



**Hunter College
Hunter-Bellevue School of Nursing
Schools of the Health Professions**

7th Annual Student-Faculty Research Day

Wednesday, May 8, 2013

Abstract Book

THE SEVENTH ANNUAL HUNTER-BELLEVUE SCHOOL OF
NURSING AND HUNTER COLLEGE SCHOOLS OF THE HEALTH
PROFESSIONS STUDENT-FACULTY RESEARCH DAY

Director, Center for Nursing Research

Carol Roye, EdD, RN, CPNP, FAAN: Professor and Assistant Dean for
Research, Hunter College School of Nursing, CUNY

Director, Hunter College Health Professions Education Center (HPEC)

Martin Dornbaum, MS

Grants Assistant:

Malini Lall: Bellevue School of Nursing, Hunter College, CUNY

Research Assistant:

Alisa Jaganjac: Bellevue School of Nursing, Hunter College, CUNY

We gratefully recognize and give thanks to Gail C. McCain PhD, RN,
FAAN: Dean, School of Nursing for providing support and assistance.

We would like to thank the Hunter College Auxiliary Enterprise Board for
providing funding.

A special thank you to Dr. Julianne Imperato-McGinley and the Weill
Cornell CTSC for their generous support.

Research Day Speaker

Marita G. Titler, PhD, RN, FAAN

Professor and Chair, Division of Nursing Business & Health Systems
Rhetaugh G. Dumas Endowed Chair, Associate Dean, Office of
Clinical Scholarship and Practice Development at the
University of Michigan, School of Nursing.

Dr. Titler's program of research, centers on health services research with a focus in translation and implementation science, and outcomes effectiveness research targeting older adults. As a result of her expertise, she has received federal and foundation funding for her research, serves on NIH and AHRQ study section, and has published numerous clinical and research articles on evidence based practice and translation science. Additionally, Dr. Titler has provided educational and consultation services to national and international community's including Tri-Services Nursing Research, NIH, Veterans Healthcare Administration, and Singapore Ministry of Health. She has received numerous awards, including, most recently: the Nurse Researcher Award, American Organization of Nurse Executives, 2008; and Women of Influence Award, Corridor Business Journal, Cedar Rapids and Iowa City, Iowa, 2008.

Dr. Titler will speak about translational research and evidence-based practice.

**Hunter College
Schools of the Health Professions
Hunter-Bellevue School of Nursing**

7th Annual Student-Faculty Research Day

AGENDA

- 3:15 – 3:30** – Poster set-up
- 4:00 – 5:15** – Poster display
- 5:15** – Move to auditorium and refreshments
- 5:30 – 6:30** – Speaker: Marita G. Titler, PhD, RN, FAAN
- 6:30 – 7:00** – Q&A; Prizes awarded

Listing of Abstracts

Poster Number 1: Incentive spirometry for preventing pulmonary complications after coronary artery bypass graft

**Poster Number 2
A Review of the Literature on Guided Imagery for Fibromyalgia Symptom Management**

**Poster Number 3
Flu Prevention: Breaking the Chain**

**Poster Number 4
Gender Inequality: When Women are Victims of Violence**

**Poster Number 5
Defining guidelines for health care professionals caring for the lesbian, gay, bisexual and transgender community: A Literature Review**

**Poster Number 6
Influence of Presence of Observer on Hand Washing Conformity**

**Poster Number 7
Applying the International Classification of Functioning Disability and Health (ICF) to Group Communication Therapy in Stroke Survivors with Aphasia**

**Poster Number 8
Improving the Quality of Life in the Patient with Renal Failure**

**Poster Number 9
A Literature Review of the Effects of Horizontal Violence on Resignation Rates among New Nurses**

**Poster Number 10
The Effects of Omega-3 Fatty Acids and the prevention of a major cardiovascular disease event**

**Poster Number 11
A Literature Review on the Effects of Therapeutic Touch on Pain in Cancer Patients**

Poster Number 12

A Literature Review of the Efficacy of Animal-Assisted Therapy in Managing Pain in Hospitalized Pediatric Patients

Poster Number 13

Anosognosia and Ability to Self-Administer Medications in Right Hemisphere Stroke

Poster Number 14

Sepsis: The Importance of Early Diagnosis and Intervention to Manage and Improve Outcomes

Poster Number 15

A Literature Review about the Prevalence of Cesarean Section Deliveries between Young and Older Aged Mothers

Poster Number 16

A Literature Review about the Effect of Structured Social Support to Promote Health in Caregivers of Persons with Dementia

Poster Number 17

A Literature Review of the effects of hand washing in comparison to hand-sanitizer in decreasing absenteeism related to illness in school-aged children

Poster Number 18

Effects of Shift Work on Nurses' Sleep Pattern and Overall Patient Outcomes

Poster Number 19

Therapeutic Conversation, Socialization, and Word Retrieval in Aphasia: A Group Therapy Program for Stroke Survivors Reflecting a Biopsychosocial Model of Health

Poster Number 20

The Influence of Phonotactic Probability on Lexical Access in Adults and Children with and without a History of Expressive Language Delay

Poster Number 21

Benefits of a Dedicated Education Unit Nursing Clinical Model to Undergraduate Student Participants

Poster Number 22

Student's Perspectives: Themes, Trends, and Experiences in a Pilot Dedicated Education Unit in a Public Urban University

Poster Number 23

Considering a Biopsychosocial Model of Health in the Translational Application of a Specific Voice Treatment

Poster Number 24

A literature review of the effects of fall prevention programs in reducing fall-related injuries among the elderly in communities and health care settings

Poster Number 25

The Impact of Tele-monitoring on Individuals diagnosed with CHF

Poster Number 26

The Effects of Noise Reduction Interventions on the Subjective Sleep Experience during Hospitalization

Poster Number 27

Evidence-Based Practice on Telehealth Monitoring VS Nursing Home Visits

Poster Number 28

bLABber

Poster Number 29

Break the Cycle of Abuse

Poster Number 30

Children Brain Tumor Foundation

Poster Number 31

Literature Review of the manifestations of the signs and symptoms of PTSD in children aged 3-18 proceeding events of physical and sexual abuse.

Poster Number 32

A Literature Review of the Effects of Shift Work on the Health and Performance of Staff Nurses

Poster Number 33

A Literature Review of the need for a culturally competent approach to end-of-life care

Poster Number 34

A Literature Review of Effective Nursing Interventions or Teaching for Patients with a Chronic Illness such as Cystic Fibrosis

Poster Number 35

Family Psychoeducation: Integrating Family into the Care of the Consumer

Poster Number 36

How effective are incentive spirometer and deep breathing exercises in decreasing risk for post-operative pulmonary complications in adults after coronary artery bypass graft surgery?

Poster Number 37

Risk of Depression after Myocardial Infarction

Poster Number 38

Neonatal Outcomes related to Elective Cesarean Sections versus Vaginal Delivery after Induction of Labor

Poster Number 39

A literature review identifying the healthcare settings with the highest incidence of violence and aggression towards healthcare professionals

Posters Only:

Poster Number 40

The Children's Learning Center

Poster Number 41

The Childrens Learning Center

Poster Number 42

"I Have a Dream Foundation" Promoting Health Literacy for InnerCity Youth

Poster Number 43

Wellness Teaching: I Have a Dream Foundation

Poster Number 44
Children's Brain Tumor Foundation S.M.I.L.E

Poster Number 45
"I Have a Dream" New York East Harlem Class of 2023/24 Tutoring

Poster Number 46
Reach Out and Read: Greater New York

Poster Number 47
Promoting Health in Haiti

Poster Number 49
S4G.I.F.T. Presents NYODN and DKMS

Poster Number 50
Reach Out and Read

Poster Number 51
Students 4 Growing Interests for Transplantation

Poster Number 51
Music that Heals - Hurricane Sandy Response

Poster Number 52
Building Wellness and Building Nurses: A service Learning Experience

Poster Number 53
A Multi-Site Study of the Impact Global Service Learning in Undergraduate Nursing Students

Poster Number 54
The Effects of Teaching Parents of Depressed Young Adults Dialectic Behavioral Therapy

Poster Number 55
How to Adress Infant Mortality in Haiti

Poster Number 56
Getting older while living with HIV/AIDS

Poster Abstracts

Poster Number 1

Incentive spirometry for preventing pulmonary complications after coronary artery bypass graft

Cassandra Burrows, undergraduate, HBSON AD2P Nursing student

Melissa Gandolfo, undergraduate, HBSON AD2P Nursing student

Elizabeth Green, undergraduate, HBSON AD2P Nursing student

Corinne Kohrherr, undergraduate, HBSON AD2P Nursing student

Jenifer Lin, undergraduate, HBSON AD2P Nursing student

Laura San Martin, undergraduate, HBSON AD2P Nursing student

Sponsoring Faculty: Dr. Monzillo

Issue:

Incentive spirometry is a common clinical intervention for post-surgical patients to reduce pulmonary complications. This systematic review evaluated the effectiveness of incentive spirometry compared with other deep breathing techniques in the prevention of atelectasis, pneumonia, and pleural effusion, and the effect on length of hospital stay.

Description:

Understanding the efficacy of deep breathing is important for the nurse to plan actions to prevent post-surgical pulmonary complications. The systematic review was found in the Cochrane database using keywords: incentive spirometry, post-surgical, benefits, advantages, deep breathing, adult, efficacy, pulmonary complications, atelectasis, pneumonia, pleural effusion. The review consists of quantitative prospective cohort and retrospective case control studies.

