A Study To Assess The Effectiveness Of Workshop On Knowledge About Cardio Pulmonary Resuscitation Among 2nd YEAR G.N.M "Students Of S.C.P.M College Of Nursing & Paramedical Sciences, Haripur, Gonda ,

Jyoti moiz, Vikas moiz, Sayam vinod, Roli Srivastava, Rahul dhuriya
Correspondence at
Jyoti Moiz
M.Sc (N) MSN
ASSISTANT PROFESSOR
Regency institute of nursing ,kalyanpur ,kanpur

Cardio means "of the heart" and pulmonary means "of the lungs". Resuscitation is a medical word that means "to revive" or bring back to life. Sometimes cardio pulmonary resuscitation (CPR) can help a person who has stopped breathing, and whose heart may have stopped beating, to stay alive. People who handle emergencies such as police officers, firefighters, paramedics, doctors and nurses are all trained to do CPR. Cardiopulmonary resuscitation training is mandatory for nursing staff and is important as nurses often discover the victims of in-hospital cardiac arrest. Many different methods of improving this retention have been devised and evaluated. However, the content and style of this training lack standardization.

In this study the purposive sampling technique are using .In the present study the investigator has adopted a quasi-experimental research –design .Quasi-experimental research design is a research design that does not include mechanism to compensate for the absence of either randomization or a control group quasi – experimental, one group pre-test post-test design (o1,x,o2) was adopted for the study . mean (99.32) in post test when compared to their pre-test scores ,the mean difference (32.40) SD 8.17 of pre-test ,SD 12.44 post-test differences and t ' value 11.56 shows a highly significant differences between the pre-testand post-test knowledge scores,thus proof the effectiveness of the structured teaching programme on use of C.P.R.

Key words : *CPR, AED ,asses, effectiveness , skill*

I.   Introduction

Cardio means "of the heart" and pulmonary means "of the lungs". Resuscitation is a medical word that means "to revive" or bring back to life. Sometimes cardio pulmonary resuscitation (CPR) can help a person who has stopped breathing, and whose heart may have stopped beating, to stay alive. People who handle emergencies such as police officers, firefighters, paramedics, doctors and nurses are all trained to do CPR

Cardiopulmonary resuscitation (CPR) is the foundational technique for the emergency treatment of cardiac arrest (CA). The standardized training of CPR has been emphasized more than ever. Common people in developed countries and regions have received popular education of CPR program of Advanced cardiac life support (ACLS) training which was launched jointly by Universal Medical Assistance International Center, Ministry of Health.

Studies have also identified differences in Cardiopulmonary resuscitation provides blood flow to vital organ until effective circulationcan can be re-established .resuscitation consist of the following steps –

Airway the quality of ACLS /CPR performed by various healthcare providers (Wik et al 2005; Nyman and Sihvonen 2000). Often chest compression is performed inadequately with slow rates of compression and inadequate depth of compression[1]

CPR traditionally has integrated chest compressions and rescue breathing with the goal of optimizing circulations

Everyone can be a life saving rescuer for a cardiac arrest victim. CPR skills and their applications depends on the rescuers training, experience and confidence . Chest compressions are the foundations of CPR . All rescuer's regardless of training should provide chest compressions to all cardiac arrest victims .Because of their importance, chest compressions should be the initial CPR actions for all victims regardless of age .

Rescuers who are able should add ventilations to chest compressions. Highly trained rescuers working together should co ordinate their care and perform chest compressions as well as ventilations in a team based approach. Integrating the critical components of CPR

According to the universal Adult advanced cardiac life support (ACLS) algorithm conceptual frame work explains that all levels of rescuer can and should perform this CPR procedure. when encountering a victim has experienced a cardiac arrest, based on 3 unresponsiveness and lack of normal breathing. After recognition, the rescuer should immediately activate the emergency response system can start CPR with chest compressions in any where at any time and for any age group with any gender.

