

ASSIUT SCIENTIFIC NURSING

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Relation between Feeding Types and Surgical Wound Healing of Neonates

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Abstract

Background: Breast milk has antimicrobial and healing properties that actually can help the wound healing. Surgical neonates are at a much higher risk for malnutrition as a result of increased metabolic demands from surgery, nutrient losses, and sepsis. Many methods of feeding are used postoperatively for neonates; oral feeding (breast milk or formula milk), enteral, or parenteral feeding. Aim of this work was to assess the relation between feeding types and surgical wound healing of neonates after. Methods and materials: Comparative descriptive research design was used to carry out this study. It comprised 100 neonates aged less than one month, they were divided into two equal groups as the following: Group 1: received breast milk feeding, Group 2: received formula milk feeding. Tools were developed by the researcher, after that the researcher fulfill assessment sheet and took the photographs were taken by the researcher on the 7th postoperative day and reassessed for second time on the 14th day. Results: Out of the included neonates received breast milk feeding, 78 % were boys, while 22% were girls. Also in the formula-feeding neonates, the majority (58%) of formula feeding neonates' wounds were inflamed, while less than one third (30%) of breast milk feeding neonates' wounds were inflamed during the 7th day. On the other hand 38% of formula fed neonates' wounds were inflamed, while only 8% of breast milk feeding neonates' wounds were inflamed during the 14th day. Conclusion, neonates received breast milk feeding have rapid sound healing, less wound inflammation and receiving more number of daily feeding than formula feeding neonates.

Effect of intermittent enteral feeding schedule on the occurrence of gastrointestinal complications and hospital stay among critically ill patients

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Abstract

Nutrition support can result in improved wound healing, a decreased catabolic response to injury, enhanced immune system function, improved gastrointestinal structure and function, and improved clinical outcomes¹. The appropriately and timely nutritional intervention can improve patient recovery and survival, decrease complication rates, and decrease costs. Gastrointestinal complications (vomiting, diarrhea, constipation, and abdominal distension) are most commonly associated with complications derived from enteral feeding. **Aim:** this study was carried out to investigate the effect of the intermittent enteral feeding schedule on the occurrence of gastrointestinal complications and the length of the hospital stay among critically ill patients at Assiut University Hospitals. **Design:** a quasi-experimental design. **Setting:** trauma ICU at Assiut University Hospitals and the study took approximately one year started from July 2010 till July 2011. **Patients:** A convenience sample of 80 adults' critically ill patients on enteral feeding constituted the study sample. The patients were assigned randomly into two equal groups (control group and study group, 40 patients each). **Methods:** The only manipulation was in the rest period and time interval in which the study group subjects were rested 8 hours at night as compared to 6 hours for the control ones, as well study group subjects were having 4 hours time interval between each two consecutive feedings as compared to 2 hours for control group subjects. **Results:** There was a significant statistical difference between both groups ($p=0.000$) indicating lesser hospital stay among study group subjects (52.5% of the study group subjects were hospitalized less than one month as compared to 35% of the control group subjects were stayed between 30 to less than 45 days). It was also found that, 57.5% of control group patients developed gastrointestinal complications as compared to 45% of the study group patients (n.s). **Conclusion:** intermittent 4-hour enteral feeding schedule had lowered the incidence of gastrointestinal complication and length of the hospital stay.

Impact of reduce the sleep disruption causes at post-operative ICU among patients after open Heart.

