

# 3<sup>rd</sup> International Nursing Networking Conference

**April 23-24, 2025**

“Theme: Advances and Innovations in  
Health Care and Nursing”

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APRIL 23-24, 2025

KEYNOTE FORUM-DAY 01



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APRIL 23-24, 2025



## Sofica Bistriceanu

Academic Medical Unit - CMI, Romania

### Provider's Professionalism Is Reflected in Customer Loyalty

People must interact with each other to sell their goods or services and buy other necessary products, as no one can own and produce everything. They collaborate in person or virtually, using spoken or written words. Customers import and export products to improve their lives and the lives of their loved ones. Before selecting, they consider the offerings' quality, availability, and cost. Interaction value with the provider influences customer experience. In the healthcare industry, good outcomes in clinical practice and the best interaction style with patients and their loved ones enchant end users. Expertise in the specific field and excellent communication skills are essential for successful work. Being kind and compassionate and friendly while respecting people's religious beliefs about human life and creation can help patients easily adhere to the therapeutic plan and collaborate for any necessary adjustments. Based on their experience, the delighted customers/patients would like to maintain the collaboration with that provider. The provider's good reputation quickly circulates, especially online in the community, attracting new clients. The increase in investment return ensures the business's positive trajectory: growth and flourishing. By contrast, deceptive people's interactions disappoint all parties involved in the relationships, leading to their altered emotional health. No one wants to collaborate with ill-mannered people because they cause them discomfort, following sleep disturbance, altered heart function, or metabolic abnormalities. Upset end users look for another provider from the offerings for the next episode of care, which determines a decrease in investment return, business instability, and altered provider's name. Therefore, customer loyalty validates the provider's professionalism. This metric is essential for business advancement and leads to the successful professional and social life of an individual.

#### At the end of this presentation, the audience will be able to:

- define professionalism in the healthcare industry
- recognize the impact of professionalism on the individual lives
- identify deceptive people's interactions' effects on people's lives
- recognize the importance of joyful collaborative work for business advancement
- initiate informative programs about the significance of professionalism for the individual's lives and society's progress.

#### Biography

Sofica Bistriceanu, MD, Ph.D., graduated from Iasi University in Romania and family medicine research at Maastricht University. She joined many meetings worldwide. With over 120 research studies shared internationally and over 50 articles published in International Journals, she has been recognized with numerous awards. Dr. Sofica Bistriceanu is a member of the Academy for Professionalism in Health Care, serves on the Editorial Review Board for The Journal of Patient Experience (JPX), the Editorial Board of the Journal of Medical Research and Clinical Case Reports – Research Portal Central Publishers, and is an Associate Editor for Primera Scientific Publication. She represents the Academic Medical Unit- CMI in NT, ROU. Additionally, she is the author of seven volumes of poetry published by Cronica, and Time, both Iasi Publishing House.



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**Bernd Blobel**

University of Regensburg, Germany

## Principles, Challenges and Solutions for Designing and Managing Advanced, Intelligent and Ethical Health Ecosystems

Advancing from phenomenological, evidence-based, person-centered, and personalized care, health ecosystems currently undergo a transformation towards personalized, preventive, predictive, participative precision medicine (5PM), supported by technology. It considers individual health status, conditions, genetic and genomic dispositions in personal social, occupational, environmental and behavioral context, understanding the pathology of diseases and turning health and social care from reactive to proactive. Thereby, we have to enable communication and cooperation between all actors from different knowledge spaces including the subject of care, representing different disciplines, using different methodologies, perspectives, intentions, languages, etc., based on different educations and skills. Therefore, the knowledge-based, multidisciplinary, highly complex and highly dynamic 5PM ecosystem must be consistently and formally represented. The outcome is a system-theoretical, context-sensitive, architecture-centric, ontology-based, policy-driven approach for designing and managing intelligent, ethical and sustainable 5PM ecosystems, developed by the author and internationally standardized. The deployment of the approach is meanwhile defined by leading standards developing organizations such as ISO, CEN, IEEE, etc., as mandatory for all projects covering more than just one domain.

### What will the audience take away from your presentation?

- The methodology for formally representing and managing multi-domain ecosystems and their knowledge spaces as systems of systems will be introduced in detail.
- The role of ontologies will be explained and exemplified.
- ISO 23903 Interoperability and Integration Reference Architecture – Model and Framework will be introduced and enriched by practical examples.
- Ethical aspects including security and privacy challenges and solutions will be especially highlighted.

### Biography

Prof. Blobel studied Mathematics, Technical Cybernetics and Electronics, Theoretical Physics, Biocybernetics, Informatics, and Medicine at different universities in East Germany. He received the PhD degree in Physics, a habilitation in Medicine, and a habilitation in Medical Informatics. He was Head of the Physical Laboratory in Environmental Medicine at the Medical University Magdeburg and thereafter Head of the Medical Informatics Department and then Director of the Institute For Biometrics and Medical Informatics at the Medical Faculty of the Otto-von-Guericke University Magdeburg. In 2004, he became Founder and Head of the Health Telematics Project Group at Fraunhofer Society, Institute of Integrated Circuits (IIS), Erlangen, and thereafter Head of the German National eHealth Competence Center (eHCC) at the University of Regensburg.



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**Daryle Wane**

Pasco-Hernando State College, United States

## Reflections on Nursing Practice: Using a Storyboard Approach

Taking a step backward, and at the same time focusing on moving forward, we will use a storyboard approach to tell the “nursing” story. By this time in the year 2024, nursing practice should have emerged and treated as a key element in the delivery of healthcare. And yet, most of us have experienced significant challenges in nursing roles at both the patient, clinical facility, peer and government levels. This is independent of the health pandemic and the recognition of nursing practice should be reaffirmed and moved beyond the inclusion of provided services of the hospital room charge. This presentation will share ideas/images and reflective thoughts of nursing practice from both the student and educator points of view. By telling “our” collective story, one hopes that there will be a renewal of recognizing nurses as key players in the delivery of health care. Nurses contribute to improved health outcomes for the patient, family, groups, community and/or populations. We will review by looking at the start of nursing pathways through education, clinical training, licensure and beyond to see how nurses have sought to meet projected competencies. Using a storyboard approach will help share memories, stimulate engagement and show that each of us has a “story” to tell. Remember, that “we” are in this together.

### What will the audience take away from your presentation?

- Explain how the audience will be able to use what they learn?  
The audience will use this “shared” experience to bolster confidence in their professional practice role and realize that they are not alone.
- How will this help the audience in their job?  
Focusing on the use of collective strength, nurses will emerge as advocates for their own professional growth and help foster change in the way that nurses are recognized in practice settings.
- Is this research that other faculty could use to expand their research or teaching?  
Absolutely, as “we” are all in this together. There is strength in looking at how to improve the recognition of nursing practice.
- Does this provide a practical solution to a problem that could simplify or make a designer’s job more efficient?  
This presentation will provide shared story’s that can help motivate others in their nursing roles.
- Will it improve the accuracy of a design, or provide new information to assist in a design problem?  
This presentation will provide shared story’s that can help motivate others in their nursing roles.

### Biography

Dr. Wane has a PhD in Nursing Science as well as a master’s degree from the University of South Florida and is a Board-Certified Family Nurse Practitioner. She also has undergraduate degrees in Nutrition and Nursing from Brooklyn College and Downstate Medical Center College of Nursing. After 32 years, Dr. Wane has retired from PHSC and now is focused on the role of Nurse Consultant. She has published numerous supplements in textbooks as well as journal articles, continues to serve as an editorial board member and peer reviewer for several journal publications. She is also a member of Sigma Theta Tau Nursing Honor Society and a CCNE evaluator.

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SPEAKER SESSIONS-DAY 01





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**\*Neomie Congello, Dianne Montano**

California State University Channel Islands, United States

## The Dedicated Education Unit: Learning Experiences of Students and Preceptors

Effective nursing education is crucial for the increasing complex care needed in healthcare settings. Academic-practice partnerships are established through collaboration of university and healthcare institutions to address the shortage of faculty and nurses. The Dedicated Education Unit (DEU) model is used to train staff nurses to become preceptors while providing increased individualized learning opportunities for students. The DEU first originated in Australia in the twentieth century and since then has been implemented internationally including the United States. Students in the DEU receive ample exposure to patient care while working in a one-on-one clinical approach with a preceptor. The nursing faculty oversees the clinical experience and serves as the clinical coach in the DEU. Nurse preceptors are equipped with learning resources to help students integrate classroom education into nursing practice. Hence, the DEU increases teaching capacity by allowing trained preceptors to become clinical teachers at the bedside while maintaining the quality of nursing education for students. The aim of this study was to gain insights into the perceived effectiveness of the DEU clinical model through self-reports of the learning experience among students and preceptors. A pilot study was conducted in Spring 2022 to investigate the learning experiences of 22 second semester baccalaureate students and 14 nurse preceptors in the DEU clinical. Approval for the study was obtained from the university institutional review board and two affiliated hospitals located in Southern California. Participants completed an online survey after signing consent in Qualtrics. The Student Clinical Learning Culture (SCLC) and Support Instrument for Nurses Facilitating the Learning of Others (SINFLO) surveys were used to examine the perceived learning experiences of students and preceptors, respectively. Based on one-sided two-sample t-tests, student motivation, social inclusion, and preceptor preparation subscales had means that were significantly higher than a similar study (Williams et al. 2021). Having increased one-on-one learning with a trained DEU preceptor thus facilitates student preparation for nursing practice. Findings of the study cannot be generalized to other settings and causal inferences cannot be determined based on the small sample size. However, this study provides a better understanding of student motivation, social inclusion and preceptor preparation in the DEU clinical. As the DEU continues to expand across the United States, future studies can build on results of this pilot study by implementing student motivation and social inclusion strategies in future preceptor preparation programs.

### What will the audience take away from your presentation?

- \* Explain how the audience will be able to use what they learn?

