



HUNTER

Hunter College

Hunter-Bellevue School of Nursing

School of Health Professions

**16th Annual Spring Forum &
Evidence-Based Practice Poster Day**

April 27, 2022

Abstract Book

SPEAKER



Diane Shader Smith

Diane Shader Smith is an award-winning author, TED speaker and patient advocate. She is the mother of Mallory Smith, a young woman diagnosed with cystic fibrosis at the age of three who was determined to live a meaningful and happy life until her death at the age of twenty-five. Mallory documented her observations and feelings in living with cystic fibrosis—and later, in battling a rare superbug infection—in a secret diary, leaving instructions for her mother to publish her work posthumously. Her resulting memoir, *Salt In My Soul* (Random House), was recently released as a full-length feature production (<https://saltinmysouldoc.com/>).

ORGANIZERS

Producing this year's 16th Annual event EBP Poster day involved heroic feats, hard work and the tireless dedication of our staff and faculty. We are deeply appreciative for the work of those who have gone above and beyond to make this day a success:

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Dr. Julianne Imperato-McGinley, Weill-Cornell CTSC Director, and the Weill-Cornell Clinical and Translational Science Center, NIH Grant UL1TR002384

Maria Mendoza – Coordinator of Student & Alumni Activities and Community Outreach, Hunter-Bellevue School of Nursing

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#1	Title Primary Presenter Email Contact Affiliation Specialization Abstract	<p>Knowing the Patient as a Person: An Integrated Literature Review</p> <p>Janusz Kaleta jkaleta@gradcenter.cuny.edu CUNY Graduate Center Nursing</p> <p>Background: Recent paradigm shift from reductionist towards precision medicine brought back to the light the need to re-focus on knowing the whole person and delivering individualized healthcare. Question: What does it mean to know the patient as a person? Method: Integrative review was conducted with the use of the Whitemore and Knafl (2005) systematic method and the Preferred Reporting Items for Systemic Reviews and Meta-Analysis (PRISMA) to capture diverse methodologies. Search terms included: “knowing the patient”, “nursing” and, “someone’s normal self”. Articles written in English between the years 2000 and 2020 from various countries were included to gain a global perspective. Out of the initial 278 articles: PsychINFO (71), CINHL (157), and PubMed (50), a total of fourteen papers from six countries: USA, Canada, UK, Japan, Sweden, and Denmark met the inclusion criteria. Findings: Analysis yielded three main emerging themes: Knowing the Patient [Theme 1], Knowing the Environment [Theme 2], and Knowing the Person [Theme 3]. While most studies addressed “Knowing the Patient” [Theme 1] and “Knowing the Environment” [Theme 2] there is no professional consensus of what it means to “Know the Patient as a Person”. Friction emerged between [Theme 1 vs. Theme 3]. The author has designed a conceptual model that could reconcile this issue. Conclusions: While the current digitized, cost-effective healthcare environment promotes knowing the patient’s clinical needs, not enough attention is being paid to the holistic practice of knowing the patient as a person.</p>
#2	Title Primary Presenter Email Contact Affiliation Specialization Abstract	<p>The Effect of Self-Care Education on Quality of Life in Adult Oncology Patients</p> <p>Julie Madzsar julie.madszar64@myhunter.cuny.edu Hunter College School of Nursing Nursing</p> <p>Issue: Patients diagnosed with cancer often experience both physical and psychological symptoms, which adversely affect their quality of life. Self-care education is an important aspect in aiding patients to understand and manage their diagnosis to encourage optimal health. These self-care components include issues such as disease specific symptom management, coping with emotional distress related to the disease, and adjusting to new roles in life. This literature review discusses the question: In adult oncology patients, how does the use of additional self-care education, compared to routine care only, affect quality of life (QOL)? Description: A literature search of databases including Pub Med, Medline, and CINAHL was completed using the search terms “oncology”, “cancer”, “patient education”, “self-care education”, and “QOL”. Inclusion criteria specified adult patients diagnosed with cancer and literature published within the</p>

past 10 years. There were 21 quasi-experimental, randomized clinical trials, and a systematic review included in the literature review. Results: The articles use measurement tools, such as the European Organization for Research Treatment QOL questionnaire, prior to self-care education and following self-care education at varying increments to closely measure QOL. The literature proposes that oncology patients report a statistically significant increase in quality-of-life following self-care education methods compared with routine care. Many studies incorporate nurse-led self-care education for oncology patients. Conclusions and Recommendations: This literature review revealed that there is strong evidence demonstrating the effectiveness of self-care education for adults diagnosed with cancer in improving patients' quality of life. Nurses play an important role in patient education and should therefore incorporate self-care education into their practice. One article reveals improved life expectancy following self-care education and these important results should be further researched.

#3	Title Primary Presenter Email Contact Affiliation Specialization Abstract	<p>Respiratory Health Effects Among Nail Salon Workers</p> <p>Chestine Tomas chestine.tomas99@myhunter.cuny.edu Hunter-Bellevue School of Nursing Nursing</p> <p>Background: The purpose of this study is to assess whether occupational exposure among nail salon workers increases the risk of respiratory health issues compared to other occupations. There are studies that have shown potentially adverse effects for long-term exposure of toxic substances. Common respiratory-related issues include coughing, sneezing, and wheezing.</p> <p>Methods: This study used an integrative literature review design. A literature search was conducted through PubMed, EBSCO, and Google Scholar using keywords such as "nail salon workers," "respiratory symptoms," "asthma," and "cough." Inclusion criteria for the studies were as follows: (1) written in English; (2) published within the last 5 years (2017-2021); (3) conducted in North America; (5) included and studied nail salon workers; and (6) reported respiratory-related health findings. Four studies were selected for the review.</p> <p>Results: Studies used a cross-sectional (2 studies) and longitudinal design (2 studies). Health screening was done through self-reported questionnaires to assess health symptoms. Three studies were conducted in the United States and one study in Canada. Demographics of the sample in the articles were predominantly female (>95%), aged 18 and older. Most workers experienced respiratory-related symptoms from occupational exposure. Nose irritation and cough were the most common symptoms, reported 20-33.1% and 6-27% in the studies respectively. Wheezing, shortness of breath, difficulty breathing, and chest tightness were less common. One study reported an association with increased prevalence of coughing with workers that applied shellac polish, and wheezing for workers that applied acrylic artificial nails. Results from these studies also indicated increased risk of adverse health effects from exposure to volatile organic compounds.</p> <p>Conclusion & Implication: There have been limited studies done on</p>
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detrimental health effects from occupational exposure among nail salon workers. More research should be done on the products and chemicals found in nail salons to determine their health effects on nail salon workers.

#4	Title	Caring for children with mental health concerns: The experience of being a school nurse
	Primary Presenter	Jeannine Kaskoun
	Email Contact	jkaskoun@gradcenter.cuny.edu
	Affiliation	The Graduate Center
	Specialization	Nursing
	Abstract	<p>Background: School-aged students commonly present to the school nurse with both physical and mental health concerns. The COVID19 pandemic has brought to the forefront, the mental health crisis plaguing many schools and students. School nurses, who may be a child's sole provider of healthcare, are positioned to positively impact a child's mental health through assessment and implementation of programs or referrals. The purpose of this study is to explore school nurses' experience caring for students with mental health concerns. Additionally, this study aims to explore how school nurses feel supported to carry out their role of caring for students with mental health concerns. Method: This study will use a descriptive phenomenological design to explore the experience of school nurses who care for students with mental health needs. Focused interviews will examine the school nurses' perspective of caring for these students. Giorgi's descriptive phenomenological psychological method will be used to analyze qualitative data. Results: It is expected that exploring the school nurse experience will help to understand how the school nurse perceives their function within the school health team, as well as understand the nurses' experience related to supporting these students. This can inform the development and implementation of interprofessional collaborative teams to aid in early intervention and treatment of students with mental health concerns. The voices of school nurses can describe the human experience as it is being lived from their viewpoint. Conclusion: As mental health-related concerns have increased since COVID-19, now is a ripe time to study the school nurse experience. Discovering the essence of school nurses' experience will provide a context to their caring work and uncover possible ways school nurses can further aid students who are struggling with mental health concerns.</p>
#5	Title	Integrative Review: The Effects of Substance Use Screening on Referrals for Treatment in Primary Care
	Primary Presenter	Jenny Uguru
	Email Contact	j_uguru@yahoo.com
	Affiliation	Chamberlain University
	Specialization	Nursing
	Abstract	<p>Background/Significance: Substance use is a global and local practice problem resulting in significantly high rates of morbidity and mortality (Bisaga et al., 2018; Setodji et al., 2018). In New York City, overdose is the leading cause of preventable death (City of New York, 2020). Purpose/Goal: The purpose of this integrative review was to analyze and critique evidence which addresses the substance use crisis. The i-PARIHS translational science</p>

framework was utilized to support the evidence translation process. Methods: A total of 15 peer-reviewed journal articles from multiple electronic databases were utilized in the review. A detailed analysis of the evidence, including a critique of the data collection processes, analyses, conclusions, and limitations were conducted. Projected Results/Findings: Varying methods of substance use screening and documentation were identified in practice settings, including the use of outdated screening tools. Lack of funding, time for training, and completion of lengthy screening tools were identified as barriers to the sustainability of substance use screening and referrals to treatment processes. However, utilizing a brief questionnaire was proven to be effective in busy workplace settings. The overall quality ratings for the differing levels of evidence were of high/good quality. Conclusions/Implications for Clinical Practice: All of the research evidence supported substance use screening and/or substance use treatment, including the utilization of brief interventions. Further recommendations include a review of organizational healthcare policies related to substance use screening and treatment, examining the efficacy of substance use treatments by clinical and non-clinical trained staff members, and future research studies on COVID-19-related stressors and the initiation or worsening of substance use in individuals.

#6	Title	The Effects of Virtual Reality in Reducing Postoperative Pain in Hospitalized Adult Patients
	Primary Presenter	Anna Larkin
	Email Contact	annalarkin89@gmail.com
	Affiliation	Hunter College
	Specialization	Nursing
	Abstract	<p>Issue: Safe and effective pain management is a challenge among hospitalized patients. Pharmacological interventions are often the first choice but are associated with side effects and can contribute to the opioid epidemic. Nonpharmacological interventions, such as virtual reality (VR), may be an effective adjuvant in pain reduction. This literature review addressed the following question: Does VR compared to standard treatment reduce pain in hospitalized adult patients?</p> <p>Description: This systematic search and limited review of the research literature was conducted using the Medline Complete Database. Keywords used included virtual reality, acute pain, and pain management . Results included three systematic reviews, one randomized controlled trial, and one cohort study.</p> <p>Results: Key findings from all five articles indicate that VR is an effective non-pharmacological therapy in acute pain reduction. The articles show that VR can be a complementary intervention to some pharmacological analgesia, highlighting its potential application as an adjunct in multimodal pain management.</p> <p>Conclusions and Recommendations: Based on key findings, VR is a safe, effective, drug-free solution for pain management in hospitalized adult patients. Offering VR as a treatment modality to patients experiencing acute pain in the inpatient setting can help reduce their reported pain level. Recommendations for practice may include incorporating VR as a non-</p>

pharmacological therapy in a multimodal pain management strategy. Suggestions include offering VR to patients before initiating pharmacological therapy and reducing the dosage and frequency of opioid administration. Future research can include measuring the reduction in opioid intake when used in conjunction with VR, calculating the amount of VR exposure time that is necessary to make a significant difference in patient-reported pain level, and experimenting with different visualizations offered by VR to see its impact on pain reduction.

#7	Title	Helping Older Adults with Opioid Use Disorders Stay Healthy and In Recovery
	Primary Presenter	Steven Baumann
	Email Contact	sbaumann@hunter.cuny.edu
	Affiliation	Hunter College
	Specialization	Nursing
	Abstract	Background There is a growing number of opioid use disorders (OUD) and overdose deaths in older adults. Having multiple chronic conditions, including OUD, is associated with accelerated aging, which requires holistic care. Methods This retrospective study utilized a computer algorithm employed by a network of FQHC clinics in New York. With IRB approval, the IT department of the organization captured data about patients age 55 and older with an OUD diagnosis between March and August of 2020. The IT department identified 664 such patients and provided anonymized demographic and medical history data of these patients for analysis. Results The mean age of the patients was 60.73 years of age; they had 2-3 times more medical and psychiatric co-occurring conditions than national sample of similar age and income older adults with no OUD. The most frequent co-occurring medical conditions in the patients were heart or circulatory disorders, movement disorders, respiratory disorders, pain disorders, nutritional disorders and metabolic disorders. The most common co-occurring psychiatric conditions were anxiety disorders, major depressive disorder, PTSD and bipolar disorder. The most common co-occurring substance use disorders other than OUD were nicotine dependence, cocaine abuse, and alcohol abuse. Conclusions Older adults with opioid use disorders often have complex health care needs that include one or more chronic medical and psychiatric conditions. They can be seen as having accelerated aging and require competent and compassionate care to remain out of emergency rooms, hospitals, and remain able to be well in the community. The needs of African American and Latinx older adults with OUD in this sample need additional analysis.

#8	Title	Adopting a Volume Based Feeding Protocol to Safely Meet ICU Patient Calorie Needs
	Primary Presenter	Shawn Hardy
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	Affiliation	Hunter College
	Specialization	Nursing
	Abstract	Background ICU patients frequently do not receive adequate caloric intake due to frequent enteral nutrition interruptions. In the ICU at NYP LMH in January 2019 only 59% of enteral nutrition orders were initiated and

advanced appropriately. Inadequate nutrition can lead to metabolic disturbances, pressure injuries, and halted gastric motility. Volume based feeding approaches with calorie catch up have been shown to safely increase delivery of enteral nutrition. Methods Meet one-on-one and during morning huddles with all ICU stakeholders to introduce the volume based feeding protocol, current unit based data trends, hospital guidelines, risks to patients and the cultural importance of feeding, particularly pertaining to end of life for Chinese Americans. Provide staff with laminated “at a glance” volume based catch up resource cards to be stored in ICU bedside charts. Collect and review weekly and monthly quality data and report out to the staff via email. Results Timely and appropriate enteral nutrition rates increased by 34% during the intervention period. Overall complications preventing enteral feed delivery decreased by 30%. During the intervention period, hospital acquired pressure injury rates fell by 25%. Discussion The volume based feeding protocol safely met patient needs by making up lost calories following NPO periods. ICU stakeholders were empowered to request alternative tube feed formulas available for order by the dietitian when feeds were not tolerated as well as antiemetic medication. In collaboration with WOC RN, project data and best practices were shared with the medical/surgical units during unit based in-services.

#9	Title	Putting Public Health Evidence in Action: An Innovative NP-Led Colorectal Cancer Screening Program
	Primary Presenter	Dasola Okunola
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	Affiliation	Hunter College
	Specialization	Nursing
	Abstract	Background: Colorectal Cancer (CRC) is the second leading cause of cancer mortality worldwide and has significant financial, medical, and social strains in the community. The evidence shows screening for CRC significantly improves the morbidity and mortality of colorectal cancer compared to no screening at all. According to Healthy People 2030, only approximately 65% of adults received colorectal cancer screening. Several studies have shown an evidence-based method to improving the rates of colorectal cancer screening with the use of Fecal Immunochemical Test (FIT)-kits as they are non-invasive, cost-effective, and more readily accepted by patients. Purpose: The purpose of the DNP scholarly project is to implement evidence-based practice recommendations in screening the general population for colorectal cancer and increase screening rates for the detection of CRC. Methods: The DNP scholarly project will employ an evidence-based quality improvement approach to implement an innovative Nurse Practitioner led FIT-based screening protocol to guide medical providers in ordering CRC screening tests. The FIT-based screening protocol will include the addition of a FIT-kit order set into the agency’s EHR system, as well as implementation of a CRC algorithm along with educational sessions. The Nurse Practitioner will assess the pre and post use of FIT-kits, the uptake in screening of CRC pre and post will also be evaluated along with chart audits. Results: The results will reflect an increase in colorectal cancer screening by ten percent, and the providers knowledge on CRC

screening using FIT-kits will improve post-implementation.

