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6th Asia-Pacific

ADVANCED NURSING PRACTICE NURSING EDUCATION AND LEADERSHIP CONCLAVE

NURSING ASIA-PACIFIC 2025

JUNE 19-20, 2025 VIRUAL EVENT

https://nursing.conferencesedition.com/

NURSING ASIA-PACIFIC 2025

SCIENTIFIC PROGRAM

08:45-09:00

JUNE 19, 2025

BST- British Summer Time

Inaugural Ceremony

DAY 01

THURSDAY

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

09:00-09:20	Title: Analysis of Postoperative Sexual Life and Influencing Factors in Male Patients Undergoing Transurethral Resection of Bladder Tumor
	Sen Hu, Henan Provincial People's Hospital, Zhengzhou University People's Hospital, China
09:20-09:40	Title: Effect of Early Postoperative Coffee Consumption on Intestinal Function Recovery in Patients with Cervical Cancer Surgery under ERAS Concept
	Wang Yan, First Affiliated Hospital of Army Military Medical University, China
09:40-10:00	Title: Efficacy and Safety of Different Polymyxin-Containing Regimens for the Treatment of Pneumonia Caused by Multidrug- Resistant Gram-Negative Bacteria: A Systematic Review and Network Meta-Analysis
	Zhanguo Liu, Southern Medical University, China
10:00-10:20	Title: Prognostic Values of Serum Lactate-to-Bicarbonate Ratio and Lactate for Predicting 28-Day in-Hospital Mortality in Children with Dengue Shock Syndrome
	Thanh Nguyen Tat, Woolcock Institute of Medical Research, Viet- nam
10:20-10:40	Title: Innovative Modification of Scaffolds in Conjunction with Computational Methodologies for the Design of Potential Androgen Receptor Antagonists in the Context of Prostate Cancer Treatment
10.20 10.10	Sanmati Kumar Jain, Guru Ghasidas Vishwavidyalaya (A Central University), India

10:40-11:00	Title: Youth Council for Breast Health: A BCYW Foundation's Global Initiative Empowering Young Women on Nursing Campuses to Promote Breast Health Awareness for a Breast Cancer-free Future
	Smriti Arora, All India Institute of Medical Sciences, India
11:00-11:20	Title: Effect of a Multidimensional Teaching Intervention on Questioning Ability, Levels of Questions, and Critical Thinking Disposition Among Neophyte BSN Students in Islamabad
	Muhammad Ishtiaq, Shifa Tameer-e-Millat University, Pakistan
	REFRESHMENT BREAK 11:20-11:35
11:35-11:55	Title: How effective is I – PRF in Managing TMJ Pain Associated with Internal Derangement in Adult Patients: Our Experience
	Nithin Kumar, Central Asian University, Uzbekistan
11:55-12:15	Title: The Effects of Pretreatment with Atorvastatin, Fenofibrate, or both Drugs in a Mouse Model of Acute Lipemia Induced by the General Lipase Inhibitor Poloxamer 407
	Tatiana A. Korolenko, Scientific Research Institute of Neurosciences and Medicine, Russia
12:15-12:35	Title: Factors Affecting Nurses' Workload According to Cheltenham Patient Classification Scale in Pediatric Intensive Care Units of Adana Provincial Center Public Hospitals
	Şenay Çetinkaya, Çukurova University, Turkey
10.75 10.55	Title: Management of Oral Manifestations of Chronic Graft-Versus- Host Disease: The Future is here
12:35-12:55	Yehuda Zadik, The Hebrew University of Jerusalem and Hadassah Medical Center, Israel
12:55-13:15	Title: Educating Staff in Care for High-Risk Infants and Children – Experiences from a Global Intervention
	Niels Peter Rygaard, Fairstart Foundation, Denmark
	LUNCH BREAK 13:15-13:45
13:45-14:05	Title: Conditions of Nurses' Work in a Shift System during the COVID-19 Pandemic in Poland
	Lidia Sierpińska, Independent Public Health Care Unit, Poland

