice ourselves, we can also act role models and champions. By reporting adverse events and near misses, we can ensure that data is captured that will contribute to learning. In terms of reporting, we know that nurses do this better than other groups. Consider nurses foresight to prevent a problem/risk occurring (i.e. the 3-bucket model). Consider why mistakes occur, i.e. human factor & system factors and work towards addressing them. Consider the Antecedents, determinants and components of safety performance and Consider communication

Biography

Dr. Rabie'e Al Rashdi graduated as a general nurse from the UK in 1987 before joining the Sultan Qaboos Military Academy from which he graduated as an Officer and then returned to UK to specialize in Accident and Emergency, Flight Nursing, as well as Intensive Care. Worked as a Nursing Officer in various military hospitals and climbed up the professional career ladder to finally become the Chief Nursing Officer (CNO) of the Armed Forces Medical Services, Oman. He served in this demanding post for over 12 years, then he was appointed as the Commandant (Dean) of AFMS School. Dr Rabie'e left the military healthcare services at the beginning of 2015 and is currently working as Planning and Development Expert in the Oman Academic Accreditation Authority. Dr. Rabie'e has a master's degree in Nursing and a Doctor of Philosophy (PhD) from Napier University, Edinburgh (Scotland), with a focus on healthcare Human Resources Development and Management. He also holds a post doctorate diploma in strategic management and leadership from Oxford Business College, UK, as well as various leadership and management courses.

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Assessing the knowledge and practice of school health program among primary school teachers in selected primary schools in Ile-Ife, Osun State, Nigeria

Thompson A Anthony
SDA School of Nursing, Nigeria

Statement of the Problem: Promotion of healthy living among primary school pupils help to eradicate diseases and other related illness in the grassroots. This is made possible by the knowledge of the teachers in inculcating health awareness among these pupils. With recent increase in the school enrolment, health promotion and maintenance with school-based program is a cost effective way to improve the health of the school community and the society at large if the aim and objective of primary health care must be realized. The purpose of this study is to access the level of knowledge and practice of school health program among primary school teachers in selected primary schools in Ile-Ife, Osun State, Nigeria.

Methodology & Theoretical Orientation: A descriptive design methods was adopted for this study, to select 130 primary school teachers across 20 primary schools using a convenient Sampling technique, while Florence Nightangale's environment theory was used to analyze how the environment can affect the pupils, staff and society at large toward disease prevention and control.

Results: The study found significant difference ($P>0.05$) between level of education and knowledge of school teachers towards school Health service and also, significant difference ($P>0.05$) between years of experience and practice of the school teachers towards school health service.

In Conclusion: Level of education and years of experience of teachers are contributory factors that affect the awareness of health services in primary schools. Therefore, school health services must be made compulsory as a subject in the primary schools to improve the healthy living of the society.

Biography

Thompson A. Anthony is currently a student at SDA School of Nursing, Nigeria. He is an enthusiastic learner who have major interest in Patient Care, Primary Health Care and Nursing Education.

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Working to deliver care where it is most needed

Khaled Almutairi

Prince Sultan Military Medical City, KSA

Purpose: Determine the effectiveness of staff education programs and the implementation of guidelines for rapid response teams to ensure that at risk patients are prioritized and followed appropriately.

Methods: A staff education program for hospital ward staff who would be utilizing the rapid response system was started. Staff were taught when and how to activate the rapid response system. Emphasis on activating the system early was reinforced along with the benefits of early treatment for at risk patients. A strict criterion for the rapid response team was developed that focused on finding and treating the patients that would benefit the most from advanced care during an ongoing crisis. Following the educational program and criteria implementation to the rapid response program, we reviewed our yearly statistics to determine if there was any benefit achieved from this process.

Results: We observed a steady increase in rapid response activations over the year. The number of referrals & active patients being seen by rapid response both trended upward thru the year 1. Our crude mortality rate decreased steadily as the year progressed 2. This occurred as our educational programs and guidelines were being implemented. We will follow this investigation with more specific indicators and develop KPIs for our teams internally to monitor the effectiveness of the program moving forward.

Conclusions: Training programs that target general healthcare staff and implementation of rapid response criteria to more effectively reach at risk patients can have a dramatic improvement of a rapid response service and decrease mortality.

Biography

A senior Specialist in Critical Care Nursing has his expertise in Adult Intensive Care Services, His evaluation of improving the Nursing Practice in ICU is more often open for evaluation model based on responsive constructivists between Ward Nurses and ICU Nurses and creates new pathways. He has built this model after years of experience in Both ICU and Rapid Response Team.

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