



**MAHARISHI
MARKANDESHWAR**
(DEEMED TO BE UNIVERSITY)
Mullana-Ambala, Haryana



NAAC 'A++'

Graded as
Category - I by **UGC**

19th ANNUAL WORKSHOP NURSING PROFESSIONALISM : BEYOND COMPETENCE TO EXCELLENCE

 **7th April, 2026**

5 CNE Hours/ 1 CNE Credit Granted by Indian Nursing Council

CHIEF GUEST



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HIGHLIGHTS OF WORKSHOP

- Podcast Showcase
- Poster Presentation
- Oral Presentation
- Quiz competition

Organized by **M.M. College of Nursing Mullana Ambala (Haryana)**

Aim of Workshop

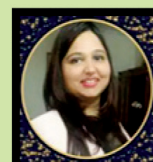
- To enhance understanding of nursing professionalism and professional values in contemporary healthcare practice.
- To strengthen ethical practice, accountability, and leadership qualities among nursing professionals and scholars.
- To promote professional excellence beyond basic competency through reflective practice, critical thinking, and commitment to quality care.
- To encourage professional growth and adherence to standards of nursing practice in clinical, educational, and research settings.

Patronage**Chief Patron**

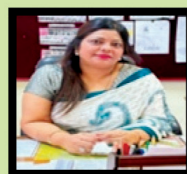
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Patrons

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M.Sc. Nursing 2nd Year Students (Batch: 2024-2026)



Proceedings of the 19th Annual Workshop Nursing Professionalism Beyond: Competence to Excellence

Overview

The 19th Annual Workshop Nursing Professionalism Beyond Competence to Excellence took place at the M.M. College of Nursing, Maharishi Markandeshwar (Deemed to be) University, Mullana, Ambala, Haryana on 7 April 2026. A total of 135 participants including delegates from various states: Himachal Pradesh, Punjab, Haryana, Odisha, Goa, Jammu and Kashmir, Madhya Pradesh and Delhi-NCR, attended the event to engage in scholarly exchange and professional development. The workshop featured a diverse range of academic and competitive activities, including oral presentations, e-poster presentations, and podcast showcases on 6th April 2026, along with an online quiz competition and game pedagogy exhibition on 7th April 2026. The workshop commenced with insightful panel discussion on “Advancing Evidence-Based Nursing: Closing the Gap between Knowledge and Practice, Expert-led sessions covered plenary session I on “Redefining Professionalism: Beyond Clinical Competencies”, followed by Plenary Session II on “Future-Ready Nurses: Building AI Competencies for Tomorrow’s Healthcare”. Discussions during the sessions focused on enhancing professional values, leadership competencies, ethical practice and the integration of emerging technologies such as artificial intelligence in nursing care. Particular emphasis was placed on bridging the gap between theoretical knowledge and clinical application through evidence-based practice, reflective learning and interactive pedagogical approaches. The quiz session served as an immersive learning strategy to reinforce knowledge, enhance critical thinking and promote active learning among participants in a competitive yet collaborative environment. The scientific program also included interactive hands-on sessions and reflective learning activities, fostering critical thinking, motivation and professional growth among participants. The workshop successfully highlighted the importance of professional values, innovation, and lifelong learning in nursing, while promoting interdisciplinary collaboration and academic excellence.

Conference Organisation

During the 19th Annual Workshop on “Nursing Professionalism: Beyond Competence to Excellence”, hosted by M.M. College of Nursing, M.M. (Deemed to be University), Mullana, Ambala, the organising committee, under the leadership of Dr. Jyoti Sarin (Workshop Chairperson) and the dedicated organising team, successfully brought together a diverse group of nursing professionals, academicians, and Students from across multiple states of India. M.M College of Nursing under the flagship of M.M. (Deemed to be University) has been consistently organising this annual workshop series for the past 19 years, The workshop served as a dynamic platform for scientific exchange and professional advancement in nursing practice and education. Building on the success of this event, the organisers expressed their commitment to further strengthening such academic initiatives in the future, with forthcoming workshops aimed at fostering innovation, research collaboration and excellence in nursing. Sincere thanks extended to Chief Patron Shri Tarsem Garg (Honourable Chancellor), Patron Dr. Vishal Garg (Secretary MMUT), Patron Ms. Meenakshi Garg (member, MMUT), Dr. Harish Kumar Sharma (Vice Chancellor) and Dr. B. Sridhar Reddy (Pro Vice-Chancellor).

Participants were undergraduate and postgraduate nursing students, educators and early-career professionals from a diverse range of institutions, including M.M College of Nursing (MMDU Mullana), M.M Institute of Nursing (MMDU Mullana), M.M School of Nursing (MMDU Mullana), College of Nursing (MMU Sadopur), College of Nursing (MMU Solan), College of Nursing Chitkara University, SKSS Saraswati College of Nursing, DMCH College of Nursing Ludhiana, J.P. Hospital, Gian Sagar College of Nursing, Bee Enn College of Nursing (Jammu), NMU Salem, LBS College of Nursing, Civil Hospital Karnal, CHC Barara, Medanta Hospital, Govt. ANM School and other academic and clinical settings, reflecting a broad spectrum of educational and healthcare Introductions.

Inaugural Ceremony

Esteemed dignitaries were Lt. Col. Sarita Sharma (Chief Guest), Dr. B. Sridhar Reddy (Pro Vice-Chancellor), Dr. Jyoti Sarin (Director-Principal MMCN, Mullana) Prof. Adiba Siddiqui (Professor Cum Principal MM School of Nursing, Mullana) and Dr. Vinay Kumari (Vice Principal MMCN, Mullana) distinguished leaders with exemplary contributions in academics, research and nursing practice. Theme Unfolding: This workshop on “Nursing Professionalism: Beyond Competence to Excellence” highlights the evolving role of nurses, emphasising the need for professional values, continuous learning, and excellence in practice. It serves as a platform for knowledge sharing, reflection and professional growth to strengthen nursing practice. The E-souvenir of the workshop was formally released, marking a significant milestone and symbolising the collective academic efforts and commitment to excellence. Exhibition on Game pedagogy showed Innovative game-based and skill-based learning approaches, such as “Injection Olympics”, “Brain Rush and Decode the Code” to enhance clinical competence, critical thinking and students engagement. These activities promote safe practices, decision-making, teamwork and confidence by simulating real-life clinical and emergency scenarios in an interactive environment, ultimately improving preparedness for effective patient care.

Panel Discussion

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The workshop commenced with a panel discussion on *Advancing Evidence based Nursing: Closing the gap between knowledge and practice*, moderated by Dr. Jyoti Sarin, Principal MM College of Nursing, with distinguished panellists.

The panel discussion underscored the persistent evidence–practice gap in nursing—the disconnect between validated research and its consistent application in clinical care. Despite strong evidence supporting interventions across specialties, implementation remains inconsistent due to knowledge and skill deficits, organisational barriers, workload pressures, staff shortages, weak monitoring, and resistance to change.

In medical-surgical nursing, proven strategies such as pressure injury prevention, early mobilisation, pain management, and respiratory care are not uniformly applied. Maternal and child health services show improved coverage but face gaps in antenatal adherence, individualised counselling, intranatal protocol use, and postnatal follow-up. Community health nursing demonstrates progress in exclusive breastfeeding rates, yet disparities persist due to sociocultural pressures, workplace challenges, and inadequate support. Mental health nursing has embraced digital interventions like telepsychiatry and CBT-based applications, but issues of access, privacy, and training limit their full potential.

The panel emphasised that bridging these gaps requires a coordinated approach: continuous education, standardised protocols, supportive leadership, regular audits, interdisciplinary collaboration, and patient involvement. Digital health technologies—including AI, electronic health records, and tele-nursing—were identified as transformative tools, provided nurses develop competencies in digital literacy, data interpretation, telehealth skills, and ethical practice. The discussion highlighted that while evidence-based practice has proven benefits, its consistent translation into care demands systemic reform, cultural change, and digital integration to ensure safe, effective, and patient-centered outcomes.

Plenary Session – I

Theme: Redefining Professionalism: Beyond Clinical Competencies

Topic: Key Note Address

“Leading the Heart of Healthcare: Inspiring Excellence through Nursing Leadership”

Speaker:

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Highlights of Topic:

Effective leadership is fundamental to the success of healthcare organisations, particularly in nursing, where it plays a critical role in ensuring quality, safety, and patient-centred care. Leadership can be understood as the ability to guide, influence, and motivate individuals to achieve common goals. In nursing practice, it involves not only directing teams but also fostering collaboration, enhancing performance, and adapting to dynamic clinical environments. Various leadership styles, including transformational, transactional, autocratic, and participative approaches, are applied based on situational needs. Transformational leadership, in particular, promotes innovation, motivation, and shared decision-making, while transactional leadership focuses on performance and accountability.

