

International Conferenece

July 23-24, 2025 | Paris, France



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Day
1

WEDNESDAY

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Registrations & Opening Remarks (08:00-09:00)

Keynote Forum (09:00 - 10:30)

09:00-09:30-----	Title: Cellular and Molecular Causes of Pre-Pregnancy Diabetes-Induced Birth Defects Mary Loeken, Joslin Diabetes Center/Harvard Medical School, United States
09:30-10:00-----	Title: Can cleaning processes based on ozone be used for high-touch surfaces in nursing homes in areas critical for infection control? Anne Marcic, Public Health Department of the State Capital Kiel, Germany
10:00-10:30-----	Title: Evaluating the Use of Neonatal Colonization Screening for Empiric Antibiotic Therapy of Sepsis and Pneumonia Patrick Morhart, Department of Neonatology and Pediatric intensive care, Germany

REFRESHMENT BREAK & GROUP PHOTO (10:30 - 10:50)

Technical Session-I (10:50 - 13:00)

Plenary talk (10:50-11:20)-----	Title: Professional care in painful neuropathy: a pivotal role of the nurse practitioner Margot-Geerts, Maastricht University, The Netherlands
11:20-11:45-----	Title: Digital Toxicology Teleconsultation for Adult Poisoning Cases in Saudi Hospitals: A Nationwide Study Maram Al-Otaiby, The Saudi Ministry of Health, Riyadh, Saudi Arabia
11:45-12:10-----	Title: Climate and Climatic Variations' Impact on Lymphoedema: Patient Perspective Susan Witt, Flinders University/ Foldi clinic, Germany
12:10-12:35-----	Title: Safety Culture Assessment in Primary Care Settings in Greece Ioannis Antonakos, Medical School of the University of Athens, Greece
12:35-13:00-----	Title: Bibliometric Analysis of Postgraduate Experimental Theses on Pediatric Obesity in Nursing Mukaddes Demir Acar, Tokat Gaziosmanpasa University, Turkey

Lunch @ Restaurant (13:00- 13:50)

Poster Presentation (13:50-14:00)

Poster I-----	Title: Clinical Case Report: Severe Neonatal Jaundice due to ABO Incompatibility Maria Helena Pimentel, Polytechnic Institute of Bragança (IPB), Portugal
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Technical Session-II (14:00-18:30)

14:00-14:25-----
Title: Early Mobilization of Patients in the Intensive Care Unit: A Quality Improvement-Evidence-Based Project
Judith Ann Manning, New York City Health and Hospitals Corporation/Jacobi Medical Center, USA

14:25-14:50-----
Title: SISTER (system implementation of select transfers in emergency room) model to reduce ED boarding
Alan Cherney, Thomas Jefferson University Hospital, USA

14:50-15:15-----
Title: Secular Trends in Cytomegalovirus (CMV) Risk and Outcomes: Results from a 10-Year Longitudinal Cohort Study in Adult Kidney Transplant Recipients
Amy Perry, Ralph H. Johnson Veterans Affairs Healthcare System, USA

15:15-15:40-----
Title: Psychosocial problems and nursing management in patients with epilepsy
Kubra Yeni, Ondokuz Mayis University, Turkey

15:40-16:05-----
Title: Cerebral vascular accident: Comparison of knowledge acquired by nursing students
Celeste Antão, Polytechnic Institute of Bragança (IPB), Portugal

Refreshment BREAK (16:05-16:25)

16:25-16:50-----
Title: Latent profile analysis of the flourishing level among clinical nurses in tertiary hospitals
Kong Yunlian, Nanjing Medical University, China

16:50-17:15-----
Title: Evaluation of a Chronic Care Management Model for Improving Efficiency and Fiscal Sustainability
Margaret Kadree, Virginia Department of Health(VDH), USA

17:15-17:40-----
Title: The effect of intensive care unit nurses' mental readiness on stress and patient safety performance
Nicki Marquardt & Freda-Marie Hartung, Rhine-Waal University of Applied Sciences, Germany

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17:40-18:05-----

Title: Improving Patient Outcomes Through Patient-Provider Symmetry
James Wallace, University of South Florida, USA

18:05-18:30-----

Title: Association Between Coffee Consumption and Metabolic Syndrome Components Among Saudi Adults
Amal Alrizqi, Alaa Jahlan, and Raneem Younes, King Abdulaziz University, Saudi Arabia

Day 1 Concludes

Panel discussions



Virtual Scientific Program



Join Zoom Meeting

Meeting ID: 826 6250 9358

Passcode: Urf@@025

Day

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Virtual Presentations (CET Time Zone)

09:30-09:50-----	Title: Taking Paediatrics Abroad: Working with low- and middle-income countries in a global pandemic Kathryn Currow , Taking Paediatrics Abroad/Australian College of Neonatal Nurses, Australia
09:50-10:10-----	Title: Development of international guidelines by Tuina practitioners for specific acupoints of paediatrics Tuina (2022 version) Changhe YU , Beijing University of Chinese Medicine, China
10:10-10:30-----	Title: Effect of maternal knowledge of asthma management on quality of life and asthma control among children with asthma: a cross-sectional study Ali Aldirawi , Central South University, China
10:30-10:50-----	Title: Influence of exercise intervention on gestational diabetes mellitus: a systematic review and meta-analysis Junyi Zheng , Chongqing General Hospital, China
10:50-11:10-----	Title: Systematic literature review on the effects of blended learning in nursing education Arumugam Raman , Universiti Utara Malaysia, Malaysia
Keynote 11:10-11:40-----	Title: Comparision in stress among working women and non working women Shashi Prakash , Sarojini Naidu Medical College, India
11:40-12:00-----	Title: Effect of Screen Time on Duration & Quality of Sleep in Children Trupti Amol Joshi , Government Medical College, Aurangabad, Maharashtra, India
12:00-12:20-----	Title: The Medical Librarian's Roles and activities in Patient Education Process: A Scoping Review Parvaneh Khorasani , Isfahan University of Medical Sciences, Iran

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E-Posters (12:20-14:00)

Title: Utilization of Atomic Force Microscopy to Examine Surface Ultrastructural Changes in Bone Tissue Following Pulsed Electromagnetic Field Therapy for Osteoporosis in Rats

E-01-----

Xiao Deng, Chongqing Medical University, China

Title: Exploring the Therapeutic Value of Yiqi Huoxue Qiangxin Decoction in the Treatment of Chronic Pulmonary Heart Disease

E-02-----

Biao Li, Department of Respiratory and Critical Care Medicine, China

Title: Association between secondhand smoke exposure and osteoporosis risk in postmenopausal women: a cross-sectional analysis of NHANES data

E-03-----

Wan Dan, Chongqing Hospital of Traditional Chinese Medicine, China

Title: The relationship between vaginal flora changes and spontaneous abortion in early pregnancy at advanced age

E-04-----

Chan Huang, Department of Obstetrics and Gynecology, Women and Children's Hospital of Chongqing Medical University, China

Title: The mechanism by which MALAT1/CREG1 regulates premature rupture of fetal membrane through autophagy mediated differentiation of amniotic fibroblasts

E-05-----

Ting Huang, Department of Obstetrics and Gynecology, Women and Children's Hospital of Chongqing Medical University, China

Title: An insertion-deletion polymorphism in angiotensin-converting enzyme is associated with a reduced risk of preeclampsia: an evidence-based meta-analysis from 44 studies

E-06-----

Yu Yan, Department of Obstetrics and Gynecology, Women and Children's Hospital of Chongqing Medical University, China

Title: The Effect of Oxytocin Combined with Carboprost Tromethamine on Blood Coagulation Function and Hemodynamics in Patients with Postpartum Hemorrhage

E-07-----

Qingqing Yang, Department of Gynaecology and Obstetrics, Chongqing Traditional Chinese Medicine Hospital, China

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E-08-----	Title: Thiopurine-Induced Mutagenesis at Methylated CpG Sites Drives TP53 R248Q Hotspot Mutations in Relapsed ALL Mengxiao Li , Department of Hematology and Oncology, Shanghai Children's Medical Center Affiliated to Shanghai Jiao Tong University School of Medicine, China
E-09-----	Title: From Subjective to Objective: The Rise of Automated Language Analysis in Schizophrenia Detection Zeng Zhen , Department of Psychiatry, Chongqing Mental Health Center, China
E-10-----	Title: Knowledge, Attitudes, and Practices of Paediatric Advanced Life Support (PALS) among doctors in Lady Ridgeway Hospital for children, Sri Lanka Antony Jacintha Antonypillai , GH Mullaitivu, Sri Lanka
14:00-14:20-----	Title: Impact of a video based educational intervention on the levels of knowledge and concerns about Covid - 19 Vaccination Mostafa A Abolfotouhi , King Saud bin-Abdulaziz University, Saudi arabia
14:20-14:40-----	Title: Reflective Journaling, diagnostic reasoning, evidence based physical examination together with Gut Feelings and Empathy -a way forward to improve nursing care Bernard Klemenz , GP LOCUM/ Royal College of General Practitioners, UK
14:40-15:00-----	Title: Effectiveness of Concept Mapping in Enhancing Knowledge Regarding Dengue Among Health Profession Students: A Quasi-Experimental Study Shashi Prakash , Sarojini Naidu Medical College, India
15:00-15:20-----	Title: Efficacy of scopolamine transdermal patch in children with sialorrhea in a pediatric tertiary care hospital Hazza Al Otaibi , King Saud bin-Abdulaziz University, Saudi arabia
15:20-15:40-----	Title: Factors associated with total cholesterol and blood glucose levels among Afghan people aged 18–69 years old: Evidence from a national survey Giti Azim , World Health Organization Country Office, Afghanistan
15:40-16:00-----	Title: An Innovative Approach to Patient Education in Gynaecology and Obstetrics; Spotify Tuğba Öz , Istanbul Beykent University, Turkey