At the end of this presentation, attendees will be able to

- \* Provide a brief history of the dedicated education unit
- \* Describe how the dedicated education unit can be implemented to combat the faculty and nursing shortage
- \* Explain how the one-on-one dedicated education unit model provides increased learning opportunities through exposure to complex patient situations





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\* How will this help the audience in their job? Is this research that other faculty could use to expand their research or teaching? Does this provide a practical solution to a problem that could simplify or make a designer's job more efficient? Will it improve the accuracy of a design, or provide new information to assist in a design problem? List all other benefits.

\* Through heightened awareness, audience can benefit their organization by incorporating the Dedicated Education Unit model as a potential solution for the current faculty/nursing shortage to benefit their organization

\* Others can replicate the study using a larger sample size to investigate the effectiveness of the model in their area of practice

\* Survey instruments may be adapted to examine the effectiveness of the model

\* Future preceptor programs already in place can implement the Dedicated Education Unit model to

compensate for the shortage of nursing faculty

\* Students can gain experience in practice like on-the-job training on the unit and be prepared to enter the workforce if hired upon graduation by the healthcare institution

## **Biography**

Dr. Neomie Congello is an assistant professor at California State University Channel Islands where she has been teaching in the nursing department since 2015. She teaches in the traditional, ADN/RN to BSN and MSN programs. In addition to teaching, Dr. Congello is the Assistant Chair of the Nursing Program and Director for the ADN/RN to BSN program while mentoring faculty in medical-surgical and research courses. Dr. Congello currently serves as Research Chair for the Gamma Tau at-Large Chapter of Sigma Theta Tau International Honor Society of Nursing.



**Saumya Pandey**

Indira IVF Hospital, India

## **Human Chorionic Gonadotrophin (hCG) Trigger-Mediated Ovulation Induction in Infertility Management in North Indian Women Undergoing IVF/ICSI Regimens: A Pilot Reproductive Medicine Study with Public Health Impact**

**Introduction:** Infertility is a global public health problem; cost-effective patient-friendly treatment modalities along with psychosexual intervention strategies are essential for tobacco-mediated infertility control/prevention/management among ethnically disparate populations. Objectives: My pilot study aimed to assess hCG-trigger mediated ovulation-induction and differential in vitro fertilization (IVF) success trends among infertile women of North Indian ethnicity. Material and Methods: Prospective study designed in a hospital-based setting with enrollment of infertile women undergoing IVF/intracytoplasmic sperm injection (ICSI) at IndiraIVFCenter, Lucknow, Uttar Pradesh, India (N=910 women; April-September 2020); inclusion criteria: age>35 years, North Indian ethnicity, married>1 year, absence of full-term clinical pregnancy, endometrial thickness <6 mm/thin endometrium; exclusion criteria: prior  $\geq 2$  IVF failures, fibroids/adenomyosis/cervical cancer/endometriosis. IVF success was determined by evaluating total frozen embryos transferred/month, average oocyte yield/donor, oocyte quality, M-II oocytes, biochemical/clinical pregnancy (beta-human chorionic gonadotropin positivity/fetal cardiac activity). Mycobacterium tuberculosis positivity was assessed by GeneXpert polymerase chain reaction based technology, and psychosexual intervention-incorporated marital relationship counseling sessions/therapy, referrals for psychiatric assessments (cognitive impairment/schizophrenia/depression). Tobacco-usage was ascertained using bilingual Questionnaire (English/Hindi dialects) with supporting registered nurses; written informed consent of participants was taken and study was approved by Institutional Review Board. Results: Mean age and endometrial thickness of study participants were 34.1 years (SD  $\pm 0.8$ ) and 9.1 mm (SD  $\pm 0.2$ ), respectively; average Body-Mass-Index (BMI) and anti-müllerian hormone (AMH) levels were 25.0 kg/m<sup>2</sup> and 2.2 ng/mL. Embryos transferred/month:123-April/165-May/183-June/159-July/139-August/141-September, and pregnancies/ $\beta$ -hCG positivity:96/134/145/120/106/113 for months of April, May, June, July, August, September 2020. Subgroup-stratification demonstrated M-II vs total oocytes retrieved were 70%,68%, 71%,72%,77%,67%. Overall IVF success rates were 78%-April/81%-May/80%-June/75%-July/76%-August/82%-September; frozen embryo-transfer success was 72%-April/78%-May/70%-June/69%-July/63%-August/77%-September. M.tb. (55.6%)/HPV-positivity (12.0%) and self-reported tobacco-usage (100% response-rate) were significantly associated with aberrant fetal cardiac activity, higher trends of intrauterine-growth-restriction and still-births ( $P < 0.05$ ). English/Hindi-speaking infertile women self-reported treatment-related satisfaction rates of 80%-100%. Conclusions: M-II oocytes'-yield, sociodemographics of infertile women, and increasing age/aberrant AMH/BMI profiles/endometrial receptivity/diminished ovarian reserve are promising predictors of IVF/ICSI success in genetically distinct patient population-subset(s). Future multicentric gene-epidemiology/association public health studies with nursing interventions are warranted for development of predictive biomarkers in infertility management post-Covid-19/Omicron pandemic vaccination-era, and identifying aberrant microbiome at maternal-fetal interface tilting "embryonic/fetal-fate" towards still-birth/death.



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## What will audience learn from your presentation?

My promising reproductive medicine study emphasizes that M-II oocytes'-yield, sociodemographics of infertile women, and increasing age/aberrant AMH/BMI profiles/endometrial receptivity/diminished ovarian reserve are promising predictors of IVF/ICSI success in genetically distinct patient populationsubset(s). Future multicentric gene-epidemiology/association public health studies with nursing interventions are warranted for development of predictive biomarkers in infertility management postCovid-19/Omicron pandemic vaccination-era, and identifying aberrant microbiome at maternal-fetal interface tilting "embryonic/fetal-fate" towards still-birth/death.

## Biography

Dr.Saumya Pandey possesses brilliant academic credentials with earned Post-Doctorate:Biochemistry-Molecular Biology, Graduate School of Biomedical Sciences, University of Texas Medical Branch (UTMB), Galveston, TX, USA/Visiting Scientist: Urology (Robotic-Prostatectomy), James Buchanan Brady Foundation,-Lefrak Center of Robotic Prostatectomy, Department of Urology, New York Presbyterian-Weill Cornell Medical College, New York, NY, USA/Doctorate: Ph.D. Life Sciences, Sanjay Gandhi Post Graduate Institute of Medical Sciences, Lucknow, UP, India-ChhatrapatiShahujiMaharaj University, Kanpur, UP, India/Doctoral Research Fellowship:Biomedical Sciences, Creighton University, Omaha, Nebraska, USA/M.Sc. Biochemistry, University of Lucknow, Lucknow, UP, India, and recently worked as Head-Clinical Research, IndiraIVF-Hospital, Udaipur-Lucknow, India with 66 scientific publications in international journals.



**Liangmei Chen**

Xi'an Mental Health Center, China

## Research on the current status of pension models for individuals with mental disorders in China

**Objective:** By analyzing the existing literature, this paper aims to explore the current situation of the pension model for patients with mental disorders in China and put forward corresponding suggestions for improvement. **How:** This study analyzes the current situation of the pension model for patients with mental disorders in China by referring to the views of experts and scholars, relevant cases and statistical data through the literature and review of CNKI. Focusing on the existing elderly care service system, policy support and social cognition, this paper reveals the main characteristics and existing problems of the current Chinese elderly care model for people with mental disabilities. By comparing the advanced pension models at home and abroad, this paper puts forward some suggestions on strengthening policy support and improving service system. **Results:** The research shows that China's existing pension models mainly include family care, institutional pension and community service. **The main problems facing:** insufficient service supply, shortage of professional talents, social cognition and discrimination. Home care is still the main way, more than 70% of people with mental disorders rely on home care, but face great pressure and challenges; The construction of institutional elderly care and community service systems is gradually developing, but there are still insufficient resources, low service quality, and uneven distribution between urban and rural areas. **Policy suggestions:** Strengthen the construction and improvement of community support system; Improve professional training to ensure service quality; Use scientific and technological means to assist the elderly and ease the shortage of human resources. It is suggested that we should strengthen the construction of community support system and improve the level of professional service in the future. **Conclusion:** In China, the mode of nursing care for patients with mental disorders is in the transition period, and family nursing is still the mainstream, but it also faces great challenges. Institutional care and community services have developed, but they are not yet sufficient to replace the role of the family. The future development direction should be multi-dimensional, forming a diversified and three-dimensional elderly care service network.

## Biography

Liangmei Chen, Chief Physician of the Mental Health Center of Xi'an City (Shaanxi Province). Translated the American original DSM5 psychological classic textbook "Abnormal Psychology (18th Edition)". Participated in the writing of several books in the "Mental Health Popular Science Series"; won the "Xi'an Natural Science Excellent Academic Paper". Executive Chairman of the Mental Health Branch of the Asia-Pacific Health and Wellness Association; Director of the Professional Committee of the Mental Health Branch; Standing Committee Member the Traditional Chinese Medicine Health and Science Popularization Branch of the China Population and Culture Promotion Association. Editorial board member of the journal "Clinical Neuroscience Research", reviewer of "Social Science Research Frontiers".



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**Schaffer Daniela**

Klagenfurt Hospital, Austria

## Professionalization in Anesthesia Nursing

A dissatisfaction within the group of nurse anesthetists in the clinic "Klinikum Klagenfurt am Wörthersee" can be observed due to the legislation (GuKG) which limits the competencies of nurse anesthetists. With reference to this fact the "Berufsverband für Anästhesiepflege in Kärnten" was founded, with the goal to upgrade the profession in the same way as just some countries of the EU did (Master). The requirements for nurse anesthetist changed in a fundamental way. The delimitations between the professions are blurring. In order to manage the workload associated with a major hospital it is necessary for nurse anesthetists to take over responsibilities and make decisions legally reserved for physicians. This project is designed to evaluate whether Carinthian and Austrian anesthesia nurses emphasize the necessity to ameliorate the profession interconnected with a renaming of the career. Furthermore, the paper aims to investigate the willingness of active anesthesia nurses to incur more responsibility interrelated with a more extensive education. In order to acquire all the data a quantitative survey was used.