Nursing leadership further encompasses both relational and task-oriented approaches, balancing emotional intelligence with goal-directed performance. Effective nurse leaders demonstrate essential competencies such as clear communication, critical decision-making, interpersonal relationship-building, motivation, delegation, mentoring, and problem-solving. Emotional intelligence and organisational skills enable leaders to manage complex healthcare settings while maintaining team cohesion and patient safety. Additionally, professional and ethical integrity remains central to leadership, ensuring accountability and advocacy for both patients and staff.

In conclusion, effective nursing leadership requires flexibility, as no single leadership style is universally applicable. By integrating appropriate leadership approaches with core competencies, nurse leaders significantly enhance team performance, improve patient outcomes, and contribute to overall organisational effectiveness in healthcare systems.

Topic: “Innovations in Nursing Management and Professional Practice”

Speaker:

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Highlights of Topic:

Healthcare is undergoing rapid transformation with a strong focus on innovation, quality improvement, and patient-centered care. Nurses play a pivotal role in this evolution, acting as catalysts for change across clinical practice, leadership, education, and technology integration. Their frontline experience enables them to identify gaps in care and implement practical, evidence-based solutions. Nurse-led innovation, supported by critical thinking, collaboration, and clinical expertise, contributes to the development of improved care protocols, efficient processes, and strategies addressing social determinants of health. From the foundational work of pioneers like Florence Nightingale in infection control to modern advancements, nursing continues to drive meaningful change in healthcare.

Innovations led by nurses, such as wound care clinics, psychological support programs, and home-based monitoring systems, have demonstrated significant improvements in patient outcomes and healthcare efficiency. Nurses actively contribute to digital health technologies, patient safety initiatives, workflow optimisation, and advanced care delivery models, strengthening both operational effectiveness and quality of care. Key areas of innovation include technology integration, patient-centred care, leadership in policy and advocacy, nursing research and education, entrepreneurship, and public health initiatives.

In conclusion, nurses are not only caregivers but also innovators shaping the future of healthcare. By fostering nurse-led initiatives and supporting continuous professional development, healthcare systems can enhance care delivery, improve patient outcomes, and ensure sustainable, high-quality healthcare services.

Plenary Session – II

Theme: Future-Ready Nurses: Building AI Competencies for Tomorrow's Healthcares

Topic: “Human Touch in a Digital World: Balancing AI and Professional Nursing Care”

Speaker:

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Chief Operating Officer

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Highlights of Topic:

In the contemporary healthcare landscape, the integration of Artificial Intelligence (AI) and digital technologies is transforming care delivery by enhancing efficiency, accuracy, and clinical outcomes. Innovations such as smart monitoring systems, predictive analytics, and automated documentation are streamlining healthcare processes. However, despite these technological advancements, the core of nursing remains rooted in compassion, empathy, and human connection. Nursing is not merely a technical profession; it is a deeply human-centred practice where emotional intelligence, presence, and communication play a vital role in patient healing.

While AI supports clinical decision-making and reduces the burden of routine tasks, it cannot replace the personalised care and emotional support provided by nurses. The increasing reliance on technology presents both opportunities and challenges, particularly the risk of reduced patient interaction. Therefore, achieving a balance between “high-tech” and “high-touch” care is essential. By leveraging technology as an enabler, nurses can dedicate more time to patient engagement, holistic care, and emotional support.

In this evolving scenario, nurses are expanding their roles as caregivers, critical thinkers, patient advocates, and technology adopters. Developing digital competencies alongside strong interpersonal skills, ensuring ethical use of technology, and maintaining a patient-cantered approach are crucial. Ultimately, the future of nursing lies in harmonising technological advancements with compassionate care, where technology supports but never replaces the human touch that builds trust and promotes healing.

Topic: “AI-Enabled Nursing: Redefining Clinical Excellence in the Digital Era: Digital OSCE”

Speaker:

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Highlights of Topic:

In the evolving digital healthcare landscape, nursing education and practice are becoming increasingly structured, measurable, and aligned with real-world clinical demands. The integration of Digital Objective Structured Clinical Examination (OSCE) represents a significant advancement in competency-based assessment. Digital OSCE enhances the traditional method by incorporating standardised checklists, real-time scoring, and automated reporting, ensuring greater transparency, efficiency, and objectivity in evaluation.

Clinical competence in nursing extends beyond theoretical knowledge to include psychomotor skills, communication, clinical judgment, infection control, documentation, and professional behaviour. Digital OSCE enables systematic assessment of these domains across multiple stations, focusing on actual performance rather than subjective impressions. Its key strength lies in standardisation, minimising variability in evaluation and supporting fair, consistent decision-making in education, recruitment, and competency monitoring. Furthermore, Digital OSCE serves as a valuable tool for identifying learning gaps and training needs through data-driven insights, thereby enhancing the overall quality of nursing education. By promoting accuracy, accountability, and clinical readiness, it plays a crucial role in preparing nurses who are competent, confident, and well-equipped for modern healthcare practice.

Hands On/Interactive Session – I

“Reflection in Action: Reflective Learning for Nursing Practices”

Speakers:

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This session was conducted with the aim of enhancing reflective thinking and clinical decision-making skills among nursing professionals. The session focused on the concept of reflective learning and its application in improving nursing practice.

Case Scenario: While caring for a primigravida woman in active labour, I became overwhelmed by the busy shift and failed to record observations regularly on the partograph. As a result, the fetal heart rate dropped suddenly, requiring emergency intervention. At the time, I felt stressed and rushed, and after the incident I experienced anxiety and guilt, worrying about the safety of both mother and baby.

Reflecting on the situation, there were some positive aspects: the emergency intervention was carried out promptly, and complications were prevented. However, the negative aspects were significant, as inadequate monitoring led to missed early warning signs and a delay in identifying fetal distress.

On analysis, I realised that high workload and poor time management contributed to the incident. I failed to prioritise continuous fetal monitoring and did not strictly follow labour room protocols, particularly the use of the partograph. Timely reassessment was lacking, which further compounded the problem.

In conclusion, I should have ensured regular monitoring and documentation, sought help or delegated tasks when necessary, and adhered strictly to partograph guidelines. Moving forward, my action plan is to ensure strict use of the partograph for every labour case, set reminders for regular fetal heart monitoring, improve prioritisation and time management, and seek assistance during busy shifts to avoid missed care.

Hands On/Interactive Session – II

“Ignite The Inner Drive: Strategies for Inspiration and Motivation”

Speakers:**Dr. Senthil**

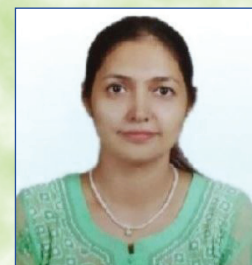
Professor,

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This interactive session was conducted as part of the workshop, with the objective of enhancing motivation, emotional resilience, and coping strategies among participants. The session adopted an experiential learning approach through role play to highlight real-life challenges faced by healthcare professionals, particularly nurses, in clinical settings:

The role play presented in the hospital setting depicted the everyday reality of nursing workload and emotional fatigue. Staff nurses expressed exhaustion from continuous admissions, repetitive queries from relatives, and lack of appreciation, highlighting that their tiredness was not only physical but also mental and emotional. An intern nurse raised the question of whether satisfaction is always experienced despite best efforts, which led to honest reflections from the senior nurses about feelings of monotony, lack of recognition, and emotional drain. The facilitator, a senior nurse educator, entered the scene and validated these experiences, emphasising that such emotions are common in healthcare and do not indicate incompetence but rather a need to reconnect with inner motivation. The session transitioned to a training room where participants reflected on why they chose nursing, identifying factors such as patient recovery, gratitude, pride in the profession, and opportunities for growth. Through activities like completing the sentences “I feel motivated at work when...” and “From today, I will take care of myself by...”, participants recognised their personal drivers and made commitments to self-care. The facilitator used analogies of a tree and the sun to illustrate resilience, nourishment, and renewal, reinforcing that self-care is essential for sustaining motivation and effective patient care. The session concluded with participants acknowledging their role as healers and silent warriors, committing to stress management, positivity, and confidence building. The role play demonstrated that emotional struggles are a natural part of nursing practice, and structured reflection combined with supportive facilitation can help nurses rediscover their motivation, reconnect with professional values, and enhance both personal well-being and patient care.