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Title: The National Swedish Guideline on Immediate and Uninterrupted Skin-to-Skin Contact and Mother-Newborn Couplet Care

16:00-16:20-----

Stina Klemming, Lund-Malmö NIDCAP Training and Research Center, Skayne University Hospital, Sweden

Title: Pediatricians' and Nurses' views on child participation in health services: A case study from Turkey

16:20-16:40-----

Tugce Akyol, Afyon Kocatepe University, Turkey

Title: Designing and Managing Intelligent and Ethical Transformed Health and Social Care Ecosystems

Keynote

16:40-17:10-----

Bernd Blobel, University of Regensburg, Germany

Title: Features of ECG registration and interpretation in patients with amputated limbs

17:10-17:30-----

Alexander Plakida, Odessa National Medical University, Ukraine

Title: Cognitive Assessment of Executive Functions in Tunisian School-Aged Children

17:30-17:50-----

Sleh Eddine Saddi, Mental Health Service, Mohamed Tahar Maamouri Hospital, Tunisia

Title: Impact of the COVID-19 pandemic on the health situation of the Brazilian population

17:50-18:10-----

Celia Landmann Szwarcwald, Oswaldo Cruz Foundation, Rio de Janeiro, Brazil

Title: Clinical Utility of Chromosomal Microarray in Detecting Cryptic Abnormalities in Myeloid and Lymphoid Malignancies

18:10-18:30-----

Shivani Golem, Hebron University, United States

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

18:30-18:50-----

Joyce Simard, University of Minnesota, Ithaca College Founder Namaste Care International, USA

Title: Lessons from Binge Eating Disorder Experts on Environment, Mental Health, Clinical Factors and Treatment Options that Impact Eating Disorder

18:50-19:10-----

Brenna Bray, NourishED Research Foundation; National University of Natural Medicine; Naropa University, United States

conference concludes

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Margot Geerts^a, and Janneke G.J. Hoeijmakers^a, Carla M.L. Gorissen-Brouwers^a, Catharina G. Faber^a, Ingemar S.J. Merckies^{a,b}

^aMaastricht University Medical Center+, Department of Neurology, School of Mental Health and Neuroscience, P.O. Box 5800, 6202 AZ Maastricht, The Netherlands.

^bCuracao Medical Center, Department of Neurology, J. H. J. Hamelbergweg, Willemstad, Curacao.

Professional care in painful neuropathy: A pivotal role of the nurse practitioner

Peripheral sensory neuropathy, like painful small fiber neuropathy (SFN), has typical sensory symptoms, such as burning sensation, pins and needles, allodynia and hyperalgesia. SFN can extremely interfere in daily functioning, mobility and sleep, and therefore nurse practitioners (NPs) are crucial for patient education, awareness and help in coping with these conditions. Skin biopsy is an important diagnostic tool for diagnosing SFN. SFN is associated with conditions like diabetes mellitus and autoimmune diseases, but in 53% of the patients, the etiology remains unknown. Treating the underlying condition is the first-line treatment, but most patients will also need symptomatic treatment based on the biopsychosocial model. SFN can be managed by several health care professionals, including NPs, neurologists, and pain specialists. This presentation shows the central role of NPs in the Netherlands, provides evidence-based information on the diagnostics of SFN and offers guidance for interdisciplinary treatment.

Keywords: diagnostic tests, interdisciplinary treatment, neuropathic pain treatment, nurse practitioners, small fiber neuropathy

Biography

Margot Geerts received her bachelor's degree in Nursing in 1999. Until 2005 she worked as a nurse at the department of Cardiothoracic Surgery at the Maastricht UMC+, the Netherlands. In 2007 she obtained her master's degree in Advanced Nursing Practice (M-ANP) at Zuyd University of Applied Sciences. Margot's research initially focused on the treatment and quality of care for painful diabetic neuropathy, and from 2016 painful small fiber neuropathy (SFN). She is also a lecturer at the M-ANP at Zuyd University of Applied Sciences and a postdoc researcher at Maastricht University, Faculty of Health, Medicine and Life Sciences (FHML).

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Susan Witt, Neil Piller, Michael Oberlin

Flinders University Australia, Földiklinik, Germany

Climate and Climatic Variations' Impact on Lymphoedema: Patient Perspective

Lymphoedema is a significant problem worldwide and results in substantial burden to both health services and an individuals' quality of life. It results from a reduced capacity of the lymphatic system to drain lymph fluid and is characterized by ongoing swelling, primarily seen in the limbs. If left untreated, lymphoedema can cause significant problems including progressive swelling, limb deformity, skin changes, reduced mobility, joint stiffness, loss of strength, and increased risk of cellulitis. It is primarily managed through compression, skin care, exercise and manual lymphatic drainage. Higher temperatures and increased humidity have been reported to cause additional swelling and discomfort for people with lymphoedema, leading to reduced compliance with compression garment use and poorly managed symptoms.

Climate change is the biggest threat to human health this century with many known direct and indirect impacts. Increased adverse weather events and rising global temperatures are well documented. It is therefore imperative to understand the extent to which the climate impacts lymphoedema, in order to adapt our treatment approach and develop new technologies for the future. Whilst we know from clinical experience that patients with lymphoedema experience increased difficulties in warmer and humid temperatures, the extent of the impact and the recommended counter measures remain unclear. This presentation will highlight the outcomes of a PhD study which is exploring this theme from both a qualitative and a quantitative perspective. Results from focus groups in Australia and in Germany will be presented along with key outcomes from a large international survey.

Keywords: lymphoedema, climate, compression therapy, research, climate change

Biography

Susan Witt is an occupational therapist and lymphoedema therapist, originally from Australia but now living in Germany. She works at the Földi clinic as a therapist and research assistant and is completing her PhD with Flinders University in Australia, under the supervision of Prof. Neil Piller.

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Ioannis Antonakos

University of Athens, Medical School, 2nd Department of Radiology, Athens, Greece

Safety Culture Assessment in Primary Care Settings in Greece

Introduction

Safety culture is considered one of the most crucial premises for further development of patient care in healthcare. The aim of this study was to set a reference evaluation for the patient safety culture in the primary health sector in Greece, based on health professionals' perceptions.

Materials and Methods

A specialized tool - the Medical Office Survey on Patient Safety Culture (MOSPSC) - developed by the Agency for Healthcare Research and Quality (AHRQ), validated, to evaluate Greek primary care settings in terms of safety culture and quality. Factor analysis determined the correlation of the factor structure in Greek data with the original questionnaire. The relation of the factor analysis with the Cronbach's coefficient alpha was also determined, including the construct validity.

Results

Eight composites with 34 items were extracted by exploratory factor analysis, with acceptable Cronbach's alpha coefficients and good construct validity. Consequently, the composites jointly explained 62% of the variance in the responses. Five items were removed from the original version of the questionnaire. As a result, three out of the eight composites were a mixture of items from different compounds of the original tool. The composition of the eight factors was like that in the original questionnaire. A stratified random sampling with a 62% response rate ($n = 459$), conducted in primary care settings in Greece (February to May 2020). The study participants were health professionals who interacted with patients from 12 primary care settings in Greece. The most highly ranked domains were: "Teamwork" (82%), "Patient Care Tracking/Follow-up" (80% of positive scores), and "Organizational Learning" (80%); meanwhile, the lowest-ranked ones were: "Leadership Support for Patient Safety" (62%) and "Work Pressure and Pace" (46%). The other domains, such as "Overall Perceptions of Patient Safety and Quality" (77%), "Staff Training" (70%), "Communication about Error" (70%), "Office Processes and Standardization" (67%), and "Communication Openness" (64%), ranked somewhere in between.

Conclusions

The MOSPSC tool in Greek primary healthcare settings can be used to assess patient safety culture in facilities across the country. From the study, the patient safety culture in Greece was positive, although few composites showed a negative correlation and needed improvement.

Keywords: quality in healthcare, patient safety, patient safety culture, medical errors, Primary Care

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Biography

Antonakos Ioannis is a Medical Physicist at the Second Department of Radiology of the Medical School of the University of Athens, and in the University General Hospital “ATTIKON”. He holds the position of Laboratory and Teaching Staff of the Medical School of the University of Athens. He is a graduate of the Department of Physics of the University of Patras. He obtained his postgraduate degree in Medical Physics from the Medical School of the University of Athens and completed his doctoral thesis at the Medical School of the National and Kapodistrian University of Athens. He also holds a Postgraduate Diploma in Health Unit Administration. He has worked as a radiation protection consultant in Radiology and Nuclear Medicine Departments of the Public and Private Sectors. His work experience and scientific interests are in the Physics of Radiology and include, among others: patient dosimetry, optimization of imaging protocols and quality assurance in Radiology. He is a certified expert in Medical Physics and Radiation Protection as well as a member of the Hellenic Association of Medical Physicists.

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Sule Ciftci Unal¹, Dr. Mukaddes Demir Acar²

¹Vezirköprü State Hospital, Samsun, Turkiye (MSc, RN)

²Tokat Gaziosmanpasa University, Health Sciences Faculty,
Pediatric Nursing, Tokat, Turkiye

Health care satisfaction and healthy life education consciousness levels of parents with hospitalized children

Objective

This study aims to investigate the level of inpatient child-care satisfaction and healthy life education conscious levels of parents.