## Biography

My name is Daniela Schaffer and I work as an anesthesia nurse since 38 years in the "Klinikum Klagenfurt am Wörthersee" in the department of Anesthesia and Intensive care. Initially I worked in multidisciplinary intensive care unit, where I was selected to instruct new colleagues. I worked in this position for more than 10 years. For 7 years I was teaching in nurse education in school and acted as a practice guidance since last year. At the Alpe-Adria-University I studied pedagogy and in alliance I graduated in adult education. My book "Professionalisierung in der Anästhesiepflege, wird eine Solche vonseiten der Berufsangehörigen überhaupt gewünscht?" was published in 2024. Also some articles of mine are published in several journals like

"Anästhesie-Journal d'anesthésie, d'anestesia" SIGA, FSIA

„Pro Care“ von Springer

„Pflege Professionell“



**Franz Porzsolt**

Private Research Institute Clinical Economics, Germany

## Attractive chance for nurses in the second half of their professional career

Randomized Controlled Trials (RCT) have been the gold standard for measuring the effects of health-care services for 50 years. However, RCTs do not describe the added value of these services for patients, but only the theoretical proof of principle (PoP) under experimental conditions. Over the last 30 years, our group has developed a strategy that can represent the benefits of all applied health services offered under the conditions of Care As Usual (CAU). Scientifically, the actual effects of CAU are referred to as Real-World Effectiveness (RWE). The appropriate method for measuring RWE is the Pragmatic Controlled Trial (PCT). Healthcare professionals can use the PCT to describe the actual effects achieved and the values subjectively perceived by the patient. This job is ideal for experienced nurses who would rather use their knowledge and practical experience in the second half of their professional lives to solve complex academic challenges rather than practical ones. The central task of this new field of action is the professional collection of all data that managers need to control the healthcare system. Sound knowledge of medical procedures, decision-making criteria and the maintenance of proportionality are necessary professional requirements. If this data collection is carried out professionally, it contains all the information that is regularly collected (but not always analyzed) for classic quality assurance. Therefore, traditional quality assurance could be combined with the new practice-oriented evaluation. The necessary steps for an unbiased analysis of RWE are explained and justified. The justifications are important because most colleagues are more interested in developing new methods than in critically analyzing achieved goals. We consider the following steps to be mandatory. (1) the standardized description of the current health problem (SDHP). (2) The description of the health risk profile of each individual patient. Imagine ten patients who all ask for your help because of the same health problem. If one compares the risk profiles (additional complaints) of these patients, clear differences are noticeable. Therefore, the complete list of individual health problems (CLIP) must be prepared for each patient at the beginning of treatment. (3) The specific (functional) GOAL of the care must be defined depending on the current disease and the individual risk profile of the patient. (4) For this purpose, it is necessary to designate the appropriate INDicator, which can decide between a functional goal that has been achieved and a functional goal that has not been achieved. A functional goal of the care of a patient suffering from osteoarthritis of the knee could be to be able to climb the two flights of stairs to his home. (5) Based on known endpoints and known risk profiles, the organizing study group selects those risk factors that have a significant (insignificant) influence on the achievement of the chosen endpoint. Patients with many "endpoint-related" risk factors are less likely to achieve the desired goal than those with insignificant or low risks. (6) Based on the description of the "Endpoint-Specific Risk Factors (ESRF)", the "Endpoint-Specific Risk Profile (ESRP)" of each patient (with the support of information technology) can be described. (7) From the large number of patients with different ESRPs, patients with comparable ESRPs can be assigned to an "Endpoint-Specific Risk Class (ESRC) with high, medium or low ESRP by forming an algorithm. This classification makes it possible to group many patients with similar risk profiles together in one ESRC each. (8) This risk classification, which only appears to be complicated, is absolutely necessary due to the considerable influence of the individual baseline risk profile of individual patients. Reliable assessments of the results are not possible without taking into account the existing risks. Nurses who are at the beginning of their careers can also benefit from the new way of thinking that is not based on theoretical expectation, but on practical success. In parallel to the growing practical experience, they will understand that each future concept of care will require its specific strategy



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## Biography

1967-1974 medical school at Philipps University of Marburg/Germany

1974-1976 German Research Association (DFG) at the Ontario Cancer Institute, Toronto.

1976-1984 Resident General Medicine / Hematology / Medical Oncology. Habilitation University Ulm.

1985-1993 Senior Resident and supervisor Hematology / Medical Oncology

1993-1995 Managing supervisor Department Internal Medicine University Hospital Ulm

1985-1996 Scientific Secretary Comprehensive Cancer Center University Hospital Ulm

1995 Foundation Working group "Clinical Economics" and member Cochrane Cooperation

1996 Member Centers of Evidence-Based Medicine, Oxford

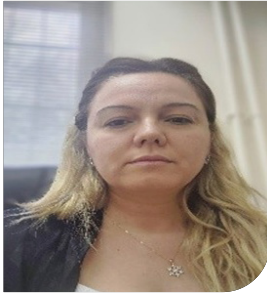
2005 Visiting Professor Mayo Clinic, Rochester, MN, USA

2009 Reviewer International Atomic Energy Agency (IAEA) Vienna

2009-2018 Visiting Professor Brazilian Universities UFF (Niterói), USP & UNIFESP (Sao Paulo), UNILA & UNIOESTE (Foz do Iguacu), Escola Bahiana de Medicina (Salvador).

2013 Private Research Institute Clinical Economics Ringgold ID: 587744.





**MelikeYavasCelik**  
Gaziantep University, Turkey

## **Attitudes of parents of children aged 0-12 towards vaccinating their children against COVID-19**

**Objective:** In this study, it was aimed to evaluate what affects parents' thoughts about vaccinating their children  
**Method:** The sample of the descriptive and cross-sectional study consisted of parents (n=374) with children between the ages of 0-12. In the collection of data; questionnaires were used. In the evaluation of the data; SPSS 25.0 program.  
**Results:** Close to 43.0% of parents were undecided about having their children vaccinated against COVID-19. Some 32.6% of parents supported the rationale "not knowing the side effects of this vaccine in the future" as the reason for not having their child vaccinated against COVID-19. A larger percentage, 76.7% of the parents, stated that they were afraid of taking their child to a health institution because of the fear of COVID-19  
**Conclusion:** As a result, in the study, it was determined that the majority of parents were hesitant about getting their children vaccinated for COVID-19. In addition, it was found that a significant portion of parents viewed the COVID-19 vaccine negatively and did not want to have their children vaccinated.

### **What will the audience take away from your presentation?:**

This study provides information about parents' attitudes towards vaccination, which is offered as a method of protection against COVID-19. This information shows that parents are against vaccination and that this opposition is caused by a lack of information about vaccines.

### **Biography**

The researcher is an associate professor in the field of Child Health and Disease Nursing. The researcher has many international articles in this field. The researcher has worked in nursing and midwifery undergraduate programs. The researcher has conducted many courses in the field of child health and disease nursing.



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**Kenneth R. Pelletier**

University of California School of Medicine, United States

## **Change Your Genes – Change Your Life: Epigenetics of Longevity**

Biology is no longer destiny. Our DNA doesn't determine our health and disease prospects, as geneticists once believed. According to the new science of epigenetics, the vast majority of our genes are fluid and dynamic—and their expression is shaped by what we think and what we do. Our genetic profile may signal an inherited vulnerability to a disease, but our choices and behaviors determine whether these genes will be switched on or off. Each of us can influence our genes to create optimal health and longevity. Dr. Pelletier will discuss the latest epigenetic research, including progress on the \$ 101 Million X Prize, and share timely media coverage including details of the "Blue Zone" communities around the world and its potential impact on science. He will also cite the cutting-edge technologies that will forever change the landscape of optimal aging and longevity. We encourage you to attend and to engage with Dr. Pelletier in learning how to incorporate these new findings into your own lives.

### **Learning Objectives:**

Differentiate generics vs epigenetics.

Apply practical, evidence-based epigenetic assays in practice.

Determine "personalized nutrition" based on latest data.

### **Biography**

Kenneth R. Pelletier, PhD, MD is a Clinical Professor of Medicine, Department of Medicine; Department of Family and Community Medicine and Department of Psychiatry at the University of California School of Medicine, San Francisco (UCSF). At the UCSF School of Medicine, he is Director of the Corporate Health Improvement Program (CHIP) which is a research program between CHIP and 15 of the Fortune 500 corporations including Apple, Cisco, American Airlines, IBM, Dow, Prudential, Cummins, Ford, NASA, and Pepsico. He also serves as a Vice President with American Specialty Health (ASH).



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**Lilian SitsofeZiga**

Nursing and midwifery training college Odumasekrobo, Ghana

## Transforming Patient Care through Innovative Nursing Practices

In an era where healthcare is rapidly evolving, nursing professionals are at the forefront of implementing innovative practices that enhance patient care and improve health outcomes. This presentation will delve into the transformative role of technology in nursing, focusing on telehealth, and data analytics. We will explore case studies that illustrate the successful integration of these technologies in clinical settings, highlighting their impact on patient engagement, access to care, and overall treatment efficacy. Additionally, we will discuss the importance of interdisciplinary collaboration in fostering a culture of innovation within healthcare teams. Attendees will gain insights into overcoming common barriers to technology adoption in nursing practice and learn strategies to empower nursing professionals with the tools needed to implement these advancements effectively. By embracing these innovations, nurses can enhance their practice, improve patient outcomes, and contribute to a more efficient healthcare system.

### What will the audience take away from your presentation?

1. Understanding of key technological advancements in nursing practice.
2. Insights from real-world case studies demonstrating successful implementation.
3. Strategies for overcoming barriers to technology adoption in healthcare.
4. Knowledge on fostering interdisciplinary collaboration for improved patient care
5. Practical tools to enhance patient engagement and treatment outcomes.