Results:

Incentive spirometry therapy was not shown to be more effective than deep breathing in decreasing the rate of pulmonary complications such as atelectasis, pneumonia, and pleural effusion. However, incentive spirometry was found to be more effective than intermittent positive pressure breathing in increasing respiratory muscle strength.

Conclusions and recommendations:

Most research did not show incentive spirometry to be more effective than deep breathing regarding the rate of pulmonary complications in post-surgical patients. Post-surgical patients found incentive spirometry painful and difficult to use. Future research should focus on patient compliance with prescribed incentive spirometry in relation to their pain and willingness to engage in breathing exercises. The review found a lack of well-designed studies addressing this issue and called for further research with larger sample sizes and fewer limitations such as gender biases.

Poster Number 2

A Review of the Literature on Guided Imagery for Fibromyalgia Symptom Management

Nancy Lee, Graduate Student, HBSON

Sponsoring Faculty: Lorie Goshin

Purpose: The aim of this literature review was to explore guided imagery (GI) for management of symptoms associated with fibromyalgia (FM).

Background: FM is a chronic pain condition. Prevalence estimates in the United States range from 3.7- 6 million adults. FM has no cure at this time and usually progresses to significant disability if not managed properly. Current management involves high cost health services and medications with risks for adverse reactions and dependence. GI may present a safe, patient-controlled, low-cost therapy to be used in addition or as an alternative to traditional approaches.

Methods: CINAHL, MedLine and PsycInfo were searched for randomized controlled trials and systematic reviews to evaluate the efficacy of GI for persons with FM. Five RCTs and 1 meta-analysis were reviewed.

Results: Research revealed modest support for the use of GI as an adjunct to usual care of FM. Findings suggest that GI may be most effective at improving self-efficacy and functional status, and less so with pain management. No studies were found that assessed GI alone. Methodological issues in the reviewed studies limit confidence in currently recommending GI for FM patients. GI interventions differed in potentially important ways across trials. Follow-up time frames were short, and attrition bias may have affected the longer studies. Small, predominately White samples also limit external validity.

Conclusions: GI is a safe adjunct to traditional FM symptom management approaches. Insufficient evidence exists to recommend GI as a stand-alone treatment. Additional research is needed to address identified gaps in the literature. Psychological treatments such as GI have not been well studied or utilized in FM; however with further research, they may prove effective and more affordable therapy for the management of FM pain and its associated symptoms. Nurse researcher expertise in symptom management can be the driving force to understand and advance alternative modalities to support comfort and quality of life in patients with FM.

Poster Number 3

Flu Prevention: Breaking the Chain

Rachna Patel, Maunyah Arcelin, Kimberly Vargulic, Barbara Bielecka-Stec, Mandeep Kaur, Carmen Estremera, Sheva Wiesel, Gasha Hewitt, Jennifer Rios-Watts
(Undergraduate, Nursing, Queensborough Community College)

Sponsoring Faculty: Prof. Reilly

Issue: Influenza is an acute respiratory illness that can spread from person to person during the winter months. It is highly contagious and can potentially be transmitted via airborne respiratory droplets. In United States, on average 5%-20% of the population gets the flu yearly and more than 200,000 people are hospitalized from flu-related complications. Targeting population groups most likely to spread the virus can help break the chain of infection.

Description: A health education project focused on flu prevention was developed for the diverse student population of a community college, comprised of 25% African American, 24% Asian, 23% Caucasian, 27% Hispanic/Latinos, and 1% Native American and others. It was conducted during Spring 2012 semester. The flu virus can spread rapidly among college students because of classroom settings, shared restrooms, close proximity to one other (e.g. contact sports), and frequent contact with fomites, which could potentially be a source of infectious microorganisms. Best practices in teaching-learning principles for adult learners were employed, targeting the cognitive, psychomotor and affective domains to enhance the learning. Our poster will summarize the specific strategies utilized and lessons learned.

Lessons Learned: Attracted by the potential to win a prize, 70 students willingly stopped by our flu prevention station at the Health Fair, to take in some information, and participate in our quiz focusing on flu prevention techniques.

Next steps: Encourage college students to get flu vaccine as soon as the flu season begins. Develop activities to attract this population and provide prevention strategies that use adult learning best.

Poster Number 4

Gender Inequality: When Women are Victims of Violence

Cerasela Shiiba, RN Undergraduate Program HBSON

Sponsoring Faculty: Joan Arnold

Up to one in three women worldwide will experience violence at some point. Women suffer violent death directly or indirectly. Violence is an important cause of morbidity with multiple mental, physical, sexual, and reproductive health outcomes. It is linked to known risk factors for depleted health, including, alcohol and drug use, smoking, and unsafe sex. When the cumulative impact on mortality and morbidity are assessed, the health burden is often higher than for other more commonly accepted public health priorities. Violence is expressed in a myriad of ways as well as being culturally defined and sanctioned. Reducing gender inequality and empowering women is one of the Millennium Development Goals of the United Nations which specifies eliminating gender disparity in all levels of education. Empowering women includes access to health information and control of health resources while providing support for gender-responsive policies and programs. Current research includes engagement of men to promote gender equality and focuses on men's health from personal to global perspectives, as contributing members of families and communities. The resilience potential of each human being is the essential focus of nursing care and research. The Society-to-Cells Framework provides a holistic approach understanding resilience as resistance, recovery, or rebound of mental and physical health after a challenge. This framework, from micro and macro levels, is used to examine gender inequality and strategies to promote equality and end violence against women.

Poster Number 5

Defining guidelines for health care professionals caring for the lesbian, gay, bisexual and transgender community: A Literature Review

Mary Boyd (Undergraduate, RN Pathway), James Herbst (Undergraduate, RN Pathway),
Melissa J. Weinberg (Undergraduate, RN Pathway), HBSON

Sponsoring Faculty: Eloise Monzillo PhD, RN, AHN-BC, CPHQ

Issue: With the increasing social awareness of the LGBT population, there is an increased need for health care professionals to be educated on the applicable care guidelines that specifically apply to this population.

Description: The rationale for this literature review was to examine current guidelines for health care professionals regarding general health care interaction for the LGBT population. This systematic search and limited review of the literature was conducted using CINAHL, U.S. Government Department of Human and Health Services, Google Scholar, and Medline. Keywords used were:

LGBT health care, LGBT health care guidelines, LGBT provider resources, and health care needs LGBT. There was no systematic review available from The Cochrane Review regarding this topic.

Results: The literature indicates that LGBT populations experience health disparities related to sexual orientation. Many LGBT people postpone care when sick or injured as well as postpone preventative health care due to perceived discrimination by providers. A majority of health care providers indicate that they are not familiar with local organizations or resources to which they could refer their patients for social support and information. Existing research indicates that healthcare professionals often neglect the issue of sexual diversity among their patients, and report little or no education about LGBT health issues during their training.

Conclusion: Health care professionals should increase their mindfulness regarding LGBT patients. Recommendations to increase awareness include: introduction of LGBT specific health issues into the classroom curriculum for health care providers, how health care providers may facilitate an accepting environment at health care institutions, and clinical orientation for staff regarding cultural differences of LGBT clients.

Poster Number 6

Influence of Presence of Observer on Hand Washing Conformity

Alisa Jaganjac, Undergraduate , HBSON

Sponsoring Faculty: Prof. Dowling

Background: Hand washing after using the bathroom is a relatively strong social norm; frowned upon by others when not followed. In an attempt to avoid the negative reaction by society when the norm is not obeyed, people will report to conformity of the norm even when it is false. This study investigated whether self-reported hand washing behavior was higher than observed hand washing and whether hand washing behavior is increased when there is a visible observer.

Methods: Ninety-five participants from Hunter College, both male and female, filled out questionnaires reporting their hand washing habits; a separate ninety-five Hunter College male and female bathroom users were observed to measure the amount of hand washing when the presence of the observer was known and unknown. The female observations were done by a female student, and the male observations were done by a male student.

Results: There was a significantly higher rate of participants' self-reported hand washing compared to the amount observed. Participants who filled out the questionnaires had a mean answer of .06 (SD = .25)—with 0 being Yes to washing their hands after bathroom usage and a 1 being an answer of No— 89 (93.7%) of the 95 participants claimed to wash their hands after bathroom usage. Of the observations made, 59 (62.1%) participants overall being observed washed their hands. There was also a significantly higher amount of hand washing after bathroom usage observed when the presence of the observer was visible, 39 (79.6%) of the 49 participants, rather than hidden, 20 (43.5%) of the 46 participants; supporting the hypothesis that hand washing frequency is higher when the presence of an observer is known.

Conclusions: The findings of the self-reported data and the observations can be interpreted by people wanting to be accepted into society, and in order for that to happen they need to conform to social norms – hand washing included. The presence of the observer added social pressure on the bathroom user, consciously realizing that there was someone in the bathroom watching them makes bathroom users more inclined to follow the norm of hand-washing. Further research is needed to compare our results to a more general, larger sample and a sample of participants with more diverse characteristics and norms towards hand washing after bathroom usage.

