

6th Asia-Pacific

ADVANCED NURSING PRACTICE NURSING EDUCATION AND LEADERSHIP CONCLAVE



**JUNE 19-20, 2025
SINGAPORE**

NURSING ASIA-PACIFIC 2025

SCIENTIFIC PROGRAM

DAY 01

THURSDAY

JUNE 19, 2025

08:00-08:30

Registrations

08:30-08:40

Inaugural Ceremony

Moderator:

David John Wortley, *International Society of Digital Medicine, UK*

Topics: Advanced Nursing Practice | Nursing Education | Nursing Research | Midwifery | Emergency Nursing | Family Nursing | Healthcare | Pediatrics | Mental Health Nursing | Nursing Informatics | Nursing Leadership and Management | Obstetrics and Gynecology Nursing | Patient Safety | Telenursing | Nurse Practitioners | Travel Health Nursing | Public Health Nursing

Distinguished Speaker Talks

Session Chair:

Tze Shien Lo, *VA Fargo Health Care System, USA*

Session Chair:

Dan Kayama, *Toyo University, Japan*

08:40-09:00

Title: Nurse-Initiated Stool Clostridioides Difficile Testing Expedites Obtaining the Test Results

Tze Shien Lo, *VA Fargo Health Care System, USA*

09:00-09:20

Title: Human Centred Systems Design for Healthcare Professionals: Challenges and Directions

Judy Matthews, *Queensland University of Technology, Australia*

09:20-09:40

Title: Linking Forensic Science & Nursing: Creating a Collaborative State-wide Sexual Assault Response Culture in a Rural State

Deborah Wetherelt, *Idaho State Police Forensic Nursing Unit, USA*

09:40-10:00

Title: The Role of Aesthetics in Elderly Care

Noriko Onishi, *Yamano College of Aesthetics, Japan*

10:00-10:20

Title: Aging and Social Care in Japan: Towards an Inclusive Society

Dan Kayama, *Toyo University, Japan*

GROUP PHOTO 10:20-10:30

REFRESHMENT BREAK 10:30-10:50

10:50-11:10	<p>Title: Optimal Timing for Awake Prone Positioning in Covid-19 Patients: Insights from an Observational Study from Two Centers</p> <p>Weiqing Zhang, <i>Shanghai Jiao Tong University School of Medicine, China</i></p>
11:10-11:30	<p>Title: Ethics of Care in the Civil Service for the Impoverished in Neoliberal Australia</p> <p>Ritsuko Kurita, <i>Kanagawa University, Japan</i></p>
11:30-11:50 Video Presentation	<p>Title: Person-Centered Health Education and Research</p> <p>Carlos Gualberto Salcedo Espinoza, <i>San Marcos National University, Peru</i></p>
11:50-12:10	<p>Title: Planning for Effective Nurse Education: Preparing the Next Generation of Nurses for the Societal Changes Happening Today</p> <p>Judith Honeyfield & Cath Fraser, <i>Toi Ohomai Institute of Technology, New Zealand</i></p>
12:10-12:30	<p>Title: Nurse-Led Blood Bag Reinfusion: A Practical Approach to Minimize Allogeneic Blood Use in ECMO Weaning</p> <p>Maoliang Fu, <i>Dong E Hospital, China Liaocheng Cardiac Hospital, China</i></p>
12:30-12:50	<p>Title: The Impact of Basic Sanitation on Public Health and the Burden on Healthcare Systems in Developing Countries</p> <p>Luciano Bomfim dos Santos, <i>Independent Environmental and Sanitation Consultant, Brazil</i></p>
GROUP PHOTO 12:50-13:00	
LUNCH BREAK 13:00-13:40	
Session Chair:	Fadzilah Binti Haji Abd Hamid , <i>Rumah Solehah, Malaysia</i>
Session Chair:	Weiqing Zhang , <i>Shanghai Jiao Tong University School of Medicine, China</i>
13:40-14:00	<p>Title: Effect of Infusion Set Replacement Intervals on Central Line-Associated Bloodstream Infection in the Intensive Care Unit: Study Protocol of the INSPIRATION Study</p> <p>Fen Hu & Dandan Xu, <i>Zhongnan Hospital of Wuhan University, China</i></p>
14:00-14:20	<p>Title: Moving Nursing Station Forward: Improving Efficiency and Patient Experience</p> <p>Ranran Dong, <i>Dong E Hospital, China Liaocheng Cardiac Hospital, China</i></p>

14:20-14:40	<p>Title: Optimizing Processes of Care and Time to Diagnosis in Acute Aortic Dissection Patients in a Chest Pain Center by Implementing a Multidisciplinary Cooperative First Aid Mode—A Quality Improvement Report</p> <p>Xiao Hui Shi (Sharona Shi) & Wen Yan Xia, <i>Shanghai DeltaHealth Hospital, China</i></p>
14:40-15:00	<p>Title: Developing a Model of Learner Reputation: A Qualitative Study from the Dual Perspective of Teachers and Students</p> <p>Qian Xiao, <i>Capital Medical University, China</i></p>
15:00-15:20	<p>Title: Developing Nursing Competencies for Dementia Care Among Community Nurses in Northern Thailand: An Embedded Mixed-Methods Study</p> <p>Oradee Choksawat, <i>Boromarajonani College of Nursing Sunpasithiprasong, Thailand</i> Panicha Boonsawad, <i>Srisavarindhira Thai Red Cross Institute of Nursing, Thailand</i></p>
15:20-15:40	<p>Title: Improvements in the Galapagos Health System: Telemedicine, Research and Medical Assistance</p> <p>Jaime Eduardo Ocampo Trujillo, <i>Galapagos Science Center, Ecuador</i> Maria Emilia Menoscal Coello, <i>Universidad San Francisco de Quito, Ecuador</i></p>
15:40-16:00	<p>Title: A Geo-Localization Data Production System used for Various Nursing Purposes</p> <p>Nel Samama, <i>Institut Polytechnique de Paris, France</i></p>
16:00-16:20	<p>Title: The Rationale of Preventing HIV at Primary Level</p> <p>Fadzilah Binti Haji Abd Hamid, <i>Rumah Solehah, Malaysia</i></p>
REFRESHMENT BREAK 16:20-16:40	
16:40-17:00	<p>Title: Effectiveness of Electrocardiogram Interpretation Education Program Using Mixed Learning Methods and Webpage</p> <p>Sunhee Lee, <i>Seoul St. Mary's Hospital, Republic of Korea</i></p>
17:00-17:20	<p>Title: Gamification to Grow Motivation for Interactive Engagement of Health Nurses in Using Health Information Systems: A Conceptual Framework</p> <p>Faisal Binsar, <i>Muhammadiyah University Berau, Indonesia</i></p>

17:20-17:40 Title: The Impact of Self-Reflective Learning Diary by Nurses on Attitude and Knowledge towards Psychiatry

Shiji Thomas (Sr. Nikhila), *St. Thomas College of Nursing, Jyothi Hospital, India*

17:40-18:00 Title: Calculated Fracture Risk among Hypertensive and Non-Hypertensive Osteoporotic Women

Afsana Mahjabin, *Monno Medical College, Bangladesh*

NETWORKING

End of Day 1

SCIENTIFIC PROGRAM

DAY 02

FRIDAY

JUNE 20, 2025

08:20-08:30

Introduction

Moderator:

David John Wortley, *International Society of Digital Medicine, UK*

Topics: Advanced Nursing Practice | Nursing Education | Nursing Research | Midwifery | Emergency Nursing | Family Nursing | Healthcare | Pediatrics | Mental Health Nursing | Nursing Informatics | Nursing Leadership and Management | Obstetrics and Gynecology Nursing | Patient Safety | Telenursing | Nurse Practitioners | Travel Health Nursing | Public Health Nursing

Distinguished Speaker Talks

Session Chair:

Sreelekha Prakash, *Stockton University, USA*

Session Chair:

Antonio Pazin-Filho, *University of São Paulo, Brazil*

08:30-08:50

Title: History of Resection for Liver Cancer and Current IT-based Preoperative 3D Simulation and Intraoperative Navigation

Mitsugi Shimoda, *Tokyo Medical University, Ibaraki Medical Center, Japan*

08:50-09:10

Title: Surgical Waiting Lists and Queue Management in a Brazilian Tertiary Public Hospital

Antonio Pazin-Filho, *University of São Paulo, Brazil*

09:10-09:30

Title: The Impact of Digital Innovation and Lifestyle Medicine on Nursing Roles and Practices

David John Wortley, *International Society of Digital Medicine, UK*

09:30-09:50

Title: Surgical Innovation through AI: From Nerve Recognition to Nursing Support

Kazuya Kinoshita, *Chiba University, Japan*

09:50-10:10

Title: Community Based Prevention and Research for Substance Use

Sreelekha Prakash, *Stockton University, USA*

10:10-10:30	<p>Title: Development and Usability Evaluation of an Intelligent Communication Tool for ICU Patients with Mechanical Ventilation</p> <p>Qian Xiao, <i>Capital Medical University, China</i></p>
GROUP PHOTO 10:30-10:40	
REFRESHMENT BREAK 10:40-11:00	
11:00-11:20	<p>Title: Professionalization in Anesthesia Care</p> <p>Daniela Schaffer, <i>Klinikum Klagenfurt am Wörthersee, Austria</i></p>
11:20-11:40	<p>Title: Perspectives on Telenursing: Where are we as a Caribbean Region?</p> <p>Adella Campbell, <i>University of Technology, Jamaica</i></p>
11:40-12:00	<p>Title: An Innovation Curriculum for Elderly Caregivers in the Digital Era</p> <p>Panicha Boonsawad, <i>Srisavarindhira Thai Red Cross Institute of Nursing, Thailand</i></p>
12:00-12:20	<p>Title: Gender Differences in Cranial Bone Thickness and Surgical Outcomes in Epidural Hemorrhage: A Saudi Arabian Retrospective Study</p> <p>Taghreed Abdulhameed Alsinani, <i>King Fahad General Hospital, Saudi Arabia</i></p>
12:20-12:40	<p>Title: Risk and Protective Factors for Non-Suicidal Self-Injury in Adolescents: A Delphi Expert Consensus Study</p> <p>Dong Hun Lee & Hwa Jung Lee, <i>Sungkyunkwan University, South Korea</i></p>
GROUP PHOTO 12:40-12:50	
LUNCH BREAK 12:50-13:30	
Session Chair:	Sreelekha Prakash , <i>Stockton University, USA</i>
Session Chair:	Antonio Pazin-Filho , <i>University of São Paulo, Brazil</i>
13:30-13:50	<p>Title: Prevalence and Varieties of Complementary and Alternative Medicine Usage among Individuals with Pre-Dialysis Chronic Kidney Disease in Taiwan: An Investigative Cross-Sectional Analysis</p> <p>Ming-Yen Tsai, <i>Kaohsiung Chang Gung Memorial Hospital & Chang Gung University College of Medicine, Taiwan</i></p>
13:50-14:10	<p>Title: Overcoming the Oral Aspects of Self- Mutilation in Children with Lesch-Nyhan Syndrome</p> <p>Joseph Shapira, <i>Hebrew University-Hadassah Medical Centre, Israel</i></p>

14:10-14:30	<p>Title: A Study of NGOs as Health Facilitators to Health Care Customers in Addressing Chronic Diseases in Assam, India</p> <p>Seema Shah Singha, <i>Dibrugarh University (Assam), India</i></p>
14:30-14:50	<p>Title: Development and Properties of a Novel Nanocellulose based Film Containing Boron-Infused Mica for the Prevention of Dental Caries</p> <p>Lalitha S Jairam, <i>M.S Ramaiah University of Applied Sciences, India</i></p>
14:50-15:10	<p>Title: The Fear of Progression in Patients with Wilson's Disease: A Cross-Sectional Study from China</p> <p>Yingxue Niu, <i>Anhui University of Chinese Medicine, China</i></p>
15:10-15:30	<p>Title: The Nurse's Role in Antimicrobial Stewardship: From Bedside to Boardroom</p> <p>Renu Gupta, <i>Institute of Human Behaviour and Allied Sciences, India</i></p>
15:30-15:50	<p>Title: Perceptions of Elderly Patients on Intelligent Management of Respiratory Aspiration: A Qualitative Exploration</p> <p>Shuojin Fu, <i>Capital Medical University, China</i></p>
15:50-16:10	<p>Title: Construction of a Risk Prediction Model of Fear of Progression in Patients with Chronic Atrophic Gastritis Based on the Recognition of Traditional Chinese Medicine Constitution</p> <p>Jingxia Zhang, <i>Anhui University of Chinese Medicine, China</i></p>
REFRESHMENT BREAK 16:10-16:30	
16:30-16:40 (Poster)	<p>Title: Effectiveness of the Remote Family Education and Support Program for Parents of Adolescents with Eating Disorders based on Interpersonal Psychotherapy: A Randomized Controlled Trial</p> <p>Fujika Katsuki, <i>Nagoya City University Graduate School of Nursing, Japan</i></p>
16:40-16:50 (Poster)	<p>Title: Indigenous and Migrant Experiences of a Predominantly Western Model of Healthcare in Aotearoa New Zealand</p> <p>Cath Fraser & Judith Honeyfield, <i>Toi Ohomai Institute of Technology, New Zealand</i></p>
16:50-17:00 (Poster)	<p>Title: Prevalence and Risk Factors of Sarcopenic Dysphagia in Elderly Hospitalized Patients: A Retrospective Cohort Study based on Data from a Comprehensive Geriatric Assessment System</p> <p>Pingfeng He, <i>Chongqing University Central Hospital, China</i></p>

17:00-17:20 Title: Chinese Herbal Medicine in the Prevention of Hot Flushes in Breast Cancer Patients Receiving Adjuvant Chemotherapy: A Non-Randomized Clinical Trial

Chin Chieh Ying, *Kaohsiung Chang Gung Memorial Hospital and Chang Gung University College of Medicine, Taiwan*

17:20-17:40 Title: Nurses' Experiences and Suggestions of Internet+Nursing Service based on Service Quality: A Qualitative Study

Zhifang Ren, *Capital Medical University, China*

NETWORKING

End of Day 2

BOOKMARK YOUR DATES

7th Asia-Pacific

**ADVANCED NURSING PRACTICE, NURSING
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JUNE 2026 | SINGAPORE**

NURSING ASIA-PACIFIC 2025



DAY 01

6th ASIA-PACIFIC

ADVANCED NURSING PRACTICE NURSING EDUCATION AND LEADERSHIP CONCLAVE

SINGAPORE

JUNE 19-20, 2025

SPEAKER TALKS



Nurse-Initiated Stool Clostridioides Difficile Testing Expedites Obtaining the Test Results

**Tze Shien Lo⁴, Ashley Bartlett¹, Anna Ware², Kimberly Hammer³ and
Siddharth Singhal⁴**

¹Phoenix Children's Hospital, USA

²VA Palo Alto Health Care System, USA

³National Institute of Health, USA

⁴VA Fargo Health Care System, USA

Background: Clostridioides difficile (C. difficile) is the most common pathogen to cause antibiotic-associated colitis. Each year C. difficile infection (CDI) affects more than 500,000 patients in the US, with an incidence of 101 cases per 100,000 persons. Approximately 30,000 patients died from CDI each year and the annual cost of CDI was about 6.3 billion dollars in the US. Because of the enormous clinical, social and economic burden of CDI, we conducted a retrospective study to examine whether a policy change at our Veteran Affairs (VA) Hospital that allowed nurses in the wards to order stool C. difficile test would have any effect on the time to obtain test results and initiate treatment.

Methods: The time to receive results and initiate treatment were analyzed before (September 2012 to April 2016) and after (May 2016 to March 2021) the policy change, and between physicians and nurses using descriptive statistics and paired student t-tests. Variables associated with lower ordering times were also analyzed using logistic regression while adjusting for patient admission location and length of inpatient hospital stay.

Results: The difference in time to obtain the result both before and after the policy change and between ordering provider type were both statistically significant ($P < .05$). In unadjusted models, nurses were associated with obtaining faster test results compared to physicians (OR (95% CI) 1.72 (1.45-2.05)). No significant time difference was found in initiating treatment between the two time periods.

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Conclusions: Allowing bedside nurses more autonomy to order the stool sample significantly decreased the amount of time to receive the results. Only physicians were allowed to initiate CDI treatment could explain why no time difference was found in initiating CDI treatment before and after the policy change.

Biography

Dr. Tze Shien Lo received his MD degree from Kyushu University in Fukuoka, Japan. He completed an internal medicine residency at University of North Dakota (UND) in Fargo, North Dakota, USA and an infectious disease fellowship at University of Utah in Salt Lake City, Utah, USA. At present, he is a professor of medicine at School of Medicine and Health Sciences of UND. He is also the chief of Infectious Disease Service at Fargo VA Health Care System. Besides serving as a consultant in infectious diseases at the VA (Veteran Affairs) Hospital, he teaches medical students and medical residents. He also chairs the infection control committee. He published more than 50 peer-reviewed articles and book chapters. Dr. Lo is proficient in English, Mandarin and Japanese.

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Human Centred Systems Design for Healthcare Professionals: Challenges and Directions

Judy Matthews

Queensland University of Technology, Australia

Health systems are human focused and concerned with individuals, their families and friends and often communities. Human centred systems design or design thinking plays an essential role in any human focused system and particularly in health care where patients are experiencing unusual, strange, often painful experiences which generate anxiety and uncertainty. In addition, within the context of health service delivery staff are often experiencing issues of overwork with challenging conditions in their workplaces.

The objective of this paper is report on the positive findings from design thinking workshops with experienced nurses in diverse workplace contexts, to emphasize the relevance and potential that human centred system design contributes to the helping professions of nursing and allied health, in both the challenges and future directions.

Following a brief review of relevant research and literature, this paper presents primary and secondary research which identifies the challenges of nurses engaging in exploring design thinking approach. Using action research and workshops as methodologies for investigating and identifying challenges faced by nurses and framing the challenges as taking action to achieve desired outcomes, we found that applying a design thinking mindset in a semi-structured design thinking framework, collaborative design processes and practices generated successful initiatives, developments, solutions and outcomes and presents direction for further exploration, experimentation and implementation.

Nurses and allied health staff developed increased awareness of design thinking, interest and desire in exploring and experimenting with new ideas and combinations, and over time to undertake the development of new initiatives that were prototyped and tested before initial implementation and ongoing refinement. The paper concludes with recommendations

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for overcoming the challenges of exploring, experimenting and co-designing with design thinking in fast-paced environments.