### How will this help the audience in their job?

The knowledge gained from this presentation will equip nursing professionals with practical strategies to incorporate innovative practices into their daily routines. This will not only improve their efficiency but also enhance the quality of care they provide to patients. Furthermore, faculty members can utilize this research to expand their curriculum and teaching methods, ensuring that future nurses are well-prepared for the evolving landscape of healthcare.

## Biography

Lilian SitsofeZiga, Student Nurse Assistant Preventive (Awaiting Certification). I am a recent graduate of Nursing and midwifery training college Odumasekrobo, having completed the Nurse Assistant Preventive program. Throughout my clinical rotations, I gained valuable experience in prenatal and postnatal care, breastfeeding techniques, and newborn care practices. I developed strong skills in patient education, health promotion, and disease prevention. Currently awaiting certification, I am eager to apply my knowledge and skills in the health care sector.



**Isala Maud**  
UZCTRC, Zimbabwe

## **Challenges for women living with HIV, Mental health, poverty and trauma- A community perspective**

### **Introduction and Background:**

In Zimbabwe, women contribute the larger number of people living with HIV as compared to their counterparts. From the moment one is diagnosed with HIV in community settings it comes with a lot of challenges as soon as one discloses to family members and the challenges range from stigma and discrimination in the home setting and the community at large, giving rise to an abnormal mental state. Poverty also comes in not because of inability to work but once one discloses their status or it is known most employers are not willing to employ you. Poverty leads to mental stress and trauma as some women are the breadwinners in their families. While it is a noble idea to have an Opportunistic Infections centre at local clinic where HIV positive people can collect their anti-retroviral medicines this also poses challenges to the HIV positive woman who is supposed to maintain her status without disclosing to anyone but the whole community can see her at the clinic, lining up for her medications and written positive all over the face as you cannot be collecting contraception pills at the Opportunistic Infections clinic.

### **Methods**

Group discussions were held with 2 groups of 30 women in support groups to hear their views on challenges that they are facing as HIV positive women in the society. One on one meetings were also held with some of the women who requested privacy. People also expressed their views on the support group WhatsApp groups.

45 out of the 60 women said they were facing a lot of challenges in the community because of their status leaving them vulnerable and experiencing mental health issues.

### **Conclusion and Recommendations**

There is so much that communities, healthcare providers and employers need to do in order to support with the challenges being faced by women who are HIV positive to lessen the burden of mental health issues, trauma and other related problems. Employers need to employ these women to enable them to look after their families. Healthcare providers need to maintain the privacy of HIV positive women to enable them to maintain adherence to ART.

### **What will the audience take away from your presentation?**

The audience must share ideas from the abstract and use the recommendations for their specific communities.

Comparison should be made on how this practice differs from different communities.



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Ensure there is advocacy around empowerment of women and young adolescents living with HIV.

Community advocates should use the information in their advocacy campaigns for empowerment and stigma reduction.

## **Biography**

Maud Isala is a former teacher and now a community paralegal who is a member of the Community Advisory Board (CAB) for the Univimbabwe Clinical Trails Research Centre (UZCTRC), in Harare, Zimbabwe. The CTU is a collaborative program between the University of Zimbabwe and the University of California San Francisco and is officially known as the University of Zimbabwe Clinical Trials Research Centre (UZ-CTRC)



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**Eman Salman Taie**  
Helwan University, Egypt

## Metaverse Journey in Healthcare

A novel digital society is taking shape in light of the advent of the fourth industrial revolution. In the new digital civilization, the metaverse represents a transformative digital environment that integrates various technologies, including virtual reality (VR), augmented reality (AR), and mixed reality (MR), to enhance healthcare delivery, education, and patient engagement. This immersive ecosystem allows for innovative interactions among patients, healthcare providers, and medical professionals, ultimately reshaping the landscape of healthcare services. Metaverse is currently a hot topic, and there have been many articles and talks about its potential to revolutionize gaming, entertainment, socializing, work, and commerce. Little is said, however, about how it might affect healthcare - but this is another area where its impact could be transformative. Metaverse service applications were born and are increasingly becoming an important and promising area of the healthcare industry. It is therefore important for the healthcare industry to be aware of the values and commitment to metaverse services as an essential aspect of strategic planning for the long-term vision of the healthcare industry. A simplified view describes it as a digital universe. Oxford dictionary defines metaverse as a “virtual reality space in which users can interact with computer-generated environments and with other users”. Metaverse has great potential to revolutionize healthcare. Healthcare providers can also explore alternative virtual workspaces, access healthcare professionals from anywhere and anytime, create immersive experiences for patients and staff, etc. Metaverse can also make a difference in educating patients about healthcare and motivating them towards better health.

Keywords: Application of Metaverse, Benefits of Metaverse, Virtual hospital.

## Biography

Professor Eman Salman Mohamed Salman Taie is professor of Nursing Administration - Faculty of Nursing- Helwan University- Cairo- Egypt. She is the Head of Nursing Administration Department in Faculty of Nursing – Helwan University. She is Secretary of the scientific committee to examine the scientific production to fill the positions of professors and assistant professor(Nursing Administration, Nursing Education & Psychiatric Health nursing) at Supreme Council of Universities at Egypt. She has more than 150 international published researches and four international published books. She is Editorial board member and Reviewer at many of the international journals. She won the scientific excellence award in the medical field at the level of Helwan University. She is International Certified Trainer and Human Resource Development Consultant at International Board for Certified Trainer (IBCT).



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**Joyce Simard**

University of Minnesota, Australia

## **Namaste Care: Helps People with Advanced Dementia Live Not Just Exist**

Namaste Care is a small group program for residents in a nursing home or assisted living who can no longer participate in traditional activities. Often residents were kept clean, fed, changed and placed in front of a television. Residents were existing not living. The Namaste Care program provides quality of life for residents especially those with advanced dementia. Namaste care can be offered as a small group program or can be brought to wherever the person is living. Two principles of The room or space where Namaste Care is offered as a small group is as free from distractions as possible. Residents are taken there after breakfast for the morning session. They are greeted individually and assessed for pain. A soft blanket is tucked around them and they are offered a beverage. Morning activities include gentle washing of the face and moisturizing of the face, hands, arms and legs. Their hair may be combed or scalps massaged. All of these activities are offered with a slow loving touch approach with the carer softly talking to them. They leave the room for lunch and return for the afternoon activities that may include bringing seasonal items to them, feet soaking, nail care and fun activities such as blowing bubbles. Beverages are offered on a continuous basis for both the morning and afternoon sessions. Namaste Care can be brought to the persons bedside and offered by trained staff or volunteers. Supplies are not expensive and no additional staff has to be hired.

### **Biography**

Joyce Simard MSW is an Adjunct Associate Professor School of Nursing, University of Western Sydney Australia. She is a private geriatric consultant residing in Florida (USA). She has been involved in long-term care for over 40 years. Professor Simard has written numerous articles and chapters in healthcare books "The Magic Tape Recorder", and "The End-of-Life Namaste Care Program for People with Dementia" now in its third edition. She has been involved with grants studying the outcomes of Namaste Care internationally. with the School of Nursing, University of Western Sydney, Australia, St. Christopher's hospice (UK), the University of Worcester (UK) and Lancaster University (UK). Ms. Simard is a popular speaker for organizations all over the world.



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KEYNOTE FORUM II-DAY 01



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**Petrova Nataliya**

Saint Petersburg State I. P. Pavlov Medical University, Russian Federation

## Reproductive settings of the population

Demographic problems in general and the low birth rate in particular are among the most acute problems in many countries including Russia. Population's decline can have serious socio-economic consequences. The solution of demographic problems requires an integrated approach and it is based (among other things) on the study of the reproductive attitudes of various groups of the population, assessing their opinion on the effectiveness of demographic policy. An anonymous survey was conducted by a specially designed online questionnaire using a Google form. 352 citizens of the Russian Federation were interviewed. The sample was random. The study of the reproductive attitudes of citizens showed that the presence of children in the family was considered absolutely necessary by only 68.4% of the respondents. 45.3% would like to have two children; 30.6% - three or more; 17.5% - one child; 6.6% of respondents do not want to have them at all. The main motives and prerequisites for the birth of a child were: the joy of motherhood; the importance of material support from the state; procreation. Respondents considered that the main obstacles to having a child were the lack of confidence in a stable material income, the unstable situation in the country, the fear of losing a job or destroying a career, the lack of confidence in getting a decent education for all children and further employment, poor housing conditions, and the lack of a permanent partner. The share of those supporting the idea of child-free was 24.9%; 41.8% accept same-sex marriages. The main conditions for creating a happy family are mutual respect and love (97.4%), common interests (65.4%), material security (51.1%).

### What will the audience take away from your presentation?

This information will be useful for managers to develop measures for active demographic policy, as well as for medical workers when conducting targeted health education work.

### Biography

I was graduated from 1-st Leningrad medical institute in 1981. Postgraduate study - 1 Leningrad medical institute (the department of Public Health). Then I worked at the same department as assistant professor and from 2001 – as professor. Phd in 2000, professor – in 2001. Since 2011 – the chair of nursing department of 1 St. Petersburg State Medical University I.P.Pavlov. I'm the author of more than 600 publications

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**Marileise Roberta Antoneli Fonseca**

Universidade Estadual de Campinas (UNICAMP), Brazil

## **Palliative Care Education in Brazil: Identifying Deficiencies and Prospects for Improvement**

**Introduction:** Despite the still precarious and unequal approach to the process of death and dying and the ways of offering care at this stage of life in medical courses, many resident physicians face the challenge of communicating difficult news and alleviating human suffering in all its aspects at the beginning of their careers. **Objective:** The study analyzed the perception of resident physicians regarding professional training in palliative care, in a public, tertiary-level university hospital in the interior of the state of São Paulo, Brazil. **Methodology:** Data were collected through semi-structured interviews, between April and August 2019, with 18 resident physicians who were in their first year of residency in internal medicine and general surgery and were analyzed using the content analysis method. The research was approved by CAEE number 99792018.2.0000.5404. **Results:** The reports of resident physicians converged into three thematic categories: the various aspects of the academic training process of resident physicians; knowledge and conceptions about palliative care among resident physicians in relation to care practices, work organization, and hospital structure. The statements of resident physicians express their anxieties and demands as individuals, physicians, and students. They mention the difficulty in communicating with patients and family members, especially when it comes to delivering difficult news, as one of the obstacles to good professional practice. They also identified the limits and gaps in the academic training received and the need for greater focus on teaching the premises of palliative care during undergraduate and specialization courses in medicine. According to the statements, the working conditions, as well as the dynamics and forms of organization of the hospital also reflect on the care of patients with serious diseases with no possibility of cure. **Conclusion:** Although the schedule of the resident physicians who participated in this study is quite exhaustive, with theoretical disciplines focused on the various medical subspecialties, it still does not prioritize disciplines and practices focused on teaching palliative care. It is necessary to develop practical theoretical teaching that incorporates the principles and foundations of palliative care, with discussion of technical situations experienced on a daily basis and the expansion of the multidisciplinary team.

