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*Nursing Research Society of India (NRSI) south region workshop on untangle the threads of clinical nursing research for better health care*

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# NURSING RESEARCH SOCIETY OF INDIA (NRSI)

## South Region Workshop 2023

Innovative  
Designs



Writing a  
Grant  
Proposal



Relevant  
Literature  
Review



Collaborative &  
Interdisciplinary



Quality  
Patient  
Care



Problems &  
Obstacles



Untangle the Threads of  
**CLINICAL  
NURSING  
RESEARCH**  
*for Better Health Care*

14<sup>th</sup> & 15<sup>th</sup>  
SEPTEMBER  
2023

VENUE :  
A. J. Institute of Medical Sciences  
Auditorium II, 3<sup>rd</sup> Floor  
Kuntikana, Mangaluru

DR. LARISSA MARTHA SAMS

Organized By

LAXMI MEMORIAL COLLEGE OF NURSING  
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## **NURSING RESEARCH SOCIETY OF INDIA**

**South Region Workshop- 2023**

*On*

**Untangle the Threads of Clinical Nursing**

**Research for Better Health Care**

**Date: 14<sup>th</sup> & 15<sup>th</sup> September 2023**

*Organized by:*

**LAXMI MEMORIAL COLLEGE OF NURSING**

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workshop on untangle the threads of clinical nursing  
research for better health care**

-- DR LARISSA MARTHA SAMS

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*Individually, We are One Drop. Together, We are an Ocean*

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**WORKSHOP AT A GLANCE****NURSING RESEARCH SOCIETY OF INDIA**

The Nursing Research Society of India (NRSI) was established in 1986. This was a significant land mark for the nurses and the nursing profession on the whole. The main aim of this organization is to promote research among its professionals and to improve nursing education and practice in India. It organizes workshops, seminars and provides a platform for nurses for utilization and dissemination of research findings.

**LAXMI MEMEORIAL COLLGE OF**

Laxmi Memorial College of Nursing, one of the pioneer nursing institutions in Mangalore under the Laxmi Memorial Education Trust, provides nursing education for the last 26 years. The last 25 glorious years have been dedicated to the all – round development of the nursing students and to prepare the students to be successful both as a professional and as a trustee of the health care and the community at large. The aim of the institution is to impart quality of nursing education that affectively combines high academic exposure, professional outlook and commitment to humanitarian values. It is a matter of great pride to have all nursing programs under under one roof viz. Ph.D in Nursing in all five specialties, Nurse Practitioner in critical care (NPCC), M.Sc Nursing in all specialties, Post Basic B.Sc Nursing, Basic B.Sc Nursing, and General Nursing and Midwifery Programs that have been approved by Indian Nursing Council, New Delhi, Rajiv Gandhi University of Health Sciences, Bengaluru and Karnataka State Nursing Council, Bengaluru.

**Aim**

The workshop aims to motivate the nurses to conduct clinical nursing research to improve the quality of patient care through collaborative and interdisciplinary research advanced scientific knowledge.

**Objectives**

1. Provide overview of clinical nursing research and health care
2. Understand basics of conducting quality research work and research methodology
3. Incorporate collaborative and interdisciplinary approach in clinical nursing research
4. Discuss obstacles and challenges faced by clinical nursing researchers.



## Programme Highlights

<b>Day 1: 14.09.2023</b>		
Time	Events	Invited Speakers
<i>8.00am – 8.30am</i>	Registration	
<i>8.30am – 8.45am</i>	Breakfast	
<i>8.45am – 9.00am</i>	Pre-Test	
<i>9.00am -9.30am</i>	Overview of Clinical Nursing Research and Health Care	Dr. Assuma Beevi T.M Principal MIMS College of Nursing Malappuram, Kerala
<i>9.30am- 10.30am</i>	Modern Innovative Designs in Clinical Research	Dr. Animesh Jain Professor Department of Community Medicine Kasturba Medical College Mangalore
<i>10.30am- 11.30am</i>	Inauguration	
<i>11.30am -11.45am</i>	Photo Session	
<i>12pm – 1.00pm</i>	Paper Presentation	
<i>1.00pm- 2.00pm</i>	LUNCH	
<b>SKILL STATION</b>		
<i>2.00pm -4.00pm</i>	Writing a Proposal for Research Grant	Dr. S.Kanchana Principal Omayal Achi College of Nursing Chennai
	OR Sampling error and sample size calculation	Dr. Mariamma Philip Additional Professor Department of Biostatistics NIMHANS, Bangalore
<i>4.00pm – 5.00pm</i>	Paper Presentation	
<i>5.00- 5.15pm</i>	Tea	
<i>5.15 -7.00pm</i>	Sight Seeing	

<b>Day 2: 15.09.2023</b>		
<b>Time</b>	<b>Events</b>	<b>Invited Speakers</b>
8.30am – 9.00am	Breakfast	
9.00am -10.00am	Critical Appraisal and Retrieval of Literature Search	Dr. Chandrashekar R Assistant Professor Department of Pharmacology A.J Institute of Medical Sciences Research, Mangalore
<b>SKILL STATION</b>		
10.00am- 12.00pm	Systemic Review	Dr. Vinitha Ravindran Professor and Head Continuing Nursing Education & Research, College of Nursing CMC Vellore, Tamil Nadu
	OR Application of Mixed Method Research Design	Mrs. Devakirubai Professor Sacred Heart Nursing College Madurai, Tamil Nadu
12.00pm – 1.00pm	Poster Presentation	
1.00pm- 2.00pm	LUNCH	
2.00pm- 3.00pm	Skill Mix and Staff Mix within Multi-Disciplinary Teams: A Collaborative and Interdisciplinary Approach	Dr Shashidhara YN Professor & Head Department of Community Health Nursing Manipal College of Nursing Manipal Academy of Higher Education
3.00pm-4.00pm	Turn Obstacles into Opportunities Problems into Possibilities: A Dynamic Change in Clinical Research	Dr. S.J.Nalini Professor & Principal Head Unit of Nursing Research Faculty of Nursing Sri Ramachandra Institute of Higher Education & Research (DU)
4.00pm – 4.15pm	Post –Test	
4.15pm- 5.00pm	Valedictory Session	
5.00pm	Tea	



*Dr. A.J. Shetty,  
President,  
Laxmi Memorial Education Trust,  
Mangaluru.*

***MESSAGE***

I am happy to know that Laxmi Memorial College of Nursing in association with Nursing Research Society of India (NRSI), South Zone is organizing a South Zonal Workshop on 14<sup>th</sup> & 15<sup>th</sup> September, 2023.

The nursing profession is an indispensable and balancing link between the helpless patient and the specialized doctor. Nursing care is a thing of solace for the patient and doctor and accounts for the greater part of the healing process. A sea change has been taking place in the last few decades in the health care industry, where the changing profile of population, emerging diseases and rapid growth in health care technology are placing health care challenges to meet the demand. In this regard it's commendable to know that LMCN and NRSI have opted for the theme of **“untangle the Threads of clinical Nursing Research for Better Health care”** which is the need of the hour.

I hope that the deliberations during the workshop will indeed benefit every section of society requiring health care benefits.

I wish the workshop a grand success

*Dr. A.J. Shetty,  
President,  
Laxmi Memorial Education Trust,  
Mangaluru*





**Shri Prashanth Shetty,**  
*Vice-President,*  
*Laxmi Memorial Education Trust,*  
*Mangaluru.*

***MESSAGE***

I am delighted to know that Laxmi Memorial College of Nursing in association with Nursing Research Society of India (NRSI), South Zone is organizing a South Zonal Workshop on 14<sup>th</sup> & 15<sup>th</sup> September, 2023.

Nursing is a dynamic field that evolves over time. Research has legitimised nursing as a profession, education has been profoundly reformed to reflect a research base, and academic nurses have built their careers around it. Despite the length of time that research has been on the agenda and the influential bodies involved, only a moderate fraction of nurses use research as a base for practice. Therefore, Evidence-Based Nursing will be exceptionally useful, and its target audience of practitioners is a vitalizing move in the right direction. This is a nationwide gathering that will give a platform for prominent experts to gather and share their innovative ideas in the field of Nursing Research. It will be an incredible gathering of nursing care researchers, professionals, and specialists. It will create a learning space for conversations and presentations which will help in the modernization of nursing practice.

I extend my best wishes to the Organizers invited delegates, speakers and hope that the national conference would be a grand success.

**Shri Prashanth Shetty,**  
*Vice-President,*  
*Laxmi Memorial Education Trust,*  
*Mangaluru*



**Smt. Ashritha P. Shetty,**  
*Director,*  
*Laxmi Memorial Education Trust,*  
*Mangaluru.*

## ***MESSAGE***

It gives me great pleasure to know that Laxmi Memorial College of Nursing in association with Nursing Research Society of India (NRSI), South Zone is organizing a South Zonal Workshop on untangle the threads of “Clinical Nursing Research” for better health care on 14<sup>th</sup> & 15<sup>th</sup> September, 2023.

Clinical nursing research is a systematic inquiry into the problems encountered in nursing practice and into the modalities of patient care. Clinical nursing practice without clinical nursing research is clinical nursing practice built on instincts without validation. Clinical nurse researchers should strive to develop partnerships with clinical nurses. As a result, clinical nurses will recognize the significance of their role in nursing research and researchers will realize the benefits of their research to patient care. . I am sure, this workshop deliberation will help the participants in updating their knowledge and proceeding will be more interesting and informative one.

I take this opportunity to congratulate the organizing team and wish the workshop a grand success

**Smt. Ashritha P. Shetty,**  
*Director,*  
*Laxmi Memorial Education Trust,*  
*Mangaluru.*



**Dr.Larissa Martha Sams.**  
*Principal,*  
*Laxmi Memorial College of Nursing*  
*Organizing Chairperson*

## ***MESSAGE***

It is our pleasure to host the Nursing Research Society of India South Zone workshops on 14th & 15th Sept 2023 at Laxmi Memorial College of Nursing, Mangalore, both virtually as well as in physical mode. To participate in this upcoming nursing research conference, to witness precious scholarly conversations, and to contribute to the future breakthroughs in the field of nursing and its related areas, we gladly invite all distinguished researchers, faculty, students, and delegates. In the opinion of the organizers, research-oriented nursing education is crucial for the preparation of academics and clinicians. This NRSI workshop offers special chances for our research community to get together, network, and talk about the most recent R&D developments in health aspects in a friendly and charming environment. Distinguished researchers/research scholars will present papers on cutting-edge developments in both basic and applied research, advancements, and innovations in nursing. NRSI workshops boasts a fantastic lineup of plenary speeches, thematic sessions with research papers, and a poster session that provides an extra arena for presenting varied research findings.

Nursing encompasses a wide range of disciplines, techniques, procedures, and capabilities that are based on those of other specializations but adjusted and adapted to meet the special needs of infants, children, adolescents, and people with special healthcare needs. Researchers from all nursing areas are invited to participate in this conference because nursing is a large field with many specialties and subspecialties.

NRSI South Region workshop-2023 will be remembered as a great opportunity to improve health care through best practices in nursing, in a way that will benefit patients and society at large. Thanks to a winning combination of scientific expertise, a fun program and setting, and the hard effort of the organizing committee. Keep Going 2 All the best and May God bless you in all your endeavours.





