

DAY 1

Scientific Tracks & Abstracts



EuroSciCon Event on

Nursing Diagnosis & Midwifery

September 10-11, 2018 Prague, Czech Republic

DAY 1

September 10, 2018

Sessions

Nursing Education | Nursing Practice | Midwifery
Nursing | Nursing Research | Midwifery Skills |
Registered Nurse

Session Chair

Dawn G Moeller

Advocate Good Shepherd Hospital, USA

Session CO-Chair

Amina El-Nemer

Mansoura University, Egypt

Session Introduction

- Title: Ethics in the curriculum of undergraduate nursing programs in Turkey**
Bengu Cetinkaya, Pamukkale University, Turkey
- Title: Results of enhanced VHV's to promote health behaviors to reduce stroke risk by applied SSRT focus on specific risk factors among the people who live in Nonglak Chumpong district Nakhon Ratchasima, Thailand**
Patama Vajamun, Suranaree University of Technology, Thailand
- Title: Integrative care management: Optimizing high quality and value-based care delivery in the emergency department**
Lisa A. Hall, Advocate Good Shepherd Hospital, USA
- Title: Stress levels of nursing students: First clinical experience in pediatric units**
Bengu Cetinkaya, Pamukkale University, Turkey
- Title: Re-imagining healthcare delivery in the 21st century with empathy as central to humanity**
Cindy Sinclair, University of Toronto, Canada
- Title: The comparison of the quality of nursing documentation between written and electronic health records: A pilot study**
Maja Klančnik Gruden, University of Maribor, Slovenia
Andreja Mihelic Zajec, University of Ljubljana, Slovenia
- Title: Placental morphometry and newborn conditions in two Imbabura hospitals, Ecuador**
Viviana Margarita Espinel Jara, North Technical University, Ecuador
- Title: Neonatal Encephalopathy**
Amal Zubani, King Faial Specialist Hospital, Saudi Arabia
- Title: A critical review of the ten steps for successful breastfeeding and the best approach for breastfeeding decision and success**
Enrique Gomez Pomar, University of Kentucky, USA

ETHICS IN THE CURRICULUM OF UNDERGRADUATE NURSING PROGRAMS IN TURKEY

Bengu Cetinkaya

Pamukkale University, Turkey

Statement of the Problem: Nurses today face many ethical dilemmas. In nursing education programs, it is necessary to develop students' ethical decision making skills. This study was conducted to determine the ethics in the curriculum of undergraduate nursing programs in Turkey.

Methodology & Theoretical Orientation: Research includes 124 undergraduate nursing education programs in Turkey. Web pages of universities were searched to obtain data. The content of the course in which the ethical issues are handled is compared with the content of "National Nursing Core Curriculum".

Findings: The course related to ethics is called "Nursing history and deontology" and "Ethics in nursing" with the highest rate. The students have started clinical practice before ethics course. Lecture and case analysis were frequently used teaching methods. Course content includes shortcomings when compared to National Nursing Core Curriculum.

Conclusion & Significance: It is proposed that the curriculum should be updated to ensure that the theoretical knowledge is transferred to the clinical practice in order for the students to develop their ethical decision making skills.

Biography

Bengu Cetinkaya has completed his PhD from Ege University Institute for Health Sciences, Department of Pediatric Nursing. She is an Associated Professor and teaches at Pamukkale University Faculty of Health Sciences, Department of Pediatric Nursing. She has published more than 10 papers in reputed journals and has been serving as a Reviewer for international and national journals.

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RESULTS OF ENHANCED VHVS TO PROMOTE HEALTH BEHAVIORS TO REDUCE STROKE RISK BY APPLIED SSRT FOCUS ON SPECIFIC RISK FACTORS AMONG THE PEOPLE WHO LIVE IN NONGLAK CHUMPONG DISTRICT OF NAKHON RATCHASIMA, THAILAND

Patama Vajamun and Naruemol Singha-Dong

Institute of Nursing Suranaree University of Technology Ratchasima, Thailand

Stroke is the leading cause of death in Thailand even though the national program for prevention of chronic non communicable diseases was implemented for many years but it is not effective so that innovation must be continues not only for treatments but also for service system. Village health volunteers (VHVs) are provided basic health care services as one of the key success of health care improvement in Thailand. This cross sectional study aimed to examine the results of one year follow up for stroke risk after VHVs training to continued health promotion among villagers who are at risk to stroke. The sample is of 50 villagers (1 drop out) who are at risk, and 10 VHVs in the village. The methodology includes Suranaree Stroke Risk Tool (SSRT) as an assessment tool which classifieds risk factors of pre-stroke to guide for significant implementation, its reliability was 0.914. SSRT was employed to collect data after a year of VHVs who were trained to modify simple health care for the risk group.