Biography

Associate Professor Judy Matthews researches and facilitates human-centred systems design with individuals, groups, and organisations, through design thinking, design-led innovation, and action research, creating inclusive, collaborative relationships and outcomes. With an extensive background in human services, Judy has worked with members of government, private sector and non-government agencies and their stakeholders to identify user needs, overcome barriers to innovation, and developing, testing, and embedding proactive agentic behaviour and human-centred customised solutions. 69 Outcomes from exploring and experimenting with design thinking practices include increased confidence in collaborative idea generation, increased workplace engagement and satisfaction and team collaboration.

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Linking Forensic Science & Nursing: Creating a Collaborative State-wide Sexual Assault Response Culture in a Rural State

Deborah Wetherelt and **Madison Helfrich**

Idaho State Police Forensic Nursing Unit, USA

With the formation of the Idaho State Sexual Assault Kit Initiative (ISAKI) in 2014, the state has worked to change the culture surrounding sexual assault and cultivate a statewide initiative to support healing and justice for victims of sexual assault. Since 2019, The Forensic Nursing Unit has functioned as a department of the Crime Lab at Idaho State Police and has created an innovative approach that fosters communication between the disciplines that respond to Sexual Assault.

These necessary conversations have led to improved statewide education regarding care of victims and have streamlined the provision of care supported by evidence-based practice. The team utilized multiple methods across the state, including:

- 40-hour SANE (Sexual Assault Nurse Examiner) courses
- Education regarding the neurobiology of trauma and the use of trauma-informed techniques for multiple disciplines, including law enforcement, healthcare, and advocacy
- Focused presentations on forensic topics, and
- The provision of technical assistance to all disciplines

To meet the objective of improving access to standardized care across the state. As a result, there has been a marked increase in forensic efficiency and trauma-informed collaboration that has served the growing population of Idaho.

Initial results show Impacts on the function of forensic science, law enforcement, and nursing communities, including:

- An increase in sites providing forensic medical examinations with trained nurses from

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three to 34 in four years

- Streamlining of multidisciplinary visibility and communication
- Expedition of statewide changes relating to evidence collection and processing
- Revision of the Sexual Assault Evidence Collection Kit (SAECK) to adequately meet forensic and medical standards
- Increased cooperation and respect between the disciplines that address sexual assault on both local and state levels.

As with most improvement projects the initial work eventually highlighted additional work to be done, and the Forensic Nursing Unit is committed to the continued improvement in care across Idaho.

Biography

Deb has been a registered nurse for 47+ years; for the first 42 years she was a labor and delivery nurse and nurse manager/director of Women and Children's Services Lines in both small and large hospitals with a focus on continual improvement in the quality of care. One example of that quality was the team development to consistently provide an 8-minute cesarean (from time of decision to incision) when the national standard was 30 minutes.

After becoming widowed she left the hospital world and experienced a regeneration of passion for nursing in the role of the Idaho SANE/SART Coordinator where she can impact the provision of nursing, advocacy, emergency services, and law enforcement for victims of sexual assault.

When not working, Deb enjoys gardening, reading, yarn work, travel, and enjoying time with her children, grandchildren, and great-grandchildren.



The Role of Aesthetics in Elderly Care

Noriko Onishi

Yamano College of Aesthetics, Japan

In Japan's hyper-aged society, there is debate over whether beauty can become a means of supporting the health of the elderly like medical care and nursing care. The meaning of health in a society of longevity is shifting from the physical to the psychological and social aspects of living a vibrant life, and beauty is gaining recognition as a means of supporting health.

For beauty to become a means of health promotion in elder care, three elements must be considered: beauty, activity, and participation. Dressing fashionably encourages activity and participation, and feeling excited leads to a more active lifestyle. It is especially important to avoid bias toward these elements in health care education that incorporates aesthetics, because focusing solely on aesthetics can hinder participation and activity. We would also like to discuss the importance of collaboration among various professions in this type of care.

Biography

Noriko Onishi was born in Japan in 1959. After studying nursing at university and working as a nurse for five years, she spent over 20 years as a teacher at a nursing training school and a care worker training school. For more than 25 years, she has been affiliated with Yamano College of Aesthetics, where she has actively promoted beauty welfare education, contributed to the management of the Japanese Society of Aesthetics and Beauty Welfare, and advanced beauty welfare education for practicing beauticians. Currently, she is engaged in promoting healthcare initiatives through the effective use of beauty.



Aging and Social Care in Japan: Towards an Inclusive Society

Dan Kayama

Toyo University, Japan

Social aging has progressed relatively rapidly in Japan. The size of the elderly population (those aged 65 and above) reached 36,230,000 in 2023. This accounts for 29.1% of the country's total population.

Japan is facing a few major issues, known as the "2025 issue", the "2040 issue" and the "8050 issue". The first one means when the baby boomers reach ages of 75 and above in 2025, there will be insufficient fiscal resources to cover many of the costs of social security, such as pensions, medical care, and nursing care. The second issue is that, in 2040, many children of the baby boomers will reach ages of 65 and above. The third is issues such as social isolation and poverty experienced by those in households composed of parents in their 80s living with children in their 50s.

Meanwhile, the Japanese government currently aims to realize, through public policies, a "Community-based Inclusive Society" for all generations. The "Multilayered Support System" (the MSS) on Social Welfare Law is a new and representative policy which is an optional measure taken by local government. Community social workers (CSWs), those are one of key profession are expected to find/solve those issues, and the number of placement of CSWs are now increasing by the budget of the MSS all over Japan.

This type of community-based welfare is currently becoming the foundation of social welfare in Japan, and it has been reinforced further in recent years by policies to realize a "Community-based Inclusive Society".

This is a report of results of action researches with local governments and practitioners who engage in building "Community-based Inclusive Society". My study's objective is promoting these policies and practices.

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Biography

A professor in the Faculty of Design for Welfare Society, Toyo University (Tokyo) in Japan. The course chair in the graduate school of social welfare. Research interests lie in social welfare studies, particularly within community social welfare and community social work.



Optimal Timing for Awake Prone Positioning in Covid-19 Patients: Insights from an Observational Study from Two Centers

Weiqing Zhang¹, Yan He², Qiuying Gu³, Yin Zhang⁴, Qinghua Zha⁴, Qing Feng⁴, Shiyu Zhang⁴, Yang He⁴, Lei Kang⁴, Min Xue⁴, Feng Jing⁴, Jinling Li⁵, Yanjun Mao⁶ and Weiyi Zhu⁴

¹Department of Critical Care Medicine, Ruijin Hospital, Shanghai Jiao Tong University School of Medicine, China; Shanghai Jiao Tong University School of Nursing, China

²Department of Respiratory and Critical Care Medicine, Shanghai Pulmonary Hospital, China

³Department of Critical Care Medicine, Ruijin Hospital, Shanghai Jiao Tong University School of Medicine, China

⁴Department of Nursing, Ruijin Hospital, Shanghai Jiao Tong University School of Medicine, China

⁵Department of Pulmonary Circulation, Shanghai Pulmonary Hospital, China

⁶Department of Nursing, Shanghai Pulmonary Hospital, China

Objective: To explore the optimal regimen for awake prone positioning, including the timing of initiation, ideal daily duration, and strategies for improving patient comfort and encouraging adherence.

Design: Retrospective observational study.

Setting(s): Two university-affiliated hospitals in Shanghai.

Participants: Between December 2022 and February 2023, a total of 475 patients with COVID-19-related pneumonia who received awake prone positioning were observed.

Methods: The data were collected from the hospital's electronic medical record system. The differentiation efficiency of peripheral blood oxygen saturation [SpO_2]: fractional oxygen concentration in inspired air [FiO_2] ratio at first awake prone positioning for different outcomes was tested by the area under the receiver operating characteristic curve. The Cox proportional hazard regression model was used to analyze the relationship between time to occurrence of 28-day outcomes and collected variables. Kaplan-Meier curves were

plotted with the percentage of 28-day outcomes according to the SpO₂:FiO₂ ratio at first awake prone positioning after controlling covariates through Cox regression.

Results: The best efficiency in predicting patient outcomes was achieved when the cut-off SpO₂:FiO₂ ratio at first awake prone positioning was 200. Patients with a reduced SpO₂:FiO₂ ratio (≤ 200) experienced more adverse respiratory outcomes (RR = 5.42, 95%CI [3.35, 8.76], $p < 0.001$) and higher mortality (RR = 16.64, 95%CI [5.53, 50.13], $p < 0.001$). Patients with a SpO₂:FiO₂ ratio of ≥ 200 at first awake prone positioning, longer duration between first awake prone positioning and admission, more awake prone positioning days, and better awake prone positioning completion were significantly protected from 28-day adverse respiratory outcomes and mortality.

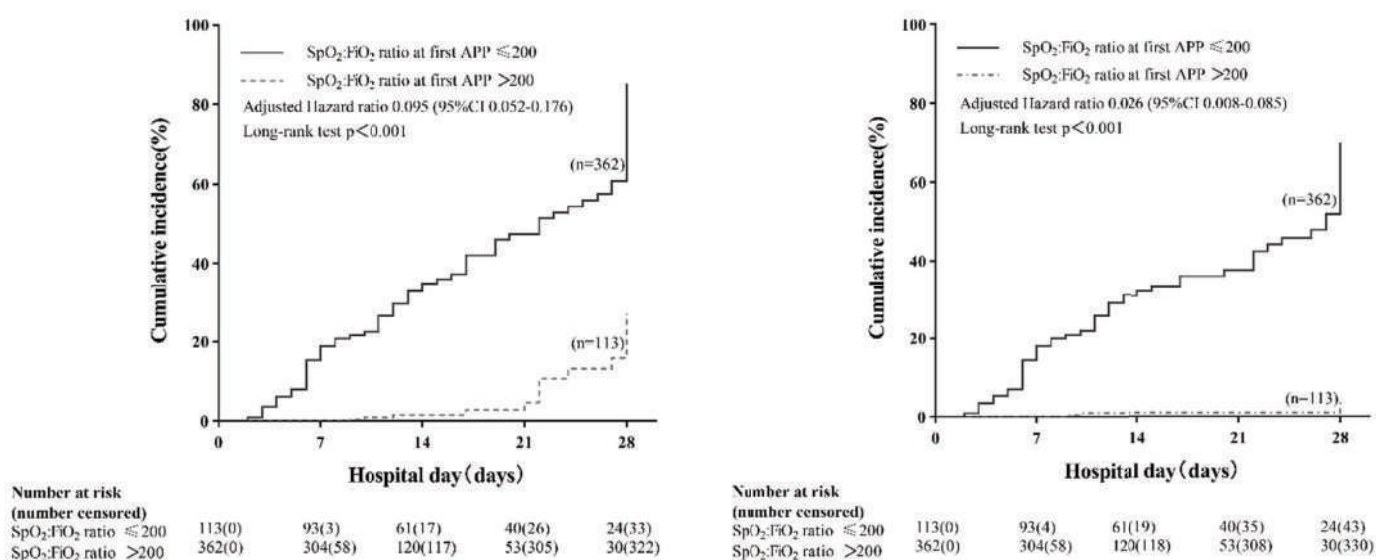


Figure: Kaplan–Meier probabilities of Covid-19 patients receiving APP treatment with different outcomes over 28 days after hospital admission.

Conclusions: Initiating awake prone positioning with a SpO₂:FiO₂ ratio exceeding 200, increasing the number of awake prone positioning days, prolonging the time between first awake prone positioning and admission, and achieving better completion of awake prone positioning were found to be significantly associated with reduced adverse respiratory outcomes and mortality.

Biography

Weiqing Zhang, Ph.D., Chief Nurse, Professor of Master Instructor. The main research direction is the related fields and interdisciplinary research of intensive care ultrasound technology and nutritional therapy in critically ill patients. He is the Chairman of the Male Nurse Working Committee of the Shanghai Nursing Association, the Vice Chairman of the Nutrition Support Special Committee of the Shanghai Nursing Association, a member of the Chinese Critical Ultrasound Study Group, and a reviewer for multiple journals. In the past five years, he has published more than 10 academic papers, including 4 SCI indexed articles, with a cumulative impact factor of over 30 points.



Ethics of Care in the Civil Service for the Impoverished in Neoliberal Australia

Ritsuko Kurita

Kanagawa University, Japan

Under neoliberal austerity welfare is no longer a civil right, but is regarded as a privilege for “deserving” citizens, leading to welfare conditionality. Those considered as “undeserving” citizens are encouraged to alter their conduct to avoid adverse effects in the neoliberal welfare state. Care and support by charity and nonprofit organizations are considered to supplement the deficiency of the neoliberal welfare system. This study aimed to examine the role of care ethics embedded in the services provided by a civil organization and its potential to apply the care service in other domains. An ethnographic study was conducted at a service site of a charity organization that provides integrated support, including free meals, utility services, welfare advice, health care, and literacy programs for the homeless and other impoverished people in Sydney by conducting interviews with service providers and clients. The results of the study show that care ethics played a significant role in addressing the relational and material needs of clients, which enabled clients to transform the shame imposed upon them by affective governmentality to an agency to navigate the welfare regime. It also revealed that, in a civil community that values care ethics, all humans are perceived as relational and morally interdependent, and their connections to particular others and their actual relatedness are valued. Here, those who care for and those who are cared for do not compete, but are mutually connected. In conclusion, care ethics can be an ideological and moral alternative to neoliberal ethics, which do not recognize notions such as the public good or public interests.

Biography

Ritsuko Kurita holds a doctorate in cultural anthropology and is an associate professor at the Faculty of Foreign Languages, Kanagawa University, Japan, where she teaches Anglophone culture and cultural anthropology. She has extensive experience with ethnographic research, having worked mainly in Adelaide, South

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Australia, on the identity of urban Aboriginal people and the interethnic relations between Aboriginal people and Anglo-Australians as well as African people of refugee backgrounds in the lower socio-economic suburbs. She is currently working on a research project on ethical citizenship formed through benevolence among marginalized citizens under neoliberal governance in Sydney. Her areas of expertise are indigeneity, citizenship, a sense of belonging, neoliberal welfare systems, welfare shame, and urban poverty.

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Person-Centered Health Education and Research

Carlos Salcedo¹, Simone Hauck² and Luis Salvador-Carulla³

¹General Health Studies, San Marcos National University, Peru

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Introduction: Person-centered health care not only requires the application of the skills acquired during direct work with the patient but must also be the subject of a systematic design that allows its scope to be lasting. This article argues that the most appropriate way to achieve this is education with innovative planning, oriented towards person-centered health care. It is proposed to innovate the educational process with arguments that need to be known, analyzed and applied at all levels and localities.

Objectives:

1. To improve knowledge of how education influences person-centered health care.
2. Propose a theoretical innovation with respect to the two traditional pedagogical schools known as the old school and for a century the new school, adding a third school based on person-centered attention.
3. Insert the third school in the pre-school training of health professionals.
4. Update research designs that assume health care related to the humanization of the professional or specialist individually and as a team.
5. Formulate and apply research protocols in compliance with current ethical and legal principles, respecting and safeguarding the rights of the patient and his or her family. SCOPE Influence the training process at a global level, including health personnel, patients, relatives and the community.

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Methods Used: Analysis of curricular plans of schools in the health area, emphasizing the first year of the training process.

Results: The acceptance of teachers and students has been good, achieving a greater approach to the community and families, which translates into improved person-centered health care.

Conclusion: Greater dissemination and practical examples are required for educators and teachers of health careers. The students of the first year of the health sciences careers have successfully applied; greater dissemination and prospective studies on a larger scale are required.

Biography

Dr. Carlos Gualberto Salcedo Espinoza is a distinguished physician specializing in Internal Medicine and Intensive Care Medicine. He holds a Master's degree in Higher Education Teaching and a PhD in Education. Graduate of the Senior Management Program at SERVIR. Dr. Salcedo has an extensive academic and leadership background, serving as a professor at both undergraduate and postgraduate levels in the Faculties of Medicine and Administrative Sciences. He has held several prominent positions, including Chair of the Specialty Committee of Intensive and Pediatric Intensive Care Medicine, Head of the Postgraduate Unit, and Director of the Organizing Committee of the School of General Studies at UNMSM. From 2017 to 2023, he chaired the National Medical Examination Committee (ENAM) and led the development of national standards for medical teaching competencies through ASPEFAM-SINEACE. A respected licensing evaluator for SUNEDU, Dr. Salcedo currently serves as Executive Director of the Center for Competence Development of the Medical College of Peru.

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Planning for Effective Nurse Education: Preparing the Next Generation of Nurses for the Societal Changes Happening Today



Judith Honeyfield and **Cath Fraser**

Toi Ohomai Institute of Technology, New Zealand

The world is changing rapidly, so too are the demands on healthcare professionals. One of the most visible societal transitions confronting almost every nation on Earth, is our ageing population and the myriad repercussions for our communities, economies and workforce. For healthcare professions, there is a growing need for services which support wellbeing in later years, including the concepts of 'ageing in place', promoting a sense of home, and recognising the importance of cultural identity. A current research project in Aotearoa New Zealand has received national funding to investigate lived experiences of ageing *via* cultural lens methodology, considering how best we can prepare nursing graduates for working with a diverse and increasingly multicultural population. The purpose of the study is to develop a series of digital teaching resources, drawing on document analysis of multiple years of organisational data, alongside interviews and focus groups with students, teachers, managers, preceptors and older adults. Literature from Australasia and abroad relating to indigenous and migrant lived experiences of ageing and wellness will contribute to an iterative literature review. Outputs from the project will assist nurse educators to support students' pre-and post-clinical placement learning about what culturally grounded practice in older persons/aged healthcare entails.

This presentation will overview the development, showcase the resources, canvass feedback, and discuss options for future evaluative research collaborations with other delegates.

Biography

Cath and Judi are long time Toi Ohomai staff members: Cath is a Faculty Research Coordinator, and Judi is the Academic Lead for our large Bachelor of Nursing programme. Both share an interest in research in the teaching, learning and professional development field, as well as in health and positive ageing.



Nurse-Led Blood Bag Reinfusion: A Practical Approach to Minimize Allogeneic Blood Use in ECMO Weaning

Maoliang Fu¹, Xihua Geng² and Ranran Dong²

¹ICU, Dong E Hospital | Liaocheng Cardiac Hospital, China

²Nursing Department, Dong E Hospital | Liaocheng Cardiac Hospital, China

Background: Extracorporeal Membrane Oxygenation (ECMO) is a critical support measure for patients with severe circulatory or respiratory failure, substituting cardiopulmonary function to provide time for treatment of the underlying disease. Despite its benefits, ECMO often necessitates blood transfusions, which can be challenging in areas with limited blood supplies. Therefore, strategies to minimize allogeneic blood use and effectively reinfuse ECMO circuit blood are crucial.