What will the audience take away from presentation

1. Incorporation of Palliative Care into the Formal Curriculum
2. Interdisciplinary Approach in Classrooms
3. Practical Simulations and Role-Playing
4. Discussion of Real Clinical Cases
5. Continuing Education for Teachers with Courses and Classes
6. Involvement of Professionals in the Palliative Care Area during Classes



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7. Promotion of Practical Internships and Field Experience

8. Continuous Assessment and Feedback

## **Biography:**

2022: Specialist in Palliative Care from the National Academy of Palliative Care and the Brazilian Nursing Association.

2018 – 2022: Doctorate in Health, Interdisciplinarity and Rehabilitation. State University of Campinas - UNICAMP.

2015 - present: Nurse in the Palliative Care Service of the Hospital de Clínicas da Unicamp, Campinas/SP.

2012 – 2014: Master's degree in Health Sciences. State University of Campinas - UNICAMP.

2002 - 2005: Bachelor's degree in Nursing. Pontifical Catholic University of Campinas - PUC Campinas.



**Juliet UgbedeojoShaibu**

Global Health Policy Task Force, WFPHA, Switzerland

## **Strengthening Global Pandemic Preparedness: Insights from WHO and the Intergovernmental Negotiating Body**

### Introduction

As the world tackles the challenges posed by pandemics, the role of sustainable and efficient preparedness mechanisms cannot be overstated. Countries dealing with existing humanitarian crises or emergencies are exposed to and disproportionately affected by pandemics, hence, this study aims to present the efforts and insights garnered from the World Health Organization (WHO) and the Intergovernmental Negotiating Body for Pandemic Preparedness.

### Methodology

Our methodology includes the formation of a Global Health Policy Taskforce which encompassed a comprehensive review of key guideline documents, reports, and resolutions from the WHO Intergovernmental Negotiating Body. Also, a thematic qualitative analysis of the negotiations and policy dialogues surrounding pandemic preparedness and treaty development was conducted.

### Results

Based on the thematic analysis conducted on the treaty document, equity and access (40%), intellectual property and technology transfer (30%), transparency and information sharing (25%), one health approach (20%), prevention and preparedness (30%), health workforce (20%), stakeholder engagement (35%), financing and resources (25%), regulatory and policy frameworks (15%), trade and global supply chains (10%) were the results obtained and the importance of balancing national interests with global solidarity was observed to be vital.

### Conclusion

Our findings emphasized the importance of collaborative efforts and diplomatic dialogue in strengthening global pandemic preparedness. By leveraging insights from the WHO and the Intergovernmental Negotiating Body, we can enhance global cooperation, collaboration, leadership, equitable access to healthcare resources, and government accountability at local and international levels, and mitigate the impacts of future pandemics.

**Keywords:** Pandemic, Preparedness, WHO, INB



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## Biography

Juliet Ugbedeojoshaibu, MPH, MAIPH, FRSPH, is an accomplished public health professional with over seven years of experience at the intersection of maternal and child health and environmental health. She has played a pivotal role in global health responses, including efforts against COVID-19, and brings extensive expertise in project and program management, humanitarian aid, and community-based interventions. Previously, Juliet served as the Program Lead at the Centre for Health and Substance Abuse Prevention, where she spearheaded prevention awareness and sensitization campaigns. Currently, she is a consulting member of the Global Health Policy Taskforce at the World Federation of Public Health Associations, a Research Consultant with the Nigerian Women Trust Fund, and a Program Associate at Technical Advice Connect. Additionally, she volunteers as an African Regional Leader for the International Working Group for Health Systems Strengthening. With a career spanning academia, research, and international public health policy, Juliet is committed to advancing global health practices and empowering vulnerable populations.





**Anum Fatima**

Chiang Mai University, Thailand

### **Effect of the self-efficacy enhancement program on intentions to perform preconception health behaviors of pakistani young adult women**

**Background:** Despite the recognized significance of preconception health behaviors (PCHBs) in optimizing maternal and child health outcomes, there is a lack of knowledge and self-efficacy, as well as evidence of poor intentions related to the practice of PCHBs among young adult women.

**Purpose:** This research aimed to examine the effect of a self-efficacy enhancement program on intentions to perform preconception health behaviors of Pakistani young adult women.

**Methods:** The study design was a quasi-experimental pre-posttest with a control group, and participants were 142 young adult women aged 20 to 24 years enrolled in bachelor's degrees at female colleges in Wah Cantt City, Pakistan. The researcher selected participants from two colleges according to the inclusion criteria. One college was randomly allocated as an experimental group and another as a control group using simple random sampling with 71 participants per group. The control group received only standard education, while the experimental group received the self-efficacy enhancement program through educational sessions spread over four weeks in addition to standard education. The research intervention instrument consisted of the Self-efficacy Enhancement Program. The data collection instrument included a demographic data sheet and the intention to perform the preconception health behaviors scale. Descriptive statistics, chi-square tests, paired t-tests, and one-way ANCOVA were used to analyze the data.

**Results:** The findings revealed that:

1. After receiving the self-efficacy enhancement program, scores for intentions to perform preconception health behaviors among young adult women were statistically significantly higher than before receiving the program ( $p < .001$ ).
2. Young adult women receiving the self-efficacy enhancement program had statistically significantly higher scores for intentions to perform preconception health behaviors than those receiving standard education ( $p < .001$ ).

**Conclusions/Implications for Practice:** The findings of this research indicate that healthcare providers can use the self-efficacy enhancement program to improve the intentions of young adult women to perform preconception health behaviors.

**Keywords:** Intentions, Preconception health, Self-efficacy, Women, Young adult



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**Ayan Chatterjee**

Medhavi Skills University, India

## Importance of Heart Rate as a Biomarker

Heart rate is a measurement of how many times your heart beats in one minute. Resting heart rate can be an important measure of the health of heart muscle. Heart rate is the principal indicator used in field survey / study, now it denoted as a biomarker. Biomarker not only serve as traditional predictors of prognosis, it can also help to identify high-risk; therefore, the use of heart rate (HR) as a biomarker in assessment of cardio vascular disease and cardio vascular fitness status also. The present workshop will elaborate the calculation process of different cardiac strain indices and how these cardiac strain indices may alter the workload of an individual. Further elaboration along with the calculation process will be made during the presentation.

Keywords: heart rate, cardiac strain indices, workload, biomarker.

## Biography:

Dr. Ayan Chatterjee is currently working as Associate Professor and Associate Dean of School of Health Science and Technology, Medhavi Skills University, Sikkim, India. Dr. Ayan completed his PhD degree from University of Calcutta. He also has a Six-month Diploma in Social Work and Community Service from School of Social Work and Community Service, National Council of Education, Bengal. Dr. Ayan successfully completed a Certificate course in Science Communication and Media Practice conducted by Indian Science News Association, Kolkata; the course is supported by DST, Government of India, and Vigyan Prasar. He authored 104 full length research papers; among them 44 as first author in Peer Reviewed Journals, Conference Proceedings and as Book Chapters and also presented papers in International and National Conferences held at IIT Bombay, IIT Guwahati, ISI Kolkata, ISI Giridih, Jadavpur University, University of Calcutta, Vidyasagar University, Indian Institute of Social Welfare and Business Management Kolkata, NIT Jalandhar, Aligarh Muslim University, University of North Bengal, College of Engineering Trivandrum, Diamond Harbour Womens' University, University of Gour Banga. Dr. Ayan also authored of two Books. And received Springer Sponsored Young Researcher Award for presentation of Papers at the 16th International Conference on Humanizing Work and Work Environment (HWWWE 2018), Trivandrum, India. Dr. Ayan also received Young Scientist Best Oral Presentation award for the presentation of paper at the second international conference on Environmental, Agricultural, Chemical and Biological Sciences (ICEACBS 2021). Dr. Ayan supervised sixteen dissertations for Post Graduate students and fifteen dissertations for Undergraduate students. He also has teaching experience in Human Physiology, Biochemistry and allied subjects at Undergraduate, Postgraduate and Diploma level for 12 years 06 months. He also served as Member of Editorial Board of three UGC CARE listed journals and Reviewer of three Scopus indexed and three UGC CARE listed journals. Dr. Ayan also served as Editor of Five Books of different publication house (Elsevier, Springer Nature, IGI Global USA). Recently Dr. Ayan appointed as an International Adviser in Research Publication for the organization of 1PHYSED.PH Training and Development Services, Philippines.