Results & Conclusion: There were 50% of VHVs continuously monitoring the risk group practice healthy behavior, 3 of them (6%) were part of local government committee. There were 48 villagers or 96% to change to healthy behaviors; increase regular exercises, decrease BP $p < 0.05$, BS, weight, waist, salt, cholesterols, sweet consumption including giving up smoking and drinking alcohol. Only 2 of them (4%) were uncontrolled and referred to recheck. These studies reveal that specific training of VHVs by employed SSRT as a tool to guided self-care promotion among risk people in a village guide them changing their health behaviors and none of them developed stroke within a year follow up. They also suggest the local government committee to build health promotion environment in the village.

Biography

Patama Vajamun has graduated doctoral degree in 2003 From Mahidol University in Thailand. She worked as APN in adult and elderly care for 9 years, then a Faculty Member of Suranaree University of Technology. Her specialization area is chronic illness care.

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INTEGRATIVE CARE MANAGEMENT: OPTIMIZING HIGH QUALITY AND VALUE-BASED CARE DELIVERY IN THE EMERGENCY DEPARTMENT

Lisa A Hall

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According to research, an estimated five percent of the population uses approximately 50 percent of the healthcare resources in the United States. They present to the emergency department (ED) point of entry with comorbid medical, behavioral, and psychosocial concerns. The ED individualized care plan (ICP) addresses the unique needs of this medically complex, high-risk, and often vulnerable patient population. The ICP improves the quality of healthcare delivery and hospital reimbursement, while mitigating the costs associated with ED recidivism, and unnecessary hospital readmissions. In the past, this population received very fragmented medical services and episodic care in the ED. The ICP is essential to combat the “silo” approach to healthcare, which often results in higher healthcare costs and creates duplication of services. The ICP was subsequently recognized as a best practice and the program successfully implemented across 13 hospital sites in the Advocate Health System. The ICP aligns with the Integrated and Population Health Care models, acknowledging the link between medical and behavioral health concerns. The ED case manager-social work dyad serves as the operational driver of the program. The ICPs are fluid and expected to evolve over time with the specific needs of the patient. The current program at Advocate Good Shepherd Hospital consists of over 900 individualized, adult and pediatric plans of care. The organizational cost savings have exceeded over 6 million dollars, with a reduction of ED recidivism of 60 percent, and an overall reduction of unnecessary admissions of 50 percent. The ICP serves as a microcosm of the larger Population Health Care Models, demonstrating an innovative approach to delivering high quality and patient-centric health care, in a cost-effective manner. This program can easily be adapted in any healthcare setting, and presents an exciting way forward in successfully shifting our current healthcare paradigm.

Biography

Lisa A Hall is responsible for the coordination and implementation of strategies to ensure quality, cost effective, and patient centered health care delivery. Equip patients and families with the necessary tools and resources to make informed healthcare decisions, and provide assistance to effectively navigate through the healthcare system. Emphasis on enhanced clinical outcomes by implementation of safe patient transitions of care (TOC) from the Emergency Department (ED) to a more appropriate healthcare setting.

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STRESS LEVELS OF NURSING STUDENTS: FIRST CLINICAL EXPERIENCE IN PEDIATRIC UNITS

Bengu Cetinkaya and Sibel Serap Ceylan

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Statement of the Problem: Clinical experiences are source of stress for students. In pediatric clinical practice, patients are perceived as more fragile, and therefore students are experiencing more stress. Learning may be inhibited by the stressful clinical experiences. Identifying stressful situations is necessary for the development of strategies to prevent them. For this reason, this study was conducted to determine the stress levels and stressful situations of the students who participated in the clinical practice for the first time in Pediatrics Units. Methodology & Theoretical Orientation: 152 third-year nursing students completed "Turkish version of clinical stress questionnaire" and "students are defining characteristics data form" in the decriptive-type study. Data were analyzed using descriptive statistics and independent samples t test. Findings: The students who gave care to the pediatric patients had the most stress related to "fear of harming the child" and "performing invasive procedure". There was a significant relationship between the stress score of the students and the performing invasive procedure. Performing invasive procedure increased stress level in students. There was a significant relationship between the stress score and asking for support from the instructor. Because of the high level of stress, the students requested support from the instructor. Conclusion & Significance: Practices in pediatric clinics cause stress in nursing students. It is suggested to make the clinical education environment positive by identifying stressful situations.

Biography

Bengu Cetinkaya has completed his PhD from Ege University Institute for Health Sciences, Department of Pediatric Nursing. She is an Associate Professor and teaches at Pamukkale University Faculty of Health Sciences, Department of Pediatric Nursing. She has published more than 10 papers in reputed journals and has been serving as a Reviewer for international and national journals.