Conclusion/Implications: Implementing a Fecal Immunochemical Test protocol plays an important role in improving the screening rates of colorectal cancer in primary care patients. Executing the DNP scholarly project will boost access to CRC screening in underserved populations, use informational technology, and clinical prevention to improve community health.

#10	Title	Factors Associated with Technology Adoption by Community-Dwelling Older Adults During the COVID-19 Pandemic
	Primary Presenter	Elizabeth Sutton
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	Affiliation	Graduate Center
	Specialization	Nursing
	Abstract	Background: The COVID-19 pandemic brought to the forefront the disparity that exists between older and younger Americans in utilization of information and communication technologies (ICT). Technology adoption has implications for overall health and the continuation of disparities in technology adoption is associated with poor aging outcomes. This study seeks to understand factors associated with technology adoption by community-dwelling older adults during the COVID-19 pandemic. Methods: This study employs a secondary analysis of the National Health and Aging Trends Study (NHATS) COVID-19 Questionnaire which was completed in the fall of 2020 by 3,188 Medicare recipients across the US. Binary logistic regression models were utilized to examine the relative impact of physical health factors, socioemotional factors, and key demographic factors on whether or not community-dwelling older adults adopted a new online technology during the COVID-19 pandemic. Further, to more explicitly evaluate gender differences, the analysis was conducted for the entire sample and then run separately for male and female respondents. Results: Preliminary findings confirm the significance of factors identified in previous studies: older adults with higher self-rated healthstatus and educational levels were more likely to adopt technology, and increasing age was associated with a decreased likelihood. Preliminary findings indicate other statistically significant factors unique to the pandemic that were positively associated with technology adoption, including having delayed planned medical care, attended online religious services, and attended online group activities. Significant gender differences in likelihood of adopting technology were identified related to those who fell in the last year, those who attended online religious services, and those who reported feeling anxious during the pandemic. Conclusions: Factors associated with adoption of new technologies during the first wave of the COVID-19 pandemic that were identified in this study can inform interventions that target the health and well-being of community-dwelling older adults
#11	Title	Don't prolong, call the RRT when something seems wrong: Interdisciplinary Rapid Response Simulation
	Primary Presenter	Julianne Gentile
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	Affiliation	Nursing

**Specialization
Abstract**

Kings County Hospital

Background: An RRT is a multidisciplinary team of healthcare professionals with critical care experience who provide immediate care to patients that exhibit a sudden deterioration in condition. Approximately, 290,000 in-hospital cardiac arrests occur annually: 60% of the population shows at least 1 abnormal vital sign making it ideal to detect early signs of clinical deterioration. Purpose: The aim of the quality improvement initiative was to reinforce the criteria for calling an RRT and promote the RRT activation. Method: An RRT needs assessment survey was delivered to all inpatient nursing staff via QR code. Kings County Simulation team developed case scenarios for healthcare professionals at the point of care. Data was collected during the simulations. In addition, education was provided on the criteria for calling an RRT and the importance of RRT activation. A debriefing session followed that provided education and identified barriers for an RRT. Telecom reports from Kings County Hospital were analyzed to obtain the number of RRT calls per month. An RRT Simulation took place each week in the inpatient setting. Results: The needs assessment suggests that 70.10% of the participants chose the correct number for calling an RRT. The Telecom reports found a decrease in the RRT calls for February following the interventions. Conclusion: There was a correlation between knowledge for calling an RRT and RRT activation as well as the need for education on team member roles during an RRT. Next steps-Continue monthly RRT Sims and create a video of the simulation for education on the criteria for and activating an RRT. The next few months of telecom data will also be tracked to monitor for an increase in RRT calls.

#12	Title	Effects of Telesimulation on the Health Literacy Knowledge, Confidence and Application of Nursing Students
	Primary Presenter	Susan Riekert
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	Affiliation	The Graduate Center, CUNY
	Specialization	Nursing
	Abstract	Background: Accurately assessing patient health literacy (HL) is a critical component of nursing student education. HL strongly impacts our population's health and is directly associated with healthcare outcomes. Yet, large gaps exist within nursing school curricula with regard to HL awareness and the skills and practices required to target the issue of HL in patient care. Purpose: Examine the effects of a HL information and a HL telesimulation intervention on the HL Knowledge, Application and Confidence of a convenience sample of first semester AAS nursing students. Method: Using a repeated measures design, in Fall 2021, three CUNY AAS nursing programs were randomly assigned to the intervention and control arms: no-treatment group (City Tech, Group 1, n = 52); HL information only intervention group (BMCC, Group 2, n = 72); and a HL information plus telesimulation intervention group (QCC, Group 3, n = 54). The HL-Knowledge, Application and Confidence Scale (HL-KACS) measured the outcome variables. Groups 2 (BMCC) and 3 (QCC) received a 1- hour online HL education intervention and each participant in Group 3 (QCC) engaged in a 30-minute HL telesimulation intervention with a standardized patient. All

students completed the HL-KACS at T1: prior to planned interventions and T2: three weeks after the HL telesimulation intervention. Results: It is anticipated there will be an increase in HL Knowledge in Group 2 (BMCC) versus Group 1 (City Tech). It is also anticipated that HL Knowledge will be higher in Group 3 (QCC) versus both Groups 1(City Tech) and 2 (BMCC). Furthermore, HL Confidence and HL Application will be higher in Group 3 (QCC) than in Groups 1(City Tech) and 2 (BMCC). Conclusion/Implications: A HL information and telesimulation intervention for AAS nursing students successfully improved HL Knowledge, Application and Confidence. Future plans include integrating these HL interventions into nursing school curricula.

#13	Title Primary Presenter Email Contact Affiliation Specialization Abstract	<p>Keep that beat going: promoting lifestyle changes to keep a healthy heart</p> <p>Tania Veloz tania.veloz96@spsmail.cuny.edu School of Professional Studies Nursing</p> <p>Background: Heart diseases remains the leading cause of death in the world. Older adults may be unaware how their lifestyle choices affect their heart health. Although heart health is discussed in classes offered at senior centers, the focus must be on individualized strategies to prevent disease and promote heart health. Purpose: The aim of this Capstone project is to identify baseline knowledge and knowledge gaps in older adults at a senior center focused on heart health. This quality improvement project is designed to achieve individualized healthy lifestyle changes that will result in an improvement or/and maintenance of heart health for the older adults at a senior program. Methods: This proposal uses John Kotter’s 8-step change theory as the framework. Kotter’s. The main elements are the urgency of the issue, team involvement, and strategies implemented. In this project, members were assessed at the beginning of the project and reassessed at the end of the project with an evidence-based heart health risk assessment tool. Weekly reassessments were conducted in discussion groups to identify gaps in knowledge. Specific knowledge gaps were incorporated into the project over time. Results: The results will indicate a lower risk percentage for heart diseases in older adults at the senior center after heart health educational interventions over time. This project may also decrease provider visits, the need for additional medications, diagnostic tests, and emergency department visits. Conclusions/Implications: Heart health individualized assessments and knowledge attainment is the baseline for health heart. Incorporation of this program into the routine at the senior center supports the need for ongoing health education in this population. Future programs can be modeled after the heart health program to address other diseases prevalent in the older population.</p>
#14	Title Primary Presenter Email Contact Affiliation Specialization	<p>A Collaborative Partnership Between Two Public Serving Settings</p> <p>Judith Aponte jap@hunter.cuny.edu Hunter College Nursing</p>

Abstract

Background: There continues to be an increasing demand and a lack of high-quality clinical placement sites for nursing schools. To meet these challenges, collaborative partnerships need to be reciprocal. Purpose: The initial purpose of this partnership was to provide four graduate C/PHN students a high-quality learning experience for three consecutive semesters. Methods: There is an established partnership between NYC H+H and CUNY to strengthen career pathways, support the educational learning needs and foster professional development of nursing students. As a result of this academicpractice partnership, a collaborative and reciprocal relationship was created between HBSON C/PHN graduate program and NYC H+H/Metropolitan Hospital. As a result, four graduate C/PHN students were each paired with a different provider/preceptor and in an out-patient service (i.e., mental health, diabetes, hypertension and HIV) for three semesters. Results: This partnership benefited the students learning needs and the hospitals patient care objectives. Students qualitative findings included: “ ... implementing Cabenuva at the hospital has allowed patients to now have this option... help reduce missed medication doses;” “... doing outreach and conducting reminder calls increased the number of participants in the diabetes classes... shown a reduction in A1c levels;” “ ... collecting survey data on hypertension, developing an education pamphlet and educating staff and patients...;” and “collaborating with peer counselors to develop and deliver a harm reduction program and women’s group...” Projects the students focused on positively improved the patients outcomes; impacted changes in clinical practice as a result of data findings; assisted in the expansion of HIV medication protocols; contributed improved health outcomes to the patient population; and helped to create a healthier community. Conclusion: Partnerships between hospitals and C/PHN graduate programs can provide students with meaningful experiences focused on population health, while also addressing barriers related to health inequities and social determinants for vulnerable patients in NYC.

#15	Title	Education of Nurses in a Safety-Net Hospital to Care for Patients with STSegment Elevation Myocardial Infarction
	Primary Presenter	Pauline Edwards
	Email Contact	edwardsp6@nychhc.org
	Affiliation	New York City Health+Hospitals
	Specialization	Nursing
	Abstract	Issue: Initiation of the angioplasty program was central to providing the community served and patients in a safety net hospital with high quality care within their neighborhood. Nurses needed requisite knowledge, skills and competency to safely care for patients who were diagnosed with ST-Segment Elevation Myocardial Infarction (STEMI) to be treated in our hospital Description: Knowledge, skills and competency to safely care for the post STEMI population of patients included, care of the patient post Percutaneous Coronary Intervention (PCI) and removal of the trans radial (TR) band. This was inclusive of potential complications, in particular cardiogenic shock (CS) which included the use of mechanical circulatory support (MCS) to treat CS. Initial education for the nurses in the CCU was a

collaborative endeavor with the nurse educator and our physician partners which involved education modules on Acute Coronary Syndrome (ACS), PCI and CS. The Nurse educator ensured that all nurses were educated and completed the education and competency of other related topics. In addition, nurses on the telemetry unit were educated on nursing care of patients post Percutaneous Coronary Intervention (PCI) which included removal of the TR band. Education was done over a six-month period and the nurse educator was available at all times and rounded daily in the CCU and on the telemetry unit. Lessons Learned: Nurses working in the CCU and on the telemetry unit demonstrated competency in providing safe, high quality care of patients who were diagnosed with STEMI. Next Steps: Ensure sustainability of nurse's competency through annual competency of related education topics, continued on demand learning, nursing grand rounds and journal club. Future aspect of investigation can involve the nurse's experience in caring for patients who were diagnosed with STEMI.

#16	Title	Improving the Physical Health of the Mental Health Population: Implementing an Evidence-Based Metabolic Syndrome Prevention Bundle in the Adult Psychiatric Population.
	Primary Presenter	Maria Toloza
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	Affiliation	Hunter-Bellevue School of Nursing
	Specialization	Nursing
	Abstract	Background: Cardiovascular disease continues to be the leading cause of mortality in the mental health population. The metabolic syndrome (MS) is a cluster of co-occurring cardiovascular risk factors found in patients treated with atypical antipsychotics (AA). Despite clear clinical guidelines, many patients remain unscreened. In addition, there is inconsistent monitoring practice reported in the literature due to hidden barriers that may prevent the target population from receiving comprehensive cardio-metabolic care. The evidence points to care fragmentation and a limited understanding of MS as two main obstacles leading to poor health outcomes. Care coordination is essential to effectively meet the physical needs of this vulnerable population. Purpose: This DNP scholarly project aims to introduce an Evidence-Based metabolic syndrome prevention practice change to improve the metabolic syndrome referral rate in the psychiatric adult population treated with second-generation antipsychotic medication. Methods: The DNP scholarly project will utilize an Evidence-Based (EB) quality improvement approach to implement an NP-Led Evidence-Based Metabolic Syndrome prevention bundle to address practice gaps. A systematic screening and referral process for patients who have been diagnosed with severe mental illness (SMI) will be established to foster care integration and coordination between primary care and mental health services. The Plan-Do-Study-Act strategy will test a change in implementing the EvidenceBased Metabolic Syndrome Prevention Bundle, educational intervention to improve providers' knowledge, standardizing screening instruments, and monitoring the sustainability process. A pre-post comparison design will be used to measure a change in MS referral rate and providers' knowledge. Anticipated Results: The project anticipates

increasing the MS referral rate in mental health services by 10% and improving providers' knowledge of and compliance with the MS Prevention Bundle tool. Conclusions & Implications: Implementing a care coordination bundle is essential to improving MS screening and referral rates, allowing for robust collaborative and integrated mental health services. Overcoming hidden clinical barriers is an integral part of process improvement and may directly impact the patient's outcomes.

#17	Title Primary Presenter Email Contact Affiliation Specialization Abstract	<p>Faith Community Nurse self-care: a lived experience</p> <p>Linda Bradley lbradley@gradcenter.cuny.edu The Graduate Center Nursing</p> <p>Background The nursing profession and the world has an increasing focus on self-care as a phenomenon of importance for maintaining life, health, and wellness, including stress reduction and mindfulness. Self-care can be considered an essential integrated activity in which nurses need to engage to maintain their physical, psychological, social, and mental well-being. Considering this current focus on self-care, and according to available data, a gap in the phenomenon of self-care in the context of the faith community nurse's lifeworld was found and addressed through this research. The population of interest were faith community nurses who work compensated or uncompensated, full-time, or part-time in faith communities, hospitals, and institutions in the United States. Methods A qualitative phenomenological research method was used to obtain insight into the self-care experiences of faith community nurses. Recruitment was facilitated by using a purposive and snowballing sampling methods which resulted in thirteen faith community nurses' participants. Individual interviews were conducted using Zoom video conference software. Results The five essential themes that emerged through a systematic manual analysis of the interview transcripts were: (a) tension of practice, (b) recognition of self-care, (c) internal self-care actions, (d) external self-care actions, and (e) faith community nurse individualized practice. Three subthemes were: (a)ministry, (b) COVID-19 pandemic presence in faith community practice, and (c) COVID-19 pandemic presence in faith community nurse self-care. Conclusion Self-care was revealed and interpreted as a wholistic experience in the presence or absence of a recognition of self-care, tensions, expected and unexpected events within the nurses individualized practice and personal life. These findings and meanings describe selfcare as a heart-centered healing phenomenon which includes experiencing loving kindness to self as well as to others. A recommendation for future research is to use a broader sample population including a range of gender, race, ethnicity, geographic locations, and faiths.</p>
#18	Title Primary Presenter Email Contact Affiliation Specialization	<p>Reducing 30-day Hospitalization Rates in High-Risk, Community Hospice Patients Utilizing a Nurse-Driven Transitional Care Bundle</p> <p>Julissa Rodriguez Julissa.Rodriguez93@myhunter.cuny.edu Hunter College Nursing</p>

Abstract

Background/Purpose: Hospice focuses on delivering high-quality, person-centric, holistic care that is comfort-based utilizing an interdisciplinary approach for individuals who are terminally ill. It is designed to provide comfort and support to patients and families with the goal to die at home and avoid emergency room visits and unplanned hospitalizations. Numerous patients are (re)hospitalized within 30 days of hospice admission. Review of the literature has identified sociodemographic and socioeconomic risk factors for hospitalization in this population. The purpose of this DNP scholarly initiative is to introduce a quality improvement project that can bring about a practice change in high-risk patients who are admitted to home hospice with the aim of implementing a nurse-driven transitional care bundle to reduce 30-day hospitalization rates. Theoretical Framework: Dr. Meleis’s middle-range transitions theory acknowledges that nursing care is needed throughout the transition process for patients experiencing changes. This framework consists of an intervention to facilitate the transition and an understanding of the experience itself, with the goal of enabling a healthy transition process. Methods: This DNP scholarly project involves a nurse-driven transitional care bundle for individuals who are newly admitted/readmitted to hospice care at a not-for-profit community-based hospice organization and are at high-risk for hospitalization. The transitional care bundle consists of increased nursing visits and follow-up for the first couple of weeks on service. Additionally, educational sessions will be provided to nursing staff with pre/post knowledge/attitudes surveys. The Plan-Do-Study-Act (PDSA) cycle methodology will be the approach used while planning and executing the project to test improvement measures and manage changes. Results: Qualitative and Quantitative analysis will be used to evaluate the data obtained from the transitional care bundle intervention and nursing staff surveys. It is hoped that among high-risk hospice patients, there are significant reductions in 30-day hospitalization rates. In addition, it is hoped that there will be an increase in the nurse’s knowledge and perception surrounding the care of hospice individuals and the practice of teach-back methodology. Conclusions/Implications: Hospitalizations are incongruent with hospice goals of care and frequently contribute to unwarranted suffering and a poorer quality of life for patients who wish to die at home supported by their loved ones. Findings of this DNP scholarly project initiative will shape recommendations for practice in the home hospice setting.

