## International Journal of Science and Research (IJSR) ISSN: 2319-7064

SJIF (2020): 7.803

# A Descriptive Study to Assess the Practices of Nursing Personnel Regarding Basic Life Support in Selected Hospital

Sudhir Gupta<sup>1</sup>, Nishu Sharma<sup>2</sup>, Rashi Chaudary<sup>2</sup>, Lokesh<sup>2</sup>, Mandeep Kaur<sup>2</sup>

<sup>1</sup>Assistant Professor, College of Nursing, Maharishi Markandeshwar Deemed to University Mullana, Ambala, Haryana, India Corresponding Author Email: sg9996045640[at]gmail.com

Abstract: "A descriptive study to assess the Practices of Nursing personnel regarding basic life support in selected hospital MMIMS&R Mullana, Ambala. The present study aim assessing practices regarding BLS among staff nurses. In present study Quantitative research approach was used. Material and Method: The research approach adopted for the study was Quantitative research. The study was conducted in Maharishi Markandeshwar Institute of medical science and research (MMIMSR) in respective wards (surgery, orthopaedics, and medicine ward). The tool used for the data collection was Semi structured questionnaire aim to assess the practices regarding BLS among staff nurses. Total 50 staff nurses were observed during data collection. The data were analysed using both descriptive and inferential statistics. Results: The finding of the study was The Mean Practices Score of Nursing Personnel's is 10.0±2.7 regarding the Basic Life Support Practices. Nursing Personnel had Average Practices (72%) regarding Basic Life Support followed by good practices (28%). Conclusion: The finding of the study revealed that the Nursing Personnel had Average Practices (72%) regarding Basic Life Support followed by good practices (28%).

Keywords: Nursing Personnel's, Basic Life Support

### 1. Introductions

Death can occur at anytime due to Cause like stroke, poisoning, accidents; suicide, injury, medication, error shock and cardiac arrest death remain major cause of mortality<sup>1</sup>.

Human life is a precious gift of God where we all are connected with each other in the in this beautiful world and leave with our loved one. sometimes when our loved one or other person get entangle in sudden or unexpected accident which could be fatal or Rd traffic accident, respiratory arrest cardiac arrest, heart attack, burn, poisoning, or becomes suddenly unconscious with no pulse and breath no medical people get more panic than the victim and not able to handle this emergency situation due to lack of knowledge and skills but victim can survive by doing some emergency procedure and life saving techniques such as recordable Marie resuscitation inside to going connecting<sup>2</sup>

- Cardiac arrest results in immediate interruption of blood flow to vital or cessation of cardiac mechanical activity which is confirmed by the absence of sign of circulation it is the sudden unexpected failure of heart function occurring due to fluttering action of the ventricles which does not allow enough blood to be pumped out to the organ which include brain and the heart itself moreover cardiovascular attacks cause 1/3 of all deaths in the world today particularly in the United states<sup>3</sup>. Globally the incidents of death resulting from cardiac arrest in estimated between 4 to 5, 000, 000 yearly the average survival rate is 10.6% and survival with a good neurologic function is 8.3<sup>4</sup>
- In the study period in 2019, 9, 440 OHCAs were recorded, compared with 9, 863 in 2020. Rates of ROSC were 23.0% in 2020, down from 29.8% in 2019<sup>5</sup>.
- As per World Health Organization (WHO) census statistics mortality due to cardiac cause health work taken