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RE-IMAGINING HEALTHCARE DELIVERY IN THE 21st CENTURY WITH EMPATHY AS CENTRAL TO HUMANITY

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²University of Nairobi, Kenya

Empathy is a cognitive-affective response to the human need for affection. It is a universal value accepted across human diversity. Patients seek medical attention because they are sick and vulnerable. Patients expect a level of commitment, compassion, communication for empowerment and compassionate empathy from their physicians and caregivers. This paper argues that Canada has effectively embraced empathy in the welcoming and non-discriminatory healthcare policy. Canada attracts over 250,000 of the world's healthiest and brightest immigrants and more than 25,000 refugees and others on humanitarian and compassionate grounds each year. Almost 50% of newcomers come from developing countries. Additionally, the Canadian medical profession enjoys the world-renown status as being at the forefront of medical education and training. Canada has one of the most advanced government-funded systems with equal access to healthcare for everyone. Research shows that within five years of arrival in Canada, newcomers start to experience declined health. The doctor shortage continues to leave almost five million people in Canada with no access to family doctors and timely care while the assumption that foreign born educated immigrant medical doctors are not the right fit to fill the doctor-shortage gap. There is a growing interest by medical leaders in the profession to ensure accessible care to all patients notwithstanding their cultural, religious or linguistic diversity, even if this means translating services in different languages and hiring interpreters to assist with patient-doctor communication. With the growing disruptions in the world, Canada's open doors to newcomers who are seeking better economic, social and safety conditions, there is an urgent need to re-imagine better ways to capitalize on foreign medical talents to care for the expanded diverse patient population. We aim to discuss some possibilities for healthcare training with empathy as central to humanity in the 21st century.

Biography

Cindy Sinclair has received her PhD in Social Justice Education, MEd in Sociology and Equity Studies in Education and BA in History and Fine Art History from the University of Toronto. She has more than 20 year's administrative and postgraduate medical education experience. Her research focuses on immigrant medical doctors (IMDs) who are not selected for retraining programs towards medical recertification. She co-founded the Immigrant Medical Doctors Forum to further explore integration of IMDs in the Canadian medical system.

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THE COMPARISON OF THE QUALITY OF NURSING DOCUMENTATION BETWEEN WRITTEN AND ELECTRONIC HEALTH RECORDS: A PILOT STUDY

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¹University Medical Centre Ljubljana, University of Maribor, Slovenia

²University of Ljubljana, Slovenia

Statement of the Problem: The quality nursing documentation, which follows the steps of the nursing process, ensures systematic nursing care of patients and provides support to nurses in clinical decision-making. The literature review, however, shows that data gaps and inaccurate data are often listed in the documentation and that documentation is often lacking in important information. The electronic records and standardized nursing language influence the improvement of the quality of nursing documentation, yet the area is still not well researched. The purpose of this pilot study is to validate the Slovenian version of Quality of Diagnoses, Interventions, and Outcomes (Q-DIO) Instrument and to compare the quality of paper-based records versus electronic records.

Methodology: A cross-sectional observational study will be carried out using a standard Q-DIO instrument. The sample for the pilot study will include 30 health records (10 electronic and 20 paper-based records) of children aged 1 to 9 years diagnosed with lower respiratory infection. Children included in the study were hospitalized in 2017 in three different tertiary clinics in Slovenia.

Findings & Conclusion: We expect that the quality of electronic records will be significantly higher in comparison with paper-based records.

Biography

Maja Klancnik Gruden is an Assistant chief nursing officer for quality and development in University Medical Centre Ljubljana and a Teaching assistant at the University of Maribor, Faculty of Health Sciences. She is one of the founding members of the Working group for nursing diagnosis who led the translation project of the book NANDA–International Nursing Diagnoses: Definitions and Classification 2015–2017. She is a PhD candidate in Nursing. Her field of research is focused on nursing documentation, especially the development and implementation of electronic health records related to the theory of person-centred nursing.

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Andreja Mihelic Zajec is a lecturer of basic nursing, research methodology in nursing and nursing care of women at the Department of Nursing, University of Ljubljana, Faculty of Health Sciences. She was the editor-in-chief of the only scientific journal in the field of nursing in Slovenia. She is one of the founding members of the Working group for nursing diagnosis which led the translation project of the book NANDA–International Nursing Diagnoses: Definitions and Classification 2015–2017.

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PLACENTAL MORPHOMETRY AND NEWBORN CONDITIONS IN TWO IMBABURA HOSPITALS, ECUADOR

Viviana Margarita Espinel Jara, Maria Ximena Tapia Paguay and Rocio Elizabeth Castillo Andrade

North Technical University, Ecuador

The placenta is an indispensable transitory organ, allows the adequate development of the product of conception. Its dysfunction can cause fetal complications, intrauterine growth retardation and maternal complications such as preeclampsia. This study allowed differentiating placental morphometry and newborn conditions in two hospitals in Imbabura – Ecuador: qualitative-quantitative, non-experimental, correlational, descriptive and cross-sectional design, carried out in two groups of women with full-term pregnancies, without complications. Pregnant women attended at the Ibarra Hospital were from different ethnic groups; the pregnant women of the Otavalo Hospital are exclusively indigenous. The stratification of the socioeconomic level is obtained by applying the INEC survey; anthropometry and morphometry with the use of digital electronic scales and metric tapes. Among the main results, the average low socioeconomic level predominates; APGAR assessment remains in non-compromising ranges, anthropometry as well as placental morphometry remain within normal parameters; oval placental discs are predominantly identified in otavaleña mothers. Note that the placental reasons in both hospitals tend to be abnormally high, presuming diminution of both placental reserves and optimal fetal growth. Conclusions in Otavalo, the majority of placentas presented an oval shape, greater weight and greater size, in comparison with those of the Ibarra canton. Despite the high values of the placental reasons, the neonates under study were placed on normal parameters in terms of anthropometry and APGAR. The information obtained allows us to affirm that the children of indigenous mothers born in Otavalo had the best physiological morphological characteristics.