**Dr Theresa Leonilda Mendonca.**  
*Vice Principal,*  
*Laxmi Memorial College of Nursing,*  
*Co- Organizing Secretary*

***MESSAGE***

It is indeed with great pleasure that I pen down few lines! I am thrilled to see the culmination of hard work, dedication and insightful contributions. The diversity of topics covered within the booklet is a testament to the depth and breadth of knowledge that the participants bring to the table. I extend my heartfelt gratitude to the committee for their meticulous efforts in putting together this remarkable event. The diversity of topics and expertise represented here is a testament to the vibrant intellectual community. The broad scope of south zone NRSI conference, which includes both theoretical, hands on skill and practical aspects, provides a unique meeting ground for the students, faculty and scholars.

I sincerely hope that all the participants will benefit from the technical contents of this conference. May this conference be a platform for the cultivation of new insights, connections, and inspirations.

I wish all the delegates a rewarding and enlightening experience.

Regards



**Dr. Assuma Beevi.T.M. M.Sc(N), Ph.D., CHPE.,**  
**DHM(NIHFW, Delhi) Cert.HRM.( NIHFW)**  
*Dean,*  
*Aster MIMS Academy & President, NRSI*

### ***MESSAGE***

Dear Participants & NRSI members, Greetings!!

It is my great pleasure to welcome you to the South Regional Conference of the Nursing Research Society (India). Nursing Research Society of India hold its regional conference in each zone before the premier national conference in November every year. This year our National conference is in PGI Chandigarh.

The South Regional conference is at Laxmi Memorial College of Nursing, Mangalore. Under the able leadership of Dr. Larissa and team had formulated an exciting educational feast for the participants. The programme schedule is well prepared and I am sure that the participants will have ample opportunity to learn and network with experts in various field of nursing research. A new theme is introduced with this conference in contrary to the conventional academic research through conference in **clinical research**. This area is really unexplored by our nursing fraternity.

The organizers have also successfully identified an all-star roster of expert speakers, with outstanding service and contributions towards nursing research and to the profession. The continued growth of our society and meeting is an indication of its high quality and impact. If you are not a member of the society, please consider to join this dynamic organization and contribute your professional skills for its growth.

Once again, I put on record my appreciation towards Dr.Lrissa Martha and her vibrant team for hosting the regional conference. I welcome all the expert speakers, participants to NRSI South regional conference and expecting to see you at Mangalore on 14<sup>th</sup> and 15<sup>th</sup> of September, 2023. I appreciate your participation and hope you will find this meeting stimulating and rewarding.



**Mr Shashikumar Jawadagi**

*President,*

*NRSI, South Region*

### ***MESSAGE***

Dear Members and Distinguished Guests,

It is with great pride and enthusiasm that I address you today as the President of the Nursing Research Society in India - South Region (NRSI). Our society has embarked on a remarkable journey, committed to the advancement of nursing research and the betterment of healthcare in our nation. Over the years, NRSI has achieved significant milestones that have reshaped the landscape of nursing research in India. NRSI has been unwavering in its dedication to promoting excellence in nursing research. Our members have consistently demonstrated their commitment to producing high-quality, evidence-based research that has had a tangible impact on patient care. Through conferences, publications, and collaborations, NRSI has facilitated the spread of knowledge within the nursing community.

As we celebrate our achievements, we also look ahead to the future with great anticipation. Workshops are the crucible of innovation and collaboration, where ideas are born, and bonds are forged. I am confident that this workshop will be a catalyst for groundbreaking research, fostering a spirit of inquiry and discovery among our members. It will provide a platform for the exchange of ideas and the incubation of projects that will further elevate the stature of nursing research in India.

In conclusion, let us celebrate the journey of NRSI, the dedication of its members, and the transformative power of nursing research. As We members of NRSI congratulate Management, Principal and all the organizing members of Laxmi college of nursing, Mangalore for hosting such an innovative workshop and wish success to the workshop, let us also renew our commitment to the noble cause of advancing healthcare through research.

Thank you for being a part of this remarkable journey. Together, we will continue to make a difference in the lives of countless patients and contribute to the progress of nursing research in India.



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**SCIENTIFIC SESSION****OVERVIEW OF CLINICAL NURSING RESEARCH AND HEALTH CARE**

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*President, NRSI*

**Abstract:**

Clinical research nursing focuses on the care of research participants and the protocols of clinical research and trials. The clinical researcher nurse (CRN) balances the needs of the participant and the requirements of research across settings. It is contrary to the role of staff nurses or clinical nurses who are appointed for dedicated patient care. CRN helps in exceptional, ethical, and safe care that yields reliable, valid data and findings, high quality research outcomes, and, in time, better quality health care through research as either a principal investigator or a research associate. They address the CRN practice essentials, from education and certification and professional development to ethics and tenets to practice settings and roles. The continuum of focus in clinical research nursing from clinical care to study management. CRN are involved in clinical research for developing unique body of knowledge that helps in providing evidences for good clinical practice. As a clinical specialty, clinical research nursing incorporates the two main roles assumed by nurses practicing in clinical research settings:

1. Clinical research nurses and
2. Research nurse coordinators.

## MODERN INNOVATIVE DESIGNS IN CLINICAL RESEARCH

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Modern clinical research has seen several innovative designs and approaches emerge in recent years. These innovations aim to enhance the efficiency, accuracy, and ethical considerations of clinical trials. Here are a few examples:

1. **Adaptive Clinical Trials:** Adaptive trials allow for real-time adjustments to study design based on accumulating data. Researchers can modify elements like the sample size, treatment arms, or endpoints during the trial to optimize the chances of success and reduce resource wastage.
2. **Master Protocols:** These are umbrella or platform trials that evaluate multiple treatments for a single disease or multiple diseases using a single infrastructure. Master protocols enable the simultaneous testing of multiple therapies, streamlining the drug development process.
3. **Decentralized and Remote Trials:** The use of digital technologies, telemedicine, and wearable devices allows patients to participate in clinical trials from the comfort of their homes. This approach increases patient recruitment, reduces dropout rates, and improves data collection.
4. **Real-world Evidence (RWE) Studies:** RWE studies leverage data from electronic health records, health insurance claims, and other sources to assess treatment effectiveness and safety in real-world settings. These studies complement traditional clinical trials and provide valuable insights.
5. **Patient-Centered Research:** Involving patients in study design and decision-making is becoming increasingly important. Patient advisory boards and engagement strategies ensure that clinical trials are aligned with patients' needs and preferences.
6. **Machine Learning and AI:** Artificial intelligence is being used to analyze massive datasets, identify potential participants, predict disease outcomes, and optimize trial protocols. AI can also assist in drug discovery and repurposing.
7. **Umbrella trials:** These trials evaluate multiple targeted therapies for a single disease in patients who have the same type of cancer but different gene mutations (changes) or biomarkers. The umbrella trial approach is particularly relevant in the era of precision medicine, where treatments are increasingly tailored to individual patients or specific genetic markers.

8. **Action Research:** Action research is a research methodology and approach that emphasizes collaboration between researchers and practitioners, typically within a specific organization or community, to identify and address practical problems or challenges. It is a cyclic process that involves systematic inquiry, intervention, and reflection with the aim of improving practices, processes, or outcomes. Action research is often used in fields such as education, healthcare, social work, and organizational development, where practical solutions and improvements are sought in complex, real-world settings. It promotes a collaborative and adaptive approach to problem-solving.

These innovative designs and approaches in clinical research are advancing the field and have the potential to accelerate the development of new treatments while ensuring the safety and well-being of study participants.

## WRITING A PROPOSAL FOR RESEARCH GRANT

*Dr.S.Kanchana, RN RM, PhD (N), PDF(R), Principal & Research director, ICCR*

*Omayal Achi College of Nursing, Chennai.*

**1.Introduction:** Nursing research worldwide is devoted to rigorous scientific inquiry and the current trends anticipated in nursing research for the 21<sup>st</sup> century include: continued focus on evidence-based practice, emerging interest in translational research, greater emphasis on systematic reviews, expanded local research in healthcare setting, strengthened interdisciplinary collaboration, expanded dissemination of research findings and increased visibility of nursing research. Nurses need to build their research capacity that empowers to perform or strengthen the ability to undertake research projects for which research grants are essential and crucial:

### 2. Grant writing Process

- a. **Selecting a grant:** While selecting a grant it is important to note that will obtaining the grant aid your studies/career, do you have time to allot to requirements, do you meet the criteria, is it feasible to finish the application prior to the deadline and is there a necessary output that is achievable?
- b. **Writing a research proposal:** While beginning to write for a research proposal the nurse researcher should know the purpose of the proposal so that the writing demonstrates the worthiness, competence and relevance of the research you are planning to undertake.

### 3. Format of research plan

- a. **Title:** Should be **concise** and yet sufficiently descriptive and informative.
- b. **Summary (up to 250 words):** A structured summary should contain the following subheadings: *Background, Novelty, Objectives, Methods, and Expected Outcomes.*
- c. **Keywords:** Six keywords separated by comma which best describe your project may be provided
- d. **Abbreviations:** Only standard abbreviations should be used in the text. List of abbreviations maximum of ten may be given as a list.
- e. **Background (up to 500 words):** State the background information to adequately present the problem.
- f. **Literature review (up to 1000 words)**
- g. **Novelty/Innovation (up to 250 words):** Describe how the proposal challenges and seeks to shift current research/knowledge/clinical practice paradigms by utilizing novel theoretical concepts, approaches or methodologies, instrumentation, or interventions.



- h. **Study objectives:** Define the objectives clearly and in measurable terms; mention as primary and secondary objectives if necessary. Do not write too many objectives.
- i. **Methodology (up to 2000 words): Include the following subheads**
- i. **Study design:** Proposed study design should be appropriate to fulfil all the objectives
  - ii. **Sample size:** Details of sample size and/or power calculation should be described with references where needed.
  - iii. **Project implementation plan:** Describe the overall strategy for enrolment of participants including collaboration with other departments where applicable.
  - iv. **Ethics review:** Ethical Committee certification is a mandate.
  - v. **Data collection & statistical analysis plan:** Describe the key variables of the study, how will they be measured and unit of measurement. Present data analysis plan comprehensively mentioning appropriate statistical methods to be used in order to answer/ achieve the study objectives.
- j. **Expected outcomes (up to 100 words)**
- k. **Limitations of this study (up to 100 words)**
- l. **Future plans based on expected outcomes if any (up to 100 words)**
- m. **Timelines:** Details of activities to be carried out along with timelines during Preparatory phase, data collection, analysis & report writing to be provided.
- n. **Institutional support:** Mention the efforts made to achieve inter-departmental or inter-institutional collaboration needed for study implementation, details of coordination between clinical, laboratory and data management procedures, mention the institutional resources such as equipment and other physical resources available for use in the project proposed.
- o. **Budget:** Should be appropriate and as per guidelines available on the funding agencies grant call. Justification for staff along with their roles and responsibilities in the project to be provided.

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- [www.iccrjnr.com](http://www.iccrjnr.com)
- [www.tamilnadunursingcouncil.com](http://www.tamilnadunursingcouncil.com)

## INTRODUCTION TO SAMPLE SIZE ESTIMATION

*Dr. Mariyamma Philip Additional Professor, Dept. of Biostatistics,*

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Collecting data from every member of the population of interest is not possible in many research settings. So, researchers choose a subset of the population, called as sample that is representative of the whole population to study. Generalisation of the study findings depend a lot on the size of the sample as well as representativeness of the sample.

