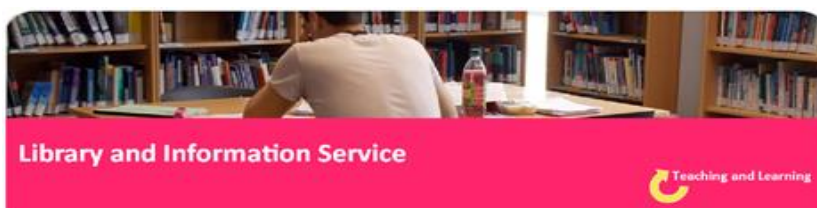


# Paediatric Nurse Education Current Awareness Newsletter



## January 2015

Respecting everyone  
Embracing change  
Recognising success  
Working together  
**Our hospitals.**





## Outreach

Your Outreach Librarian can help facilitate evidence-based practise for all members of staff, as well as assisting with academic study and research. We can help with **literature searching, obtaining journal articles and books**, and setting up individual **current awareness alerts**.

## Literature Searching

We provide a literature searching service for any library member. For those embarking on their own research it is advisable to book some time with one of the librarians for a 1 to 1 session where we can guide you through the process of creating a well-focused literature research and introduce you to the health databases access via NHS Evidence.

## Critical Appraisal Training

We also offer **one-to-one or small group training** in literature searching, accessing electronic journals, and critical appraisal/Statistics. These are essential courses that teach how to interpret clinical papers.

## Books

Books can be searched for using SWIMS our online catalogue at [www.swims.nhs.uk](http://www.swims.nhs.uk). Books and journals that are not available on site or electronically may be requested from other locations. Please email requests to: [thomas.osborne@uhbristol.nhs.uk](mailto:thomas.osborne@uhbristol.nhs.uk)

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- 1: Tables of Contents from January's Paediatric Nurse Education journals**
- 2: New NICE Guidance**
- 3: Latest relevant Systematic Reviews from the Cochrane Library.**
- 4: NHS Behind the Headlines**
- 5: Quick Exercise**

# Tables of Contents from Nurse Education journals

**If you require full articles please email me @  
Thomas.Osborne@UHBristol.nhs.uk**

## Nurse Educator

[Navigating Legal Issues in Academic Nursing](#)

[Using Courtroom Simulation to Introduce Documenting Quality Wound Care to Beginning Nursing Students](#)

[Spice Up Teaching Online!](#)

[The Curriculum Vitae: Gateway to Academia](#)

[Using a Multidimensional Approach to Improve Quality Related to Students' Hand Hygiene Practice](#)

[Student Evaluations of Teaching Tools: A Qualitative Examination of Student Perceptions](#)

[Comparison of 1 Long Versus 2 Shorter Clinical Days on Clinical Learning Outcomes of Nursing Students](#)

[A Multifaceted Progression Approach to Enhancing Student Success](#)

[Nursing Journal Editor Survey Results to Help Nurses Publish](#)

[Journal Impact Factors Released](#)

[Electronic Medical Records in Clinical Teaching](#)

[A Nurse-Managed Advocacy Clinic in a Hispanic Senior Center: Using a Concept-Based Clinical Practice Site to Enhance Nursing Education](#)

[Clarification of the DNP and PhD/DNS](#)

[Nursing Care at the End of Life: A Service Learning Course for Undergraduate Nursing Students](#)

[Multiple-Patient Simulations: Guidelines and Examples](#)

[Evaluation of Instruments Developed to Measure the Clinical Learning Environment: An Integrative Review](#)

[The Flipped Classroom: Strategies for an Undergraduate Nursing Course](#)

## Nurse Education in Practise

[The use of video conferencing to develop a community of practice for preceptors located in rural and non traditional placement settings: An evaluation study](#)

[An Education Intervention to Improve Nursing Students' Understanding of Medication Safety](#)

[Skills for nursing practice: Development of clinical skills in pre-registration nurse education](#)

[Assessment of nursing students' stress levels and coping strategies in operating room practice](#)

[Nurse competence scale – Psychometric testing in a norwegian context](#)

[The Impact of Multi User Virtual Environments on student engagement](#)

[Motivational interviewing: Experiences of primary care nurses trained in the method](#)