Poster Number 7

Applying the International Classification of Functioning Disability and Health (ICF) to Group Communication Therapy in Stroke Survivors with Aphasia

Meghan Ahern, Briana Beattie & Melissa N. York Communication Sciences
Harvey Alter, Jose Ortiz, Giulia M.L. Bencini Communication Sciences

Sponsoring Faculty: Elizabeth E. Galletta

Issue: Aphasia is a neurological condition affecting circuits in the brain that are responsible for language functions. Following directives from the World Health Organization (WHO) speech-language pathologists (SLPs) have begun to adopt a person-centered framework to aphasia therapy which includes broader aspects of functioning such as communication and social participation and takes into account environmental and personal factors.

Description:

The Hunter College Aphasia Program in collaboration with the International Aphasia Movement. It brings individuals with aphasia together in a supportive environment to foster communication and social relationships. Approximately 33 individuals with aphasia are registered in the monthly Friday Intensive group. Graduate students and three faculty advisors facilitate. Participants rotate through three different activities: (1) Communication: facilitates conversation using all modalities of language; (2) Current Events: facilitates reading and discussion of current issues; (3) Technology: facilitates the use of an Ipad to accomplish functional, social, or communicative goals (e.g., searching for directions, email, social media).

Lessons Learned:

Group members appear to enjoy a group therapy setting. Student clinicians gain hands on experience conducting group sessions with individuals with aphasia.

Future Steps:

We are now planning instruments for research on program efficacy, including quality of life measures of participants.

Poster Number 8

Issue: Improving quality of life in the patient with renal failure.

Pamela D'Amato, Ann Marie Gardiner, Yan Yan Leon, Samantha Morel, Elisabeth Sanderson, Lynette Wells, Andrea Williams, Stephen Wong. (Undergraduate, Nursing, Queensborough Community College)

Sponsoring Faculty: Prof. Bayer

Description: There are currently 593,086 people with renal failure; 179,361 who have received kidney transplants; 383,992 on hemodialysis and 39,733 receiving peritoneal dialysis (USRDS Annual Data Report, 2012). This literature review seeks to discover improvements that can be made in primary and secondary prevention methods and, in those with kidney disease, how treatment options affect quality of life. Peer-reviewed studies for this literature review were retrieved using database searches from CINAHL and ProQuest. Key words and phrases included hemodialysis and renal failure, kidney transplant, quality of life and end stage renal disease.

Results: Chronic kidney disease (CKD) is most common in people with hypertension and diabetes mellitus. It can affect apparently healthy people as well. A study assessing the benefit of screening healthy people for CKD was inconclusive (Fink et al, 2012). To slow progression from CKD to end stage renal disease (ESRD), two methods used are glycemic control and ACE inhibitors or ARBs (Turner et al, 2012). With ESRD, a significant increase in quality of life was reported in those with renal transplantation (RT) compared to those receiving hemodialysis. Renal failure and complications/risks that come with ESRD are no longer present in those that had RT.

Conclusions and Recommendations: Screening those at high risk for CKD may help slow the progression of disease. Further research can include whether inexpensive solutions like alkali supplementation (sodium bicarbonate, sodium citrate) or Vitamin D supplementation will reduce the incidence of ESRD. RT remains the optimal treatment for ESRD.

Poster Number 9

A Literature Review of the Effects of Horizontal Violence on Resignation Rates among New Nurses

Steven Gordon, Nazar Diwnich, Charisse Geraldino, Shu Yu Feng, Charmaine Escudero, Shaneka Gregory (HBSON, Undergraduate Program)

Sponsoring Faculty: Nancy Bohnczyk, MA, RN

Issue: Workplace bullying, or horizontal violence, consists of any acts used to undermine or humiliate an individual or group of employees. Although many consider nursing a caring profession, horizontal violence is a problem that has been documented in nursing literature for over 30 years. It

remains one of the leading causes of resignation among nurses, especially new graduate nurses with less than two years' experience. Despite the acknowledgement of its existence, few policies have been implemented to resolve the problem.

Description: Using a variety of databases through Hunter College, this research summary examines the existing literature on horizontal violence on new nurses including prevalence, causes, effects, and solutions.

Results: Key findings indicate that horizontal violence in nursing is considered a part of a hierarchical structure, which results in a lack of sensitivity and unreported incidents. Due to their lack of experience, new nurses become easy targets of workplace bullying. Bullying primarily takes the form of verbal abuse and lack of autonomy, which in turn decreases workplace morale and job satisfaction, leading to increased resignation rates.

Conclusions and Recommendations: Because of the current shortage in nursing and low retention rates in hospital settings, it is essential to create a professional environment that can recruit and retain a healthy and functional nursing workforce. Interventions to improve conditions include safe and anonymous mechanisms for reporting workplace bullying, detailed documentation of incidents, and implementation of authentic leadership practices.

Poster Number 10

The Effects of Omega-3 Fatty Acids and the prevention of a major cardiovascular disease event.

Patricia Fallon , Maria Morales, Tsering Yangkyi (Undergraduate, RN-Pathway, HBSON)

Sponsoring Faculty: Eloise Monzillo RhD

Issue: Heart disease is the leading cause of death for both men and women. The Center for Disease Control and Prevention, 2013, states "About 600,000 people die of heart disease in the United States every year—that's 1 in every 4 deaths." However there is great controversy over the significant protective effects of omega-3 fatty acids as a direct triglyceride lowering level agent and the prevention of a major cardiovascular disease event.

Description: This systematic search and limited review of the research literature was conducted using CINAHL, Medline and Cochrane Database. keywords used Omega-3 fatty acids, cardiovascular disease, myocardial infarction and triglycerides. Studies found were systematic reviews, meta-analyses, and randomized double blind, placebo-controlled trials

Results: A critical review of the literature's evidence within the last five years indicate that Omega-3 fatty acids has no significant association with a reduction of a major cardiovascular event. There has been a small favorable reduction on triglycerides levels but insignificant. The Food and Drug Administration (FDA) approved Omega 3 fatty acids and states" Supportive but not conclusive research shows that consumption of EPA and DHA omega-3 fatty acids may reduce the risk of coronary heart disease"

Conclusion and recommendation: Further research is needed with an emphasis on the mechanism of action of Omega-3 Fatty acids and cardiovascular disease. Future studies should include ethnically diverse populations, especially those with prevalence of high risk for cardiovascular disease.

Poster Number 11

A Literature Review of the Effects of Therapeutic Touch on Pain in Cancer Patients

Christina Kaufman, Ivy Mutibura, Ekaterina Naumova, Denise Reyna, Jasline Rodriguez, Danica Santos, Xiang Zhao, (Undergraduate Program, HBSON)

Sponsoring Faculty: Nancy Bohnczyk

Issue: Although there are medications for pain, they are not always suitable for everyone. These medications can often result in adverse side-effects. This literature review addresses the following question: Does therapeutic touch reduce pain in cancer patients and decrease medication reliance?

Description: This systematic search was conducted using PubMed, Medline, EBSCO, and CINAHL. Keywords used included therapeutic touch, pain, cancer patients, and complementary therapies. Studies found consisted of systematic review, qualitative study, meta-analysis, and randomized clinical trials.

Results: Findings include moderate effects of therapeutic touch on pain; reduced anxiety levels in cancer patients; and improvement in well-being and quality of life, fatigue, comfort level, depression, and spirituality.

Conclusions and recommendations: Cancer patients reported positive holistic effects, but only a moderate relief of physical pain. We would suggest long term studies as well as conducting trials in the pediatric population.

Poster Number 12

A Literature Review of the Efficacy of Animal-Assisted Therapy in Managing Pain in Hospitalized Pediatric Patients

Elena Crotty, Huiqing Liu, Ana Londono, Jeffrey Owens, Joseph Petrovic (Undergraduate, Generic Pathway, HBSON)

Dr. Eloise Monzillo, PhD, RN, AHN-BC, CPHQ (Faculty Sponsor)

Issue: The question of the effectiveness of pet therapy as a pain management intervention is significant due to the wealth of evidence showing that pain in pediatric patients tends to be under-treated. Pet therapy could serve as an adjunct intervention to alleviate pain in hospitalized children.

Description: Medline, CINAHL, and the Cochrane Library were used to systematically search the available literature. Keywords used as search limitations were pet-therapy, animal-assisted therapy, pain, hospitalized, pediatric, and adolescence. Applicable research identified included a systematic review, a correlational study, an ethnographic study, and two multi-method design studies.

Results: Pet therapy is linked to decreases in blood pressure, heart rates, and stress levels. Furthermore, effective pet therapy may result in reducing the need for pain-relieving pharmacological interventions, lessening the risk for potential drug side effects while reducing the time pediatric patients spend in pain.

Conclusions and Recommendations: Overwhelmingly, pet-therapy research has demonstrated positive physiologic and psychosocial effects on pediatric patients' pain in the clinical setting. However, much of the research has been directed at analyzing short-term outcomes related to acute pain. Examination of pet therapy for chronic, longterm pain is needed.

Poster Number 13

Anosognosia and Ability to Self-Administer Medications in Right Hemisphere Stroke

Rosa Davi (Graduate student, Communication Sciences)

Sponsoring Faculty: Elizabeth Galletta, PhD, Communication Sciences

Background: At hospital discharge, medication schedules are typically explained to patients and written information about the medications is provided. Anosognosia (unawareness of deficits) is a common cognitive symptom of right hemisphere stroke negatively correlated with patient recovery and functional outcomes (e.g., feeding, toileting, etc.). This condition may also contribute to difficulties adhering to medication schedules, a crucial functional outcome measure which can significantly impact recovery from illness.