II.   Material And Methods

SOURCE OF DATA - The data will be collected from G.N.M nursing students those are practicing their clinical experience in S.C.P.M hospital at gonad u.p
RESEARCH DESIGN Qasiexperimental design with one group pre-test post-test design with control group Independent variable: The demonstration will develop on knowledge and practice regarding effectiveness of C.P.R **.**Dependent variable: The knowledge and practice of G.N.M nursing students measured by a structed self administered question on effectiveness of demonstration on C.P.R .EXTRANEOUS VARIABLE– personal characteristics ofG.N.Mnursing students which include age , sex , qualification and exposure to pre demonstration of C.P.R **.**The study will be conducted in S.C.P.M college of nursing at Gonda u.p. **.**Population,G.N.M NURSING 2nd yr students those are clinically participating in S.C.P.M hospital at Gonda u.p. Sample size **,**The sample size was 30 students of S.C.P.M school of nursing at Gonda u.p, who fulfill the required inclusion and exclusion criteria

III.   Result and discussion

Result 4.1 Description of Demographic variables of study subject Table 1: Frequency and percentage distribution of study subjects according to their demographic variables, N=70 Demographic Variables Category Frequency Percentage Age Less than 20 Years 1 1.40% 20-25 years 48 68.57% 26-30 years 15 21.42% 31-35 years 6 8.57% Gender Male 34 48.57% Female 36 51.42% Educational qualification Intermediate 36 51.42% Graduation 26 37.14% Post Graduation 8 11.42% Family background Medical 5 7.14% Non Medical 65 92.85% Previous exposure Yes 52 74.28% No 18 25.71% Table 2: Frequency and Percentage distribution of pre and post-test Knowledge score of GNM 2nd year students on Cardiopulmonary Resuscitation in adult Knowledge Grading % pretest posttest frequency (f) Percentage (%) frequency (f) Percentage (%) Poor (3-33 %) 13 18.57 % 0 0 % Average (34-65%) 58 82.85 % 0 0 % Good (66-100 %) 0 0 % 70 100 % Figure 1: Shows pretest and posttest knowledge score of GNM 3rdyear students Table no. 2 and figure no 1. Shows data on Percentage distribution of the Knowledge Score of the GNM 2nd year student on knowledge regarding Cardiopulmonary Resuscitation in adult. The data indicates that 18.57% (percent) had poor knowledge, While majority 82.85% percent had average knowledge and none of them had good knowledge in pre-test. The knowledge score of GNM 2nd year Students in post-test shows majority i.e., 100 %(percent) acquired good knowledge while, none of the student had average and poor knowledge. Thus it can be integrated the increase in knowledge may be one the effectiveness of structured teaching programme on cardiopulmonary resuscitation in adult. Table 3: The Mean and Standard deviation of pre-test and post-test knowledge scores 0f GNM 2nd year student on Cardiopulmonary Resuscitation in Mean Std. Deviation Pretest knowledge score 70 6 21 14.44 3.578 Posttest knowledge score 70 23 23 28.36 1.745 Table No.3 shows that the mean, standard deviation of knowledge in pre-test and post-test. The mean Pre-test Knowledge score of the GNM 2nd year Students is 14.44 with a standard deviation of 3.578 has increased to the 28.36 with a Standard deviation 1.745 is a measure of spread of scores within a set of data. The large SD indicates greater variability in the data where as smaller SD indicates less variability in the data. Table 4: Comparison between total pretest and total posttest knowledge score Mean difference Std difference T P value 13.914 3.829 30.406 .001 .The paired t test was computed to find the Effectiveness of STP on Cardiopulmonary Resuscitation in adult. The calculated value of „t‟is -30.406 and „p‟ value is .oo1 .pvalue is less at 0.05 level. It shows that the STP was highly effective as there was a significant increase in the post-test knowledge scores among GNM2nd year student on Cardiopulmonary Resuscitation in adult. Table 5: Overview of Association between Pre-test Knowledge level and selected Demographic variables, N=70 S. NO Demographic Variables Category Knowledge score Chai Square P Value Poor Average Good 1 Age (in years) >20 years 1 0 0 5.130 .163 NS 20-25 years 9 39 0 26-30 years 2 13 0 31-35 years 2 4 0 2 Gender Male 5 29 0 1.158 .282 Female 9 27 0 NS 3 Educational qualification Intermediate 10 26 0 3.707 .157 NS Graduation 4 22 0 Post -Graduation 0 8 0 4 Family background Medical 1 4 0 .000 1.000 Non -medical 13 52 0 NS 5 Previous exposure to CPR Yes 6 46 0 9.049 .003* No 8 10 0 S* NOTE: NS- not significant, S*-Significant Table No. 5 presents the results of association between pretest knowledge and demographic variables of GNM 2nd year Students like Age, Gender, educational qualification, family

background and previous exposure to CPR ,regarding Cardiopulmonary resuscitation in adult. The chi-square analysis was carried out to determine the association between Knowledge and demographic variables.

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