An important aspect of any research is to determine the appropriate sample size to answer the research question. So, sample size estimation is the process of choosing the right number of observations from a larger group. The goal of sample size estimation is to ensure that the sample is big enough to give statistically valid results and accurate estimates of population parameters but small enough to be manageable and cost-effective. Studies with smaller number subjects than required might not facilitate in making good decisions or may lead to inaccurate results. Studies with larger number of participants than required is both wasteful in terms of participant and investigator time, resources, analytic efforts and so on.

Sample size estimation (SSE) is done in two major situations. When data is not readily available, SSE can help to decide how many members of the population should be selected to ensure that the population is properly represented. When data is available (already been collected), SSE can help to determine if the data you have is sufficient to make valid conclusions. Sample size estimation is done based on the primary objective of the study, and primary variable of interest. SSE can be done to estimate the mean, proportion as well as to estimate the number required in each group in comparative studies which compare mean or proportions or studies that assesses association or relationship.

Generally, whenever sample size has to be estimated, the researcher should be clear about these, as these factors affect the sample size.

- What is the main objective of the study? - Is it a one-tailed or two-tailed test?
- What is the primary outcome measure - Is it a numerical or categorical?
- How small a difference is clinically important to detect?
- How much is the variability of the parameter in the population? Levels?  $\beta$  and  $\alpha$
- What are the desired
- What is the sample size allocation ratio?

Answers of some of these questions can be obtained from similar previous studies or from pilot studies conducted by the researcher. There are many softwares that aid in Sample size estimation. G\*Power is a commonly used software. But it should be used by persons with training or exposure.

## SYSTEMATIC REVIEWS

*Dr. Vinitha Ravindran, M.Sc.N., Ph.D., Dean, College of Nursing,  
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Systematic Literature review is a scientific study designed to address a specific research question by comprehensively collecting all the information available on a topic that is defined at the outset by absolute inclusion and exclusion criteria. It typically involves searching multiple, predefined electronic databases as well as the grey literature sources. Most systematic reviews are used to determine the strength of the evidence that supports a relationship between two concepts, or the efficacy of an intervention. It is considered as the best method of literature review that can be published or presented. Systematic reviews follow rigorous, predefined steps to extract and analyze data from literature to ensure meaningful and reliable evidence is synthesized. The aim of systematic review is to synthesize evidence and evaluate the strength of the evidence that is available in the literature on a specified topic or question. Evidence based clinical guidelines and protocols are the ultimate expected outcomes from systematic reviews. Systematic reviews also reveal gaps in evidence and inform the direction for future research.

The steps of systematic review include 1. Developing a preliminary research question 2. Scoping out the research literature 3. Refining your research question (PICO) 4. Defining the terms used in the research question, 5. Identifying the data sources 6. Determining the time span to be included 7. Selecting and defining the search terms 8. Defining the inclusion criteria 9. Searching the data base for the literature using search terms 10. Reviewing all titles and abstracts retrieved from the searches using the inclusion criteria 11. Retrieve and screen full studies of all retained abstracts using your inclusion criteria 12. Completing quality assessments (QA) of all retained studies 13. Consolidating all Data extraction from all studies into a large table 15. Synthesizing and writing the evidence from the consolidated table and 16. Publishing the review.

Systematic reviews often include a meta-analysis component which involves using statistical techniques to synthesize the data from several studies into a single quantitative estimate or summary effect size.

Preferred Reporting Items for Systematic Reviews and Meta-analyses (PRISMA) guideline is used for reporting the systematic review results as clear reporting is essential. PRISMA format gives the readers information on how the search was carried out and the data was extracted. It further makes the research replicable.

A systematic review in itself is a research process and is not easy. It needs an expert team to be involved as second reviews and checks are needed at different levels of the process. It is also time consuming. However the rigour that is innate in systematic review makes the process worthwhile as evidence is created for practice. A completed systematic review is a great achievement.



## **APPLICATION OF MIXED METHOD RESEARCH DESIGN**

**DR. E. DEVAKIRUBAI**

**Professor, Sacred Heart Nursing College, Madurai**

### **INTRODUCTION**

Mixed methods research (MMR) is indeed a valuable approach in addressing complex healthcare issues, especially in the context of evolving healthcare systems facing challenges like population aging, the increase in chronic and complex diseases, and finite budgets. This complexity poses significant challenges for health researchers, and mixed methods research (MMR) indeed provides a valuable alternative methodology for nursing researchers to tackle these issues effectively.

### **DEFINITION OF MIXED METHOD RESEARCH**

An approach to research in the social, behavioral, and health sciences in which the investigator gathers both quantitative (closed-ended) and qualitative (open-ended) data, integrates the two, and then draws interpretations based on the combined strengths of both sets of data to understand research problems.

### **PARADIGM SHIFT IN MMR**

Positivism --> Constructivism --> Pragmatism

### **WHY MIXED METHOD RESEARCH?**

- ❖ The insufficient argument – either quantitative or qualitative may be insufficient by itself
- ❖ Multiple angles argument – quantitative and qualitative approaches provide different “pictures”
- ❖ The more-evidence-the-better argument – combined quantitative and qualitative provides more evidence
- ❖ Community of practice argument – mixed methods may be the preferred approach within a scholarly community
- ❖ Eager-to-learn argument – it is the latest methodology
- ❖ “Its intuitive” argument – it mirrors “real life”

### **RATIONALE FOR ADOPTING MMR**

Triangulation, Complementarily, Development, Initiation, Expansion

### **CORE CHARACTERISTICS OF MIXED METHODS**

- Collection and analysis of quantitative and qualitative data in response to research questions

- Use of rigorous qualitative and quantitative methods• Combination or integration of quantitative and qualitative data using a specific type of mixed methods design, and interpretation of this integration
- Sometimes, framing of the design within a philosophy or theory

**CLASSIFICATIONS OF MMR DESIGNS**

BASIC	ADVANCED
<ul style="list-style-type: none"> <li>✓ Convergent</li> <li>✓ Sequential Exploratory</li> <li>✓ Sequential Explanatory</li> </ul>	<ul style="list-style-type: none"> <li>✓ Intervention design</li> <li>✓ Social justice design</li> <li>✓ Multi evaluation design</li> </ul>

**MMR SAMPLING STRATEGIES**

- ❖ Nested sampling
- ❖ Multilevel sampling
- ❖ Identical sampling
- ❖ Parallel sampling

**NOTATIONS FOR MIXED METHOD DIAGRAM**

Notation	What it indicates	Example	Key citations
Uppercase letters	Prioritized methods	QUAN, QUAL	Morse (1991, 2003)
Lowercase letters	Lesser priority	quan, qual	Morse (1991, 2003)
+	Convergent methods	QUAN + QUAL	Morse (1991, 2003)
→	Sequential methods	QUAN → QUAL	Morse (1991, 2003)

**INTEGRATION IN MIXED METHODS RESEARCH**

- ❖ Merging of the data
- ❖ Building of the data
- ❖ Explanation of the data
- ❖ Embedding of the data.

**REPRESENTATION OF INTEGRATION IN MMR**

1. Through discussion
2. Joint display

- A side-by-side joint display
- A theme-by-statistics joint display
- A follow-up results joint display
- A building into a quantitative instrument or measure display

### **ADVANTAGES OF USING MMR**

1. MMR helps answer questions that cannot be answered by quantitative or qualitative approaches alone.
2. MMR offers new insights that go beyond separate quantitative and qualitative results.
3. MMR encourages the use of multiple worldviews, or paradigms rather than the typical association of certain paradigms with quantitative research and others with qualitative research.

### **CHALLENGES IN USING MMR**

1. Data collection and analysis might be a very lengthy process.
2. Integrating qualitative and quantitative data is often difficult for many researchers.
3. Quantitative and qualitative methods are guided by different epistemological and philosophical frameworks.

### **CONCLUSION**

In summary, MMR is a valuable approach for gaining deeper insights into complex health issues. However, success in MMR hinges on thorough planning, clear integration of qualitative and quantitative components, and adherence to ethical standards. When executed with care and attention to detail, MMR can provide a comprehensive and well-rounded understanding of complex health phenomena, benefiting both researchers and the broader healthcare community.

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## CRITICAL APPRAISAL AND RETRIEVAL OF RELEVANT LITERATURE SEARCH

*Dr. Chandrashekar R.*

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It is acknowledged that conducting a thorough assessment of the literature is a necessary first step. It comprises a rigorous search for studies and seeks to identify research transparently, informing review stakeholders of how studies were discovered and how the review's findings fit into the relevant body of evidence.

Information specialists and review teams seem to share and implicitly replicate the literature search process. This tacit model has not before been specifically examined, therefore it is unclear how it has developed and altered. In contrast, information processing models have been developed in the literature on information science as a clear framework for discussion and empirical testing. Systematic research would not be possible without a distinct model. Searching the literature is an essential component of carrying out high-quality, authentic research. It assists in formulating a study plan and research question. Selecting the appropriate articles that are relevant to your issue in question from the large volume of written material available demands competence.

In order to obtain a wide range of trustworthy references on a particular topic, literature searches are methodical, well-organized searches of previously published information. There are several reasons to conduct a literature search, including obtaining information for making recommendations that are supported by evidence, as part of the research process, and for academic assessment. But the main objective of a good literature review is to formulate a research topic by evaluating the body of prior research and searching for any gaps that might potentially benefit from further investigation.

The systematic method of critical appraisal is used to assess the relevance and validity of study findings and to determine the strengths and weaknesses of a research publication. The two most important components of a critical appraisal are an assessment of the study design's applicability to the research question and a thorough investigation of its key methodological components. Any conflicts of interest, the appropriateness of the statistical methods used and their interpretation, and the relevance of the research to the individual's own practices are further considerations.

It is challenging for readers to read all of the medical literature that is released each year because of the sheer amount. Both clinical practitioners and academic medical professionals should be able to critically evaluate scientific content. Before making changes to the management of their patients, clinical practitioners must first do a thorough examination of the most recent or published research. It is vital to assess published literature for its scientific validity, generalizability to the target patient population, and relevance to the reader's professional setting. Simple guidelines have been provided by Consolidated Standard for Reporting Trial Statements, Scottish Intercollegiate Guidelines Network, and other sites that, if followed, could shield the reader from reading false trial reports.



**SKILL MIX AND STAFF MIX WITHIN MULTIDISCIPLINARY TEAMS: A  
COLLABORATIVE AND INTERDISCIPLINARY APPROACH.**

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Collaborative projects in healthcare are essential for providing high-quality, efficient, and patient-centered care. They promote the exchange of knowledge, expertise, and resources among healthcare professionals and organizations, ultimately leading to improved patient outcomes and advancements in medical research and practice.

We can have various approaches to collaborative projects, which include interdisciplinary, Multidisciplinary, and inter professional

The key distinction between interdisciplinary and multidisciplinary projects lies in the degree of integration and interaction among participants from different disciplines. Interdisciplinary projects emphasize a high degree of integration, shared goals, and active collaboration, whereas multidisciplinary projects involve collaboration among individuals from different disciplines but often with a more independent and parallel approach, maintaining distinct disciplinary identities. The choice between these approaches depends on the specific goals and nature of the project at hand.