**David John Wortley**  
UK

## The Impact of AI and Immersive Technologies on Nursing Futures

The integration of artificial intelligence (AI) and immersive technologies, such as virtual reality (VR) and augmented reality (AR), is poised to significantly transform the future of nursing. These emerging technologies offer numerous opportunities to improve nursing education, enhance patient care, and streamline healthcare operations. In nursing education, immersive technologies like VR and AR provide students with interactive and realistic simulations of clinical scenarios. This enables hands-on practice in a safe and controlled environment, allowing students to develop critical thinking and decision-making skills without risking patient safety. Additionally, AI-powered adaptive learning platforms can tailor educational content to individual students' needs, optimizing the learning process and fostering the development of competent nursing professionals. In clinical practice, AI algorithms can assist nurses in diagnosing conditions, predicting patient outcomes, and personalizing treatment plans. These tools enable more precise and efficient care delivery, improving patient outcomes and reducing the risk of errors. AI can also aid in monitoring patients' vital signs and alerting nurses to potential issues in real time, ensuring timely interventions. Immersive technologies enhance patient engagement and care by allowing nurses to provide remote consultations and follow-ups, as well as interactive patient education. This can lead to improved patient understanding and adherence to treatment plans. Furthermore, VR and AR can offer therapeutic benefits for patients, such as pain management and mental health support. Overall, AI and immersive technologies hold great promise for the future of nursing, offering innovative solutions to enhance education, improve patient care, and optimize healthcare operations. As these technologies continue to evolve, it is crucial for the nursing profession to adapt and embrace these advancements to deliver high-quality care in an increasingly digital world.

### What will the audience take away from your presentation?

How AI is transforming nursing education

The impact of AI on nursing careers

How AI and Immersive technologies are being used in daily practice

AI and digital therapeutics

The impact on roles and responsibilities of nursing professionals.

### Biography

David Wortley is CEO & Founder of 360in360 Immersive Experiences and a VP of the International Society of Digital Medicine (ISDM). He is a Fellow of the Royal Society of Arts and Commerce and a global thought leader and innovator on enabling technologies for health, education and the environment. He is on the editorial board of the Digital Medicine Journal. He is an Associate Member of the Royal Society of Medicine and a Visiting Fellow at the Faculty of Health and Social Sciences at Bournemouth University.



### Humna Baig

Al Rehaab, Pakistan

## Assessment of knowledge of Community Pharmacists regarding Beers Criteria and potentially inappropriate medications in Pakistan

Older people are a heterogeneous group of patients, often with multiple comorbidities often requiring numerous medications, leading to an increased risk of adverse drug reactions (ADR) and drug interactions. By reducing the risk of adverse effects in older people, avoiding PIMs is an essential aspect of optimizing health outcomes and lowering healthcare costs. The main objective of this study was to assess the knowledge of community pharmacists regarding Beers Criteria and Potentially Inappropriate Medication (PIMs) among older adults in Pakistan. A descriptive cross sectional study design was used. Convenience sampling technique was used to collect the data from 388 respondents which were calculated by Raosoft at 5% confidence interval and 5% margin of error. Simple random sampling was then employed for the selection of 3010 prescriptions from pharmacy record. Data was analyzed using SPSS vs. 21. Only 21.6% (n=84) of the community pharmacists were aware of Beers Criteria whereas 7.7% (n=30) were familiar of latest update Beers Criteria. Majority of the participants scored average based on their answers to the 10 clinical vignettes. Only 7% of the community pharmacist regularly used Beer Criteria in Practice. However, most pharmacists reported good practices when dealing with older customers in terms of asking relevant questions, considering age, referring to other resources, and regularly updating their knowledge through continuous professional development. The study found no significant difference ( $P \geq 0.05$ ) in the knowledge of community pharmacists regarding Beers Criteria concerning any demographic characteristics. According to STOPP/START criteria, the most frequently used class of drugs among elderly was CNS & psychotropic drugs. PIMs mainly involved overuse and/or misuse of benzodiazepines. PPOs were mainly related to underuse of alpha blockers, SSRI and statins. The study revealed low awareness of Beers Criteria among community pharmacists in Pakistan. However, those who were aware of Beers Criteria demonstrated improved knowledge concerning PIMs in older adults. Therefore, there is a need to enhance the application and awareness of Beers Criteria among community pharmacists. Additionally, using the STOPP/START criteria, the study highlighted significant inappropriate prescribing events (both PIMs and PPOs) in older adults.

Key words: Beers Criteria, Potentially Inappropriate Medications, Community Pharmacist, STOPP/START Criteria

### Biography

Dr. Humna Baig is a highly accomplished Registered Pharmacist, Researcher, and Professional Trainer with a diverse skill set and international experience. She serves as a Board of Advisor at Voice for Rights International and is actively engaged in global advocacy, having represented Pakistan as a delegate at the United Nations Headquarters in New York during the Human Rights Summit. Additionally, she has participated in the Youth Summit in Dubai, contributing to discussions on leadership, diplomacy, and human rights. Dr. Humna Baig is an Editorial Board Member for the TMR (Traditional Herbal Medicine) Journal in New Zealand and Reviewer of Exploratory research in clinical and social pharmacy, where she oversees the publication of significant research in traditional and herbal medicine. She is also a member of the IVPN Club and the Women Health Professionals Resource Hub (WHPRH), through which she collaborates with professionals worldwide. Her expertise spans Medication Therapy Management, Prescription Monitoring, Counseling, and the Treatment of Minor Ailments. She has completed advanced training in Emotional Intelligence, Entrepreneurship, Leadership, and Diplomacy, equipping her with the knowledge to mentor and train others in these areas. She continues to make significant contributions to the healthcare and human rights sectors, holding various certifications and accolades in her field.



**Mohammad Hossein Delshad**

TorbatHeydariyeh University of Medical Sciences, Iran, Islamic Republic of

### **Computation of Pabon Lasso Performance with Complementary Hospital Performance Indicators in Institutions of TorbatHeydariyeh University of Medical Sciences**

**Background:** The evaluation of hospitals' performance is essential for rational healthcare management; regular evaluations by policymakers will help to optimize a distribution of the resources and improve the quality of hospital care. **Objective:** aim to assess comprehensively the performance of hospitalized hospitals located at the TorbatHeydariyeh University of Medical Sciences using Pabon Lasso model and Data Envelopment Analysis. **Methods:** We performed a cross sectional study to evaluate hospitals under the coverage of TorbatHeydariyeh University of Medical Sciences. Hospital resources (human resources, beds etc.) and outcomes (patient discharges, surgeries etc.) secondary data were analyzed from year 2016 to year 2023. An initial performance assessment was made using the Pabón Lasso model, and Data Envelopment Analysis (DEA) is used to find technical, scale and managerial efficiency. Linear regression and comparative analysis were used; descriptive statistics were employed. Simulations were performed with the DEAP2 software. **Results:** The result found that both hospitals proved to be suboptimally inefficient. We calculated the average technical efficiency to be 0.66 and the average scale efficiency to be 0.53. Despite correct technical operations, the hospitals which were evaluated were inefficient. Operating at undesirable scales, they had an excess of operating rooms. In addition, bed occupancy rate and length of stay also were below optimal levels. **Conclusion:** The results reveal that TorbatHeydariyeh University hospitals have large potential for improving the efficiency. It requires collaborative efforts by policymakers as well as hospital managers to identify and resolve the factors that impede best possible performance.



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**Mary Anbarasi Johnson**  
College of Nursing, India

## **Pain assessment and management -Is it undermined in pediatric population: Need for a pediatric pain team in the Pediatric Hospitals**

Pain assessment and management in the pediatric population is often undermined due to various factors, including difficulties in communication, misconceptions about pain perception in children, and a lack of standardized pain management protocols. Establishing a dedicated pediatric pain team in hospitals can address these issues and improve the quality of care. Here's an overview: These challenges can lead to inadequate pain management, impacting children's physical and psychological well-being. Establishing a dedicated pediatric pain team in hospitals can address these issues effectively. Such a team brings specialized expertise and comprehensive pain management, utilizing multimodal approaches tailored to each child's needs. By implementing standardized assessment tools, providing ongoing education and training for medical staff, and offering psychosocial support, a pediatric pain team can significantly enhance pain management practices. Additionally, conducting research and quality improvement initiatives ensures continuous advancement in the field. Overall, a pediatric pain team is crucial for ensuring children receive appropriate and effective pain management

### **Biography**

Mary Anbarasi Johnson working as a professor and Head in pediatric nursing department ,CMC Vellore. I worked as Clinical Nurse Specialist in PICU for a year and as Assist Professor in USA for two years. US faculty & friends went out of their ways to help me. I also worked as Asst. Director of Nursing, in Saudi Arabia Defence Sector, ( KamisMushayt Armed Forces Hospitals for the Southern Saudi Arabia Region) ,I have learnt much about military from the excellent and amicable team there . I have served in CMC Vellore as Deputy Nursing Superintendent for staff training and quality assurance, NABH Co-ordination, HICC -coordination etc. I have been CMC Institutional research board member for more than 4 years. CMC gave me opportunity to be secretary for the HICC (Hospital Infection Control Committee )secretary for a term. CMC gave me opportunity to be Master trainer for International Projects like GFATM ,IMNCI at national level as well national projects like ICMR Infection control ,Child Sexual Abuse Protection ,OSCE by Dr.MGR Medical university as well Diabetic of Educators programme etc. It also gave me opportunity to be examiner or paper setter for various levels of nursing students for 6 universities and inspector for Dr.MGR Medical University .I am very much interested in reviewing articles. I have published in 70 national , international journals and presented in around 30 national and international conferences. I have also contributed for 5 book chapters and published a book . I have completed "Lean Six Sigma -Academy Europe ,green ,yellow and black belt in Saudi. NGO "INSO" had awarded me as well ,I am thankful to them as well thankful to SAS society for giving me the fellow membership with them(FSASS) .I am given opportunity to be the chief editor for a book on "Trends in Engineering, Management and Arts" and editor for " Management book". I recently received "Life Achievement Award " by the SAHEI ,The Best Faculty award and Best Administrative Officer Award was also bestowed this year by Coimbatore academy, India. My alma mater helped me to get "Presidents Gold Medal for standing first in the university for Bsc ( N) programme. CMC research guidance has given me opportunity to be speaker at many international conferences as well to be advisory member or editorial member or executive editor or reviewer in more than 100 international journals and Chief Editor for two Indexed International Journal. I am also conferred with Rifacimento International –" Icon of the Year Award "very recently as well Asian Medical Professionals Excellence Award".