Biography

Viviana Margarita Espinel Jara holds a Bachelor's Degree in Nursing from the Technical University of North Ibarra Ecuador and a Master's Degree in Family Health at the Universidad Técnica del Norte. She has served as Chief Nurse at the Joya de los Sachas Health Center in Francisco de Orellana, and in the Provincial Health Directorate of Napo where she fulfilled her duties as Head of the Department of Intercultural Health, as well as a Nurse of direct care at the IESS Ibarra Ecuador Hospital. At the moment, he is the Coordinator of the Nursing Career at al Universidad Técnica del Norte, Teacher of the Career of the Technical University of the North, Member of the Editorial Board as Editorial Secretary of the Scientific Journal of the Faculty of Health Sciences of the Universidad Técnica del Norte with ISSN 1390-910X.

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NEONATAL ENCEPHALOPATHY

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Neonatal encephalopathy (NE) is a heterogeneous syndrome characterized by sign of central nervous system dysfunction in newborn infants. It can result from a wide variety of conditions but often remains unexplained. Approximately 70% of NE cases are associated with events arising before the onset of labor. On the other hand Hypoxic-ischemic Encephalopathy (HIE) is one of the many possible contributors to NE. The term is appropriately used when NE due to hypoxic ischemic brain injury. Guidelines from the American Academy of Pediatrics and the American College of Obstetrics and Gynecology for HIE indicate that all of the following must be present for the designation of perinatal asphyxia or HIE: profound metabolic or mixed acidemia (pH <7) in an umbilical artery blood sample; persistence of an Apgar score of 0 to 3 for more than 5 minutes; neonatal neurologic abnormalities and multiple organ involvement. The asphyxia insult is due to impaired cerebral blood flow, as a consequence of interrupted maternal and/or fetal placental blood flow and gas exchange. The most important effects appear to include apoptosis and inflammation, which occur in the sub-acute phase after injury (hours to days after a hypoxic-ischemic event) Figure. There should be a comprehensive evaluation including assessment of neonatal clinical status, all potentially contributing factors and radiological studies. Therapeutic hypothermia is the only treatment currently shown to reduce death and/or disability after a hypoxic-ischemic insult in newborn infants with moderate to severe encephalopathy in the first 6 hours after birth. This intervention needs to be implemented according to the established published protocols and guidelines. Newborns with mild encephalopathy usually develop normally, while infants with moderate to severe encephalopathy are more likely to develop long-term neurologic sequela and morbidity.

Biography

Amal Zubani is a Consultant at King Faisal Specialist Hospital and Research center, Jaddah, which is a tertiary care Hospital located in Jeddah on the West Coast of the Kingdom of Saudi Arabia. She is an Advisor and Active Member in different committees in the Ministry of Health in Saudi Arabia. She has graduated from King AbdulAziz University in Jeddah in 2000, and then she joined University of Manitoba, Winnipeg, Canada as Resident then fellow. She has her Canadian board in Paediatric and Perinatal Neonatal medicine in 2005 and 2007. Her major interest and research subjects are Nutrition in Preterm Infant and their Nuero Developmental Outcome. She has several publications and presentations nationally and internationally.

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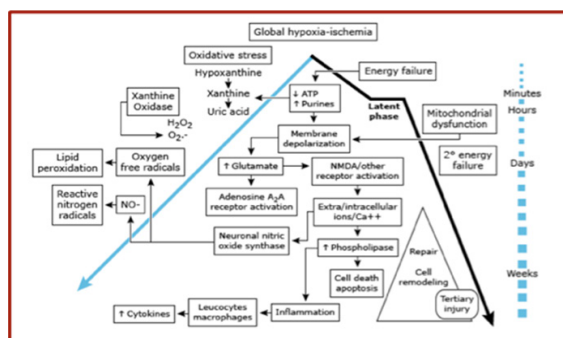


Figure: Pathogenesis. The downward pointing blue line represents cascade of events that occurs with oxidative stress and the downward black line depict events associated with energy failure

A CRITICAL REVIEW OF THE TEN STEPS FOR SUCCESSFUL BREASTFEEDING AND THE BEST APPROACH FOR BREASTFEEDING DECISION AND SUCCESS