QUIZ COMPETITION

“Nurse Quest: From Competence to Excellence”

Coordinator:**Ms. Madhuchanda**

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**Highlights:**

This interactive quiz session was conducted as part of the workshop, with the objective of enhancing knowledge, reinforcing learning, and promoting active participation among Students. The session was organised in an engaging and competitive format using the Way ground Quizizz App, making the learning process more dynamic and enjoyable. The quiz comprised a total of 30 questions, covering emerging areas from the plenary sessions, including innovations in nursing management and professional practice, human touch in a digital world, leadership in healthcare, and AI-enabled nursing. The questions were designed to assess participants' understanding, critical thinking and application of concepts discussed during the sessions.

Participants actively engaged in the quiz, responding to questions through the digital platform, which provided real-time scoring and instant feedback. The use of technology created an interactive environment, encouraging enthusiasm, participation, and healthy competition among Students.

Throughout the session, participants demonstrated keen interest and involvement, reflecting effective knowledge retention from the workshop sessions. The quiz not only served as a tool for evaluation but also reinforced learning in an enjoyable and stress-free manner.

Before the plenary sessions, a pre-test was conducted among delegates to assess their baseline knowledge, which revealed a mean score of 7.29 ± 2.33 and following the entire day proceedings, a post-test (quiz) was administered to evaluate the effectiveness of the session, and the mean score increased to 14.22 ± 6.39 . The comparison of pre-test and post-test scores demonstrated a substantial improvement in knowledge among the participants. The mean difference in scores was found to be statistically highly significant ($p < 0.001$), indicating that the plenary session had a significant positive impact on enhancing the knowledge of the delegates.

GAME PEDAGOGY

Introduction to Game Pedagogy: Game pedagogy (also called game-based learning, or GBL) refers to an instructional approach in which games-digital or non-digital are intentionally integrated into educational contexts to achieve specific learning outcomes. It is an instructional approach that integrates game elements, mechanics, or full games into course learning activities to promote active engagement, motivation, and deeper exploration of topics. Games in this context are not just for fun but are intentionally aligned with learning Aim and transferable skills like critical thinking, collaboration, and problem-solving. At its theoretical core, constructivism is the learning theory that offers propositions closest to GBL, stating that students must be provided with tools that allow them to construct their own body of knowledge, with instructors serving as facilitators- statements strongly linked to the learner-centered education model and the active learning proposed by GBL.

Game pedagogy can be categorised into:

- Game-based Learning (GBL): Using actual games to teach concepts
- Gamification: Applying game elements (points, badges, leaderboards) in non-game contexts
- Simulation games: Real-life scenario-based learning

Aim of Game Pedagogy: The Aim of game pedagogy are to make learning more interesting and enjoyable for Students and to encourage active participation instead of passive listening. It helps Students understand concepts better through practical experience and improves their thinking and problem-solving skills. It also aims to increase memory and retention of the subject matter while promoting teamwork and communication among students. Additionally, game pedagogy provides quick feedback so that Students can learn from their mistakes and supports learning at an individual pace.

Importance of Game Pedagogy: Game pedagogy is important as it makes learning fun and engaging, thereby reducing boredom among Students. It helps Students learn by doing, which improves their understanding, and builds

confidence in students. It also develops important skills such as decision-making and teamwork while creating a stress-free learning environment. Furthermore, it encourages creativity and new ideas, helps in better academic performance, and is especially useful in practical fields like nursing and healthcare education.

The M.Sc. Nursing 1st year Students presented game-based learning in the workshop with great enthusiasm. They used simple and interactive activities to show how learning can be fun and effective. Their presentation highlighted the importance of active participation and thinking skills in nursing education.

- Game 1- Illusions delusional and hallucinations
- Game 2- MediMystery
- Game 3- Injection Olympics
- Game 4- Decode the Code
- Game 5- Brain Rush
- Game 6- Milestone Mission
- Game 7- Little hearts big decisions
- Game 8- Mom's BP Marathon

Glimpses of 19th Annual Workshop



Oral Paper Presentations

The session on Oral Paper Presentations was conducted as part of the workshop, providing a platform for Students to present their scholarly work and research findings. Participants presented abstracts on a variety of topics related to nursing practice, education, and clinical care.

Each presentation was evaluated based on content clarity, scientific relevance, organisation, and presentation skills. The session encouraged academic exchange, critical thinking, and evidence-based discussion among participants.

The abstracts of all oral paper presentations are compiled in the following pages:

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Impact of Intradialytic Leg Exercises on Pain, Fatigue, Sense of Well-being, and Sleep Quality among Patients Undergoing Haemodialysis: A Feasibility Study

CHANPREET KAUR¹, JYOTI SARIN², SAILABALA MOHANTY³

ABSTRACT

Introduction: Chronic Kidney Disease (CKD) is a growing global health concern, and patients undergoing haemodialysis commonly experience pain, fatigue, reduced sense of well-being, and poor sleep quality, adversely affecting their quality of life. Intradialytic exercises are considered a simple and cost-effective intervention to manage these symptoms.

Aim: To assess the feasibility and effectiveness of intradialytic leg exercises on pain, fatigue, sense of well-being, and sleep quality among patients undergoing haemodialysis.

Materials and Methods: A quantitative approach with a quasi-experimental, non-equivalent control group pretest–posttest design was used for the feasibility study. A total of 10 participants were selected through purposive sampling, with five in the experimental group and five in the comparison group. The experimental group performed intradialytic leg exercises during the second hour of dialysis for 4–6 times over 2 consecutive weeks, while the comparison group received routine care. Data were collected before and after the intervention using standardised and non-standardised tools. Descriptive and inferential statistics, including mean, standard deviation, paired t-test, independent t-test, chi-square test, and correlation coefficient, were used for analysis. Based on this study

findings, the estimated sample size for the final study was 85 participants, including an anticipated 10% attrition rate.

Results: Baseline findings showed moderate to high levels of pain 6.80 ± 0.837 and fatigue (7.60 ± 0.548) . Post-test results revealed a reduction in pain and fatigue scores and improvement in sense of well-being and sleep quality in the experimental group. Paired t-test analysis indicated improvement in the experimental group (pain: $t = -2.31$; fatigue: $t = -2.12$), while independent t-test comparison showed better outcomes than the comparison group, though statistical significance was limited due to small sample size. Correlation analysis revealed a negative relationship between pain and sleep quality ($r = -0.695$) and a positive relationship between fatigue and sense of well-being ($r = 0.825$).

Conclusion: The intradialytic leg exercises feasible, safe and easy to administer during hemodialysis and showed a significant improvement in decreasing pain, fatigue and improving sense of well-being and sleep quality among patients undergoing hemodialysis. It also provided valuable insights for refining the methodology for the main study.

Keywords: Chronic kidney disease, Fatigue, Hemodialysis patients, Intradialytic leg exercise, Pain, Quasi experimental, Sleep quality.

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Impact of Buerger-Allen Exercise on Lower Extremity Perfusion, Peripheral Neuropathy Symptoms and Risk for Foot Ulcer among Patients with Diabetes Mellitus: A Feasibility Study

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ABSTRACT

Introduction: Diabetes mellitus is associated with complications such as impaired circulation and peripheral neuropathy, increasing the risk of foot ulcer. Buerger-Allen exercise is a non-pharmacological intervention that may improve circulation and reduce these complications.

Aim: To evaluate the effectiveness of Buerger-Allen exercise on lower extremity perfusion, Peripheral Neuropathy Symptoms (PNS) and risk for development of foot ulcer among patients with Diabetes Mellitus.

Materials and Methods: A randomised controlled pretest-post test experimental design was adopted. The study was conducted on 10 patients (5 experimental and 5 control) selected using convenience sampling. Lower extremity perfusion was assessed using Ankle Brachial Index (ABI), PNS using Michigan Neuropathy Screening Instrument (MNSI), and risk for foot ulcer using modified NMAHS tool. The experimental group received Buerger-Allen exercise consisting of 45-degree leg elevation, 90-degree leg dependency, and horizontal resting position performed in cycles twice daily for 6 consecutive days, while the control group received routine care. Inferential statistics including paired t-test, independent t-test, and one-way Analysis of Variance (ANOVA) were used for data analysis. Based on the feasibility study findings, the calculated sample size for the final study was 70 participants including possible attrition rate.