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**Vanessa Williams Harvey**

HippoCLIN, United States

## **STOP, DROP, and Roll!: Is Electronic Health Record Training The Forgotten Skill?**

Although clinical skills evaluation is the gold standard for assessing competence, there is one vital skill that is oftentimes minimized, discounted, or performed using outdated tools. The only skill that is used to validate all other skills nurses perform each day is electronic health record (EHR) documentation. The goal of EHR's is to ensure a patient will have what they need when they need it. Ninety-six percent of healthcare organizations use an EHR system. Research supports the idea that EHR competence and experience has the potential to impact patient outcomes, quality measures, risks, reimbursements, and satisfaction scores. Data shows nurses spend 40-50% of their workday using an EHR, however, only 20% of nursing students reported having EHR training while in school. Since the nursing field is leading this charge, the goal should be for 100% of nursing students to have access to an EHR during training. Focused EHR training helps prepare students for professional success and propels nursing curriculum and training into the 21st century. We can no longer watch as advancing technology leaves students and instructors vulnerable and unprepared. Student nurses who gain experience and competence are empowered to develop into long-term and well-adjusted new nurses directly impacting retention rates. Integrating EHR training into the current curriculum and setting the standard for how students are trained to document patient care at the school level helps alleviate stress from healthcare organizations, students, and the patients they serve. This presentation will share how the lack of EHR documentation skills has the potential to delay, detour, and destroy nursing professional advancements unless we are responsible and proactive with our profession and with the future of nursing. The information presented will suggest the best strategies for the integration of EHR training into nursing education training curriculum.

### **What will the audience take away from your presentation?**

Participants will be able to demonstrate an understanding of how documentation tools in nursing have evolved over the years.

Participants will understand and describe current data and research related to nursing student EHR access and training.

Participants will be able to understand and describe the importance of early access and ongoing EHR training, experience, and competence for all nursing professionals.



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## Biography

Vanessa K. Williams-Harvey is the Founder of HippoCLIN and a Clinical Informatics Manager. She spearheads the team at DUES24, which recently launched HippoCLIN—a groundbreaking Electronic Health Record (EHR) training app offering healthcare students 24/7 access to a simulated EHR environment. This innovative platform fills a crucial gap in clinical education, enhancing the training experience for future healthcare professionals. Vanessa is passionate about leveraging technology to empower students and healthcare providers alike, ensuring they are equipped with the tools and knowledge needed to excel in today's rapidly evolving digital healthcare landscape. With over 30 years of nursing experience—16 of those years spent at the bedside and 15 years in informatics—Vanessa has a deep understanding of patient care and the systems that support it. In her current role as Clinical Informatics Manager, she works closely with analysts to develop EHR systems that meet the needs of both clinicians and patients, improving overall care delivery. The challenges brought on by the COVID-19 pandemic further solidified her commitment to developing HippoCLIN, launching the app in 2023 to ensure healthcare students can train with the latest digital tools. Beyond her professional endeavors, Vanessa is deeply committed to charitable work. She is the founder of the annual Derby Alzheimer's Luncheon, advocating for Alzheimer's awareness, a cause close to her heart following her personal experience detailed in her 2017 book, "I Remember". Vanessa's passion for service extends beyond healthcare—she is a veteran, having served three years in the US Army, where she developed the leadership skills and discipline that continue to shape her professional life today. Vanessa holds a deep belief in the power of self-awareness and professional growth, guided by her core message: Do Better, Understand Better, Expect Better, Serve Best! technological advancements in clinical informatics.





**Nonye Tochi Aghanya**  
United States

## Communication In Healthcare-Why Digital Innovation Is Not Enough

In the twilight of the twenty-first century, as singularity draws near, we have witnessed the rise of digitization and digitalization in the healthcare sector. However, the recent global pandemic and ensuing social distancing, coupled with fear of the virus resulted in an increased utilization of the virtual healthcare system. A type of digital innovation, it has shown to be a much-needed manner of care delivery in the pandemic era and from 11% in 2019 to 76% in 2020, the use of virtual healthcare technology has increasingly surged and continues to surge with each ensuing year till date. The expanded use of audio, video, and other electronic communications to allow patients to connect with their doctors has offered much-needed relief from the stress of pandemic care demands on healthcare practitioners with a wider reach for digital health innovations including the use of wearable devices, mobile health apps, health information systems etc. However, while these technological advancements are impressive, they are insufficient to address the unique exploratory holistic approach to care delivery that is required to build and maintain fruitful clinician-patient relationships. Interactions via the use of digital devices lack the transdisciplinary approach which explore the application of such disciplines as psychology and the observation of patient behavioral traits, cognitive biases, and the philosophy of language and its attempt to assist the patient to achieve healthy mental and physical balance. Patient's distinct personalities affect their outlook and mental status. Tailoring an individual care approach is a necessity for optimal care delivery and complete reliance on digital devices may limit the practitioner's chance of achieving the full scope of engagement for optimal care delivery. Focusing on patients' and clinicians' relationships, this presentation seeks to avail a systemic use of effective communication to complement digital inventions and innovations in the healthcare system for healing. Presenting material is derived from the presenter's clinical practice experiences in diverse healthcare settings for over 30 years. This also includes her review of studies on human psychological traits, the analysis of influence of such traits on patient behaviors and applying effective communication styles to improve clinician-patient interactions and trust development in healthcare settings.

**Keywords:** Patient personality traits, Communication, Digital innovation, Virtual healthcare, Trust development

### Biography

Nonye Tochi Aghanya obtained a Master of Science degree as a Family Nurse Practitioner from Pace University, New York and has worked in various outpatient/inpatient/retail clinic and home care settings. She co-owned a private practice in New Jersey for some years before joining the retail clinic healthcare setting as a Family Nurse Practitioner, a position she held for over 17 years, she currently works in the home care health setting. She's had contact with patients of diverse groups in various healthcare settings for the past 30 years and has published many books such as "Tips for Effective Communication: A vital tool for Trust Development in Healthcare" and "Principles for Overcoming Communication Anxiety and Improving Trust". Her most recent publication is the book THINK, COMMUNICATE & HEAL". Her book and course contents are based on collaborative efforts with psychologists, past and current health research reports and on her numerous interactions with diverse groups of individuals in the healthcare settings for the past 30 years. She has written articles for various journals and health publications over the years and remains quite active on social media. A member of the Virginia Council of Nurse Practitioners and Certification with American Nurses Credentialing Center, Nonye is married and has 4 daughters.



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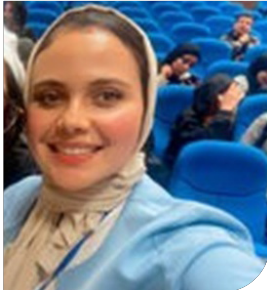
**Yousef Ahmed Al shaabi**  
Sana, a University, Yemen

## **Advance Nursing Roles in Disaster and Emergency Management**

In light of the increase in natural disasters and the impact of climate change, as well as man-made disasters such as conflicts, wars, environmental destruction, and the high rate of global warming. The rate of disasters of all kinds has increased. As we note, the conflict between Russia and Ukraine, and the wars in the Middle East, Africa, and Asia. And other countries, all of this leaves the world facing many nuclear threats and natural disasters, according to the Global Disaster Observatory. There are global frightening indicators that make interest in saving people from disasters a top global priority. The health sector bears a large burden for confronting dangers and disasters, and nursing is the largest part of the health sector with all its components. Therefore, it has a large and advanced role in the care and management of disasters, and from here comes the importance of this paper, which will highlight a large and advanced role for the nursing profession in confronting disasters at all levels. Mitigation, preparedness, response, and recovery, leadership, research, and innovations. Therefore, nursing must keep pace with appropriate future progress to be able to play a real and major role in contributing to rescue during disasters at all levels. We will discuss some important policies that are not in effect in many countries and that must be implemented in the world so that nursing can play an effective role during disasters.

### **Biography:**

Doctorate in emergency and disaster management. Sanaa University. Assistant professor at the College of Nursing, Sana'a University. Coordinator of the Master's in Emergency and Disaster Management at the Yemeni Council for Medical and Health Specializations. National expert in emergency and disaster management and hospital resilience with the World Health Organization in Yemen.



**El moubchirichaimaa**

Hassan First University of Settat, Morocco

## **Cultural Adaptation and Validation of the Psychological Sense of School Membership Scale Among Moroccan Secondary School Students**

School belonging plays a fundamental role in students' identity development, academic motivation, and mental well-being. A supportive school environment enhances student engagement, particularly during secondary school years. This study aims to culturally adapt and validate the Psychological Sense of School Membership Scale (PSSM) for use among Moroccan secondary school students by assessing its psychometric properties, reliability, and factor structure. Additionally, it examines the scale's associations with school-related outcomes and substance use. A cross-sectional study was conducted using a questionnaire that measured PSSM along with sociodemographic factors, family, peer, and sibling relationships, school results, and substance use. A total of 180 students participated in the study following a pilot test. Confirmatory Factor Analysis (CFA) was used to assess construct validity, while reliability was measured using Cronbach's alpha. The results indicated that the adapted PSSM demonstrated good internal consistency and reproducibility, with a root-mean-square error of approximation (RMSEA) of 0.062 and a chi-square value of 603.08 ( $p < 0.001$ ). Authoritative school discipline had a significant impact on the "rejection" subscale ( $p = 0.001$ ). Active class participation was significantly associated with the "belonging" subscale ( $p = 0.000$ ). Furthermore, maternal relationships significantly influenced both the "belonging" ( $p = 0.01$ ) and "rejection" ( $p = 0.000$ ) subscales. These findings highlight the importance of fostering a supportive school environment to enhance students' sense of belonging, engagement, and overall well-being. The study provides valuable insights for educators and policymakers aiming to improve school experiences and educational outcomes in Moroccan secondary schools.