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Abstract:

Back ground Patients in ICU are experienced poor sleep quality and consistently report poor perceived sleep quality in ICU compared to home. Sleep disruption was the second most stressful condition reported by patients after open-heart surgery in ICU. Causes of sleep disruption at ICU are admission to ICU, separation from patients family, isolation, and fear of death, noise, light, extreme temperature , and diagnostic procedures, the patient being connected with many tubes, connection with machines, alarm of machines and monitors, and health team conversation. Existing evidence supports that ICU sleep promotion via multi-faceted interventions focused on minimization of nighttime sleep disruptions and maintenance of the homeostatic sleep-wake cycle. Therefore, **the purpose** of this study is reducing the causes of sleep disruption in ICU to improve patients sleep quality, and reduce complications. **Patient and Method** Quiz Experimental research design was used to conduct this research .**This study was carried out** at post-operative ICU in Assiut University Hospitals .**The sample of this study** was consisted of 40 patients, admitted to ICU after open-heart surgery. **Tools** used in this study are, **First Tool:** Patient's profile assessment sheet. **Second Tool:**1- sleep quality assessment questionnaire.2- Sleep disruption scale after open-heart surgery as a non-physiological assessment. **Results:** patients after open-heart surgery in ICU report poor sleep quality (1.5 ± 0.6) compared to home (9.9 ± 0.3).There is a significance increase ($P < 0.001$) regarding to the overall quality of sleep in ICU stay for both groups. Highly significant decrease in overall degree of daytime sleepiness during ICU stay ($p = 0.000$). Highly significant decrease in pulse rate of the study group (83.3 ± 10.7) versus control group (109.1 ± 14.8) through ICU stays. Highly significant decrease in respiratory rate in 2nd day in ICU and poor significant differences in last day. Regarding to Systolic blood pressure there is statistical significant differences ($p = 0.003$) in the 2nd day. Regarding to length of ICU stay, there were highly significant decreased in study group versus control group (3.1 ± 0.3 & 4.8 ± 1.1) day. **Conclusion** applying standard interventions to reduce sleep disruption causes in ICU was more effective to reduce complications of sleep disruption after open-heart surgery in study group versus control group who received routine hospital care. **Recommendations:** Patient preparation and provision of information should start from time of the surgeon's decision that surgery is required.

Role Conflict, Role Ambiguity and Nurses' Performance at Minia University Hospital

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Abstract:

Background: Role conflict and role ambiguity frequently emerge as problems that result from the demands of organization and can be components of role stress and role strain. Professional healthcare providers must clearly understand what is expected of their performance, this can be achieved when all member in the organization have clearly defined roles and overall objectives. **Aim:** 1- Identify causes of role conflict and role ambiguity at Minia University Hospital. 2- Determine level of role conflict, role ambiguity and nurses' performance at Minia University, and 3- To find out the relation among role conflict, role ambiguity and nurses' performance at Minia University Hospital. **Research design:** The study was developed within a descriptive correlational approach. **Setting:** The study carried out at Minia University Hospital. **Subjects:** a total of 85 nurses who worked in all general and special inpatient units at Minia University Hospital. **Tools of data collection:** The study tools consisted of three tools, it includes 1- Personal data sheet 2- Role conflict and role ambiguity questionnaire, 3) Observation checklist for Assessment of Nursing Performance. **Results:** the performance of the studied nurses have negative correlation with role conflict ($r = -0.183$ & $p = 0.094$) and with role ambiguity ($r = -0.119$ & $p = 0.279$). There is a positive correlation between role ambiguity and role conflict ($r = 0.5$ & $p = 0.0000$). **Conclusion:** our study concluded that majority of studied sample at Minia University Hospital have high level of role conflict and role ambiguity regardless of demographic characteristics. **Recommendations: On the light of the study, it was recommended that:** Nursing managers should plan an orientation program to orient nurses about hospital policy, rules, regulation, job description and responsibilities, other's expectation, facilities, equipment, and performance evaluation standard.