Results: Posttest findings showed a statistically significant difference between experimental and control group in peripheral neuropathy symptoms (physical examination) ($t=3.35$, $p=0.01$). No statistically significant difference was observed in Right lower extremity perfusion ($t=1.19$, $p=0.26$), left lower extremity perfusion ($t=1.48$, $p=0.17$), peripheral neuropathy symptoms-History ($t=-2.12$, $p=0.06$), and risk for development of foot ulcer ($t=-1.86$, $p=0.09$). Within the experimental group, significant improvement was observed in the right lower extremity perfusion ($t=5.58$, $p=0.005$), left lower extremity perfusion ($t=5.94$, $p=0.02$), peripheral neuropathy symptoms-History ($t=6.5$, $p=0.003$), peripheral neuropathy symptoms-Physical examination ($t=11$, $p=0.001$), and risk for development of foot ulcer ($t=3.65$, $p=0.02$).

Conclusion: Based on the findings of the feasibility study, Buerger Allen exercise was found to be effective in improving lower extremity perfusion, reducing peripheral neuropathy symptoms, and decreasing the risk for development of foot ulcer among patients with diabetes mellitus. The intervention was feasible, safe, and easy to administer in the clinical setting.

Keywords: Ankle brachial index, Buerger-Allen exercise, Diabetes mellitus, Michigan neuropathy screening instrument.

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Assess the Effectiveness of Safe Delivery App in Terms of Midwifery Competencies among Nursing Students of Selected Nursing Colleges of Haryana: A Pilot Study

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ABSTRACT

Introduction: Competency-based midwifery education is essential for ensuring safe maternal and newborn care. Digital tools like the safe delivery app help improve nursing students' knowledge, clinical skills, and decision-making abilities. Continuous skill reinforcement is important for effective training in midwifery. Proper preparation of future midwives is vital for improving the quality of maternal and newborn health services and outcomes.

Aim: To assess the effectiveness of the safe delivery app on clinical competencies (knowledge, clinical skills, and clinical decision-making ability) among nursing students.

Materials and Methods: A pilot quasi-experimental study with a non-equivalent control group pre-test-post-test design was conducted among nursing students selected through purposive sampling. Participants were divided into experimental and comparison groups. Sample size will be 90 participants for final study. Data were collected using a structured knowledge questionnaire, a clinical decision-making questionnaire, and an observational checklist for skills assessment through OSCE. The experimental group received safe delivery app, while the comparison group received conventional teaching. Data were analysed using descriptive and inferential statistics (Chi-square test, t-test, ANOVA,

Correlation test) including independent t-test, paired t-test, and Pearson's correlation coefficient.

Results: The findings of the pilot study revealed that there was no significant difference in pre-test knowledge, clinical decision-making ability and skills scores between the experimental and comparison groups ($p > 0.05$). However, a significant improvement in post-test knowledge ($t = 6.17$, $p = 0.0001$) clinical decision-making ability ($t = 5.13$, $p = 0.0003$) and skills ($t = 2.24$, $p = 0.04$) was observed in the experimental group compared to the comparison group. Paired t-test results also showed significant improvement between pre-test and post-test scores within the experimental group. Majority of nursing students (70%) reported high satisfaction with the app.

Conclusion: The study concludes that the safe delivery app is effective in improving midwifery competencies (knowledge, clinical decision-making ability and skills) among nursing students. The experimental group showed significant improvement in post-test scores compared to the comparison group. Students also reported a good satisfaction regarding safe delivery app for improving midwifery competencies regarding maternal and newborn care.

Keywords: Clinical decision-making, Maternal and newborn care, Mobile learning.

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Development of Directive Screening of Heart Health Assessment (DiSHHA) for Identifying Cardiovascular Risk among People Residing in Community: A Feasibility Study

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ABSTRACT

Introduction: Cardiovascular Diseases (CVDs) are a major cause of illness and death worldwide. Early identification of risk factors using a standardised assessment tool helps in prevention and timely management of heart diseases. Therefore, the DiSHHA tool was developed to identify cardiovascular risk and promote better heart health among individuals attending screening centres.

Aim: To develop and validate Directive Screening of Heart Health Assessment (DiSHHA) tool for identification of cardiovascular risk among adults residing in selected community of Ambala, Haryana.

Materials and Methods: A methodological research approach was adopted for the development and validation of the DiSHHA tool. The preliminary version of the tool consisted of six domains related to anthropometric measurements, individual and family history, dietary pattern, physical activity, pharmacological history, and biophysical measurements influencing cardiovascular health. Content validation of the tool was carried out using the Modified Delphi Technique with a panel of 15 experts from the fields of cardiology, medical-surgical nursing, and community health nursing. More than 80% consensus was achieved after 4 Delphi rounds, and the final version of the tool was prepared. After content validation, the final draft of the DiSHHA tool consisted of seven domains i.e., anthropometric measurement, individual history, biophysical measurement, daily living activity, dietary pattern, substance abuse, and pharmacological history. A pilot study was conducted among 30 adults selected from the

community settings of Ambala, Haryana, to determine the feasibility and applicability of the tool. Data were collected through interview method, self-report technique, and biophysical measurements. Content validity and face validity were established through expert opinion, and Content Validity Index (CVI) was calculated. The finalised tool was administered among adults in selected settings to determine its feasibility and applicability. To assess the internal consistency of the tool, Cronbach's alpha coefficient was calculated, which indicated good reliability of the instrument.

Results: DiSHHA revealed satisfactory content validity (I-CVI=0.91; S-CVI=0.83), internal consistency (Cronbach's alpha=0.744). Concurrent validity with FRS showed a strong positive correlation ($r=0.718$, $p=0.001$). The Kaiser-Meyer-Olkin (KMO) value of 0.500 and significant Bartlett's test ($p=0.001$) confirmed adequacy for factor analysis. The optimal cut-off score >0.5 showed sensitivity of (0.895), specificity of (0.0909). The Exploratory Factor Analysis (EFA) revealing a 7-factor structure explaining significant variance and supporting satisfactory construct validity for DiSHHA.

Conclusion: The findings of the study revealed that the DiSHHA tool is a reliable and valid instrument for directive screening of heart health and can be effectively used by healthcare professionals, particularly nurses, for early identification and prevention of cardiovascular diseases.

Keywords: Content validity index, Exploratory factor analysis, Kaiser-Meyer-Olkin.

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Effectiveness of Modular Learning Regarding Personality Development in Terms of Knowledge and Skills: A Pilot Study

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ABSTRACT

Introduction: Personality refers to the unique way in which an individual's mind and body interact, enabling them to adapt to their environment. Personality development enhances self-awareness by helping individuals recognise their strengths and abilities, thereby building confidence and improving their interactions with the world around them. Modular learning regarding personality development is a powerful way to teach the students about personality development.

Aim: This study aimed to evaluate the effectiveness of modular learning in enhancing nursing student's knowledge and skills on personality development.

Materials and Methods: A quasi-experimental study using non-equivalent control group pre-test and post-test design was conducted at Maharishi Markandeshwar College of Nursing, Mullana, Ambala and Maharishi Markandeshwar College of Nursing, Sadopur, Ambala, Haryana. The study included 20 Post Basic B.Sc. Nursing 1st year students selected by using convenient sampling technique to experimental group (n=10) and comparison group (n=10). Data collection involved selected variables, a structured knowledge questionnaire and a structured observational checklist. The personality development module was administered over four

days, followed by a post-test conducted on 15day. Data were analysed using descriptive and inferential statistics including Chi square test, independent t-test, paired t-test and coefficient of correlation.

Results: The study revealed a significant improvement in both knowledge and skill scores after the modular learning intervention. In experimental group, mean post-test knowledge and skill scores (25.60 ± 2.11), (6.09 ± 2.25) and ($t=3.78$, $p=0.01$), ($t=3.15$, $p=0.03$) was higher than comparison group knowledge and skill scores (17.30 ± 3.65), (3.77 ± 1.74) and ($t=1.05$, $p=0.01$), ($t=0.13$, $p=0.89$) after the modular learning regarding personality development. In experimental group, paired t-test showed statistically significant improvement ($p<0.01$) in knowledge as well as skill scores. The findings indicated a significant positive correlation between knowledge and skill scores in the experimental group compared to the comparison group.

Conclusion: The pilot study concluded that modular learning effectively enhanced nursing student's knowledge and skills in personality development making it a valuable educational tool in nursing curricula.

Keywords: Knowledge, Modular learning, Nursing students, Personality development, Skills.

