Knowledge in artificial lung ventilation and nursing training needs

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INTRODUCTION & OBJECTIVES

Artificial lung ventilation (ALV) is a method of intensive care, the main purpose of which is to partially or completely replace the function of external respiration.

Research aim is to describe the knowledge and training needs of nurses working in intensive care unit with newborns on ventilation at the National Research Center for Mother and Child Health (NRCMCH) of the Corporate Fund "University Medical Center“, Nur-Sultan.

Research question:
How well do nurses know about neonatal ventilation standards and what is the main source of their knowledge?

METHODS

To achieve this goal, we used a quantitative method. Using the quantitative method allows us to estimate the prevalence (frequency of occurrence) of the studied potential risks while maintaining the anonymity of the survey participants.
Questionnaires and a checklist for observations were used for data collection. The questionnaire and checklist of observations were developed by the research team through adaptation. The questionnaire was taken from the PLOS ONE source (https://doi.org/10.1371/journal.pone.0201743 August 16, 2018) and was modified by us for newborns.

RESULTS

The results of the study showed a completely conscious understanding of the respondents that the improvement of nursing care and patient care is largely determined not only by the availability of a certain level of knowledge among medical personnel acquired during training in technical and vocational education college, but also by the need to constantly improve them by mastering modern technologies of care and exchange of best practices with colleagues.

CONCLUSIONS & IMPLICATIONS

The quality of nursing care in the intensive care unit of the NRCMCH is determined by the lack of personnel and the level of qualification of specialists who provide high-tech care in the unit, which mainly receives deeply premature children with extremely low (500-999 g.) and very low (1000-1499 g.) birth weight.