Methods: Sixty-four participants who sustained a right-hemisphere stroke self-assessed their ability to administer medications pre- and post-completion of the Hopkins Medication Schedule (HMS), an objective measure of ability to comply with medication regimens. This procedure was conducted pre- and post- three medication-education sessions. The following measures were obtained pre- and post-intervention: 1. The Hopkins Medication Schedule (HMS), and 2. an Anosognosia Ratio (AR) was computed that incorporated HMS score and self-assessment of ability to administer medications.

Results: Repeated measures ANOVA revealed no significant difference between HMS scores pre- and post-education sessions, $F(1,63)=2.184$, $p=.144$. Repeated measures ANOVA revealed no significant difference between the AR pre- and post-education sessions, $F(1,63)=.101$, $p=.751$.

Conclusions: Education-based intervention for medication management may not be adequate to address the barriers to self-administration of medications in stroke survivors.

Acknowledgments: We thank Luca Campanelli for his role in the data analysis of this study.

Poster Number 14

Sepsis: The Importance of Early Diagnosis and Intervention to Manage and Improve

Outcomes

Lena Abajian, Eresha Bennett, Deeka-Gaye Graham, Tania Hernandez, Mahwish Mirza, Ramona Parsaud, Laurie Retzlaff (Nursing Students, Queensboro Community College)
Sponsoring Faculty: Prof. Bayer

Issue:

More than 750,000 Americans contract sepsis each year, and over 200,000 die from it due to delay in diagnosis and treatment (Pereira et al., 2011). This alarming number identifies sepsis as the leading cause of death in hospitals and the eleventh leading cause of death overall in the United States. This literature review addresses the dire need of initiating a sepsis protocol to identify the early symptoms and manage the progression of sepsis to reduce the present sepsis mortality rate of 26-30%.

Description:

This limited review of the research literature was conducted using PROQUEST. Keywords used included sepsis, early recognition, sepsis protocol 2013, sepsis and septic shock. Studies found were composed of five descriptive studies.

Results:

Key findings indicate the hospital systems that utilized identification protocols of "golden hour" and "silver day" showed massive success in controlling the sepsis progression. Golden Hour refers to identifying and initiating treatment of sepsis within an hour; Silver Day refers to aggressive correction of sepsis for the remaining twenty-four hours (Tannehill, 2012).

Conclusions and Recommendations:

In the future, hospitals should incorporate a standardized sepsis protocol in their policies to ensure each case of infection is monitored and measures are taken to prevent progression of infection to sepsis. By utilizing the Golden hour and Silver Day, in addition to initiating sepsis code, serious reduction in mortality rate is certain.

Poster Number 15

A Literature Review about the Prevalence of Cesarean Section Deliveries between Young and Older Aged Mothers

Alexandra Ghenghiu, Laura Schwerzler, Stephanie Sinchi, Lyudmyla Sokoletski, Perri Steiner, Kazuko Suzuki, Joanna Toussaint (Undergraduate, Hunter Bellevue School of Nursing)

Faculty Sponsor: Prof. Nancy Bohnarczyk

Issue: Cesarean sections are considered more high risk compared to vaginal deliveries due to increased risk of bleeding, infections and anesthesia complications. Many debate whether cesarean sections are performed more often than necessary for women of advanced maternal age or for non-medical reasons. This literature review addressed the following question: Is cesarean section

performed more commonly on young mothers (under 35 years) or advanced age mothers (35 and older) and what are the potential causative factors?

Description: A systematic literature review was conducted using online databases CINAHL and Medline to review the literature related to this topic. Keywords used in the search were: cesarean section, advanced maternal age, and age group. There were five studies identified relevant to the research: one systematic review, three cross-sectional secondary data analyses and one cohort study.

Results: In relation to maternal age and the rate of cesarean section, all the studies have shown that there is an increased rate of cesarean sections among mothers of advanced age compared to younger mothers. Some of the most common reasons for cesarian section were advanced maternal age (AMA) mothers of single parity, pre-eclampsia, obstructed labor, pre-term delivery, gestational diabetes and elective cesarean.

Conclusions and recommendations: The results from the literature review are that mothers of advanced maternal age experience more cesarean sections than their younger counterparts. Age, independent of other risk factors, seems to be an indication for cesarean. It is not clear if advanced age is viewed as a risk factor by physicians and so leads to cesarian section, or whether older mothers more often request elective cesarian section compared to younger mothers. Qualitative research that investigates physician attitudes towards advanced maternal age may be helpful in understanding these statistics.

Poster Number 16

A Literature Review about the Effect of Structured Social Support to Promote Health in Caregivers of Persons with Dementia

Alla Beliakov, Tara Bohensky, Ashley Decter, Valerie Goldblatt, Sharon Spiegel, vora Shteierman(Undergraduate, HBSON)

Faculty Sponsor: Eloise Monzillo PhD, RN, AHN-BC, CPHQ

Issue: Social support is an integral part of the shared human experience. It can provide members of a community or network with many psychosocial and physical health benefits. This literature review addressed the following question: Does providing supplementary, structured social support to primary caregivers of dementia patients lighten the burden of care enough to allow these caregivers to maintain a healthy mental and physical status for a longer period of time than those who do not receive the supplementary support?

Description: This systematic search was conducted using the Academic OneFile, Medline, and Cochrane databases. Keywords included dementia, caregiver care, and social support. Studies found consisted of a systematic review, four randomized controlled clinical trials, and two independent randomized controlled clinical trials.

Results: Key findings indicated that there was little, if any significant difference between the mental and physical health of study participants who received additional structured social support and those who did not.

Conclusions and Recommendations: Most of the trials drew from samples that were largely textbook, upper middle class heterosexual families with no complicating factors such as language deficits, cases with severe dementia, or an illness or cognitive disability of the caregiver. It would seem then, that the dearth of significant results stem from the fact that the populations most in need of aid were not actually studied. It is recommended that future studies be specifically geared toward exploration of social support mechanisms specifically tailored toward the more complicated caregiver.

Poster Number 17

A Literature Review of the effects of hand washing in comparison to hand-sanitizer in decreasing absenteeism related to illness in school-aged children

Stanley Wilson, Ayla Winkler, Yang Lu, Alisa Jaganjac (Undergraduate, HBSON)

Sponsoring Faculty: Eloise Monzillo PhD, RN, AHN-BC, CPHQ

Issue: Preventing epidemics such as the influenza virus are more important than ever. Simple habits, such as hand washing and sanitizer usage are emphasized to help prevent the spread of infection. School aged children are a prime population for spreading the infection due to improper hand hygiene knowledge, close proximity at school and their immature immune systems.

Description: Studies have shown hand sanitizer to be less effective than hand washing in decreasing contagious. It is important to differentiate which method of hand hygiene is more effective in decreasing illness. As future nurses, our goal is to decrease the spread of infection and promote the overall health and wellness of our patients. This systematic search and limited review of the literature was conducted using CINAHL, Cochrane Database and EBSCO Publishing. Keywords used included absenteeism, hand washing, hand sanitizer, infection, illness, school-aged, and comparison. Studies found included a systematic review, two descriptive studies, and one qualitative study.

Results: Key findings indicate that when proper hand-washing techniques are taught and implemented, hand washing is highly successful in reducing absenteeism (21% decrease) related to influenza illness, respiratory viruses and diarrheal diseases among school children. This intervention of teaching hand washing techniques was more effective in reducing transmission of infectious diseases in comparison to usage of hand sanitizer among school children and was feasible and accepted by school children, families and teachers.

Conclusions and recommendations: Although both are helpful, hand-washing behaviors reduce absenteeism in school-aged children more than hand sanitizer usage. There is an advantage in hand washing when teachers and students are taught the correct hand washing procedure. A future clinical

question for a subsequent nursing research study would be to test the effectiveness of alcohol vs. non-alcoholic based hand sanitizer on school-aged children. Alcohol based sanitizer require a specific concentration of alcohol to be effective; however the FDA does not regulate the concentrations in hand-sanitizers.

Poster Number 18

Effects of Shift Work on Nurses' Sleep Pattern and Overall Patient Outcomes

Elizabeth Davidov, Machline Clerrosier, Luis Embuscado, TianQi Du, Lucy Chao, Phil Cohen(Undergraduate, HBSON)

Sponsoring Faculty: Professor Nancy Bohnczyk, MA, RN

Issue: The researchers initially thought that nurses who work 12 hour shifts or longer are “better off” than nurses who work 8 hour shifts. 12-hour shifts were longer, however this would mean that nurses would get more days off. Consequently, the more days off the nurses have, the more rest and sleep they get in a week. The researchers thought that this system might be beneficial to overall patient outcomes. But what is the reality to these assumptions? This literature review focused on answering the following issue: How do differing shift lengths relate to nurses' health in terms of sleep pattern changes, as well as quality outcomes for patients.

Description: The researchers found articles in the CINAHL and MEDLINE databases. Keywords: Nurses' shift work; shift length; effects of shift work and nurses' health. Methods: secondary analysis of cross sectional nurse survey data was conducted. One article's analysis focused on 3710 RNs who worked in 342 acute care hospitals. Questionnaires were used to obtain information as well as statistical analysis.

Results: Shift work length was not a direct factor affecting patient outcome and nurses' health. Gender, age, and weight were significant factors affecting patient outcome and nurses' health. Other results included those nurses who worked more than 13 hours “reported worse job outcomes and lower quality and safety for patients compared with nurses who worked 8 hour shifts”. Nurses reported more awakenings in their sleep when working the night shift rather than the day shift.