#19	Title	A Literature Review of the Effects of Outpatient Monitoring in Readmission Rates Due to Dehydration in Postoperative Ileostomy Patients
	Primary Presenter	Jasdeep Reehal
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	Affiliation	Hunter
	Specialization	Nursing
	Abstract	Issue: It is very common for ileostomy patients to be readmitted secondary to dehydration. The importance of identifying ways to reduce readmission would provide positive patient outcomes and reduce costs. This literature review addressed the following question: In adult patients status post

ileostomy creation, how does monitoring ileostomy output outpatient compared to no monitoring affect readmission rate due to dehydration?
 Description: This systematic search and limited review of the research literature was conducted using CINAHL, PubMed and the Cochrane Database. Keywords used included “adult inpatient s/p ileostomy” OR ileostomy OR “ileostomy patients”AND “monitoring outpatient” AND readmission rate OR dehydration rate. Results included one systematic meta-analysis, one randomized controlled trial, one novel pilot program, and four retrospective chart reviews. Results: Key findings indicated early discharge, high ostomy output during index admission, and elevated BUN/creatinine levels prior to discharge resulted in readmissions with electrolyte abnormalities within 30 days; most commonly on the 7th day post discharge. Thorough inpatient education on ileostomy care, interdisciplinary management, close outpatient monitoring and prophylactic oral or IV hydration post discharge contributed to decreased readmission rates and favorable electrolyte values. Conclusions and Recommendations: An interdisciplinary approach in managing the postoperative ileostomy patient is ideal in reducing readmission due to dehydration. Oral and IV hydration solutions post discharge are effective in readmission reduction. Identifying patients who are at high risk is beneficial in preventing dehydration. Future research and quality improvement measures can be conducted to initiate a new standardized protocol and plan of care for discharge aimed at reducing dehydration post discharge in the immediate postoperative period. Attention can be given to a patient’s health literacy levels, socioeconomic status, and access to healthcare.

#20	Title	Improving HCAHPS Score in the Cardiothoracic Stepdown Unit: Implementation of an Evidence-Based Transitional Care Bundle
	Primary Presenter	Mukta Mukta
	Email Contact	mukta.mukta57@myhunter.cuny.edu
	Affiliation	Hunter College-School of Nursing
	Specialization	Nursing
	Abstract	<p>Background: Patient satisfaction score, such as the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) score, is an essential reflection of the quality and safety of patient care provided in the health care setting. The Center for Medicare & Medicaid Services (CMS) uses the HCAHPS score to determine patient satisfaction, the quality of care provided, and hospital reimbursement. This positions hospitals to be more accountable for patient care and quality. Research shows a strong association between transitional care and HCAHPS score. Studies have shown that quality improvement initiatives consisting of transitional care bundles can improve HCAHPS scores and the quality of patient care.</p> <p>Purpose: The scholarly project aims to improve the discharge information and post-discharge HCAHPS score in the adult inpatient cardiothoracic stepdown population by introducing an evidence-based transitional care practice change by implementing a transitional care bundle. Method: The DNP scholarly project will use an evidence-based quality improvement approach to implement the evidence-based transitional care bundle in an inpatient cardiothoracic stepdown. The first intervention is implementing</p>

the transitional care bundle, which consists of the nurse-driven IDEAL discharge planning and strategies and tools and patient education brochures for cardiothoracic surgery patients. The second intervention provides structured educational training sessions to nurses on transitional care practice among cardiothoracic surgery patients. The implementation of the project will occur over three months. The pre and post-design will be used to measure change. The Plan-Do-Study-Act (PDSA) model will be used to observe changes from the current transitional care practice. Anticipated Results: The anticipated result will be a 10% improvement in the discharge information, and post-discharge HCAHPS score compared to the pre-implementation phase and an increase in nurses' knowledge of transitional care post-intervention. Implications to Clinical Practice: Implementing an evidence-based transitional care bundle is the key to improving patient quality of care related to discharge and patient satisfaction related to their discharge care. Transitional care practice is a top priority for hospitals as it can positively affect the quality of patient care and reimbursement.

#21	Title	Innovative Evidence-Based Provider-Led Fall Prevention Program: PrevFalls Bundle
	Primary Presenter	Fredeline Aime
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	Affiliation	CUNY Hunter
	Specialization	Nursing
	Abstract	Background/Significance: Falls are a prominent cause of injury and death in the elderly population, particularly among individuals with co-morbidities. Falls occur at a rate of 3–5 per 1000 bed nights, and it is estimated that 700,000 to 1 million hospitalized patients will fall each year. The Centers for Disease Control and Prevention (CDC), have taken steps to reduce knowledge deficits and increase efforts to prevent falls. The CDC suggests adopting the Stopping Elderly Accidents, Deaths and Injuries (STEADI) algorithm to support providers in building care plans for at-risk patients, allowing for awareness, interventions, and consultations associated with a reduction in falls and fall-related injuries. Purpose/Goal: The DNP scholarly project aims to introduce an evidence-based fall prevention practice change to address fall risk screening, assessment and interventions with the goal to reduce the fall rate in an inpatient unit. Methods: The DNP scholarly project will utilize an evidence-based quality improvement approach to implement the PrevFalls Bundle. The fall prevention program will consist of the STEADI Toolkit enhanced with Morse/Fall TIPS assessment. The Plan-Do-Study-Act (PDSA) model will test a shift in practice change to foster provider skills, utilization, and adherence to evidence-based fall prevention best practices. Provider educational sessions will allow for successful implementation and sustain PrevFalls Bundle in clinical practice. A pre-post comparison design will be used to assess the impact of a change marked by reduced patient falls and improved patient outcomes. Anticipated Projected Results: The anticipated results are to improve provider skills, utilization, and adherence to an evidence-based fall prevention practice, as evident by decrease inpatient fall rates by 10%. Conclusions/Implications: Implementing the evidence-based provider-led fall prevention program is an important step in

improving clinical practice, improving patient safety, reducing falls, and preventing fall-related deaths. Providers in acute-care settings are well-positioned to put fall prevention strategies into practice.

#22	Title	Flourishing Among College Students in the United States: An Integrative Review
	Primary Presenter	Christine Gilchrist
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	Affiliation	The Graduate Center, CUNY
	Specialization	Nursing
	Abstract	<p>Issue College students' psychological well-being has been of national concern for more than a decade, and the additional psychological burden of the COVID-19 pandemic remains unclear. The Flourishing Scale ($\alpha = 0.87$) provides a single psychological well-being score. The purpose of the review was to determine which factors are associated with flourishing among college students in the United States (U.S.). Description On October 9, 2021, the APA PsycArticles, CINAHL Complete, ERIC, and MEDLINE databases were searched for "college students or university students or undergraduates" AND "flourishing." Inclusion criteria of peer-reviewed, written in English, and published from 2009-2021 yielded 143 unique results. Studies conducted outside the U.S. or that did not use the Flourishing Scale as a measurement were excluded. Results Eleven studies met the criteria. Findings on the association of flourishing with gender differed. Sexual and gender minority students' flourishing was lower than their cisgender heterosexual peers. Racial and ethnic minority students had lower flourishing at certain ages than non-Hispanic white students. Students who were citizens or had permanent immigration status had higher flourishing than international students with visas; students with undocumented, other documented, and those who preferred not to disclose had the lowest flourishing. Veterans with a service-connected disability had lower flourishing than veterans who did not. Students with high subjective social status profiles had higher flourishing than those with moderate, upward, or low subjective social status profiles. Flourishing may be associated with a student's learning environment, major, and level of anxiety. Conclusions and Recommendations There is limited research on the factors associated with U.S. college students' flourishing. Research has compared flourishing by different demographic characteristics but has not examined the impact of simultaneously holding multiple identities that were historically oppressed. Future studies about flourishing with intersectional analysis would add depth to the knowledge base.</p>
#23	Title	Use of Female External Urinary Catheters and Incidence of CAUTIs: A Limited Literature Review
	Primary Presenter	Michelle Rivera
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	Affiliation	Queensborough Community College, CUNY
	Specialization	Nursing
	Abstract	<p>Incidence of catheter associated urinary tract infections (CAUTI) is an important quality indicator in healthcare. The Agency for Healthcare Research and Quality projected that treatment for CAUTIs cost \$340 to 450</p>

million annually. CAUTIs are also the most common healthcare associated infection causing prolonged morbidity, mortality, and suffering to patients. Use of female external urinary catheters (FEUCs) only began in 2016, compared to male external urinary catheters that have been in use for decades. FEUCs have since increased in popularity since women are three times more likely than men to develop UTIs. This led the proponents to ask: "Does use of FEUCs in healthcare institutions decrease incidence of CAUTIs?" A limited literature review was conducted to answer this question. Findings from this review indicate that use of FEUCs decrease incidence of CAUTIs in healthcare institutions. However, evidence that support use of FEUCs are limited and low-level due to novelty. Further studies ought to be conducted in this regard.

#24	Title	Gender Role Conflict in Undergraduate Male Nursing Students: Preliminary Findings
	Primary Presenter	Randelle Sasa
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	Affiliation	The Graduate Center, CUNY
	Specialization	Nursing
	Abstract	Background: The Bureau of Labor Statistics estimated that men consisted only 12 percent of the registered nurse (RN) workforce. The Future of Nursing (2020-2030) report emphasized the need to increase the proportion of men in the profession to alleviate staff shortages and improve healthcare. Lack of gender diversity and potential gender bias in a "women's profession" may contribute to shortages in the male RN workforce. Purpose: This is an ongoing descriptive study that utilized three frameworks to explore variables that may impact male undergraduate students' intent to graduate from the nursing program. The present framework analyzed was gender role conflict [GRC] (O'Neil, 1985; 2014). GRC may be a possible contributing factor to undergraduate male nursing students' dissatisfaction and attrition from nursing programs. We have found no study that has previously measured GRC in this population in the US. Methods: A cross-sectional online survey of undergraduate male nursing students was conducted. A convenience, purposive sample was recruited from the National Student Nurses Association (NSNA), which has over 5,000 male members. One hundred students from 33 of the contiguous states participated. Preliminary findings: Participants in the survey were mostly Caucasian (67%),
#25	Title	Noninvasive Ventilation and Enteral Nutrition in Critically Ill Adults: A Limited Literature Review
	Primary Presenter	Harpreet Kaur
	Email Contact	harpreet.kaur847@student.qcc.cuny.edu
	Affiliation	Queensborough Community College, CUNY
	Specialization	Nursing
	Abstract	Management of patients receiving noninvasive ventilation (NIV) and enteral nutrition remains a challenge in acute care settings This problem has become widespread problem during the COVID-19 pandemic, where delayed intubation protocols meant that patients are kept on NIV for an extended period. Breathing and eating are basic life processes. While airway

and breathing are top on the list of clinical priorities, the evidence suggests that malnourished patients have poorer outcomes and lengthier hospital stays. Alternatively, use of feeding tubes may compromise the effectiveness of NIV. Gastric distension may also limit chest expansion and cause aspiration. The foregoing led the investigators to ask: How safe is it to give patients oral/ enteral nutrition while on noninvasive ventilation? A literature review was conducted to answer this question. Articles were limited to peer-reviewed studies written in English from 2014 to 2022 and selected based on relevance. There is concordance in the literature that critically ill adult patients receiving NIV are largely underfed if not nil per os (NPO) during the first 24-48 hours of hospitalization. There is evidence to support that enteral nutrition is associated with higher mortality, risk of intubation, and airway complications. Patients fed using nasogastric tubes while on NIV have reportedly higher complication rates than their counterparts who are fed per os. In spite of the risks, several authors maintained that use of NIV should not preclude patients from being fed. Moreover, a multidisciplinary team is needed to assess the patient's overall health condition, and to ascertain a suitable nutritional modality.

#26	Title Primary Presenter Email Contact Affiliation Specialization Abstract	<p>The Psychological Impact Of COVID-19 On Nursing Students</p> <p>Dimpal Vaghela Pradipbhai creid@qcc.cuny.edu Queensborough Community College Nursing</p> <p>(1) Issue: It is not an understatement to say college students are one of the most vulnerable within today's society. These students are significantly impacted by many factors including having the desire to pursue a higher education, financial insecurities, COVID-19 regulations, social distancing, mandated mask regulations, hybrid learning, limited clinical exposures, zoom interactions, testing anxieties and family responsibilities. On 11th March 2020, the World Health Organization (WHO), declared Coronavirus, COVID-19, a pandemic (WHO 2020). This declaration was not without its share of new stressors, restrictions, uncertainties, and concerns. The world was in a state of panic and unsurety. People were forced into mandated lockdowns. Some businesses, educational facilities, religious institutions, and out-patient medical facilities were forced to close. People were dying at an unprecedented rate. Hospitals, morgues, and funeral homes were over run. To continue our educational duties, so we can create and place new nurses in the front lines of defeating COVID-19, we learned and embraced new terminologies such as zoom/virtual classes, clinicals, exams and meetings. Adjusting to our new way of life was not an easy task. The restrictions provided very limited access for students to gain experiences and exposures. Learning lectures and clinicals online were regularly inhibited by lack of or limited internet access, lack of privacy and lack of face-to-face teachings. (2) Description: A limited literature of 10-15 articles from Google Scholar, CINAHL and EBSCO were utilized to determine the psychological impact of COVID-19 on nursing students during the pandemic. Key words were, impact, psychological, stress, pandemic, nursing, students, depression, lockdowns, technology and recorded. (3) Results: Students</p>
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emphasized fear, anxiety, loneliness, etc. At first, the shutdown was enjoyable and acceptable, but as it progressed, they experienced boredom, frustration, depression, and anxieties. The days became monotonous. Some studies have shown students contemplated suicide. They also realized that the virus did not discriminate. Some students voiced their opinions and criticisms that some faculties were not prepared for the virtual world. Students also emphasized their concerns that virtual exams were more stressful than in person. (4) Conclusions/Recommendations: During the pandemic, nursing students emphasized concerns such as fear, anxiety, despair, unhappiness, boredom, and lack of interest to the daily activities of life. Everything became repetitious. Some students claimed that time management became an issue. Long hours were spent in front of the computers. Internet access was unreliable and concentration in the home was difficult. Some student stated that being in their own environment distracted them from the allotted time to complete their exams. Some literature stated that the pandemic affected students both negatively and positively. One of the positive aspects was that “the virus does not discriminate.” It was recommended that empowering nursing students during their educational life will be a positive contributing factor for the development of the students and their profession.