14:05-14:25	Title: The Quality of Antimicrobial Susceptibility Test Discs and Implications for Patient Outcomes
	Stefan T Orszulik, Oxoid Ltd, UK
14:25-14:45	Title: A System to Simplify and Facilitate Thyroid Function Test Interpretation
	Robert F. Dons, Southern Illinois University School of Medicine, USA
14:45-15:05	Title: The Neurobiology of Violence and Victimization: Etiology, Biological Substrates, Clinical Implications, and Preventive Strategies
	William P. French, University of Washington, USA
	Title: Variation in Fetal Weight Percentile Estimates
15:05-15:25	Garvit Khatri, University of Colorado, USA
	Title: Truth, Meaning, and Attachment in Healing PTSD
15:25-15:45	Robert S. Brown, University of Virginia, USA
15:45-16:05	Title: Bathing and Showering Challenges for Individuals Aging with Long-Term Mobility Disabilities: Insights and Innovations in Assistive Technology
	Pallabi Bhowmick, University of Illinois Urbana-Champaign, USA
	REFRESHMENT BREAK 16:05-16:20
16:20-16:40	Title: Risks, Signs, and Interventional Strategies for Depression of Chinese Cancer Patients in a Cultural Context
	Amy Y. Zhang, Case Western Reserve University, USA
16:40-17:00	Title: Artificial Intelligence in Early Development and Learning: Capability, Caution, and Framing the Way Forward
	Gary J. Dickelman, EPSScentral LLC, USA
17:00-17:20	Title: COVID-19 Vaccine Hesitancy Among Marshallese in Northwest Arkansas (USA)
	Pearl A. McElfish, University of Arkansas for Medical Sciences, USA
17:20-17:40	Title: Transfers of the Sternal Head of Pectoralis Major and Latissimus Dorsi to Treat Sprengel Syndrome
	Ricardo Berriel Mendes, Institute NAEON, Brazil

17:40-18:00	Title: Compassion as a Tool to Enhance Communication between Nurses and Children in the Oncology Pediatric Ward
	Tania Villalobos Luján, University of Calgary, Canada
18:00-18:20	Title: Unseen is to Unexist: The Crucial Importance of Young Women's Peacebuilding Approaches in Northern Ethiopia
	Christina Beyene, University of Manitoba, Canada
	Title: Person-Centered Health Education and Research
18:20-18:40	Carlos Gualberto Salcedo Espinoza, San Marcos National University, Peru
	NETWORKING
	End of Day 1

SCIENTIFIC PROGRAM

JUNE 20, 2025

BST- British Summer Time

06:45-07:00

Introduction

DAY 02

FRIDAY

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

07:00-07:20	Title: Listening to the Voices of Cares: A Cultural Perspective on the Lived Experience
	Gihane Endrawes, Western Sydney University, Australia
	Title: Primary Cutaneous Melanoma Management in 2024
07:20-07:40	Alexander Nirenberg, Australasian College of Cutaneous Oncology, Australia
07:40-08:00	Title: The Impact of VR-Based Safety Experience Education on Safety Awareness, Safety Behavior, and Accident Prevention: The Empirical Study of VR Application in Industrial Safety Education in Korea
	Gil-Sang Jang, University of Ulsan, Republic of Korea
08:00 - 08:10	Title: Psychosocial Effect of Appearance Changes Associated with Cancer: A Scoping Review
(E-Poster)	
	Madoka Wakabayashi, Kanazawa University, Japan
08:10-08:30	Madoka Wakabayashi, Kanazawa University, Japan Title: The Effect of Developmental Care on the Length of Hospital Stay and Family Centered Care Practice for Very Low Birth Weight Infants in Neonatal Intensive Care Units: A Cluster Randomized Controlled Trial
	Title: The Effect of Developmental Care on the Length of Hospital Stay and Family Centered Care Practice for Very Low Birth Weight Infants in Neonatal Intensive Care Units: A Cluster Randomized
	Title: The Effect of Developmental Care on the Length of Hospital Stay and Family Centered Care Practice for Very Low Birth Weight Infants in Neonatal Intensive Care Units: A Cluster Randomized Controlled Trial Xiaojing Hu and Tianchan Lyu, <i>Children's Hospital of Fudan</i>
08:10-08:30	Title: The Effect of Developmental Care on the Length of Hospital Stay and Family Centered Care Practice for Very Low Birth Weight Infants in Neonatal Intensive Care Units: A Cluster Randomized Controlled Trial Xiaojing Hu and Tianchan Lyu, <i>Children's Hospital of Fudan</i> <i>University, China</i> Title: Towards Sustainable Primary Healthcare in Hong Kong:
08:10-08:30	 Title: The Effect of Developmental Care on the Length of Hospital Stay and Family Centered Care Practice for Very Low Birth Weight Infants in Neonatal Intensive Care Units: A Cluster Randomized Controlled Trial Xiaojing Hu and Tianchan Lyu, Children's Hospital of Fudan University, China Title: Towards Sustainable Primary Healthcare in Hong Kong: Applying Social Ecological Model with ESG and SDG Insights