Methods

This study employed a descriptive, correlational and cross-sectional study design. This study consisted of 211 parents whose children were monitored as inpatients between July and December 2022 in the pediatric clinic. The data were collected with introductory information form, Healthy Life Education Conscious Level Scale in Parents (HLECLSP) and Pediatric Quality of Life Healthcare Satisfaction Inventory (PHSS). In the analysis of the research, Cronbach's Alpha, independent groups t-test (student t test), One-way analysis of variance (ANOVA), Post HocTukey HSD veya Tamhane's T2 and Pearson Correlation were used.

Results

The average HLECLSP score of the parents in the study is 125.65 ± 19.65 , and the PHSS average score is 69.80 ± 20.25 , which is at a moderate level. Regarding the health care satisfaction levels of parents, the factor of emotional needs has the lowest score. It was determined that the mean scores of PHSS differed according to status of following current developments related to health and the hospitalization process as day and these differences were statistically significant. It was determined that the mean scores of HLECLSP differed according to family type, education level, working status, parents' job and parents' status of following current developments and these differences were statistically significant.

Practice implications

Parents' satisfaction with health care was found to increase in parallel with their perception of healthy life education consciousness. It is especially recommended that health care environments be improved in terms of parents' emotional support needs and that parental current healthy life awareness training programs be included.

Keywords: Health care quality assurance; patient satisfaction; pediatric nursing; health; consciousness; education; parenting

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Biography

Dr. Mukaddes Demir Acar is an Assistant Professor of Pediatric Nursing at Gaziosmanpaşa University in Tokat, Turkey. She earned her Ph.D. from Erciyes University and has developed expertise in child health, public health nursing, and clinical education methods. Her academic and research interests focus on improving pediatric nursing education and enhancing clinical outcomes for children. Dr. Acar has conducted research on a variety of topics, including the impact of case-based learning on nursing students' clinical decision-making, the psychological effects of the COVID-19 pandemic on children, and the duration of peripheral venous catheterization in hospitalized children. She has also explored the factors affecting motivation among neonatal intensive care nurses. With multiple peer-reviewed publications and extensive experience as a journal reviewer, she plays an active role in advancing pediatric nursing knowledge. Dr. Acar is committed to training the next generation of nurses and contributing to the development of high-quality child healthcare practices.

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Dr. Mukaddes Demir Acar¹, Semanur Özay Baykara²

¹Tokat Gaziosmanpasa University, Health Sciences Faculty,
Pediatric Nursing, Tokat, Türkiye

²Tokat Gaziosmanpasa University, Postgraduate Education
Institute, Nursing Department, Tokat, Türkiye

Bibliometric Analysis of Postgraduate Experimental Theses on Pediatric Obesity in Nursing

In this study, it is aimed to systematically and comprehensively examine the nursing postgraduate theses prepared with experimental methods on obesity and its prevention, which is one of the current problems of adolescence and childhood. In this research, all theses related to adolescence and childhood obesity were scanned between 1 September and 1 November 2024, using the National Thesis Center database of the Council of Higher Education of the Republic of Turkey. Theses were evaluated according to the inclusion and exclusion criteria in the scanned database, and theses that met the criteria were included in the study. It has been observed that all initiatives on obesity are education-oriented. Apart from school-based studies where the sample group is taken, it is recommended to increase experimental studies on health care and social environments, studies based on waist circumference, waist/height ratio and other anthropometric measurements, and to include interventional studies by increasing the learning motivation of adolescents and parents with interactive education methods beyond classical education on healthy nutrition and physical activity. Additionally, it is recommended that interventional studies be included in obese children by increasing their motivation to lose weight. In addition, it may be recommended to increase evaluation-oriented studies between different strategic initiatives in the same research.

Keywords: adolescent, child, obesity, nutrition, physical activity, bibliometrics

Biography

Dr. Mukaddes Demir Acar is an Assistant Professor of Pediatric Nursing at Gaziosmanpaşa University in Tokat, Turkey. She earned her Ph.D. from Erciyes University and has developed expertise in child health, public health nursing, and clinical education methods. Her academic and research interests focus on improving pediatric nursing education and enhancing clinical outcomes for children. Dr. Acar has conducted research on a variety of topics, including the impact of case-based learning on nursing students' clinical decision-making, the psychological effects of the COVID-19 pandemic on children, and the duration of peripheral venous catheterization in hospitalized children. She has also explored the factors affecting motivation among neonatal intensive care nurses. With multiple peer-reviewed publications and extensive experience as a journal reviewer, she plays an active role in advancing pediatric nursing knowledge. Dr. Acar is committed to training the next generation of nurses and contributing to the development of high-quality child healthcare practices.

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Judith Ann Manning

USA

Early Mobilization of Patients in the Intensive Care Unit: A Quality Improvement-Evidence-Based Project

Background

At an urban public acute care hospital, a gap existed in the safety and efficacy of early mobilization of intensive care (ICU) patients, with the need for an evidence-based intervention to be implemented. Literature review revealed that a nurse-driven mobility protocol could safely achieve early mobility in ICU patients. This quality improvement – evidence-based project aims to utilize a nurse-driven mobility protocol to determine its effects on early mobilization of ICU patients.

Purpose

The purpose of this quality improvement project is to determine if the implementation of an early mobility program using the Bedside Mobility Assessment Tool (BMAT) would impact patient mobility compared to standard practice over eight weeks in the ICU setting of an urban Hospital in New York City.

Method

The Bedside Mobility Assessment Tool (BMAT) was used to conduct a pilot project on all critically ill patients aged ≥ 18 years admitted to the 17-bed ICU in an acute care hospital. Kotter's Eight-Step Change Process underpinned by the Institute of Health's Plan-Do- Study- Act (PDSA) method of change was used to implement and guide the change process in the unit.

Result

A non-randomized convenience sampling of patients was used to attain the total $N=306$ patients ($n=133$ preintervention, $n=173$ implementation). Between the pre-implementation and implementation groups, there was statistical significance in mobilization rates observed with pre-implementation ($n=56$, 46%) and post-implementation mobility rates ($n=132$, 76%).

Conclusion

Early mobilization of critical patients in the ICU using a nurse-driven protocol with the BMAT assessment tool proved efficacious in promoting early patient mobility activities in this setting. These results are also in tandem with the literature conducted literature review. The impact of early mobility on patient's wellbeing within any paradigm of care cannot be overstated, hence, this project's finding is not germane to the critical care setting but can be applied to other in-patient units.

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Biography

Judith Ann Manning is an accomplished nursing professional from the United States, currently serving at Jacobi Medical Center, part of NYC Health + Hospitals in New York. With over two decades of experience in clinical nursing and healthcare leadership, she has played a pivotal role in advancing patient-centered care and promoting evidence-based nursing practices. Judith is known for her strong commitment to staff development, quality improvement, and inclusive care delivery. As Assistant Director of Nursing, she leads several initiatives aimed at enhancing patient outcomes, fostering interprofessional collaboration, and supporting continuing education for nursing teams, including off-tour staff. She is a frequent speaker at national and international conferences, sharing her insights on critical care, staff training, and equity in healthcare. Her recent projects include early patient mobilization strategies in intensive care units and promoting inclusive access to clinical resources. Judith remains dedicated to mentoring future nursing leaders and improving healthcare delivery through compassion, innovation, and excellence.

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**Jennifer L. Kahoud MD MBA FACEP, Alan Cherney MD
FACEP**

Thomas Jefferson University Hospital Philadelphia PA USA

SISTER (system implementation of select transfers in emergency room) model to reduce ED boarding

This study describes a novel transfer model implemented between an academic, level 1 trauma center (Hospital A) and a nearby affiliate community hospital (Hospital B). Primary outcome is change in boarding hours and percentage of boarders in the Hospital A emergency department. Secondary objectives of this study include how improved flow in the emergency department to reduce boarding improves length of stay, prevents patients from escalating to more acute acuity levels of care, reduces patient morbidity and mortality and therefore improves health care costs as well. A retrospective chart review was conducted over a consecutive 14-months period of all patients that presented to main hospital emergency department who were transferred to the Hospital B for inpatient admission. This included analysis of patient cohort characteristics, hospital LOS, return rate to the Hospital A (boomerang), rates of against medical advice (AMA) dispositions, post-discharge recidivism, in addition to enterprise data on total number of boarders, percent of boarders, and total boarding hours. There was a total of 718 transfer encounters during the study period. Percent boarding decreased from 70.6% in the pre-period to 63.8% in the post-period ($p < 0.001$). Total boarding hours decreased at both the main hospital and the sister hospital with this transfer process. The median length of stay at the sister hospital was 74 h, with 9 upgrades to ICU admissions. Five patients were dispositioned back to the hospital A after admission to hospital B. A distributive model was useful in transferring admissions within a healthcare system, reducing number of boarders, percent of boarders, and boarding hours in Hospital A emergency department. Furthermore, the Hospital B was an appropriate location for transfers, based on the low number of ICU transfers and dispositions back to the main hospital

Keywords: load balancing, ED overcrowding, boarding, hospital capacity, against medical advice

References

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- A.J. Singer et al. The association between length of emergency department boarding and mortality, Acad Emerg Med (2011)
- A.E. Bair et al. The impact of inpatient boarding on ED efficiency: a discrete-event simulation study, J Med Syst (2010)
- S. Trzeciak et al. Emergency department crowding in the United States: an emerging threat to patient safety and public health, Emerg Med J

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Biography

Dr. Alan R. Cherney, MD, MSc, is an Assistant Professor of Emergency Medicine at Sidney Kimmel Medical College, Thomas Jefferson University, and serves as the Associate Director of Undergraduate Medical Education in the Department of Emergency Medicine. He also holds the position of Assistant Medical Director at Thomas Jefferson University Hospital. Dr. Cherney earned his medical degree from SUNY Downstate Medical Center and completed his residency in Emergency Medicine at Lehigh Valley Health Network. His academic interests focus on enhancing clinical teaching skills among emergency medicine residents and medical students. He has co-authored several peer-reviewed publications exploring topics such as gender differences in resident self-assessment of clinical teaching and the utilization of diagnostic imaging in emergency settings. In his administrative role, Dr. Cherney is dedicated to optimizing emergency department operations and implementing evidence-based practices. He leads initiatives like the Care Coordination Extenders (CCE) Project, which aims to expedite outpatient imaging and follow-up care for emergency department patients. Through his combined efforts in clinical practice, education, and research, Dr. Cherney contributes significantly to the advancement of emergency medicine at Thomas Jefferson University Hospital.