#27	Title Primary Presenter Email Contact Affiliation Specialization Abstract	NP Led Hypertension Management: The Measure Right / Live Right Program Mary Lou Reidy marylou.reidy09@myhunter.cuny.edu Hunter College School of Nursing Nursing Background Hypertension affects approximately 45% of the adult population in the United States. It is the most significant modifiable risk factor for heart disease and stroke, two of the leading causes of death in the nation. Yet only 25% of those affected have the disease under control. Evidence indicates that errors occur frequently during blood pressure measurement and can hinder proper management of hypertension. Clinical guidelines recommend periodic staff retraining to improve accuracy. Guidelines further endorse clinician-led interventions that support patients in adopting lifestyle modifications that have been shown to reduce blood pressure. Purpose The aim of this scholarly evidence-based initiative was to increase the rate of blood pressure control in an outpatient cardiology practice as measured by CMS metrics by enhancing the use of evidence-based clinical guidelines. Methods The DNP scholarly project employed an Evidence-Based Quality Improvement approach to implement an NP-Led hypertension management program titled "Measure Right / Live Right" in an outpatient cardiology practice. The first objective was to optimize the patient-clinician encounter and enhance patient self-management of their hypertension. A clinician-driven evidence-based bundle that assisted patients in identifying and addressing barriers to self-care was implemented in support of this objective. The second objective was to improve the accuracy of blood pressure measurement. This was guided by an evidence-based hands-on retraining program to promote accurate blood pressure measurement supported by American Heart Association guidelines. A pre-
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post comparison design was used to test a change over eight weeks of implementation Preliminary Results The results demonstrated that the NP-Led Hypertension Management program led to an increase in the rate of hypertension control for the practice. The evidence-based hands-on re-training program improved the knowledge of office staff after completing the educational program Conclusions / Implications for practice Successful implementation of an evidence-based program to improve control of hypertension will benefit patients with hypertension by preventing the sequelae of uncontrolled disease. The CMS Value-Based Payment System ties financial reimbursement to hypertension control. Improved rate of control will bring monetary rewards to the cardiology practice and the parent healthcare organization

#28	Title	Interprofessional Education: An Integrative Approach to Advancing Population Health for Hunter College Social Work and Psychiatric Mental Health Nursing Students
	Primary Presenter	Dunia Garcia
	Email Contact	dg2366@hunter.cuny.edu
	Affiliation	Silberman School of Social Work
	Specialization	Nursing, Social Work
	Abstract	<p>Issue: Health care workforce shortages necessitates the increase in collaboration and teamwork across the health professions. Traditionally, training and preparation of healthcare professionals has occurred in silos. Although healthcare professionals are expected to work with others in a multidisciplinary context, each professional discipline trains its members in a defined manner in accordance with their accreditation standards. Interprofessional education (IPE) occurs when two or more professions learn with, about, and from each other to enable effective collaboration and improve health outcomes. The need for social work and nurse practitioners who are able to competently work in interprofessional healthcare teams and serve emerging needs has become critical. Description: The Cabrini-Hunter Fellowships for Social Work and Nursing Students (CHF) engages students from the Silberman School of Social Work and Hunter Bellevue School of Nursing in interactive learning with each other. The CHF is centered on the core competencies in four domains of interprofessional team-based practices: values and ethics, roles/responsibilities for collaborative practice, interprofessional communication, and teamwork and team-based care. The IPE seminar series focus on the foundation of knowledge, skills, and values they need to perform interprofessional teamwork and provide effective patient-centered collaborative care. Lessons Learned: Interprofessional education can increase patient safety, promote optimal patient outcomes, decrease fragmented communication, and strengthen health systems. Cabrini-Hunter Fellows report an increase confidence in their ability to contribute in an interprofessional team. Cabrini-Hunter Fellows state that the seminars provide opportunities to interact with other students; opportunities to learn from one another; and the application of relationship-building values and principles of team dynamics that includes planning and delivering patient/population-centered care. Next Steps: Interprofessional education promotes collaborative</p>

learning experiences in health professionals for team-based care of patients. The Cabrini-Hunter Fellowship plans to use interprofessional simulation and standardized patients to promote change in communication, collaboration, and professional identity.

#29	Title	Evaluating Usability of Health-related Websites by Filipino-Americans and Nursing Informatics Experts
	Primary Presenter	Kathleen Begonia
	Email Contact	kcb311@nyu.edu
	Affiliation	CUNY Graduate Center
	Specialization	Nursing
	Abstract	<p>Background: Filipino-Americans are an understudied minority group with high prevalence and mortality from chronic conditions, such as cardiovascular disease and diabetes. Facing barriers to care and lack of culturally appropriate health resources, they frequently use the internet to obtain health information. It is unknown whether they perceive health-related websites to be useful or easy to use because there are no published usability studies involving this population. Methods: Using the Technology Acceptance Model as a theoretical framework, this study investigated the difference between website design ratings by experts and the perceptions of Filipino-American users to determine if usability guidelines influenced the perceived ease of use and perceived usefulness of health-related websites. This quantitative design included two procedures. 4 nursing informatics experts evaluated 10 health related -websites selected from the National Institutes of Health Reporter database. Based on results from the heuristic evaluation, websites were divided into two categories: websites that met usability criteria vs. websites that did not meet usability criteria. The highest and lowest rated websites were evaluated by the Filipino-American participants. Results: This study highlighted the discrepancy between the experts' and participants' views of website usability. Filipino-American participants found the NIH website more useful despite the fact that the informatics experts rated the APIAHF website with the highest usability score. Conclusion: By conducting research on a Filipino-American sample, this study adds to the scarce body of Filipino-American research and is a key step towards improving their online health resources. The study aligned with the Office of Disease Prevention and Health Promotion's Healthy People 2020 Health Communication/Health Information Technology (HC/HIT) 8.2 objective to increase the proportion of quality, health-related websites that follow established usability principles. The findings should serve as an impetus for examining and refreshing usability guidelines with the involvement of communities of interest.</p>
#30	Title	Protocol to Improve Identification and Management of Vertebral Compression Fractures
	Primary Presenter	Tao Fen Cheng
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	Affiliation	Hunter College CUNY
	Specialization	Nursing
	Abstract	<p>Background/Purpose: Seventy percent of 1.5 million annual vertebral compression fractures (VCF) in older adults remain undiagnosed and</p>

untreated. Delayed VCF recognition and management deteriorates physical function, adds to pain-associated medical complications, contributes to a lower quality of life, and accumulates costs up to 17 billion dollars annually. The protocol aims to shorten the time intervals between diagnosis and treatment by applying a care pathway that improves early identification and effective care. Theoretical Framework: The Donabedian framework provided a roadmap to improving the health outcomes of patients with VCF by illustrating the core concepts of structure, process, and outcomes. Methods: Iowa's model guided the project by integrating an evidence-based practice change. The comparative analysis between 2019 and 2021 was done to evaluate the changes in time intervals. The visual analogue scale (VAS) and the Oswestry Disability Index (ODI) were used to assess the relationship between time intervals and reduction of pain duration and duration of immobilization. Descriptive and inferential statistical analyses were done using mean, standard deviation, percentages, t-tests, and Chi-Square tests. Result: Pre-post knowledge surveys showed 47% improvement in providers' knowledge in VCF management, but it was not statistically significant. There was no association between age groups and falls in 2019 and 2021. There was an association between sex and falls. Males had higher risk for falls than females ($X^2(14) = 40.524; p < .001$). The average number of days from initial visit to diagnosis was 14 days in 2019 compared with 6 days in 2021 ($p = .004, t(9) = 3.917$). The time interval between the initial visit and treatment was 20 days in 2019 compared with 15 days in 2021. The time interval associated with functional mobility indicated a minimal decrease from 2019 (34 days) to 2021 (27 days). The time interval associated with pain reduction was 27 days with VAS scores ranging 2-3 in 2021 compared with 34 days with VAS scores ranging 3-4 in 2019. Conclusions & Implications: The streamlining of the VCF management process, shortening the diagnosis and treatment intervals, early physical mobilization, and timely pain reduction improved patients' outcomes. This will lead to enhanced osteoporotic management, cost reduction, and improved quality of life.

#31	Title	Reducing Surgical Cancellations in Pre-Admission Testing (PAT): An NP-led Evidence-Based High-Risk Escalation Protocol (H-REP)
	Primary Presenter	Makia Hughes
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	Affiliation	Hunter College
	Specialization	Nursing
	Abstract	Background/Significance: Surgery cancellations are detrimental to the healthcare institution and preoperative patient. The institution suffers significant reputational and financial drawbacks, while the patients experience psychological, social, and financial consequences due to an unsuccessful preparation for surgery. There are many reasons for surgery cancellations, however most of them are preventable. This poses a need for establishing a standardized, evidence-based practice in the preoperative outpatient setting to reduce the occurrence of cancellations. Implementing an evidence-based protocol can provide the ambulatory surgery nurses with clear parameters when identifying high-risk patients for referral to the Pre-

Admission Testing (PAT) provider, to facilitate an effective intervention before the surgical procedure. Purpose: The purpose of this DNP scholarly project was to implement an evidence-based escalation protocol to reduce surgery cancellations in the outpatient surgery setting. Methodology: This DNP scholarly project used the Evidence-Based Quality Improvement approach to implement the High-Risk Escalation Protocol (H-REP) to reduce surgery cancellations in the outpatient surgical setting. This escalation protocol uses the American Society of Anesthesiologists (ASA) physical status classification system to standardize the preoperative assessment process and increase appropriate nurse-to-provider referrals in the PAT clinic using multiple Plan-Do-StudyAct (PDSA) cycles. Structured educational and coaching sessions were also implemented to improve nurse knowledge in promptly identifying high-risk preoperative patients. A pre-post design was applied to measure the effectiveness of the practice change. Results: The DNP scholarly project demonstrated an increase in nurse-to-provider referrals, reduced surgical cancellations, and improved ambulatory surgery nurse knowledge in identifying high-risk preoperative patients in the Pre-Admission Testing Clinic. Conclusion/Implication: The evidence-based escalation protocol assumes a significant influence on nurse expertise when screening high-risk patients for ambulatory surgery. This allowed the PAT provider an opportunity to refer patients to the appropriate service or repeat diagnostics tests, in order to medically optimized patients prior to surgery and avoid cancellations.

#32	Title	Sisters Are Doing It For Themselves: A National Sample of Black and White Women Physical Activity Experiences
	Primary Presenter	Shawna Townsend
	Email Contact	stowndsend@gradcenter.cuny.edu
	Affiliation	The Graduate Center, CUNY
	Specialization	Nursing
	Abstract	Background: Physical activity is associated with lower risks of cancer, the second leading cause of death among women. Yet women, compared to men, consistently participate in less physical activity than recommended. Black women, compared to white women, have even lower rates of physical activity, have poorer health outcomes, and are more likely to die from cancer. Data that explains the difference in physical activity among white and Black women is limited. Method: This study employs the self-and-family management framework, and intersectionality as theoretical frameworks; employs secondary analysis of the Health Information National Trends Survey (HINTS) dataset; and utilizes hierarchical regression modeling to examine the relative impact of (a.) cancer history (b.) cancer prevention knowledge and beliefs, as well as (c.) key demographic variables on physical activity for a national sample of adult females. To determine how these relationships operate within two major racial groups, analyses were conducted separately for Blacks and whites. Results: Findings from multiple regression analyses suggest that “knows family history” of cancer ($p < .05$), “talks to friends” ($p < .01$), and “genetic risk” ($p < .05$) were associated with increased physical activity in Black women but not in white women. “Cannot prevent cancer” ($p < .05$) was associated with decreased physical

activity in white women but not in Black women. Use of a “smartphone” (p < .001) and “wearable device” (p < .001) to track health, as well as “education” (p < .01) were associated with increased physical activity in white women but not in Black women. Conclusion: This study demonstrated the differences in factors associated with increased physical activity in Black women compared to white women. These findings will serve to improve the health outcomes of Black women. Initiatives to improve physical activity in Black women should incorporate these intersectional findings.

#33	Title	Reducing CAUTI Rates in the Medical-Surgical Setting: A Nurse Driven “CUT” CAUTI Protocol
	Primary Presenter	Josiane Joseph
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	Affiliation	CUNY Hunter College
	Specialization	Nursing
	Abstract	Background: CAUTI’s make up 40% of all hospital acquired infections (making it one of the most common sources of infection) and \$13,000 patients in the United States die yearly from CAUTI’s. In general, 80% of urinary tract infections are associated with indwelling urinary catheters and the best practice for CAUTI prevention is early removal. Nurses are mainly responsible for inserting, removing, and maintaining indwelling catheters. Daily nurse rounding on indwelling catheters, checklist for catheter removal and proper maintenance during RN handoff, encouraging communication between interdisciplinary teams and selection of catheter alternatives are best practices for decreasing CAUTI rates. Purpose: The DNP scholarly project introduced evidenced-based practice change through a nurse-driven “CUT CAUTI” protocol to effectively reduce catheter-associated infections. Methods: The DNP scholarly quality improvement project utilized evidenced based practice change to implement an innovative nurse-driven “CUT CAUTI” protocol. The “CUT CAUTI” protocol was formed using a checklist tool, evidenced based algorithm and interdisciplinary round script. The protocol was supported with educational sessions on proper maintenance techniques, checklist and algorithm use. The pre- and post-comparison design and Plan-Do-Study-Act (PDSA) model were used to execute and evaluate the practice change at multiple implementation levels. Results: The preliminary results of this project suggest a reduction in the CAUTI rates on 3 medical surgical units, increased satisfaction on RN handoff on indwelling catheters and increased satisfaction on team collaboration for early removal of catheters. Conclusions& Implications: Implementing an evidenced- based “CUT CAUTI” Protocol significantly decreased CAUTI rates on the initiated units to promote better patient outcomes by promoting early removal of indwelling catheters, and as a result of the interventions, communication among nurses and the team improved.

#34	Title	The Efficiency and Safety of Re-sternotomy in the Intensive Care Unit for Postoperative Bleeding after Cardiac Surgery
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	Specialization	Nursing

Abstract

Issue: One of the key components of Cardiac Surgery Advanced Life Support (CALs) is the emergency re-sternotomy, which is oftentimes performed in the intensive care unit (ICU) setting. Yet, this approach can be of great concern in terms of its efficiency and safety. The literature review addressed the following question: Among cardiac surgery patients with postoperative bleeding, is the emergency re-sternotomy performed in the ICU setting more efficient and safer than that performed in the operating room (OR)? Description: Such electronic databases including PubMed, EMBASE, and CINAHL were searched. The following terms were used to search the databases: “re-sternotomy AND cardiac surgery AND intensive care unit AND bleeding.” Three retrospective observational studies comparing re-sternotomy in the ICU with re-sternotomy in the OR in cardiac surgical patients who underwent postoperative bleeding were included. Results: Key findings indicate that the 30-day mortality, the length of ICU stay, and the rate of sternal wound infection were not significantly different between the two groups. In addition, re-sternotomy in the ICU had an advantage in operative time for bleeding control as compared with the OR group. Conclusions and Recommendations: Emergency re-sternotomy performed in the ICU setting for cardiac surgical patients with postoperative bleeding reduced the operative time for bleeding control and did not significantly increase the 30-day mortality, the length of ICU stay, and the rate of sternal wound infection. However, larger, multicenter trials are needed to generalize these findings to other institutions with different ICU and operating room resources.

#35	Title	Increasing Veteran Video Encounters by the Implementation of a Teach-Back (TB) Educational Intervention on the Veteran Video Connect (VVC) App via Smartphone.
	Primary Presenter	Ellen Flanagan
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	Affiliation	Hunter College of Nursing
	Specialization	Nursing
	Abstract	Background/Significance: During the COVID-19 pandemic health care providers converted patient appointments to communication through telephone or video. Access to care is a significant issue for unhoused and recently housed individuals. Efforts to improve access to service for this vulnerable population are required to reduce emergency room acute care visits and improve continuity of care (Laliberte et al., 2020). Purpose/Goal: The aim of this quality improvement project is to implement a Teach-Back (TB) educational intervention to increase utilization and access to care for unhoused and recently housed veterans in the HUD-VASH program with smartphones using the VVC app. Methods: This Evidenced Based Project (EBP) will be a pilot study consisting of 50 veterans within the New York Harbor Healthcare System (NYHHS) part of the larger Veterans Health Administration (VHA). This project will be guided by the Plan-Do-Study-Act (PDSA) cycle methodology to implement the evidence-based TB method educational intervention to increase video telehealth encounters and access to care for HUD VASH veterans. Then pre and post-intervention encounter data will be compared to evaluate the results of the TB educational

intervention. Anticipated Projected Results/Findings: The proposed quality improvement initiative expects to increase VVC video encounters by 50%. Telehealth is an opportunity for everyone to receive the health care they need, and it is anticipated that this will reduce emergency room and urgent care visits. Conclusions/Implications: Telehealth became a primary method of delivering care. Suddenly, providers and patients were expected to utilize technology with very little training in telehealth. All evidence suggests that telehealth is a sustainable modality for healthcare. By providing knowledge and understanding of the smartphone and VVC app, providers and patients will be prepared to function in the new telehealth arena.

