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Human patient simulation: A global teaching method for global nursing education

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The Human Patient Simulation (HPS) was originally developed in the 1960s to enhance the clinical skills in healthcare staff training. HPS is increasingly used in the USA, Europe, and throughout the world. This study aims to investigate nursing students' perception, satisfaction, and self-confidence after using HPS. The two research instruments used were the Student Perception of Simulated Learning Experiences Student Feedback Form (SPSL) developed by the College of Nursing Valparaiso University and the Learner Satisfaction and Self-Confidence in Learning form (LSSL) developed by the National League for Nursing. The research project was given approval by the Valparaiso University Institutional Review Board. Data were collected at the Virtual Nursing Lab Center (VNLC) at College of Nursing Valparaiso University, USA in the fall semester 2011. Forty-three participants were voluntarily recruited. Two questionnaires were incomplete, so forty-one questionnaires were analyzed. Students reported their satisfaction on the use of HPS in terms of helpfulness, suitability, effectiveness, how motivating it was, the materials used and the way the instructor taught. It can be summarized that students have a high level of satisfaction with HPS and reported an increase in their confidence in clinical skills.

Biography

Prathana Langkarpint has completed her PhD in Nursing Studies in 2005 from University of Hull, UK and Postdoctoral Research Fulbright Scholar from Valparaiso University, Indiana, USA in 2012. She is a former Dean of McCormick Faculty of Nursing and Assistant to the President for International Affairs. Currently she is Assistant Professor in Nursing at Payap University, Chiang Mai, Thailand.

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Radial and ulnarartery patency after cardiac catheterisation. Medium-term follow-up analysis

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Introduction: The use of the radial/ulnarartery access for cardiac catheterization procedures has increased progressively in the last years looking to a reduction in vascular complications. The purpose of our study was to evaluate the rate of patency of the searteries when used routinely for catheterization procedures in an institution performing radially (ulnary) most of the cases.

Patients & Methods: 213 consecutive patients who underwent cardiac catheterization were included prospectively in a two-month period. Doppler ultra sound of the vascular access was carried out before and one month after the procedure.

Results: 10 of the 213 patients were lost in the follow-up. The remaining 203 were mostly men (72%) with an average age of 63+/-15 years. 30% were diabetic, 63% hypertensive, 43% hyperlipidemic and 29% were smoker. Importantly enough, 30% had a previous catheterization procedure and 1.4% suffered from peripheral disease. Concerning their anti thrombotic regimen, 90% were on aspirin, 76% on clopidogrel, 49% on low molecular weight heparin and 2% on warfarin. In 91% of the patients the access was right radial, 7% left radial and 2% right ulnar. All the patients had a patent vessel by Doppler assessment before the procedure. 6F was the predominant sheath size (86%). 5% of the patients had a hematoma after the procedure. In the one-month follow-up Doppler, the vessel was patent in all the cases.

Conclusions: The radial/ulnar access, when used routinely is very safe, with a very low rate of vascular complications and 100% rate of patency in the one-month follow-up Doppler.

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