- mortality due to all cancer put together Approximately 4280 out of everyone lakhs people die every year from cardiac arrest in India alone the survival rate of intrahospital post cardiac are arrest patient related to the identification of cardiac arrest and care performance by nurse trained in basic life support and by untrained nurse.6
- "Chain of survival "Was firstly introduce in 1991 to improve survival after sudden cardiac arrest the elements of the chain of survival include recognition of early warning sign activation of the emergency medical system basic cardiopulmonary resuscitation, defibrillation in – witnessed cardiac arrests.7
- Modern cardiopulmonary resuscitation has been divided into basic life support and advanced cardiac life support. basic life support include airway control rescue breath and external chest compression BLS maintains viability for only a few minutes for successful resuscitation additional advanced cardiac life support is usually required advanced card appointment life support which an extension of basic life support it is start with analysing patient heart rhythm with manual defibrillation<sup>8</sup>
- Basic life support refer to a set of clinical intervention for the urgent treatment of the cardiac arrest and other life threatening medical emergencies extensive medical knowledge and rigorous hand on training and practices are required to master BLS only qualified healthcare provider situation paramedical, nurses, respiratory therapist, pharmacists, and other special trained health care provide can provide BLS as it required for ability to manage the patient's airway initiate IV access, read and interpret electrical diagram and understand the emergency pharmacology<sup>9</sup>.

75

### 2. Methodology

Study Design:

Volume 11 Issue 2, February 2022

www.ijsr.net

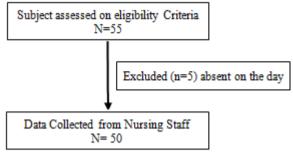
Licensed Under Creative Commons Attribution CC BY

### International Journal of Science and Research (IJSR)

ISSN: 2319-7064 SJIF (2020): 7.803

The present study aim assessing practices regarding BLS among staff nurses. In present study Quantitative research approach was used

- Research Setting and Population: MMISR, Mullana, Ambala.,
- Sample technique: Nursing personal
- Sample Size: 50



**Figure 1:** Consort diagram showing the sample attrition during data gathering

### Data Collection Procedure

Data collection is systemic and precise gathering of the information that is need for the study purpose. Formal approval of administration was obtained from the principle of M. M. College of Nursing, Mullana, Ambala and from the ward in charge of surgery ward, ortho ward medicine ward MMIMSR, Mullana, Ambala to conduct the study. Sample was selected on the basis research study criteria.

#### **Ethical Consideration**

The ethical principles have to be considered before conducting any research is the principle of respect, beneficence and justice that are relevant to the conduct of the study. Formal ethical approval was taken from the University ethical committee for the study. Consent form was prepared and filled for the study subjects regarding the willingness to participate in the research project.

### 3. Data Analysis

Frequency and percentage distribution of subjects as per selected variables, N=50

S. No	Sample characteristics	Frequency	Percentage
1	Age		
1.1	21-24 years	15	30%
1.2	25-28 years	23	46%
1.3	29-32 years	9	18%
1.4	33-36 years	3	6%
2	Gender:		
2.1	Male	4	8%
2.2	Female	46	92%
3	Qualification:		
3.1	GNM	43	86%
3.2	B. Sc Nursing	7	14%
4	Present Working Area:		
4.1	Intensive care unit	8	4%
4.2	Other	10	5%
4.3	Emergency	0	0
4.4	Medical ward	21	42%
4.5	Surgical ward	11	22%
5	Experience		
5.1	0-3 months	12	24%

5.2	4-6 months	8	16%
5.3	7-9 months	2	4%
5.4	>9 months	28	56%
6	BLS Programme Attended?		
6.1	Yes	36	72%
6.2	No	14	28%
7	Last BLS Attended:		
7.1	1-4 weeks ago	14	28%
7.2	1-6 months ago	9	18%
7.3	7-12 months ago	5	10%
7.4	>1 year ago	22	44%
8	Type of Programme:		
8.1	Not applicable	3	6%
8.2	Oriented	16	32%
8.3	Workshop	14	28%
8.4	Any other	5	10%
9	Duration of Programme:		
9.1	1-4 hours	29	58%
9.2	1-6 months	4	8%
9.3	1-3 days	3	6%
9.4	>3 days	3	6%

### 4. Results

The Mean Practices Score of Nursing Personnel's is 10.0±2.7 regarding the Basic Life Support Practices

### 5. Discussion

Since the novel corona virus has been discovered and started its journey around the world and the WHO declared the disease as a Public Health Emergency of International Concern, 15 there has been great fear among all people about the possibility of a pandemic.16, 17 Health professionals are no exception.