[The effect of social interaction on mental health nurse student learning](#)

[Psychometric testing of the Norwegian version of the questionnaire, Student Satisfaction and Self-Confidence in Learning, used in simulation](#)

[Qualitative evaluation of a standardized patient clinical simulation for nurse practitioner and pharmacy students](#)

[The learning experiences of senior student nurses who take on the role of standardised patient: A focus group study](#)

[The effects of using problem-based learning in the clinical nursing education on the students' outcomes in Iran: A quasi-experimental study](#)

[Telling stories out of school: Experiencing the paramedic's oral traditions and role dissonance](#)

[Educational environment and approaches to learning of undergraduate nursing students in an Indonesian School of Nursing](#)

[Assertiveness training for undergraduate midwifery students](#)

## **[Nurse Education Today](#)**

### [Editorial Board](#)

[Jeffreys's Nursing Universal Retention And Success \(Nurs\) Model: Overview And Action Ideas For Optimizing Outcomes A-Z](#)

[The relationship between academic self-concept, intrinsic motivation, test anxiety, and academic achievement among nursing students: Mediating and moderating effects](#)

[Ready for Practice: What child and family health nurses say about education](#)

[Pain Knowledge And Attitudes Of Nursing Students: A Literature Review](#)

[Determining the effect of periodic training on the basic psychomotor skills of nursing students](#)

[Self-reported eHealth literacy among undergraduate nursing students in South Korea: A pilot study](#)

[A meta-analysis of educational interventions designed to enhance cultural competence in professional nurses and nursing students](#)

[The influence of undergraduate education on professional practice transition: A comparative descriptive study](#)

[Use of mobile devices in nursing student–nurse teacher cooperation during the clinical practicum: An integrative review](#)

[Better together: The “M” word](#)

[People, liminal spaces and experience: Understanding recontextualisation of knowledge for newly qualified nurses](#)

[A Q methodology study of perceptions of poverty among midwestern nursing students](#)

[An integrative review of the literature on the teaching of the history of nursing in pre-registration adult nursing education in the UK](#)

[Wisdom, prudence and academic freedom](#)

[Illuminating the process: Enhancing the impact of continuing professional education on practice](#)

[Working with the disabled patient: Exploring student nurses views for curriculum development using a swot analysis](#)

[Evaluation of the attitudes of the nurses related to rational drug use in Gaziantep University Sahinbey Research and Practice Hospital in Turkey](#)

[An online course checklist](#)

[Effectiveness of patient simulation in nursing education: Meta-analysis](#)

[Happiness, stress, a bit of vulgarity, and lots of discursive conversation: A pilot study examining nursing students' tweets about nursing education posted to Twitter](#)

[Factors associated with student learning processes in primary health care units: A questionnaire study](#)

[Comparison of effects of training programs for final year nursing students in Turkey: Differences in self-efficacy with regard to information literacy](#)

[Comparison of knowledge, confidence in skill performance \(CSP\) and satisfaction in problem-based learning \(PBL\) and simulation with PBL educational modalities in caring for children with bronchiolitis](#)

[The development and issues of nursing education in China: A national data analysis](#)

[Comparison of meaningful learning characteristics in simulated nursing practice after traditional versus computer-based simulation method: A qualitative videography study](#)

[The sum of all parts: An Australian experience in improving clinical partnerships](#)

[Establishing and maintaining the clinical learning environment for nursing students: A qualitative study](#)

[Novice nurses' level of global interdependence identity: A quantitative research study](#)

[Medical memoir: A tool to teach empathy to nursing students](#)

[Impact of the Bachelor's thesis on the nursing profession](#)

[Graduate nursing students' evaluation of EBP courses: A cross-sectional study](#)

[Does a 3-week critical research appraisal course affect how students perceive their appraisal skills and the relevance of research for clinical practice? A repeated cross-sectional survey](#)

[The development and empirical validation of the Q-PDN: A questionnaire measuring continuing professional development of nurses](#)

[Teaching skills to resolve conflicts with acute confusional syndrome patients in nursing using the Case Method \(Cm\)](#)

## **New NICE Guidance**

[Children's attachment \(GID-CGWAVE0675\)](#) October 2015 NICE guidelines

[Management of vomiting in children and young people with gastroenteritis: ondansetron \(ESUOM34\)](#) October 2014