Enrique Gomez Pomar

University of Kentucky, USA

There is no doubt regarding the multiple benefits of breastfeeding for infants and society in general. Therefore, the World Health Organization (WHO) in a conjoint effort with United Nations International Children's Emergency Fund (UNICEF) developed the "Ten Steps to Successful Breastfeeding" in 1992, which became the backbone of the Baby Friendly Hospital Initiative (BFHI). Following this development, many hospitals and countries intensified their position towards creating a "breastfeeding oriented" practice. Over the past two decades, the interest increased in the BFHI and the Ten Steps. However, alongside the implementation of the initiative, extensive research continues to evaluate the benefits and dangers of the suggested practices. Hence, it is our intention to make a critical evaluation of the current BFHI and the Ten Steps recommendations in consideration of the importance of providing an evidence-based breastfeeding supported environment for our mothers and infants

Biography

Enrique Gomez completed his Medical School in Peru, Pediatric Residency in St Joseph's Regional Medical Center in Paterson, NJ and Neonatology fellowship at the University of Kentucky in Lexington; he has completed Masters' in Sciences at the University of Kentucky. He is currently working as a Neonatologist in Mississippi. He has published in several peer review journals and it's currently interested in Neonatal Abstinence Syndrome and in improving breastfeeding rates and success

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DAY 1

Young Research Forum



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RELIABILITY AND VALIDITY STUDY OF TURKISH VERSION OF CHILDREN'S EMOTIONAL MANIFESTATION SCALE IN TURKEY

Selver Mete and Bengu Cetinkaya

Pamukkale University, Turkey

Statement of the Problem: The study aims to determine the validity and reliability of the Turkish version of Children's Emotional Manifestation Scale developed to measure children's emotional responses during stressful medical processes.

Methodology & Theoretical Orientation: The sample of this methodological type study consisted of 62 children aged between 7-12 years who admitted to the hospital for day surgery. In the validity study, language and content validity were tested first. Inter-rater reliability of the scale was tested by internal consistency method. The evaluation was conducted through intragroup correlation coefficients and the Cronbach alfa reliability coefficient. Kappa coefficient and intraclass correlation coefficients of the scale were calculated to determine inter-rater consistency. Besides, intra-class correlation coefficient was calculated to determine intra-rater reliability. Structure Validation; correlations between scores of Children's Emotional Manifestation Scale and scores of arterial blood pressure, heart rate, respiration and State Anxiety Inventory for Children were calculated using Sperman Correlation Coefficient.

Findings: The content validity index of the scale is 0.96. The scale is statistically significant. Internal consistency was found to be between 0.93 and 0.95 by Cronbach's alpha reliability coefficient. The results show that interrater reliability is sufficient. According to kappa analysis, there is consistency between the raters. There is a moderately significant positive relationship between Children's Emotional Manifestation Scale and State Anxiety Inventory for Children ($r=0.26$, $p=0.05$). Also, a moderately significant positive relationship was found between Children's Emotional Manifestation Scale and pulse ($r=0.41$, $p=0.01$).

Conclusion & Significance: Turkish version of Children's Emotional Manifestation Scale is valid and reliable to measure the emotional response of children before stressful medical procedures or during preoperative period. Children's Emotional Manifestation Scale, with Turkish version, is intended to be a simple and objective tool to evaluate the efficiency of the intervention studies aimed at decreasing negative emotional behaviours and anxiety.

Biography

Selver Mete has graduated from Vocational School of Health in 2012. She has completed her undergraduate studies in 2016. She worked as a Nurse at Pediatric Hematology Unit at Pamukkale University Hospital between May' 2013 and Jan' 2014. She has been working as a Nurse at the Pediatric Surgery Unit at Servergazi State Hospital since 2014. Currently she is going on her studies to get a Master's degree at Pediatric Nursing Program of Nursing Department at Health Sciences Institute of Pamukkale University.

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DAY 2

Scientific Tracks & Abstracts



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DAY 2

September 11, 2018

Sessions

Pediatric Nursing | Nursing Practice | Nursing Education | Surgical Nursing | Registered Nurse | Patient Safety

Session Chair

Lisa A. Hall

Advocate Good Shepherd Hospital, USA

Session Chair

Amal Zubani

King Faial Specialist Hospital, Saudi Arabia

Session Introduction

Title: The use of radiofrequency for women's intimate health

Katharina Sirch, Aesthetic Medicine, Italy

Title: Implication of application program "PREG-CAL" on mobile phone for promoting health in Thai pregnant women

Jantakan Kanjanawetang, Suranaree University of Technology, Thailand

Title: Hospital nurses' perception of the quality of patient care, patient and nurse safety on their unit

Karen Eisler, University of Regina, Canada

Title: Self-Care and prevention of complications by diabetics in a unit of the first level of care, Ibarra 2017

Rocío Elizabeth Castillo Andrade, North Technical University, Ecuador

Title: Gossip attitudes and patient privacy practices of pediatric nurses

Sibel Serap Ceylan, Pamukkale University, Turkey

Title: Childbirth counselling for pregnant women requested for caesarean delivery

Amina El-Nemer, Mansoura University, Egypt

Title: YOU are a Leader!