Purpose: This study aims to evaluate the value of the blood bag reinfusion method during ECMO weaning.

Methods: Our ECMO team developed and implemented a blood bag reinfusion strategy after reviewing literature and simulation training. This involved pre-modifying the ECMO circuit with a three-way side branch for blood retrieval during weaning. We connected a transfusion set and blood storage bag to the circuit and used 0.9% sodium chloride to transfer circuit blood into the bag, which was then transfused based on the patient's hemodynamics and cardiac function.

Results: Data from four patients who underwent blood bag reinfusion during ECMO weaning showed an average support time of 4.5 days without visible thrombosis. Approximately 500ml of blood was recovered, with three patients receiving 500ml and one 300ml. None required allogeneic transfusion within 48 hours post-weaning, and no complications occurred after ECMO withdrawal.

Conclusion: The blood bag reinfusion method effectively recovers and transfuses ECMO circuit blood, reducing the reliance on allogeneic blood. Simple, safe, and reliable, this

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method minimizes clinical complications and offers a practical approach for ECMO blood retrieval, suitable for clinical application and promotion.

Biography

Maoliang Fu, Chief Nurse, Critical Care Department, Liaocheng Cardiac Hospital, Shandong Province, China. Serving as a member of the 4th Youth Committee of the Extracorporeal Life Support Branch of the Chinese Society of Cardiovascular Anesthesia, a member of the 1st Intensive Care Rehabilitation Professional Committee of the China Medical Education Association, and a member of the Health Technology Promotion Expert Committee of the China Ethnic Health Association.

Founder of the Dong E Intensive Care (DECCM) WeChat public platform, promoting over 200 original popular science articles.

Have published 19 papers and 3 invention patents, and co-authored 7 books.

Awards received: Advanced Individual in Shandong Province during COVID-19.



The Impact of Basic Sanitation on Public Health and the Burden on Healthcare Systems in Developing Countries

Luciano Bomfim dos Santos

Independent Environmental and Sanitation Consultant, Brazil

Basic sanitation is a critical determinant of health. Its absence affects billions globally, particularly in third-world countries and emerging economies, leading to preventable diseases, infant mortality, and overburdened healthcare systems. According to the United Nations (UN), approximately 2 billion people lack adequate sanitation, and the World Health Organization (WHO) attributes 432,000 annual deaths to diarrheal diseases caused by poor sanitation. This global public health crisis exacerbates inequalities and challenges healthcare sustainability.

In low-income regions, the absence of sewage systems and access to potable water has severe consequences. The UN reports 673 million people still practice open defecation, spreading diseases like cholera and hepatitis A. Vulnerable groups, especially children under five and women, face heightened risks. WHO notes that waterborne diseases worsen child malnutrition and increase mortality rates.

In emerging economies such as Brazil, India, and Nigeria, sanitation deficiencies pressure healthcare systems. In Brazil, over 33 million lack treated water, and 90 million are without sewage treatment. WHO estimates annual global costs of treating diseases linked to poor sanitation at over USD 260 billion. Cholera outbreaks in Sub-Saharan Africa, for instance, strain hospitals and disrupt supply chains, diverting resources from other priorities.

Investing in sanitation improves public health and generates economic returns. WHO estimates every dollar spent saves five in healthcare costs and boosts productivity. Countries like Bangladesh and Vietnam have seen significant health improvements through robust sanitation policies.

Case Study: Conchal, São Paulo

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Conchal, Brazil, addressed sanitation challenges through innovative strategies, constructing sewage pumping stations and implementing advanced sludge treatment using autochthonous microorganisms in partnership with Legun Biotecnologia Ltda. This cost-effective approach achieved over 90% efficiency in Biochemical Oxygen Demand reduction.

By reducing waterborne diseases and progressing toward Sustainable Development Goal 6, Conchal demonstrates the potential for sustainable solutions to enhance public health and environmental preservation while supporting the 2030 Agenda.

Biography

Luciano Bomfim dos Santos is a Brazilian professional whose inspiring journey began at age seven as a collector of recyclable materials. This early experience instilled in him a deep respect for work, resilience, and environmental responsibility. He holds degrees in Business Administration and Logistics Management, and is currently pursuing a Law degree. Luciano also has postgraduate qualifications in Environmental Engineering, Production Engineering, Project Management, and an MBA in Logistics Management, along with a specialization in Environmental Licensing from ESALQ/USP. His technical background includes certifications in Environment, Sanitation, and Chemistry. With experience in both public and private sectors, he leads multisectoral projects focused on sustainability, operational efficiency, and innovation. Passionate about social impact, he emphasizes continuous improvement and environmental education. In 2025, he will represent Brazil as an international speaker at the Nursing Asia-Pacific Conference in Singapore, addressing the role of basic sanitation in public health. His life exemplifies leadership, transformation, and dedication to the common good.

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Effect of Infusion Set Replacement Intervals on Central Line-Associated Bloodstream Infection in the Intensive Care Unit: Study Protocol of the INSPIRATION Study



Fen Hu¹, Dandan Xu¹, Chang Hu¹, Jie Xiong², Haiyan Huang³, Shasha Wang⁴, Xinbo Ding¹, Junying Zhou¹, Juan Deng², Chunling Guo², Miqi Li², Ting You³, Wei Cheng³, Bo Li³, Xiaoqin Tang⁴, Xiaohong Li⁴, Hongmei Li⁴, Jin Li¹, Jing Ma¹, Meng Xiao¹, Xing Fu¹, Huilin Li¹, Zhiyong Peng¹ and Bo Hu¹

¹Zhongnan Hospital of Wuhan University, China

²Tongji Hospital, China

³Union Hospital, China

⁴Renmin Hospital of Wuhan University, China

Introduction: The replacement intervals for infusion sets may differ among healthcare institutions, which may have an impact on the occurrence of central line-associated bloodstream infections (CLABSI). Nevertheless, there exists a limited amount of high-quality evidence available to assist clinicians in determining the most suitable replacement intervals for infusion sets.

Objective: The objective of this trial is to compare the efficacy of 24-h and 96-h replacement intervals for infusion sets on CLABSI among critically ill adults who have central venous access devices.

Methods: This is a multicenter, parallel-group randomized controlled trial that will investigate the effect of infusion set replacement intervals on CLABSI in adult patients admitted to intensive care units (ICUs). The study will enroll 1240 participants who meet the inclusion criteria, which includes being 18 years or older, expected to stay in the ICU for longer than 96 h, and in need of central venous access. Participants will be randomly assigned to either a control group receiving a 96-h replacement interval or a treatment group receiving a 24-h replacement interval.

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Planned Outcome: The primary outcome of this trial is the rate of CLABSI within 28 days after randomization.

Conclusion: This is the first randomized controlled trial to investigate the effects of infusion set replacement at 24-h and 96-h intervals on CLABSI in ICU patients.

Trial Registration: ClinicalTrials.gov identifier, NCT05359601.

Biography

Fen Hu

Fen Hu, Chief Nurse and Master's Supervisor, currently serves as the Deputy Director of the Nursing Department at Zhongnan Hospital of Wuhan University and the Deputy Director of the Research Center for Critical Care and Anesthesia Nursing at the School of Nursing, Wuhan University, Hubei Province, China. Her research focuses on nursing management, critical care nursing, and palliative care. Over the past five years, she has registered three clinical nursing studies as the principal investigator, including one multi-center randomized controlled trial. She has also published 10 SCI papers as the first or corresponding author during this period.

Dan Xu

Dan-dan Xu as an Intensive Care Unit (ICU) nurse and nursing postgraduate, she specializes in critical care and palliative care, with a strong emphasis on evidence-based practice and research. Her academic and clinical work focuses on exploring advanced approaches in critical care nursing, end-of-life care, and patient centered symptom management. To date, she has published five SCI-indexed research papers. Her research integrates clinical expertise with scientific inquiry, aiming to improve patient outcomes and quality of life in high-acuity and terminal care settings. Driven by a passion for innovative critical care and compassionate end-of-life support, she is dedicated to bridging research and clinical practice to elevate nursing standards for life-limiting and life-threatening conditions. She aspires to further contribute to nursing science through interdisciplinary collaboration and high-impact clinical studies.

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Moving Nursing Station Forward: Improving Efficiency and Patient Experience



Ranran Dong, Xihua Geng and Jie Yang

Nursing Department, Dong E Hospital, China | Liaocheng Cardiac Hospital, China

Purpose: The aim of this study is to investigate the effects of moving from a centralized nursing station to close- to-patients bedside model.

Methods: Breaking away from the traditional model where nurses gather to work at the nursing station, we developed a multifunctional treatment cart capable of carrying all necessary items for patient treatment and nursing care, with medication, equipment, and various nursing supplies. Mobile nursing devices, like iPad, Personal Digital Assistant (PDA), mobile barcode printer were also equipped, transforming the nurses' workplace from the nursing station to the patient's side.

Results: Through the forward movement of the nursing station, bedside admission and discharge processes were implemented, with 100% and 82% of admissions and discharges being handled at the bedside, respectively. The average time saved for admission and discharge procedures was 21 minutes and 62 minutes, respectively. Daily, two nursing positions were eliminated, and each nurse saved 10 km of walking. Consequently, patient satisfaction saw a significant increase, rising from 95.2% to 98.7%.

Conclusion: By moving the nursing station to the bedside, we have liberated nurses from time-consuming tasks, allowing more time for patient care. This forward movement has increased nursing work efficiency, broadened the range of services, boosted patient satisfaction, optimized staffing, reduced the physical strength on nurses, which generated positive social outcomes.

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Biography

Ranran Dong

Ranran Dong is a Supervisor Nurse with a Master of Nursing at Liaocheng Cardiac Hospital. She currently serves as Director Assistant in the Nursing Department and as Director of the Office for International Partnerships. She was a visiting scholar at Loma Linda University Medical Center in the USA. With 10 years of experience in Critical Care Medicine as an ICU nurse, she has developed a strong foundation in clinical practice. Ranran has demonstrated a keen interest in clinical nursing research, focusing on evidence-based practice and improving patient outcomes. In the past three years, she has authored and published five research papers.

Xihua Geng

Xihua Geng, Chief Nurse, Master of Science in Nursing, Director of Nursing Department at Liaocheng Cardiac Hospital; currently serves as the Deputy Director of the 3rd Nursing Management Professional Committee of Liaocheng City, Deputy Director of the Critical Care Nursing Professional Committee of Liaocheng Nursing Association, Deputy Director of the 2nd Committee of the Hospital Association of Shandong Province's Disinfection Supply Management Professional Committee, Executive Member of the 2nd Committee of the Critical Care Nursing Branch of Shandong Pathophysiology Society's Critical Care Medicine Professional Committee, Member of the Critical Care Nursing Professional Committee of Shandong Nursing Association, Member of the Medical Quality Management Professional Committee of Shandong Hospital Association, and Member of the Nutrition Management Group of the 1st Nursing Group of the Critical Care Medicine Professional Committee of China Pathophysiology Society; has co-authored 5 books, published over 10 papers, and obtained more than 10 scientific patents.

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Optimizing Processes of Care and Time to Diagnosis in Acute Aortic Dissection Patients in a Chest Pain Center by Implementing a Multidisciplinary Cooperative First Aid Mode—A Quality Improvement Report



Xiaohui Shi¹, Wenyan Xia², Qian Chen³ and Rong Yang¹

¹Nurse Admin, Shanghai DeltaHealth Hospital, China

²Emergency Department, Shanghai DeltaHealth Hospital, China

³Intensive care unit, Shanghai DeltaHealth Hospital, China

Objective: This study aimed to explore the effectiveness of a multidisciplinary cooperative first aid model in the process of establishing a chest pain center specializing in acute aortic dissection (AD).

Design: A quality improvement report.

Methods: A total of 142 patients with acute aortic dissection treated before and after the optimization of the chest pain center process in our hospital were included. According to their admission time: the group before the optimization process was designated as the control group (66 cases) and the group after the optimization process was the intervention group (76 cases). The control group received conventional emergency treatment, while the intervention group received treatment through a multidisciplinary cooperative first aid model. The treatment times for both groups were compared: the time from first medical contact (FMC) to completion of an electrocardiogram (ECG), the diagnosis time, and the time spent in the emergency department.

Results: The research findings revealed that the intervention group had significantly shorter times for FMC-to-ECG, diagnosis time, and emergency stay compared to the control group ($P < 0.001$).

Conclusion: Our findings indicate that by optimizing the multidisciplinary cooperative first aid model and procedures, the treatment of patients has indeed been effectively ensured, achieving safety outcomes.

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Implications for Clinical Practice: For chest pain centers, we suggest that to use multidisciplinary cooperative first aid model to get repaid and definite diagnosis of various causes of chest pain. A bedside transthoracic echocardiography is recommended to use in order to identify AD before proceeding with further treatment.

Biography

Xiao Hui Shi (Sharona Shi)

Xiao Hui Shi (Sharona Shi) holds a Bachelor's degree in Advanced Nursing from Shanghai Second Medical College (Shanghai Jiao Tong University School of Medicine) and a Master's degree in Practice of Inquiry from Australian Catholic University (ACU). She currently serves as a Senior Nurse Manager at Shanghai Delta Hospital and is also a Nurse Educator. She is a member of the Health Education Service Branch of the China Population Culture Promotion Association, an Evidence-Based Practice (EBP) Mentor, and serves as the AHA Training Center Coordinator as well as an AHA BLS Instructor.

She holds a Teaching Qualification Certificate and has led the construction of a specialty project on emergency first aid popularization in Qingpu District. She actively conducts training sessions on first aid, cardiopulmonary resuscitation (CPR), and the use of automated external defibrillators (AED). Additionally, she has published SCI papers and popular science articles related to emergency care.

Wen Yan Xia

Wen Yan Xia holds a Bachelor's degree in Advanced Nursing from Shanghai Jiao Tong University School of Medicine. She currently serves as the Emergency Department Nurse Manager at Shanghai Delta Hospital. With 23 years of experience in acute and critical nursing, she brings extensive clinical expertise to her role. She is also a certified Psychological Consultant of the People's Republic of China (second level) and holds a Teaching Qualification Certificate.

Wen yan Xia has published three papers related to acute and critical care in Chinese core journals, as well as several popular science articles related to emergency care. She is certified as a BLS Provider and ACLS Provider.



Developing a Model of Learner Reputation: A Qualitative Study from the Dual Perspective of Teachers and Students

Qian Xiao, Ling Tong, Yirou Niu, Zehui Xuan, Shuai Jin and Yanling Wang

School of Nursing, Capital Medical University, China

Introduction: In the realm of educational settings, learner reputation has emerged as a pivotal factor influencing motivation, engagement, and overall academic performance. However, there is limited understanding of how learner reputation is constructed and perceived. This study addresses this gap by exploring the multi-faceted nature of learner reputation.

Aim: The primary objective of this research was to develop a comprehensive model of learner reputation that captures its various dimensions and the underlying factors influencing its formation.

Methods: Semi-structured interviews were held with a convenient sample of 26 students and 23 teachers. These interviews were analyzed using qualitative methods to identify key themes and patterns related to learner reputation. Concepts and themes were analyzed by iterative constant comparison.

Results: The constructed Learner Reputation Model encompasses three primary dimensions: Personal Reputation, Task Reputation, and Social Reputation. These dimensions are further delineated into 11 sub-dimensions, collectively illustrating the processes of identity construction, image dissemination, and reputation accumulation. The model highlights the influence of personal characteristics, subjective perceptions, environmental ambiance, and outcome orientations on learner reputation (Shown in Figure 1).

Conclusion: This study contributes to the theoretical understanding of learner reputation and provides a practical framework for educators and researchers to assess and enhance reputation-building strategies in educational contexts. Future research can build on this model to explore the implications of learner reputation.

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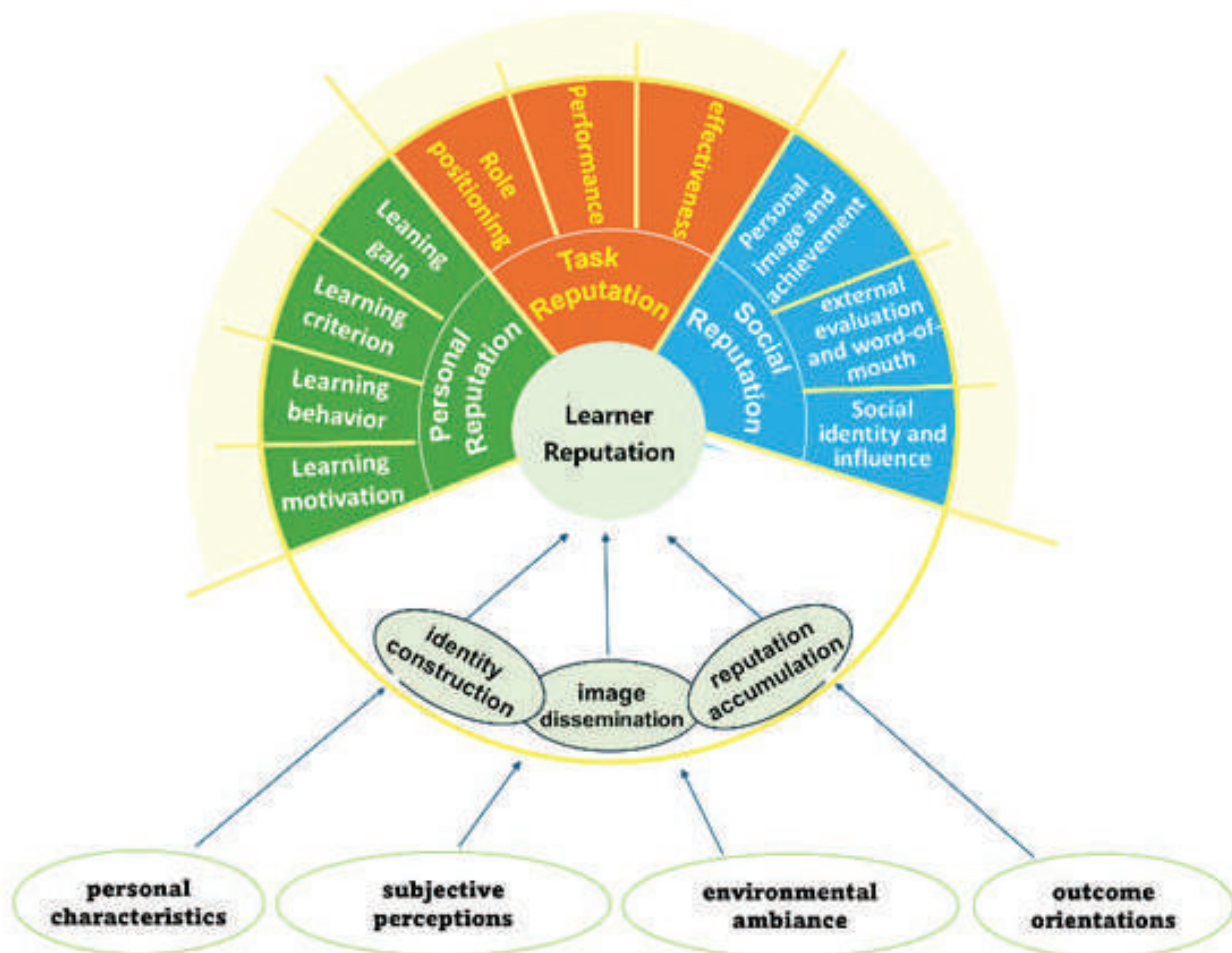


Figure 1 "Rising Sun Model" of learner reputation

Biography

Prof. Qian Xiao is a professor and the associate Dean of Capital Medical University School of Nursing. She also serves as the Vice Chairman, nursing informatics committee of Beijing Nursing Association, the Vice Secretary General of the Council of Nursing, Chinese Health Information and Big Data Association (CHIBDA), the Deputy Director of Rehabilitation Nursing Professional Committee of China Rehabilitation Association, and the Vice President of the Nursing Association of the Cross-Straits Medicine Exchange Association.