Conclusion: The goal is to support future research regarding ways nurse managers can eliminate excessively long shifts for nurses, i.e. those beyond 13 hours. By improving working hours, health and well being of patients and nurses can be improved.

Poster Number 19

Therapeutic Conversation, Socialization, and Word Retrieval in Aphasia: A Group Therapy Program for Stroke Survivors Reflecting a Biopsychosocial Model of Health

Elizabeth O'Boyle, Jose Ortiz (Communication Sciences)
Sponsoring Faculty Member: Prof. Galletta

Issue: Aphasia is an acquired disorder that impairs language function, but does not affect intelligence. The Hunter College Aphasia Program: Weekly Groups provides individuals with

aphasia continued intervention beyond health insurance coverage to foster communication and socialization.

Description: The Hunter College Aphasia Program in collaboration with the International Aphasia Movement utilizes education, treatment, and research to offer stroke survivors with aphasia intervention. The therapy Weekly Groups are offered twice weekly. These groups follow the holistic framework established by the International Classification of Functioning, Disability, and Health (ICF) (WHO, 2001), which aims to provide treatment for both impaired language skills and impaired functional communication skills.

The goal is to improve communication, while receiving support from peers. Twice a week, 20+ participants meet for 2 hours with graduate student speech-language clinicians. Participants interact in a large group setting before breaking into smaller groups of 2-4 participants. In the smaller groups, student clinicians facilitate group discussions and individual communication goals.

Lessons Learned: Participants report improved quality of life. Graduate students have learned that treatment of isolated linguistic skills in a social communicative context is valuable.

Next Steps: We plan to expand the outreach of the program and to develop instruments to evaluate its effectiveness.

Poster Number 20

The Influence of Phonotactic Probability on Lexical Access in Adults and Children with and without a History of Expressive Language Delay

Lauren Postiglione, Graduate Student, Communication Sciences

Sponsoring Faculty Member: Michelle MacRoy-Higgins, PhD, CCC-SLP,

Background: The purpose was to examine the influence of phonotactic probability on lexical access in adults, typically developing children, and children who had a history of language delay (late talkers).

Methods: Sixteen (16) adults and 12 children (6 had a history of expressive language delay) completed a cross-modal picture-word interference paradigm, where participants named pictures while hearing related (phonological or semantic) or unrelated words. Reaction time (in milliseconds) was recorded.

Results: Phonotactic probability did not influence lexical access in adults and children. All participant groups named target words (both high and low phonotactic probability) quicker after hearing a related word as compared with an unrelated word. The children had slower reaction times as compared to the adults; children who were late talkers showed the same pattern of responses as their typically developing peers.

Conclusions: Lexical access in children with a history of expressive language delay is similar to their peers without a history of delay. Similar to adults, the children were able to take advantage of both phonological and semantic information to facilitate word naming.

Acknowledgements: This research was supported by the President's fund for faculty advancement, Hunter College, CUNY

Poster Number 21

Benefits of a Dedicated Education Unit Nursing Clinical Model to Undergraduate Student Participants

Ricci, K., MacVittie, B., Grayver, Y. , Knight, S. (Undergraduate, HBSON).

Sponsoring Faculty Member: Nancy Bohnczyk,

Issue: A dedicated education unit (DEU) is a relatively new clinical instruction model developed for the purpose of providing nursing students with partnered nurse preceptors with intentions to improve clinical competency, increase confidence with direct patient care, and provide a seamless transition from nursing student to professional registered nurse. The dedicated education unit forms strategic partnerships between university or college-based nursing programs and hospitals in providing investment for developing superior nursing students. The actual benefits offered to student participants of DEUs are not widely understood. This review of the literature serves to clarify the student benefits.

Description: This systematic search and limited review of research literature was conducted using online research databases including ESBL, CINAHL Plus, and Medline Plus. Keywords searched included Dedicated Education Unit and DEU. Studies found to match criteria were comprised of a systematic review, a descriptive study, and two qualitative studies.

Results: Despite limited research in the United States on student perspectives of their DEU model clinical rotations, the overall results of this study revealed that students found their rotations based on the DEU model to be a positive learning environment that led to student satisfaction and confidence.

Conclusions: Dedicated Education Units appear to provide a number of benefits to student participants, including increased opportunities to participate in procedures, increased support and cooperation of students among themselves to meet learning goals, enhanced ability to identify quality improvement opportunities in patient care, heightened sense of accountability during clinical time, and a greater sense that the student was in control of his or her own learning experience.

Poster 22

Students' Perspectives: Themes, Trends, and Experiences in a Pilot Dedicated Education Unit in a Public Urban University

Giselle Campos-Dominguez, Emily Eckman, Zahira Navarrete, and Li Vanessa Zhang
(Undergraduate, HBSON)

Sponsoring Faculty Member: Theresa Yannaco,

Background: The Dedicated Education Unit (DEU) is an innovative partnership between academic and clinical service learning agencies in which staff members have an active role in the education of undergraduate nursing students. The purpose of this brief report is to explore student perspectives of the pilot DEU program to better understand its effect on the clinical experience in a baccalaureate nursing program.

Methods: Eight junior year nursing students completed reflective blogs on their experience in their first clinical rotation at the DEU partner institution and clinical rotation at institutions outside of the DEU framework. The analysis team used standard exploratory qualitative techniques to develop a coding template and applied codes.

Results: Students reflected on the importance of clinical mentoring within the DEU framework, and its effects on student clinical competence, efficiency and self-confidence. Furthermore, students reflected on the importance of teamwork and communication in promoting critical thinking and increased clinical learning.

Conclusions: Although the majority of students perceived that the DEU experience improved their clinical performance, similar themes emerged indicating that the non-DEU clinical experiences also improved student's clinical learning. The unique clinical experiences of generic, undergraduate nursing students in a DEU educational model contributes to an increased understanding of this clinical educational method, which can impact the design of future DEU programs.

Acknowledgements: Our sincere gratitude is extended to our HBSON faculty: Professor(s) Theresa M. Yannaco, Joseph P. Saladino, Alice Freely, as well as the Nurse Leaders and Preceptors at Lenox Hill Hospital: Phyllis Yezzo, Donna Tanzi, and Simone Ashman.

Poster 23

Considering a Biopsychosocial Model of Health in the Translational Application of a Specific Voice Treatment

Meghan Ahern, B.A. (Communication Sciences)

Sponsoring Faculty Member: Elizabeth E. Galletta

Issue: The Lee Silverman Voice Treatment (LSVT) has proven to be efficacious in the treatment of hypokinetic dysarthria secondary to Parkinson's Disease. Translational treatment of LSVT for more than just loudness involves application to other populations and disorders.

Description: The application of LSVT to stroke survivors with dysarthria will be described. In addition, a case in which LSVT was used in conjunction with swallowing treatment for dysphagia will be profiled. In both examples of the translational application of LSVT, the International Classification of Functioning Disability and Health (ICF) (WHO, 2001) is the central theme involved in translational treatment. Specific consideration of the domains of Activities and Participation as well as Environment and Context will be highlighted.

Lessons Learned: When focusing on the client, and considering the client's role in treatment, participants report improved quality of life.

Next Steps: Continued exploration of translational application of efficacious treatments in the context of the ICF model.

Poster 24

A literature review of the effects of fall prevention programs in reducing fall-related injuries among the elderly in communities and health care settings

Student Name: William Lau, SooJung Lee, PoYu Li, Sujata Gurung, Ye Seul Lee, Gian Leonzon. (Undergraduate, Generic and RN Pathway Nursing Program)

Faculty Sponsor: Prof. Nancy Bohnczyk

Issue: Falls are one of the leading causes of morbidity and mortality among elders. Health care facilities around the world have intervention programs to prevent falls. This literature review addressed the following question related to these programs: How effective are the fall intervention programs in reducing fall-related injuries among elders in different communities when compared to no intervention programs?

Description:

Our research was conducted using CINAHL, EBSCO, Medline, Cochrane Database, and PubMed. Keywords used in our studies are geriatric, elderly, education, fall prevention, instruction, teaching, lessons, programs, and rate of falls. Studies found included four systematic reviews, one qualitative study, and one descriptive study.

Results: Overall, the studies that were conducted in different countries have shown significant decreases in fall rates among the elderly after participating in fall intervention programs. Particularly, The Otago home exercise program had the greatest decrease in fall rates (46%) compared to all six studies that were examined.

Conclusion and recommendations: Preventing falls among the elderly in communities and health care settings is a serious issue that needs to be addressed by all healthcare providers. Implementation of fall prevention programs may reduce falls, fall-related injuries of the elderly, and even mortality.

Poster 25

The Impact of Tele-monitoring on Individuals diagnosed with CHF

Lisa A. Gillespie (Graduate Student, HBSON)

Sponsoring faculty member: Lorie Goshin

Aim: The aim of this literature review is to answer the question: In elderly patients (>60) with CHF how do only clinic visits/ provider follow up (standard of care) compared to telemonitoring with standard of care affect readmission risk in the year following hospital release?