Karen Eisler, University of Regina, Canada

Title: Neonatal abstinence syndrome: History, diagnosis and management

Enrique Gomez Pomar, University of Kentucky, USA

THE USE OF RADIOFREQUENCY FOR WOMEN'S INTIMATE HEALTH

Katharina Sirch

Aesthetic Medicine, Italy

Worldwide women desire to reclaim their younger bodies. They want to restore their sexual well-being also. Recent studies showed the multiple benefits for women who complained about different intimate disorders associated with youthfulness, well-being and reviving their relationships. Childbirth and the natural aging process cause changes which can affect feminine wellness. Multiple childbirth can bring up to stretching of the vagina. Even the menopause can lead to physical and functional changes and excessive dryness. All these situations can rob women and their partners of their sense of sexual well-being. Women do not want that out of control feeling about their own bodies, especially about the most intimate part of their lives. Women in our days want to reclaim their younger bodies. They want to restore their well-being and revive their relationships which can be introduced by the temperature controlled radiofrequency which uses energy to gently heat the tissue. In this way the physical and functional well-being can be restored. Clinical studies show that heating the tissue on about 40°C there will be engaged an inflammatory process in which the fibroblasts are stimulated to produce new collagen increasing vascularity and blood flow. In a multi-site clinical trial more than 93% of women treated reported improvement in vaginal laxity and significant improvement in sexual function, such as arousal, desire, lubrication, orgasmic function and general sexual satisfaction and pain.

Biography

Katharina Sirch has graduated at Padova's University, Italy, in Medicine, and specialized in Ophthalmology at the University of Munich, Germany. She is always interested in Medical Beauty, Health and Well-being. She dedicated more than 15 years in the aesthetic and anti-aging, including the HRT therapy, to find the best solutions for her patients to feel them always the best of any age. She is trained in the most known techniques for face and body rejuvenation, like the use of Botox, the injection of the hyaluronic acid, the nanofat grafting, the non-surgical lifting techniques and more.

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IMPLICATION OF APPLICATION PROGRAM “PREG-CAL” ON MOBILE PHONE FOR PROMOTING HEALTH IN THAI PREGNANT WOMEN

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Background: Pregnancy is accepted as a maturation crisis. Health behaviour is very important, because it has a direct effect on health of pregnant mothers and their foetus. PREG-CAL is a mobile application program which operated on smartphones or tablets based on android operating system. This application was developed as an alternate tool for promoting self-care potential of pregnant women and their families sustainably.

Method: A Quasi-experimental research design, one-group with pre-test and post-test, aimed to examine effectiveness of applying the PREG-CAL to promote health of Thai pregnant women. Therefore, knowledge, health behaviour and haematocrit between pregnancies were tested. Sample of this study composed of 30 pregnant women who received antenatal care at Chokchai Community Hospital, Nakhon Ratchasima Province. Data was analysed using a paired-t test.

Results: It was found that the score on knowledge (mean = 35.77, SD = 3.07) and health behaviours (mean = 173.00, SD = 9.47) of pregnant women after using the application called PREG-CAL 3.0 was higher than the score on knowledge (mean = 28.93, SD = 5.13) and health behaviours (mean = 162.27, SD = 12.29) before using the application statistically ($p < .01$). In case of haematocrit, it demonstrated that mean haematocrit level (mean = 36.05, SD = 3.28) after using PREG-CAL was statistically higher than level of haematocrit before (mean = 34.60, SD = 3.37) using the application ($p < .001$).

Conclusion: This study showed that the PREG-CAL could improve knowledge, health behaviours and haematocrit level of Thai pregnant women. Therefore, due to an ease for use and access, the PREG-CAL could be an alternative tool for promoting health behaviours of Thai pregnant mothers. Recently, the PREG-CAL has been downloaded more than 70,000 times and has current users on smartphones or tablets more than 20,000 users. Moreover, satisfaction level which was rated by Google play is approximately 4.8 from 5.0.

Biography

Jantakan Kanjanawetang had completed her PhD in Nursing from Chulalongkorn University, Thailand. She is the Deputy Director of the Centre for Innovation and Educational Technology, and the Former Associate Dean of Nursing Institute, Suranaree University of Technology, Thailand. She has long experience on teaching maternal nursing and midwifery for nursing students for more than 20 years.

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HOSPITAL NURSES' PERCEPTION OF THE QUALITY OF PATIENT CARE, PATIENT AND NURSE SAFETY ON THEIR UNIT

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Research has demonstrated that quality of care, patient and nurse outcomes are important in healthcare. The goal of this research project was to describe staff nurses' perception of the quality of care, patient and nurse outcomes and examine the relationship of the variables with the nurses' perception of their nurse managers' leadership practices. There were 150 surveys distributed and all RNs, LPNs and RPNs from three surgical units in two hospitals were invited to complete two surveys. One survey was asking for their perception of their nurse managers' leadership practices using Kouzes and Posners Leadership Practice Inventory (LPI) (2013). The second survey captured their perception of quality of care on the unit, staff intent to leave, medication safety and overall patient safety. There were 103 completed surveys returned. Data was entered into SPSS and descriptive analysis and regression analysis were conducted to examine the relationships between the perception of the managers' leadership practices and the quality of care, patient and nurse safety. The statistical analysis did not show a relationship between leadership and the outcomes. However, a significant finding was that 65% of the nurses did report that the overall quality on the unit in the last year had deteriorated. This session will report on the findings of the research project and the follow up with the nursing staff on the three surgical units.