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Amy Perry, MSN, APRN, FNP-BC, CNN-NP¹, Karim Soliman, MD, PhD^{1,2,3}, Tibor Fulop, MD, PhD^{1,2}, Erika Andrade, BS⁴, Zaid Mesmar, MD³, Morgan Overstreet, MS⁵, Isabel K Calimlim,⁵ Courtney Harris, MD,⁶ David J Taber, PharmD, MS^{5,7}

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³Division of Transplant Surgery, Department of Surgery, Medical University of South Carolina, SC, United States.

⁴College of Medicine, Medical University of South Carolina, SC, United States.

⁵Pharmacy Services, Ralph H. Johnson VA Medical Center, Charleston, SC, United States

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Secular Trends in Cytomegalovirus (CMV) Risk and Outcomes: Results from a 10-Year Longitudinal Cohort Study in Adult Kidney Transplant Recipients

Background

The goal of this study was to determine the secular trends in the incidence of CMV sero-mismatch (D+/R-) and if these trends meaningfully impact clinical outcomes.

Methods

This was a single-center longitudinal cohort study in adult kidney recipients transplanted between Jan 2012 and June 2021 with follow-up through June 2022. Baseline and follow-up data were collected. Univariate and multivariate statistics were used to analyze the data.

Results

2,392 kidney transplants were performed during the study period; 132 patients did not meet inclusion criteria. The mean age was 52 years, 41% were female, 57% were black, and 19% were CMV D+/R-. The odds of being CMV high-risk increased by 6% each year (OR 1.06, 1.02-1.10 p=0.003); 48% of the variability associated with CMV serostatus was explained by transplant year ($R^2=0.478$, p=0.002). Sequential modeling demonstrated that CMV D+/R- serostatus was a substantial risk factor for CMV infection (HR 5.7, 4.5-7.3), CMV disease (HR 8.4, 3.9-18.0), CMV resistance (HR 17.9, 3.8-84.2), CMV refractory infection (HR 35, 4-280), late CMV infection (HR 12.0, 8.3-17.1), acute rejection, and hospitalization for opportunistic infections. Secular trend analysis demonstrated that CMV infections, CMV resistance, and late CMV increased in incidence since 2012. The risks of CMV resistance and late infection was significantly influenced by D+/R- serostatus and transplant year, indicating that this risk is worsening over time.

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Conclusion

The CMV D+/R- serostatus remains the single most important risk factor for CMV infection, disease, resistance, refractory infection, and late CMV, which appears to be increasing in magnitude.

Keywords: Kidney Transplantation, Follow-Up Studies, Longitudinal Studies, Cytomegalovirus Infections, Risk Factors, Opportunistic Infections

Biography

Amy has been a nephrology nurse practitioner for 22 years, working in all aspects of nephrology. She has managed patients with Chronic Kidney Disease and those on hemodialysis. She has been managing post kidney transplant patients at the VA in Charleston South Carolina since 2016 and is now the Clinical Administrator for the developing Kidney Transplant Center at that facility. She has spoken internationally on the use of Nurse Practitioners in Nephrology and has published on various topics in nephrology and transplant.

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Kubra Yeni

Ondokuz Mayıs University, Faculty of Health Sciences, Department of Nursing, Samsun, Türkiye

Psychosocial problems and nursing management in patients with epilepsy

Epilepsy is a neurological disorder characterized by seizures caused by abnormal electrical discharges in the brain, affecting approximately 70 million individuals worldwide. Although epilepsy is a neurological disease, it has been attributed mystical meanings and categorized differently throughout history. Despite significant medical advances in the field of epilepsy, prejudices, misconceptions and discrimination still prevail. Although these prejudices against the disease are often prevalent in underdeveloped and developing countries, they are also present in many developed countries. In this sense, epilepsy becomes a social label rather than a clinical problem. Many epilepsy patients hide their disease and isolate themselves from society because of stigma. At least half of the patients are diagnosed with anxiety and depression. Patients who are discriminated against because of their disease face many problems in getting married, finding a job, and continuing their school life. It is even reported that individuals with epilepsy who cannot cope with the problems they experience turn to suicidal behavior. Therefore, epilepsy patients have to cope with both medical and psychosocial burden. Nurses have important responsibilities in managing these problems experienced by patients with epilepsy. First of all, the patient should be supported to adapt to the disease and treatment. Prejudices and misconceptions should be eliminated by providing education to patients, their relatives and all members of the society. In addition, qualitative and quantitative studies should be conducted to detail the problems experienced by patients and contribute to the literature. Patients should be evaluated in detail and referred to psychologists and psychiatrists if necessary. Patients should be directed to associations related to epilepsy and interventions should be planned to increase their social functions. As a result, detailed evaluation of epilepsy patients who experience many psychosocial problems, adaptation to the disease, providing trainings to patients and the community and planning interventions to increase the social functions of patients are among the important responsibilities of nurses in disease management.

Keywords: epilepsy, psychosocial problems, nursing management

Biography

Kubra Yeni graduated from Ondokuz Mayıs University School of Nursing. She got her master's (2014) and Ph.D. degrees (2020) from the Istanbul University-Cerrahpasa Florence Nightingale Faculty of Nursing. She has studies on epilepsy, multiple sclerosis, and stroke, generally deals with the psychosocial aspect of the diseases. She is a member of the National Neurology Nursing Association and Turkish Epilepsy Society (Turkish Chapter of ILEA). She is currently working as an associate professor at Ondokuz Mayıs University, Faculty of Health Sciences, Department of Nursing in Türkiye.

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Department of Nursing, Samsun, Türkiye

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Neurology, Samsun, Türkiye

The Relationship Between Suicidal Behavior, Epilepsy Impact, and Social Isolation in Patients with Epilepsy

Patients with epilepsy experience psychosocial problems due to epilepsy, patients may isolate themselves from society and may engage in suicidal behavior. The aim of this study is to determine suicidal behavior in patients with epilepsy and to examine the relationship between suicidal behavior and the disease effect and social isolation levels. The data of this descriptive cross-sectional study were collected between May 2024 and January 2025. The Patient Information Form, Suicidal Behavior Scale, Personal Impact of Epilepsy Scale and Social Isolation Scale were used to collect the data. Of the 80 patients who participated in the study, 58% were female, 53% were married and 40% were actively working. The mean age of disease onset was 22.7 (± 15.9) and the mean duration of disease with epilepsy was 10.4 (± 9.4) years. The majority of the patients (73.7%) had generalized seizures. 37.5% of the patients stated that they had more than one seizure per month and 50% of them used two or more epilepsy medications. Patients reported that epilepsy most significantly affected their private lives (46.3%). It was found that the Suicidal Behavior Scale scores of the patients did not show any significant difference according to sociodemographic characteristics ($p > 0.05$). However, the suicidal behavior scale scores of the patients who had generalized seizures ($p = 0.028$), had more than one seizure per month ($p = 0.007$), and had their private lives ($p = 0.022$), work life ($p = 0.010$) and social life ($p < 0.001$) affected by epilepsy were higher. The suicidal behavior scale scores of the patients were positively and significantly correlated with all sub-dimensions and total scores of the Epilepsy Impact Scale ($p < 0.01$). In addition, as the Social Isolation Scale score increased, the Suicidal Behavior Scale score also increased ($p < 0.01$). According to linear regression analysis, disease effects and social isolation explained 31% of suicidal behavior in epilepsy patients ($R^2 = 0.31$, $p < 0.01$). Suicidal behavior in epilepsy patients is not a frequently studied subject and it is recommended that patients be evaluated more comprehensively in future studies.

Keywords: Epilepsy, epilepsy impact, social isolation, suicidal behavior

Biography

Kubra Yeni graduated from Ondokuz Mayıs University School of Nursing. She got her master's (2014) and Ph.D. degrees (2020) from the Istanbul University-Cerrahpasa Florence Nightingale Faculty of Nursing. She has studies on epilepsy, multiple sclerosis, and stroke, generally deals with the psychosocial aspect of the diseases. She is a member of the National Neurology Nursing Association and Turkish Epilepsy Society (Turkish Chapter of ILEA). She is currently working as an associate professor at Ondokuz Mayıs University, Faculty of Health Sciences, Department of Nursing in Türkiye.

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Celeste Antão¹, Gabriel Pereira², Vanessa Frias², Zelia Caçador³, Helena Pimentel¹

¹Research Centre for Active Living and Wellbeing (LiveWell), Instituto Politécnico de Bragança, Campus de Santa Apolónia, 5300-253 Bragança, Portugal

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³Research Centre on Child Studies, Institute of Education, University of Minho, 4710-057 Braga, Portugal

Cerebral vascular accident: Comparison of knowledge acquired by nursing students

Stroke is the leading cause of death and permanent disability in Portugal, requiring nurses to have solid knowledge for effective intervention. This study assesses the level of stroke knowledge among first- and fourth-year nursing students, identifying gaps and progress throughout the academic journey.

Objectives

The aim was to evaluate the level of stroke knowledge among first- and fourth-year undergraduate nursing students at the School of Health of Bragança. Specific objectives included: identifying knowledge of risk factors, assessing the ability to recognize warning signs, and analyzing knowledge of initial therapeutic interventions.