[Gastro-oesophageal reflux in children and young people \(GID-CGWAVE0599\)](#) January 2015 NICE guidelines

[End of life care for infants, children and young people \(GID-CGWAVE0730\)](#) TBC NICE guidelines

[Excess winter deaths and illnesses \(GID-PHG70\)](#) March 2015 NICE guidelines

## **Latest relevant Systematic Reviews from the Cochrane Library**

**If you require full articles, or a more enhanced search of any of the below topics please email me @  
[\*\*Thomas.Osborne@UHBristol.nhs.uk\*\*](mailto:Thomas.Osborne@UHBristol.nhs.uk)**

[Protocol-directed sedation versus non-protocol-directed sedation to reduce duration of mechanical ventilation in mechanically ventilated intensive care patients](#)

[Alpha-2 agonists for long-term sedation during mechanical ventilation in critically ill patients](#)

[Follow-up strategies after treatment \(large loop excision of the transformation zone \(LLETZ\)\) for cervical intraepithelial neoplasia \(CIN\): Impact of human papillomavirus \(HPV\) test](#)

[Home uterine monitoring for detecting preterm labour](#)

[Case management approaches to home support for people with dementia](#)

[Community wide interventions for increasing physical activity](#)

[Iron therapy in anaemic adults without chronic kidney disease](#)

[Nurse -led service versus doctor-led service for preoperative assessment in elective surgical patients](#)

# **NHS Behind the Headlines**

## **Behind the Headlines 2014 Quiz of the Year**

Monday Dec 29 2014

In 2014, Behind the Headlines covered more than 500 health stories that made it into the mainstream media. Test your knowledge of 2014's health news with our month-by-month quiz...

## **The top 10 most popular news stories of 2014**

Wednesday Dec 24 2014

In this 'end of year report' we count down the top 10 most-read Behind the Headlines stories of 2014...

## **How to read health news**

Tuesday Dec 23 2014

If you've just read a health-related headline that has caused you to spit out your morning coffee ("Coffee causes cancer" usually does the trick), it's always best to...

## **Shift workers more likely to report poor health**

Thursday Dec 18 2014

"Higher rates of obesity and ill-health have been found in shift workers than the general population," BBC News reports. These are the key findings of a survey into health trends among shift workers; defined as any working pattern outside



## Quick Exercise

### Select the research design

Randomised Controlled Trial	Systematic Review	Cohort Study	Case Control Study
Case Series	Case Report	Cross-Sectional Study	Qualitative

New mothers who don't breast-feed are asked their views on breast-feeding

Children with a fever are given either paracetamol or ibuprofen to determine which is better at reducing the fever

50 young women with viral hepatitis and 50 young women without viral hepatitis were queried about recent ear-piercing to determine if ear piercing is a risk factor for viral hepatitis.

All the evidence on the effectiveness of clinical librarian services in supporting patient care is located, appraised and synthesised

An incidence of deficiency-related rickets in a set of twins aged 10 months is reported in an article

A large-scale population based questionnaire study examining the prevalence of stroke risk factors. Participants were surveyed once.

550 people who smoke cannabis are monitored over 15 years to determine whether they are at a higher risk of developing schizophrenia than people who do not smoke cannabis

An article describes the symptoms and clinical profile of 5 children who presented to an Emergency Department who were suspected to have abdominal epilepsy

# Current Awareness Database Articles

If you require full articles, or a more enhanced search of any of the below topics please email me @  
[Thomas.Osborne@UHBristol.nhs.uk](mailto:Thomas.Osborne@UHBristol.nhs.uk)

**Title:** Resident experiences of informal education: how often, from whom, about what and how.

**Citation:** Medical Education, December 2014, vol./is. 48/12(1220-34), 0308-0110;1365-2923 (2014 Dec)

**Author(s):** Varpio L, Bidlake E, Casimiro L, Hall P, Kuziemy C, Brajtman S, Humphrey-Murto S

**Abstract:** CONTEXT: The merits of informal learning have been widely reported and embraced by medical educators. However, research has yet to describe in detail the extent to which informal intraprofessional or informal interprofessional education is part of graduate medical education (GME), and the nature of those informal education experiences. This study seeks to describe: (i) who delivers informal education to residents; (ii) how often they do so; (iii) the content they share; and (iv) the teaching techniques they use.