Prof. Xiao has more than 100 peer-reviewed publications in scientific journals; She is also an invited reviewer of 6 peer-reviewed journals. She has been awarded 19 fundings from associations including the National Natural Science Foundation of China, the Innovation Fund of the Ministry of Education, and the Beijing Social Science Fund, etc. Prof. Xiao also owned 15 national patents or software Copyrights, and 21 national or Beijing municipal awards.

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Developing Nursing Competencies for Dementia Care Among Community Nurses in Northern Thailand: An Embedded Mixed-Methods Study



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¹Department of Fundamental Nursing and Nursing Administration, Srisavarindhira Thai Red Cross Institute of Nursing, Thailand

²Department of Community Nursing, Lampang Hospital, Thailand

³Lecturer, Boromarajonani College of Nursing Sunpasithiprasong, Faculty of Nursing, Praboromarajchanok Institute, Thailand

⁴Department of Community Health Nursing, Srisavarindhira Thai Red Cross Institute of Nursing, Thailand

Northern region of Thailand is aging more rapidly than other areas, transitioning under the year of "super-aged society" in this 2024. This demographic shift is expected to increase in dementia cases. Currently, community long-term care emphasizes on chronic diseases, with limited focus on dementia care and no specific curriculum for registered nurses. This embedded mixed-method study aims to explore the experiences and competencies of community nurses in providing dementia care for the elderly. Sixty-two nurses completed the questionnaires assessing competencies across eight domains guided by the Thai Nursing Council, and fifth nurses were recruited through purposive and snowball sampling for in-depth interviews and participant observation. Data were analyzed using thematic analysis for qualitative data and descriptive statistics for quantitative data. This study was approved by the Institutional Review Board, Faculty of Medicine, Chulalongkorn University, reference number 0228/2024.

Findings indicate community nurses required enhanced competencies in screening, promoting, and preventing dementia. Key skills include: early cognitive detection, implementing preventive strategies, and raising community awareness to support healthy aging and slow disease progression. Nurses play a vital role in linking community resources with

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healthcare interventions for comprehensive care.

Three themes emerged as follows; 1) Screening for dementia care: Annual assessments of activities of daily living (ADLs) conducted collaboratively by caregivers and community nurses. 2) Core knowledge and skills: Emphasize dementia promotion and prevention early detection rather than curation *via* raising awareness within communities. Lacking of awareness remains a significant challenge. 3) Empathetic communication and mindfulness: Promoting humanized care, reintegration into the community, and leveraging local resources to support patient and caregiver challenges.

Conclusion: Collaborative efforts among all stakeholders and partners are essential for holistic dementia care. Community nurses should focus on developing competencies in screening, promotion, and prevention aim to better support the individual elderly as well as their families too.

Biography

Oradee Choksawat

Dr. O. Choksawat is a dedicated nursing lecturer and researcher specializing in maternal health, resilience in older adults, and qualitative research methodologies. Her work reflects a strong commitment to advancing public health through evidence-based practices and interdisciplinary collaboration.

She has contributed to significant research, including studies on congenital disorders among pregnant women (Pacific Rim International Journal of Nursing Research, 2023) and resilience quotients in older adults (Thai Red Cross Nursing Journal, 2022).

Dr. Oradee presented her research on infection control and interprofessional collaboration during the COVID-19 pandemic at the ICN Congress 2023 in Canada, showcasing her expertise on a global stage.

Educational Background-Doctor of Philosophy (Ph.D.) in Nursing, 2023.

Panicha Boonsawad

Dr. Panicha Boonsawad is an Assistant Professor at the Faculty of Nursing, Srisavarindhira Thai Red Cross Institute of Nursing Bangkok, Thailand, and Vice Chairperson of the Steering Committee for Elderly Research Development. Her research focuses on geriatric care, healthy aging, dementia care competencies, and MOOC curriculum development for elderly caregivers, in collaboration with international partners, such as the Active Aging Consortium Asia Pacific.

Recognized Awards

- Top Rated Poster, ICN Congress 2023, Montreal, Canada: "The Practicum Model for Elderly Caregivers' Curricula in the Digital Age".
- Best Oral Presenter, 8th International Nursing Research Conference (2024): "Developing Nursing Competencies for Dementia Care."

Educational Background

- Ph.D. in Geriatric Nursing (International Program), 2016.
- Certificate in Ethnography and Elderly Care, Visiting Scholar, University of Pennsylvania, USA (2011-2012).

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Improvements in the Galapagos Health System: Telemedicine, Research and Medical Assistance



Jaime Ocampo Trujillo¹ and Maria Emilia Menoscal Coello²

¹Galapagos Science Center, Ecuador

²Universidad San Francisco de Quito, Ecuador

The state of the public health system in the Galapagos Islands has been a concern for Universidad San Francisco de Quito USFQ in recent years. This is because the Islands' public health system urgently needs external support in order to meet the needs presented by the population. The population has found itself in need of having to travel to the mainland to receive medical assistance from medical specialists that are not found on the islands. Since its creation in 2016, this project has sought to improve and support the public health system for the Galapagos population and avoid their need of having to travel to the mainland to receive medical assistance. To achieve this objective, the project has been divided into three areas: research, medical assistance and continuing education. During these past years, several stakeholders, principally those involved in the Master of Public Health from the university, as well as other departments, have helped in multiple ways. Various international institutions have also been involved that have helped with the project's continuity. Thanks to several agreements the university has made with Oskar Jandl Hospital, USFQ has had a significant impact on the Galapagos public health system. Considering the nature of this project, it seeks to contribute to Sustainable Development Goal (SDG) #3: Health and Well-being.

Biography

Jaime Eduardo Ocampo Trujillo

Dr. Jaime Eduardo Ocampo Trujillo earned his medical degree in 1987 in Universidad Central del Ecuador. Later on, he pursued an MBA from Loyola University in New Orleans (USA). He also holds a Ph.D. in Management and Leadership from Capella University. Jaime has managed an ecuadorian medical institution called Sistemas Médicos ever since its opening in 1997, and has been responsible for its expansion from 1 medical

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centre to 8 throughout the country. He also has been the project lead for a public-private multidisciplinary alliance that seeks to enhance the services the Ecuadorian public health offers to the Galapagos' population, increasing the number of specialties supplied in the archipelago. He currently is a professor at the School of Business in San Francisco University, Quito. Jaime is currently pursuing an academic project in healthcare management.

Maria Emilia Menoscal Coello

Maria Emilia Menoscal Coello earned her Finance degree in San Francisco University, in Quito, in May 2023. She has dedicated her time ever since being a student, in research and publications in a wide range of fields. Having started at the school's magazine as an editorial assistant in 2020; where she wrote several articles regarding business management, sustainability, education and personal development. She later on specialized in the field of outreach projects and medical management. Maria Emilia documented the results of the multidisciplinary alliance USFQ holds with the Public Health Ecuadorian Ministry alongside Galapagos Science Center, a research hub that promotes the conservation of the Galapagos. She is currently pursuing an academic project in healthcare management along with Dr. Ocampo.



A Geo-Localization Data Production System used for Various Nursing Purposes

Nel Samama

SAMOVAR, Institut Polytechnique de Paris, France

The availability of reliable geo-location data in buildings makes it possible to provide a wide range of services in order to improve the well-being of patients and of healthcare staff, in various environments. Current localization systems are presented as accurate, but are unreliable (the quality of the positioning is unknown). The approach we propose takes the problem from the priority angle of reliability: localization is provided in the form of an area of variable size depending on environmental conditions (site architecture, density of people, radiations, etc.), in which the probability of presence is greater than 98%.

The use cases we shall describe, for which real-life results are available, are as follows:

- Opening of "Protected Living Units" (Alzheimer's) with tracking devices enabling real-time monitoring of movements, giving residents new-found freedom,
- Optimizing outpatient medical care by guiding patients and by managing the sequence of medical acts (improving equipment and staff efficiency),
- Tracking of certain equipment (such as stretchers in an emergency department),
- Analysis of an elderly person's behavior at home, in order to prevent progressive loss of autonomy over the long term, or early detection of unusual events,
- etc.

We will also present the technological aspects of our approaches and in particular the reasons behind such high levels of reliability. It is mainly based on three points: the integration of our electronics into electrical equipments available in all public buildings, the retrieval of encrypted location data on secure servers, and the implementation of so-called "symbolic" algorithms fully integrating the map of the building. We will conclude with a progress

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report on the technology, industry contacts, and past, current and foreseen deployments.

Biography

Nel Samama received the diploma of engineer in Mechanics and Electricity from the “Ecole Spéciale des Travaux Publics”, Paris, in 1985, the M.Sc. degree in Computer Science from the University of Birmingham, UK, in 1985 and the Ph.D. degree in Electrical Engineering and Computer Science from the University of Paris in 1989. From 1989 to 1997, he worked for the Thales Group where he designed behavioral modeling for microwave and electronic components stressed by high power microwave radiation. In 1997, he joined the “Institut Polytechnique de Paris”, France, as a professor, and has been working within the indoor positioning field. He was co-founder of two start-ups in this field, which offered systems for monitoring patients with neurological disorders in residential facilities for dependent elderly people, for monitoring hospital stretchers, or for managing patient flows in outpatient clinic.



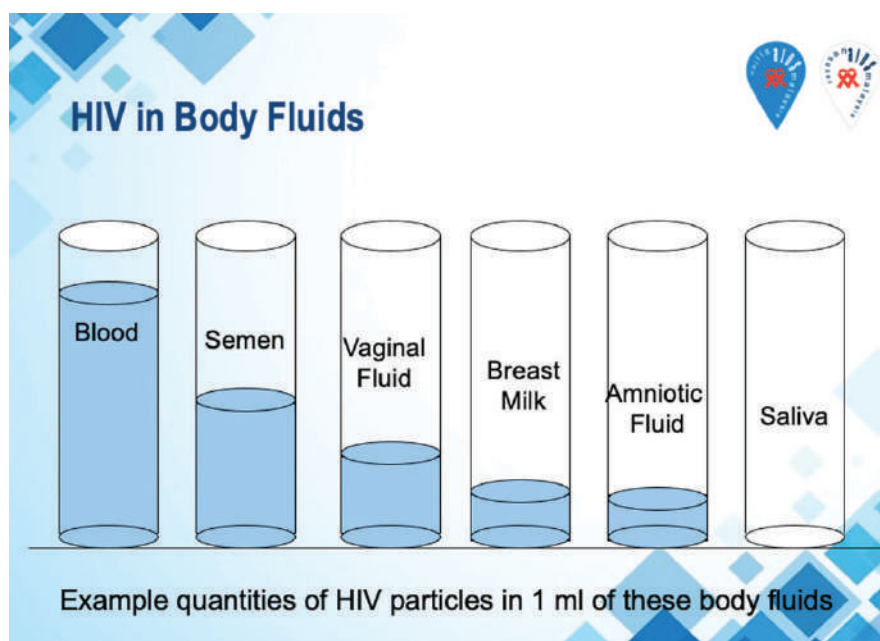
The Rationale of Preventing HIV at Primary Level

Fadzilah Binti Haji Abd Hamid and Fathiiah Binti Hamzah

Rumah Solehah, Malaysia

Introduction: HIV has been with us since the first case in 1981 initially GRID (Gay Related Infectious Disease). Malaysia has attained Award for Elimination of Mother to Child Transmission on the 8th of October 2018. The three level of Prevention: Primary, Secondary and Tertiary include what is said now, "Treatment is Prevention".

Issues with HIV: It is proven that it takes one litre of urine to transmit the virus, thus sharing of toilet bowl would not be at risk of getting the virus. Sharing of utensils too is not risky. It takes one litre of saliva to be infected. We can enjoy eating together with them.



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Blood is obviously red in color and is always immediately cleaned. Malaysia has stringent method of screening blood for donation, though costly, it's worth it.

Lifestyle: Some say: Religion is ideal, Reality is people. Though one may not follow one's religion strictly, the noble value should be adhered. The evergreen nugget of wisdom ABC for HIV Prevention should be followed:

A for abstinence–No casual sex until one is married.

B be faithful– Have sex with only one partner.

C use condom–Completely and consistently follow all the 10 steps faithfully.

Unfortunately, those who trust in using condom for casual sex often fail to comply to the procedure when self-control is involved thus ending up with getting the virus.

The Consequence of Getting the Virus: Medicines should be taken for life. Not all countries can afford to give free drugs lifelong. In Malaysia second line drugs need to be sponsored for those who cannot afford to purchase on their own. Getting sponsored is becoming more difficult lately.

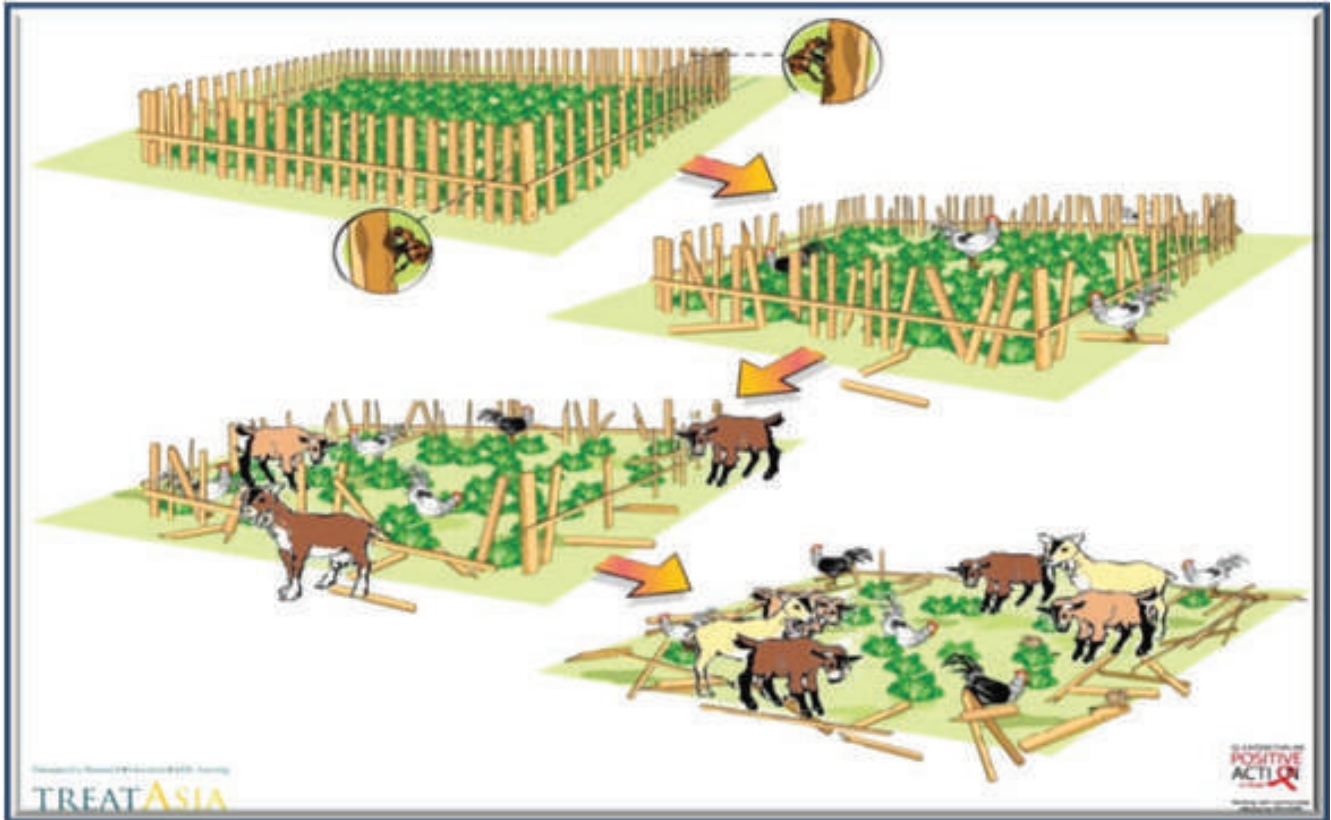
Physically one must be very careful with well-balanced diet, personal hygiene from head to toe and environmental health. Stress level should be under control.

Failure in sustaining the above factors, CD4 count can decrease and viral load increase, opportunistic disease set in. The almost unrepairable drug psychosis awaits those infected through intravenous drugs. These affect one's productivity and quality of life. It can also decrease years of life expectancy.

Conclusion: With the above challenges, it is much easier to practice Primary Level of prevention from getting HIV. Learn to have good control of oneself. Avoid being entangled with wrong group of society. Falling in love with the opposite sex is natural, do not hasten into it. Find a suitable time to get married and start a family. Forget the saying: The Priest Kills Love. Do not be too much indulged in the wedding. Preparing for a happy marriage is more vital. Good family institutions will make up for a more harmonious society with the noble values to be passed to the next generation.