Methodology

A cross-sectional, descriptive-correlational quantitative study was conducted using a questionnaire validated by the Portuguese Stroke Association. The sample consisted of 95 students (49 from the first year and 46 from the fourth year). Data were collected and statistically analyzed using Microsoft Excel and Jamovi. Results: The data show a clear progression in stroke knowledge throughout the course. In the first year, 47% of students demonstrated a low level of knowledge and 53% a medium level, with no student achieving a high level. By the fourth year, a significant improvement was observed, with 76% reaching a medium level and 24% a high level, and no students with low knowledge.

Conclusion

The results indicate an improvement in stroke knowledge; however. The adoption of active methodologies, such as clinical simulations and case studies, may strengthen learning and better prepare nurses for a rapid stroke response.

Keywords: Stroke, nursing students, risk factors, warning signs

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Biography

Prof. Celeste Antão is an Adjunct Professor at the School of Health, Polytechnic Institute of Bragança (IPB), Portugal. With a background in nursing and a Ph.D. in Psychology, she brings over two decades of experience in health education and research. She specializes in pedagogy, emotional competencies, and health promotion, actively contributing to curriculum development and teaching innovation. Prof. Antão coordinates the Erasmus+ project “Innovative Skills for Nurses,” focusing on digital learning tools and international collaboration in nursing education. She has served on scientific and technical councils, participated in academic juries, and published research on health behaviors, maternal concerns, and the impact of COVID-19 on education. Her work reflects a strong commitment to advancing nursing practices and improving health literacy among students and communities. Prof. Antão is recognized for her interdisciplinary approach, bridging psychology and nursing to foster holistic, evidence-based healthcare education.

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Kong Yunlian*, Liu Longxiu, Tong Zirong, Lin Zheng, Li Fang

Nursing department, Jiangsu Province Hospital (The First Affiliated Hospital of Nanjing Medical University, Jiangsu Provincial Maternal and Child Health Center), China

Latent profile analysis of the flourishing level among clinical nurses in tertiary hospitals

Background The characteristics of nursing work, such as high emotional commitment, high risk, and high intensity, result in nurses' lower mental health level compared to the general population. Nurses' mental health deserves attention. Current research mainly focus on nurses' psychological problems like anxiety and depression, and the heterogeneity among different nurse groups is not considered, making it difficult to implement tailored interventions. **Objective** This study aims to explore the level of the flourishing level among nurses in tertiary hospitals, and analyze their potential profiles as well as influencing factors, with the aim of providing a reference for enhancing nurses' flourishing level and formulating targeted intervention measures. **Methods** Convenience sampling method was adopted to select 1278 clinical nurses from 10 tertiary hospitals in Jiangsu Province. A general information questionnaire, the flourishing scale and nurses' self-care scale were used to accomplish the survey among the participants. Latent profile analysis was performed to identify the categories of nurses' flourishing level, and the influencing factors of the potential profiles were analyzed through univariate analysis and logistic regression analysis. **Results** The flourishing level of nurses in tertiary hospitals could be categorized into four potential categories: very high flourishing level group (30.83%), high flourishing level group (32.32%), medium flourishing level group (22.06%), and low flourishing level group (14.79%). The results of regression analysis showed that sleep quality, experience of workplace violence, relationship with coworkers, frequency of night shifts, marital status, the emergence of self-care awareness, knowledge of self-care, implementation of healthy lifestyle, occupational self-acceptance, and the inner-fulfillment were the factors influencing the potential categories of nurses' flourishing level in tertiary hospitals ($P < 0.05$). **Conclusion** There is potential heterogeneity in clinical nurses' flourishing level. Nursing managers need to implement targeted interventions according to the influencing factors of different potential profiles to improve nurses' flourishing level.

Keywords: Nurse, Heartiness, Self-care, Potential profiling, Influencing factors

Biography

- Female, RN, MD, Senior nurse practitioner, Teacher of international nursing students in Nanjing Medical University
- Holding a master's degree from Trinity College Dublin with a First Class Honours.
- Has presided 4 research projects at various levels
- Has published 4 papers, including 1 SCI paper.
- Main research areas: humanistic nursing, mental health and promotion, nursing management, and nursing education.

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Maria Helena Pimentel¹, Celeste Antão¹

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5300-253 Bragança, Portugal.

Clinical Case Report: Severe Neonatal Jaundice due to ABO Incompatibility

Clinical Case

A male newborn, delivered at 38 weeks via cesarean section due to fetal distress, weighed 2.9 kg at birth. He had low APGAR scores-4 at the 1st minute and 6 at the 5th-indicating clinical instability. He was admitted to the neonatal unit with severe jaundice, respiratory distress, and hemodynamic instability. Initial labs revealed anemia (hemoglobin 7 g/dL) and elevated indirect bilirubin. A positive direct Coombs test confirmed hemolytic anemia due to ABO incompatibility, which exacerbated the jaundice. Despite initiation of intensive phototherapy, bilirubin levels remained critically high, raising concern for bilirubin encephalopathy. Given the lack of response and risk of neurological damage, an exchange transfusion was promptly indicated. This therapeutic procedure involves replacing the infant's blood with donor blood to reduce bilirubin levels and remove maternal antibodies. The newborn was placed in a supine position, and the transfusion was performed in stages, replacing approximately 85% of his blood volume with double the volume of fresh donor blood. The procedure was carried out under continuous monitoring of vital signs, laboratory parameters, and strict hemodynamic control.

Discussion

This case is consistent with hemolytic disease of the newborn (HDN) caused by ABO incompatibility—a common cause of early-onset jaundice. The newborn's clinical instability was likely intensified by anemia and hyperbilirubinemia. The exchange transfusion was timely and crucial, both to halt hemolysis and prevent bilirubin-induced neurologic dysfunction.

Conclusion

This case emphasizes the importance of early identification and prompt management of severe hyperbilirubinemia in neonates. Exchange transfusion remains the gold standard when conservative measures fail. Early, aggressive treatment in such cases is essential to prevent irreversible complications such as kernicterus and to improve overall neonatal outcomes.

Keywords: Hemolytic Anemia, ABO Incompatibility, Exchange Transfusion, Clinical Case

Biography

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- Watchko JF. Hyperbilirubinemia and bilirubin toxicity in the late preterm infant. Clin Perinatol. 2006;33(4):839–852.

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Margaret A. Kadree, MD, Patrick Wiggins, MPH, Lura Thompson, PharmD, Cynthia Warriner, BS, and Michelle White, MSW

USA

Evaluation of a Chronic Care Management Model for Improving Efficiency and Fiscal Sustainability

Chronic care management is effective. Barriers to program durability include dependence on the provider–nurse duo to carry out labor-intensive services and the lack of a fiscally sustainable model. Between January and October 2022, an expanded chronic care management team—consisting of a provider, nurse, community health worker, and pharmacist—conducted a four-month intervention in an ambulatory setting. This intervention, using a convenience sample of 134 Medicare patients with uncontrolled type 2 diabetes or hypertension, demonstrated statistically significant improvements in controlling type 2 diabetes ($P < .01$) and blood pressure ($P < .001$). Direct provider workload decreased, and the Medicare reimbursement rate was 85.5%.

Keywords: care management team, Community health worker

Biography

board-certified-Internist, Clinical Specialist at the Virginia Department of Health; 40 years of broad-based experience in academia, managed care and ambulatory care; Founder of the Clinical Research Center at Morehouse School of Medicine; have sat on numerous committee/panels addressing issues such as Ethics and Health Care Management, Hospice care, Medical Treatment Effectiveness and Education of Health Care Providers; formerly grant reviewer for Health Resources Services Administration and NIH; have worked very closely with Federal, State and local governmental bodies on critical health care issues. Have received over 25 awards.

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Nicki Marquardt, Nina Reichert, Verena Schürmann & Freda-Marie Hartung

Rhine-Waal University of Applied Sciences, Kamp-Lintfort, Germany

The effect of intensive care unit nurses' mental readiness on stress and patient safety performance

Purpose

This study examines the relationship between mental readiness, performance, and stress within the context of critical care nursing. By utilizing the multi-dimensional concept of mental readiness, originally developed in sport psychology, the research takes an unconventional approach to explore this relatively underexamined area and contribute new insights into human performance and patient safety.

Method

The Mental Readiness Scale (MRS) was adapted to analyze these relationships among a sample of intensive care unit nurses.

Results

Correlation and multiple regression analyses produced mixed results. While dimensions such as activation, goal setting, self-talk, imagery, and attentional control did not predict the outcome variables, self-confidence and relaxation emerged as significant and strong predictors of patient safety performance and stress reduction.

Conclusion

These findings can guide the development of training programs and safety culture interventions aimed at improving intensive care nurses' patient safety performance and reducing their perceived stress levels.

Keywords: intensive care, mental readiness, patient safety, performance, self-confidence, stress

Biography

Nicki Marquardt is Professor of Cognitive, Industrial and Organizational Psychology at Rhine-Waal University of Applied Sciences in Kamp-Lintfort. There he teaches on the Psychology (Industrial and Organizational Psychology, B.Sc) and International Management and Psychology (M.Sc) courses, which he helped to design and develop as study program manager. After studying business psychology in Lueneburg and Edinburg/Texas (USA), he worked at the Institute of Experimental Industrial Psychology at the Leuphana University of Lueneburg, where he completed his doctorate on the topic of unconscious processes in ethical management decisions. Since 2006, he has also been working as an independent organizational consultant and trainer for error prevention, human factors and safety culture in the aviation, automotive and medical industries. Nicki Marquardt publishes in renowned journals and speaks at international conferences on his main areas of work and research, such as human error, situational awareness, crew resource management, safety culture, mental readiness, implicit cognition and business ethics.