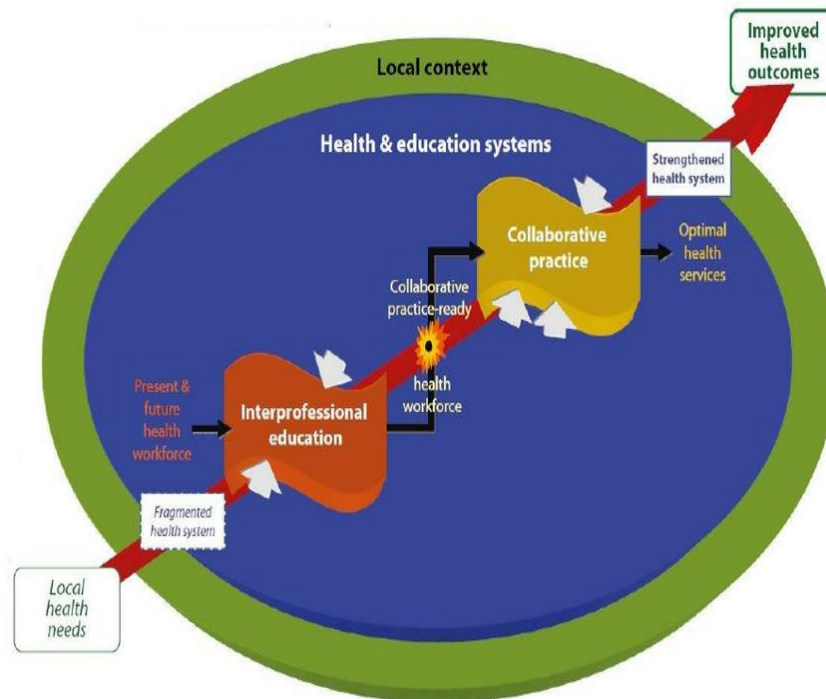
The difference between inter professional and interdisciplinary projects lies in their primary focus and the nature of their collaboration. Inter professional projects primarily involve healthcare professionals working together to provide patient-centered care, while interdisciplinary projects involve collaboration among individuals from different academic or professional disciplines to address complex, often cross-disciplinary challenges that extend beyond healthcare.

Inter professional learning (IPL) is an educational approach that brings together students from different healthcare professions to learn and collaborate as a team. The primary goal of inter professional learning is to prepare future healthcare professionals for effective teamwork, communication, and collaboration in real-world healthcare settings.

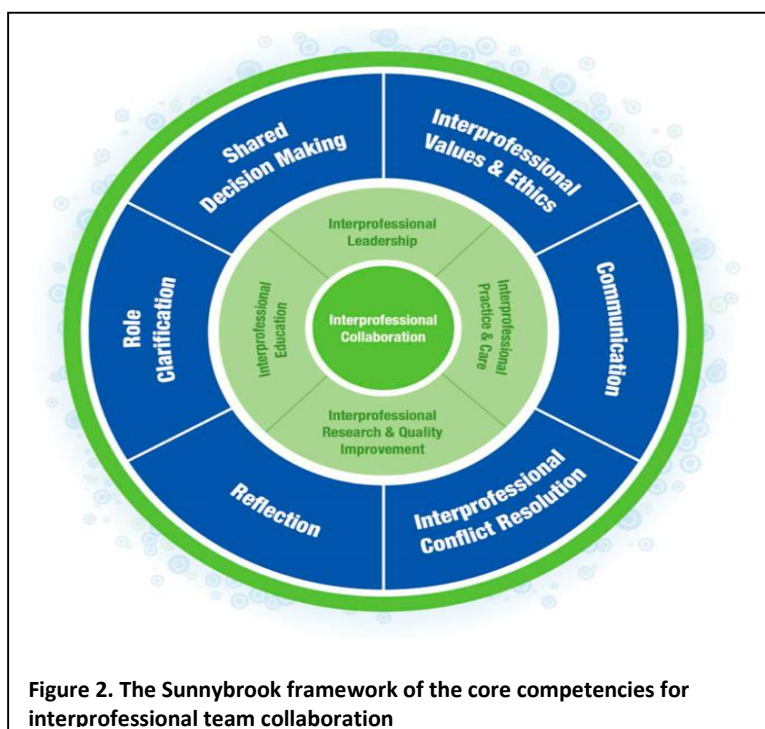
The Competencies for inter professional learning are essential skills, knowledge, attitudes, and behaviors that enable effective teamwork and communication among healthcare professionals. These competencies are crucial for providing high-quality, patient-centered care in today's healthcare systems.

Framework for Action on Inter professional Education and Collaborative Practice" was developed by WHO in the year 2010 (Figure 1). The model highlighted the current status of

inter professional collaboration around the world, identified mechanisms that shape successful collaborative teamwork, and outlined a series of action items that policy-makers can apply within their local health system.



**Figure 1-Action Framework on Inter professional Education and Collaborative Practice (WHO,2010)**



**Figure 2. The Sunnybrook framework of the core competencies for interprofessional team collaboration**

**Following Core competencies required for collaborative practice – (Figure 2)**

**Communication-** There should be a process for exchanging information in a specific and timely manner - within and across teams

**Inter professional conflict resolution-** Need to Identify and proactively and effectively address team conflicts within and across teams.

**Shared decision-making-** Create and implement inter professional care plans that reflect what is most important to patients and families/customers

**Reflection-** Dedicate time to ongoing team reflection

**Role clarification-** Members should be able to articulate their role and/or scope of practice to others on the team.

**Inter professional values and ethics-** Members should speak with positive regard when discussing other roles and professions.

In conclusion, collaborative teams require openness, readiness to learn and respect the other's role and need to focus on greater outcomes that will be beneficial for the

**TURN OBSTACLES INTO OPPORTUNITIES, PROBLEMS INTO POSSIBILITIES:  
A DYNAMIC CHANGE IN CLINICAL RESEARCH**

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*Sri Ramachandra Institute of Higher Education and Research (Deemed University),*

*Chennai*

Clinical research is systematic investigation to establish facts, designed to guide nursing practice and improve health and quality of life of patients. Today in many countries, clinical nursing practice with specialty focus on research implementation and care of subjects participating in research has begun through the Clinical research nurses in the health care delivery setting.

Constraints exist in developing countries to establish and prioritize clinical research. Clinical nurses lack knowledge and training for research, have difficulty to allocate time to interpret, conduct and use research as practice often take priority. Patient overload and nursing shortage hampers the time availability for research. Often, clinicians do not readily know how to apply research findings to clinical practice. Hospital administration with negative attitudes for nursing research may not provide support and funds. Hospitals do not have established career paths for clinical nurse researchers. A disconnect between nurse academicians and clinical nurse researchers exists with minimal or no exchange of information between the university research departments and clinicians. Clinical areas do have access to online journals to check for evidence based practices and research updates. A hierarchical power distance between doctors and nurses impedes clinical nursing research and utilization of clinical data for publication. Lack of statistical support for data analysis is another difficulty. Clinical nurses never apply for research grants, and funding agencies are yet to provide exclusive grants for them.

**Strategies for Implementing Research in Clinical Practice**

Attitudes and interest of the nursing staff are essential variables to conduct and use research in practice. Nurse administrators have to promote the use of research, increase awareness of research, implement research initiatives, offer flexibility to conduct research and provide access to resources. Nurses must be empowered to ask critical questions in the spirit of looking for opportunities to improve nursing care and patient outcomes. It is important to foster skills to interpret research through a variety of resources: Articles/books, formal on-line tutorials, Journal Clubs. Developing research projects that target established quality indicators and garnering administrative support for nursing time allocation to research, designating and

recognizing project leaders and unit based champions is yet another strategy. Peer mentoring and coaching to conduct research and to publish and present research projects helps. Developing joint research programs between nursing school and hospital bridges the gap between clinicians and the academicians.

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**PAPER PRESENTATION****EFFECTIVENESS OF MARMET TECHNIQUE IN THE PRODUCTION OF BREAST MILK AMONG MOTHERS WHOSE BABIES ARE IN NICU.****Ms. Kedokhono Kotsu<sup>1</sup> , Prof.Sabitha Nayak<sup>2</sup>**<sup>1</sup>Nursing Superintendent, Olive Christain Hospital and Research center, Nagaland.Email - [kedokotsu@gmail.com](mailto:kedokotsu@gmail.com)<sup>2</sup> Vice Principal, OBG nursing Department, NitteUsha Institute of Nursing Sciences, Mangaluru.Email - [sabitha@nitte.edu.in](mailto:sabitha@nitte.edu.in)**Abstract**

**Introduction:** Breastfeeding is the “Gold standard” for feeding babies. Breast milk is the best and ideal food for neonates and a gift from God. Massage boosts the blood supply, eases lymphatic drainage, reduces pain, and helps in relaxation. According to UNICEF and WHO worldwide, 2.4 million newborns died in 2020. Studies have also shown that there was a significant increase in the volume of breastmilk after the breast massage with  $p=0.007$ . Thus, mothers need to know the techniques for enhancing breast milk production, such as the Marmet technique, and the nurses to aid the mothers in expressing the breast milk.

**Methodology:** A quasi-experimental time-series research design and Forty mothers were selected by purposive sampling twenty experimental and twenty control group. The baseline variables were collected, the Marmet technique was administered for 5 minutes in the experimental group, breast milk was expressed by breast pump, and a standard ounce glass was used to measure the volume of breast milk in milliliters. The same procedure was repeated in the morning, afternoon, and evening for three consecutive days.

**Results:** The study findings revealed that the median expressed breast milk volume after the intervention was higher than before. The ‘p’ values for three consecutive days are  $0.000(<0.05)$ ; hence, it is evident that there was a significant difference in the volume of expressed breast milk before and after the administration of the Marmet technique in the experimental group. The median volume of expressed breast milk was compared between the experimental and control group; thus, the p-value for all the three settings for three consecutive days was  $p=<0.05$  (Day 1:  $p=0.001, 0.018, 0.003$ . Day 2 & 3  $p=0.00$ ). Henceforth it shows that the Marmet technique is effective in increasing the volume of breast milk.

**Discussion:** The Marmet technique is a simple, easy, economical, efficient, and feasible technique that can be applied to all the postnatal mothers whose breast milk volume is low. From this study, it is evident that there was a positive effect of the Marmet technique in increasing the production of breast milk.

**Keywords:** *Marmet technique, UNICEF, WHO, Breast milk.*

## ASSESSMENT OF FOOT CARE SELF-EFFICACY AND FOOT CARE BEHAVIOUR AMONG PATIENTS WITH DIABETES MELLITUS

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### **Abstract**

**Introduction:** According to IDF, an estimated 537 million people worldwide had diabetes in 2021, expected to rise to 643 million by 2030 and 783 million by 2045. India is known as the “Diabetes Capital of the World”. Uncontrolled diabetes can lead to foot problems. It is one of the causes of disability. Foot care is often neglected. Poor practices have been identified as risk factors and can be prevented. Diabetic foot care is simple, low-cost and most effective nursing intervention that can reduce the rate of amputation by 85%. Self-efficacies influence the foot self-care behavior and prevent foot ulcers and amputation.

### **Objectives:**

1. To assess foot care self-efficacy and foot care behaviour among diabetic patients.
2. To assess relationship between foot care self-efficacy and foot care behaviour.
3. To find the association between foot care self-efficacy, foot care behaviour and demographic variables.

**Methodology:** A quantitative approach was used. Non probability convenient sampling technique was used to select 150 diabetic patients. Data was collected using socio demographic variables and Foot Care Confidence Scale and Foot Care Behaviour Scale.

**Results:** Study findings showed that majority of diabetic patients (98%) had high foot care self-efficacy and 96% of the diabetic patients had high foot care behaviour. The mean of foot care self-efficacy is  $51.04 \pm 4.396$  SD and the mean of foot care behaviour is  $64.50 \pm 7.316$  SD. There was a moderate positive correlation between foot care self-efficacy and foot care behaviour. The computed chi-square ( $\chi^2$ ) values were more than the table value for all socio demographic variables except age, gender, education, occupation, and marital status, duration of DM and foot care information. Hence, the research hypothesis is accepted.