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Effectiveness of Simulation-based Activity Regarding Cyberbullying on Anxiety, Aggression and Self-esteem among Adolescents: A Pilot Study

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ABSTRACT

Introduction: Cyberbullying has emerged as a major psychosocial and public health concern among adolescents due to increased use of smartphones, social media, and online communication. Victims often experience anxiety, aggression, emotional distress, and low self-esteem, adversely affecting their academic and psychosocial wellbeing. Simulation-based educational activities may help adolescents develop awareness, coping skills, empathy, and emotional regulation related to cyberbullying.

Aim: To assess and compare anxiety, aggression, and self-esteem among adolescents before and after a simulation-based cyberbullying activity in experimental and comparison groups; to identify relationships among anxiety, aggression, and self-esteem; and to determine associations between these variables and selected demographic characteristics.

Materials and methods: A quantitative quasi-experimental non-equivalent control group pre-test post-test pilot study was conducted among adolescents aged 15–18 years in selected schools of Ambala, Haryana. Initially, 200 adolescents were screened using the Modified European Cyberbullying Intervention Project Questionnaire (ECIPQ). Forty cyber-victimised adolescents were selected through total enumerative sampling and assigned to experimental (n=20) and comparison (n=20) groups. The intervention consisted of a 25-minute simulation-based activity including animated cyberbullying

scenarios, coping strategies, empathy training, and group discussion. Data were collected using the Cyberbullying-Related Anxiety Scale, Modified Aggression Scale, and Rosenberg Self-Esteem Scale. Statistical analysis was performed using descriptive and inferential statistics in IBM SPSS. Sample size for the main study was estimated using G*Power software (effect size $d=0.50$, $\alpha=0.05$, power=0.95), resulting in a final estimated sample of 250 adolescents after accounting for attrition.

Results: In the experimental group, anxiety scores significantly decreased from 48.35 ± 8.24 to 31.10 ± 6.42 ($t=8.96$, $p<0.001$), while aggression scores reduced from 39.80 ± 7.16 to 24.65 ± 5.83 ($t=7.84$, $p<0.001$). Self-esteem scores improved from 18.75 ± 4.52 to 29.40 ± 5.11 ($t=-9.12$, $p<0.001$). No significant changes were observed in the comparison group. Anxiety showed a positive correlation with aggression ($r=0.62$, $p<0.001$) and a negative correlation with self-esteem ($r=-0.58$, $p<0.001$). Minimal attrition (<5%) confirmed study feasibility.

Conclusion: The pilot study demonstrated that simulation-based cyberbullying intervention is feasible and effective in reducing anxiety and aggression while improving self-esteem among adolescents, supporting its integration into school health nursing programmes.

Keywords: Aggression, Anxiety, Cyberbullying, Simulation based learning, Self-esteem.

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Assess the Effectiveness of Pulmonary Rehabilitation Programme on Physiological and Psychological Variables among Patients with Pulmonary Tuberculosis: A Feasibility Study

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ABSTRACT

Introduction: Pulmonary Tuberculosis (PTB) adversely affects physiological and psychological health, leading to impaired quality of life. Pulmonary Rehabilitation Programme (PRP) is an effective non-pharmacological intervention aimed at improving these outcomes.

Objective: This study assessed the effectiveness of PRP among PTB patients.

Materials and Methods: A quasi-experimental non-equivalent control group pretest–posttest design was adopted. The study was conducted on 10 PTB patients (experimental n=5; comparison n=5) at MMIMS&R Hospital, Mullana. The experimental group received PRP, including breathing exercises (deep breathing, pursed-lip, diaphragmatic and pranayama: anulom-vilom), twice daily for 5 days, while the comparison group received routine care. Data were collected using modified Medical Research Council (mMRC) dyspnoea scale, physiological parameters, Hospital Anxiety and Depression Scale (HADS), and Rosenberg Self-Esteem Scale. Inferential statistics including independent t-test, RM-Anova

and one-way ANOVA were used for data analysis. Based on the previous study findings, the calculated sample size for the final study will be 70 participants including possible attrition rate.

Results: The experimental group showed improvement in physiological and psychological variables post-intervention. Dyspnea reduced from 3.00 ± 0.70 to 2.00 ± 0.70 , SpO_2 improved from 96.7 ± 0.85 to 97.4 ± 0.54 , and respiratory rate showed statistically significant improvement ($t=4.0$, $p=0.01$). Psychological variables also improved, with reduction in anxiety (3.00 to 2.60) and depression (2.80 to 2.60), and increase in self-esteem (1.40 to 2.00), compared to minimal or no change in the comparison group.

Conclusion: PRP was found to be an effective, safe, and cost-effective adjunct to routine care in improving both physiological and psychological outcomes among PTB patients. Its integration into standard TB management is recommended to promote holistic recovery.

Keywords: Hospital anxiety and depression scale, Pulmonary tuberculosis patients, Rosenberg self-esteem scale, Quality of life.

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“Chemo-Radiation Induced Oral Mucositis Assessment Scale” (CRIO-MAS) to Monitor Symptom Severity among Cancer Patients Receiving Treatment Modalities in Selected Hospitals of Ambala, Haryana: A Pilot Study

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ABSTRACT

Introduction: Oral mucositis is a common and debilitating complication among cancer patients undergoing chemotherapy and radiotherapy, significantly affecting nutritional intake, communication, treatment compliance, and overall quality of life. Despite its high prevalence, there is a lack of comprehensive and standardised instruments for assessing the severity of chemo-radiation-induced oral mucositis. Therefore, the present methodological study was undertaken to develop, validate, and assess the feasibility of the Chemo-Radiation Induced Oral Mucositis Assessment Scale (CRIO-MAS) for effective clinical assessment and symptom monitoring.

Materials and Methods: A methodological research design was adopted for the development and validation of the CRIO MAS; items were generated through literature review and clinical observations. Content validity was established using the modified Delphi technique with 15 experts through four Delphi rounds using a controlled feedback method to achieve consensus on the relevance and clarity of the items. Reliability was assessed through internal consistency and inter-rater reliability. Pilot testing and feasibility assessment were conducted among 50 cancer patients to evaluate the applicability and practicability of the tool. Construct validity and sample suitability will be assessed by using exploratory factor analysis, Kaiser-Meyer-Olkin (KMO) measure, and Bartlett's Test of Sphericity, while diagnostic accuracy was evaluated using Receiver Operating Characteristic (ROC) curve analysis. The final study will

be conducted among 170 cancer patients receiving chemotherapy and/or radiotherapy selected through purposive sampling.

Results: Diagnostic accuracy analysis was performed to determine the optimal cutoff point of the CRIO-MAS for identifying the severity of oral mucositis among cancer patients. A cutoff score of >11.50 was identified as the most appropriate threshold, demonstrating a sensitivity of 94.9% and specificity of 72.7%. The Positive Predictive Value (PPV) was 92.5%, indicating a high probability of correctly identifying patients with oral mucositis, while the Negative Predictive Value (NPV) was 80.1%, reflecting the tool's ability to accurately identify patients without significant mucositis. These findings indicate that the CRIO-MAS possesses good diagnostic accuracy and can effectively be utilised for early detection and clinical assessment of chemo-radiation-induced oral mucositis.

Conclusion: The CRIO-MAS was found to be a feasible, valid, and reliable instrument for assessing chemo-radiation-induced oral mucositis among cancer patients. The scale demonstrated strong content validity, construct validity, reliability, and diagnostic accuracy. Its use in clinical practice can support early identification, systematic assessment, and timely management of oral mucositis. Therefore, CRIO-MAS may serve as an effective clinical and research tool to improve patient monitoring and enhance the quality of oncological care.

Keywords: Cancer, Chemotherapy, CRIO-MAS, Oral mucositis, Radiotherapy.

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Evaluate the Effectiveness of Scenario-based Learning on Knowledge and Skills Regarding Breast Complications during Puerperium among Nursing Students: A Pilot Study

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ABSTRACT

Introduction: The puerperium is a vital transitional period characterised by significant physiological changes, during which women are particularly susceptible to breast feeding complications. The complications can hinder effective breastfeeding and negatively impact maternal and neonatal outcomes. Nursing students, as future healthcare providers, must be adequately prepared to identify and manage these conditions. In order to close the gap between academic understanding and real-world application, scenario-based learning is one of the methods that uses simulated or real-world clinical scenarios to improve students' knowledge, critical thinking and clinical skills.

Aim: To evaluate the effectiveness of scenario-based learning on knowledge and skills regarding breast complications during puerperium among nursing students.