#36	Title	Implementation of A Peer-to-Peer (P2P) Program: A QI Initiative to Improve Stem Cell Transplant (SCT) Patient’s Self-Efficacy
	Primary Presenter	Nancy Cruz Sitner
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	Affiliation	Hunter-Bellevue School of Nursing
	Specialization	Nursing
	Abstract	Background/Significance: Peer-to-Peer (P2P) programs allow patients to share knowledge, teach skills, provide technical assistance, and connect patients with resources from experienced patients. The SCT recovery process is complex and globally affects patients’ well-being, with a prevalence of symptom burden at 89% post -SCT within the first 100 days and a high readmission rate at 30%. The literature shows that self-efficacy plays a crucial role for SCT patients, such as managing self-care, symptom distress management, and health care utilization. Purpose/Goal: This QI initiative aims to evaluate the effect of the clinical team-led P2P program on self-efficacy. The primary objective is to introduce and increase clinical team knowledge about the P2P program; the secondary objective is to increase the number of patient referral matches. The tertiary objective is to increase patient self-efficacy in a 3–6- month timeframe. Methods: The theoretical framework for this QI project will be guided by Nola Pender’s Health Promotion Model (HPM) in a hospital SCT unit setting with approximately 20 patient sample size. The QI pre- and post-approach will be used to implement the P2P program. The first steps included creating a study design, assessing and identifying knowledge gaps, followed by staff education, and providing bedside coaching. An implementation plan was developed. The measures to analyze data will include patient referral metrics, General Self-Efficacy Scale surveys, and pre and post readmission data metrics. Anticipated Project Results: Results will show an anticipated increase in patient referral to the P2P program by the clinical team by 20% and an improvement in self-efficacy scores by 10-15% overall. Additionally, it is anticipated that self-efficacy will decrease readmission rates by 5% in a 3–6-month timeframe. Conclusions/Implications: The data will align with current evidence that P2P programs improve patient self-efficacy and should be incorporated as a vital component of SCT patients’ care. The goal is that this QI project will inspire others to lead changes within their organizations and show exemplary leadership in the care of SCT patients.

#37	Title	Practice Change from Usual Hypertension (HTN) Care to Using the Measure Act Partner (MAP) Hypertension Protocol to Improve HTN Control in
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		Geriatric Home Care Patients in Manhattan.
	Primary Presenter	Patricia A Mitchell
	Email Contact	Patricia.Mitchell61@myhunter.cuny.edu
	Affiliation	Hunter-Bellevue School of Nursing
	Specialization	Nursing
	Abstract	<p>Background/Significance: Hypertension in older adults is highly prevalent in the US; seen in 75% of adults aged 65 and over. It's a primary contributing cause of death. Older adults have the highest incidence of HTN and the lowest national control rate at 47.9%, posing a health care and financial burden on our system. Healthy People 2030 goal is to increase HTN control to 60.8%. Studies show the evidence-based practice (EBP) Measure Act Partner (MAP) protocol is more effective in improving blood pressure (BP) control compared with usual HTN care. Purpose/Goal: The purpose is to introduce an EBP change in the treatment of HTN at Manhattan House Calls (MHC). The goal is to increase HTN control at MHC from the existing 48% to 53%. Methods: Plan-Do-Study-Act (PDSA) model will guide this initiative at MHC in-home setting. The sample includes a cohort of 30 Medicare patients over age 65 with HTN. Pre and post-design will be used. Gaps in knowledge identified. Nurse Practitioner (NP) education and patient in-home coaching will be provided. Pretests, posttests, teach-back methods, and open-ended questions will be measured. Daily measurement of BP via self- blood pressure monitoring (SBPM) will occur over a 3- 6- month period, including pre and post MAP. Revision of the process will allow for improvements. Data analysis of BP values will determine the effectiveness of MAP. Anticipated Projected Results /Findings: It is anticipated that HTN control will increase from 48% to 53% at MHC within 3-6- months of implementing MAP. Conclusion/Implications for the clinical practice: Continued implementation of MAP by NPs at MHC will increase the HTN control rate in this elderly population. Doing so will improve health outcomes, quality-of-life and decrease health care costs.</p>
#38	Title	The MAP Protocol: An Innovative Approach to Treating Uncontrolled Hypertension in the Primary Care Setting
	Primary Presenter	Chance Turner
	Email Contact	chancedturner@gmail.com
	Affiliation	Hunter College
	Specialization	Nursing
	Abstract	<p>Background/Significance: According to NYC Health, hypertension is the leading cause of heart disease and stroke, which kill more New Yorkers than any other disease (2021). Uncontrolled hypertension has been identified in this practice setting as a quality indicator for which improvement is needed. An estimated 46% of the adult population with hypertension has been identified as uncontrolled (most recent blood pressure reading greater than or equal to 140/90). According to Healthy People 2030, reducing the proportion of adults with high blood pressure, increasing control of high blood pressure in adults, and improving cardiovascular health in adults remain current objectives (U.S. Department of Health and Human Services, 2021). Hypertension and its sequelae can be seen nationwide, and its this practice setting it remains a top priority. Theoretical Framework: Kotter's 8</p>

Step Organizational Change Model was selected to help guide this capstone project. This model will ensure the organization's buy-in and continued success when followed accordingly. Methods: This will be a pre-post study pilot design. Providers will implement the Measure Accurately, Act Rapidly, and Partner with Patients (MAP) protocol over a 3-6 month timeframe. Follow-up visits will be completed either remotely or in-person. Post intervention blood pressures will be recorded and if

#39	Title	Enhancing the utilization of Low-Dose Chest Computed Tomography (CT) Scan to Screen for Lung Cancer Among Current & Former Smokers of the World Trade Center Health Program
	Primary Presenter	Priscilla Asiamah
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	Affiliation	Hunter College
	Specialization	Nursing
	Abstract	<p>Background/Significance: Still in the United States, lung cancer is the leading cause of cancer deaths and the second most diagnosed cancer in both men and women. Even though there are many programs to help identify and reduce smoking, cigarette smoking is still a leading cause of lung cancers. Lung cancer kills more people each year than from breast, colon and prostate cancers combined. In 2021, 235,760 new cases of lung cancer was diagnosed in the United States. Furthermore, about 131,880 people died from the disease in 2021. Screening for lung cancer is the best way to detect the disease early. The U.S Preventive Services Task Force recommend that adults aged 50 to 80 years who have a 20-pack year smoking history and currently smoke or have quit within the past 15 years, undergo an annual screening with low-dose computed tomography (LDCT) to screen for lung cancer. Purpose/Goal: This DNP project will translate evidence into practice by focusing on the utilization of shared decision-making and the use of low-dose chest CT scan to screen for lung cancer among current and former smokers of the World Trade Center Health program. The goal for this project is to improve early detection of lung cancer among current and former smokers of the World Trade Center Health Program. Methods (Design, Sample, Setting, Measures, Analysis): The design for this DNP scholarly project is a quality improvement project. This project will consist of implementing a telephone based shared decision-making counseling intervention to screen current and former smokers for lung cancer at the World Trade Center Health Program. The outcome measures for this project is to measure how many current or former smokers who schedule and undergo a low-dose chest CT scan after they undergo the intervention. An analysis will be done pre/post intervention to determine the success of the intervention. Anticipated Projected Results/Findings: The anticipated results for this scholarly project is that, patients who meet criteria for screening will be able to make an informed decision about undergoing low dose chest CT scan for lung cancer screening. It is anticipated that, lung cancer screening rates at the WTC clinic will improve and lung nodules suspected to be cancer will be detected early. Conclusions/Implications for clinical practice: Implementing an evidence-based practice intervention to screen for lung cancer among members of the WTC health program is of utmost</p>

importance. The early detection of lung cancer will lead to better treatments, good survival rates and improved patient outcomes.

#40	Title	The Psychological Impact of Covid-19 on Nurses
	Primary Presenter	Jennifer Peyser
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	Affiliation	CUNY
	Specialization	Nursing
	Abstract	(1) Issue: In March 2019, the world experienced the devastating effects of a new virus called Covid-19, also known as the coronavirus or Severe Acute Respiratory Syndrome Coronavirus 2 or SARS-CoV-2. Covid-19 impacted nurses on all levels, physically, emotionally, spiritually, and above all, psychologically. Nurses experienced unprecedented anxiety levels, depression, emotional exhaustion, compassion fatigue, and low job and personal satisfaction. The psychological burden led to high rates of burnout in an already stressful environment and complete uncertainty of what the future would hold in terms of this Covid-19. (2) Description: A literature search was conducted using CINAHL, ProQuest, and Medline databases to examine peer-reviewed articles published between 2017-2022. Articles addressed psychological and mental health of nurses during the pandemic and ways to address the devastating events that nurses experienced. (3) Results: Healthcare facilities need to recognize the difficulties faced by all workers, especially nurses and the devastating impact Covid-19 had on their lives, now and in the future. Health care facilities are realizing that nurses need support to deal with the psychological impact burdens of Covid-19. Programs that hospitals started included mindfulness classes, peer support groups and training to identify psychological stress in oneself and others. Other modalities that helped nurses deal with psychological issues include yoga, meditation, and exercise. Also, nurses used spirituality to cope. (4) Conclusions and Recommendations: As healthcare is recovering from the devastating impact of Covid-19, the overall psychological impact of Covid-19 remains unknown. What is known is that the pandemic caused many nurses to consider leaving the profession, mental health issues including thoughts of suicide. Internal and external resources helped nurses to deal with the pandemic. The results of these interventions are limited and unknown and future research is needed to determine the effectiveness of the resources.
#41	Title	Using staff debriefing to reduce violence and improve outcomes in a psychiatric hospital
	Primary Presenter	Chelsea Cote
	Email Contact	
	Affiliation	Hunter College
	Specialization	Nursing
	Abstract	Immediate staff debriefing following a psychiatric emergency has been shown to improve patient outcomes by reducing restraint and seclusion rates through preventing reoccurring events. A debrief provides support for the staff's wellbeing after a potentially traumatic situation.
#42	Title	Heart Failure: Preventing Readmission in the Acute Care Facility
	Primary Presenter	Lyubov Gritsenko
	Email Contact	

Affiliation Hunter College
Specialization Nursing
Abstract Heart failure (HF) is a chronic, progressive condition, a leading cause of mortality, and is the leading cause of inpatient hospitalizations in the United States. HF readmission rates remain high among geriatric population. The proposed project will attempt to decrease the readmission rate by implementing a practice change using a comprehensive, evidence-based heart failure checklist for hospitalized elderly patients. The study will utilize an evidence-based HF checklist tool (AHA, 2013) which is focused on medication safety, patient education, and patient follow-up plans.

#43 **Title** Metabolic Monitoring in the Severely Mentally Ill
Primary Presenter Alexis Williamson
Email Contact
Affiliation Hunter College
Specialization Nursing
Abstract 1 in 25 Americans live with a serious mental illness (SMI). People with SMIs live 10-25 years less due to high rates of Metabolic syndrome (MetS). Purpose: To incorporate an evidence-based screening tool into routine clinical assessment which serves as additional surveillance in identifying and managing MetS in SMIs in the psychiatric setting.

#44 **Title** Reproductive Health Outcomes among Nail Salon Workers
Primary Presenter Nicole Hsu
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Affiliation Hunter College
Specialization Nursing
Abstract Background/Purpose: The environment in the nail salon industry exposes its workers to many toxic chemicals and substances, resulting in a myriad of detrimental health effects. Studies have been conducted showing a correlation between nail salon chemicals and negative health effects in the respiratory and musculoskeletal systems but limited in the reproductive aspect. The objective of this study was to examine if the air quality in nail salons posed a risk factor towards female workers of childbearing ages specifically.
Methods: Integrative literature review design was used. Several databases including PubMed, EBSCOhost and Google Scholar were used to conduct literature search. Following keywords such as “beauty industry”, “nail salon workers”, “cosmetologists”, “pregnancy/birth outcomes”, and “reproductive system” were used. Articles were screened by the following inclusion criteria: (1) written in English; (2) published within the past fifteen years; (3) conducted in North America; (4) included female workers in the beauty industry; and (5) reported reproductive health outcomes. The study population was inclusive to all female workers in the beauty industry because of the lack of studies focusing on reproductive health effects on nail salon workers.
Results: Five studies were selected for the review. Selected studies used cross-sectional (n=2), retrospective (n=2), or meta-analysis design (n=1). Reproductive health outcomes included adverse birth outcomes (spontaneous abortion, low birth weight, maternal complications, n=3) and

reproductive disorders (menstrual cycle abnormalities, n=2) among cosmetologists, manicurists, and/or hairdressers. Beauty workers are either at a slightly higher or at no risk of menstrual abnormalities and infant birth outcomes. However, the information gathered from the articles showed conflicting results on whether a significant relationship existed between the work environment and female reproductive outcomes.

Conclusion & Implications: Further research is needed to accurately determine whether there is a relationship between chemical exposure and reproductive health effects among female workers in the beauty industry. It is essential that public health educators make an effort to enforce stricter regulations upon the workplaces of the beauty industry to reduce adverse health effects and educate the workers on the importance of taking steps to care for their health.

#45	Title	Resilience versus susceptibility to stress is associated with distinct forms of regret
	Primary Presenter	Jasmine Shaikh
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	Affiliation	Urban School of Public Health
	Specialization	Public Health
	Abstract	Regret describes recognizing that alternative actions could have led to better outcomes. This can transform into behavioral consequences, altering subsequent valuations, but remains unclear if regret derives from a generalized computation for mistake appraisal or instead is made up of dissociable action-specific processes. Using a novel neuroeconomic decision-making paradigm, we found mice were differentially sensitive to fundamentally distinct types of missed opportunities following exposure to chronic social defeat stress or manipulations of CREB, a key transcription factor implicated in chronic stress action. Bias to make compensatory decisions after rejecting high-value offers (regret type I) was unique to stress-susceptible mice. Bias following the converse operation, accepting low-value offers (regret type II), was enhanced in stress-resilient and absent in stress-susceptible mice. CREB function in either the medial prefrontal cortex or nucleus accumbens was required to suppress regret type I but differentially affected regret type II. We provide insight into how adaptive versus maladaptive stress-response traits may be related to fundamentally distinct forms of counterfactual thinking and could steer psychotherapy for mood disorders such as depression toward unveiling circuit-specific computations through a careful description of decision narrative.

#46	Title	The Nutrition Labeling Act and the Weight Loss Experiences of African American Women
	Primary Presenter	Richardeanea Theodore
	Email Contact	richardeanea.theodore@nychhc.org
	Affiliation	Walden University
	Specialization	Public Policy Administration
	Abstract	Obesity has reached epidemic proportions in the United States with four out of five African American women, aged 20 and older, being overweight or obese, resulting in excessive morbidity and mortality. Policy interventions have been developed to address the issue, but without much success in this

population. The purpose of this Husserl-inspired phenomenological study was to better understand how nutrition labeling influences eating behaviors of overweight and obese African American women in their weight loss efforts. The SocioEcological Model for Food and Physical Activity Decisions (SEMFPAD) was the theoretical framework for this study. Purposeful sampling and snowballing were used to recruit 12 overweight or obese African American women in New York City between the ages of 25 and 65 who gave voice to their lived experiences through in-depth semistructured interviews. Data were analyzed using Colaizzi's 7- step phenomenological analytic method. A significant finding was how the culture of "thinness" not only cultivates stigma regarding body size and negative self-perception, but also burdens African-American women with shame that may suppress any public display of weight loss efforts either through reading nutrition labels or engaging in physical activity. Nutritional support networks that include family, friends, and exercise companions were identified as critical components of weight loss efforts. Community informed public policy interventions that improve access to healthy food options and incentivize weight loss efforts were identified as positive social change strategies. Such approaches could reduce obesity-related co-morbidities and provide policymakers and healthcare providers with culturally appropriate strategies that can work.