Factors Affecting on Work Empowerment among Nurses at Main Assiut University Hospital

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Abstract:

Over the past several decades, the traditional superior- subordinate model for management has given way to more democratic approaches. A core concept for most of these new approaches to management is empowerment. Empowerment is **management practice** of sharing **information, rewards, and power** with **employees** so that they can **take initiative** and make **decisions** to solve **problems** and **improve service** and performance. **Aim:** Is to study factors that promote empowerment among nurses at Main Assiut University Hospital. **Subject and method:** The research design a comparative descriptive design, study subject consisted of (237) staff nurses working at Main Assiut University Hospital. The data collected through self – administered questionnaire includes demographic data sheet and work empowerment promoting factors scale which developed by Shelton (2002).**Results:** There is significant difference among different departments regarding empowerment competence, empowerment self-determination and interactional justice. There were no statistically significant differences between all factors of empowerment with sex and levels of education among the studied nurses. The study concluded that empowerment meaning, competence, self determination and its' impact will promote nurses empowerment rather than procedural justice and interactional justice which present as regard to department, age, sex, level of education, years of experience. So, nurse managers must provide staff nurses by sources of job-related empowerment, namely access to opportunities, information, support and resources and nurses should be allowed to participate in decision making to empower them, as well as increasing their feeling of autonomy.

Assessment of Nurses's Work Stress at EL- Minia University Hospitals

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Abstract:

Nursing is a stressful career; occupational stress is a common occurrence in health professions. Job stressors and low job control have been shown to be risk factors for patient safety and lead to poor job performance including reduced quality of nursing care. This study aimed to identify causes, level, and frequency of work stress on nurses at EL-Minia University Hospitals. **Methodology: Research design:** The study was developed within descriptive approach. **Setting:** The study was carried out at EL-Minia and Suzan Mubarak University Hospitals in El-Minia Governorate. **Subjects:** All nurses (158) who worked in all general and critical departments at El-Minia University Hospital (n= 115) and Suzan Mubarak University Hospital (n= 43) in the period from 1 July 2011 to 30 November 2011. **Tools of study:** The study tools consisted of two tools; they include 1- Demographic data sheet 2- stress scale. **Results:** Less than two thirds of the studied sample had moderate level of stress; more than two thirds of the studied sample had severe level of the stress. **Conclusions:** There were statistically significant relation between level of education and stress level in the two hospitals. While there were no statistically significant differences between other demographic characteristics and stress levels in the two hospitals, and the most common causes of stress with the nurses who worked at El-Minia and Suzan Mubarak University Hospitals are considered death, dying, work load, and uncertainty concerning treatment respectively. **Recommendations:** Organizing stress management program that focuses on different categories of nurses at all hierarchical levels

Assessment of Nutritional Status of patients with Liver Cirrhosis at Minia University Hospital

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Abstract:

There is limited data on the nutritional status of Egyptians with various etiology of cirrhosis, this study **aimed to**, assess the nutritional status for patients with liver cirrhosis at Minia University Hospital. **Patient and Methods:** 100 adult patients with liver cirrhosis (63 male and 37 female with mean age (45.58, 45.11 years respectively) and 20 patients as controls with mean age 42.20 years, the study was conducted at the General Medical Department and outpatient clinic in Minia University Hospital. Assessment of nutritional status was done using (1) anthropometric measurements as mid-arm circumference, mid-arm muscle circumference, triceps skin fold thickness, (2) Biochemical measurements as serum albumin, hemoglobin, WBCs, total protein, and INR, also; Mini-Assessment sheet was used. **Results:** the cause of liver cirrhosis among study group was 77% HCV and 22% HBV and 1% Mixed HBV and HCV infection, they were Child Pugh Class B and C (66%, 34% respectively). The most common nutritional risk factors for patients are gastrointestinal problems such as dry mouth, taste alteration, anorexia, nausea, and flatulence Malnutrition was prevalent in 85% of patients in study group in comparison with control group none of them have malnutrition. There is a high statistical significant difference found between liver cirrhosis group and control group in all anthropometric measurements. **Conclusion:** the majority of patients with decompensated liver cirrhosis were malnourished regardless the etiology of liver cirrhosis. Identifying the patients that are approaching the state of malnutrition by simple and easily applied methods is necessary in order to provide nutritional support. Follow up and correction of the nutrient deficit is very important and can improve the clinical outcome.