Materials and Methods: A pilot quasi-experimental study with a non-equivalent control group pre-test-post-test design was conducted among nursing students. The sample size for the study was calculated using Cohen's d formula, with an estimated effect size of 0.60 and a statistical power of 0.80. Based on these calculations, the required sample size for the final study was determined to be 88 students, with 44 students in each group. A total of 19 students were recruited through convenience sampling for the pilot study. Students were divided into experimental and comparison groups. Data were collected using a structured knowledge questionnaire and an observational checklist. First pre-test (day 1) and post-test (day 7) of comparison was completed by using structured knowledge questionnaire and structured observational checklists. Then pre-test

of experimental group was done (day 1), experimental group received scenario-based learning on day 2, day 3 and day 4. Scenario-based learning is the use of pre-designed case-based scenarios to teach concepts regarding identification and management of breast-feeding complications, during the case scenarios discussion, structured questions and trigger points were introduced to stimulate further discussion. At day 7 post-test of experimental group were completed by using a structured knowledge questionnaire and an observational checklist. Data were analysed using descriptive and inferential statistics, including independent t-test, paired t-test and Pearson's correlation coefficient.

Results: The findings of the pilot study revealed that there was no significant difference in pre-test knowledge and skills scores between the experimental and comparison groups ($p>0.05$). However, a significant improvement in post-test knowledge and skills scores was observed in the experimental group as compared to the comparison group ($p<0.05$). Paired t-test results also showed significant improvement between pre-test and post-test scores within the experimental group. Further findings reported that, there was positive correlation was between knowledge and skills score of the nursing Students.

Conclusion: The study concluded that scenario-based learning is an effective teaching strategy for improving the knowledge and skills of nursing Students regarding breast complications during the puerperium. Furthermore, the findings of the pilot study confirmed the feasibility of conducting the main study.

Keywords: Breast complications, Knowledge, Nursing students, Puerperium, Scenario-based learning, Skills.

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Evaluate the Effectiveness of Simulation-based Learning on Knowledge, Decision-making Ability, and Skills Regarding the Management of Obstructed Labour among Nursing Students: A Pilot Study

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ABSTRACT

Introduction: Obstructed labour remains a major contributor to maternal and perinatal morbidity and mortality, particularly in low and middle-income countries. Nursing students play a vital role in early identification and management; however, they often lack adequate knowledge, decision-making ability, and clinical skills. Simulation-based learning is an innovative teaching strategy that provides a safe and realistic environment to enhance clinical competence. **Aim:** To assess the effectiveness of simulation-based learning on knowledge, decision-making ability, and skills related to the management of obstructed labor among nursing Students.

Materials and Methods: A quantitative research approach with quasi-experimental research study using a non-equivalent control group pre-test–post-test design was conducted among 18 nursing students selected through purposive sampling. The nursing students were divided into experimental and comparison groups. Data were collected using a nursing student profile, structured knowledge questionnaire, structured decision-making ability questionnaire, and structured observational checklist to assess baseline demographic data, knowledge, decision making ability and skills of nursing students regarding management of obstructed labour. Simulation based learning on management of obstructed labour on common four conditions i.e., cephalopelvic disproportion, shoulder dystocia, prolonged labour and occipitoposterior position was administered to the experimental group for four consecutive days and simulation

on one condition was administered on each day (Day 2-5) while the comparison group were having regular posting as per their master rotation plan. Data were analysed using descriptive and inferential statistics (Chi-square test, independent t-test, paired t-test, and correlation). Based on the pilot study findings, Cohen's formula was used to estimate the sample size for the final study was 120 including 10% of attrition rate.

Results: Post-test findings showed a statistically significant difference between Experimental and comparison group in terms of knowledge ($t=2.60$, $p=0.01^*$), decision making ability ($t=1.72$, $p=0.10^{NS}$) and skills ($t=4.38$, $p=0.01^*$). Paired t-test results also showed a significant improvement between pre-test and post-test scores within the experimental group. ($t=7.96$, $p=0.001^*$), and comparison group ($t=5.41$, $p=0.001^*$). Furthermore, a significant correlation was found between knowledge and skills ($r=0.72$, $p=0.03^*$).

Conclusion: Based on the findings of the pilot study, simulation-based learning is an effective teaching strategy for improving knowledge, decision-making ability, and skills among nursing students regarding the management of obstructed labor. Thus, simulation-based learning was found to be a feasible, safe, and easily implementable teaching strategy within the nursing education setting.

Keywords: Decision-making abilities, Knowledge, Nursing students, Obstructed labor, Simulation based learning, Skills.

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Effectiveness of Digital Crave Prevention Programme (DC2P) on Cyberchondria and Smartphone Addiction in terms of Knowledge and Skills: Pilot Study

AMBIKA¹, T SENTHIL², JYOTI SARIN³

ABSTRACT

Introduction: Cyberchondria and smartphone addiction have emerged as significant digital health concerns among nursing Students, adversely affecting concentration, psychological well-being, sleep quality, academic performance, and professional competency. Excessive online health searching often increases health anxiety, while compulsive smartphone use contributes to behavioral dependence and impaired digital self-regulation. Considering the increasing prevalence of maladaptive digital behaviors among adolescents and healthcare Students, a structured educational intervention is essential to improve awareness and preventive practices.

Objective: To assess the effectiveness of the Digital Crave Prevention Programme (DC2P) on cyberchondria and smartphone addiction in terms of knowledge and skills among nursing students.

Materials and Methods: A pilot quasi-experimental study with pre-test and post-test control group design was conducted among 20 nursing students (Experimental=10; Control=10) selected through simple random sampling to assess feasibility, reliability, intervention acceptability, and effect size estimation for the main study. Based on pilot effect size ($d=0.84$), power analysis at 95% confidence interval, 80% power, and 5% level of significance, the estimated sample size for the main study was 70 participants (35 per group). The intervention consisted of a two-day DC2P. On Day 1, baseline demographic assessment and pre-test evaluation of knowledge and skills regarding cyberchondria and smartphone addiction were performed using a structured knowledge questionnaire and

observational checklist. Subsequently, a 45-minute lecture-cum-discussion with multimedia presentation was administered. On Day 2, a 30-minute demonstration and hands-on digital wellness skill training session were conducted focusing on screen-time regulation, healthy online-search behaviors, fact verification, and digital self-control strategies. Post-test assessment was conducted on Day 15.

Results: Pilot findings demonstrated high feasibility and tool reliability (Knowledge Questionnaire Cronbach's $\alpha=0.89$; Skill Checklist $\alpha=0.86$). In the main study, the experimental group showed statistically significant improvement in mean knowledge scores from 14.80 ± 3.42 to 27.29 ± 2.11 and skill scores from 3.57 ± 1.24 to 6.57 ± 1.08 following DC2P intervention (paired $t=12.84$, $p<0.001$). Independent t-test revealed significant post-test differences between experimental and control groups ($p<0.001$). Pearson correlation analysis showed positive association between knowledge and skill scores ($r=0.71$). Chi-square and ANOVA demonstrated significant association between post-test scores and selected demographic variables including duration of smartphone use and sleep pattern ($p<0.05$).

Conclusion: The DC2P was highly effective in improving knowledge and digital wellness skills among nursing students. The intervention demonstrated strong statistical effectiveness, feasibility, and applicability for large-scale implementation in nursing education to promote healthy digital behaviour and psychological well-being.

Keywords: Digital wellness, Digital mental health, Health anxiety, Nursing students.

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Assessing the Effectiveness of Nutritional Education Programme in terms of Dietary Knowledge and Practices among School going Children in Selected Schools of Ambala, Haryana: A Pilot Study

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ABSTRACT

Introduction: Nutrition plays a crucial role in the growth, development, and overall well-being of children. School age is a critical period for developing healthy dietary habits; however, unhealthy eating patterns, poor nutritional awareness, and increased junk food consumption have led to rising nutritional problems among children and adolescents.

Objective: To assess the effectiveness of a Nutritional Education Programme (NEP) on dietary knowledge and dietary practices among school-going children in selected schools of Ambala district, Haryana.

Materials and Methods: The pilot study conducted by using quasi-experimental non-equivalent control group pre-test post-test design. The study included 18 school-going children studying in classes VI to VIII selected from government schools of Ambala district through simple random sampling technique. The participants were equally divided into experimental and control groups. For experimental group two days NEP including balanced diet, food pyramid, hydration, healthy food choices and harmful effects of junk food. Content validity was assessed using Scale Content Validity Index (S-CVI) and Item Content Validity Index (I-CVI) methods. Data were collected using a Dietary Knowledge Questionnaire, Food Plate Checking Checklist, and 24-hour Dietary Recall method. The sample size for the final study was determined through power analysis and after adding 20% attrition, the final sample size was 120 school-going children.