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Biography

Fadzilah Binti Haji Abd Hamid is a State Registered Nurse, Certified Midwife, and Public Health Nurse, with extensive experience in healthcare and HIV/AIDS education. She is also a National Trainer for HIV/AIDS in Malaysia. Her specialized training includes General Counselling at University Technology Malaysia and HIV/AIDS Counselling from the National AIDS Training Unit in the UK.

She has served in Rural Health Clinics across 10 districts and later transitioned to the Ministry of Health headquarters, where she worked for eight years. She played a key role in the formation of Rumah Solehah, a home for women and children affected by HIV/AIDS. Her international experience includes working at King Abd Aziz National Guard Hospital in Jeddah and at the Infirmary of Asia Pacific Smart School. She is also a dedicated committee member of the PAL Scheme under the Malaysian AIDS Foundation.



Effectiveness of Electrocardiogram Interpretation Education Program Using Mixed Learning Methods and Webpage

Sunhee Lee¹, Hyo Jeong Kim¹, Young Choi², Ji Yeung Kim¹ and Ji Sun Shin¹

¹Department of Nursing, Seoul St. Mary's Hospital, The Catholic University of Korea, Republic of Korea

²Division of Cardiology, Department of Internal Medicine, Seoul St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Republic of Korea

Aim: This study was conducted to develop an electrocardiogram education program that incorporates an HTML webpage and mixed learning methods to enhance electrocardiogram interpretation skills.

Design: Pre-post design study.

Methods: We developed an electrocardiogram interpretation HTML webpage based on an electrocardiogram interpretation algorithm and implemented an 18-week (2023.5.15~2023.9.22) electrocardiogram education program, which included daily 5-minute training sessions. Twenty-seven ward nurses were provided with the URL (<https://ecgweb.github.io/ECGwebEN>) to the electrocardiogram interpretation HTML webpage and shared one electrocardiogram case daily for self-interpretation. Electrocardiogram interpretation performance and confidence were evaluated through questionnaires at three phases: before the program, after 6 weeks of basic electrocardiogram and arrhythmia education, and after 12 weeks of application of the electrocardiogram interpretation HTML webpage and case-based lecture education. The statistical tests used were repeated-measures ANOVA or the Wilcoxon signed-rank test.

Results: The average score for electrocardiogram interpretation performance before the electrocardiogram education program was 11.89(SD=3.50), after 6 weeks of basic electrocardiogram and arrhythmia education it was 14.15(SD=3.68), and after 12 weeks of application of the electrocardiogram interpretation HTML webpage and case-based lecture education, it was 15.56(SD=3.04). This shows that electrocardiogram interpretation performance significantly improved over time ($p<.001$). Additionally, post-hoc analysis revealed significant differences in electrocardiogram interpretation performance at each stage, i.e., before, during, and after the

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application of an electrocardiogram education program. Furthermore, the electrocardiogram interpretation confidence questionnaire score (pre-Median 18, IQR=5; post-Median 23, IQR=3) was improved significantly after the completion of the 18-week education program ($p<.001$).

Conclusions: Based on the results of this study, we believe that an electrocardiogram education program using HTML webpage and a mixed learning method would be very beneficial for maintaining and improving electrocardiogram interpretation skills of clinical nurses. Such a program can help nurses interpret electrocardiograms more effectively and assist them in making important decisions in patient care.

Biography

Dr. Sunhee Lee received her Bachelor's (1994–1998), Master's (2001–2006), and Doctoral (2014–2018) degrees in Nursing from the Catholic University College of Nursing in Seoul, Korea. Since 1998, she has served as a Unit Manager at The Catholic University of Korea Seoul St. Mary's Hospital.



Gamification to Grow Motivation for Interactive Engagement of Health Nurses in Using Health Information Systems: A Conceptual Framework

Faisal Binsar, Muhammad Bayu and Lisa Puspitasari

Muhammadiyah University Berau, Indonesia

Long-term use of information systems in health organizations will result in increased patient-oriented services, availability of timely access to information, and improved communication relationships among nurses. The involvement of nurses using information systems in recording activities and monitoring the progress of patient care is an integral part of health organizations that must be carried out interactively. Documentation of nursing records in a health information system requires skills and motivation. Involving nurses to use information systems in health organizations is a difficult and complex task. Health organizations need to take positive steps to motivate nurses to be involved and actively use information systems. This study investigates the use of gamification as a strategy to encourage and motivate the involvement of health nurses using and utilizing data and information, supporting each other and influencing other nurses. The results of studies from various literature that have been collected provide a conceptual framework for how nursing care activities that are influenced by the features contained in the game can encourage active engagement and the use of information systems.

Biography

With over 15 years of experience in the healthcare sector, playing a key role in developing and managing the Hospital Management Information System (SIMRS) product that is now widely used in hospitals and clinics in Sumatra, Java, and Kalimantan. This long-term involvement has given me a deep understanding of the specific needs and operational challenges faced by healthcare institutions, allowing me to create tailored solutions to optimize efficiency and quality of service. Not only focusing on improving administrative processes, but also ensuring the integration of health management systems that support operational scale and improved patient care.

Digital mastery in the healthcare industry is further strengthened by the knowledge and insight of strategic management obtained from the *Doctor of Research in Management* program, which makes it possible to apply technology in a more civilized and optimally efficient manner in various other sectors.



The Impact of Self-Reflective Learning Diary by Nurses on Attitude and Knowledge towards Psychiatry

Shiji Thomas (Sr. Nikhila)¹ and Augustine Thomas²

¹Principal, St. Thomas College of Nursing, Jyothi Hospital, India

²Xavier-Loyola College of Interdisciplinary Studies, Loyola College of Social Sciences, India

In psychiatric nursing, addressing the mental health problems of patients with high severity demands of the nurses to be equipped with the knowledge of the circumstances and context along with problem solving ability based on critical thinking. Self-reflection is essential to develop critical thinking skills among nurses. Self-reflective thoughtful learning facilitates student's critical thinking skills. Self-reflective learning experience is necessary to analyse experience and improve future performance. The aim of this study is to assess the impact of pre-clinical workshop on self-reflective learning diary on knowledge and attitude of nursing students towards psychiatry during their mental health clinical placement.

Objective: The present study is carried out to evaluate the impact of the pre-clinical workshop on self-reflective learning diary on attitude and knowledge towards psychiatry among third year BSc nursing students during their clinical placement in psychiatry.

Materials and methods: Two hundred 3rd year BSc nursing students (100 each in experimental group and the control group) were identified for the study. Structured knowledge questionnaire and attitude scale were used to collect the knowledge and attitude of the nursing students towards psychiatry. Self-reflective learning diary was introduced and all the measurements were carried out once before the mental health clinical placement and after the 30th day of clinical posting.

Results:

Baseline Variables: Almost all of the baselines among nursing students were homogeneously distributed in the experimental and the control groups.

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Knowledge: The mean post clinical placement knowledge score (30.92) of the experimental group is higher than the mean post clinical placement knowledge score (22.75) of the control group at 0.01 level of significance which states that self-reflective learning diary has an impact on the knowledge of the nursing students about psychiatry.

Attitude: The mean post clinical placement attitude score (134.53) of the experimental group is greater than the mean post clinical placement attitude score of the control group (119.91) and it shows the impact of reflective learning diary on the attitude of nursing students towards psychiatry. There is moderate positive correlation between knowledge and attitude and the knowledge of the nursing students is associated with age, religion, previous knowledge and the completion of psychiatry theory class.

Conclusion: Reflective practice contributes to development of new knowledge and skills, promotes higher levels of understanding, and reduce stigma and improve confidence. It is important to develop and implement educational programs based on reflective practice to inculcate positive attitude towards people with mental illness and to improve the knowledge related to mental illness to provide optimal care to this vulnerable population.

Biography

Dr. Shiji Thomas is currently serving as the principal of St. Thomas College of Nursing in Odisha, India. She obtained her Ph.D. in 2021 from Maharaj Vinayak Global University (MVGU) in Jaipur, Rajasthan. She holds an M.Sc. in Psychiatric Nursing from Father Muller College of Nursing, Karnataka. She also holds a post-graduate diploma in Biomedical Ethics and Law from the Faculty of Medicine, University of Porto, Portugal under the International Chair in Bioethics. Over the years, she has contributed papers to many peer reviewed nursing and mental health journals. She has made presentations in various national and international conferences. She has been teaching courses in psychiatric nursing for 15 Years. She is involved in the training of nursing students since 2010. Her academic journey and clinical expertise in psychiatric nursing contribute meaningfully to nursing education and mental health.



Calculated Fracture Risk among Hypertensive and Non-Hypertensive Osteoporotic Women

Afsana Mahjabin¹, Mohammad Tariqul Islam² and Md Ziaul Islam³

¹Monno Medical College, Bangladesh

²Bangabandhu Sheikh Mujib Medical University (BSMMU), Bangladesh

³National Institute of Preventive and Social Medicine (NIPSOM), Bangladesh

Introduction: Osteoporosis is a low bone mass disorder that is frequently associated with hip and vertebral fractures. Hypertension can also affect the bone mass and structure leading to increased vulnerability to fractures.

Objective: To determine whether hypertension is associated with higher osteoporotic fracture risk.

Methodology: This comparative cross-sectional study was carried out at two tertiary care hospitals in Dhaka from January 1st to December 31st, 2017 under the Community Medicine department of National Institute of Preventive and Social Medicine (NIPSOM). After the face-to-face interviews, data were obtained utilizing a semi-structured questionnaire and checklist. Fracture Risk Assessment Tool (FRAX) was used for online assessment of fracture risk probability among the two groups and Statistical Packages for Social Sciences (SPSS-23.0) was used to conduct statistical analysis.

Results: In this study 54 hypertensive and 34 non-hypertensive osteoporotic female patients were included. This study showed that the average ages of hypertensive and non-hypertensive patients were 61.94 ± 9.362 years and 59.18 ± 11.269 years, respectively. The majority of both hypertensive (96.3%) and non-hypertensive (82.4%) patients were housewives. Among the osteoporotic women, mean duration of hypertension was 6.41 ± 4.049 years, while the mean duration of osteoporosis was 8.80 ± 5.022 years for hypertensive patients and 7.53 ± 5.920 years for non-hypertensive patients. The risk of major osteoporotic fractures (MOF) by age was significantly higher (X^2 , $p < 0.05$) among patients aged 60-79 years and

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was notably higher in hypertensive individuals. Although the risk of MOF by hypertension was relatively higher in hypertensive patients but it was not statistically significant (X^2 , $p>0.05$). However, the risk of hip fractures (HF) was significantly higher (X^2 , $p<0.05$) among hypertensive patients.

Conclusion: The study reflected that people with hypertension had a noticeably greater risk of fracture.

Biography

Dr. Afsana Mahjabin was born in 1988 in Bangladesh. She completed her MBBS in 2011 from Kumudini Women's Medical College, under the University of Dhaka. In 2018, she earned a Master's in Public Health (MPH) with a specialization in Community Medicine from the National Institute of Preventive and Social Medicine, affiliated with Bangabandhu Sheikh Mujib Medical University, Dhaka. Currently, she works as an Associate Professor in the Department of Community Medicine at Monno Medical College, Manikganj, Dhaka. Alongside her teaching responsibilities, Dr. Mahjabin actively participates in various national and international conferences, where she presents her research findings. She has authored 22 publications in esteemed national and international journals and serves as a reviewer for several of them. Additionally, she holds the position of Assistant Editor for the Journal of Monno Medical College.

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SPEAKER TALKS



History of Resection for Liver Cancer and Current IT-Based Preoperative 3D Simulation and Intraoperative Navigation

Mitsugi Shimoda¹, Masanori Hariyama² and Shuji Suzuki¹

¹Department of Gastroenterological Surgery, Tokyo Medical University, Ibaraki Medical Center, Japan

²Graduate School of Information Sciences, Tohoku University, Japan

Objectives and Aim: Hepatocellular carcinoma (HCC) tends to develop trans portal and is associated with portal vein invasion and intrahepatic metastases, so it is important to systematically resect the portal region of HCC. However, many patients with HCC already had complicated by lower liver function (cirrhosis) under hepatitis, if miss setting of the resection volume was associated with post-operative sever liver failure, often leading to death. In the 1980s, establishment of safety limits for extent of hepatic resection of cirrhotic liver based on the ICG resistance test by Makuuchi et al. It was led to a rapid decline in mortality from post-operative liver failure in Japan. To identify the exact extent of liver resection, Makuuchi also introduced intraoperative ultrasound and devised a systematic subsegmentectomy of the liver. This technique is now the standard procedure for HCC with cirrhosis liver in worldwide. On the other hand, conventional imaging of the HCC has been aimed at localizing and qualitatively diagnosing tumors using 2D images such as CT and ultrasound. It is very difficult to use conventional 2D CT images of the liver, a real organ, as a surgical simulation, and it was impossible to identify the detailed portal and venous run in three dimensions and accurately predict the resection volume.

Recent advances in computer technology have led to the development of various 3D CT simulation software around 2000, enabling stereoscopic views of the liver.

This makes it easy to identify and share the location of tumors, the area to be resected and the predicted resected liver volume. 3DCT imaging has become an indispensable tool for planning and performing hepatectomies, contributing significantly to reducing operating time, controlling blood loss and preventing post-operative liver failure.

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Results and Discussion: We have independently developed the fully automated 3D simulation software Hariyama-Shimoda Software (HSS) since 2011, which includes a function to identify the 100% dominant portal vein from tumor perspective, set the maximum predicted liver resection volume calculated from the ICG tolerance test and consider preoperative liver function assessment. The effectiveness of this function has already been reported. Now, we are also using 3D US image processing for intraoperative navigation and here we would like to introduce our efforts to new date.

Biography

Mitsugi Shimoda, M.D., Ph.D., born on August 24, 1963, in Portland, Oregon, USA, is a Professor and Staff Physician in the Department of Gastroenterological Surgery at Tokyo Medical University, Ibaraki Medical Center since August 2020. He earned his M.D. in 1990 and completed his residency at Dokkyo University School of Medicine, where he was honored as Outstanding 2nd Year Resident in 1992. He later received his Ph.D. in Surgery from the same institution in 1996. Dr. Shimoda is a respected member of several professional societies, including the Japan Society of Computer Aided Surgery (Council Member since 2023), the Japan Hepato-Pancreatic-Biliary Surgery Society (Council Member since 2008), and international organizations such as IHPBS, IAP, EAES, and IASGO. Beyond his clinical and academic work, he serves as Chief Team Doctor for Tochigi Soccer Club in Japan's professional league since 2009, demonstrating his commitment to both medical science and community engagement.



Surgical Waiting Lists and Queue Management in a Brazilian Tertiary Public Hospital

Antonio Pazin-Filho and Claudia Marques Canabrava

Ribeirão Preto Medical School, University of São Paulo, Brazil

In Brazil, it is still common for surgical teams to manage their own surgical queues. This allows for a significant degree of variability in the utilization of operating rooms, leading to idleness in the face of cancellations due to improper patient preparation, unavailability of the resources needed for the scheduled surgery, or competition among surgical teams for the use of resources. The article examines the implementation of a centralized surgical queue management system at the Ribeirão Preto Medical School Clinical Hospital between 2016 and 2022, highlighting its importance in reducing surgical waiting times and addressing challenges such as the COVID-19 pandemic.

Before 2016, queues were managed independently by each specialty, making it difficult to control and efficiently allocate resources. With the creation of the “Patients with Surgical Indication” (PSI) system, queues were integrated and centralized, enabling more effective management through standardized criteria for patient inclusion, prioritization, and removal. The system tracks data such as the type of surgery, priority level, and required resources, ensuring transparency and traceability for all changes made to the queue.

The results showed a significant reduction in waiting times, with the median dropping from 98 days in 2016 to 14 days in 2022. The system also contributed to a more balanced management of hospital resources, reducing cancellations and optimizing the use of operating rooms. During the pandemic, the PSI was crucial in prioritizing oncological surgeries, even with a general reduction in surgical capacity due to the reallocation of resources for intensive care.

The study highlights that centralized surgical queue management not only improves hospital efficiency but also promotes equity in access to healthcare services, particularly

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within Brazil's Unified Health System (SUS). It provides a replicable model for other Brazilian institutions, aligning with national initiatives to reduce surgical backlogs.

In conclusion, centralized queue management is an essential tool for improving transparency, efficiency, and quality in public healthcare services. It also proves to be an effective response to challenges during crises, such as the COVID-19 pandemic.

Biography

- 1993 – Graduated in Medicine from the Ribeirão Preto Medical School, University of São Paulo
- 1998 – Medical residency in Cardiology and Doppler Echocardiography at the Ribeirão Preto Clinical Hospital, FMRP-USP
- 2004 – MBA in Healthcare Organization Management from FUNDACE (Foundation of the School of Economics, Administration, and Accounting of Ribeirão Preto)
- 2007 – Postdoctoral fellowship in Clinical Epidemiology at Johns Hopkins Bloomberg School of Public Health – Baltimore - USA
- 2007–2015 – Coordinator of the Emergency Unit at HCFMRP-USP – Ribeirao Preto Medical School - Brazil
- 2013–2015 – Coordinator of the Professional Master's Program in Healthcare Organization Management at Ribeirao Preto Medical School - Brazil
- 2015–2022 – Director of the Department of Health Care at the University Hospital of the Ribeirao Preto Medical School - Brazil
- 2015-2016 – Consultant to UNESCO – Intra-Hospital Management
- 2019 –Present date – Full Professor in Emergency Medicine Ribeirao Preto Medical School - Brazil

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The Impact of Digital Innovation and Lifestyle Medicine on Nursing Roles and Practices

David John Wortley

International Society of Digital Medicine, UK

The rapid evolution of digital innovation and the growing emphasis on lifestyle medicine are transforming the landscape of healthcare delivery, redefining nursing roles and practices. This presentation explores how technological advancements such as telemedicine, wearable health devices, artificial intelligence (AI), and electronic health records (EHRs) are reshaping nursing responsibilities, enabling more efficient, personalized, and preventative care. Concurrently, the rise of lifestyle medicine—focusing on nutrition, physical activity, stress management, and patient empowerment—places nurses at the forefront of promoting sustainable health behaviors.