Background: There is a significant body of research that points to an association between Home telemonitoring, decreased CHF exacerbation, and hospitalization. According to the Center for Disease Control (CDC, 2012) there are approximately 5.7 million people in the United States that have heart failure. The rates of morbidity are high with about ½ of the people dying within 5 years of diagnosis (CDC, 2012). The American Heart Association (AHA) classifies Heart failure into four stages, as does the NYHA Classification of Stages of Heart Failure. Respectively stages C-D and stages II-IV are the most symptomatic populations and generally the most hospitalized patients. These populations are the focus of the articles reviewed.

Data sources: A literature review was conducted using Pubmed, CINAL, and Medline.

Review methods: A combination of the following terms was used to review the literature: congestive heart failure, CHF, tele-monitoring, telemetry, and hospitalization. Studies were included for review if they met the following standards: peer reviewed, less than 5 years old, English language and full text. Exclusion criteria included; patients younger than 60, AHA classification A&B or Class I&II, and refusal to use technology. 62 articles were initially found, and five selected for review based their high level of evidence.

Findings: Taken together the results of these studies indicate there is an increased benefit for the CHF population receiving telemetry. Decreases in hospitalization, decrease in home visits, and improvement of quality of life were reported in most of the studies (Myers, Grant et al., 2006; Antonicelli, Testarmata et al., 2008; Klerse et al., 2009; Kastner et al., 2009; Leonard, et al., 2012). These studies are well generalizable to the CHF population at large and internationally. Studies' outcomes may have been affected by compliance with technology. This could be related to the perceived benefit or decreased ability to learn new material (Myers, 2006).

Conclusion: Evidence shows that CHF patients can benefit from telemetry monitoring. The significant client contact and also a unique perspective on care, places Registered Nurses at the fore

front for helping integrate technology and patient care. Nurses can play a larger role in educating and reeducating patients on the benefits of technology. Nurses may also function as the providers that monitor telemetry patients or help in the selection of patient appropriate equipment. Improving the selection of tele devices to those that are user friendly as well as taking into account physiological changes (vision, dexterity, mental acuity) may increase compliance with home tele-monitoring. Nurses should continue to educate themselves in technological advances and be proactive in creating positions as well as a hand in designing technological applications.

Poster 26

The Effects of Noise Reduction Interventions on the Subjective Sleep Experience During Hospitalization

Jennifer Colon, Jacklyn Esterma, Naia Lowery, & Violette Patrick (Graduate Students, HBSON)
Sponsoring faculty: Lorie Goshin

Background: Adequate sleep improves the health and wellness of patients, while inadequate sleep can disrupt the healing process. Hospital inpatient units are often noisy due to equipment, staff discussions, and other environmental factors, potentially leading to decreased quality of sleep. Sleep quality and noise levels on the unit have been shown to directly affect patient satisfaction.

Aim: This research poster compares two interventions that attempt to improve adult patients' subjective sleep experience during inpatient hospitalization. The first intervention is providing patients with earplugs. The second intervention is behavior modification of staff or educational programs to reduce noise on the hospital unit.

Methods: Databases including PubMed, Ovid, Science Direct, CINAHL, and EBSCO were used to search original research articles to obtain articles related to noise reduction interventions in a hospital setting.

Results: Earplugs were shown to improve patient's perception of sleep and are a valuable addition to adult inpatient units. Behavior modification and educational programs have proven therapeutic outcomes; however limitations were found in studies, such as small sample sizes, short duration periods of data collection, and lack of clear definitions of sound level measurement.

Conclusion: Based on the results from the articles included in this literature review, earplugs appear to be an effective intervention to provide as an optional intervention for patients to help improve subjective sleep experience. Further research is needed in order to determine the effectiveness of behavior modification and staff education to reduce noise on the unit as a means to improve patient sleep experience. Future studies are needed to address study limitations and to enrich the body of literature.

Poster 27

EVIDENCED-BASED PRACTICE ON TELEHEALTH MONITORING VS NURSING HOME VISITS

AMAUCHE OBI-EYISI, DUMO OPUIYO, NICHOLE JOSEPH, MARGARET DESSOURCES & MARCIA LEE-EDWARDS (Graduate Students, HBSON)

Sponsoring faculty: Lorie Goshin

Background: Congestive heart failure is the number one condition afflicting more than 5 million people 65 years and older in the US. Annual Medicare cost is about 31 billion dollars, and pays primarily for hospital-based care. Contemporary clinical practice is tilting toward disease management strategies that keep patients at home while being monitored by nurses and other providers. There is growing evidence that this Tele Monitoring method is effective in managing the disease and saves cost over usual home nursing visits

Research Question: How does nurse tele-health monitoring compare to usual home nursing visits and reduce readmissions among geriatric congestive heart failure patients within thirty days after discharge from the hospital?

Methods: Databases Cochrane Central Register of Controlled Trials (CENTRAL), CINAHL, MEDLINE and PUBMED and various search engines were searched from 2007-2012. Only peer reviewed, published randomized control trials comparing structured telephone support or tele-monitoring to usual home nursing visits of CHF patients were included.

Results: Five studies were reviewed. Four out of five were peer-reviewed meta-analyses. Four studies found no significant difference between tele health monitoring and usual standard nursing home visitation to reduce CHF hospitalization within 30 days after discharge.

Conclusion: Our results suggest that enhanced patient education during nursing home visits and physician follow up is as successful as a sophisticated home monitoring device with heart failure patients among the elderly.

Poster 28

bLABber

NYNECT Transformers ~ 2012

Alice Feely, DNP, RNC-OB, RNC-MNN, C-EFM

Fundamentals Lab Instructor Hunter College-CUNY

Marvin Sanon, College Lab Technician

Hunter College-CUNY

Anne Woodstock-Wallace, Chief CLT

Nursing Lab Manager Hunter College-CUNY

Background

The nursing laboratory provides theoretical didactic instruction on the rationale and purpose of the skills to be learned. The lab also employs kinesthetic learning by providing simulated patients, actual hospital grade equipment and supplies, as well as having professional nurses available for guidance and instruction. Areas of learning explored by these introductory level students include:

- Wound assessment
- Application of a moist to dry sterile dressing
- Documentation of Intake & Output and producing a comprehensive nurse's note for a designated case study
- Urinary catheterization
- Intravenous therapy, including site care, solution, rate, and assessment of the patient's hydration status
- Administration of intravenous fluids
- Administration and documentation of oral medications

Purpose

The purpose of the **bLABber** website was to enhance the learning of lab material.

Methods

The **bLABber** website was created to provide a forum for students to ask questions, make comments, and post additional resources regarding lab topics without having to wait a full week for the next lab. The students experienced the first half of the semester without the website and then entered the 2nd half of the semester with the bLABber website available. At the end of the semester the students were given a seven item survey to assess the **bLABber** website.

Results

Forty-six percent of the students enrolled in the Monday Nursing skills lab visited the **bLABber** website at least once (N= 72). Of the students who visited the website 61% found **bLABber** to be a source of additional information. Nearly 90 % of the students would have preferred a website more like Facebook. Among multiple responses of reasons to use the website more frequently 36 % of students responded that if they had more time they would have used the site more often. The most common reason students noted for not posting on the site was they didn't want to be the first student to post. Of the students who visited the site, 76 % visited once or twice, 24 % visited between three and ten times, and no student visited more than ten times. Student suggestions for site improvement included linking the site directly to the Lab, reminding the students of the site, and requests for faculty to post more videos.

History and Validity

The **bLABber** website began one week prior to Hurricane Sandy. Many of the students conveyed their concerns over how challenging it was doing routine things after Hurricane Sandy and how difficult it was to try something new.

Conclusion

Students found the **bLABber** website to be a positive tool among the teaching strategies for the nursing laboratory. With some minor format changes and increased faculty involvement, the **bLABber** website may become an integral part of the lab pedagogy.

Poster 29

Break the Cycle of Abuse

Devica Matuknath. Theresa Boone-Smith, Knongorzul Castro. Kareen Robinson (undergraduate, Queensborough Community College, Nursing). Stephanie Keane, Serena Mejia, Aishe Kaneev Alexandra Pospelova. Xiaomeng Du (undergraduate, Queensborough Community College, Nursing).

Sponsoring faculty member Barbara Rome

Issue: Domestic Violence is a major public health concern. According to the Centers for Disease Control and Prevention, nearly 3 in 10 women and 1 in 10 men in the United States have experienced physical, sexual, verbal, and emotional abuse. Violence against women primarily revolves around intimate partner or domestic violence.

Description: The issue of domestic violence against women was analyzed by examination of the life of an actual victim. The Immortal Life of Henrietta Lacks was written by Rebecca Skloot. An author who traveled far to interview historians, scientists and family members of the Lacks family in order to shine light on the actual woman behind the “HeLa” cells. “HeLa” cells were taken without consent from this cervical cancer victim. While researching the origin of these cells, Skloot was able to capture true events of the sexual, verbal, and physical abuse of this woman along the way. Our poster will summarize our findings on domestic violence during our participation in this Common Read Project and identify activities to promote victims’ safety.

Lessons Learned: The CDC website provides a full report of the prevalence, incidence, and consequences of violence against women by summarizing findings from the National Violence against Women Survey. The information provided can guide the creation of policies directed towards interrupting the cycle of domestic violence and abuse.

Next Steps: Develop a judgment free support system. Enhance local awareness of domestic violence with educational materials, offer community services with a safety plan and emotional support

Poster 30

CHILDREN’S BRAIN TUMOR FOUNDATION

Eileen McStay, Undergraduate, HBSON

Sponsoring faculty member: Donna Nickitas

ISSUE: The Children’s Brain Tumor Foundation (CBTF) provides information and resources to assist in accessing expert care to ensure quality of life for children with brain or spinal cord tumors. CBTF offers services beyond the illness.