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James Wallace, Matthew Mullarkey, Alan Hevner

University of South Florida, Tampa, Florida, USA

Personalized Healthcare: Improving Outcomes Through Precision Medicine

This presentation explores the concept of patient-provider symmetry as a catalyst for improved patient outcomes, grounded in the behavioral construct of Health Locus of Control (HLOC). Drawing from a recent integrative review, the presentation addresses how alignment between a patient's perceived control over their health and a provider's communication approach significantly influences engagement, trust, adherence, and health efficacy. The research question guiding this work is: How can recognition and strategic alignment of patient and provider HLOC enhance care outcomes, particularly when supported by emerging precision medicine tools? Background literature reveals that patients with an internal HLOC—those who believe they can influence their own health—are more likely to participate in shared decision-making and maintain positive health behaviors, while those with an external HLOC often disengage. The purpose of this presentation is to propose a three-step clinical framework designed to assess, align, and reinforce patient control beliefs within nursing practice. This methodology includes validated HLOC assessment tools, tailored communication strategies, and goal-setting techniques to support locus realignment. Preliminary results drawn from the literature and clinical simulations suggest that intentional alignment not only improves patient experience but also facilitates better clinical outcomes and long-term self-efficacy. In the concluding segment, the presentation pivots to insights from the presenter's forthcoming book, *Precision Medicine: AI and the Science of Personalized Healthcare*, that precision medicine, through wearables, genomics, and AI-assisted decision-making, provides both the data infrastructure and motivational scaffolding to support sustained patient engagement. Ultimately, the presentation suggests that incorporating locus of control awareness into precision-driven care models can help nurses and interdisciplinary teams achieve more equitable, participatory, and effective health outcomes.

Keywords: Patient engagement, health locus of control, precision medicine

Biography

Dr. James Wallace is a healthcare strategist, author, and former CEO with over 25 years of leadership in precision medicine, digital health, and value-based care transformation. He is the author of *Precision Medicine: AI and the Science of Personalized Healthcare* and holds a Doctor of Business Administration degree from the University of South Florida and an MBA from Harvard Business School. Dr. Wallace speaks internationally on the convergence of technology, psychology, and personalized care, with a focus on empowering patients and improving clinical outcomes through innovative, evidence-based practices.

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Dr Kathryn Currow

Managing Director, Taking Paediatrics Abroad Co-Presenter Donna Hovey, Chair, Low Resource Country Special Interest Group, Australian College of Neonatal Nurses

Main theme of your research topic

Taking Paediatrics Abroad (TPA: www.takingpaediatricsabroad.org.au) is a registered Australian charity founded in 2019. TPA enhances care for children with complex medical problems. It does this by enabling the collaboration of Australian paediatric subspecialists with treating clinicians in low resource countries (LRC) in the Asia-Pacific region and in remote locations for Australian Aboriginal children. Clinical education sessions are provided on requested topics and supportive, respectful conversations enhance wellbeing for all. The care-giving capabilities of doctors, nurses and allied health professionals are enhanced, helping to save lives and strengthen health systems. Timely subspecialty guidance about actual cases enables the refinement of management, follow-up of progress, debriefing and crystallization of key learnings. Now in its 6th year, TPA has delivered > 1170 hours of vibrant meetings via Zoom, within a mutually enriching and respectful learning environment. As a result, lives have been saved, and health systems have strengthened. TPA also facilitates face-to-face volunteer visits for clinical skills training. For Nurses, weekly education sessions addressing requested topics are conducted in the South Pacific, monthly in Cambodia. Slides and current guidelines are shared, with attentiveness to the challenging context of LRCs. An example is through a collaboration with colleagues from like-minded organisations in the LRC Special Interest Group (SIG) of the Australian College of Neonatal Nurses (ACNN). Monthly presentations by expert clinical neonatal nurse educators encompass the assessment and management of a broad range of neonatal conditions. ACNN colleagues have also undertaken face-to-face training in the Solomon Islands and Tonga. Additional TPA projects include support for a research project in newborn screening for congenital hypothyroidism in the Solomon Islands, and support for the establishment of a child protection service at the National Paediatric Hospital in Phnom Penh, Cambodia. Feedback from colleagues endorses TPA's highly valued impact in boosting paediatric practice and enhancing clinician wellbeing.

Keywords: Taking Paediatrics Abroad: supporting Asia-Pacific health professionals

Biography

FOUNDER and Managing Director, Taking Paediatrics Abroad <https://www.linkedin.com/company/taking-paediatrics-abroad> A paediatric doctor, medical educator and leader, with broad ranging Australian and international experience. Dedicated to furthering improvements in the health and wellbeing of children and young people in Australia and globally. Previously Executive Principal of the Sydney Child Health Program from 1997 to 2018. Kathryn's commitment for advancing the health and rights of children and young people globally is a life-long passion.

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Parvaneh Khorasani¹, Hasan AshrafiRizi^{2*}, Faezeh Amini^{2*}

¹Associate Professor, Nursing and Midwifery Care research Center, Department of Community Health Nursing, School of Nursing and Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran

²Full Professor, School of Management and Medical information, Isfahan University of Medical Sciences, Isfahan, Iran

The Medical Librarian's Roles and activities in Patient Education Process: A Scoping Review

The presence of medical librarians in the patient education team can facilitate the patient education process. This scoping review based on the method recommended by the Joanna Briggs Institute aims to "identify different traditional and modern services, activities and roles that medical librarians provide in the patient education process. PubMed, Scopus, Web of Science, and LISTA searched. Studies which their full text was not available and were in languages other than English were excluded. Two independent reviewers screened titles/abstracts and full text of retrieved articles and eligibility disagreements within a pair resolved by discussion or a third reviewer. Data charting was done in accordance with the data extraction tool made in Excel. Findings presented as a narrative summary supported by tables and diagrams. According to findings the roles that MRs can play in patient education process classified in 3 main categories: 1-promoting public health: Identifying reliable resources, help patrons locate and evaluate free health information, Providing effective health messages and targeted media. 2-Support for patient education programs: Participation in the needs assessment process of caregivers, Identifying information-seeking behavior patterns and applying them in patient education planning, providing patient education materials in plain language, Evaluating patient education materials, organizing the patient education materials to facilitate the accessibility, using new technologies to respond users' questions. 3-professional development: updating self knowledge and skills, setting up and strengthening health information centers. Identifying the different services that medical librarians provide in the patient education process leads medical librarians to inform about the different services they can provide and to expand their roles as well as policymakers and hospital managers to be aware of these roles and use medical librarians in the patient education process appropriately. It also helps the general public to learn about the services that medical librarians can provide them in this process.

Keywords: Patient education; Medical librarian; Health information professionals; Health education; Professional role; scoping review

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Biography

As a faculty member in Department of Community Health Nursing in Iran, I intrested in nurses' and other health care professionals' role development through interdisciplinary researches in patient education, Leadership and management for Health Promotion and disease prevention. I have some . national cooperations and team project at the level of the Ministry of Health such as “ Development of a National document for community health nursing in Iran (2024-2025), Development of National Document for community based needs assessment in Iran (2022-2023), Development of the National Road map for Nurses' specialist role in Iran (2018-2020)". See more information in my academic profile at: FOUNDER and Managing Director, Taking Paediatrics Abroad<https://www.linkedin.com/company/taking-paediatrics-abroad> A paediatric doctor, medical educator and leader, with broad ranging Australian and international experience. Dedicated to furthering improvements in the health and wellbeing of children and young people in Australia and globally. Previously Executive Principal of the Sydney Child Health Program from 1997 to 2018. Kathryn's commitment for advancing the health and rights of children and young people globally is a life-long passion., and at <https://publons.com/researcher/2167733/parvaneh-khorasani/>

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Najla A. Barnawi,^{1,2} Basmag Alraquei,³ Ashwaq Hilwan¹,
Maram Al-Otibi,¹ & Roaya Alsubaie¹ **Mostafa
Abolfotouh,**^{2,3}

¹College of Nursing, King Saud Bin Abdulaziz University for Health Sciences, Riyadh, Saudi Arabia, ²King Abdullah International Medical Research Center (KAIMRC), Riyadh, Ministry of National Guard, ³King Abdullah International Medical Research Center (KAIMRC), Riyadh, Ministry of National Guard

Impact of a Video-Based Educational Intervention on the Levels of Knowledge and Concerns about COVID-19 Vaccination

The hesitancy of taking the COVID-19 vaccine is delaying the current global and national COVID-19 management strategies. Evidence highlighted the importance of examining the public concerns and knowledge toward COVID-19 vaccines in sustaining public prevention against spreading the virus worldwide. This study aimed to assess the impact of the video-based educational session on COVID-19 vaccines on the Saudi population's concerns and knowledge about taking the vaccines. This study was a parallel, double-blind, randomized posttest-only control group design. A total of 508 Saudis were randomized to an experimental group (253) and a control group (255). The experimental group was exposed to a video-based educational session, while the control group was not. Then, both groups were subjected to a validation questionnaire to assess the level of knowledge and concerns about the vaccine. In comparison to the control group, the experimental group showed a significantly lower proportion of overall high concern (0.4% vs 5.5%, $P < 0.001$) and a higher proportion of overall good knowledge (74.2% vs. 55.7%, $P < 0.001$). After adjustment for possible confounders, the experimental group showed significantly lower percent mean score of concern than the control group (45.0% vs. 65.0%, $P < 0.001$) and higher percent mean score of knowledge (74.2% vs. 55.7%, $P < 0.001$). Our study concludes that the video-based educational intervention on COVID-19 knowledge and concerns positively impacted the levels of knowledge and concerns among the experimental group. These interventions could safeguard against the rumors and misconceptions about COVID-19 vaccinations. Studies on the impacts of such intervention on the vaccine uptake are recommended.