Digital innovation enhances nurses' ability to monitor and manage chronic diseases remotely, improve diagnostic accuracy, and engage patients through interactive platforms. However, it also demands upskilling in data interpretation, cybersecurity, and virtual communication. Lifestyle medicine expands nurses' roles as educators and coaches, equipping them to guide patients in adopting evidence-based interventions that reduce dependency on pharmacological treatments.

This dual paradigm shift presents challenges such as ethical considerations, disparities in technology access, and the risk of caregiver burnout. It also necessitates interdisciplinary collaboration and continuous professional development to bridge the gap between technology and human-centered care.

By highlighting case studies and recent research, this presentation underscores the pivotal role of nurses in integrating digital tools and lifestyle medicine into everyday practice. Attendees will gain insights into strategies for adapting to these changes, fostering resilience, and maximizing the potential of innovation to enhance patient outcomes and

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advance the nursing profession.

Biography

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

As the Founding Director of the Serious Games Institute (SGI) at Coventry University, his team established an International Centre of Excellence for Applied Research and Innovation in the field of serious games and immersive technologies for a wide range of applications. His areas of special interest are technologies for preventative healthcare, collaboration, virtual reality and interactive rich media knowledge sharing. He a professional virtual event facilitator, webinar host and publisher.



Surgical Innovation through AI: From Nerve Recognition to Nursing Support

Kazuya Kinoshita¹, Tetsuro Maruyama¹, Gaku Ohira¹, Toru Tochigi¹, Okada Koichiro¹, Atushi Hirata¹, Mayuko Kinoshita¹, Asuka Kurihara², Jun Washimi², Nao Kobayashi² and Hisahiro Matsubara¹

¹Department of Frontier Surgery, Graduate School of Medicine, Chiba University, Japan

²Anaut Inc., Japan

Objective: This study aimed to develop and evaluate a deep learning model based on U-Net for automatic nerve segmentation in rectal cancer surgery to support surgical practice and education.

Methods: The model's performance was assessed using 60 randomly selected frames, with Dice and Intersection over Union (IoU) scores compared to ground truth. A questionnaire was administered to five colorectal surgeons to evaluate underdetection, overdetection, and utility. Additionally, an educational assessment was conducted with non-colorectal surgeons, trainees, and medical students to evaluate nerve recognition before and after viewing AI analysis videos.

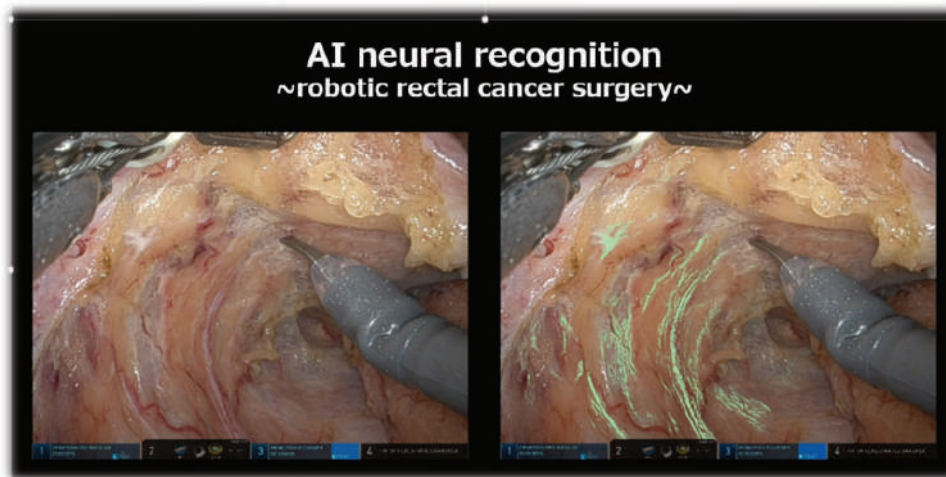
Results: The model achieved a mean Dice score of 0.442 and IoU score of 0.292. Colorectal surgeons reported underdetection (0.80 ± 0.47), overdetection (0.58 ± 0.41), and a usefulness score of $3.38 (\pm 0.43)$. Nerve recognition scores of non-colorectal surgeons, residents, and medical students improved significantly after viewing AI videos. Medical students showed the largest improvement compared to traditional lectures.

Conclusion: The AI model demonstrated effective nerve recognition in rectal cancer surgery for expert surgeons and showed promise in educating junior surgeons and medical students.

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Based on the results demonstrating the AI's support for surgery and educational benefits, we surveyed whether this AI model could also serve as a useful tool for operating room nurses. We discuss the survey results as well.



Biography

Kazuya Kinoshita is a Japanese surgeon specializing in gastrointestinal and transplant surgery. He obtained board certification as a specialist in surgery in 2021 and has since performed gastric, colorectal, esophageal, hepato-pancreato-biliary surgeries, and kidney transplant surgeries. In 2022, he earned certification as a transplant specialist.

Dr. Kinoshita completed his doctoral degree at Chiba University Graduate School in March 2023. Since 2020, he has collaborated with Anaut Inc. in the development of surgical AI, leveraging his expertise as a surgeon to advance medical technology.

He is currently engaged in research and clinical practice at the Department of Frontier Surgery and the Department of Esophageal-Gastro-Intestinal Surgery at Chiba University Hospital.



Community Based Prevention and Research for Substance Use

Sreelekha Prakash¹, Temerity Berry² and Katie Faldetta²

¹School of Health Science, Stockton University, USA

²Cape Assist, USA

Background: According to Substance abuse and mental health administration (SAMHSA) among people aged 12 or older in 2021, 61.2 million people (21.9 %) used illicit drugs in the past year and nearly 2 in 5 young adults 18 to 25 used illicit drugs in the past year. * The purpose of this 5-year Strategic Prevention Framework (SPF) program is to help reduce the onset and progression of substance misuse throughout a state jurisdiction for individuals and families by building and expanding the capacity of local community prevention providers to implement evidence-based programs.

Objective:

- To assess the factors affecting substance use behavior in youth and young adults
- Analyze the onset of drug use and its association with adverse childhood experiences (ACES) and mental health

Method: The youth (12 to 17 years) data gets collected through PRIDE surveys alternate years and young adults were invited to participate in an online questionnaire survey with prior consent through an IRB approved study. The Survey included 10 item ACE questionnaire and substance use related to Alcohol, Marijuana, Opioids, Stimulants, and other drugs. The PHQ-9 questionnaire was used to assess cognitive health.

Results: The programs address risk and protective factors associated with substance misuse to build stronger and more resilient communities. The work includes everything from providing after-school programs to helping municipalities create laws and ordinances that keep communities safe from violence and crime. At the core of the organization's

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effectiveness are the relationships the agency has been able to cultivate with community partners. Analysed data will be used to support prevention efforts and sustainable programs.

Conclusion: While prevention services will impact all residents, targeted efforts of this project will be directed to increase healthy choices and coping skills by youth and young adults thus reducing substance misuse specifically alcohol, marijuana, and opioids.

<https://www.samhsa.gov/newsroom/press-announcements/20230104/samhsa-announces-nsduh-results-detailing-mental-illness-substance-use-levels-2021>

<https://www.samhsa.gov/grants/grant-announcements/sp-23-003>

Biography

Sreelekha Prakash MD, MPH is a clinician, epidemiologist and a health science researcher currently working as Associate Professor in School of Health Science in Stockton University. Ongoing research work involves Maternal and Child Health project with Nurture NJ, NJ Birth Equity Funders Alliance (NJBEFA) and NJEDA, Cape Assist on Substance Abuse and Mental Health Administration (SAMHSA) grant work related to Drug Use and Misuse, in adolescents and young adults and on Geriatrics workforce Enhancement Project (GWEP). She is the current President of New Jersey Public Health Association (NJPHA). She was selected for the executive board of the Public Health Institute in NJ and chair of the nominating committee and works with local prevention coalitions in the state (PCMC and Medical corps. At the national level on the executive board of science board and on the epidemiology caucus of American Public Health Association (APHA) and Alcohol Tobacco and other Drugs Caucus.



Development and Usability Evaluation of an Intelligent Communication Tool for ICU Patients with Mechanical Ventilation

Qian Xiao and **Shujie Li**

School of Nursing, Capital Medical University, China

Introduction: Intensive care unit (ICU) nurse-patient communication is an important part of clinical nursing work, and the language barrier of ICU mechanically ventilated patients brings physical and psychological discomfort to patients, and the use of communication tools helps to improve communication efficiency and patient satisfaction, which is a key factor affecting the quality of care and patient safety. It is challenging to address the communication demands of ICU patients on mechanical ventilation due to the constraints of the current nurse-patient contact modality.

Aim: This study aimed to develop an intelligent communication tool for ICU patients with mechanical ventilation and evaluate its usability in ICU setting.

Methods: A cross-sectional survey was conducted among 206 ICU nurses, using a questionnaire on the communication status and needs of ICU patients. Additionally, semi-structured interviews were conducted with 15 extubated ICU patients. Then, we developed an intelligent communication tool for ICU patients with the help of software engineers. A cross-sectional study was conducted to assess the usability of this tool.

Results: 117 (56.8%) nurses believed that nurse-patient communication was of great value in the diagnosis and rehabilitation of ICU mechanically ventilated patients, 103 (50%) nurses communicated with the same patient more than 8 times in a shift; 153 nurses were dissatisfied with the communication status between nurses and patients. The communication experience and needs of ICU patients were refined into 3 themes and 13 sub-themes, including multiple needs during mechanical ventilation, complex feelings and experiences during mechanical ventilation, and multiple suggestions for communication aids. The intelligent communication tool for ICU mechanical ventilation patients was

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developed well based on the results of the survey and interviews, mainly including 5 modules: users, communication, records, feedback, and setting. ICU nurses and patients both showed high evaluation to this tool.

Conclusions: Most ICU nurses and patients are dissatisfied with the way they communicate at the moment. ICU nurses and patients have a favorable opinion of the intelligent communication tool developed in this study because it is scientific, easy to use, and has a smooth interface interaction that can suit the communication demands of ICU patients. This tool helps to address patients' communication needs, boost patients' satisfaction, improve nurse-patient communication efficiency, and raise patient excitement and compliance in active communication.

Biography

Prof. Qian Xiao is a professor and the associate Dean of Capital Medical University School of Nursing. She also serves as the Vice Chairman, nursing informatics committee of Beijing Nursing Association, the Vice Secretary General of the Council of Nursing, Chinese Health Information and Big Data Association (CHIBDA), the Deputy Director of Rehabilitation Nursing Professional Committee of China Rehabilitation Association, and the Vice President of the Nursing Association of the Cross-Straits Medicine Exchange Association.

Prof. Xiao has more than 100 peer-reviewed publications in scientific journals; She is also an invited reviewer of 6 peer-reviewed journals. She has been awarded 19 fundings from associations including the National Natural Science Foundation of China, the Innovation Fund of the Ministry of Education, and the Beijing Social Science Fund, etc. Prof. Xiao also owned 15 national patents or software Copyrights, and 21 national or Beijing municipal awards.



Professionalization in Anesthesia Care

Daniela Schaffer

Klinikum Klagenfurt am Wörthersee, Austria

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

Biography

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



Perspectives on Telenursing: Where are we as a Caribbean Region?

Adella Campbell

University of Technology, Jamaica

The outbreak of a pandemic globally, has taught us, as a Caribbean people to be innovative and creative in the manner in which we deliver care and services to the consumers of health care. A practice that is often overlooked however, is the use of telenursing in the delivery of quality care and services. Telenursing is the use of technology to coordinate, manage, and deliver nursing services. Noteworthy, is the fact that this technology can revolutionise the manner in which nursing care and services are delivered to communities, especially rural areas, families and patients.

Despite concerns regarding privacy and logistics, the telenursing innovation may be utilised as an alternative strategy for monitoring, education, evaluation of care outcomes, counselling, and consultation *inter alia*. This may be achieved through technologies such as the internet support, mobile/smartphones, phone triage, remote tele-monitoring, interactive video and other technologies.

While barriers such as infrastructure, cost for services and protocol may hinder the practice of telenursing, it has been found to have many advantages among which are reduction in cost to consumers, improved access to quality care by more consumers as well as better monitoring of individuals living with chronic diseases.

There is a dearth of information on the use of telenursing in the Caribbean. The objective of this paper therefore, is to share various perspectives on telenursing and examine its utilisation and impact within the Caribbean region.

Biography

Professor Campbell, a nurse/midwife, holds a BSc in Nursing Education (Hon.), a Certificate in Nursing Education (Hon.) and an MSc in Nursing Administration (distinction), from the University of the West Indies,

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Mona, Jamaica. She received a PhD in Nursing in 2013 from the Victoria University of Wellington in New Zealand. Professor Campbell is nurse and a midwife and actively involved in research with completion of the most recent project in November 2022. She is Dean and Professor, in the College of Health Sciences, University of Technology, Jamaica. She has authored peer reviewed articles, and commentaries in journals, and a book on the Jamaican Public Health System. She has just received Research Development Fund approval for a project evaluating the impact of a non-functioning Type A Hospital, on users and various stakeholders.



An Innovation Curriculum for Elderly Caregivers in the Digital Era

P. Boonsawad¹, K. Intaratat², U. Klincajohn³, A. Cheevakasemsook⁴, P. Noimuenwai⁴ and C. Suwatthipong⁵

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COVID-19 pandemic has accelerated the shift from traditional curricula to innovative approaches, particularly in Thailand's Aged Society, where national policies emphasize Long-Term Care (LTC) to promote healthy aging. This study developed and evaluated an innovation curriculum for elderly caregivers, integrating blended learning to provide knowledge, skills, and ethical practices.

The curriculum comprises a 420-hour practicum model, including 200 hours of theoretical instruction with practice demonstrations and 220 hours of real-world practices in nursing homes and communities. Approved by the STOU Human Research Ethics Committee (No. 1/2021). Mixed-methods study involved interdisciplinary collaboration and evaluation by experts and stakeholders.

Results revealed the model's effectiveness in fostering required competencies through a blended approach combining online learning (MOOCs) and on-site practices. It emphasized on life-long, self-paced learning, and mentorship facilitated by MOOCs platforms and social media (e.g., LINE, Facebook). Caregivers can applied both theoretical knowledges and practical applications appropriately. Collaboration among all relevant stakeholders and partners i.e. academia, public, private, and local supported by Thailand Cyber University (TCU) to ensure most accessible, practical and effective learning tailored to all caregivers'

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needs.

The integrated model “Individual Learning Plan” (ILP) together with the framework of “Cooperative and Work-Integrated Education” (CWIE) were used focusing on preparation, placement, practice, reflection, and evaluation. These “Learner-Centered approaches” enhanced competency in health, finance, and digital literacy, promoting ethical care for the elderly with dignity and compassion.

Conclusion: The “Innovation Curriculum for Elderly Caregivers in the Digital Era” effectively combines theoretical content, practical experience, and mentorship, fostering professional and ethical development. This model offers a scalable framework to enhance any caregiver training, and ensuring quality care for the elderly in diverse contexts.

Biography

Dr. Panicha Boonsawad is an Assistant Professor at the Faculty of Nursing, Srisavarindhira Thai Red Cross Institute of Nursing Bangkok, Thailand, and Vice Chairperson of the Steering Committee for Elderly Research Development. Her research focuses on geriatric care, healthy aging, dementia care competencies, and MOOC curriculum development for elderly caregivers, in collaboration with international partners, such as the Active Aging Consortium Asia Pacific.

Recognized Awards

- Top Rated Poster, ICN Congress 2023, Montreal, Canada: "The Practicum Model for Elderly Caregivers' Curricula in the Digital Age"
- Best Oral Presenter, 8th International Nursing Research Conference (2024): "Developing Nursing Competencies for Dementia Care"

Educational Background

- Ph.D. in Geriatric Nursing (International Program), 2016.
- Certificate in Ethnography and Elderly Care, Visiting Scholar, University of Pennsylvania, USA (2011-2012).



Gender Differences in Cranial Bone Thickness and Surgical Outcomes in Epidural Hemorrhage: A Saudi Arabian Retrospective Study

Taghreed A. Al-Sinani

Department of Neurosurgery, King Fahad General Hospital, Ministry of Health, Saudi Arabia

Introduction: Epidural hemorrhage (EDH), a critical consequence of traumatic brain injury (TBI), demands immediate intervention to prevent brain herniation. While males have a higher incidence of TBI, the lower frequency of EDH in females may be linked to anatomical differences, including cranial bone thickness. This study investigates the gender-based variations in bone thickness, focusing on the protective role of thicker cranial bones in reducing EDH risk. We analyzed 359 TBI patients at King Fahad General Hospital, Saudi Arabia, from 2021 to 2024, examining EDH incidence, surgical outcomes, and gender differences in cranial bone thickness.

Methods: This retrospective cohort study included 359 TBI patients treated between 2021 and 2024. Cranial bone thickness was measured using CT images, focusing on the middle meningeal artery (MMA) region, parietal bone, and MMA groove. Gender differences in bone thickness were analyzed, and the association with EDH was assessed using multivariate logistic regression, controlling for age, mechanism of injury, and comorbidities. Data included demographic information, injury mechanism, Glasgow Coma Scale (GCS), and the need for surgical intervention. Patients with cranial deformities or incomplete data were excluded.

Results: Of the 359 patients (median age 33 years), 82.7% were male. EDH occurred in 31.2% of cases, with males more frequently affected (91.0%, $p=0.037$). Females had significantly thicker cranial bones, particularly under the MMA ($p=0.002$) and in the parietal bone ($p=0.005$), reducing EDH risk ($p=0.014$, $p=0.007$). Surgical intervention was required in 33.9% of EDH cases, and bone thickness provided a protective effect, especially in females. Road traffic accidents were the most common cause of TBI, with males showing a higher association with EDH following RTAs ($p=0.028$).

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Conclusion: This study highlights significant gender differences in cranial bone thickness, which may contribute to the lower incidence of EDH in females. Thicker bones, especially under the middle meningeal artery and in the parietal region, provide a protective effect, reducing the risk of EDH despite similar exposure to trauma.

Personalized approaches to trauma management, acknowledging these gender-based anatomical variations, could enhance treatment strategies and reduce EDH-associated morbidity and mortality.

Biography

- Taghreed Abdulhameed Alsinani
- Consultant Neurosurgeon, Saudi NS board.
- Was the Program Director at King Fahad hospital.
- Cordinator of Neurosurgery speciality in Ministry of Health.
- Currently: Head of Neurosurgery Department, King Fahad Hospital, KSA
Which is a trauma center and neurovascular center.
- Intrest: Trauma cases, brain and spinal tumors.
- Researches in different NS fields.