**Conclusion:** Majority of the subjects had high foot care self-efficacy and foot care behaviour. Regular foot examination and foot care can prevent foot ulcers, and amputations.

**Key words:** *Self-efficacy, foot care behavior.*

**AWARENESS AND PRO ENVIRONMENTAL BEHAVIORS REGARDING  
PLASTIC POLLUTION.; A MULTISITE CROSS-SECTIONAL SURVEY AMONG  
NURSING STUDENTS, INDIA.**

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**Introduction:** Globally plastic pollution has become one of the *most pressing environmental issues*. Accumulation of plastics in the environment is found to adversely impact climate change, food production capabilities and human health and well-being. *Human exposure plastic through air, water, and soil is found to cause a variety of significant, complex health hazards*. The aim of the present study was to evaluate the level of awareness and pro environmental behaviors regarding plastic pollution among nursing students.

**Methods:** This was a questionnaire - based survey conducted in two selected universities of India. A consecutive sampling technique was used enroll 511 eligible undergraduate nursing students. A structured questionnaire was used to collect data. Frequency, percentage, mean, Standard deviation, chi-square test, one-way ANOVA and pearson correlation test were used as statistical methods.

**Results:** The age of the participants ranged from 18-28 years with a mean of  $21 \pm 2.22$  years. Most of them were female (75.1%), and single (97.7%). Though 41.5% of the students had adequate levels of awareness regarding plastic pollution, only 14.1% of them were engaged in adequate levels of pro -environmental behaviors. No statistically significant association was found between when mean score of awareness regarding plastic pollution and pro environmental behaviors were compared with selected variables. A statistically significant positive correlation ( $r=.187$ ,  $p=0.000$ ) was found between awareness regarding plastic pollution and pro environmental behaviors.

**Discussion:** Our findings supported the earlier studies done by Srinivasan N et al and Bhasin V. et al among nursing students. They reported inadequate levels of knowledge, poor practices and unfavorable attitude about plastic pollution. Preparing future nurses to be skillful to combat environmental, climate and health consequences of plastic pollution is essential to strengthen our health systems.

**Conclusion** There was significant positive correlation between awareness regarding plastic pollution and pro environmental behaviors.

**Key words:** *Plastic pollution, plastic through air, pro environmental behaviors.*

## EXPLORING EMPATHY AMONG STUDENTS OF A NURSING INSTITUTION OF SOUTH INDIA.

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### **Abstract**

**Introduction:** The nursing profession was developed to meet the health needs of the society including individual, family and community. Nurses hold values that underlie their moral and ethical responsibilities towards patients, communities, professions, employers and themselves. Empathy is one among these values. And it is essential to develop empathy during training of nurses. The aim of the study was to explore empathy among nursing students

**Materials and methods:** The study was conducted in a nursing college affiliated to a deemed to be university of South India. A cross sectional approach and descriptive survey design was used. Sample size was 500 including undergraduate, post graduate and diploma students. Jefferson scale of empathy was used to collect data.

**Result:** On statistical analysis, it was shown that respondents showed a higher level of empathy. The mean empathy scores were  $94.44 \pm 17.16$  (Maximum possible score = 140), Range was 20-140. Females exhibited higher scores ( $94.91 \pm 17.12$ ) than males ( $92.56 \pm 17.28$ ). Postgraduates showed higher scores ( $98.65 \pm 16.61$ ) than the undergraduates. First years ( $95.72 \pm 17.14$ ) and final years ( $95.91 \pm 17.19$ ) showed higher empathy than second and third years. Students with Buddhist religion ( $97.26 \pm 13.03$ ) had higher empathy scores comparing to others.

**Conclusion:** Though the study findings suggests that overall nursing students possess higher empathy scores, nurse educators need to pay more attention towards encouraging and motivating them to be more empathetic during their education for preparing the nurses to work in today's complex healthcare context.

**Keywords:** *Empathy, Nursing students, Value.*

**CAREGIVERS STRESS AND BURDEN AMONG MOTHERS OF CHILDREN WITH  
CANCER: A CROSS-SECTIONAL STUDY.**

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**Abstract**

**Introduction:** Cancer in India accounts for the 9th cause of death among children aged 5-14yrs. Cancer and its management have always been challenging in all dimensions with the mothers majorly facing very disturbing family experiences.

**Objective:** To determine mother's stress and burden of children with cancer.

**Methodology:** The study was conducted using a cross-sectional survey design on 180 mothers of children with cancer. The sample was selected using simple random sampling technique according to the inclusion criteria. The data was collected using Kingston Caregiver Stress Scale (KCSS) and Caregiver Burden Self-Assessment (CBSA) scale.

**Results:** The majority of mothers, 45(56.3%) were below 30yrs with mean±SD of 32.20±10.86 (in yrs.) with family monthly income less than Rs 29,000/- with mean ±SD of with mean±SD of 30.10±14.91 (in thousand Rs) & belonged to upper lower class respectively. Treatment cost was reported to be less than Rs 30,000/- per month, among 56(70.0%) with mean±SD of 30.21±15.39 (in thousand Rs). The majority of children with cancer,66(82.5%) were less than 10yrs of age with mean±SD of 31.79±13.97 (in months), &more than half 58(73.4%) of children werediagnosed with ALL. There was a significant association found between caregiver's stress and Occupation of mother (p=0.045),age of child (p=0.046), duration of childs illness (p=0.035). There was significant association found between caregiver's Burden and no of children (p=0.019), Cost of treatment , Monthly income of family (p=0.009) and aggressive spread of disease (p=0.016). There was positive correlation found between caregiver's stress and burden among mothers of children with cancer (p=0.002).

**Conclusion:** Majority of mothers experienced stress and burden due to their child's diagnosis. Hence interventions should be developed and implemented to help mothers deal with their stress.

**Keyword:** *Mother, cancer children, stress and burden.*

**EFFECTIVENESS OF STRUCTURED DRAWING IN IMPROVING FINE MOTOR SKILLS OF CHILDREN WITH DEVELOPMENTAL DELAY**

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**Abstract**

**Introduction:** Weak fine motor skills affect a child's activities of daily living and quality of life; hence necessitate need for early intervention. This study was aimed at identifying the effectiveness of structured drawing in improving fine motor skills of children with developmental delay.

**Material and Methods:** This interventional study was done among 60 differentially abled children aged 4-12 years selected through purposive sampling from 2 special schools at Calicut district, Kerala. The conceptual framework of the study utilized certain concepts from Roy's Adaptation theory. A quantitative, quasi experimental, one group-pretest posttest design was employed in this study. The fine motor skills of children were assessed using age appropriate tools after establishing its validity (Content Validity Index- 0.95) and reliability (intra class correlation coefficient of 0.8) After pretest, structured drawing was administered for a period of 30 days followed by a post test. Structured drawing included five drawing activities provided on individual basis according to the child's development and Victor Lowenfeld's creative and mental growth stages, allowing maximum expression of creativity of the child. Five activities in structured drawing include salt drawing, finger painting, marble drawing, sponge painting and squeeze painting. For drawing activities, edible colours made of corn flour and food colours were used.

**Results:** Data were analyzed using descriptive and inferential statistics. For evaluating the effectiveness of structured drawing, pretest and post test scores were compared by paired 't' test and the result revealed that structured drawing was effective in improving fine motor skills of children with developmental delay ( $P = 0.000$ ).

**Discussion:** This study has shown the significance of implementing art therapy such as structured drawing in differentially abled children, in improving their fine motor skills. However, larger studies are required.

**Keywords:** *Motor skills, Roy's Adaptation theory, finger painting, marble drawing, sponge painting.*



**EFFECTIVENESS OF SIM ON KNOWLEDGE REGARDING SELF CARE  
ACTIVITIES AMONG CLIENTS WITH MYOCARDIAL INFARCTION**

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**Abstract**

**Introduction:** MI, colloquially known as "heart attack," is caused by decreased or complete cessation of blood flow to a portion of the myocardium. MI may be "silent," and go undetected, or it could be a catastrophic event leading to hemodynamic deterioration and sudden death. Self care is a critical component of therapy for persons with MI. Patient's need to manage the medication, diet, exercise, stress reduction, maintenance of body weight to detect early sign of fluid retention. Cardiac rehabilitation is an integral component of the care for patients who have undergone MI

**Objectives**

1. Assess knowledge regarding self care activities. Administer SIM on knowledge regarding self care activities.
2. Evaluate effectiveness of SIM on knowledge of self care activities.

**Method:** Conceptual framework of present study is based on General System Theory, by Ludwig Von Bertalanffy (1968). Study was conducted using one group pre-test and post-test. Demographic variables analyzed for study were age, gender, family history of heart disease, diet and habits. Study was conducted using purposive sampling on 20 patients. Structured questionnaire were used to collect the data regarding self care activities of MI patients.

**Findings of the study:** The pre-test and post-test frequency of myocardial infarction patients revealed pre-test (30%) subjects had poor knowledge, (50%) had average knowledge, and (20%) had good knowledge scores, where post test (15%) subjects had poor knowledge, (60%) had average knowledge and (25%) had good knowledge scores. Effectiveness was assessed with paired 't' test there was significant gain in knowledge at 0.05 level of significance.

**Interpretation and conclusion:** The study concluded that SIM is effective teaching strategy to improve the knowledge regarding self care activities of myocardial infarction patients.

**Key Words:** *Myocardial Infarction, General System Theory, Cardiac rehabilitation.*

**A STUDY TO ASSESS THE EFFECTIVENESS OF SENSORY STIMULATION TO  
IMPROVE AROUSAL AND ALERTNESS AMONG HEAD INJURY PATIENT  
ADMITTED AT A SELECTED TERTIARY CARE HOSPITAL, BELAGAVI.**

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**Abstract**

**Introduction:** The impact of head injury on individuals varies in the degree of severity and associated characteristics. In India there is one head injury every 15 seconds. Sensory stimulation is essential factors in stimulating the reticular to activating system to maintain consciousness. The aim is to arouse a patient from unconscious level and try to awaken them. A study was conducted with objectives to assess level of consciousness among clients with head injury. To determine effect of sensory stimulation on level of arousal and alertness and. To associate the selected demographic variables with the level of consciousness during pre and posttest among the clients with head injury

**Method:** Evaluative quantitative research approach and quantitative quasi experimental design is used. Total 50 subjects were included in the present study, in which 25 were in experimental group and 25 were in control group. Population was selected by purposive sampling technique .Accessible population of the study comprises of head injury Clients with GCS of 7-10.

**Findings:** Findings of pre- test analysis revealed that in the pretest, almost all 25(100%) had average recovery whereas in the post test majority 18(72%) had average recovery and 7(28%) had good recovery in the experimental group. The analysis revealed that in the pretest, almost all 25(100%) had average recovery and also in the post test almost all 25(100%) had average recovery in the control group.

**Conclusion:** The study concluded that there was a significant difference in the post test level of consciousness after administering the sensory stimulation. This revealed that the sensory stimulation will help the clients to improve the level of consciousness in the management of head injury which in turn will improve their quality of life.