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**Title:** Capacity building for emergency care: Training the first emergency specialists in Myanmar.

**Citation:** Emergency Medicine Australasia, December 2014, vol./is. 26/6(618-26), 1742-6723;1742-6723 (2014 Dec)

**Author(s):** Phillips GA, Soe ZW, Kong JH, Curry C

**Abstract:** OBJECTIVES: The Myanmar Ministry of Health has formed a partnership with Australasian professional colleges and international medical specialists to deliver a comprehensive programme for emergency care training and development. We describe this programme, emphasising the training of the first emergency specialists for Myanmar

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**Title:** Knowledge of paediatric concussion among front-line primary care providers.

**Citation:** Paediatrics & Child Health, November 2014, vol./is. 19/9(475-80), 1205-7088;1205-7088 (2014 Nov)

**Author(s):** Zemek R, Eady K, Moreau K, Farion KJ, Solomon B, Weiser M, Dematteo C

**Abstract:** OBJECTIVE: To assess the knowledge of paediatric concussion diagnosis and management among front-line primary care providers..

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**Title:** Pediatric critical care nurses' experience with abdominal compartment syndrome

**Citation:** Annals of Intensive Care, 2012, vol./is. 2012/, 2110-5820 (2012)

**Abstract:** Background: Abdominal compartment syndrome (ACS) is a syndrome associated with multi-system effects of elevated intra-abdominal pressure (IAP) in critically ill children. It has a 90-100% mortality rate if not recognized and treated promptly. Measuring IAP helps identify patients developing intra-abdominal hypertension (IAH) which allows for timely intervention before progression to ACS. IAP helps identify ACS and guides its medical and surgical management. IAP is often measured by the bedside nurse in the intensive care unit. Pediatric critical care nurses (PCCN) play a key role in managing critically ill patients and recognizing potential causes for clinical deterioration such as ACS therefore should be knowledgeable about this entity. Objective: The aim of this study was to assess the awareness and current knowledge of ACS among PCCN.

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**Title:** The effectiveness of Mindful Parenting programs in promoting parents' and children's wellbeing: A systematic review protocol

**Citation:** JBI Database of Systematic Reviews and Implementation Reports, 2014, vol./is. 12/11(184-196), 2202-4433 (2014)

**Author(s):** Townshend K., Jordan Z., Peters M.D.J., Tsey K.

**Abstract:** The review will consider studies that include patients who are 19 years of age or older, diagnosed with heart failure, regardless of gender, ethnicity, other co-existing health conditions, level of education, income or health insurance. Participants must have been assessed using an established classification or categorization system by a primary care provider (i.e. Advanced practice nurses, physician or cardiologist) at the beginning of the research study to determine their severity of symptoms or physical activity limitations. The New York Heart Association Functional Classification and the American Heart Association Stages of Heart Failure are two of the most widely used instruments. Types of intervention(s) The review will consider studies that evaluated evidence-based interventions delivered in Advanced practice nurses-led Heart Failure clinics compared to usual care. Usual care refers to all non-Advanced practice nurses-led Heart Failure clinics, care approaches including care provided by primary care physicians, or cardiology clinics and physician-led Heart Failure clinics. Advanced practice nurses-led Heart Failure clinics are defined as outpatient Heart Failure clinics where a nurse with advanced practice education and skills is the primary care provider for the patient. The types of interventions that will be included in the review are symptom management, optimization of medication therapy, patient and caregiver education, and psychosocial support. The Advanced practice nurses with specialized training in Heart Failure collaborates and consults with physicians, but is not dependent on physicians to provide the healthcare described above. The objective of this systematic review is to synthesize the best available evidence regarding the effectiveness of interventions delivered in advanced practice nurse-led clinics on mortality in adult (19 years of age and older) patients with heart failure. The review question is: in adult patients, 19 years of age and older, diagnosed with heart failure, what is the effectiveness of the interventions provided in advanced practice nurse-led heart failure clinics on all-cause mortality rates compared to usual care? Inclusion criteria Types of participants

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**Title:** Barriers and facilitators of adherence to antiretroviral drug therapy and retention in care among adult HIV-positive patients: a qualitative study from Ethiopia.