Satisfaction of Patients undergoing Knee Arthroscopy for Meniscal Trimming in the Out-patient Arthroscopy Clinic at Assiut University Hospital

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Abstract

Patient satisfaction is a health care recipient's reaction to salient aspects of the context, process and result of their service experience. Meniscal injuries affects 60 to 70 cases per 100,000 people, In the USA, surgical procedures for the meniscus are performed on approximately 850,000 patients each year. The aim of the present study was to assess satisfaction of patients who will undergo arthroscopic knee surgery for meniscal trimming with medical care received in the out-patient arthroscopy clinic. Subjects and methods: A convenient sample of sixty adult patients (male and female) undergoing arthroscopic knee surgery for meniscal trimming were included in this study. The study was conducted at the arthroscopic out-patient clinic at Assiut University Hospital. One tool was utilized to fulfill the aim of this study; Patient Satisfaction Questionnaire PSQ18. Results showed that patients were highly satisfied with technical quality (65.42 %, high satisfaction), followed by satisfaction with communication with the medical team (63.83 %, moderate satisfaction). While they were least satisfied with financial aspects (36.17 %, mild satisfaction). Conclusion: patients were highly satisfied with the technical quality and least satisfied with the financial aspect.

Assessment of Quality of Life and Nurses' Knowledge among Hypertensive Elderly Patients at Sohag University Hospital.

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Abstract

Hypertension has been a well-recognized condition in the elderly for a very long time and is prevalent in over 70% of the elderly population. It is estimated that the number of persons aged 65 years and older will increase to 72 million by the year 2030, which will in turn result in an increased rate of hypertension among the elderly. **Aim:** To assess the quality of life of elderly patients suffering from hypertension and nurses' knowledge regarding hypertension. **Methods:** A cross sectional descriptive research design was utilized in this study. This study was carried out at medical, dialysis, and neurological departments at Sohag University Hospital. Convenient sample consist of 178 elderly patients suffering from hypertension and 58 nurses. Data were collected at a period of six months starting from November 2011 to the end of April 2012, using two tools: First tool; is a structured interview sheet about Quality of life. Second tool: an interview questionnaire sheet to assess nurses' knowledge regarding hypertension. **Results:** 48.9% of patients had low QOL score, and there was a statistical significant difference between quality of life and sex & level of education "P- value (.007&.070)" respectively, and around one third of nurses (32.7%) had poor level of knowledge about hypertension. There was a statistical significant difference between knowledge and age & qualification of nurses "p- value (.052&.090) respectively". **Conclusion and Recommendations:** Presence of gerontological nurses in outpatient clinics and hospital departments whom trained and have an active role in health promotion and disease prevention for that highly growing segment of population. People have to be educated through mass media on hypertension and its risk factors. People have to be educated on the importance of physical exercises and have to be encouraged to do them.

Blood Transfusion :Impact of Implementing a Design Nursing Intervention Protocol to Minimize Patient's Complications.

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Abstract:

Blood transfusion generally refers to the therapeutic use of blood and components. There are several risks associated with blood transfusion. According to WHO (2009) more than 81 million units of blood are collected globally every year. Through 2010, units of blood for internal medicine and blood disease unit are more than 3168 units. The nurse plays a critical role in caring for patients undergoing blood transfusion. **The aim** of the study was 3 folds: the first is to assess the patient undergoing blood transfusion of physical and psychological needs; the second is to assess nurses' knowledge and practice before and after implementing the protocol and the third is to design nursing intervention protocol. Hypotheses: **Hypotheses** were formulated: (1) The post mean knowledge score of nurses who would be exposed to design nursing intervention protocol would be higher than their pre mean knowledge scores. (2)The post mean practice scores of nurses who will be exposed to design nursing intervention protocol will be higher than their pre mean practice scores.(3) A positive relationship would be exist between knowledge and practice score obtained by nurses receiving the designed nursing intervention protocol. (4) The incidence of complications of blood transfusion after protocol implementation would be lesser than that developed pre protocol. **Research design:** A quasi-experimental research design was utilized in this study on a convenient sample of 55 nurses and 30 patients control group and 30 study group patients. The study will be conducted in the general medical departments (B and C) and blood diseases unit at Assiut University Hospital. **Tools** utilize for data collection were a) pre and post nurses' intervention interview sheet. b) Construction of designed nursing intervention protocol. c) Patients' complications assessment sheet. **Results:** The first and the second hypotheses were supported as a good improvement in the mean knowledge & practice scores were found after the implementing of nursing intervention protocol. The third hypothesis was supported as was not able to extract the statistical significance of the relationship between knowledge and nursing practices before and after the study but extract a positive correlation by figure. The fourth hypothesis was supported as the complications of blood transfusion after protocol implementation were lesser than that developed pre protocol. **Conclusion:** Improved nurses' knowledge and practice can favorable affect the incidence of complications for patient undergoing blood transfusion. **Recommendation:** Nurses are in need for in-service training programs and refreshing courses to improve their knowledge which will reflect on their practice while providing care to patients.

Nurse Perceptions About the Culture of Reporting Medication Error in Taif- Hospital

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Abstract:

Introduction and research problem: Medication errors in hospitals are very common and it caused huge trouble in community, So, the present study aimed to: Identify nurse perceptions about the Culture of Reporting medication error in Taif –hospitals. **Research methodology:** Across –sectional descriptive survey, a total of 150 nurses, in multiple settings, both, King Faisal, 68(45.3%) , Abdul-Aziz,37(24.7%) and Pediatric hospital,45(30%), at Taif City.**Tool of data collection** Structured interview questionnaire was used and composed of two parts. The first part was related to demographic data, aged, sex, working position, level of education and the second part was a Survey to seek Information about the reporting of medication errors, which is designed by Allina Hospitals, 2002. **Results:** Participants age ranged between 22 and 59 years old with Mean \pm SD (30.24 \pm 8.10)years ,the majority is diploma degree, staff nurse and female,(74.3 % , 85.3% and 73.3%,respectively),their experience ranged between 1-36 with means and SD ,(6.76 &+7.03)years. Also majority of participants strongly agree regarding use of new technology , good leadership and blame-free reporting ,have a vital role in preventing medication error. **Conclusion:** Reporting errors in a clear and transparent with no blame in workplace, decreasing workloads, applying quality standards, informatics technology and selecting qualified health personnel are the suitable solution for reducing medication errors. **Recommendations:** Preparing an educational training course for documenting and reporting system through utilization of information technology and quality standards in medication administration according to hospital police .

Effect of Mode of Delivery on Children Intelligence Quotient at Pre-School Age in El-Minia City

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Abstract:

Background: There has always been an asking question with obstetricians and health staff whether delivery mode can affects child intelligence. This study was conducted to compare the intelligence quotient (IQ) of pre-school aged children delivered by cesarean section (C.S) and spontaneous vaginal delivery (S.V.D) in Minia city. **Aim of the study:** to determine effect of mode of delivery on children IQ at pre-school age in Minia city. **Materials and Methods:** structured interviewing sheet including: Socio-demographic data such as (mother's age, level of education, etc), obstetrical history including (Number of deliveries, duration of labor, etc), Child history including (gestational age of the child/ week, birth weight / Kg, etc). And "Good enough & Harries" intelligence test were used. **Design:** Cross sectional descriptive research design. **Setting:** data were collected from Nursery schools in Minia City. **Sampling:** Three hundreds children were included in this study; they were divided into two groups (150 children delivered by S.V.D and 150 children delivered by C.S). **Results:** The study results revealed that there are no statistically significant differences between children IQ scores based on mode of delivery at ($P < 0.05$). On the other hand by using other advanced statistical technique called "stepwise regression" having the ability to determine variables which can predict the children IQ, in this study it was found that we can predict children IQ through three variables which are: S.V.D that was related to higher IQ scores, mother's age and number of deliveries in a direct negative relation at ($P < 0.05$). **Conclusion & recommendations:** Based on our findings, the association between cesarean deliveries with better cognitive development in children cannot be supported.