Keywords: COVID-19 vaccination, concerns, knowledge, and Saudi Arabia

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Biography

- Professor and Senior Research Scientist, King Abdullah International Research Center (KAIMRC), Riyadh, KSA.
- Professor of Family Health, Alexandria University, Alexandria, Egypt.
- WHO regional Consultant in Adolescent & School Health, EMRO.
- Ex-Chairperson of the Research Council of the American School Health Association, USA.
- An Author of >300 peer-reviewed publications, books, and chapters.
- An editor of many international journals.
- Featured among the world's top 2% most-cited scientists for the last 5 years.
- Awarded the Saudi MNGHA Senior Research Award, 2011.
- Awarded Alexandria University's "Outstanding Scientific Achievement in Medical Sciences Award," 2006, Egypt.

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Dr. Bernard Klemenzenz

Locally GP -Fellow of the Royal College of General Practitioner,
UK

Reflective Journaling, diagnostic reasoning, evidence based physical examination together with Gut Feelings and Empathy -a way forward to improve nursing care

Nurses with their holistic based patients approach combined with their nursing and medical skills are at the centre of patients care, who have increasing complex health care needs. The nurses role has evolved over the years and nurse practitioners are at the forefront of medical practice working together in multidisciplinary teams.

As part of the nurses competencies, the nurse need to conduct comprehensive patient assessments by listening to the patient story, reviewing the patient's past records, performing an evidence based physical examination (1,2) and apply diagnostic reasoning to identify health needs, problems and diagnosis according to the competencies for Nurse Practitioners 2020. (3). Reflective journaling can enhance learning from mistakes, improve critical thinking and clinical reasoning. It can foster personal and professional development, stress management and emotional wellbeing. Reflective journaling is essential to structure our reflexion and critical thinking and identify gaps in our knowledge to improve future nursing care (4).

The clinical reasoning process is a lifelong learning process, which is feed by learning pattern recognition, with a sound knowledge base, reflexion in action and a patient centred approach in order to collect essential clinical information.

Understanding the underlying mechanism of clinical mistakes being essential to prevent them (5). Gut feeling can further assist the diagnostic accuracy (6). Empathy is essential in nursing care and vital for improving diagnostic reasoning and it facilitates better clinical decision making and patients care (7).

Practicing mindfulness, in addition to clinical reasoning, helps not only in clinical teaching (8), but enhances the focus and the observation, reduces cognitive bias and improves communication (9).

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Biography

Dr. Bernard Klemenzenz is a distinguished General Practitioner based in Portsmouth, UK, affiliated with Uni-City Medical Centre. He is a Fellow of the Royal College of General Practitioners (RCGP), an institution dedicated to advancing general practice through education, research, and clinical standards. Additionally, Dr. Klemenzenz is a member of the American Academy of Family Physicians (AAFP), reflecting his commitment to family medicine on an international scale. Dr. Klemenzenz has actively contributed to medical education, participating in international conferences such as the Association for Medical Education in Europe (AMEE), where he has presented on topics related to health professional education. His involvement with AMEE underscores his dedication to improving medical training and practice globally. With a career spanning several decades, Dr. Klemenzenz is recognized for his contributions to general practice and medical education. His work continues to influence both clinical practice and the training of future healthcare professionals.

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Tuğba Öz

Faculty of Health Sciences, Department of Nursing, Istanbul
Beykent University, Istanbul, Turkey

An Innovative Approach to Patient Education in Gynaecology and Obstetrics; Spotify

Today, healthcare services in gynaecology and obstetrics aim for women to be independent in care and to provide self-management. At this point, the nurse's role as an educator in gynaecology and obstetrics has gained importance, and the patient education process should be carried out in line with the needs and characteristics of women. Therefore, using new technologies in the planning and implementation of patient education will increase the quality of education by providing practical education in a systematic, fast, and easy way. The use of Spotify, one of the new technologies, in patient education in gynaecology and obstetrics will enable women to access education easily at any time, place, and even position. Preferring Spotify in patient education in gynaecology and obstetrics will enable women to gain independence and healthy behaviour by respecting themselves. Spotify-supported podcasts prepared on the topics of breast self-examination, vulva self-examination, the importance and application of kegel exercise, evaluation of reproductive and sexual health, sexually transmitted diseases, infections and prevention methods, family planning methods, menopause and menopause counseling, and osteoporosis education can be used by nurses for educational purposes. Pre- and post-discharge training for patients undergoing gynecological treatment operations can be done more effectively with Spotify-supported podcasts. In obstetrics, Spotify-supported podcasts can help with preconception care, physiological changes, complaints, and risky situations that occur during pregnancy, daily life and nutrition during pregnancy, maternal role and communication, maternity preparation for birth, pain control in labor and delivery, postpartum period and breastfeeding, newborn care, and exercise training during pregnancy. The preference for Spotify as an innovative approach to patient education in gynaecology and obstetrics is of great importance in digital health applications.

Keywords: Gynaecology, Obstetrics, Patient education, Spotify

Biography

Assistant Professor Tuğba ÖZ graduated from Hacettepe University, Faculty of Health Sciences, Department of Nursing. She received her master's (2019) and doctorate (2024) degrees from Marmara University-Institute of Health Sciences, Department of Obstetrics and Gynecology Nursing. She has various studies and publications in obstetrics and gynecology, such as Episiotomy, Gynaecological Day Surgery, and IUD application, and is interested in innovative approaches to care, such as virtual reality. She is a member of the Women's Health Nursing Association, Reproductive Health and Infertility Nursing Association, and Turkish Urogynecology and Pelvic Reconstructive Surgery Association. She is an Assistant Professor in the Department of Nursing, Faculty of Health Sciences, Beykent University, Istanbul, Turkey.

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Tugce Akyol¹, İnci Aslan Oguz²

¹Afyon Kocatepe University, Afyonkarahisar, Turkey

²Afyonkarahisar State Hospital, Afyonkarahisar, Turkey

Pediatricians' and nurses' views on child participation in health services: A Case Study from Turkey

The United Nations Committee on the Rights of the Child General Comment No. 12 states that arrangements should be made for child participation in health services. One of these arrangements is that children should be consulted in the planning and programming services related to their health and development. Child participation in health services is regulated within the framework of patient rights. It is stated that child participation in health services can be ensured by ensuring that patient participation mechanisms are specific to children. The views of professionals working with children regarding child participation are critical in taking into account the participation rights of children and raising social awareness. Health professionals' views on child participation will directly affect their practices for ensuring child participation in health services and their interactions with children. Based on all these, this study aims to determine the views of paediatricians and pediatric nurses on child participation in health services. In this study, a case study from qualitative research methods was used. The study group of this research consisted of a total of 10 health professionals, 5 paediatricians and 5 pediatric nurses, working in a state hospital in a provincial centre in the inner Aegean region of Turkey. Convenience sampling was used to determine the study group. In this study, a semi-structured interview form consisting of 8 open-ended questions to be prepared by the researchers was used as a data collection tool. The data of the research is in the process of collection and the results of the research will be shared with the participants at the congress. It is thought that the results of this research will offer a different perspective to the research in the literature on children's right to participation in health services and the results obtained will contribute to the research on children's right to participation.

Keywords: participation, participation right, paediatricians, pediatric nurses

Biography

Dr. Tuğçe Akyol is an Associate Professor of Preschool Education in the Faculty of Education at Afyon Kocatepe University, Turkey. She earned her Bachelor's degree in Basic Education from Ege University, followed by her Master's and Ph.D. in Preschool Education from Hacettepe University. Since joining Afyon Kocatepe University in 2018, she has taught courses in early childhood education and mentored numerous graduate students. Dr. Akyol's academic work focuses on project-based learning, early literacy, environmental education, and child participation. She has published widely in national and international journals, contributing valuable insights into innovative and participatory approaches in early childhood settings. In 2019, she was honored with the "Education for Sustainable Development" award at the OMEP World Early Childhood Education Congress for her project titled "From Theory to Practice." Dr. Akyol continues to influence the field through her teaching, research, and commitment to advancing sustainable and inclusive practices in early childhood education.

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Prof. Dr. Habil. Bernd Blobel, FACMI, FACHI, FHL7, FEFMI, FIAHSI^{1,2,3,4}

¹University of Regensburg, Medical Faculty, Regensburg, Germany

²Charles University Prague, First Medical Faculty, Prague, Czech Republic

³Faculty European Campus Rottal-Inn, Deggendorf Institute of Technology, Deggendorf, Germany

⁴University of Genoa, DIBRIS, Genoa, Italy

Designing and Managing Intelligent and Ethical Transformed Health and Social Care 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.