DESCRIPTION: Children's Brain Tumor Foundation aims to improve the treatment, quality of life, and long-term outlook for children with brain and spinal cord tumors and their families. It includes an Online Community, Family to Family connections and Events & Activities for sufferers and families. Knowledge is critical for families to access expert care and ensure quality of life. CBTF offers services to sufferers, survivors and families who experience loss. CBTF also welcomes volunteers to facilitate their mission. A nursing service-learning assignment provided the opportunity for several nursing students to spend time learning about CBTF and to spend time volunteering at events held by CBTF. Through service-learning, students may use what they learn in the classroom to solve real-life problems.

LESSONS LEARNED: Through evaluating CBTF it was clear that families in crisis find comfort in each other and act as a support for each other. The families seek as much information as possible. This organization provides knowledge in many modalities such as one to one counseling or information sessions, handwritten documentation in clearly understandable language and even through YouTube videos. This organization persists by valuing the resiliency of the human spirit.

NEXT STEPS: Efforts to spread the idea of community-based service learning specifically related to the Children's Brain Tumor Foundation is a very important next step. The Children's Brain Tumor Foundation depends upon individuals and companies to continue its crucial programs for children with brain and spinal cord tumors and their families. Everyone can help. CBTF continues to support and share research. It will continue to organize informational seminars and opportunities for families to share experiences.

Poster 31

Literature Review of the manifestations of the signs and symptoms of PTSD in children aged 3-18 proceeding events of physical and sexual abuse.

Sanjana Kumari, David Kuang, Undergraduate HBSON

Faculty Sponsor: Nancy Bohnczyk

Issue: Traumatic events can have a psychological impact on children. Post-Traumatic Stress Disorder (PTSD) is prevalent among children who have been exposed to abusive events. However, the manifestations of PTSD are under-reported and understudied. The aim of this study is to define a standard measurement of PTSD and its symptoms in the pediatric population ages 3-18.

Description: This systematic search and limited review of the research literature was conducted using CINAHL, Medline and Cochrane Database. Certain criteria limiting the review included a pediatric age range from 3-18, with peer-reviewed resources within the past 5 years. Keywords used included Post-Traumatic Stress Disorder, symptoms, children, abuse, and injuries. Studies found addressed children and evaluated experiences after sexual abuse or domestic violence.

Results: Four studies were found that suggest that multiple abusive events correlate with the severity of PTSD. The expression of PTSD was measured through instruments such as the Child PTSD Checklist and the Post-Traumatic Stress Diagnostic Scale whereas the methods for coping were measured through Childhood Trauma Questionnaire and Life Events Questionnaire. A higher degree of exposure to a traumatic event resulted in an increased degree of depression, anxiety, PTSD,

internalization and externalization of emotions. Positive coping methods such as participating in support groups and utilizing a focused approach to PTSD rather than an avoidant approach to life decreased the degree of PTSD as compared to negative coping methods such as the use of illicit drugs. Furthermore, age played a role in the severity of PTSD; older adolescents illustrated positive methods of coping and a decrease in the severity of PTSD. Certain therapeutic interventions such as art therapy and Cognitive Behavioral Therapy were also beneficial

Conclusions: PTSD is understudied and under-reported in the pediatric and adolescent population. Exposure to sexual and domestic violence can result in significant behavioral and psychological changes in addition to PTSD.

Recommendations for further research include longitudinal study among children of all ages and socioeconomic status to determine the effect of abuse and its prevalence and development of PTSD. This information can be used to create a standard of care for PTSD specific to the pediatric population. Another recommendation for further research is to assess the different approaches from various members of the health-care team such as nurses, psychologists, or therapists. Each healthcare professional provides a unique perspective creating multiple avenues for future assessment of the degree of PTSD experienced. Lastly, the effectiveness of the various types of therapeutic interventions used to help manage PTSD warrants further investigation.

Poster 32

A Literature Review of the Effects of Shift Work on the Health and Performance of Staff Nurses
Sarah Weintraub, Paula Wong, Sophie Xia, Stephanie Nolasco, Lynn Robinson Janice Scott,
Joanna Yoro, Jenny Lam (Undergraduate, Generic Pathway)

Faculty Sponsor: Nancy Bohnarczyk

Issue: As student nurses, we understand that our working conditions have the potential to affect our welfare and thus, an examination of the effects of flexibility of our work schedules is extremely important. The quality of sleep, diets, and overall health of nurses as well as the performance of nurses can all be disrupted and impacted either negatively or positively by shift work. This literature review addressed the following question: How and what type of an effect does shift work have on nurses' health and performance?

Description: This systematic search and limited review of research literature was conducted using Medline-Pubmed, CINAHL, and Cochrane databases. Keywords that were used included shift work, nurses, fatigue, sleep disorders and working conditions. Studies found comprised of five qualitative studies.

Results: Nurses who are employed under shift work conditions suffer negatively in terms of their own overall health as well as in their performance in the job field. Shift work disrupts the body's internal clock, which often leads to problems like sleep deprivation, frequent lapses of attention and other physiologic effects. These effects will not only negatively affect the nurses' own health by increasing the risk of sleep disorders, obesity and generally weakened immune systems, but all of these combined will lead to increased error rates on performance tasks and thus lower patient quality care.

Conclusions and Recommendations: The research clearly indicates that shift work generally has a detrimental result on nurses' health and performance. Since this pattern is apparent, administrative staff in healthcare facilities should wean off the usage of shift work scheduling and adopt a more effective scheduling system such as flexible working conditions. Some research has found that health care workers' ability to control their scheduling and working conditions resulted in improvements in physiological, mental, and their overall health and well-being. It is also recommended that future studies focus on a more in-depth assessment of other working conditions that could negatively or positively affect nurses' health and performance.

Poster 33

A Literature Review of the need for a culturally competent approach to end-of-life care

Andrew Hilbert, Karen Gray, Liloutee Singh, Ophelia Beckford, Katherine Zimmerman and Jennifer Quinones (Queensboro Community College)

Faculty Sponsor: Georgina Colalillo, MS, RN, CNE

Issue: Nurses are responsible to act as advocates and implement measures to deliver effective, understandable and respectful care provided in a manner compatible with client cultural beliefs and practices. The increasing diversity of populations served makes this concept particularly critical at end-of-life given the varied beliefs and traditions that surround life and death. In order to establish trust and improve end-of-life care, the nurse must have a clear understanding and recognition of the unique influences that culture has on client behavior attitudes, preferences and decisions surrounding end-of-life. The Joint Commission is developing standards for the delivery of culturally competent care across practice settings. This literature review was conducted to address the question: What are the best practices for providing culturally competent care at end of life?

Description: A systematic search and review of the research literature was conducted using CINAHL, PROQUEST and Medline. Keywords used in the search included End-of-Life Nursing Care; Culture; Death. Articles reviewed included one qualitative study, three descriptive studies, one analytical study and one innovative teaching-learning activity.

Results: Key findings suggest that nurses may not be prioritizing cultural aspects of care during end-of-life. For example: nurses should be assessing clients' spiritual needs, cultural considerations for pain relief, nutritional options and other life-sustaining treatments. Nurses must first be aware of their own cultural biases before they can achieve cultural competency. Nurses do not feel confident in conducting a cultural assessment interview. Nurturing the spirit of empathy and advocacy for the needs of dying patients is necessary to increase self-awareness surrounding the issues and nuances of death and dying.

Conclusions and recommendations:

Due to the sensitive nature of the subject there may be difficulty collecting necessary data for study. The Joint Commission is just beginning to establish standards for cultural competence and there is no clear measure of cultural competency. Schools of Nursing and healthcare organizations need to incorporate cultural competency education and develop methods for evaluation.

Poster 34

A Literature Review of Effective Nursing Interventions or Teaching for Patients with a Chronic Illness such as Cystic Fibrosis

Sharon Mok, Julianne Midgely, Eileen McStay, Delia Mota, Elena Mekhanik, Longsen Lin, Leila Milton (Undergraduate, HBSON)

Sponsoring faculty member: Professor Nancy Bohnarczyk

Issue

With increasing survival estimates for cystic fibrosis (CF) patients, long-term management has become an important focus. In view of this, comes the responsibility to further improve the quality of care of cystic fibrosis patients. As nurses working with individuals with cystic fibrosis having a greater knowledge of alternative treatments will enhance our quality of care. Another issue is the importance of having a wider based research study to incorporate patients caregivers and effectiveness of alternative treatments. This literature review addressed the following question: in patients with cystic fibrosis, do psychological interventions that include the caregiver improve quality of care throughout the course of the disease?

Description

This systematic search and review of the research literature was conducted using Cochrane Collaboration Database. Keywords used include cystic fibrosis, adolescence and coping. A total of 70 random controlled studies, 99 reports (abstracts, journal articles, books, interviews, and personal correspondents) were reviewed, 28 studies were relevant. Thirteen randomized controlled studies were included in the review. 25 reports represented data from 529 families.

Results

The article addressed interventions in the areas of insight oriented, behavioral, cognitive, educational, and psychosocial interventions. Findings were insignificant in the areas insight oriented (the effectiveness of psychodynamic interventions) and cognitive interventions. In the areas of behavioral and psychosocial interventions the findings although limited were promising. The effects of the other interventions performed provided minimal improvement for the subjects.