#47	Title	The Correlation of Hip Muscle Strength with Pelvic Alignment and Weight Distribution in Adults with Scoliosis
	Primary Presenter	Bridgit Shaefer
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	Affiliation	Hunter College
	Specialization	PT
	Abstract	Background Treatment of scoliosis has traditionally focused on the trunk, while little research has focused on evaluation or treatment of the lower extremities in people with scoliosis. It is unknown whether scoliotic curve type and resultant pelvic shift contribute to hip muscle strength imbalances. Methods In a sample of 1 subjects with scoliosis and 6 subjects without scoliosis, the presence of a lateral pelvic shift was assessed using a plumb line measure. Spinal curves were classified using the Adam's forward bend test, and standing weight distribution was measured using two scales; hip abductor and adductor strength were measured using a hand-held dynamometer. Using these assessments, asymmetries in weight distribution and hip strength were analyzed for correlation with presence of scoliosis and presence of a lateral pelvic shift. Results Standing weight distribution was not collected for any subject due to resource limitations. A total of 7 subjects were included in this study, including 1 subject positive for scoliosis. A chi-square to compare pelvic shift and direction of muscle strength asymmetry for both abductors and adductors was performed. Results indicated subjects with a right or nonexistent lateral pelvic shift consistently had stronger abductors on their right side (n=4). Subjects with a left lateral pelvic shift consistently had stronger hip abductors on their left side (n=3) including the subject with scoliosis (n=1). This correlation was significant with a p value of .008. However, no correlation between lateral

pelvic shift and hip adduction strength was found among the subjects. Conclusion These findings indicated pelvic shift and muscle strength asymmetry may be prevalent among both scoliosis and non-scoliosis populations.

#48	Title	Effects of Intermittent vs Continuous Straight Leg Raise Performance in Multiple Sclerosis
	Primary Presenter	Lisa Fajardo
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	Affiliation	Hunter College
	Specialization	PT
	Abstract	Background: Previous studies have utilized both endurance and resistance exercise in persons with Multiple Sclerosis (pwMS) and demonstrated significant improvements in strength, motor control, and fatigue. Past research has proven that intermittent (INT) endurance training reduces fatigue and increases exercise volume performed in pwMS. However, no studies were performed on INT training versus continuous (CONT) training using a resistance protocol in this population. The present study was designed to examine the effect between INT versus CONT straight leg raise (SLR) performance in pwMS. We hypothesize that pwMS will perform a greater volume of SLR and feel less fatigued if they perform them intermittently than if they perform them continuously. Methods: Using a Within Subjects Crossover design, 8 individuals with MS performed an INT or CONT SLR protocol. The subjects crossed over after a one-week washout period. The effects of INT versus CONT training were measured by the number of SLR repetitions performed, and the Visual Analog Scale of Fatigue (VASF) was used as a measurement of subjective fatigue before and after each protocol. Subjects in the CONT condition performed SLRs consecutively and subjects in the INT condition performed one SLR every 6 seconds. They continued this protocol until they became too fatigued to continue. The difference between the mean number of completed SLRs under each condition was examined using a paired T-test, with a significance level of 0.05. Results: Data indicated a statistically significant difference in SLR performance, with higher repetitions being completed in the INT condition compared to the CONT condition. Although not statistically significant, on average, the change in VASF was less in the INT condition compared to the CONT condition. Conclusion: These results suggested that INT exercise may be more beneficial for increasing exercise volume in pwMS.
#49	Title	The Development of Sitting and Multi-Directional Reaching
	Primary Presenter	Sara Ahlouche
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	Affiliation	Hunter College
	Specialization	PT
	Abstract	This study explores infants' sitting trunk and arm control during front and side reaching. In this cross-sectional observational study, we tested 21 typically developing infants, all independent sitters, between 5 and 9 months. Infants sat on the floor with their legs outstretched and reached toward a toy for M = 5 times in the forward and side directions. Video and

machine learning algorithms were used to estimate kinematic measures of trunk and arm control in the primary planes of motion (i.e., anterior-posterior plane during front reaching and medio-lateral plane during side reaching). Motor development was assessed using the Alberta Infant Motor Scale. Infants' initial and mean trunk angles relative to the hip joint improved with sitting experience in the anterior-posterior plane, but not the mediolateral plane, $ps \leq .02$. When reaching forward, less experienced sitters were leaning forward compared to more experienced sitters, but when reaching to the side, all sitters had similar medio-lateral trunk angles. The forward versus side-sitting postural differences is most likely due to the large base of support in the anterior-posterior direction, and thus, the more degrees of freedom to vary sitting posture. We found no differences in trunk angular displacement or the straightness of the reach between front and side reaching and across sitting experience, $ps \geq .567$. Therefore, by the time infants master independent sitting, trunk and arm control in the primary plane of motion is well-developed and is similar during front and side reaching. We suggest that multidirectional sitting and reaching stability is integral to learning to sit.

#50	Title	Testing the Predictive Role of the Burke Rehabilitation Hospital Post-Concussion Exertion Assessment in Return-To-Activity
	Primary Presenter	Julia Leslie
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	Affiliation	Hunter College
	Specialization	PT
	Abstract	Background: This prospective study examined the predictive role of the Burke Post-Concussion Exertion Assessment (BCA) for asymptomatic return-to-activity or sport in adolescents and adults with concussion. Methods: Participants included 2 adolescents (age 14-16y) and 8 adults (age 19-50y) with concussion who were referred to Burke Rehabilitation Hospital Outpatient Physical Therapy. They participated in exertion testing prior to and following rehabilitation. The BCA tracked symptom and physiologic responses in three phases: Buffalo Concussion Treadmill Test, dynamic exercise tests, and sportspecific exercises. Physical therapists measured maximum activity tolerated prior to symptom provocation and used results to guide individualized exertion training. Prior to discharge, patients completed BCA for re-evaluation. Outcome measures included initial and discharge Post-Concussion Symptom Scale (PCSS), Dizziness Handicap Inventory (DHI), Pediatric Vestibular Symptoms Questionnaire, Balance Error Scoring System (BESS), Functional Gait Assessment, Visual Ocular-Motor Screen (VOMS), and Dynamic Visual Acuity (DVA). Duration of physical therapy and number of visits were recorded. Subjects completed a telephone follow-up survey 30 days post-discharge. Efficacy of the intervention based on BCA findings was assessed with Wilcoxon Signed Rank Tests. Spearman Rank-Order Correlations examined relationships of Post-Discharge Survey scores with initial, discharge, and change values of outcome measures. Results: Frequency analysis of Post-Discharge Survey scores revealed that 8 out of the 10 participants reached symptom-free return to sport/activity within one week after discharge. Results from

Wilcoxon Signed Rank tests indicated discharge PCSS, VOMS, DHI, and BESS improved from initial assessment (p

#51	Title	The Effects of Barefoot Training on Sensation and Balance in Patients with Multiple Sclerosis
	Primary Presenter	Glenn Collaku
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	Affiliation	Hunter College Physical Therapy
	Specialization	PT
	Abstract	<p>Background: Multiple Sclerosis (MS) is a progressive central nervous system pathology resulting in worsening of mobility and often, balance impairments. Although balance loss in MS is multifactorial, impaired lower extremity sensation is thought to be a major cause. Persons with MS (PwMS) are known to have deficits in receiving sensory information from the somatosensory, visual, and vestibular systems. Training barefoot vs. shod has been shown to improve postural stability, plantar sensitivity, and TUG (Timed Up-and-Go) scores in non- neurologically affected subjects, but its impact on balance in PwMS is unknown. Methods: This study consisted of participants randomized into either a barefoot group or a shod group, which both received the same daily balance exercises for 2 weeks consisting of Romberg progressions with eyes closed and open. Participants were provided a pamphlet with pictures and exercise logs to increase adherence. Subjective outcome measures consisted of self-report forms for demographics, years since diagnosis and medication use. Objective measures used consisted of biothesiometry to determine vibration sensation threshold and the Mini BESTest to assess static and dynamic standing task performance. Measures were taken before and after the 2-week intervention. 5 participants in total completed the study, with 3 in the barefoot group and 2 in the shod group. Results/Conclusions: Due to small sample size, data did not reach clinically significant levels and further studies should investigate the premise. However, the following trends were present: Participants in both the shod and barefoot group improved in their vibration sensation threshold except one; this was likely due to an unexpected pseudo-exacerbation in symptoms around the time of the posttest. Participants in the barefoot group had a gross increase in Mini BESTest scores, but also not clinically significant. Barefoot training for PwMS may be a cost-effective way to improve sensation and balance if the initial premise of this study yields evident.</p>
#52	Title	The Effect of Glenohumeral Position on Trapezius Muscle Recruitment During Isometric Scapular Retraction Exercises
	Primary Presenter	Larry Lindsey
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	Affiliation	CUNY Hunter College
	Specialization	PT
	Abstract	<p>Background: Research has shown shoulder girdle mechanics depend greatly on the position of the glenohumeral joint. Specifically, the trapezius muscle activation during scapular retraction has been shown to be dependent on the position of the glenohumeral joint. Different angles of glenohumeral abduction are known to activate different portions of the trapezius muscle;</p>

however, there is limited research on the specific degrees of abduction that influence sEMG recruitment of the upper and lower trapezius muscles. The purpose of this study is to identify the abduction angle of the humerus that elicits the least and greatest sEMG recruitment of the upper and lower trapezius muscles during maximal scapular retraction contractions. Methods: sEMG biofeedback recordings of the trapezius muscle were recorded on 15 healthy participants. Subjects were instructed to perform maximal isometric scapular retraction contractions in anatomical position and two additional positions of humeral abduction. A 2-way repeated measures ANOVA was used to analyze the effects of the glenohumeral joint positioning on the resultant sEMG output in the upper and lower trapezius muscles. Results: Maximal muscle activation of the upper and lower trapezius occurred at 90° of abduction. Minimal activation of the upper trapezius fibers was recorded at 135° of abduction. The biggest difference between sEMG activation levels between fibers was also recorded at 135°. There were no significant differences between conditions for changes in lower trapezius activation. Conclusions: Trapezius muscle activation varies during scapular retraction depending on the position of the glenohumeral joint. Understanding how glenohumeral joint positioning affects muscle activation will allow clinicians to select the most appropriate exercises for activating or inhibiting specific portions of the trapezius muscle. Future research could include sEMG analysis of the trapezius muscle during different glenohumeral active resistive exercises for individuals with shoulder impairments.

#53	Title Primary Presenter Email Contact Affiliation Specialization Abstract	<p>Development of Sitting Balance: Limits of Stability</p> <p>Joel Kanneth</p> <p>joel.kanneth53@myhunter.cuny.edu</p> <p>Hunter College, CUNY</p> <p>PT</p> <p>Background: Functional reach tests are used as quick screens to measure the limits of stability (LOS)—how far a person can reach beyond arm’s length while maintaining a fixed base of support. Prior work has not examined the development of LOS in infants, likely because existing tests require comprehension of instructions. The purpose of this study was to develop a novel seated reach test to examine the LOS in healthy infants. Methods: 22 independent sitting infants, ages 5-9 months, participated in this cross-sectional study. To incentivize infants to reach beyond arm’s length, caregivers began by holding a small toy close to the infants and then moved the toy farther away until infants transitioned out of sitting or lost balance. Infants performed the reach test M=5 times in the forward and sideway directions, with order of direction counterbalanced. All sessions were conducted via Zoom™ and video-recorded for further analyses using Datavyu to determine the timings of the reach. Machine learning algorithms were used to estimate infant’s maximum trunk angle. Motor development scores were assessed using the Alberta Infant Motor Scale (AIMS). Results: Trunk angle increased in the forward and sideway directions with both sitting experience and AIMS scores, $p \leq .002$, and was greater in the forward compared to the sideway direction. In both directions, infants with higher</p>
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AIMS scores were more likely to the transition out of sitting to reach farther, $p=.011$, and infants with greater sitting experience and AIMS scores were more likely to change their sitting posture to reach farther, $ps\leq.001$. Conclusions: Infants' seated LOS develops simultaneously in the forward and lateral directions, likely in response to random practice in their everyday environment. Infants come up with new postural strategies to reach farther. The LOS and postural strategies should be trained in infants with motor delays to enhance body-environment interactions.

#54	Title Primary Presenter Email Contact Affiliation Specialization Abstract	<p>Treadmill Walking vs Overground Walking: A Scoping Review</p> <p>Christine Pham</p> <p>christine.pham07@myhunter.cuny.edu</p> <p>Hunter College</p> <p>PT</p> <p>Issue: The use of both treadmill walking (TM) and overground walking (OG) are universally accepted as valid methods of exercise, treatment, as well as a means of assessment in gait rehabilitation. However, there is relatively limited research that provides a direct comparison of these two modes of walking. Description: This study provides a broad look at TM versus OG without restrictions on patient demographics, diagnosis, or primary purpose of study (training or assessment). A scoping review of online databases - PubMed (Medline), Web of Science, PEDro, and Sports Medicine and Education Index (ProQuest) - was performed. All articles were included if they showed a direct comparison between TM and OG. Exclusion criteria included animal studies, body weight support, non-traditional treadmills, exoskeletons, robotics, virtual reality studies, and systematic reviews. The following data was extracted: author(s), year of publication, country of origin, aim/purpose of study, study design, study population and sample size, intervention type, duration/frequency of intervention, outcomes assessed, and key findings regarding the similarities or differences of outcome measures between TM and OG. Results: There were a significant number of differences between TM and OG, of which notable findings were divided into three groups: biomechanical and temporospatial factors, physiological factors, and cognitive and sensory factors. The majority of articles were conducted on healthy subjects, with primarily differences found. Conclusions and Recommendations: A broad examination of the current state of research comparing TM and OG revealed that there are definitive differences between TM and OG. Significant findings were primarily associated with spatiotemporal parameters and healthy subjects. Future studies should focus on a direct comparison between TM and OG in various patient populations, especially neurological and orthopedic patients in order to provide a better understanding of what parameters justify one type of walking over the other.</p>
#55	Title Primary Presenter Email Contact Affiliation Specialization	<p>The Effect of Personal Voice Amplification Devices on the Speech Intelligibility of Adults Wearing Face Masks</p> <p>Alex Rabinowitz</p> <p>alexspeechlanguage@gmail.com</p> <p>Hunter College</p> <p>Speech and Language</p>

Abstract

Background: When speech passes through a face mask, high frequencies are significantly reduced in amplitude. This negatively affects speech intelligibility; however, utilization of personal voice amplification devices (PVA) may alleviate this. Because there is little-to-no objective data supporting this, the purpose of this study is to investigate the degree to which PVA devices may increase speech intelligibility of masked adults. Methods: The speech intelligibility of an adult masked speaker using a PVA device was compared to that of a masked speaker not using a PVA device, further examined via two common mask types: KN95 mask, and standard paper surgical mask. Five testing blocks were completed per participant (n=3), differing by the following conditions: the type of mask worn by the speaker, and whether the PVA device was used. The participants' transcriptions of speech under each condition were analyzed for accuracy to determine whether the speech of a masked speaker was more intelligible when using the PVA device. Results: It is expected that the PVA device will improve the intelligibility of the masked speaker, for both KN95 and surgical masks. As face masks attenuate the amplitude of high frequencies (i.e., 2,000-8,000 Hz), it is expected that the use of the PVA device will yield the greatest improvement in the intelligibility of speech sounds that contain those frequencies (e.g., /k/, /t/, /f/, /s/, /θ/, and /ʃ/). Conclusions: These findings suggest that the negative effect face masks have on speech intelligibility is caused by the attenuation of high frequencies. This also suggests that the negative effects face masks have on speech intelligibility can be neutralized with amplification of one's speech when using a PVA device. These results provide objective data for clinicians and educators to consider when exploring options to improve their intelligibility for listeners while wearing a mask.