Since the novel corona virus has been discovered and started its journey around the world and the WHO declared the disease as a Public Health Emergency of International Concern, 15 there has been great fear among all people about the possibility of a pandemic.16, 17 Health professionals are no exception.

Since the novel corona virus has been discovered and started its journey around the world and the WHO declared the disease as a Public Health Emergency of International Concern

In the Present study frequency and percentage distribution of practices among nursing personnel regarding BLS shows that majority of the nursing personnel 52% had a good level of knowledge, 40% had average level of knowledge and 8% had below average knowledge regarding BLS. Similar findings are reported in cross sectional study on knowledge, practice and associated factors towards basic life support among nurses working in amhara region referral hospitals, northwest Ethiopia, 2016An institution based cross-sectional study was carried out in April 2016 among 397 nurses working in Gondar University Hospital and Bahirdar Referral Hospitals. Multivariate analysis using logistic regression model was used to analyze the association between knowledge and practice of basic life support with potential predictor variables. AOR and 95% CI were computed to identify predictor variables Result shows that

### Volume 11 Issue 2, February 2022

www.ijsr.net

<u>Licensed Under Creative Commons Attribution CC BY</u>

## International Journal of Science and Research (IJSR) ISSN: 2319-7064

ISSN: 2319-7064 SJIF (2020): 7.803

total of 388 nurses participated in the study with a response rate of 97.7 among the study participants, 38.6% and 28.4% had good knowledge and good practice of BLS, respectively. Educational status, assigned place, training, and previous exposure were significantly associated with knowledge of BLS. With regard to practice of BLS: training, previous exposure.

In the present study, there is a significant difference in the practices score 10.0±2.7 of staff nurses. Similar findings are reported by MEKINEN (2010): who illustrated that overall level of performance was significantly improved. also by HERLITZ, 2006 who stated that there is the improvement in the nurses performances score 52.0+\_3.4 majority of staff nurses received an above average score immediately after implementation of programme

### 6. Implications

The finding of this study only practices regarding basic life support performed by nursing personnel suggest many implications for nursing education, nursing practices, nursing research.

Therefore, there is need for the study to aware nursing personnel regarding the basic life support.

### 7. Recommendation

The study can be conducted on large population.

A teaching manual should be developed for the healthcare worker. Specially for the nursing personnel and disseminator of information on awareness of healthcare worker regarding basic life support.

A study can be carried out by using other training strategy like video film plan teaching program manual and structured teaching programme.

A study can be carried out evaluate the effectiveness of rainforest teaching on practices of nursing personnel on basic life support.

### **Nursing practice**

Let's play a vital role in providing care to the patient so it is a imperative for nursery nurse to provide basic life support

#### 8. Conclusion

## The following conclusion were drawn from the finding of this study

Nursing personnel had average practice 40% regarding basic life support followed by good practices.52%.

### Author's contribution

- <sup>1,</sup> **Concepts**, design, and definition of intellectual content, data collection, data analysis, and finalization.
- <sup>2,3</sup> Content review and logistic support, documentation and data acquisition, manuscript review