Conclusions and Recommendations

The methodologies were extremely diverse. Therefore the findings were too small to provide clear enough evidence to recommend changes to practice upon conclusion of this study. Limited effectiveness was proven in the areas of behavioral, educational and psychosocial interventions. Therefore further and more focused studies in these methodologies may result in recommendations for change in treatment of the chronically ill cystic fibrosis patient.

Poster 35

Family Psychoeducation: Integrating Family Into the Care of the Consumer

Vanessa Alexandre, Travis Baird, Joshua Flores, & Nathalie Monfiston (Graduate Students, HBSON)

Faculty Advisor: Dr. Lorie Goshin

Problem: Mental illness severely impacts patients and their family's quality of life. The stressors that come with living with mental illness often exacerbate symptoms, which may contribute to relapse. Family psychoeducation educates those involved in the mental health consumer's personal life. Providing others with vital information to better understand mental illness assists the patient's ability to adapt and to optimally integrate their family, friends, and society to better be able to maintain a healthy life.

Methods: A literature review was conducted which aimed to explore the effectiveness of family psychotherapy on symptoms relapse and hospital readmission in adults with severe mental illness.

Results: Reviewed literature supported the use of family psychoeducation in consumers with schizophrenia, major depressive, and bipolar disorders. Consumers who received family psychoeducation were less likely to have a serious recurrence and less likely to be re-hospitalized. Results indicate that the addition of family psychotherapy for routine care of various psychiatric illnesses is a valid form of treatment augmentation when implemented in the stabilization phase of illness. Provider education will be needed to support integration of family-centered interventions into mental health settings.

Poster 36

How effective are incentive spirometer and deep breathing exercises in decreasing risk for post-operative pulmonary complications in adults after coronary artery bypass graft surgery?

Sylvia Ayoko, Shannon Brown, and Nancy Lee (Graduate Students, HBSON)

Faculty Advisor: Professor Lorie Goshin

Background: Incentive spirometry (IS) is used after surgery to decrease the risk for pneumonia and prevent other pulmonary complications. Other methods, such as deep breathing, may also prove effective in preventing pulmonary complications. A literature review was done to compare the effectiveness of IS and deep breathing exercises in decreasing risk for post-operative pulmonary complications (PPC) in adults after CABG.

Methods: CINAHL and MEDLINE were searched using the keywords "spirometry" and "CABG" or "cardiac". After review and excluding articles that were not available to the general public, 3 RCTs, 1 systematic review, and 1 Cochrane Collaboration met criteria.

Results: Research revealed that no one intervention was more effective than another as a prophylaxis. Findings suggest that coughing, deep breathing, and simple exercises may be more or as beneficial after CABG as IS. Since nurses have an essential role in providing the best care to patients, and evidence based practice reveals that there are other therapies that patients can benefit from in lieu of an IS, nurses should recommend coughing, deep breathing, early ambulation, inspiratory muscle training, and other simple exercises along with IS use to prevent PPC.

Conclusions: Based on the analysis, IS has not been proven to be the most or only effective method of PPC. Studies showed that other breathing exercises, which do not require purchase of a device, also prevented PPC. Some limitations noted during the literature review were healthcare provider bias during implementation of pulmonary toileting and a decreased external validity by having the same provider perform the intervention and outcome assessment.

Recommendations: We recommend increased emphasis on physical therapy techniques of lung re-expansion. Resources used to purchase IS may be better invested in the staffing needed to teach correct deep breathing techniques.

Poster 37

Risk of Depression after Myocardial Infarction

Lisa Gillespie, Lara Hervias, Henry Kwapong, Susan Kioko, & Su Jin Seo (Graduate Students, HBSON)

Faculty Advisor: Dr. Lorie Goshin

Aim: The aim of this literature review was to explore whether patients who have experienced an acute myocardial infarction (MI) are at higher risk for depression.

Background: There is a robust body of research that points to an association between acute MI and depression. The incidence of depression was estimated at 65%, with 20 % of patients meeting the diagnostic criteria for major depressive disorder. Although different depression assessment tools have led to varying rates of depression in this population, findings nonetheless point to the magnitude of this problem.

Data sources: A literature review was conducted using Pubmed, CINAHL, Medline, PsycArticle and PsycInfo.

Review methods: A combination of the following terms was used to review the literature: myocardial infarction, depression, prevalence and treatment. Studies were included for review if they met the following standards: peer reviewed, less than 5 years old, English language and full text. Seventy-four articles were initially found, and five selected for review based their high level of evidence.

Findings: All the studies reviewed found an association between post MI and depression. Tulner et al. (2008) found elevated cerebral S100B proteins in post MI patients, which are found in cerebral damage and contribute to depressive symptoms. Steptoe et al. (2009) found an association between anemia and depressive symptoms. Gender was also found to influence the incidence of depression, with women exhibiting more signs of depression compared to men post MI (Parashar et al., 2009).

Conclusion: Evidence shows that patients who experience an acute MI are at higher risk for depression. The studies demonstrated the need for comprehensive screening and treatment, stressing the importance of assessing both cognitive and somatic symptoms. Nurses can translate this knowledge into their care setting by utilizing a standardized depression screening tool to assess for depression, providing psychosocial support and pharmacological interventions, and providing patient and family education to this population.

Poster 38

Neonatal Outcomes related to Elective Cesarean Sections versus Vaginal Delivery after Induction of Labor

Christine Huynh, Josiane Joseph, Sarah Horan, Deisha Guzman, Jessica Jimenez, ShiJia Huang (Undergraduates, HBSON)

Sponsoring faculty member: Professor Nancy Bohnarczyk

Issue: A percentage of women undergo elective cesarean sections (ELCS) and/or vaginal delivery after induction, instead of a normal spontaneous vaginal delivery (NSVD). A literature review was conducted to answer this question: Is there a significant difference in neonatal outcomes between cesarean sections and vaginal delivery after induction of labor for full term newborns?

Description: This literature review was conducted using CINAHL, Medline, EBSCO, and the Cochrane database. Keywords used included caesarean section, induction, risks, benefits, neonatal, newborn, outcomes, full term, elective, labor, harmful, and effects. The studies found include case-control studies, cohort studies and a retrospective study which are all quantitative studies.

Result: The findings were that neonates were at greater risk of respiratory distress syndrome, transient tachypnea and pulmonary hypertension and were more likely to require level II care after ELCS compared to vaginal delivery. Respiratory morbidity was found to be 10 times more frequent in the ELCS group than in vaginal delivery group; 4.25 percent vs 0.42 percent. Studies have shown that through vaginal delivery, fluid is expelled from the lungs, leading to less respiratory complications. Among neonates admitted to level II care, respiratory morbidity was still more frequent among ELCS groups at a rate of 70 percent (ELCS) versus 19 percent (vaginal) (Borgwardt , Bach, 2008). Although Apgar scores were higher for neonates born through ELCS at 1 and 5 minutes, the average Apgar scores at 10 minutes were equivalent.

Conclusion and Recommendation: Compared to vaginal delivery after induction of labor, cesarean sections result in more complications for neonates. The implication for practice is that neonates born by elective cesarean section need special monitoring for transient tachypnea, pulmonary hypertension, respiratory distress syndrome and are more likely to require level II nursery care as reported in the results. The compression experienced by the neonate during vaginal delivery results in the expulsion of fluids from the lungs. Therefore from these studies, we conclude that neonates born by elective cesarean section experience more respiratory morbidity due to lack of stimulation which the mechanics of labor would otherwise provide.

Poster 39

A literature review identifying the healthcare settings with the highest incidence of violence and aggression towards healthcare professionals

Maria Bea Almendrala, Krystal Anrude, Ludmilla Beckles, Haya Blaustein, Julia Chan, Suet Ying (Carmen) Chan; (Undergraduates, HGSON)

Sponsoring faculty member: Professor Nancy Bohnarczyk

Issue: Healthcare professionals work in close quarters with patients who may be having a difficult time coping with their condition. As a result, healthcare professionals such as nurses, doctors, and

therapists are often subject to violent and/or aggressive behaviors from patients and patients' family and friends. This literature review aims to identify the healthcare settings which pose the greatest risk of violence and aggression toward healthcare professionals, as well as discover the methods implemented to avoid or minimize the occurrence of this occurrence.

Description: This limited literature review was conducted using CINAHL, Medline, and Cochrane databases. Keywords used in the review included *violence, aggression, healthcare, professionals, settings, incidence* and *prevention*. The studies found in the search included five descriptive studies, three case studies, two quantitative studies, and one previous literature review.

Results: Many articles suggest that certain departments, especially emergency and psychiatry, tend to have the highest incidences of aggressive behaviors toward healthcare professionals. The way in which nurses interpret acts of violence greatly impacts the way they respond to it. It has also been found that appearing available, respectful, supportive and responsive towards patients help to minimize aggressive behavior. One study that focused on the effect of functional analysis for behavioral intervention found that this method did not have a significant effect on management of aggressive behavior, prompting the need for alternative methods.

Conclusions and recommendations: In order to reduce the incidence of violence toward healthcare professionals and thereby reduce stress to victims of aggression and violence in the workplace, a secure work environment should be implemented. Policies to reduce workplace violence should be established and enforced, and risk reduction efforts should target all patients and visitors.