**Citation:** PLoS ONE [Electronic Resource], 2014, vol./is. 9/5(e97353), 1932-6203;1932-6203 (2014)

**Author(s):** Bezabhe WM, Chalmers L, Bereznicki LR, Peterson GM, Bimirew MA, Kassie DM

**Language:** English

**Abstract:** BACKGROUND: Antiretroviral therapy (ART) has been life saving for hundreds of thousands of Ethiopians. With increased availability of ART in recent years, achievement of optimal adherence and patient retention are becoming the greatest challenges in the management of HIV/AIDS in Ethiopia. However, few studies have explored factors influencing medication adherence to ART and retention in follow-up care among adult Ethiopian HIV-positive patients, especially in the Amhara region of the country, where almost one-third of the country's ART is prescribed. The aim of this qualitative study was to collect such data from patients and healthcare providers in the Amhara region of Ethiopia

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**Title:** Compliance of healthcare workers with hand hygiene practices in neonatal and pediatric intensive care units: Overt observation

**Citation:** Interdisciplinary Perspectives on Infectious Diseases, 2014, vol./is. 2014/, 1687-708X;1687-7098 (2014)

**Author(s):** Karaaslan A., Kepenekli Kadayifci E., Atici S., Sili U., Soysal A., Culha G., Pekru Y., Bakir M.

**Abstract:** Background. The objective of this study was to assess the compliance of hand hygiene (HH) of healthcare workers (HCWs) in the neonatal and pediatric intensive care unit in a tertiary university hospital in Istanbul. Methods. An observational study was conducted on the compliance of HH for the five World Health Organization (WHO) indications. HCWs were observed during routine patient care in day shift. The authors also measured the technique of HH through hand washing or hand hygiene with alcohol-based disinfectant. Results.

A total of 704 HH opportunities were identified during the observation period. Overall compliance was 37.0% (261/704). Compliance differed by role: nurses (41.4%) and doctors (31.9%) [ $P=0.02$ , OR: 1.504, CI 95%: 1.058-2.137]. HCWs were more likely to use soap and water (63.6%) compared to waterless-alcohol-based hand hygiene (36.3%) [ $P<0.05$ ]. Conclusion. Adherence to hand hygiene practice and use of alcohol-based disinfectant was found to be very low. Effective education programs that improve adherence to hand hygiene and use of disinfectants may be helpful to increase compliance.

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**Title:** Pediatric hospital discharge interventions to reduce subsequent utilization: a systematic review.

**Citation:** Journal of Hospital Medicine (Online), April 2014, vol./is. 9/4(251-60), 1553-5592;1553-5606 (2014 Apr)

**Author(s):** Auger KA, Kenyon CC, Feudtner C, Davis MM

**Language:** English

**Abstract:** BACKGROUND: Reducing avoidable readmission and posthospitalization emergency department (ED) utilization has become a focus of quality-of-care measures and initiatives. For pediatric patients, no systematic efforts have assessed the evidence for interventions to reduce these events. PURPOSE: We sought to synthesize existing evidence on pediatric discharge practices and interventions to reduce hospital readmission and posthospitalization ED utilization.

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**Title:** Degree of knowledge of health care professionals about pain management and use of opioids in pediatrics.

**Citation:** Pain Medicine, May 2014, vol./is. 15/5(807-19), 1526-2375;1526-4637 (2014 May)

**Author(s):** de Freitas GR, de Castro CG Jr, Castro SM, Heineck I

**Abstract:** OBJECTIVE: To evaluate the degree of knowledge about pain management and opioids use by professionals working at three pediatric units.

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**Title:** Holistic care for pediatric organ transplant recipients and their families during their dark postoperative recovery stage in the hospital.