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Risk and Protective Factors for Non-Suicidal Self-Injury in Adolescents: A Delphi Expert Consensus Study



Dong Hun Lee and Hwa Jung Lee

Traumatic Stress Center, Sungkyunkwan University, South Korea

Non-suicidal self-injury (NSSI) is a significant and growing concern in the research and clinical fields, particularly among adolescents. NSSI is defined as purposeful self-damaging behavior without the intent to commit suicide, with prevalent forms including cutting, burning, scratching, bumping, and hitting. These behaviors are most commonly observed in adolescents and young adults, with typical onset during adolescence and often continuing into adulthood. This study uses the biopsychosocial framework to identify the risk and protective factors for NSSI in adolescents. The Delphi method, developed by the RAND Corporation in the 1950s, was employed to gather expert opinions and derive a consensus on these factors. Experts rated the importance of various risk and protective factors, providing qualitative suggestions to inform future interventions. A systematic literature review initially identified 87 risk and 63 protective factors, categorized into biological, psychological, and social domains. A three-round Delphi study was then conducted with 63 counselors, each with more than five years of experience working with adolescents engaging in NSSI. Through this process, a consensus was reached, with over 80% agreement among panelists on the identified factors. A total of 65 risk factors were adopted, including 8 biological, 37 psychological, and 20 social/environmental factors. Additionally, 49 protective factors were agreed upon, including 1 biological, 26 psychological, and 22 social factors. The results offer a consensus-based set of risk and protective factors that can be applied in clinical settings, helping to inform future prevention and intervention strategies. This study contributes to the field by providing practitioners with a framework for better understanding the complex nature of NSSI in adolescents and guiding more effective intervention practices.

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Biography

Dong Hun Lee

Prof. Dr. Dong Hun Lee is a full professor at Sungkyunkwan University in South Korea and the Director of the Traumatic Stress Center. He also serves as the President of the National Council for College Counseling Centers. Prof. Lee is the Principal Investigator of the Social Sciences Korea (SSK) project on the prevention and intervention of self-injury and suicidal behaviors in adolescents and youths (2022-2031), funded by the National Research Foundation of Korea and the Ministry of Education. His research focuses on adolescent suicide prevention, trauma recovery, and AI-based interventions. A prolific author, he has published extensively and advises government agencies on psychological recovery and disaster response.

Hwa Jung Lee

Dr. Hwa Jung Lee is a postdoctoral fellow at the Trauma Stress Center at Sungkyunkwan University. She holds a Ph.D. in Counseling Education from the same institution and specializes in adolescent mental health, particularly non-suicidal self-injury and suicide prevention. Her research focuses on integrating body-based psychotherapy with advanced media applications to develop innovative mental health programs. She has published in SSCI-indexed journals and collaborates with academic and related institutions to advance trauma-focused therapeutic methods.

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Prevalence and Varieties of Complementary and Alternative Medicine Usage among Individuals with Pre-Dialysis Chronic Kidney Disease in Taiwan: An Investigative Cross-Sectional Analysis

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²Chang Gung University College of Medicine, Taiwan

Background: Complementary and alternative medicine (CAM) is commonly used in the general population, but limited data exist regarding its prevalence among patients with chronic kidney disease (CKD), particularly those participating in a national pay-for-performance (P4P) program. This study aimed to investigate the prevalence and types of CAM used by Taiwanese patients with CKD.

Methods: A cross-sectional questionnaire survey was conducted through face-to-face interviews with pre-dialysis CKD patients (stages IIIB–V) enrolled in the P4P program. The participants had not undergone dialysis or kidney transplantation and were recruited from an outpatient nephrology clinic in Taiwan between March 2021 and June 2023. Convenience sampling was used to select patients registered in the national pre-ESRD nephrology care program since 2015. The study outcomes included the prevalence and types of CAM, reasons for its use, and sources of information about CAM.

Results: Of the 300 eligible patients, 275 consented to participate. Overall, 128 patients (46.5%) reported using CAM, with no significant differences in CAM use across CKD stages ($p = 0.156$). CAM use was most prevalent among patients aged 20–60 years and those with CKD duration of less than five years ($p < 0.05$). Nutritional approaches were the most common type of CAM (79.7%), followed by other complementary health practices (26.6%). No patients reported using herbal medicines or secret remedies. Vitamins and minerals were the most frequently used modalities (38.3%), but only 27.1% of patients disclosed their CAM use to their physicians. Family and friends were the primary sources of information about CAM, cited by 66% of participants. The most common reasons for CAM use were health promotion and a proactive approach to health, reported by 40% of users.

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Conclusions: This study provides insights into CAM usage among CKD patients in Taiwan, highlighting its prevalence even under comprehensive pre-dialysis nephrology care. Given the potential safety concerns associated with some CAM practices, healthcare providers should prioritize educating CKD patients about the risks and benefits of CAM therapies.

Biography

Dr. Ming-Yen Tsai is the Director of Chinese Medicine at Kaohsiung Chang Gung Memorial Hospital. He received his Ph.D. from China Medical University in Institute of Integrated Medicine. His primary research interests include complementary medicine, clinical nephrology, and big data applications in healthcare. He got many awards for Academic Award from Taiwan Chinese Medical Doctor's Association and National Healthcare Quality Award. Dr. Tsai has authored several high-impact publications and serves as a reviewer for multiple peer-reviewed journals.



Overcoming the Oral Aspects of Self- Mutilation in Children with Lesch- Nyhan Syndrome

Joseph Shapira

Department of Pediatric Dentistry, The Hebrew University-Hadassah Medical Centre, Israel

The purpose of this presentation is to describe a method which has been successfully employed for children with Lesch-Nyhan syndrome (LNS) with Self-Injurious Behavior (SIB), who have attended the Special Needs clinic in the Department of Pediatric Dentistry at the Hadassah Medical Centre.

Patients who present SIB can be considered a treatment challenge in the dental office or hospital setting. Several treatment modalities have been employed to manage the abnormalities or conditions that favor the appearance of self-mutilation or self-injurious behavior.

The 4 groups of therapeutic modalities that have been tried in patients with SIB are: behavior modification (psychological), pharmacological, surgical procedures (extractions) and intra/extra oral devices. Among these the intraoral physical devices are the only methods enables self-injury to be prevented. They represent a direct barrier that prevents the patient from being able to bite his oral tissues: tongue, lips and oral mucosa.

In 2016, our group published on this subject "overcoming the oral aspects of self-mutilation: description of a method", outlining a modern, creative, elegant and innovative technique with longer than 10 years of follow- up, in a way that any general dentists can learn and apply.

This method has already been applied and performed on all our patients with the syndrome who approached us for help.

The method was invested in order to meet the expectations of parents who ask us as caregivers to find every possible way to save the teeth and not to extract them, in order to preserve the appearance of the child's smile and self-esteem.

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Biography

Dr. Joseph Shapira is a Full Professor in Pediatric Dentistry and was the Chair of the Department of Pediatric Dentistry, at the Hebrew University-Hadassah Faculty of Dental Medicine, Jerusalem, Israel.

Following his graduation at the Hebrew University - Hadassah Medical Centre, he had specialized at CHOP the Children's Hospital of Philadelphia, University of Pennsylvania, for two years residency program in Pediatric Dentistry and dentistry for Special Needs and High risk Medically Compromised Patients.

He also serves as the Director of the Prevention Program for Oral Health at SHALVA - the National Center for Care and Inclusion of Children with Disabilities.

Prof. Shapira has dedicated his professional life to the education, treatment, and research for children with special needs and high-risk medically compromised children, including the use of sedative agents to manage anxiety and behavior control.

Prof. Shapira has published more than 110 articles in refereed International Journals and lectures on these subjects around the world.



A Study of NGOs as Health Facilitators to Health Care Customers in Addressing Chronic Diseases in Assam, India

Seema Shah Singha¹ and Hiranmoyee Bhuyan²

¹Professor, Department of Commerce, Dibrugarh University (Assam), India

²Ph.D. Research Scholar, Department of Commerce, Dibrugarh University (Assam), India

The news of a diagnosis of chronic diseases often entails psychological and financial constraints on the patient and their caregivers because of the prolong exposure to health care. In India, the health systems are under tremendous load, with chronic diseases adding geographical, behavioural, economic and infrastructure challenges, particularly as significant portion of population belongs to economically deprived group. In the backdrop of this, Non-Governmental Organisations (NGOs) master to walk along with those facing a long and tumultuous journey of care services. This paper examines the narratives of NGOs on their role in bringing ease for health care customers.

Method: By snowball sampling, fourteen NGOs were interviewed in Assam. A semi-structured interview schedule was used for the study. Requisite ethical clearances were received from the respective institutes.

Results: This research highlights the importance of integration of core healthcare services along with NGO involvement in chronic disease management to address regional disparities in healthcare access. Such partnerships become indispensable, especially in the study area where socio-cultural diversity, infrastructural or psycho-social barriers could influence the timely treatment of health care customers.

This research highlights the importance of integrated healthcare networks and advocates for enhanced NGO involvement in chronic disease management to address regional disparities in healthcare access.

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Biography

Dr. Seema S Singha is a Professor & Former Head of the Department of Commerce, Dibrugarh University, Assam (India). She has wide experience in teaching at Post Graduate level besides guiding scholars for PhD & MPhil. She has authored quite a good number of research papers at National & international journals. This study has been undertaken by Hiranmoyee Bhuyan, a PhD scholar at Department of Commerce, under the mentorship of Dr. Seema S Singha.

Hiranmoyee Bhuyan is a PhD candidate at Department of Commerce, Dibrugarh University. Her research focuses on the health care marketing & the role of facilitator organizations in enhancing healthcare delivery for chronic disease patients, with a specific focus on the North-East region of India. Dr. Seema Shah Singha, developed the study design and will be presenting the study at the conference Nursing Asia Pacific 2025 as a distinguished invited speaker.



Development and Properties of a Novel Nanocellulose Based Film Containing Boron-Infused Mica for the Prevention of Dental Caries

Lalitha S Jairam¹, Sivaranjani Gali² and Deveswaran R³

¹Department of Pediatric and Preventive Dentistry, Faculty of Dental Sciences, M.S Ramaiah University of Applied Sciences, India

²Department of Prosthodontics, Faculty of Dental Sciences, M.S Ramaiah University of Applied Sciences, India

³Department of Pharmaceutics, Faculty of Pharmacy, M.S Ramaiah University of Applied Sciences, India

Background: Dental caries is an infectious microbiological disease affecting about 50% of children. There has been a plethora of treatment options that have been tried for the prevention of dental caries but each of them has limitations. Mica or fluorophlogopite is a well-known silica-based material with a plethora of applications in the biomedical field owing to its superior mechanical properties. However, the application of mica for prevention of dental caries is unexplored. Oral films offer a promising solution for a sustained release of desired drug to the target area.

Objectives: Preparation, characterization and evaluation of the cytocompatibility and antibacterial properties of HEC/CNF films with boron-infused mica. This presentation describes the preparation of hydroxy ethyl cellulose-cellulose nanofibre (HEC/CNF)-based films with incorporation of (2, 4, 6, 8 wt %) boron-infused mica and exploration of its antibacterial properties against *S. mutans*.

Methods: The films were characterized by Fourier Transform Infrared Spectroscopy (FTIR), X-Ray Diffraction (XRD) and Scanning Electron Microscopy (SEM) and physical properties such as film thickness, folding endurance, pH, tensile strength was assessed. Further, the cytocompatibility and antibacterial properties were explored.

Results: XRD analyses unveiled a monoclinic crystal system and an average crystallite size of approximately 28 nm. Morphological scrutiny divulged clustered, irregularly shaped,

cluster-like structures in the SEM. Fourier-Transform Infrared (FTIR) spectroscopy depicted the presence of characteristic bonds. The cytocompatibility of the films assessed through the MTT assay indicated a non-toxic behaviour. The films showed increased antibacterial activity with increased concentration of mica which was comparable to the positive control, ciprofloxacin.

Conclusion: Thus, the HEC/CNF films containing boron-infused mica could be a promising antibacterial agent for application in the biomedical field.

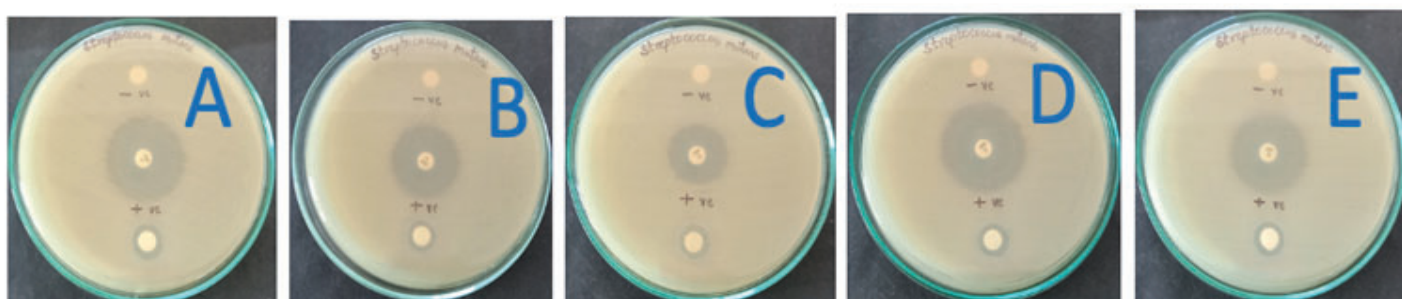


Figure 1: Disc diffusion showing zone of inhibition (in mm) against *S. mutans*

- A:** 2%boron infused mica-HEC/CNF
- B:** 4% boron infused mica-HEC/CNF
- C:** 6% boron infused mica-HEC/CNF
- D:** 8% boron infused mica-HEC/CNF
- E:** Plain HEC/CNF without boron-infused mica

Biography

Dr. Lalitha S. Jairam, BDS, MDS, (PhD) is an Associate Professor in the Department of Pediatric and Preventive Dentistry at the Faculty of Dental Sciences, M.S. Ramaiah University of Applied Sciences. With a strong academic background and clinical expertise, her areas of interest include preventive dentistry, early childhood caries, and biomaterials. She has published 15 indexed research papers, contributed a textbook chapter, and filed three patents.

Dr. Jairam has been recognized for her research excellence and academic contributions. In 2022, she received an ICMR ADHOC grant of ₹20.20 lakhs, as well as faculty grants from the Indian Society of Pedodontics and Preventive Dentistry in 2022 and 2023. In 2024, she was awarded ₹3.05 lakhs as a seed grant from M.S. Ramaiah University.

She was honored with the “Best Teacher Award” in 2023 and the “Excellence in Research” award on National Innovation Day.



The Fear of Progression in Patients with Wilson's Disease: A Cross-Sectional Study from China

Yingxue Niu¹, Jingxia Zhang¹, Shiming Chen¹, Yifang Li¹ and Sheilla Magbanua Trajera²

¹School of Nursing, Anhui University of Chinese Medicine, China

²Graduate School, University of St. La Salle, Philippines

Objective: To investigate the status and influencing factors of fear of progression in patients with Wilson's disease (WD).

Methods: A total of 113 WD inpatients were recruited from the Second Ward of the Brain Disease Center of the First Affiliated Hospital of Anhui University of Chinese Medicine from October 2023 to August 2024. General data questionnaire, Social Support Rating Scale (SSRS) and Fear of Progression Questionnaire-Short Form (FoP-Q-SF) were used for investigation. Univariate analysis and multivariate linear regression were performed to analyze the influencing factors.

Results: In 113 WD patients, the incidence of fear of progression (FoP) was 34.5%, the mean scores of WD patients' FoP-Q-SF scale and SSRS were (30.78 ± 7.24) and (34.27 ± 5.64), pearson correlation analysis showed a significant negative correlation between FoP-Q-SF and SSRS ($r = -0.719$, $P < 0.01$). Moreover, patients' sex, age, residence, work statuses, family incomes, and clinical evidence types were all factors that affected the FoP of WD patients. Results of multiple linear regression showed that age, residence and social support were the influencing factors of FoP in WD patients.

Conclusions: More than 30% had severe psychological dysfunction and a higher level of FoP. Higher levels of social support are associated with lower levels of FoP, so targeted measures can be taken to increase WD patients' levels of social support and further reduce their levels of FoP.



The Nurse's Role in Antimicrobial Stewardship: From Bedside to Boardroom

Renu Gupta and Sangeeta Sharma

Institute of Human Behaviour and Allied Sciences, Delhi, India

Antimicrobial stewardship (AMS) is crucial for combating antimicrobial resistance and ensuring optimal patient outcomes. Nurses, as integral members of the healthcare team, are uniquely positioned to influence antimicrobial practices from direct patient care to executive decision-making. This session explores the multifaceted role of nurses in AMS, emphasizing their impact on clinical, educational, and policy levels.

The session will delve into practical strategies for nurses to lead AMS initiatives at the bedside, including identifying inappropriate antimicrobial use, advocating for de-escalation, and educating patients and families. The role of nurses in infection control and diagnostic stewardship as integral components of a comprehensive AMS approach will be discussed. The session will further highlight the importance of interprofessional collaboration, showcasing successful nurse-led AMS interventions and their outcomes.

Moving beyond the bedside, we will discuss how nurses can influence AMS at the administrative level. This includes involvement in policy development, protocol implementation, and participation in AMS committees. Real-world examples of nurse leaders driving AMS programs and influencing healthcare policies will be presented to inspire and empower attendees.

By highlighting the critical contributions of nurses from bedside to boardroom, this session aims to equip participants with the knowledge and tools to enhance their AMS efforts, ultimately contributing to the global fight against antimicrobial resistance.

Biography

Dr. Renu Gupta

MBBS, MD (Microbiology), MPH (MMU), PGDHQM (TISS), DIPC (University of Hyderabad).

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Dr. Renu Gupta is an Assistant Professor at the Institute of Human Behaviour & Allied Sciences (IHBAS), Delhi, and also serves as the Secretary of the Delhi Society for Promotion of Rational Use of Drugs (DSPRUD). With 24 years of post-MD experience, she brings extensive expertise in clinical microbiology, infection prevention and control (IPC), antimicrobial stewardship, medication safety, and quality assurance in healthcare.

She has authored 56 original research articles, contributed 6 book chapters, and co-authored 1 monograph. Dr. Gupta has been actively involved in the development of certificate courses and has conducted around 40 workshops and training programs, delivering over 100 educational sessions to professionals across the country.

