

Secondary	14	28.0
Higher Secondary	16	32.0
Graduate	17	34.0
Post Graduate	3	6.0
Occupational Status		
Labourer	0	0.00
Agriculture	4	8.0
Business	7	14.0
Service	25	50.0
Unemployed	14	28.0
Monthly Income(Rs)		
≤10000	0	0.00
10001-20000	3	6.0
20001-30000	34	68.0
≥ 30001	13	26.0
Dietary Pattern		
Vegetarian	32	64.0
Mixed Diet	18	36.0
If mixed diet how frequently do you take non-vegetarian food		
1-2 times	16	88.89
3-4 times	2	11.11
> 5 times	0	0.00
Marital Status		
Single	0	0.00
Married	45	90.0
Divorced	0	0.00
Separated	0	0.00
Widow/widower	5	10.0

It is observed from table 1 that majority of the samples were at the age group of 46-55 years (52%), most of the subjects were male (58%), most of the subjects were graduates(34%), majority of their occupation is service (50%), most of them were having a monthly income of 20001-30000 (68%), majority of subjects were vegetarian (64%) and 36% were mixed diet 1-2 times in a week and 90% of the subjects were married.

Section II

Assessment of existing knowledge of clients with coronary artery disease regarding cardiac rehabilitation

Table 2: Existing knowledge of clients with CAD regarding cardiac rehabilitation, N=50

Area	Maximum score	Pre test	
		Mean	Mean Percentage
Disease condition and manifestation	2	1.3	65%
Dietary Management	6	2.02	33.66%
Exercises	9	3.62	40.22%
Resumption of sexual activity	2	0.58	29%
Prevention of risk factors	2	0.9	45%
Medication and complications	5	2.2	44%
Follow up	4	1.74	43.5%

Findings from Table 2 shows that in pretest majority (65%) of client with CAD were having knowledge regarding Disease condition and manifestation, whereas only 45% of client with CAD were having knowledge regarding prevention of risk factors, 44% of client were having

knowledge on medication and its complications, 43.5% client were having knowledge about follow up, 40.22% clients were having knowledge on exercise, 33.66% of clients with CAD were having knowledge on dietary management and 29% of client with CAD were having knowledge on resumption of sexual activity.

Section III

Assessment of knowledge of clients with coronary artery disease regarding cardiac rehabilitation after the administration of information booklet

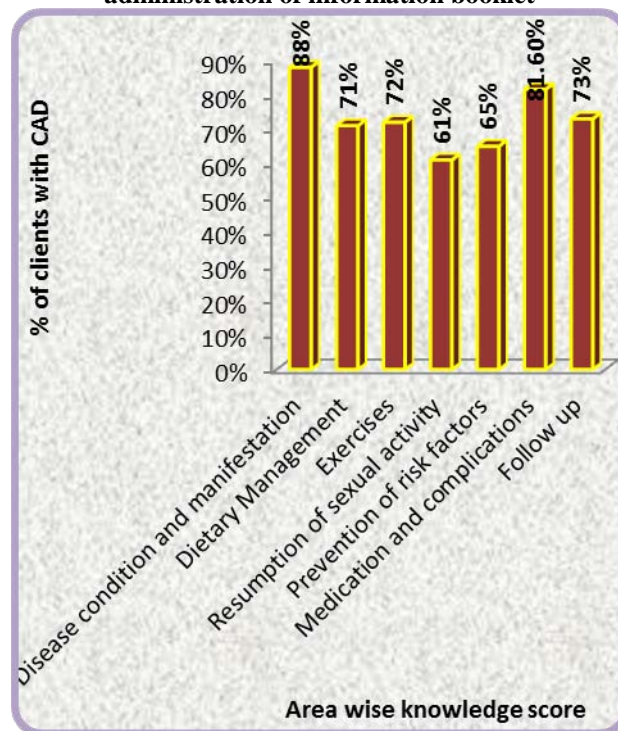


Figure 1: Knowledge of clients with CAD regarding cardiac rehabilitation after administration of information booklet

Section IV

Efficacy of information booklet on knowledge of clients with coronary artery disease regarding cardiac rehabilitation

Table 3: Overall Comparison of pre test and post test knowledge score of CAD patients regarding cardiac rehabilitation

Area	Pre test			Post test			Mean gain percentage
	Mean	Mean Percentage	SD	Mean	Mean Percentage	SD	
overall	12.36	41.20	2.06	22.02	73.40	2.60	32.2%

Data in Table no.3 depicts the comparison of pre test and post test knowledge score of CAD patients regarding cardiac rehabilitation. Mean percentage of pre test knowledge score was 41.2% and post test knowledge score was 73.4%. The mean percentage gain from pre test to post test was 32.2%.

Table 4: Comparison of pre test and post test score according to knowledge level, N=50

Level of knowledge score	Knowledge Score	
	Pre Test (%)	Post Test (%)
Poor (Upto 50%)	47(94%)	1(2%)
Good (51-75%)	3(6%)	28(56%)
Excellent (>75%)	0(0%)	21(42%)
Minimum score	9	15
Maximum score	17	27
Mean score	12.36±2.06	22.02±2.60
p-value	P<0.0001, Significant	

Table no 4 shows that in pre test 47(94%) of clients with CAD were having poor level of knowledge and 6% were having good level of knowledge score. The minimum score in pretest was 9 and the maximum score was 17, the mean score for the pretest was 12.36±2.06 whereas in post test 1(2%) of clients with CAD were having poor level of knowledge, 56% were having good level of knowledge score and 42% were having excellent level of knowledge score. The minimum score in pretest was 15 and the maximum score was 27, the mean score for the pretest was 22.02±2.60. The p- value is <0.0001, that is significant Thus the information booklet helped the client to improve their knowledge level.