Effect of Implementing a Designed Nursing Protocol on Nurses' Knowledge and Practice Regarding Epileptic Patients Outcomes

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Abstract:

Epilepsy is a brain disorder in which clusters of nerve cells, or neurons, in the brain sometimes signal abnormally. Neurons normally generate electrochemical impulses that act on other neurons, glands, and muscles to produce human thoughts, feelings, and actions. In epilepsy, the normal pattern of neuronal activity becomes disturbed, causing strange sensations, emotions, and behavior, or sometimes convulsions, muscle spasms, and loss of consciousness: More than 2 million people in the United States about 1 in 100 have experienced an unprovoked seizure or been diagnosed with epilepsy. For about 80 percent of those diagnosed with epilepsy, seizures can be controlled with modern medicines and surgical techniques. However, about 25 to 30 percent of people with epilepsy will continue to experience seizures even with the best available treatment. The nurse plays a critical role in reducing complications of this method. **The aim of the present study** is 3 folds: first is to assess nurse's knowledge and practice regarding epileptic patients, design nursing protocol for nurses working with epileptic patient, and evaluate the effect of implementing the designed nursing protocol on nurse's knowledge and practice regarding epileptic patients. **Four hypotheses** were formulated: (1) the post mean knowledge scores of nurses who will be exposed to designed nursing protocol will be higher than their pre mean knowledge scores. (2) The post mean practice score of nurses who will be exposed to designed nursing protocol will be higher than their pre mean practice scores. (3) The incidence of complications during seizure for epileptic patient cared by nurses after protocol implementation will be lesser than that developed pre protocol implementation. (4) A positive relationship will exist between knowledge and practice score obtained by nurses receiving the designed nursing protocol. **Research design:** quasi-experimental research design was utilized in this study on a convenient sample of 35 nurses and 30 Adult conscious patients with epilepsy, who are aged from 18 to 65 years from both sexes, agree to participate in the study. This study was conducted in the neurological department at Assiut University Hospital. **Tools** utilized for data collection were a) Questionnaire sheet. b) Observation checklist sheet. c) Patient assessment sheet. d) Construction of designed nursing protocol. **Results:** The first and the second hypotheses were supported as a good improvement in the mean knowledge & practice scores were found after the implementing of designed nursing protocol. The third hypothesis was supported, as epilepsy complications were improved after protocol implementation. The fourth hypothesis was not able to extract the statistical significance of the relationship between knowledge and nursing practices before and after the study due to the result is one and zero. **Conclusion:** patient with epilepsy exposed for several complications. Improving nurses' knowledge and practice can favorably affect the incidence of these complications. **Recommendation:** Nurses in need for in-services training programs and refreshing courses to improve their knowledge which will reflect into their practice while working with epileptic patients.

Developing standards of post-operative nursing interventions for lower limb amputated patients