**Citation:** Transplantation Proceedings, May 2014, vol./is. 46/4(1026-8), 0041-1345;1873-2623 (2014 May)

**Author(s):** Yang FC, Shih FJ, Tseng PH, Wang SS, Shih FJ

**Abstract:** INTRODUCTION: This study explored the difficulties in caring for pediatric organ transplant recipients (POTR) and their families during dark recovery experiences (DRE) in the hospital from the perspectives of Taiwan organ transplant health professionals (OTHP). METHODS: A qualitative design was used, with a purposive sample of OTHP including OT surgeons (OTS) and nursing groups. Data were collected by thorough face-to-face interviews and were analyzed using content analysis. RESULTS: Fifty-five subjects (39 female, 16 male) participated in this project. They included 15 OTS and 40 nurses. The nurses included registered nurses ( $n = 27$ ), nurse practitioners ( $n = 5$ ), and assistant or head nurses ( $n = 8$ ). Their ages ranged from 25 to 66 (mean = 38.4) years old. Thirty-eight (69%) had college education, and 17 (31%) had graduate education. Their OT careers ranged from between 3 to 40 (mean = 23.8) years for OTS, and 0.5 to 15 (mean = 4.10) years for the OT nursing group. Five types of caring difficulties were reported: (1) threat of OT failure, (2) work overload, (3) insufficient collaboration within interdisciplinary teams due to incongruent surgical and nursing opinions, (4) poor communication between OTHP and POTR, and (5) lack of competent professional OT care. CONCLUSIONS: The following suggestions were made to help relieve the OTHPs' stress in providing holistic care for POTR and their families during DRE: (1) increasing the amount of experienced OT manpower and professional communication liaisons, (2) providing systematic on-the-job interdisciplinary case seminars and OT workshops, and (3) enhancing the POTR's mental health care and helping manage their distress of DRE. Copyright 2014 Elsevier Inc. All rights reserved.

**Publication Type:** Journal Article, Multicenter Study

**Source:** MEDLINE

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**Title:** An integrative review of factors that influence breastfeeding duration for premature infants after NICU hospitalization.

**Citation:** JOGNN - Journal of Obstetric, Gynecologic, & Neonatal Nursing, May 2014, vol./is. 43/3(272-81), 0090-0311;1552-6909 (2014 May-Jun)

**Author(s):** Briere CE, McGrath J, Cong X, Cusson R

**Abstract:** **OBJECTIVE:** To determine what factors affect breastfeeding duration after discharge home from the neonatal intensive care unit (NICU) for high-risk mothers and their premature infants. **DATA SOURCES:** The electronic databases of CINAHL and PubMed were used to identify studies published in English. Date of publication did not limit inclusion in the review. **STUDY SELECTION:** Using exclusion and inclusion criteria, 292 articles were initially assessed for relevance to the research question through abstract review. Further screening resulted in full review of 52 articles. Reference list searching added an additional six articles. Finally, in-depth review of these 58 articles resulted in 24 studies that fully met inclusion and exclusion criteria. **DATA EXTRACTION:** Studies were reviewed for information related to factors associated with breastfeeding duration for high-risk mothers and preterm infants after NICU discharge home. **DATA SYNTHESIS:** Studies were categorized into five themes, including NICU factors, feeding and soothing methods, maternal characteristics, maternal experiences, and support programs. Most significant factors affecting duration included exposure to kangaroo mother care, prenatal education, and quantity of maternal breast milk supply during the first week after discharge. Breastfeeding also was affected by maternal breastfeeding knowledge and perception of providing appropriate volumes. **CONCLUSIONS:** Mothers face many challenges breastfeeding their premature infants after NICU discharge. Ideally, all mothers need to receive support after NICU discharge, and the transition to home can be challenging even if breastfeeding is well established. However, NICU professionals are in a perfect position to provide guidance to families so they are able to anticipate and effectively solve lactation challenges at home. 2014 AWHONN, the Association of Women's Health, Obstetric and Neonatal Nurses.

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**Title:** Detected health and well-being problems following comprehensive geriatric assessment during a home visit among community-dwelling older people: who benefits most?.

**Citation:** Family Practice, June 2014, vol./is. 31/3(333-40), 0263-2136;1460-2229 (2014 Jun)

**Author(s):** Stijnen MM, Van Hoof MS, Wijnands-Hoekstra IY, Guldmond-Hecker Y, Duimel-Peeters IG, Vrijhoef HJ, Jansen MW

**Abstract:** **BACKGROUND:** Preventive home visits including comprehensive geriatric assessment for potentially frail older people are increasingly implemented in general practice. It remains unclear how to select older people who benefit most from it. **OBJECTIVES:** To determine which community-dwelling older people benefit most from a comprehensive geriatric assessment by a practice nurse during a home visit in terms of detected problems.