Biography

Dr. Bernd Blobel received a multi-disciplinary education, covering mathematics, physics, systems engineering, electronics, medicine, informatics and medical informatics, including habilitations in medicine and informatics. He was Head of the Institute for Biometrics and Medical Informatics at the University of Magdeburg, and then Head of the Health Telematics Project Group at the Fraunhofer IIS in Erlangen. Thereafter, he acted until his retirement as Head of the German National eHealth Competence Center at the University of Regensburg. He was leadingly involved in many countries health digitalization as well as electronic health record strategy. He was and is still engaged in international standardization at ISO, CEN, HL7, OMG, IEEE etc. Furthermore, he still engaged in international higher education. His publications can be found at <https://epub.uni-regensburg.de/view/people/Blobel=3ABernd=3A=3A.html>

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Alexander Plakida¹, Irina Babova²

¹Odessa National Medical University, Odessa, Ukraine

²South Ukrainian National Pedagogical University named after K.D. Ushinsky, Odessa, Ukraine

Features of ECG registration and interpretation in patients with amputated limbs

The number of patients with limb amputations increases annually worldwide. The most common causes of limb loss are vascular diseases (54%) and trauma (45%). In 2019, there were 552.45 million new cases of traumatic amputation worldwide, up from 370.25 million in 1990. A special reason is injury during military conflicts. Since the beginning of the large-scale war in Ukraine, the number of amputees has increased by 50 thousand per year, and their number continues to grow. The severity of the injury and the need for complex surgical interventions (often repeated) lead to a deterioration in the functional state of the cardiovascular system. In patients after traumatic lower limb amputation, the probability of myocardial infarction is approximately 19.8-42.1%, hypertension - 42.7-80.3%, hyperlipidemia - 37.6%. In addition, compared with distal amputation, proximal amputation has a higher incidence of cardiovascular disease (63.1% vs. 76.6%), and compared with unilateral amputation, bilateral lower limb amputation is associated with an additional increase in the incidence of cardiovascular disease. Electrocardiography (ECG) is one of the primary non-invasive methods for diagnosing cardiovascular diseases. However, performing a standard ECG can be difficult in patients with limb amputations since the classic 12-lead ECG involves placing electrodes on the wrists and ankles. The main problems are the lack of standard points for applying electrodes, violation of the symmetry of currents and electrical axes, changes in tissue resistance, and the possibility of artifacts appearing. To overcome these difficulties, ECG recording in patients with amputated limbs requires an individual approach, careful selection of electrode placement sites, and careful interpretation of the data obtained. Compliance with the principles of symmetry, correct documentation, and the use of modified methods allow for preserving the diagnostic value of the ECG even with anatomical limitations.

Biography

Professor Alexander Plakida is a senior academic at the Department of Physical Rehabilitation, Sports Medicine, and Physical Training at Odessa National Medical University (ONMU), Ukraine. He holds a PhD and is well-recognized for his contributions to the fields of functional rehabilitation and cardiovascular health. His research includes significant studies on COVID-19-related cardiovascular disorders, highlighting myocardial damage and treatment implications. He has also presented findings on gender-specific outcomes in coronary heart disease rehabilitation and explored the benefits of *Chlorella vulgaris* supplementation in healthy individuals. As a dedicated educator and researcher, Professor Plakida plays an active role in advancing evidence-based rehabilitation methods, particularly in the areas of cardiovascular recovery and integrative health practices. Through his academic leadership and scholarly work, he continues to contribute to the development of physical and sports medicine in Ukraine, while helping to shape the next generation of healthcare professionals at Odessa National Medical University.

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Joyce Simard MSW

Adjunct Associate Professor School of Nursing and Midwifery,
College of Health and Sciences Western Sydney, 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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Arumugam Raman¹ and Ruowei Wang²

¹School of Education, Universiti Utara Malaysia

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Systematic literature review on the effects of blended learning in nursing education

This systematic literature review aimed to comprehensively analyze and evaluate the effects of blended learning in nursing education. Blended learning, which integrates face-to-face and online instruction, has become increasingly vital in nursing education—especially in the post-COVID-19 era—by addressing challenges related to flexibility, accessibility, and integrating theoretical knowledge with practical skills. While previous reviews have explored its role, many were narrow in scope and lacked a holistic view of its broader educational impact. Guided by the PRISMA framework, a rigorous search was conducted across seven major databases—PubMed, CINAHL, Web of Science, EMBASE, ERIC, Scopus, and the Cochrane Library—for studies published from 2000 to June 26, 2024. After two reviewers' independent screening and data extraction, 54 studies were included in the final analysis. The findings demonstrated that blended learning positively influenced nursing students across five key domains: (1) academic performance and skill development, (2) learning engagement and motivation, (3) self-management in learning, (4) psychological and emotional well-being, and (5) learning experience and satisfaction. These dimensions were synthesized into a conceptual model illustrating the multi-dimensional benefits of blended learning. However, critical research gaps were also identified, such as limited randomized controlled trials and insufficient exploration of its effects on students' mental health and clinical thinking. Overall, the review concludes that blended learning offers substantial advantages over traditional methods and fosters a more holistic nursing education experience, although further high-quality empirical studies are needed to strengthen the evidence base and address remaining uncertainties.

Keywords: Blended learning, Nursing students, Nursing Education, Systematic literature review

Biography

Dr. Arumugam Raman is an esteemed academic and researcher from Malaysia, currently serving as an Associate Professor at the School of Education and Modern Languages, Universiti Utara Malaysia (UUM). With a strong background in instructional technology and educational research, he has contributed significantly to the fields of ICT in education, research methodology, and educational leadership. Dr. Raman holds a PhD in Computers in Education, alongside degrees in economics and information technology. Over the years, he has been actively involved in numerous national research projects and has published extensively in international journals. His research interests include technology integration in teaching and learning, blended learning environments, and quantitative modeling using PLS-SEM. He is also a passionate educator, known for mentoring postgraduate students and guiding them in academic research. Dr. Raman frequently collaborates with scholars across the globe and serves on editorial boards of various educational journals, promoting innovation and excellence in higher education.

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Prakash Shashi

Department of Gastroenterology Nursing, Faculty of Nursing, Govt College of Nursing, S. N. Medical College, Agra, Uttar Pradesh, India

Effectiveness of Concept Mapping in Enhancing Knowledge Regarding Dengue Among Health Profession Students: A Quasi-Experimental Study

In health profession education, effective instruction is essential, particularly when discussing significant health issues like dengue. Deep knowledge is frequently not fostered by conventional instructional techniques like lectures. Concept mapping, on the other hand, is an active learning technique that fosters critical thinking by assisting students in organizing and integrating their information. In comparison to conventional lecture techniques, the purpose of this study is to assess how well idea mapping enhances nursing students' understanding of dengue. Sixty nursing students from two institutions—Uttar Pradesh's University of Medical Sciences Nursing College (30 students) and J.K. College of General Nursing (30 students)—were chosen by simple random sampling in a quasi-experimental (Pretest-Posttest) design. Concept mapping was used to teach the experimental group (UPUMS), whereas conventional lectures were given to the control group (J.K. College). A self-structured knowledge questionnaire that was given both before and after the intervention was used to gauge participants' knowledge of dengue. Both descriptive and inferential statistics were used to analyze the data. The experimental group's mean pretest knowledge score (concept mapping) was 18.86 (SD=3.43), while the lecture method control groups were 17.03 (SD=4.39). Following the intervention, the experimental group's mean post-test score increased dramatically to 27.46, whereas the control group's score increased somewhat to 20.45. The experimental group exhibited a highly significant difference in knowledge improvement ($t=5.60$, $p<0.001$), while the control group showed no significant difference ($t=2.57$, $p=0.05$), according to a 't' test. When compared to conventional lecture techniques, concept mapping greatly increased nursing students' understanding of dengue. According to the findings, idea mapping is a more successful teaching method that improves comprehension and retention. To improve students' educational experiences, nursing educators should think about introducing concept mapping into their courses.

Keywords: Concept Mapping; Dengue; Health Profession Students; Quasi-Experimental Study; Knowledge Enhancement; Active Learning

Biography

Shashi Prakash is a nursing faculty member at the Government College of Nursing, affiliated with Sarojini Naidu Medical College (S.N. Medical College) in Agra, Uttar Pradesh, India. In his role, he specializes in medical-surgical nursing with a sub-specialty in gastroenterology. He has contributed to the field through research and publications, including articles on mucormycosis in the post-COVID era and recurrent high-grade astrocytoma. Additionally, he serves as the Media Coordinator for the Nursing Teachers Association India (NTAI) in the Agra Zone of the Uttar Pradesh Branch.

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Prakash Shashi

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COMPARISON IN STRESS AMONG WORKING WOMEN AND NON-WORKING WOMEN

Background

Stress is a part of modern life, with increasing complexity of life, stress is likely to increase. Stress is built in the concept of role, which is conceived as the position a person occupies in a system. Stress affects not only our physical health but our mental well-being, too. To successfully manage stress in everyday lives, individual can learn to relax and enjoy life. Women in modern global world have to play a dual role as housewife and career builder. Aim: The present investigation was conducted to compare the level of stress among the working and non-working women and to find out association of their stress with socio-demographic characteristics.

Methods

Quantitative research approach with non-experimental descriptive (comparative) research design was used. A comparative study was done at selected communities of Etawah with 65 working women and 65 non-working women, were selected by non-probability convenient sampling technique. Demographic tool and the standard tool (Perceived stress scale) were administered to working women and non-working women.

Result

The overall mean of the level of stress was 25.55 (± 8.103) for working women and 13.17 (± 7.266) for non-working women. The calculated 't' value was 9.171 which was very highly statistically significant at $P < 0.001$. There was significant association of level of stress with the demographic variable 'educational qualification', 'socioeconomic status' and 'nature of work' for working women and 'educational qualification' and 'socioeconomic status' for non-working women which was highly statistically significant at $P < 0.05$.

Conclusion

The study concluded that there was significant difference between the levels of stress among working and non-working women. The study revealed that working women need to have guidance on effective stress management measures.

Keywords: stress; perceived stress scale; working women; non-working women

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Biography

Shashi Prakash is a nursing faculty member at the Government College of Nursing, affiliated with Sarojini Naidu Medical College (S.N. Medical College) in Agra, Uttar Pradesh, India. In his role, he specializes in medical-surgical nursing with a sub-specialty in gastroenterology. He has contributed to the field through research and publications, including articles on mucormycosis in the post-COVID era and recurrent high-grade astrocytoma. Additionally, he serves as the Media Coordinator for the Nursing Teachers Association India (NTAI) in the Agra Zone of the Uttar Pradesh Branch.



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