5. Conclusion

After the detailed analysis, this study leads to the following conclusion:

There was a significant increase in the knowledge of subjects after the administration of information booklet. To find the effectiveness of information booklet 'z' test was applied and 'z' value was calculated, the mean post test score were significantly higher than their mean pre test score as evidenced from structured knowledge test 'p' <0.05 level of significance. Thus it was concluded that information booklet on cardiac rehabilitation was found to be effective teaching strategy.

Demographic variables did not show a major role in influencing the pre test and post test knowledge score among CAD clients. Hence, based on the above cited findings, it was concluded undoubtedly that the information booklet effectively increased the knowledge of the CAD client regarding cardiac rehabilitation.

6. Implications of the Study

The investigator has drawn the following implications from the study which is of vital concern to the field of nursing education, nursing service, nursing administration and nursing research.

1. Nursing Practice:

- The present study implies information booklet to be an effective strategy to educate the patient regarding cardiac rehabilitation.
- Learning materials of such kind can be used in hospitals and in communities for client's education.

- Copies can be distributed to the patients in hospital, wards and OPD's.
- Nurses can conduct teaching session for clients during their visits to the hospital and hospitalization which will help in improving the knowledge of clients in restoring and promoting their health.
- Nurses can counsel patients at risk for CAD on the benefits of exercise.
- Nurses can include an exercise component in health and wellness programmes for patients with CAD.
- Specialization courses in Cardiac rehabilitation to be given.
- Continuing and In service education programs can be conducted for the nurses in improving their knowledge and updating with the recent ones and they in turn can create awareness to the clients by teaching/educating.
- In collaboration with the regulation bodies, educational institutions can arrange and conduct workshops and seminars on cardiac rehabilitation as cardiovascular diseases are major cause for morbidity and mortality.
- Nurses should be stressed or emphasized on their exposure to cardiac nursing and to learn regarding the various aspects of cardiac rehabilitation which makes them well equipped with the knowledge to meet the needs of the clients.

2. Nursing Education:

- Rehabilitation is one of the major components of nursing care. Thus every nurse should be educated on cardiac rehabilitation.
- The student nurses from School of Nursing and College of Nursing should be encouraged to attend specialized courses and seminars regarding Cardiac rehabilitation.
- Indian Nursing Council and Universities should include Cardiac rehabilitation as one of the main educational aspect in the nursing curriculum.
- Student Nurses should be well exposed to areas of cardiac rehabilitation during their clinical postings which enhances their knowledge.
- Topics on Cardiac rehabilitation can be included as continuing education programmes for the student nurses.

3. Nursing Administration:

An administrator plays a key role in an organization for the staff development program. Nursing is a rapidly growing profession. In this period of growth of advanced technology, recent advances in care there is always a need and demand for quality and competent care to be provided. So, it is the main responsibility of the nursing administrative authorities to initiate, conduct and carry out education programmes in various areas of cardiac rehabilitation for the benefit of the clients.

- Nursing leaders should utilize available resources which are technologically sound in teaching the clients with coronary artery disease through mass health education programme. Nursing leaders should enhance nursing services through reinforcement of teaching through the readymade video package.
- Nurse administrators should take up leadership roles in training and providing health education programmes to nursing personnel in health care settings so that these

personnel take up active role in educating the clients by making the most use of media and audio visual aids.

- Specialized teaching package in specific topics create interest among public and serves as reference material.
- Professional interaction between the nurses and the public will help to improve professional standards and creates better image in the community.

4. Nursing Research:

- There is a need for extensive and intensive research in this area so that strategies for educating nurses and public regarding various aspects and phases of cardiac rehabilitation can be promoted.
- Nurse researchers should take efforts to conduct interactive sessions with coronary artery disease clients for promoting their health and also to disseminate the findings of research on benefits of cardiac rehabilitation that promotes their cardiac fitness.
- This study will serve as a valuable reference material for future investigators.

7. Personal Experience

The entire study gave an enriching experience to the investigator. It helped him to develop his skill in critical thinking and analysis and realize the importance of effective communication with respondents. The entire study was varied and rich learning experience which enabled the investigator to develop his skill in dealing with different personalities. The concept clarity about research as a whole increased. At every stage, the investigator received guidance and support from his guide. This boosted confidence to go ahead and carry out the planned activities and the co-operation from study subject was remarkable. The research was a great learning opportunity for the investigator.

8. Recommendations

On the basis of the findings of the study, it is recommended that the following studies can be conducted.

1. A similar study may be conducted on a larger population for generalization of findings.
2. Studies may be conducted to evaluate the effectiveness of information booklet versus other methods of teaching on knowledge regarding cardiac rehabilitation.
3. A similar study can be conducted and evaluated using alternative teaching strategies like interactive learning sessions, structured teaching programme.
4. A similar study can be conducted and evaluated using alternative teaching strategies like interactive learning sessions, structured teaching programme.
5. A study may be conducted to assess the existing knowledge and practice regarding cardiac rehabilitation.
6. A comparative study can be done among clients with first and second heart attack regarding knowledge on cardiac rehabilitation.
7. A descriptive study can be done among clients with coronary artery disease regarding knowledge on cardiac rehabilitation.
8. A structured teaching programme may be used in the hospitals, so that the entire clients with CAD can

participate in improving the knowledge regarding cardiac rehabilitation.

9. Instead of self-instructional module, planned teaching can be used.

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