#56	Title	Speech-Language Pathologists' Strategies of Treatment of Preschoolers with Functional Articulation Disorders via Teletherapy
	Primary Presenter	Ann Kariyev
	Email Contact	ann.kariyev76@myhunter.cuny.edu
	Affiliation	CUNY Hunter College
	Specialization	Speech and Language
	Abstract	Background: The purpose of this study is to identify speech-language pathologists' (SLPs) strategies to treat preschoolers with functional articulation disorders (FADs) via teletherapy. A FAD is characterized by errors in speech production in the absence of an identifiable etiology. Preschoolers with FADs benefit from physical touch cues as it helps young children to understand the appropriate place and manner of articulation. However, it is unclear how SLPs deliver effective speech therapy when physical touch is not available due to the nature of teletherapy. We hypothesized that SLPs would rely on more visual cues, verbal placement cues, and shaping/successive approximation to compensate for the lack of tactile cues. Methods: A survey designed by the authors was collected from six SLPs with over 20 years of experience. Information on strategies used to teach correct place and manner of articulation as well as correcting inappropriate articulation via teletherapy was identified and analyzed. Results: Results indicated five out of six SLPs utilize the strategies of

enhanced visual cues (e.g., providing a visual of appropriate articulatory placement, providing an exaggerated gestural model) and verbal cues (e.g., explaining the articulatory gesture) to teach appropriate place and manner of articulation. Additionally, five out of six SLPs reported training parents in providing tactile cues, explaining the articulatory gesture, and providing an exaggerated model for correcting inappropriate articulation. Conclusions: SLPs compensated the lack of touch cues with various valid techniques and available sources (e.g., parents). These findings suggest the possibility of successful articulation intervention via telepractice. Further studies are needed to determine how online interventions are compatible with in-person interventions for young children with speech disorders.

#57	Title	Effectiveness of Short, Guided Meditation in Conjunction with Language Intervention on Narrative Production in a Person with Anomic Aphasia
	Primary Presenter	Alina Polyanskaya
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	Affiliation	Hunter College School of Health Professions
	Specialization	Speech and Language
	Abstract	<p>Background: Persons with anomic aphasia (PWAA) typically present with word retrieval difficulties and disruptions to cohesive narrative production. Secondary to their language difficulties, many PWAA experience symptoms of emotional stress such as linguistic anxiety. The purpose of this study is to explore whether incorporating brief mindfulness meditation (MM) into language intervention could improve narrative production in PWAA. We hypothesized that measures of narrative ability would improve from practicing MM in conjunction with language intervention, due to a reduction in stress-related emotions following relaxation maintenance.</p> <p>Methodology: The study involved one 59-year-old female with anomic aphasia three years post-stroke. The participant was evaluated at baseline on measures of narrative abilities at the micro-(e.g., informativeness, lexical diversity) and macro-linguistic level (cohesiveness) using both picture narrative and non-picture narrative tasks. Following a 10-week intervention period of five-minute MM practice at the beginning of a 45-minute language therapy session once a week, the participant's narrative skills were reassessed and compared with baseline data. Also, the participant's subjective judgment about self-perceived efficacy and impact of MM on stress, emotion, and language production was collected. Results and Conclusions: Preliminary results do not reveal large changes in overall performance. However, the participant delivered more informative narratives (measured using Correct Information Units) in picture tasks in the post-treatment test compared to baseline. This change was not observed in non-picture tasks. The participant also reported benefits of MM on her daily language and psychological well-being. These findings suggest that brief MM practice embedded into language intervention may be an accessible intervention for clinicians to improve language ability for persons with aphasia by addressing their stress. Furthermore, our findings suggest that SLPs should adopt multiple narrative tests (picture vs. non-picture) in their assessment, as participants may exhibit high variability across tests.</p>

#58	Title	The Effects of Social Isolation Secondary to COVID-19 on Conversational
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		Skills in 6-8 Year-Old Children
	Primary Presenter	Nicole Nittolo
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	Affiliation	Schools of Nursing and Health Professionals
	Specialization	Speech and Language
	Abstract	Background: "Peer talk," or peer-to-peer interactions, are necessary for the development of conversational skills. However, little is known regarding the influence of social isolation secondary to COVID-19 on children's abilities to develop these skills. The purpose of this study was to determine if a period of social isolation impacts the conversational skill development in 6 to 8-year-old children. Methods: Parents of typically-developing children between the ages of 6 and 8 between March 2020 and September 2021 were recruited to participate in this study. A questionnaire was distributed containing four topic areas: social interaction outside of school during social isolation, social interaction during school time during social isolation, conversational skills during social isolation versus current conversational skills, and sibling dynamic in the household. Individual results were compiled for review of data. Comparisons were made within individual surveys and across all surveys. Results: Preliminary results suggest that children's conversational skills during social isolation were different in comparison to their social skills during a period without social isolation. Their ability to play well with others was particularly impacted, regardless of organized play, unorganized play, and the presence of a sibling at home. Conclusions: Social isolation may impact children's abilities to develop conversational skills in 6 to 8-year-old children. Creating environments in which children can engage in peer talk may help to support conversational skills given the recent social isolation measures taken during the COVID-19 pandemic.
#59	Title	The Use of Elaboration as an Internal Memory Strategy to Improve Delayed Memory in Cognitively Healthy Aging Adults
	Primary Presenter	Whitney Tam
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	Affiliation	Hunter College
	Specialization	Speech and Language
	Abstract	Background: Healthy older adults often exhibit memory declines as early as 50 years of age but continue to have relatively preserved speech and language skills. Verbal elaboration is an internal memory strategy, in which individuals generate a story or sentences to recall unrelated information. It has been shown to be efficacious in improving memory in populations whose primary difficulty is delayed memory (e.g., TBI). The purpose of the current study was to assess whether the use of verbal elaboration can help improve delayed recall accuracy in healthy older adults. Methods: Ten healthy older adults (ages 50-61, M = 56) were screened using the Montreal Cognitive Assessment (MoCA, ³ 26). They were randomly assigned to either a training group (i.e., verbal elaboration) or no training group. The training group participated in five verbal elaboration training sessions over two weeks. Pre- and post- testing measures were collected for both groups using the Hopkins Verbal Learning Test (HVLT) and Digit Span subtest,

forward and backward, of the Wechsler Memory Scale (WMS). Results: The study analyzed results within and between groups. It is expected that participants who receive verbal elaboration training will be able to accurately recall more semantically unrelated words following a delay than those who did not receive any training. Conclusions: If outcomes are as hypothesized, these findings may suggest that healthy older adults benefit from using verbal elaboration as an internal memory strategy to help with delayed memory recall. Teaching adults this strategy may help them remember more in their daily lives. Future research should include a larger sample size and to see if the findings generalize to functional day-to-day situations (e.g., shopping lists).

#60	Title	Outcome Measures in Functional Communication Intervention for People with Progressive Primary Aphasia: A Literature Review
	Primary Presenter	Jessica Gold
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	Affiliation	Hunter College
	Specialization	Speech and Language
	Abstract	Issue: Primary progressive aphasia (PPA) is a type of dementia characterized by progressive loss of language without other severe cognitive impairments present within the first two years. The three common subtypes of PPA include the semantic-, agrammatic-, and logogenic-variant. Limited number of studies have organized information of how and what to measure in functional communication intervention outcomes in the subtypes of PPA. The purpose of this study is to identify the most common functional communication outcome measures after individuals receive communication intervention and how these outcome measures compare across subtypes of PPA. It will allow future SLPs to provide consistent and relevant outcome measures to compare treatment effectiveness. Description: To include a broad range of studies that have been published from 2001-2021, a systematic review was conducted utilizing five databases: PubMed, Medline, Ovid-Embase, Web of Science, and Cochrane, following the inclusion criteria. The search resulted in 14 articles that were reviewed and organized to identify the most common functional communication outcomes measures in each subtype. Results: The most common outcome measures (9 out of 14 studies) were scores from questionnaires or ratings that represent participants' communication effectiveness and participation in daily activities. Across three subtypes of PPA, there was no difference: questionnaires/ratings were most commonly used. However, each study adopted different scales and rating systems to measure the similar outcome. Conclusion: It seems that researchers and speech-language-pathologists (SLPs) consider questionnaires or ratings to be the best method to measure their functional intervention effectiveness. However, the lack of common measures should be discussed in order to develop a reliable measure that clinicians and participants can efficiently quantify effective functional communication intervention.

#61	Title	Native Monolingual English Speakers' Judgement of Non Native Mandarin Speakers' Sentence Acceptability from Varying Degrees of Accented Speech
	Primary Presenter	Sarah Whelan

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Specialization Speech and Language
Abstract Background: As the population of the world increases, so does number of bilingual speakers. Native speakers’ bias against non-native speakers can either lead them to judge grammatical errors more harshly, or ignore errors that don’t alter the communicative intent, known as the “Good Enough Approach.” The objective of this study is to determine whether the degree of grammatical acceptability of a sentence by a native speaker of English is determined by the grammaticality alone or by the accentedness of the non-native speaker. Methods: Monolingual participants’ grammatical acceptability judgements of non-accented, lightly-accented, and heavily-accented Mandarin speech were measured using a Likert scale (where 1 is least acceptable and 6 is most acceptable). Each participant rated 224 stimuli, which contained 112 grammatical and 112 ungrammatical sentences divided across three speakers. Comparisons of the participants’ acceptability judgment will be conducted relative to sentence grammaticality and accentedness. Results: Our pilot study contained two participants. Acceptability ratings were judged to be lower by the non-accented speaker than the lightly and heavily accented speakers. Furthermore, the participants’ acceptability judgment was more significant when listening to the heavily accented speaker compared to the non-accented speaker. Results also show that reaction times increased as degree of accentedness increased (i.e., non-accented vs heavily-accented). Conclusion: Native bias against accented speech does impact the listeners’ perception of the speaker. The greatest variability in acceptability judgements was observed made in heavily-accented stimuli. This indicates that the “Good Enough Approach”, when applied to grammaticality, sustains its positions that errors are ignored when they do not interfere with sentence comprehension.

#62 Title The Efficacy of a Modified PEERS Curriculum for Individual Social Skills Treatment
Primary Presenter Christine Kim
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Specialization Speech and Language
Abstract Background: Young adults with Autism Spectrum Disorder (ASD) often face unique social challenges in higher education including but not limited to: maintaining relationships with peers and faculty, making friendships, and self-advocacy. The Program for the Evaluation of the Enrichment of Relational Skills (PEERS) is a social skills group intervention that has been effective in building the social skills of high-functioning adolescents and young adults with ASD and other social challenges. This study aimed to implement a shortened version of the PEERS curriculum and evaluate its effectiveness in individual social skills treatment for a college student with ASD based on their pre- and post-treatment scores on the Social Responsiveness Scale, Second Edition (SRS-2). It was hypothesized that the modified PEERS curriculum would be effective for use in individual social

skills treatment. Method: The participant was a 19-year-old male college student who reported being on the Autism spectrum. 8 weekly 60-minute individual sessions as opposed to 16 weekly 90-minute group sessions were delivered over telepractice in accordance with the PEERS curriculum. The participant completed the SRS-2 before and after treatment to observe for any change in measured social skills. Results: The participant exhibited improved scores in all social skills areas measured by the SRS-2: Social Awareness, Social Cognition, Social Communication, Social Motivation, and Restricted Interests and Repetitive Behavior. His post-treatment scores within the normal range in Social Communication (59T) and Social Motivation (57T) are significant, as his pre-treatment scores indicated severe deficits (T-scores above 76). Conclusion: A modified PEERS curriculum was found to be effective for use in individual social skills treatment for a young adult with ASD. Future studies should assess the effectiveness of PEERS with additional participants to determine if the findings of this study are replicable.

#63	Title	The Clinical Safety of Thickened Liquids as an Intervention Strategy for Preventing Pneumonia in Dysphagic Patients
	Primary Presenter	Marlene George
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	Affiliation	Hunter College
	Specialization	Speech and Language
	Abstract	Issue: Individuals with swallowing disorders (i.e., dysphagia) often experience the risk of pneumonia when food and liquid fall into the airway. Thus, a diet of thickened liquids is a common intervention prescribed for dysphagic patients who cannot safely tolerate thin liquids. However, it is unknown how many patients still develop pneumonia after being placed on thickened liquid diets. This literature review aims to investigate whether thickened liquids are a safe intervention for patients with dysphagia to prevent pneumonia. Description: A literature search was conducted using five databases: Google Scholar, Medline, Pubmed, Cochrane, and ASHAWire. Keywords to find articles included thick liquid, diet, aspiration pneumonia, and oropharyngeal dysphagia. Nine articles were included in the review, consisting of systematic reviews, case series, and randomized control trials. Results: Preliminary findings show that nine articles have reported on both thickened liquid diets and incidents of pneumonia. Two of these articles revealed 33 patients developed pneumonia out of 267 total patients placed on thickened liquid diets. Conclusions and Recommendations: Thickened liquid interventions are not always sufficient to prevent pneumonia in dysphagic patients. Speech-language pathologists and other healthcare professionals should be aware of the risks of thickened liquid diets. It is recommended that instrumental studies (e.g., videofluoroscopic studies) be conducted whenever possible to evaluate individual swallowing function and recommend an appropriate intervention. Further research is necessary to investigate effects of thickened liquid diets on pneumonia incidence and consensus is needed amongst researchers when reporting patient information/outcomes across studies.

#64	Title	The Effect of Shared Book Reading on Spontaneous Language in a
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Primary Presenter Email Contact Affiliation Specialization Abstract	<p>PreschoolAged Child with Autism Spectrum Disorder</p> <p>Emily Jacobsen sefcikemily@gmail.com Hunter College - CUNY Speech and Language</p> <p>Background: Preschoolers with autism spectrum disorder (ASD) often produce language that is characterized as echolalic and frequently have difficulties producing spontaneous language. Shared book reading is a treatment method that gives opportunities for verbal participation and has been shown to increase spontaneous language in typical developing preschoolers. This case study examined the influence of shared book reading on spontaneous language in a preschool child with ASD. Methods: A 5 year 9 month old child engaged in five minutes of shared book reading for four sessions with two graduate student clinicians. Sessions were scheduled once weekly. Spontaneous and echolalic language production was measured during shared book reading and compared to spontaneous and echolalic language production during simple book reading. Results: Preliminary results suggest that shared book reading increases spontaneous language production. Specifically, the participant showed fewer echolalic productions and more spontaneous language during shared book reading as compared with simple book reading. Conclusions: Short durations of shared book reading may be beneficial to include in therapy sessions with preschoolers with ASD to increase spontaneous language. Future research could examine if increased spontaneous language during shared book reading generalizes to other contexts. In addition, it would be worthwhile to explore if familiarity of certain books effects spontaneous language production.</p>
#65 Title Primary Presenter Email Contact Affiliation Specialization Abstract	<p>Effect of Background Noise on Attention in a College-Aged Adult with AttentionDeficit Hyperactivity Disorder</p> <p>Shana Fitz shana.fitz47@myhunter.cuny.edu Hunter College School of Health Professions Speech and Language</p> <p>Background: Attention-deficit/hyperactivity disorder (ADHD) affects 4-5% of college-aged adults. Individuals with ADHD are at increased risk of having difficulty with tasks of sustained attention. Research shows that background noise may improve sustained attention among individuals with ADHD, though it is not known what type of noise creates an optimal auditory environment for these individuals. The objective of this study is to determine the effect of background noise on attention to tasks in an individual with ADHD. Methods: Attention was assessed in two college-aged males, one with ADHD and one healthy, age-matched control, using a sustained attention to response task (digit go/no-go) and a cancellation task. Each task was completed by the participants in background white noise, pink noise, and no noise across two sessions. Each participant's errors were calculated across tasks and auditory environments. Results: On the go/no-go task, the participant with ADHD made 15 total errors in no noise, 5 total errors in white noise, and 3 total errors in pink noise. The control</p>

participant made 9 total errors in no noise, 6 errors in white noise, and 3 errors in pink noise. On the cancellation task, the participant with ADHD missed 9 target items with no background noise, missed 5 items in white noise, and missed 4 items in pink noise. The neurotypical participant missed 5 items with no background noise, 3 items in white noise, and 3 items in pink noise. Conclusion: The presence of background noise showed a positive effect on both participants' attention to tasks. Fewest errors were made with background pink noise, suggesting that pink noise creates an optimal auditory environment to improve attention for individuals with ADHD. This finding suggests that pink noise may be an inexpensive and easily-accessible therapeutic intervention for improving college-aged students' attention and productivity during academic tasks.