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**Title:** Chemotherapy medication errors [Spanish] Errores en la formulacion de quimioterapia

**Citation:** Revista Colombiana de Cancerologia, October 2014, vol./is. 18/4(179-185), 0123-9015 (01 Oct 2014)

**Author(s):** Carreno-Duenas J.A., Sanchez J.O., Bermudez-Silva C.D., Mesa M.

**Abstract:** Objectives: To describe and classify the medication errors that occurred during a 6 months period in oncology, hematology and pediatrics.

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**Title:** Implementation of standardized dosing units for i.v. medications

**Citation:** American Journal of Health-System Pharmacy, December 2014, vol./is. 71/24(2153-2158), 1079-2082;1535-2900 (15 Dec 2014)

**Author(s):** Jung B., Couldry R., Wilkinson S., Grauer D.

**Abstract:** Purpose: The implementation of standardized dosing units for six i.v. medications at an academic medical center is described. Summary: During the implementation of an electronic health record system at an academic medical center, it was noticed that providers could order some i.v. medications in multiple dosing units, including epinephrine, isoproterenol, midazolam, nitroglycerin, norepinephrine, and phenylephrine. Possible options to standardize i.v. medications along with their pros and cons were presented for discussion to key providers in all of the intensive care units. Once the providers agreed on a solution, the information was presented to the pharmacy and therapeutics committee for final approval. A nursing education plan was created and administered before the standardization of dosing units was implemented. A nursing survey was conducted before and after implementation of dosing-unit standardization to determine the effectiveness of nursing education on compliance with the standardization of the dosing units for the listed medications. The survey was designed to evaluate, when given a choice, what dosing units nurses would use to administer epinephrine, isoproterenol, midazolam, nitroglycerin, norepinephrine, and phenylephrine. The decision was made by the key providers to use weight-based dosing-micrograms per kilograms per minute-to allow for consistency of use of these medications for pediatric and adult patients. Nursing education was completed to ensure that nurses were aware of how to safely administer these medications using the new dosing units. Conclusion: Dosing-unit standardization for dose-Adjustable i.v. infusions can provide improved consistency and decrease the potential for dosing errors when administering epinephrine, isoproterenol, midazolam, nitroglycerin, norepinephrine, and phenylephrine.

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**Title:** Mobilization of pediatric medical personnel for disasters

**Citation:** Clinical Pediatric Emergency Medicine, December 2014, vol./is. 15/4(318-322), 1522-8401;1558-2310 (01 Dec 2014)

**Author(s):** Anderson M.R.

**Abstract:** Children have unique medical, social, and psychologic needs. When disasters strike, children can be incredibly vulnerable and require highly trained medical response personnel. Pediatricians, emergency physicians, family medicine physicians, pediatric nurse practitioners, and pediatric surgeons are examples of medical response individuals who can and should be a part of a coordinated medical response. This article will highlight some of the important training and organizational issues facing pediatric personnel who are ready, willing, and able to respond to the needs of America's children during times of crisis. Several important Web-based resources for training and information will also be highlighted.

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**Title:** Airports in the United States: Are they really breastfeeding friendly?

**Citation:** Breastfeeding Medicine, December 2014, vol./is. 9/10(515-519), 1556-8253;1556-8342 (01 Dec 2014)

**Author(s):** Haight M., Ortiz J.

**Abstract:** Introduction: State and federal laws have been enacted to protect the mother's right to breastfeed and provide breastmilk to her infant. The Patient Protection and Affordable Care Act requires employers to provide hourly waged nursing mothers a private place other than a bathroom, shielded from view, free from intrusion. Minimum requirement for a lactation room would be providing a private space other than a bathroom. Workplace lactation accommodation laws are in place in 24 states, Puerto Rico, and the District of Columbia. These requirements benefit the breast-pumping mother in an office, but what about the breast-pumping mother who travels? Of women with a child under a year, 55.8% are in the workforce. A significant barrier for working mothers to maintain breastfeeding is traveling, and they will need support from the workplace and the community. This study aimed to determine which airports offer the minimum requirements for a breast-pumping mother: private space other than a bathroom, with chair, table, and electrical outlet. Study Design: A phone survey was done with the customer service representative at 100 U.S. airports. Confirmatory follow-up was done via e-mail. Results: Of the respondents, 37% (n=37) reported having designated lactation rooms, 25%