**Key words:** *Effectiveness, Sensory Stimulation.*

## EFFECTIVENESS OF MINI-BAL VS ENDOTRACHEAL TUBE SAMPLING TO IDENTIFY PATHOGEN AMONG INTUBATED PATIENTS.

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### **Abstract**

**Introduction:** Hospital acquired infections or infection of respiratory problems or any other disease condition which can lead an individual prone for the need of oxygenation, due to this exposure of the problem among the individual one can get intubated with mechanical ventilator support. Mechanical ventilator is widely used in the ICU on critically ill patients, as it gives sever complications one of its risk factor is VAP (Ventilated Associated Pneumonia). This infection raises the expense of health treatment for both patients and the healthcare system. As a result, avoiding VAP is a critical concern in the care of patients admitted to ICUs. Therefor identifying the diagnosis for VAP plays an important role among health care workers, like other various invasive investigation ( blood culture, Bronchoalveolar lavage etc) can cause expensive, sometimes samples are contaminated as well as incorrect to diagnose the VAP, in such condition Non-Bronchoalveolar or Mini-Bronchoalveolar procedure had given promise results in identifying & diagnosing of VAP among intubated patients.

### **Objectives:**

1. To assess the Effectiveness of Mini-BAL vs Endotracheal tube sampling extractor to identify microbiological findings by two sampling methods.
2. To evaluate the effectiveness of Mini-BAL vs Endotracheal tube sampling to identify colonisers.
3. To evaluate the incidence of Multidrug resistant organism and assessment of drug sensitivity in suspected intubated patients.

**Methods:** Ethical clearance & formal written permission where obtained from concerned authority of KLES Dr. Prabhakar kore hospital & MRC Belagavi to collect data from main study. Written consent obtained from each participant. Modified expanded clinical pulmonary infection score scale and demographical variables were used in the tool for data collection. Total thirty specimens have been chosen for post test experimental study was conducted among intubated patients in critical care unit in which data of each sample was obtained after 3 days.

**Results :** The level of identifying the Microorganism in Orotracheal tube & N-BAL with positive and negative results as well as growth of the colonies ( $43.3\pm 56.6$ ) with p-value **0.4402**

(i.e  $p < 0.05$ ) showing significance & kappa score of 0.026 (with 50% agreement), status of the pathogen by clinical pulmonary infection score were found to be  $(50 \pm 53.3)$  with p-value of **0.001** which is highly significant & no correlation between E.TT vs N-BAL therefore kappa score found to be 0.667 which shows 83.3% of agreement. In multi-drug resistance the antibiotic sensitivity of E.TT & Mini-BAL, the mean was  $4.8 \pm 2.4$  with p-value 0.5872 which shows no significance but are correlated were as in antibiotic resistance the mean was  $3.5 \pm 5$  with p-value **0.2971** hence significance & no correlation.

**Conclusion:** The overall results show that Mini-BAL sampling techniques was more reliable tool for investigation as compare to Endotracheal aspiration.

**Key Words:** *Mini-BAL, Endotracheal tube, pathogen.*

**A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME (STP) ON KNOWLEDGE REGARDING HUMAN PAPILLOMA VIRUS (HPV) VACCINATION AMONG LATE ADOLESCENT GIRLS AT GOVT. DEGREE COLLEGE PALOURA IN JAMMU.**

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**Abstract**

**Introduction:** Cervical cancer is the most common gynecological malignancy in the world, with an estimated 604000 new cases and 342000 deaths in 2020, Cervical cancer accounted for 9.4% of all cancers and 18.3% (123,907) of new cases in 2020. It is one of the greatest threats to women's health and is the fourth most common type of cancer in females worldwide. Every year several hundred thousand women die due to this disease, mainly in developing countries. Adolescence tends to be that part of life when sexual instincts become stronger which makes the individual susceptible to different sexually transmitted diseases. Cervical cancer has stimulated search for the vaccines that can prevent this haunting virus. Vaccination against HPV is an important mode of primary prevention against cervical cancer. The knowledge level regarding cervical cancer and HPV vaccination is lacking in adolescents. Awareness and education will be an integral part of the primary prevention of cervical cancer. Therefore, this study aimed to fulfill this information gap by assessing the effectiveness of structured teaching programme (STP) on knowledge regarding Human Papilloma virus (HPV) vaccination among late adolescent girls at Govt. Degree College Paloura in Jammu.

**Methods:** The researcher adopted a quantitative research approach and followed a pre-experimental research design with one group pre-test and post-test methods. Sixty late adolescent girls were selected as study subjects by adopting a purposive sampling technique. A structured teaching programme (STP) was prepared with the help of proper audio-visual aids. A self-structured questionnaire was developed and administered for data collection. Analysis of data was done by descriptive and inferential statistics.

**Findings:** The data in the present study reveal that the pre-test knowledge score regarding the Human Papilloma virus (HPV)vaccine is 6.43 and the post-test knowledge score regarding the Human Papilloma virus (HPV) vaccination is 20.25 with a difference of 13.82. The pre-test means percentage of knowledge among the late adolescent girls regarding the Human

Papilloma virus (HPV) vaccination is 25.73%, followed by a post-test mean percentage of 81.00%, showing a difference of 55.27%. It was found that the post-test knowledge score was higher than the pre-test knowledge score.

**Conclusion:** It was evident that a structured teaching programme (STP) was successful in enhancing the knowledge among late adolescent girls regarding Human Papilloma virus (HPV) vaccination at Govt. Degree College Paloura in Jammu.

**THE EFFECTIVENESS OF GLYCERIN MAGNESIUM SULPHATE APPLICATION  
IN REDUCTION OF THROMBOPHLEBITIS AMONG PATIENTS RECEIVED  
INTRAVENOUS INFUSION IN SELECTED HOSPITAL BELAGAVI.**

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**Background:** Intravenous therapy is indicated for many reasons. A significant number of patients admitted into hospital receive some forms of IV therapy through peripheral venous cannula, which is common procedure carried out in hospital to allow rapid and accurate administration of medication. However, the IV Cannulation can have desirable effects of which most common is phlebitis, which is due to mechanical, chemical or infectious cause, so the researcher suggested assessing the effect of glycerin magnesium sulphate to reduce phlebitis after IV Infusion.

**Objectives**

- To assess the level of thrombophlebitis among patients received intravenous infusion.
- To assess the effectiveness of glycerine magnesium sulphate application on reduction of thrombophlebitis among patients received intravenous infusion.
- To find the association between the pre-test levels of thrombophlebitis among patients received intravenous infusion with their selected demographic variables.

**Method:** True experimental pre-test post-test control group design was used. The experiment was performed on 62 patients, which was divided 31 in control category & 31 interventional group and phlebitis was assessed with the help of VIP (Visual Infusion Phlebitis) scale. Simple Random Sampling technique was adopted in this study.

**Results:** The differentiation between two treatments were evaluated by using this Wilcoxon matched pairs test of control group was 9.52, Z-value was 2.0205 and hence p-value was 0.0501 it shows there is no significance. Where as in experimental group % of change was 93.42 and Z-value was 4.8599 and p-value was 0.0001 (If  $p < 0.05$ ) there is significance. The study concluded that the application of Glycerin Magnesium Sulphate was helpful in reducing Inflammation of vein.



**A QUASI-EXPERIMENTAL STUDY TO ASSESS THE EFFECTIVENESS OF  
STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING  
TEXT NECK SYNDROME AMONG B.SC (N) STUDENTS OF SELECTED  
COLLEGES, JAMMU**

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**Abstract**

**Introduction:** TEXT NECK is a term that has been coined to describe the posture formed by leaning forward for prolonged periods, for example when viewing a cell phone while reading and texting, reported to cause stress injuries. This posture often results in cervical and shoulder pain, headache and thoracic hyper kyphosis. In 2020, the COVID 19 has shut off all the schools across the world. Globally, over 1.2 billion children are out of class room. As a result, education has changed dramatically, with the distinctive rise of e-Learning, where by teaching is undertaken remotely and on digital platforms. Because of the excessive use of computing devices especially mobile devices result in the flexible of the cervical spine causing cervical vertebra problems among younger people. This cervical problem leads to poor posture and symptoms of text neck. Therefore, this study aimed to fulfill this information gap by assessing the effectiveness of structured teaching programme on knowledge regarding text neck syndrome among BSC (N) students of selected colleges, Jammu.

**Methodology:** A quantitative approach, quasi pre-experimental research design was used in this study. The sample was selected by purposive sampling technique sample size was 50. The instrument use for data collection was a self-structured questionnaire was used to assess the knowledge regarding TEXT NECK SYNDROME among B. Sc Nursing 1<sup>st</sup> Year students Chak Bhalwal, Jammu. The tool was validating by expert from various field. Pilot study was conducted and the reliability of the tool was checked. The tool was found to be reliable, so the main study was conducted in Govt. Nursing College Gandhi Nagar, Jammu. The data was collected by using self-structured questionnaire. In pre-test, we concluded that (6%) had inadequate knowledge (88%) students have moderate knowledge, and (6%) students have adequate knowledge regarding TEXT NECK SYNDROME. A structured teaching program on TEXT NECK SYNDROME was administered to the college students and was evaluated.

Collected data was tabulated, analysed and interpreted by using described and inferential statistics.

**Findings:** The study revealed that (100%) students have adequate knowledge and no one have inadequate or moderate knowledge regarding TEXT NECK SYNDROME. The “t” test value was (20.15) which show that the knowledge of the students was increased after giving structured teaching program.

**Conclusion:** The result of the study conclude that structured teaching program plays a vital role in increasing the knowledge level among college students TEXT NECK SYNDROME.

**A MIXED METHODOLOGY ON LIVED IN EXPERIENCE AND LEVEL OF KNOWLEDGE ON CARE OF PRETERM NEWBORN AMONG PRETERM PRIMI POSTNATAL MOTHERS**

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**Abstract**

**Background:** The shorter the term of pregnancy, the greater the risks of mortality and morbidity for the baby as well as mother. The delivery of the foetus prior to 37 completed weeks of gestation is called as Preterm birth. Preterm babies have an increased risk of death in the first year of life with most of that occurring in the first month of life in experience on care of preterm newborn among preterm primi postnatal mothers. The mothers of the preterm babies' experiences and going through a tedious, heart wrenching experiences during the early postnatal period. Hence the researcher assessed the lived in experience and knowledge on care of preterm newborn among the primi mothers of preterm babies.

**Objectives:** The study goals are to explore the lived-in experience on care of preterm newborn among preterm primi postnatal mothers and assess the level of knowledge on care of preterm newborn among preterm primi postnatal mothers. The study also finds to associate the level of knowledge score on care of preterm newborn among preterm primi postnatal mothers and selected socio demographic variables.

**Materials and methods:** A Mixed method explanatory sequential design was used in the research. The researcher selected 60 primi para postnatal mothers from selected hospital through non-probability purposive sampling method and the data collected using tools involved semi-structured interview guide and structured knowledge questionnaire on newborn care. The data analysis was done by using SPSS software version 25.0 and N-Vivo software for the quantitative and qualitative data accordingly.

**Results:** The findings revealed that the lived in experience of mothers on preterm newborn care are expressed by the mothers been into three categories. i.e. round the clock care, support and mother's health & wellbeing. Under each themes, various subthemes, on the lived in experiences of the mothers are also categorized. The level of knowledge, are having maximum

knowledge in prevention of infection (89.50%) and minimum knowledge score in knowledge on breast feeding (50.33%). There is association between the level of knowledge on care of preterm newborn among preterm primi postnatal mothers and the selected socio demographic variables like age, educational status, occupation, monthly income, marital status, region and type of family of preterm primi postnatal mothers.