#66	Title	Impact of Mask-Wearing while Teaching on Elementary School Teachers' Voice: A Questionnaire for Subjective Voice Quality Changes
	Primary Presenter	Shannon McGhean
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	Affiliation	Hunter College
	Specialization	Speech and Language
	Abstract	Background: Elementary school teachers are at a particularly high risk of developing voice disorders when compared to teachers of older grades and other occupational voice users. Research shows that wearing face masks increases self-perception of vocal symptoms in the general population and may lead to vocally abusive behaviors. To date, no studies have looked at the impact that mask wearing has on subjective voice quality in elementary school educators. The purpose of this study is to examine the impact of mask wearing on the voices of elementary educators who provide in-person instruction during the COVID-19 pandemic. Methods: A total of eight healthy, elementary school educators were surveyed on changes in subjective voice quality judgements since the introduction of mask wearing due to the COVID-19 pandemic. Questions were related to demographic information, teaching related characteristics, vocal hygiene habits, and COVID-19 and mask wearing. The most common responses regarding voice quality were evaluated and compared to sociodemographic and work-related characteristics. Additionally, risk factors for subjective voice quality issues were analyzed. Results: Findings revealed that 6 out of 8 elementary school educators reported mask wearing increases negative self-perception of vocal quality. Two elementary educators who utilized voice amplification (e.g., a microphone) did not report experiencing negative vocal symptoms. 5 out of 6 participants were willing to explore the amplifiers if they are provided by their employer. Conclusions: The results of this study alert the risk for vocal issues in elementary school educators who have to teach young children inperson while wearing a mask. It is important for speech-language pathologists to increase occupational voice users awareness of risks, educate them regarding healthy vocal use, and provide compensatory strategies (e.g., electronical sound amplifiers). This will help to prevent and reduce the possibility of vocal misuse, abuse, and voice disorders.

#67	Title	Distribution of Word Classes in Spanish-Speaking Late Talkers' Vocabulary
	Primary Presenter	Alana Verdejo

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Specialization Speech and Language
Abstract Background: Late talkers, traditionally defined as children who have fewer than 50 words in their vocabularies at 24 months of age, continue to display poorer language outcomes through adolescence as compared with typically developing peers. The vocabularies of English-speaking late talkers consists of fewer nouns, as compared with vocabulary matched and age matched peers. This study aims to assess the vocabulary composition of monolingual Spanish-speaking late talkers in order to understand if universal features exist across languages in children with language delay. Methods: Participants included 20 late talkers, 20 age-matched peers, and 20 vocabulary-matched peers, all of whom speak Mexican dialects of Spanish. Data was obtained through the archival data site, WordBank, which gathers the results of completed MacArthurBates Communicative Development Inventories (CDI) from a variety of labs and in a variety of languages, including Spanish. Words were placed into one of four classes (nouns, predicates, closed-class and other) and were tallied and divided by the total items produced by the participant. The proportion of word class types between Spanish-speaking late talkers and their age-matched and vocabulary-matched peers was compared. Results: Preliminary results suggest Spanish-speaking late talkers have fewer nouns in their expressive vocabularies and more words classified as other than both their age-matched and vocabulary-matched peers, demonstrating disordered, not delayed, language development. Conclusion: Children who are late talkers build their vocabularies differently than children who do not have a language delay. Increased understanding of how late talkers acquire words may guide clinical decisions when determining appropriate targets. Further research examining vocabulary composition in late talkers across many languages will determine the existence of universal patterns in language delayed children.

#68 Title The Impact of Working Memory Training on Syntax in a Language Impaired Child with Autism Spectrum Disorder (ASD)
Primary Presenter Rachel Kroll
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Affiliation CUNY Hunter College
Specialization Speech and Language
Abstract Background: Notable characteristics of school-aged children with autism spectrum disorder (ASD) include difficulties with pragmatic and social language. Recently, a subgroup of school-aged children with ASD has been found to exhibit syntactic deficits (Terzi et al., 2016). Research shows that working memory may be linked with syntactic ability (Ellis & Sinclair, 1996). Delage et al. (2021) found that children with Developmental Language Disorder (DLD) who have similar syntactic deficits showed improvement in syntax after completing an online working memory training program. This study examined the influence of online working memory training on syntax production in a child with ASD. Methods: This case study used a modified version of the study design and materials utilized by Delage et al. (2021).

The participant was a 10;7-year-old male with ASD and accompanying syntactic deficits. Pre- and post-intervention syntax production was measured using the Clinical Evaluation of Language Fundamentals – Fifth Edition (CELF-5) Recalling Sentences Subtest. Working memory training occurred for five minutes per week for eight weeks in conjunction with weekly speech and language therapy. Working memory tasks included: serial memory, complex span, forward color span, backward color span, and the n-back task. Post-intervention syntax measures were obtained one week after the completion of the eight-week working memory training tasks. All procedures were conducted online using Zoom. Results: Data collection is currently ongoing. The participant received a raw score of 118 syntactic errors on preintervention testing, and the longest sentence produced with appropriate syntax was four words. To date, two out of eight working memory training sessions have been completed by the participant. Conclusions: Future research could investigate the impact of duration of working memory training sessions (e.g., five minutes vs. 45 minutes) and length of intervention (e.g., eight weeks vs. 20 weeks) on syntax in school-aged children with ASD and related syntactic deficits.

#69	Title Primary Presenter Email Contact Affiliation Specialization Abstract	<p>Effectiveness of Social Skills Training for a Neurodivergent College Student</p> <p>Nicole Humpf nicole.hum21@myhunter.cuny.edu Hunter Graduate Speech-Language-Pathology Speech and Language</p> <p>Background: Increasing numbers of individuals are identifying as neurodivergent in the collegiate population. Yet, academic resources are not readily available to provide guidance for such topics as executive functions, communication with faculty and peers, and organization. The Hunter CAN Group provides a service model for delivering social skills training to neurodivergent college students. Methods/Procedure: A Likert-scale Qualtrics survey was generated and given to the participant following an 8-week modified version of the PEERS program, an evidence-based social skills treatment for preschoolers through young adults with diagnoses such as autism. The participant was a college student who self-identified as neurodiverse and diagnosed with autism, desiring to self-advocate and improve social skills. The participant attended an 8-week teletherapy intervention program designed by the Hunter College Autism and Neurodivergent (CAN) group to teach topics of self-identified areas of improvement, which was facilitated by two graduate speechlanguage pathology students and supervised by a licensed speech-language pathologist through the Hunter College Center for Communication Disorders. The survey asked the participant about his comfort level during activities such as communicating with faculty and peers. The survey was administered pre-treatment, immediately post-treatment, and eleven weeks post-treatment. Results: After three administrations of the Qualtrics survey, improvement in self-identified strengths and areas of growth immediately post-treatment was noted, but showed a slight dip in self-rated scores of social skills eleven-weeks post-treatment. Conclusions/Recommendations: A modified 8-week PEERS program is</p>
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effective in improving self-perceived social skills in a college student who identifies as neurodivergent. Effects were stronger immediately post-treatment than at the 11-week post-treatment survey administration, though this study accounts for one individual with no diagnoses of Autism or other developmental and/or neurological conditions. Recommendations for future practice include using a larger sample size and increased frequency of follow-up post-treatment.

#70	Title	The Impact of Sensory Integration Procedures on Spontaneous Language Production in a School-Age Child with Autism Spectrum Disorder
	Primary Presenter	Monica Bronnberg
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	Affiliation	Hunter College
	Specialization	Speech and Language
	Abstract	Background: Children with Autism Spectrum Disorders (ASD) exhibit expressive language difficulties and sensory processing difficulties that impact effective communication. Speech and language requires the integration of various sensory systems and limited research exists on the link between treatment utilizing sensory integration (SI) and expressive language outcomes in children with ASD. The study examined the impact of SI procedures on spontaneous language production in a school-aged child with autism spectrum disorder. Methods: The participant was an 8-year-old male diagnosed with ASD and sensory processing delays demonstrated by proprioceptive and vestibular sensory-seeking behaviors and self-directed tendencies. A single-subject ABAB design that spanned four weeks consisting of two sessions per week assessed verbal language and Alternative and Augmentative Communication (AAC) output under two conditions: with SI via pushing a 20lb block, and without SI. Results: In sessions with SI, average verbal mean length of utterance (MLU) was 2.4, average AAC MLU was 1, average verbal typetoken ratio (TTR) was 45.94%, and average number of verbal utterances was 25.75 utterances per session. In sessions without SI, average verbal MLU was 1.5, average AAC MLU was 2, average verbal TTR was 81.23%, and average number of verbal utterances was 11.75 utterances per session without SI. In sessions with SI, the participant remained seated and engaged, and was observed to smile and clap his hands. In sessions without SI, the participant was observed to yell/vocalize and exhibit increased self-stimulatory behaviors (e.g., rocking, squeezing hands). Discussion: The incorporation of SI procedures prior to a structured play task led to increased quantity and length of verbal utterances produced as compared to sessions without SI. Incorporating aspects of sensory input and sensory play into speech therapy settings may create an environment that leads to a more regulated individual, and therefore increased language production in children with ASD.

#71	Title	Evaluating Bacteriophage Lytic Enzymes as Novel Antimicrobials Against Group B Streptococci
	Primary Presenter	Genesis Rodriguez
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	Affiliation	School of Arts and Sciences
	Specialization	Med Lab Science

Abstract

Background: Streptococcus agalactiae, or group B streptococcus (GBS), causes life threatening infections in newborns, including meningitis, pneumonia, bacteremia, and sepsis. While some people carry GBS asymptotically, infections can also occur in new mothers, the elderly, and immunocompromised individuals. I.V. Penicillin is the treatment of choice, but drug allergies and the rise in antibiotic resistance underscores the need to develop novel therapeutic options. Recombinant bacteriophage (viral) lytic enzymes, termed lysins, are viable candidates. Methods: An automated database search tool was used to generate a list of prospective lysins from the genomes of S. agalactiae bacteriophages. The genes for these lysins (LysGBS) were cloned and expressed in E. coli with an added hexa-His tag. Lysins were then isolated to >90% purity using affinity chromatography, utilizing the ability of imidazole to displace Histidine on a nickel-resin column. Recombinant lysins were spotted onto solid indicator media containing GBS peptidoglycan, to test their ability to hydrolyze their target, as well as the peptidoglycan of other streptococcal species, to examine specificity. Lysin activity was also evaluated for their ability to decrease the optical density of bacterial suspensions and killing of bacteria in viability assays. Results: Several lysins hydrolyzed S. agalactiae peptidoglycan solid indicator media, resulting in zones of clearing, and many also had activity against the peptidoglycan of S. pyogenes. A few were active against S. agalactiae in reduction assays, where the OD was halved in an hour and viability was reduced ten-fold. Conclusions: Although the optimal conditions, including temperature, pH, salt concentration, and other cofactors still need to be discerned, these lysins show promise in combating GBS in in vitro infection assays. The development of lysins as a targeted antimicrobial agent against S. agalactiae infections should be considered a priority in combating GBS infection, especially considering these infections affect the most vulnerable populations.

#72	Title	Utilizing Bacteriophage Lysins to Combat Streptococcus bovis Infections
	Primary Presenter	Danielle McGrath
	Email Contact	ceuler@hunter.cuny.edu
	Affiliation	School of Arts and Sciences
	Specialization	Med Lab Science
	Abstract	Background: Streptococcus gallolyticus causes bovine and equine infections, as well as infective endocarditis, sepsis, and urinary tract infections in humans. Importantly, colonization by S. gallolyticus in the large intestines is associated with an increased risk of colorectal cancers. Traditionally, treatment involves antibiotics; however, these are not without the unintended side effects of killing commensal organisms or the risk of selecting for drug resistance. Taken together, these facts necessitate the need to develop novel antimicrobial agents specific to S. gallolyticus that are harmless to the commensal microbes of the intestinal tract. With this in mind, we are developing a novel bacteriophage lysin that specifically targets and hydrolyses the cell wall of S. gallolyticus, including those associated with the development of colorectal cancer. Methods: An automated database search tool, was used to generate a list of candidate lysin genes from the genomes of S. gallolyticus, S. equinis, other closely-related

Streptococcus species, and the bacteriophages that target them. The genes for these lysins (termed PlySb) were cloned and expressed in *E. coli* and purified to >90%, using nickel-resin affinity chromatography to isolate the His-tagged lysins. In vitro activity was measured by spotting the lysins onto solid indicator media containing *S. gallolyticus* peptidoglycan, and through measuring the decrease in OD600 of bacterial suspensions. Results: Many of the PlySb lysins were able to hydrolyze *S. gallolyticus* peptidoglycan on indicator plates, resulting in a clearing zone. Additionally, some of them show modest activity against living *S. gallolyticus* in OD600 reduction assays, although more work is needed to find the optimal temperature, pH, salt concentration, and the required cofactors for these lysins. Conclusions: These results support the development of lysins as a targeted antimicrobial agent against *S. gallolyticus* infections and as a potentially preventative measure against colorectal cancers.

#73	Title Primary Presenter Email Contact Affiliation Specialization Abstract	<p>Evaluating Lymphocyte Markers for Diagnosing Children Susceptible to Rheumatic Fever</p> <p>Chad Euler eulerc@rockefeller.edu School of Arts and Sciences Med Lab Science</p> <p>Streptococcus pyogenes is a Gram-positive bacterium that commonly causes strep-throat infection. The infection can be cleared from the patient's body with the help of antibiotics such as amoxicillin or penicillin. However, if the strep throat infection is not treated adequately, autoimmune-complications may arise in susceptible individuals. One of these conditions is known as Rheumatic Fever (RF). RF is the leading cause of preventable cardiovascular disease in children worldwide, affecting >34 million people and leading to >345,000 deaths per year. In RF, the immune cells and antibodies in a patient, which were activated to stop <i>S. pyogenes</i> infection, cross-react with antigens in the patient's body causing permanent damage to the heart. There are currently no clinical diagnostic tests available to determine the susceptibility of individuals, particularly children, to develop RF (estimated to be 3-6% of the world's population). We are characterizing a previously derived mouse antibody against B-lymphocytes from RF patients. Using Flow cytometry our lab has shown that our antibody can distinguish RF derived lymphocytes versus normal controls. Furthermore, western blot and mass spectrometry analysis of cell lysates from these lymphocytes have identified possible cytoskeletal structural proteins that cross-react with our potential RF diagnostic antibody. Additionally, we have used RNA sequencing, and RNA expression microarrays to further characterize the gene expression differences between RF patient B cells and controls that bind this antibody. Our goal is to identify novel antigenic epitopes and derive new diagnostic markers for RF susceptibility. We anticipate that the further study of the expression of these biomarkers we have identified will help us gain a better understanding of the pathology of this disease.</p>
#74	Title	<p>Measuring the Effect of Lysogenic Bacteriophage on Quorum Sensing in <i>Streptococcus pyogenes</i></p>

Primary Presenter Rosalie Morales
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Affiliation School of Arts and Sciences
Specialization Med Lab Science
Abstract Group A Streptococcus is the cause of multiple diseases with contrasting severities. The genetic diversity of *S. pyogenes* strains provides a clue as to the reason for the difference in infection outcomes. Prophages (integrated viruses) encode virulence factors that aid in pathogenesis of severe GAS infection. One mechanism these bacteria use to respond to environmental stresses is the quorum sensing ComRS pathway. Recently, a conserved bacteriophage encoded gene, *prx*, was discovered that interacts with the quorum sensing (bacterial communication) genes and modulates the expression of competence pathway genes in the core bacterial chromosome. We are studying the interactions of the Prx protein, and other bacteriophage encoded factors, with the quorum sensing pathway of *S. pyogenes*. We have previously produced mutants, which differ only in the type of bacteriophage and the number of *prx* genes present. In this study we are using allelic recombination to make several quorum sensing deletion gene mutants (*comR*, *oppD*, and *clpP*) in the different prophage KO mutants. Additionally, these mutants have been transformed with the pERB3 plasmid containing *luxAB* after the *comS* promoter, to construct the light producing quorum sensing reporter strains. Using a spectrophotometer plate reader to measure light production corresponding to the expression ComRS promoter of the quorum sensing pathway, we see differences based on the presence of bacteriophage, *prx*, or our quorum sensing gene mutants. The quorum sensing gene KO mutants are also being studied to determine whether they modulate the phage life cycle and bacterial host survival in bacteriophage induction and reinfection experiments. The results of these experiments may shed new light on bacteriophage and streptococcal survival and hopefully reveal novel methods and therapeutics for controlling streptococcal pathogenesis and disease.