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Abstract

Limb amputation usually refers to the removal of part of or the entire upper or lower limb with a defined surgical approach. In the united states there is an estimated 1,7 million people living with an amputation in 2008 and approximately 135,000 new amputations occurring each year. **The aim of this study** was to develop standards of post-operative nursing interventions for lower limb amputated patient. **Subjects and method: research design** descriptive exploratory study was utilized. **Setting** the study was carried out at trauma unit and vascular surgery department at Assiut University Hospital. The study sample divided into two groups: Group I: It includes all baccalaureate nurses (4) who working in vascular surgery department and trauma unit. Group II: It includes all diploma nurses (60) who working in vascular surgery department and trauma unit. **Tools** It utilized for data collection were **Tool I** post operative cognitive assessment sheet, **Tool II** post operative competencies opinionnaire sheet, **Tool III** standards of post operative practice sheet. **Results** showed that; more than half of nurses had fair knowledge regarding standards of post operative interventions for lower limb amputated patients. The majority of nurses had agreed as regarding prepare the trauma unit and vascular surgery with the necessary equipment, prepare the car/ table with basic instruments according to patient's condition, ensure that continuous monitoring and recording are followed for post operative patients, ensure that all infection control measures are properly followed in all procedures, ensure that all health team are properly attired for patient care, ensure that safety for each patient during transportation from operating room to unit, ensure that all staff members follow ethics and patient rights in the trauma unit and vascular surgery department.. Nurses showed inadequacy in their practice about standards of post operative interventions for lower limb amputated patients. **Conclusion:** Formulation of standards is the first step toward evaluating nursing care delivery. **Recommendation:** Implementation of standards of post operative nursing interventions for lower limb amputated patient is necessary for trauma unit and vascular surgery.

Effect of a designed nursing protocol on nurse's knowledge and practice regarding Intravenous Therapy

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Abstract:

Background: Peripheral venous cannulation is the commonest method used for intravenous therapy. There are numerous well recognized indications such as intravenous fluids, limited parenteral nutrition, blood and blood products, drug administration (continuous or intermittent). **The aim of the present study** is 3-folds: the first is to assess nurse's knowledge and practice regarding intravenous therapy, the second is to design nursing protocol for nurses about intravenous therapy and the third is to evaluate the effect of implementing the designed nursing protocol on nurse's knowledge and practice regarding intravenous therapy. **Hypotheses:** Three hypotheses were formulated: (1) the post mean knowledge scores of nurses who will be exposed to designed nursing protocol will be higher than their pre mean knowledge scores. (2) The post mean practice score of nurses who will be exposed to a designed nursing protocol will be higher than their pre mean practice scores. (3) A positive relationship will exist between knowledge and practice score obtained by nurses receiving the designed nursing protocol. **Research design:** Aquasi-experimental research design was utilized in this study on a convenient sample of 55 nurses. The study will be conducted in general medical departments (B and C) and blood diseases unite of Assiut university hospital. **Tools:** utilize for data collection were a) Questionnaire sheet. b) Observation checklist sheet. c) Construction of designed nursing protocol. **Results:** The first and the second hypotheses were supported as a good improvement in the mean knowledge & practice scores were found after the implementing of designed nursing protocol. The third hypothesis was supported as a negative relationship was found between nurse's knowledge and practice scores immediately after application of the designed nursing protocol. **Conclusion:** implementing the designed nursing protocol on nurse's knowledge and practice regarding intravenous therapy shows a significant improvement in nurses' knowledge and practice. **Recommendation:** Continued nursing education and in-service training programs should be well organized within Assiut University Hospital.

Nursing's Role with cervical cancer screening in Upper Egypt

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Abstract:

Women in developing countries face many barriers that prevent them from receiving adequate, timely cervical cancer screening. In Egypt the prevalence of cervical cancer was 7.8/100,000 with 2713 newly annual reported cases. **Objectives:** to increase women's awareness of cervical cancer risk using counseling and to determine nursing's role in the screening tests. **Methods:** A cross sectional design, of non-pregnant, non-virginal women was recruited. **Results:** 450 non-pregnant women were counseled and consented for screening. The nurse was able to identify squamous columnar junction 100%. In comparing positive visual inspection with acetic acid (VIA) to pap smear screening results, findings were 17.1% (n=77) and 5.1% (n=68) , respectively. In comparing negative VIA to pap smear screening results, findings were 82.9 % (n=373) and 83.8% (n=377), respectively. **Conclusion:** Nurse's performing VIA is as effective screening tool for determining precancerous or cancerous cervical lesions.