**Conclusion:** The mixed methodology adopted in the study deliberated the in-depth Lived in experience of the primi postnatal mothers. The quantitative part of this present study reveals that the level of knowledge in primiparous postnatal mothers are moderate. The study also recommended to create awareness on newborn care especially among the first time mothers.

**Keywords:** *Lived in experience, knowledge, preterm newborn, primi postnatal mothers.*

**POSTERS****INDICATORS OF QUALITY OF LIFE IN HEMODIALYSIS PATIENTS****Ramai P,<sup>1</sup> Dr Diana Lobo<sup>2</sup>**<sup>1</sup> Ph.D, Scholar, Laxmi Memorial College of Nursing, Mangalore,

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**Introduction**

In India, approximately 1.74 lakh patients were on maintenance dialysis in 2018. Around 2.10 lakh new patients are likely to develop kidney failure each year. Various indicators determine quality of life in hemodialysis patients. There is a need to promote supportive kidney care that focuses on addressing holistic needs of end stage renal disease patients. Addressing their medical and non-medical needs such as symptom management, social support, financial assistance, psychological counselling as well as involving patients in the care and treatment decisions will help in improving quality of life of hemodialysis patients.

**Indicators of quality of life in hemodialysis patients**

Socio demographic and clinical variables like age, gender, education, body mass index, laboratory values like haemoglobin, albumin, iron studies, BUN, serum creatinine, serum electrolytes etc.

Physical and physiological domain such as pain and discomfort, fatigue, restless legs, dyspnea, anorexia, etc. Behavioral, psychosocial, cultural and lifestyle domain like satisfaction with care, interpersonal relationship, health behavior Cognitive, environmental and spiritual domain. Comorbidities such as hypertension and diabetes mellitus Nutrition and chronic medications Complications of hemodialysis and ESRD itself such as hypo or hypertension, muscle cramps, bone disease, anemia, fluid and electrolyte imbalance, access site complication etc. Health related QOL of Hemodialysis patients can be enhanced by addressing these issues with various non- pharmacological interventions such as Inter or Intradialytic exercise, CBT, music therapy and frequent evaluation of QOL of Hemodialysis patients.

## **Conclusion**

Physical cognitive and psychosocial functioning are frequently impaired in hemodialysis patients which relates to poor outcome. The Indian clinical and research community should integrate advancements in telemedicine, wearables, remote monitoring, artificial intelligence and biomarker science in kidney care delivery to enhance the quality of care provided and improve outcomes.

**Key words:** *QOL, Hemodialysis, Indicators, biomarker science.*

## **DETERMINANTS OF STRESS AND ANXIETY AMONG MECHANICAL VENTILATED PATIENTS**

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### **INTRODUCTION:**

Mechanical ventilation is one of the most frequently used technological treatments in critical care units and induces great stress and anxiety in patients.

### **DETERMINANTS OF STRESS AND ANXIETY:**

- ✓ ICU environment
- ✓ High noise levels
- ✓ Continual lighting
- ✓ Invasive and non-invasive medical procedures

### **ADVERSE CLINICAL OUTCOMES OF STRESS AND ANXIETY:**

- ✓ Longer ICU stays
- ✓ Longer duration of mechanical ventilation
- ✓ Higher rate of self-extubation
- ✓ Unplanned catheter removal
- ✓ Excessive Sedation

### **APPROACHES TO REDUCE STRESS AND ANXIETY:**

The use of complementary therapies such as hypnosis, therapeutic touch and music therapy along with conventional medicine can be highly beneficial for mechanical ventilated patients.

The beneficial effects are:

#### **Hypnosis**

- ❖ Relaxation effect
- ❖ Improved mind body connection
- ❖ Open to suggestions

#### **Therapeutic touch**

- ❖ Promotes relaxing response
- ❖ Reduces stress, anxiety and pain
- ❖ Improves sleep, facilitates the body's natural healing process

### **Music therapy**

- ❖ Music acts as distractor
- ❖ Alters breathing and heart rate
- ❖ Improves state of mind by reducing depression and anxiety
- ❖ Reduces perception of pain

### **EVIDENCE BASED SUPPORTIVE CARE OF VENTILATED PATIENTS**

The main components of *evidence-based supportive care* of patients on *mechanical ventilation* includes:

#### **Agitation and delirium**

- Optimize environmental factors(ventilator synchrony, noise)
- Assess and treat pain

#### **Sedation and pain management**

- Minimize sedation and daily interruptions
- Routinely assess pain
- Suctioning, turning and mobilization are painful stimuli

#### **Family engagement**

- Trust within family members
- Realistic, concise and timely information
- Integrate support systems(social worker, spiritual care)

#### **Early Mobilization**

- Bed rest
- Multidisciplinary rehabilitation

#### **Physical restraints**

- Avoid restraints whenever possible
- Find & treat cause of agitation

#### **Sleep in the ICU**

- Reduce disruptive factors(such as pain and noise)
- Use hypnotic drugs(if necessary)

### **CONCLUSION:**

Complementary therapies like music therapy, hypnosis, therapeutic touch in conjunction with conventional medicine in the ICU, promote a healing environment for the critically ill patients.



## CARING FOR CHILDREN WITH AUTISM SPECTRUM DISORDER

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### Introduction

Developmental impairment known as autism spectrum disorder (ASD) is brought on by variations in the brain. In India, between 1% and 1.5% of children between the ages of 2 and 9 have ASD. To empower parents to speak up for their children, education is crucial. A multidisciplinary team is involved in the diagnosis and treatment of autism. A designated nurse may serve as a liaison between the family and various healthcare professionals.

### Common Goals of ASD Interventions

**Early:** As soon as ASD diagnosis is seriously considered.

**Goals:** Measurement and documentation of progress, resulting in adjustments in programming when indicated.

**Structure:** Routines, visual activity schedules, and clear physical boundaries

**Generalization Strategies** to apply learned skills to new environments and situations and maintain functional use of these skills

**Exposure:** Interaction with typically developing peers

**Intense:** Family inclusive active engagement 25 hrs/wk

**Personalized:** Low student-to-teacher ratio for 1-on-1 time and small-group instruction

**Assessment-based curricula:** Communication, social skills, functional adaptive skills, and reduction of disruptive/maladaptive behavior, cognitive skills, traditional readiness skills, and academic skills

### ASD interventions include:

- The, strategies and practices often target a specific skill or goal. Examples include visual assistance, video modeling, prompting, reinforcement, and time delaying.
- Programs, comprehensive treatment approaches, and interventions generally consist of a set of practices designed to achieve a broad learning, or developmental impact, on the core symptoms of autism.

- Programs, thorough treatment plans, and treatments typically include a number of techniques intended to have a significant developmental or learning influence on the primary symptoms of autism.

Speech therapists, occupational therapists, psychologists, social workers, psychiatrists, and music and art therapists are just a few of the professionals who provide therapy, therapeutic intervention, and treatments.

### **Conclusion**

It is often overwhelming for parents to manage and integrate these perspectives. A loving, supportive, and accepting parent makes all the difference to an autistic child. In order to make sure the child reaches their full potential; it is very important to receive services as soon as possible.

## EFFECTIVENESS OF COMPREHENSIVE NURSING DISCHARGE PROGRAM ON SELF-EFFICACY AMONG PATIENTS UNDERGOING CARDIAC SURGERY

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**Introduction:** Cardiac surgery carries 2-3% morbidity risk. Nurse's knowledge is vital. Patient education, instruction and discharge booklet enhances post operative outcomes.

**Methodology:** Quasi-experimental time series design was adopted for the study. Purposive sample of 40 cardiac surgery patients were randomly assigned to intervention and control groups. Cardiac self-efficacy Scale was used. Ethical clearance was obtained from the institution and written informed consent was taken from participants.

**Results:** Intervention and control groups were similar in their socio demographic and clinical characteristics ( $p>0.05$ ). 50-55% of patients underwent CABG. Cardiac self -efficacy was monitored in first, third-, and fourth-months post operatively. There was statistically significant difference in control symptoms and main function scores between the intervention group and control group and a significant improvement in cardiac self-efficacy scores with the  $p$  value $<0.001$ .

**Discussion:** Current study findings are consistent with another study where educational intervention significantly increased the level of self-efficacy of patients in the intervention group. Due to the effectiveness of the training program at the time of discharge, many of the patient's physical and mental problems, which are dependent upon self-efficacy is eliminated or adjusted.

**INTEGRATIVE APPROACH: DEALING WITH PSYCHOLOGICAL PROBLEMS  
AMONG WOMEN WITH CANCER.**

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**Abstract**

The most admirable creation of God is women. She is not only the symbol of beauty but also the mentor of the young and the pillar of a beautiful home. Cancer is perhaps the cruellest of deadly diseases in our era. Gynecological cancers are one of the most common cancers in a woman's life and have high morbidity and mortality rates. The gynaecological cancers include breast, cervix, ovary, uterus, vagina, and vulva. Due to the lack of cancer awareness, variable pathology, and dearth of proper screening facilities in developing countries such as India, most women report at advanced stages, adversely affecting the prognosis and clinical outcomes. Women suffer with cancer leading to Psychological Problems, such as stress, anxiety and depression, poor self-esteem, fear of relapse, future and death. So the nurse plays a significant role by integrating various interventions such as Yoga, counseling and psycho-education to achieve better outcome. Integrative oncology is a global strategy that incorporates complementary therapies to mainstream care, in order to reduce the main side effects due to oncological treatments, potentially improve their therapeutic efficacy, and enhance physical and emotional wellbeing during and after standard treatments. Integrative oncology combines lifestyle counselling, evidence-based complementary therapies with mainstream care, trying to improve physical, psychological and spiritual well-being of the patient.

**UNVEILING THE UNSEEN -EXPLORING THE LIVED EXPERIENCES OF FAMILY CARE GIVERS (FCG) OF YOUNG ADULTS WITH CHRONIC MENTAL DISORDERS**

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**Introduction:** One of India's most valuable resources is the young people of its country, and this generation needs to be nurtured for a bright future of the nation. However, when the young generation is affected with chronic mental disorders, the family finds it difficult to take care of them and burdened to look after them for several years.

**Methods:** Family Care Givers of young adults with chronic mental disorders (Mania, Depression, BPAD, schizophrenia) aged between 18-40 years undergoing treatment were approached for written informed consent and recruited through purposive sampling. Data were collected using in-depth semi-structured interview each interview lasted around 45 minutes to one hour and data saturation (attained with 15 sample). The audio recorded interviews were transcribed, interpreted and investigated using Colaizzi's data analysis framework.

**Results:** The family caregiver's age ranged from 28 to 60 years majority of them were females, employed only one family member was affected with mental disorder. Rehabilitation facility was unavailable to majority of them near to their residence. Regarding the young adults with chronic mental disorders, majority of them were unemployed and diagnosed with affective disorders. Maximum duration of illness was 20 years and onset at the age of 17-21 years. From the analysis six main themes and 36 subthemes were emerged. The main themes were-Family care giver experiences difficulty in identification of responsible person and support system, providing physical care, tackling emergencies, problems with medication and early identification of relapse, problems of indecent behavior and knowledge deficit related to mental disorders and its management.

**Conclusion:** The findings revealed the lived experiences of family caregivers of young adults with chronic mental disorders which has not much researched in Indian context. The generated knowledge can be utilized by the mental health professionals to plan home-based care strategies to improve quality of life and reduce the burden of care of FCG.