### **What will the audience take away from your presentation?**

Understanding of the importance of school belonging – How it impacts academic success and mental well-being.

Insights into the validation of the PSSM in Morocco – The psychometric properties and factor structure.

Practical implications for educators and policymakers – Strategies to enhance school belonging and reduce school disengagement.

Association between school belonging and substance use – How student engagement may mitigate risk behaviors.

Importance of authoritative discipline and maternal relationships – Their role in shaping students' sense of belonging and rejection.

### **Biography:**

Chaimaa EL MOUBCHIRI is a PhD candidate at Hassan First University of Settat, Higher Institute of Health Sciences, Laboratory of Health Sciences and Technologies. Her research focuses on adolescent mental health, school belonging, and substance use prevention. She has worked on various projects related to student well-being and educational psychology. She has presented at national and international conferences and published research on youth health and education. Her work contributes to developing evidence-based interventions to enhance school environments and student outcomes in Morocco.

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POSTERS-DAY 02



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**Ashley N. Frederick**

Western Illinois University, United States

## Enhancing a Patient Safety Program Utilizing Innovative Technology

Ensuring patient safety is a key priority in healthcare. It is important to establish a culture of patient safety that promotes collaboration with patients, encourages the reporting and learning from mistakes, and supports healthcare professionals in minimizing errors. This project investigated the use of innovative technology to prevent near misses and adverse events, leading to better patient outcomes. The focus of this project was on how staff members, including nurses, leadership, and frontline workers at a rural hospital can contribute to enhancing an existing patient safety program. The interdisciplinary team's expertise played a crucial role in the success of this project. Research based on evidence-based practices demonstrated the effectiveness of new technologies and their long-term benefits for patient care. While initial data analysis did not reveal statistically significant results in safety culture surveys, feedback from staff and leadership highlighted the successful implementation of the new technology. Moving forward, recommendations include expanding the project to include advocacy reporting, conducting a safety culture reassessment in 2025, and providing ongoing training in root cause analysis. By continuously identifying areas of patient harm, this project aims to enhance the overall safety culture within the organization, ultimately ensuring patient well-being and reducing costs.

### What will the audience take away from your presentation?

Explain the importance of establishing a culture of safety within healthcare organizations

Identify near misses and adverse events

Understand the key role innovative technology and informatics plays in improving patient safety

### Biography

Dr. Ashley Frederick is a Nurse Educator at Western Illinois University. She previously worked at the Illinois Health and Hospital Association as the Clinical Manager, Quality, Safety and Health Policy. Additionally, she has experience as an Ambulatory Informatics Supervisor. As the quality improvement supervisor, she oversaw quality improvement projects and various departments including infection control, utilization review and medical staff services. She has earned certifications including her CPHQ, CPPS, and NE-BC. Ashley has a passion for quality improvement and patient safety.



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**Dylan Salrin**

Children's Hospital Colorado, United States

## **Bridging the Gap: Addressing Equipment Limitations in Pediatric Surgery**

**Purpose:** Pediatric surgery presents unique challenges due to the physiological differences between children and adults, compounded by the fact that most medical guidelines, devices, and materials are designed for the adult population. A prime example of this disparity is the contraindication of adhesive electrocautery grounding pads in patients with Epidermolysis bullosa (EB), a rare genetic condition characterized by fragile skin. In these cases, the recommended alternative for safe electrosurgical grounding is the under-body universal mat. However, the mat is not approved for patients under 50lbs, leaving pediatric clinicians without viable options for infants and smaller children.

**Relevance:** The absence of equipment designed specifically for pediatric patients with rare conditions such as EB presents a critical gap in care. This equipment limitation forces surgical teams to face dilemmas that could potentially harm patients or compromise the effectiveness of the surgery. Nurse leaders in pediatric surgery must advocate for solutions that address these gaps and ensure safer, more inclusive surgical practices.

**Objective:** This presentation aims to explore the current equipment limitations in pediatric surgery and propose actionable steps for healthcare leaders to advocate for innovation in medical device development and approval processes. The focus will be on how interdisciplinary collaboration and clinical advocacy can push for safer, pediatric-appropriate solutions.

### **Methods:**

- Review of existing literature on equipment contraindications in pediatric populations, with emphasis on EB and electrosurgery.
- Examination of current product approvals and limitations for pediatric use, particularly for patients under 50 lbs.
- Interviews with pediatric surgical teams to understand workarounds and their associated risks.
- Exploration of strategies nurse leaders can employ to influence industry and regulatory bodies to develop and approve safer alternatives.

**Results:** Preliminary research highlights an alarming gap in device approval and use for pediatric populations, particularly in rare cases such as EB. Current practices often involve compromises that could negatively impact patient safety. Nurse leaders have the capacity to spearhead change by advocating for clinical trials and pushing for product innovations tailored to pediatric needs.

**Conclusions:** Nurse leaders must take an active role in addressing the equipment disparities faced in pediatric surgery. By advocating for tailored solutions, initiating conversations with manufacturers, and collaborating with regulatory agencies, the pediatric surgery community can help bridge the gap between adult-centric medical devices and the unique needs of pediatric patients.



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## Biography

Dylan Salrin is a highly accomplished perioperative nurse educator, leader, and speaker dedicated to advancing nursing practice and education. With a Master's degree in Nursing Leadership and Administration, Dylan brings extensive experience to his current role at Children's Hospital Colorado, where he mentors perioperative teams in delivering safe, high-quality care to pediatric patients. As a Board-Certified Orthopaedic Nurse (ONC-A), Dylan specializes in orthopedics and has a talent for breaking down complex clinical concepts into actionable, evidence-based practices. Before his current role, Dylan honed his expertise at UHealth (University of Colorado Health), where he worked in various nursing capacities, contributing to the growth of his teams and the improvement of patient care outcomes through total joint replacement-focused research. An engaging speaker, Dylan has presented at domestic and international conferences, sharing his insights on topics such as perioperative clinical practice, shortfalls in the representation of the pediatric population in healthcare, and navigating the transition from bedside nurse to leadership roles. His talks are known for their practicality, humor, and ability to inspire both new and experienced nurses. Dylan is also an author, having written *Wells in the Wild: Colorado's Trails and Tall Peaks*, a children's book that is distributed through hospitals as well as online libraries. He is currently writing a book for nurses transitioning into leadership roles, addressing challenges such as imposter syndrome and the importance of fostering a supportive and inspired clinical practice. Beyond his professional endeavors, Dylan is deeply involved in community initiatives, including his work with the Rocky Mountain Warm Hands Initiative, which converts wildfire mitigation waste into sustainable green energy in the form of firewood to vulnerable households in need during Colorado's cold mountain winters. Known for his leadership, mentorship, and commitment to excellence, Dylan continues to leave a lasting impact on the nursing profession and the communities he serves.



**Hanan Morsy Salim Metwally**  
Zagazig University, Egypt

## **Education Program on Maternity Nurses' Performance Regarding Obstetric Fistula: A Need-Based Action Plan**

**Background:** Obstetric fistula must be eliminated to establish sustainable development by 2030 as it often results in horrific or challenge situations that frequently affect the women. **Aim of the current research** was to evaluate the effect of education program on maternity nurses' performance regarding obstetric fistula. **Subjects and Methods:** Research design: The research methodology was a quasi-experimental one. **Setting:** The study was done at the labor unit of the maternity hospital at Zagazig University Hospitals in Egypt's Sharkia Governorate. **Subjects:** A convenience sample of 50 nurses gave women in labor direct nursing care. **Tools of data collection:** a self-administered form, a knowledge evaluation sheet for maternity nurses, observational checklist for nurses' practice about prevention of obstetric fistula, and a formal Likert scale for attitudes of maternity nurses were the four instruments employed. **Results:** The findings of this research demonstrated that after building competencies for maternity nurses, there was significant change in nurses' knowledge, practice, and attitudes towards avoiding of obstetric fistula during labor at post application of competency performance compared to preprogram ( $p$ -value  $< 0.05$ ). Likewise there was a positive correlation ( $p$ -value  $0.05$ ) between the nurses' knowledge assessments and their performance, attitude, and age scores. A favorable correlation between practice scores of nurses and their age and experience years was also found with statistically significant difference. **Conclusion:** the research hypothesis was supported and compared to before the educational intervention program was implemented, during the stages of labor, it was a very significant statistically improvement in the nurses' Knowledge, practice and attitudes regarding obstetric fistula and its prevention.

### **What will the audience take away from your presentation?**

Upgrading nurses' continued in-service training to improve their skills in obstetric fistula prevention and management

It is important to establish competency-based guidelines and standards for midwifery practice

Planned instructional interventions are necessary to improve nurses' performance

### **Biography**

Qualification:

Certificate: (B.Sc.) Nursing–Zagazig University- 2006

Graduation grade: Cumulative Excellent with honors

Master degree: In Nursing Sciences-Zagazig University in 2012

Master grade: Excellent

Master title: Maternal and Neonatal Outcomes in Women with Preeclampsia in Zagazig University Hospitals

PHD degree: In Nursing Sciences-Zagazig University in 2017

PHD title: Postpartum Depression Predictors, Help- Seeking Barriers And Nursing Implications.





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**Lt Col Yamuna CB**

Army & Delhi University, India

## **Community Nutritional Rehabilitation in Survivors of Critical Illness- “SPICES for Quality Life**

“The Health Practitioner of the future will no longer treat the human frame with drugs but rather will treat cure and prevent disease with nutrition.”- Thomas Edison Nutrition is equally important when patients are recovering from illness. Good nutrition can support and improve recovery by providing body with the essential nutrients it needs to repair and maintain its key functions, during and after periods of being unwell. Malnutrition is associated to poor outcomes in critically ill patients. Oral nutrition is the route of feeding in less than half of the patients during the intensive care unit (ICU) stay and in the majority of ICU survivors. There are growing data indicating that insufficient and/or inadequate intakes in macronutrients and micronutrients are prevalent within these populations.



## QUESTIONS? CONTACT

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## MORE INFORMATION

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