Results: The mean dietary knowledge score increased from 15.7 ± 5.4 during pre-test to 24.3 ± 1.6 in post-test, with a statistically significant paired t-test value ($t=5.7$, $p=0.001^*$). The control group showed no meaningful improvement. Independent t-test analysis also demonstrated a highly significant difference between experimental and control groups in post-test knowledge scores ($t=-7.8$, $p=0.001^*$). Dietary practice scores also improved among children in the experimental group, where the mean score increased from 6.2 ± 1.09 to 7.3 ± 0.7 after administration of the NEP. The 24-hour dietary recall findings indicated improvement in calorie intake adequacy, as children consuming appropriate calorie intake increased from 22.2% during pre-test to 66.7% in post-test within the experimental group. Most demographic variables were not significantly associated with dietary knowledge and practices except selected factors such as diet pattern and duration of outdoor games.

Conclusion: The pilot study demonstrated that the NEP was feasible and effective in improving dietary knowledge and promoting healthier dietary practices among school-going children. Structured nutrition education conducted in school settings can contribute significantly toward prevention of malnutrition and development of healthy lifestyle behaviours among adolescents.

Keywords: Content validity, Dietary practices, Item content validity index, Scale content validity index.

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Assess the High Risk and Danger Signs of Pregnancy among Antenatal Mothers of Selected Community Health Centres of Ambala District with View to Develop Need Based Educational Booklet: A Pilot Study

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ABSTRACT

Introduction: Pregnancy is an important phase in a woman's life associated with various physiological and psychological changes. Some pregnancies become high-risk due to medical, obstetrical, or social factors, which may adversely affect the health of the mother and fetus. Lack of awareness regarding danger signs during pregnancy can delay timely healthcare seeking and increase maternal and neonatal complications. Therefore, early identification of high-risk pregnancy and recognition of warning signs are essential for ensuring safe motherhood.

Aim: To assess high-risk pregnancy and danger signs of pregnancy, determine their relationship, evaluate the feasibility and practicability of conducting the final study, and develop a need-based educational booklet on high-risk pregnancy and danger signs of pregnancy.

Materials and Methods: A quantitative non-experimental descriptive research design was adopted for the pilot study. The study was conducted among 20 antenatal mothers residing in selected community areas of Ambala, Haryana using convenience sampling technique. Structured tools including demographic profile, high-risk pregnancy assessment checklist, and danger signs assessment checklist were used for data collection. Total 50 antenatal mothers were assessed; out of 50 mothers 20 mothers lie in high-risk pregnancy. Based on power analysis and pilot study findings, the final sample size for the main study was estimated to be 296 antenatal mothers. The need-based educational booklet included information regarding the meaning and risk factors of high-risk pregnancy, common danger signs during pregnancy, importance of regular antenatal check-ups, balanced nutrition, personal hygiene, and adherence to Iron Folic Acid (IFA) and calcium supplementation. It also emphasised healthy lifestyle practices, prevention of pregnancy

complications, institutional delivery, emergency preparedness, and timely healthcare seeking behaviour. The booklet was prepared in simple language with illustrations to enhance understanding and awareness among antenatal mothers.

Results: Most mothers 19 (95%) had regular antenatal check-ups and were taking IFA and calcium supplements. Regarding high-risk pregnancy factors, severe anemia was identified among 11 (57.9%) mothers, oedema or raised blood pressure among 10 (52.6%), history of preterm or low birth weight baby among 10 (52.6%), gestational hypertension or pre-eclampsia among 8 (42.1%), and previous caesarean section among 7 (36.8%) mothers. Among danger signs during the second trimester, persistent back pain or pelvic pressure was reported by 16 (80%) mothers, pain in upper abdomen or shoulder by 13 (65%), blurred vision by 11 (55%), and severe headache by 9 (45%) mothers. During the third trimester, persistent back pain or pelvic pressure was reported by 13 (65%) mothers, shortness of breath or chest pain by 10 (50%), pain in upper abdomen or shoulder by 10 (50%), and severe abdominal pain or cramping by 9 (45%) mothers. The pilot study findings demonstrated that the proposed methodology and tools were suitable and feasible for conducting the final study on a larger sample.

Conclusion: The study findings revealed that a considerable number of antenatal mothers were experiencing high-risk conditions and pregnancy danger signs, indicating the urgent need for improved awareness and early identification of complications during pregnancy. Overall, the study highlighted the importance of community-based maternal health education in promoting safer pregnancy outcomes and strengthening maternal and fetal well-being.

Keywords: Feasibility, High-risk pregnancy, Iron folic acid.

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Effectiveness of Respiratory Care Bundle (RCB) in Terms of Clinical Parameters, Self-care Efficacy and Quality of Life among COPD Patients: A Feasibility Study

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ABSTRACT

Introduction: Chronic Obstructive Pulmonary Disease (COPD) is a common, preventable and treatable chronic lung disease characterised by persistent airflow limitation and breathing difficulty. It includes conditions such as chronic bronchitis and emphysema, which affect the normal functioning of the lungs and gradually impair respiratory function.

Aim: To evaluate the effectiveness of Respiratory Care Bundle (RCB) in terms of clinical parameters, Self-Care Efficacy and Quality of Life among COPD patients.

Materials and Methods: A quantitative, quasi-experimental study was conducted at MMIMS&R and M.M Super Specialty hospital, Mullana, Ambala, Haryana, using a non-equivalent control group pretest-post-test design. The study was conducted on 10 patients: 5 in experimental group and 5 in comparison group selected using a purposive sampling technique. The experimental group received the respiratory care bundle, consisting of airway clearance techniques and pamphlet-based education from day 2 to day 6. Pretest measurement of clinical parameters, Self-Care Efficacy and Quality of Life was done on day 1 and post-test measurements were done on day 6. Clinical parameters comprised of SpO₂, Heart Rate (HR), Respiratory Rate (RR) and Blood Pressure (BP). Self-care efficacy

was measured using Self-Care Efficacy Scale and Quality of Life was measured using St. George's Respiratory Questionnaire.

Results: Inferential statistics, including an independent t-test was used for data analysis. Both the groups were homogeneous in terms of clinical parameters, Self-Care Efficacy and Quality of Life on day 1. However, significant differences were found in post-test mean score of SpO₂ (96.76±0.85 vs 97.1±0.84), RR (18.00±1.29 vs 18.90±1.43), HR (88.4±4.43 vs 89.0±5.91), Systolic Blood Pressure (SBP) (116.3±7.62 vs 115.12±7.72), Diastolic Blood Pressure (DBP) (73.54±5.64 vs 73.81±5.66), Self-Care efficacy (67.00±4.72 vs 61.00±4.72) and quality of life (41.00±5.21 vs 48.00±4.30) between experimental and comparison groups, respectively. Based on the study findings, the calculated sample size for the final study was 80 participants, including a possible attrition rate.

Conclusion: The findings of the study concluded that the respiratory care bundle was effective in improving clinical parameters, self-care efficacy and quality of life among COPD patients. COPD patients should routinely practice respiratory care bundle at home as a part of their regular lifestyle practices.

Keywords: Airway clearance, Chronic obstructive pulmonary disease, Quality of life, Respiratory care bundle, Self-care efficacy.

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Effectiveness of a Parental Discharge Education Programme on Home-based Care among Parents of At-Risk Newborns: A Pilot Study

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ABSTRACT

Introduction: The transition from hospital to home remains a vulnerable period for at-risk newborns, where inadequate parental preparedness may compromise continuity of care and neonatal well-being. Limited parental insight, poor decision-making ability, and insufficient caregiving skills often increase the risk of preventable complications after discharge. Structured parental discharge education can empower parents with essential knowledge and caregiving competence, thereby promoting safer and more effective home-based newborn care.

Aim: The study aimed to assess the feasibility and preliminary effectiveness of a Parental Discharge Education Programme on parental insights, decision-making ability, and caregiving skills among parents of at-risk newborns.

Materials and Methods: A pilot quasi-experimental non-equivalent comparison group pre-test post-test design was adopted among 20 parents of at-risk newborns selected through purposive sampling from selected hospitals of Ambala, Haryana. The final study sample size will be 58 parents of at-risk newborns. Participants were allocated into experimental and comparison groups. The experimental group received a structured Parental Discharge Education Programme consisting of individualised teaching sessions and demonstrations regarding cord care, hand hygiene, kangaroo mother care, feeding and burping techniques, thermal protection, maternal nutrition, immunisation, follow-up care, and identification of neonatal danger

signs. The comparison group received routine discharge care. Data were collected using a structured parental insight questionnaire, decision-making ability questionnaire, and caregiving skills assessment checklist. Descriptive statistics and inferential statistics including paired t-test, unpaired t-test, Chi-square test, Pearson correlation coefficient, independent t-test, and one-way Analysis of Variance (ANOVA) were used for data analysis.