(n=25) considered the unisex/family restroom a lactation room, 8% (n=8) offer a space other than a bathroom with an electrical outlet, table, and chair, and 62% (n=62) answered yes to being breastfeeding friendly. Conclusions: Only 8% of the airports surveyed provided the minimum requirements for a lactation room. However 62% stated they were breastfeeding friendly. Airports need to be educated as to the minimum requirements for a lactation room.

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**Title:** Effectiveness of nurse home visiting for families in rural South Australia

**Citation:** Journal of Paediatrics and Child Health, December 2014, vol./is. 50/12(1013-1022), 1034-4810;1440-1754 (01 Dec 2014)

**Author(s):** Sawyer M.G., Pfeiffer S., Sawyer A., Bowering K., Jeffs D., Lynch J.

**Abstract:** Aim: To evaluate the effectiveness of a 2-year post-natal home-visiting programme delivered by nurses to socially disadvantaged mothers in rural regions of South Australia.

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**Title:** Preschool children's caregivers' attitudes and behavior regarding bottle feeding in Bangpakong, Chachoengsao.

**Citation:** Journal of International Society of Preventive & Community Dentistry, December 2014, vol./is. 4/Suppl 2(S93-8), 2231-0762;2231-0762 (2014 Dec)

**Author(s):** Suwansingha O, Rirattanapong P

**Abstract:** OBJECTIVES: To study a group of preschool children's caregivers' attitudes and behavior regarding bottle feeding in Bangpakong, Chachoengsao.

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**Title:** Anthropometry and prevalence of common health problems among school going children in Surathkal, Karnataka

**Citation:** Journal of Clinical and Diagnostic Research, December 2014, vol./is. 8/12(PC01-PC05), 2249-782X;0973-709X (05 Dec 2014)

**Author(s):** Aroor A.R., Airody S.K., Mahale R., Ravikiran S.R., Shetty S., Rao A.R.

**Abstract:** Aims: To measure the anthropometric data of school children and to compare with the CDC and Agarwal centile Growth charts. The prevalence of thinness, stunting, overweight and obesity were estimated. Children were also screened for hypertension, refractory errors, dental problems, skin disease and other abnormalities. Design: Study was conducted in November in a central school in Surathkal, Dakshina Kannada, Karnataka. All children from nursery up to 10th standard were screened.

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**Title:** Ear, nose and throat foreign bodies: The experience of the Pediatric Hospital of Turin

**Citation:** Journal of Paediatrics and Child Health, December 2014, vol./is. 50/12(978-984), 1034-4810;1440-1754 (01 Dec 2014)

**Author(s):** Pecorari G., Tavormina P., Riva G., Landolfo V., Raimondo L., Garzaro M.

**Abstract:** Aim: Ear, nose and throat (ENT) foreign body (FB) injuries represent an emerging problem in the paediatric population because of their human and social costs. The aim of the study is the site-specific evaluation of FB injuries in the paediatric population referred to the emergency department of the Pediatric Hospital of Turin. Methods: This retrospective analysis was carried out sifting medical reports between 2002 and 2011. We collected information about 338 patients' FB characteristics, complications and hospitalisation. Results: The mean age was 4.2 + 2.9 years. Nose and ear are the most involved anatomical sites, followed by pharynx, oesophagus and trachea-bronchi. The most common FBs are balls, beads and toys parts (29.6%), followed by fishbones (13.6%). A lower mean age is observed in tracheo-bronchial and oesophageal FBs. The 9.2% of cases reported complications. Conclusions: A quick and proper diagnosis followed by an effective treatment of FB injuries and their complication is mandatory. Surveillance registries have a key role in

prevention and management of FB injuries; useful information can be obtained also for nurse and ENT specialist training in order to create professionals ready to recognise and manage FB injuries in the most effective way.





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