Biography

Karen Eisler has been a RN for over 40 years. She has worked as a clinical RN for 20 years in ICU and Emergency in an acute care hospital in Regina and for 20 years primarily in Administrative positions. The most recent was as the Executive Director of the Saskatchewan Registered Nurses' Association. Her Master's thesis and Doctoral research was in Nursing Leadership. The results indicated that managers' use of transformational leadership practices can affect the staff nurses' perception of the quality of patient care on a unit. Her research interest is in Nursing Leadership related to patient and staff outcomes, quality workplaces and provincial and national nursing regulation.

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SELF-CARE AND PREVENTION OF COMPLICATIONS BY DIABETICS IN A UNIT OF THE FIRST LEVEL OF CARE, IBARRA 2017

Rocio Elizabeth Castillo Andrade, Viviana Margarita Espinel Jara and Gabriela Solange Flores Duarte

North Technical University, Ecuador

Diabetes is a growing problem of Public Health due to the increase in the prevalence of this pathology, which affects all types of population due to the change in life patterns. The main objective was to establish self-care for the prevention of complications in diabetic patients: a descriptive transversal study with qualitative, non-experimental design. To collect the information, a survey was applied whose data were processed in Microsoft Excel, as main results were obtained that, the majority group are women, with ages between 50 to 69 years, with a primary level of education, they have a good knowledge about the disease and the rigorous diet to which they must submit, however, show no interest in applying it, 50% of the people studied indicate that they perform physical activity at least once a week and 50% attend medical check-ups every two months. It was found that 16.9% have wounds that are difficult to heal and that the care of their feet and immunizations are topics of little knowledge. With these results, it was considered pertinent to carry out a guide to promote the strengthening of self-care knowledge in diabetic patients.

Biography

Rocio Elizabeth Castillo Andrade has obtained her Degree in Nursing at the Technical University of North Ibarra Ecuador, and of Magister in Teaching University and Educational Investigation, National University of Loja. She has worked as: Nurse in the Hospital San Vicente de Paúl de Ibarra, Professor of the Nursing Career at the Technical University of the North. She has served as Deputy Dean of the Faculty of Health Sciences of the Universidad Técnica del Norte. She currently serves as Dean of the Faculty of Health Sciences of the Universidad Técnica del Norte.

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GOSSIP ATTITUDES AND PATIENT PRIVACY PRACTICES OF PEDIATRIC NURSES

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Statement of the Problem: Privacy is important for securing and protecting the personal, physical, and psychological special things that are important and special for patients. Nurses have been held responsible for ensuring privacy and confidentiality by the International Council of Nurses Code of Ethics for Nurses. The personal space is limited in the areas where health services are provided or in hospitals. The studies revealed that the children and adolescents living in the hospital had problems with privacy. Nurses, who are with patients on a 24h, have a number of significant roles to play in the problems or conflicts associated with privacy and confidentiality. The research was conducted to determine that gossip and rumor attitudes, and practices towards patient privacy, of the nurses working in pediatric units.

Methodology & Theoretical Orientation: A total of 112 nurses, working in pediatric units, were included in the descriptive study. Descriptive Characteristics Form, The Gossip and Rumor Attitude Scale and Patient Privacy Scale are used to collect data.

Findings: It was observed that nurses who have a higher education level, who are educated about patient privacy and who read patient rights regulation, are more concerned about patient privacy. In addition nurses working in intensive care and outpatient treatment units are more observed about sexuality privacy than nurses working in other child clinics. Negative correlations were found between the gossip attitudes of the nurses and the point average scores of the patient confidentiality scale. Nurses who negatively define gossip are more concerned about patient confidentiality.

Conclusion & Significance: The nurse's knowledge about the provision of patient confidentiality affects their privacy practices. For this reason, regular trainings are recommended in hospitals.

Biography

Sibel Serap Ceylan has completed her PhD from Ege University Institute for Health Sciences, Department of Pediatric Nursing. She is a Lecturer at Pamukkale University, Faculty of Health Sciences, Department of Pediatric Nursing since 2002. Her research interests include Pediatric Nursing Care, Newborn Care and Nursing Education.

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CHILDBIRTH COUNSELLING FOR PREGNANT WOMEN REQUESTED FOR CAESAREAN DELIVERY

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Aim: The study was carried out to assess the effect of childbirth counselling on pregnant women requested for caesarean delivery.

Methods: One arm intervention study was carried out at two private clinics at Mansoura, Egypt, Using the clinics database. A purposive sample of 40 women was identified based on who had planned for on demand primary Caesarean section between October 2016 and Jan 2017.