Her contributions include mentoring healthcare facilities in implementing IPC and WASH practices, leading public awareness initiatives on rational antibiotic and medicine use, and contributing to key publications like "Standard Treatment Guidelines: A Manual for Medical Therapeutics" and "Excellence in Clinical Laboratory Operations: A Comprehensive Guide to Quality Practices and Reliable Results."

She is also a certified External Assessor under the National Quality Assurance Program (NQAP) of the Ministry of Health and Family Welfare, Government of India.

ORCID: 0000-0001-9582-9556

Google Scholar: Renu Goyal (Gupta)



Perceptions of Elderly Patients on Intelligent Management of Respiratory Aspiration: A Qualitative Exploration

Shuojin Fu, Xueli Gao, Ling Tong, Yanling Wang and Qian Xiao

School of Nursing, Capital Medical University, China

Introduction: Respiratory aspiration occurs when solid or liquid materials, stomach contents, or oropharyngeal secretions enter the lower respiratory tract, whether during eating or at other times. As people age, their physiological functions gradually decline, and when combined with various chronic conditions common among the elderly, the risk of aspiration increases significantly. The health consequences are often severe, including aspiration pneumonia and even suffocation. Therefore, effective management of respiratory aspiration for elderly patients is critically important. With advancements in technology, personalized intelligent management systems are thought to aid elderly patients in better managing the health risks associated with respiratory aspiration.

Aim: This qualitative study aims to explore the perspectives of elderly patients and their caregivers on the intelligent management of respiratory aspiration risks.

Methods: A qualitative study design was adopted. Semi-structured interviews were conducted with 22 elderly patients across two general hospitals between October 2023 and April 2024. The interview data were analyzed using a content analysis approach.

Results: Four key themes emerged: (1) Differentiated multi-Role attitudes of system users; (2) Dual support of emotion and behavior, with two subthemes: Emotional support and interaction needs, and strengthening behavioral supervision; (3) Personalized and user-friendly design, with two subthemes: Targeted management and personalized needs, and Focus on user experience and design optimization; (4) Challenges in intelligent management and security assurance, with two subthemes: Real-world challenges in system development and promotion, and importance of system value and security assurance.

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Conclusions: Most patients are willing to learn about and manage inhalation risks *via* smartphones, but need emotional support as well as behavioral monitoring from caregivers and healthcare professionals. Future designs of intelligent management systems should prioritize practicality, effectiveness, and ease of use to ensure they meet the needs of elderly patients.

Biography

Shuojin Fu is a first-year doctoral student at the School of Nursing, Capital Medical University. Her research direction is nursing informatics. She has been focusing on applying cutting-edge intelligent technologies to the field of nursing health, especially in swallowing rehabilitation and personalized patient management. She has presented at international conferences multiple times, including the International Nursing Informatics Conference and the China-Europe Summit, and won the Best Speech Award. Previously, she has participated in many research projects, including the design of ventilator-associated pneumonia has devices for critically ill patients, the development of a multimodal swallowing rehabilitation training system, and the construction of an intelligent health management model for elderly aspiration. She has also led her team to win municipal innovation awards several times. These projects are all aimed at improving the efficiency and effectiveness of nursing and improving patients' rehabilitation experience through intelligent technology.



Construction of a Risk Prediction Model of Fear of Progression in Patients with Chronic Atrophic Gastritis Based on the Recognition of Traditional Chinese Medicine Constitution

**Jingxia Zhang¹, Shiming Chen¹, Yingxue Niu¹, Sheilla Magbanua Trajera² and
Yifang Li¹**

¹School of Nursing, Anhui University of Chinese Medicine, China

²Graduate School, University of St. La Salle, Philippines

Objective: To understand the current situation of fear of progression in patients with chronic atrophic gastritis (CAG) and analyze its influencing factors. To construct and validate a prediction model of fear of progression in CAG patients based on the influencing factors and present the model visually in a nomogram, and to comprehensively evaluate the efficacy of the prediction model in various aspects.

Methods: 267 CAG patients admitted to the gastroenterology department of a tertiary hospital in Anhui Province were selected as study subjects by using convenience sampling. The training set (80%) of 214 patients and the validation set (20%) of 53 patients were extracted using the random sampling module in Excel sheet. Based on the literature review and the discussion of the group, a self-administered general information questionnaire was used to conduct the study in conjunction with the FOP-Q-SF, MCMQ and CFQ. Whether or not FOP occurred was the dependent variable, and the influencing factors were the independent variables. Based on the results of univariate analysis, the independent variables with $P < 0.05$ were subjected to multivariate regression analysis using stepwise backward method, and the nomogram was constructed by R 4.4.0 software. Bootstrap self-sampling method was used for internal validation of the nomogram, the predictive efficacy of the model was evaluated by AUC, calibration curves and the Hosmer-Lemeshow goodness-of-fit test, and the clinical utility of the model was judged by plotting the DCA.

Results: A total of 267 cases of CAG patients who met the criteria for natriuresis were included in this study, and the 267 cases were randomly divided into the training set and the validation set according to 8:2 and the incidence rate of FOP of 37.83%. Univariate logistic

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analysis showed that the differences between whether FOP occurred in CAG patients was statistically significant ($P < 0.05$) in the six aspects of qi-depression constitution, work status, family history of gastric cancer, CFQ scores, and scores of confrontation and avoidance dimensions of MCMQ. Factors that were statistically significant in the univariate logistic analysis were included in the multifactorial logistic regression analysis, which showed that qi-depression constitution ($OR = 2.89$ 95%CI:1.18-7.05 $P = 0.020$), family history of gastric cancer ($OR = 7.95$ 95%CI:1.82-34.67 $P = 0.006$), CFQ ($OR = 1.05$ 95%CI:1.01-1.09 $P = 0.030$), confronting ($OR = 0.74$ 95%CI:0.66-0.83 $P < 0.001$), and avoidance ($OR = 1.19$ 95%CI:1.07-1.31 $P < 0.001$) were the independent predictors. Constructing a nomogram model based on the results of multifactor logistic analysis. The best specificity and sensitivity were achieved at a training set model threshold of 0.37, 0.822, 0.814, $AUC = 0.886$, 95%CI (0.840, 0.931), which was well discriminated. The H-L goodness-of-fit test $X^2 = 3.863$, $P = 0.869 > 0.05$, the model was judged to be in good agreement. The validation set $AUC = 0.845$, 95%CI (0.726, 0.964), slightly lower than the training set, but still with good discrimination. The validation set H-L goodness-of-fit test $X^2 = 12.776$, $P = 0.120 > 0.05$, the calibration curve of the validation set deviated slightly from that of the training set, but the overall direction was more or less the same, which indicated that the model had a good goodness-of-fit, and the DCA curves showed that the model was able to obtain a net gain in most of the probability thresholds, which indicated that the model had a good clinical application value.

Conclusion: In this study, we found that qi-depression constitution, family history of gastric cancer, CFQ scores, and confrontation and avoidance were independent risk factors for the development of FOP in patients with CAG. The resulting nomogram prediction model had good discrimination, calibration, and clinical utility.

Biography

Jingxia Zhang, female, Master's degree student, studying in Anhui University of Chinese Medicine, School of Nursing, her main research interests are integrated Chinese and Western medicine nursing and psychological care of chronic diseases.

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Effectiveness of the Remote Family Education and Support Program for Parents of Adolescents with Eating Disorders Based on Interpersonal Psychotherapy: A Randomized Controlled Trial

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Objective: Despite the importance of patients' relationships with their parents, conflict and confusion frequently occur between parents and adolescents with eating disorders. Interpersonal psychotherapy (IPT) is a present-focused psychotherapy that emphasizes the interpersonal context of symptoms. We developed a remote family education and support program (rFESP) exclusively for parents of adolescents with eating disorders, based on the principles of IPT. The use of IPT is expected to reduce conflicts in patient-parent relationships. We aimed to investigate the effect of rFESP in promoting effective communication in the home based on the active listening skills of parents of adolescents with eating disorders.

Method: We conducted a clinical trial involving 67 parents of adolescents with eating disorders. The participants were randomly assigned to either the rFESP intervention group or the waiting control group. The primary outcome was parents' active listening ability, as measured by the Active Listening Attitude Scale, at 8 weeks after randomization. Intention-to-treat analyses were conducted.

Results: Sixty-seven participants (mean age, 50.2) were randomly assigned to the rFESP and waiting control groups. The average age of the children with eating disorders was 18

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years. There was a significant effect of rFESP on Active Listening Attitude Scale at 8 weeks (mean difference 3.68, 95% confidence interval: 1.89 to 5.48, $P < 0.001$).

Conclusions: To our knowledge, this is the first study to evaluate the effectiveness of an IPT-based program for parents of adolescents with eating disorders. The findings suggest that this type of intervention is effective, although indirect, and it could be a new support method for adolescent patients.

Trial registration: Clinical Trials. gov ID NCT05840614

Biography

Fujika Katsuki

She is a nurse with experience working in psychiatry and her specialty is family care. She has been practicing and researching family psychoeducation for schizophrenia and depression. They are also training Certified Nurse Specialist (CNS) of psychiatric-mental health nurses at their university.

Hanayo Sawada

She is a member of the university's nursing faculty and work as a teacher. She teaches psychiatric and mental health nursing to nursing students. She also conducts research on the mental health of LGBTQ+ people and provides consultative support.

Yuka Kawasaki

She is a Certified Nurse Specialist of psychiatric - mental health nursing and she works as a liaison nurse. She provides care for patients and their families with delirium, dementia, and other mental health issues. In addition, as a member of DPAT (Disaster Psychiatric Assistance Team), they provide support to victims and supporters during disasters.

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Indigenous and Migrant Experiences of a Predominantly Western Model of Healthcare in Aotearoa New Zealand



Cath Fraser, Judith Honeyfield, Tiffany Winiata and Denise Riini

Toi Ohomai Institute of Technology, New Zealand

In Aotearoa New Zealand, like all OECD countries, we have an ageing population who will increasingly comprise the largest user group for our already-strained public health services. Yet within this overall population trend, Māori, as *tangata whenua*, the indigenous ‘people of the land’, have a younger population. At present people identifying as Māori are 17.3% of our total population; in a decade this will be closer to 20%. We are a bi-cultural nation, with the Māori-Crown partnership established in 1840, through *Te Tiriti o Waitangi* (The Treaty of Waitangi), which ‘guarantees’ parity. Then too, we have a growing number of migrants and a diversity of over 120 ethnicities. Clearly our healthcare sector needs to ensure that all New Zealanders have equitable levels of care – although our understanding that this does not always look the same for everybody is still a work-in-progress. This poster explains our project to develop resources for student nurses that help to prepare them for working inclusively and holistically with older adults from different cultures to their own. We use cultural lens theory to question the ‘fit’ of western nursing models, by drawing on transcripts from 21 meetings with 16 participants, who shared their narratives – both positive and challenging – of accessing mainstream health services. The findings we share relate to the role of positivity, language, *whanau* (family) and *tikanga* (cultural practices).

Biography

Cath is a Faculty Research Coordinator, while Judi is the Academic Lead for our large Bachelor of Nursing (BN) programme. Tiffany and Denise are kaupapa Māori nursing specialists and lecturers. They all share an interest in research in the cultural elements of the teaching, learning and professional development fields, as well as in health and positive ageing.



Prevalence and Risk Factors of Sarcopenic Dysphagia in Elderly Hospitalized Patients: A Retrospective Cohort Study Based on Data from a Comprehensive Geriatric Assessment System

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Background: Sarcopenic Dysphagia is a relatively new concept, the prevalence of which has been reported abroad fluctuates greatly, and the risk factors need to be further explored.

Aims: To investigate the prevalence and related factors of Sarcopenic Dysphagia in older inpatients in China.

Methods: The comprehensive geriatric assessment datas were collected from January 2016 to February 2023 of one tertiary hospital in Chongqing, China. The datas including patients Body Mass Index, Daily Living Ability, Frailty Assessment, Mini Nutrition Assessment Scale, Chinese simplified Oral health Checklist, Mini Mental State Examination, Water Swallow Test, etc. The prevalence rate of Sarcopenic Dysphagia was calculated by diagnostic algorithm. Risk factors were identified by univariate analysis and multivariable analysis.

Results: A total of 3515 patients with 560712 datas were extracted, and 3134 patients with 520244 datas were analyzed. Among them, 633 patients (mean age 83.9 ± 5.4 years, male 41.86%, female 58.14%) were diagnosed as possible Sarcopenic Dysphagia, and the prevalence was 20.6%. Univariate analysis showed that total of 20 risk factors of SD ($P < 0.05$). Multivariate Logistic regression analysis showed that age (OR: 2.7, 95% CI: 1.8-4.2, $p < 0.001$); BMI (OR: 0.2, 95% CI: 0.2-0.3, $p < 0.001$); frailty (OR: 11.9, 95% CI: 3.6-38.8, $p < 0.001$); oral weakness (OR: 1.1, 95% CI: 1.1-1.2, $p < 0.001$); cognitive function (OR: 1.4, 95% CI: 1.1-1.8, $p < 0.01$); primary caregivers (OR: 1.6, 95% CI: 1.2-2.3, $p < 0.006$); ADL (OR: 6.6, 95% CI: 3.6-12.1, $p < 0.001$); community activities (OR: 0.6, 95% CI: 0.4-0.9, $p < 0.02$); housework (OR: 0.7, 95% CI: 0.5-1.0, $p < 0.04$) were

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independent factors for SD.

Conclusion: The prevalence rate of SD in older inpatients is high, which is related to many risk factors. It is necessary to detect SD as early as possible in clinical field in order to take early rehabilitation intervention.

Biography

Pingfeng He works at Chongqing University Central Hospital and has been working in the department of Geriatrics and general medicine for 16 years. Currently, she is also an on-the-job graduate student at Chongqing Medical University, always paying attention to the development of geriatrics and committed to research in the field of geriatric medicine.



Chinese Herbal Medicine in the Prevention of Hot Flushes in Breast Cancer Patients Receiving Adjuvant Chemotherapy: A Non- Randomized Clinical Trial

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Background: Chinese herbal medicine (CHM) has been reported to reduce the side effects of cancer treatments and improve the quality of life (QoL) in breast cancer (BC) patients. We conducted a non-randomized clinical trial to evaluate the effectiveness of CHM on side effects, QoL, and changes in electronic meridian energy.

Methods: Patients with stage I–III BC undergoing adjuvant chemotherapy were non-randomly assigned to either a 24-week CHM treatment group or a 24-week non-CHM control group. The CHM intervention involved a combination of Xiao Yao San and Er Zhi Wan in a 3:1 ratio, with a total daily dose of 4g taken three times a day. The primary outcome was the occurrence of 10 or more hot flushes/night sweats (HFNS) per week and the severity of symptoms, rated using a visual analog scale. Secondary outcomes included the Functional Assessment of Cancer Therapy-Breast Cancer (FACT-B) questionnaire to assess health-related QoL, and meridian energy analysis to measure meridian electrical conductance (MEC) and sympathetic activity. Statistical analyses were conducted using analysis of covariance models.

Results: A total of 43 participants completed the study, with 25 in the CHM group and 18 in the control group. The CHM group showed a statistically significant reduction in HF frequency at 12 and 24 weeks and a decrease in HF severity at 12 weeks compared to the control group ($p > 0.05$). Physical well-being and specific concerns scores significantly improved in the CHM group compared to the control group ($p < 0.05$). CHM treatment also significantly affect specific meridians, including the heart, liver, and kidney. Additionally, sympathetic

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activity was reduced in the CHM group after completing chemotherapy ($p=0.045$).

Conclusions: CHM therapy appears to have a preventive effect on chemotherapy-related HFIs in BC patients and is safe, with no severe adverse effects observed.

Biography

Chieh-Ying Chin holds a master's degree from the Graduate Institute of Chinese-Western Integrative Medicine at China Medical University. Currently an attending physician in the Department of Traditional Chinese Medicine (TCM) at Kaohsiung Chang Gung Memorial Hospital, a member of the gynecologic oncology team, and a part-time lecturer at Meiho University. Specialties include integrative TCM treatment for gynecologic and breast cancers, postpartum and menopause care, as well as infertility.



Nurses' Experiences and Suggestions of Internet+Nursing Service Based on Service Quality: A Qualitative Study

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School of Nursing, Capital Medical University, China

Background: With the rapid development of information technology, Internet+Nursing Service offers flexible home care solutions for patients with mobility challenges, reducing the burden on healthcare institutions. However, ensuring service quality remains critical for adoption. Standardization and sustainability of service quality are significant challenges, and nurses' perspectives are pivotal in overcoming these barriers.

Objective: This study explores nurses' experiences and perspectives on ensuring Internet+Nursing Service quality and provides recommendations for its standardized and sustainable development in China.

Methods: A qualitative approach using conventional content analysis was employed. Semi-structured interviews were conducted *via* Tencent Meeting with 22 nurses from 7 hospitals across 4 districts. Participants were purposively sampled based on their experience in delivering Internet+Nursing Service.

Results: The analysis revealed three major themes and 11 sub-themes:

Factors influencing service motivation: (a) gaining returns, (b) discontent, and (c) concerns.

Experience of the service process: (a) trust in smooth delivery, (b) competence influencing quality, (c) accurate service assessment, and (d) process shortcomings.

Future directions for optimization: (a) caregiver training, (b) hospital support and security, (c) platform optimization, and (d) enhanced publicity.

These findings highlight the need to improve nurses' motivation, standardize the service process, and optimize the service model for better quality outcomes.

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Conclusion: This study emphasizes the critical role of nurses in ensuring Internet+Nursing Service quality. Enhancing motivation, standardizing processes, and refining service models are essential for achieving standardized and sustainable Internet+Nursing Service in China.

Biography

Zhifang Ren, PhD candidate in Nursing at Capital Medical University, specializes in Nursing Informatics and Internet+Nursing Service. From 2023 to 2024, she was a Visiting PhD Scholar at the University of Pittsburgh, sponsored by the China Scholarship Council, where she deepened her expertise in international nursing practices and healthcare innovation.

Her research focuses on integrating information technology into nursing to improve service quality and efficiency. She has published multiple papers as the first author in peer-reviewed journals, addressing quality evaluation systems and the standardization of Internet+Nursing Service. Zhifang has also actively participated in key research projects and academic competitions, demonstrating strong capabilities in interdisciplinary collaboration and innovation. She aims to contribute to nursing education and research by developing advanced, technology-integrated models of care to enhance patient outcomes and nursing practice.

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