Results: Pre-test findings showed no statistically significant difference between the experimental and comparison groups in parental insights, decision-making ability, and caregiving skills. Post-test scores of the experimental group were significantly higher in parental insights (18.20 ± 1.03 vs 13.10 ± 3.41 ; $t=4.52$), decision-making ability (10.80 ± 1.13 vs 7.30 ± 2.58 ; $t=3.92$), and caregiving skills (32.30 ± 4.34 vs 19.30 ± 4.08 ; $t=6.89$) at $p<0.05$. Within-group analysis also demonstrated significant enhancement in all outcome variables after implementation of the education programme. The pilot study additionally supported the feasibility and acceptability of the intervention and data collection procedures.

Conclusion: The findings suggest that the Parental Discharge Education Programme was feasible, acceptable, and effective in enhancing parental preparedness for home-based care of at-risk newborns, thereby supporting safer transition from hospital to home and promoting improved caregiving practices among parents.

Keywords: Caregiving skills, Decision-making ability, Feasibility pilot study, Home-based newborn care, Parental insights.

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Prevalence of Online Gaming Addiction and its Impact on Psychological Well-being among Nursing Students: A Cross-sectional Correlational Study

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ABSTRACT

Introduction: The proliferation of digital gaming worldwide has sparked rising concern over online gaming addiction, formally recognised as Internet Gaming Disorder (IGD) by Diagnostic and Statistical Manual of Mental Disorders (DSM-5) and later Gaming Disorder in International Classification of Diseases, 11th Revision (ICD-11). IGD is associated with negative outcomes such as anxiety, depression, sleep disturbances, and poor academic performance.

Aim: To assess the prevalence of online gaming addiction and its impact on psychological well-being among nursing Students in selected college of Ambala, Haryana.

Materials and Methods: A cross-sectional correlational research design was used in this study. A sample of 250 B.Sc. Nursing Students was selected by convenient sampling technique from Maharishi Markandeshwar College of Nursing, Mullana-Ambala. The tool used for data collection were selected variables, Internet Gaming Disorder Scale (IGDS9-SF) and Psychological Well-Being (PWB) scale. The data was analysed and interpreted by using

descriptive and inferential statistics. The data was analysed using SPSS version 20.

Results: The study findings revealed that 16.4% were having no addiction, 36% were having low addiction, 35.2% were having moderate addiction, 9.2% were having severe addiction followed by 3.2% were having profound addiction. The findings showed that 94.80% were having moderate psychological well-being followed by 5.2% were having high psychological well-being. Furthermore, there was a negative correlation found between online gaming addiction and psychological well-being. The mean of online gaming addiction and psychological well-being was 2.47 and 2.05 respectively.

Conclusion: The study concluded that online gaming addiction was moderately prevalent among nursing Students and majority were having moderate psychological well-being. Thus, there was a negative correlation found between online gaming addiction and psychological well-being.

Keywords: 11th Revision, Diagnostic and statistical manual of mental disorders, Digital gaming, International classification of diseases, Nursing students, Psychological well-being.

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Awareness of Rural Population on Warning Signs of Cancer: A Descriptive Cross-sectional Study

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ABSTRACT

Introduction: Cancer is a major global public health challenge and also a leading cause of morbidity and mortality worldwide. Cancer consequences are better if diagnosis is made at initial stages as it lessens delays across the diagnostic pathway. Awareness about any ailment has a vital role in the early diagnosis.

Aim: To assess the level of awareness on cancer warning signs among the general population and to determine the factors associated with awareness.

Materials and Methods: A quantitative, descriptive cross sectional research design was used. Cancer Awareness Measure (CAM) scale consisting of open (recall) and closed (recognition) questions was used to collect data from adults residing in rural areas of Ambala, Haryana. Data was analysed using SPSS version 20.

Results: The study showed that the overall awareness of participants was low. The overall mean awareness score was 6.04 ± 3.55 out of

24. Open (recall) awareness of cancer warning signs was very low as the mean awareness score was 1.91 ± 1.60 out of 15. In contrast, participants exhibited somewhat higher awareness on closed (recognition) questions as the mean score was 4.13 ± 2.58 out of 9. Age, education level, socio economic status, previous information regarding cancer warning signs showed statistically significant associations with level of awareness ($p \leq 0.05$).

Conclusion: The study reveals inadequate awareness related to cancer warning signs among the population, as compared to recognition-based awareness. Awareness regarding cancer warning signs can be improved through various educational programmes, primary healthcare services and mass media to promote early detection and reduce cancer-related morbidity and mortality.

Keywords: Cancer awareness measure, Cancer warning signs, Rural population.

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Effectiveness of a 5A Model-based Intervention on Haemoglobin and Quality of Life in Young Adults with Mild-to-Moderate Anaemia: A Single-arm Pilot Study from Haryana, India

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ABSTRACT

Introduction: Anaemia remains highly prevalent among young adults in India, particularly among female students in higher-education settings. Behavioural frameworks such as the Modified WHO 5A Model (Agree, Assess, Advise, Assist, Arrange) have been used in chronic disease management, but their utility for anemia prevention has not been formally tested in the Indian context.

Aim: To evaluate the effectiveness of a 5A Model-based behavioural intervention, provided iron supplementation for moderate cases, on Haemoglobin (Hb) levels and Quality of Life (QOL) among young adults with mild-to-moderate anaemia.

Materials and Methods: A single-arm, pilot study using a one-group pretest–posttest design was conducted among 53 anemic young adults aged 19–24 years in Ambala, Haryana, between April and June 2024. Eligible participants were screened from a larger pool (n=116 with valid haemoglobin estimation) and selected by purposive sampling. The 36-day intervention package included structured health education, iron- and vitamin C-rich diet promotion delivered as directly observed mid-morning meals during the 11:00–11:20 AM institutional break, deworming, iron supplementation for participants with moderate anaemia, and behavioural reinforcement via WhatsApp messages and phone calls (STAR strategy). Hb was measured using a digital haemoglobinometer (TrueHb). QOL was assessed using a 19-item structured questionnaire (Cronbach's $\alpha=0.92$). Compliance was tracked daily across all 31 days of the Assist phase for diet and across the planned 15 days of iron-folic acid supplementation. Data were analysed with paired t-tests, Wilcoxon signed-rank tests, McNemar's exact test, and Pearson and Spearman correlations. Cohen's d and 95% Confidence

Intervals (CI) were reported. A pre-specified subgroup analysis was performed by baseline severity.

Results: Mean diet adherence was $66.2\pm 20.1\%$ (median 70.0%) and mean iron supplementation adherence was $95.7\pm 16.5\%$ (median 100%). Mean Hb increased from 10.81 ± 0.89 g/dL to 11.82 ± 0.88 g/dL (mean difference 1.01 g/dL; 95% CI 0.75–1.28; paired $t=7.69$, $p<0.001$; Wilcoxon $p<0.001$; Coen's $d=1.06$). Mean QOL score increased from 57.02 ± 12.32 to 74.58 ± 8.64 (mean difference 17.57; 95% CI 13.86–21.28; $p<0.001$; $d=1.31$). Subgroup analysis showed a smaller, behavior-attributable Hb gain in mild cases ($\Delta=0.58$ g/dL, $d=0.64$) and a substantially larger gain in moderate cases who received iron supplementation ($\Delta=1.53$ g/dL, $d=2.07$; between-group $p<0.001$). Anemia status improved in 19 of 53 participants (35.8%; McNemar exact $p<0.001$). Change in Hb was not correlated with change in QOL ($r=0.14$, $p=0.30$).

Conclusion: A 5A Model-based behavioural intervention delivered through direct observation of mid-morning meals was associated with measurable improvements in Hb and QOL among young adults with mild-to-moderate anaemia. The behavioural component alone produced modest Hb gains in mild anaemia; the larger gains in moderate anemia primarily reflect concurrent iron supplementation. The improvement in QOL appears to be independent of haemoglobin change, suggesting it was driven by other components such as education and peer support. A single institutional setting; randomised, multi-centre evaluation is warranted to validate these findings.

Keywords: Anemia prevention, Behavioural intervention, Directly observed therapy.

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