## CLINICAL NURSING RESEARCH

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### **Introduction:**

Clinical research is the study of health and illness in people. There are two main types of clinical research: observational studies and clinical trials. Observational studies monitor people in normal settings. Researchers gather information from people and compare changes over time. Clinical trials are research studies that test a medical, surgical, or behavioral intervention in people. These trials are the primary way that researchers determine if a new form of treatment or prevention, such as a new drug, diet, or medical device (for example, a pacemaker), is safe and effective in people. Clinical research nursing is defined as clinical nursing practice with a specialty focus on research implementation and the care of subjects participating in clinical research.

### **Importance of Clinical Nursing Research in Nursing Practice**

- Better patient outcome
- Contribute to the nursing science and practice
- Helps in updated practice of current and relevant nursing procedure
- To gain confidence in decision making
- To replace old policies with new according to the change in societal needs

### **Need for Clinical Nursing Research:**

- To implement evidence-based practice to enhance efficacy, efficiency in nursing
- Promote patient satisfaction
- To ensure provision of quality care by the qualified nursing professionals
- To develop professionalism
- To prove cost effectiveness in nursing practice

### **Steps in Clinical Nursing Research**

1. Formulation of problem statement based on day today nursing practice
2. Define purpose of study
3. Review of literature and formulation of hypothesis
4. Selecting research design and sampling techniques

5. Conducting pilot study
6. Collecting and analysing
7. Change of practice based on result of research towards quality improvement

#### **Tools of Clinical Research**

- P – Patient/ population/ problem
- I – Intervention
- C – comparison
- O – outcome
- T – Time

#### **Clinical Nursing Research Designs:**

- ✓ Descriptive design
- ✓ Analytical designs
- ✓ Experimental research design
- ✓ Lean Six Sigma
- ✓ Qualitative research design

#### **Challenges in clinical Nursing research**

- Navigating organisational restructuring
- Managing with uncertainty
- Creating reciprocity
- Controlling extraneous variables
- Working with economic constraints

#### **Conclusion**

Clinical Nursing research is very important area to be concentrated by the nurses for the professional growth. Research help nurses to practice evidence-based nursing care there by promote quality care.

# UNTANGLE THE THREADS OF CLINICAL NURSING RESEARCH FOR BETTER HEALTH CARE

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## Introduction

Clinical research nursing is nursing practice with a specialty focus on the care of research participants in which nursing care delivery parallels the process of clinical research study implementation.<sup>1</sup>

## Concept

The clinical nursing research is almost essential to deliver quality health care. To begin with nurse research should utilise Evidence-based practice (EBP) which is defined as the conscientious and judicious use of current best evidence in conjunction with clinical expertise and patient values to guide health care decisions.<sup>2</sup> Furthermore, the researcher should focus on the formulation of research question with the aid of frameworks like PICOT and FINER for better decision making. The word PICOT is a mnemonic derived from the elements of a clinical research question – patient, intervention, comparison, outcome and (sometimes) time and FINER is an acronym stands for feasible, interesting, novel, ethical, and relevant. These attributes will enhance the research question to conduct quality clinical research study.<sup>3,4</sup> The researcher should also be aware of the elements of good clinical research i.e., Relevant research question, Knowledge of epidemiology and biostatistics, High quality database.<sup>5</sup>

The MCNR model is focused on three primary areas across multiple diseases, illnesses, and healthcare settings: symptom science, self-management science and caregiving science. With a focus in these areas, nurse scientists leverage team science, big data, innovation and technology to move knowledge generation quicker along the discovery, translation and application continuum to meet the needs of patients and caregivers.<sup>6</sup>

## Conclusion

The Nurse scientists along with multidisciplinary team, usage of extensive data bases, and utilization of innovation and technology generates knowledge to discover evidence, translate it and apply it to clinical practice.<sup>6</sup> However, Nurse researchers thrive hard to be successful in completion of research after facing many challengers and hurdles.



## **PROBLEMS AND ISSUES FACED BY TRANSGENDERS IN ACCESSING HEALTH CARE**

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### **Abstract**

**Introduction :** Transgender people face problems in school, family, society and finally after the confusion, identity exploration and self-acceptance, they decide to undergo gender affirmation only to face discrimination at the health center too. This study aimed to investigate transgender people's problems faced in accessing health care.

**Methodology:** A Qualitative exploratory study on a convenience sample of five male to female and five females to male transgenders was conducted at Ondende NGO at Bengaluru. Data was collected by focus group interview till saturation and the transcribed data was analyzed by Atlas.ti software.

**Results :** The six subthemes derived from the focus group discussions were dysphoria, discrimination by family and society, gender identity affirmation, transphobia among health providers, lack of knowledge and training and inaccessibility to health care. From this the two main themes identified were "Becoming Visible" and "Health Inequalities". The study concluded that conducting sensitization programmes and capacity building programs for nurses will beyond doubt help nurses meet the diverse health needs of transgenders and eliminate their transphobia.

**Discussion:** The findings are supported by a study conducted in 2023 by Elizabeth Kempt at the Walden University, Minnesota where nurses were interviewed and the transcribed interview data were analyzed using manual coding following Saldana's method. The findings revealed positive attitudes towards transitioning adults and limited knowledge of nurses about their care. In another study carried out among 268 San Francisco Bay Area nurses revealed nurses' discomfort and lack of knowledge about transgender people and their health care needs. The National Medical Commission in India has issued an advisory recommending change to its competency-based medical education curriculum, specifically focusing on enhancing knowledge and attitudes towards the LGBTQIA+ community. The Nursing curriculum should enhance the knowledge and attitude of nurses regarding the transgender people.

## HEMOPHILIA CARRIER DETECTION & AWARENESS FOR COST-EFFICIENT HEALTHCARE

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### **Abstract**

In the context of hemophilia, the expense associated with treatment options, such as regular clotting factor infusions or gene therapy, presents a substantial challenge to healthcare budgets. This presentation explores the significance of identifying carriers, raising awareness, and the potential cost savings in healthcare systems.

### **Introduction**

Hemophilia is a congenital X-linked recessive bleeding disorder causing low levels of Factor VIII ( hemophilia A) or Factor IX ( hemophilia B ), occurring in approximately 1 in 5000 for HA and 1 in 20,000–30,000 for HB) live male births.<sup>1</sup> Congenital bleeding disorder caused by mutations in genes that are responsible for producing specific blood clotting factors.

Hemophilia is an X-linked recessive hereditary disorder that classically affects males due to the presence of only one X chromosome in males. Females are usually carriers due to the presence of a counterpart X chromosome.<sup>4</sup> the severity of manifestations is directly proportional to the level of the clotting factor in the blood<sup>5</sup>. Hemophilia, a genetic bleeding disorder, poses a significant economic burden on healthcare systems. Understanding carrier detection and promoting awareness can lead to more cost-efficient healthcare strategies.

### **Methods**

Conducted a review of WFH guidelines, peer-reviewed articles, reports, and studies published in reputed medical journals and databases to assess the financial implications of hemophilia treatment options, with a focus on carrier detection and awareness campaigns. Our objective was to understand the cost-effectiveness of identifying carriers and promoting awareness as strategies to alleviate the economic burden on healthcare systems.

### **Results**

The cost of prevention was much less than the replacement therapy. It is cost-effective to establish the service for carrier detection and prenatal diagnosis for hemophilia especially in developing countries with limited health resources.<sup>2</sup> The findings reveal that treatment options for hemophilia patients, including regular clotting factor infusions or gene therapy, are indeed costly and can strain healthcare budgets. Government initiatives and partnerships could

promote carrier detection and awareness, yielding significant cost savings and optimized healthcare resource management.

**Discussion**

The discussion centers on the importance of carrier detection and awareness campaigns in reducing costs, optimizing resource allocation, and fostering informed healthcare decisions. Continuous patient and family education contributes significantly to proper care for Person Living With Hemophilia (PLWH).<sup>3</sup>

**Conclusion**

Carrier detection and awareness initiatives are crucial for cost-efficient healthcare in the context of hemophilia, with the potential to alleviate the financial burden on healthcare systems.

**A STUDY TO ASSESS SOCIAL NETWORKING AND ELDERLY VISITING  
OUTPATIENT DEPARTMENTS OF SELECTED HOSPITAL AT MANGALURU**

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**Abstract**

For the elderly people loneliness was a symptom of mental illness but now a day it has been disease. Loneliness is influenced by condition like living changes, dependency, neighborhood, type of family, number of family members, social network, residency, disease condition. (Alzheimer's and Parkinson's diseases) etc .

The aim of the study is to assess the social networking and perceived loneliness among elderly visiting outpatient department.

**Methods:** A research study was conducted among 99 elderly people visiting outpatient department of Yenepoya medical college hospital Mangalore. The samples were selected by using Non - Probability purposive sampling techniques. A demographic proforma, LUBBEN social networking scale, Revised UCLA loneliness scale.

**Results:** The age distribution of the sample revealed that most of the subject, 66.7% were in the age group of 65-70 years. 57.36% were male. 50.5% belongs to the Hindu religion. 97% married. 62.6% were including 4-6 members were there in family. 74.7% were having primary level of education. 86.9% were from nuclear family. 73.7% were care taken by the children. There was no correlation ( $p > 0.05$ ) between social networking and perceived loneliness and was no association ( $p > 0.05$ ) between social networking and selected demographic variables. The study also revealed that, there was no association ( $p > 0.05$ ) between perceived loneliness and selected demographic variable.

**Keywords:** *Social Networking, Perceived loneliness, Elderly, Outpatient Departments.*

**DOOR TO EFFECTIVE PATIENT TRIAGING, COMPLETE  
CLINICAL ASSESSMENT AND INITIATION OF TREATMENT IN ED  
AT TERTIARY CANCER HOSPITAL, KOLKATA**

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**Introduction:** Emergency departments globally are facing increased patient load and expectations. The international goal of triage process is to gather sufficient data for determining acuity, identify immediate needs, and establish a rapport with the patient and family and triage process should be completed within 5 minutes. The wait time to consultation is one of the key metrics tracked at the emergency. It has been seen that census of patients increased from 11066 in 2018 to 16849 in 2022. The study aims at reduction of waiting time for patients in ED and improvement in triage process


**Methodology:** The content involved improved triaging of patients by analysis of root causes for delay in triage process. Data analyzed for 2021 and 2022 in the present tertiary oncology care center depicted that door to triage time was 30 minutes and doctor first assessment time found to be average 2 hours and average length of stay in ED for patients was more than 4 hours. The causes identified inadequate medical officer present in ED, lack of appropriate triaging tool, insufficient triaging space to accommodate patients in terms of severity. On the basis of root causes the triage tool as per 'Australian Triage Score's implemented, increased Medical officer in number for every shift, increased nursing manpower as per INC rule, dedicated triage nurse has been designated and additional beds were allocated in another floor of hospital to decongest the less sick patients after triage and primary management, dedicated manpower from operations have also been allotted, strengthening of training on emergency triaging and management has been mandated.

**Result:** From daily receiving all patients TAT for door to initial triage assessment time (Total TAT/Total number of patient being calculated as Average TAT) reduced to 5 minutes, doctor assessment time also reduced to 1 hour, average length of patient stay decreased to less than 4 hours.

**Discussion:** Prepared implemented, practiced triage and education reduced the TAT from door to triage assessment and taking minimal time to make plan of care starting from triage.

# Best Complements

<p><b>1. Binish Kurian,</b> Associate Nurse Unit Manager, Youth Inpatient Mental Health Unit, Monash Health. <i>Alumini Laxmi Memorial College of Nursing Batch - 2008 – 2010.</i></p>	
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