### References

- [1] Rosamond W, Flegal K, Furie K, Go A, Greenlund K, Haase N. American heart association statistics committee and stroke statistics subcommittee. Heart disease and stroke statistics 2008 update: a report from the American heart association statistics committee and stroke statistics subcommittee Circulation.2008; 117 (at: www.ncbi.nlm.nih.gov/pubmed/18086926
- [2] Heng, K. W. J., Fong, M. K., Wee, F. C., and Anantharaman, V. (2011): The role of nurses in the resuscitation of in-hospital cardiac arrests, Singapore Med J 2011; 52 (8): 611
- [3] Carter Monroe N. Virmani R. Current Trends in the classification of sudden cardiac death based on autopsy derived data: a review of investigations into the etiology of sudden cardiac death. Rev EspCardiol 2011; 64 (1): 10-12. Available at www.ncbi. nlm. nih. gov NCBI Literature > PubMed Central (PMC).
- [4] Smith KK, GilcreastD, Pierce K Evaluation of staff's retention of ACLS and BLS skills. Resuscitation 2008 Jul; 78 (1): 59-65. Available at www.bmj.com/content/349/bmj. g4451/rr/768704
- [5] Quinn& Hughes, Kozier, Erb, Snyder & Berman, Impact Of Cardiopulmonary Resuscitation Education Use Of Defibrillator Nursing Essay. Federal occupational health, www.ukessays. com Essays Nursing.2010
- [6] Safranek DJ, Eisenberg MS. Larsen MP. The epidemiology of cardiac arrest in young adults. Ann Emerg Med.1992; 21 (9): 1102-1106. Available at: best practice. bmj. treatment/.../0307. htm com/ best-practice/monograph/537/
- [7] Eapen ZJ, Peterson ED. Fonarow GC, Sanders GD, Yancy CW, Sears JR. Quality of care for sudden cardiac arrest: proposed steps to improve the translation of evidence into practice. American Heart J 2011: 162 (2): 222-231. Available From-Pub Med. at www.ncbi. nlm. nih. gov/pubmed?cmd=Link &db
- [8] European Resuscitation: Council Guidelines for Resuscitation 2005.67: S3-S180. Available at: https://www.erc.edu/index.php/guidelines download 2005.
- [9] Hazinski, M. F., Nadkarni, V. M., Hickey, R. W. et al. (2005) Major changes in the 2005 AHA Guidelines for CPR and ECC. Circulation.112 (suppl), pp. IV-206-IV-211. Available at: www.sld.cu/galerias/pdf/sitios/ latest cpr guide improved. pdf
- [10] 11.2005 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care. Circulation 2005: 112 IV-1/V-203. Available at: www.aafp. org Journals afp Vol.73/No.9 (May 1, 2006
- [11] Sunde K, Eftestol T. Askenberg C, Steen PA. Quality assessment of defribrillation and Advance life support using data from the medical control module of the defibrillator. Resuscitation 1999: 41: 237-47. Available at: <a href="https://books.google.co.in/books?isbn=0199654093">https://books.google.co.in/books?isbn=0199654093</a>
- [12] Eftestol T, Wik L, Sunde K, Steen PA. Effects cardiopulmonary resuscitation on predictors of ventricular fibrillation defibrillation success during out-ofhospital cardiac arrest. Circulation 2004; 110:

77

### Volume 11 Issue 2, February 2022

www.ijsr.net

<u>Licensed Under Creative Commons Attribution CC BY</u>

### International Journal of Science and Research (IJSR) ISSN: 2319-7064 SJIF (2020): 7.803

10-5 Available at: www.laerdal. com/binaries/ACXMJCUN. pdf

- [13] Dane, F. C., Russell-Lindgren, K. S., Parish, D. C., Durham, M. D. & Brown, T. D. (2000) In-hospital resuscitation: association between ACLS training and survival to discharge, Resuscitation, 47, pp.83-7. Available at: www.ncbi. nlm. nih. gov NCBI Literature PubMed Central (PMC).
- [14] KimiaEbrahimian, Saeid Safari, Samad GolzariFaribaSalekRanjbarzadeh, RobabMehdizadehEsfaniani. Which Form of Medical Training is the Best in Improving Interns' knowledge Related to Advance Cardiac Life Support Drugs Pharmacology? An Educational Analytical Intervention Study between Electronic Learning and Lecture-Based Education. Iranian Society of Regional Anesthesia and Pain Medicine (ISRAPM): 2014 February 08; 1.8. Available at: www.ncbi. nlm. nih. gov NCBI Literature PubMed Central (PMC)
- [15] Cooper, S. & Cade, J. (1997) Predicting survival, inhospital cardiac arrests: resuscitation survival variables and training effectiveness. Resuscitation, pp.

Volume 11 Issue 2, February 2022 www.ijsr.net

Licensed Under Creative Commons Attribution CC BY

78