Results: A total of 40 eligible women were identified from the clinics database. Most of women in the study were requested caesarean delivery because it less painful, easier, for the safety of the baby and for their sexual health. After counselling, 75% of women switched to normal vaginal delivery and actually 80% of women who were planned for caesarean delivery experienced vaginal delivery, in addition they were more satisfied with their birth experiences than other women who experienced caesarean delivery.

Conclusion: Counselling of pregnant women who were planned for on demand caesarean delivery with adequate information and knowledge helped them moving to normal vaginal delivery and saved them from avoidable harm.

Biography

Amina Mohamed Rashad Mahmoud El-Nemer is the Dean of Faculty of Nursing, Mansoura University, Egypt from 2016 till date. She was earlier the Vice Dean of Faculty of Nursing, student affairs from 2015 to 2016. She has many International Projects and Coordination's like "Development and implementation of a labour companionship model for integration in public hospitals in three Arab middle-income countries (Beirute, Syria, Egypt) American University of Beirut) which was funded by World Health Organization, Switzerland in 2013-2015". "Research Ethics Training program at the University of Maryland, School of Medicine, Baltimore, Maryland, during the time of June to July 2005". "Human Participants Protection Education for Research Teams online course sponsored by the National Institutes of Health (NIH), on 07/09/2005, USA". She also published various research papers like "Utilization of a Self-Care Educational Program for Alleviating Chemotherapy Induced Physical Side Effects. Journal of Cancer Treatment and Research, 2015". "Maternal Near -Misses in a University Hospital. IOSR Journal of Nursing and Health Science (IOSR-JNHS), 2015". "Effect of Childbirth Counselling on Pregnant Women Requested for Caesarean Delivery. IOSR Journal of Nursing and Health Science (IOSR-JNHS) 2015". She also has experience on "Quality assurance and Accreditation in Higher Education, Health Research Ethics, Qualitative Research, women Health".

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YOU ARE A LEADER!

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Registered Nurses are responsible and accountable for meeting their professional standards and competencies. It is mandatory in Saskatchewan, Canada each year for RNs to review the standards and competencies and reflect on how they meet the competencies. RNs must demonstrate professional leadership by: building relationships and trust; creating an empowering environment, supporting knowledge development and integration within the health care team, leading and sustaining change; and balancing competing values and priorities. The Registered Nurses Association of Ontario (RNAO), Canada has developed many clinical best practices guidelines and Health Work Environment (HWE) Best Practice Guidelines (BPG). One of the RNAO HWE BPGs is called Developing and Sustaining Nursing Leadership (2013). This BPG addresses each of the leadership competencies and gives individual examples of how nurses can meet these competencies. The BPGs are based on evidence and give recommendations for individuals, educational programs, organizations and governments, but this presentation will focus on the individual and team strategies that are recommended based on the evidence. This presentation will give an overview of the guideline and the recommendations for implementation. Participants will leave with some concrete examples of how they can demonstrate professional leadership and enhance their own practice.

Biography

Karen Eisler has been a RN for over 40 years. She has worked as a clinical RN for 20 years in ICU and Emergency in an acute care hospital in Regina and for 20 years primarily in Administrative positions. The most recent was as the Executive Director of the Saskatchewan Registered Nurses' Association. Her Master's thesis and Doctoral research was in Nursing Leadership. The results indicated that managers' use of transformational leadership practices can affect the staff nurses' perception of the quality of patient care on a unit. Her research interest is in Nursing Leadership related to patient and staff outcomes, quality workplaces and provincial and national nursing regulation.

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NEONATAL ABSTINENCE SYNDROME: HISTORY, DIAGNOSIS AND MANAGEMENT

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Neonatal Abstinence Syndrome (NAS) refers to a constellation of signs that are present in some newborn infants resulting from the abrupt cessation of passive transfer of maternal opioids used during pregnancy. The classic NAS refers to infants born to mothers who used opioids during pregnancy, but the term has broadened to include infants whose mothers have used or abused other psychoactive substances during pregnancy that contribute to the expression of the syndrome. Pregnant women who use opioids do so illicitly, and/or as medically prescribed for pain relief, and/or as medication assisted treatment for opioid dependence. The first case of NAS in infants and the subsequent treatment (or lack thereof) was reported in 1875 and was called Congenital Morphinism. By 2012, the incidence of NAS increased to more than 30 per 1000 hospital live births, along with an increase in the number of infants being treated pharmacologically for NAS, resulting in an increase in the length of stay and healthcare expenses. We present historical references on NAS, the various factors and events that led to its increasing prevalence and today's current epidemic. We also review the current tools to assess infants with NAS and treatment options in its management.

Biography

Enrique Gomez completed his Medical School in Peru, Pediatric Residency in St Joseph's Regional Medical Center in Paterson, NJ and Neonatology fellowship at the University of Kentucky in Lexington; he has completed Masters' in Sciences at the University of Kentucky. He is currently working as a Neonatologist in Mississippi. He has published in several peer review journals and it's currently interested in Neonatal Abstinence Syndrome and in improving breastfeeding rates and success.

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