09:10-09:30	Title: Preparedness of Semi-Urban Healthcare Systems, Outpatient Perspective
	Sandesh Akre, IIHMR University, India
09:30-09:50	Title: Globin Chain Analysis Using Direct Injection Mass Spectrometry Guides Pathologists to Suggest Appropriate Molecular Testing
	Deepalakshmi PD, Neuberg Anand Academy of Laboratory Medicine Pvt Ltd, India
09:50-10:10	Title: The Effect of Drama Therapy on Depressive Symptoms and Quality of Life among Older Adults in Residential Care Facilities
	Samer Hatem Sharkiya, Dorot Geriatric Medical Center, Israel
10:10-10:30	Title: Worm Ball Induced Acute Abdomen in a 2-Year-Old - A Case Report
	Meghna Kinjalk, Lady Hardinge Medical College, India
	REFRESHMENT BREAK 10:30-10:45
10:45-11:05	Title: Ultrasound Role in Diagnosis and Prediction of Surgery in Neonates with Necrotizing Enterocolitis
	Ehsan Ranjbar, Tehran University of Medical Sciences, Iran
11:05-11:25	Title: "Are You Aware Enough of Feeding Birds, Sweetie?" A Semiotic View on Environmental Awareness in Iraqi Preschool Children's Drawings
	Huda Halawachy, University of Mosul, Iraq
11:25-11:45	Title: Tarlov Cysts: Towards a More Comprehensive Clinical Understanding
	Ricky Rasschaert, AZ Rivierenland, Belgium
11:45-12:05	Title: Time to Bridge the Clinical Divide?
	Adam Widdison, Royal Cornwall Hospital, UK
12:05-12:25	Title: Nurse Leaders' Knowledge of Leadership Skills
	Monisola Yetunde Jane Omishakin, BPP University, UK
12:25-12:45	Title: Matricaria pubescens Supplementation and Its Implications for Preventive Care in Metabolic Health in Rats
12.23-12.43	Houssem CHENNA, Pharmaceutical Sciences Research Center (CRSP), Algeria
12:45-13:05	Title: Online Medication Therapy Management (OMTM) in a Changing World: Assessing Knowledge, Practice, and Barriers in Oyo State, Nigeria
12.13 13.03	Hamidu Adediran Oluyedun , University of Ibadan, Nigeria

13:05-13:25	Title: Medical Education about Clinical Guidelines through "symbolic" Al: Project and Main Results
	Paolo Terenziani, University of Eastern Piedmont, Italy
	LUNCH BREAK 13:25-13:55
13:55-14:15	Title: Social Determinants of New-Born Health: Increasing Opportunities to Survive and Thrive
	Mabel Kefilwe M. Magowe, University of Botswana, Botswana
14:15-14:35	Title: Promoting Mental Health in Ageing Societies – The Development of the Depression Stigma Questionnaire 65+
	Ana Rodriguez, Centre for the Study of Population, Portugal
14:35-14:55	Title: Gamified Digital Intervention as a Novel Approach to Enhance the Efficacy of Psychotherapeutic Strategies
	Farjana Z. Eishita, Idaho State University, USA
14.55 15.15	Title: Diagnosis and Management of Obstructive Sleep Apnea: Updates and Review
14:55-15:15	Safia Sameem Khan, University of Texas Southwestern Medical Center, USA
15:15-15:35	Title: Effect of Resistance Training on Cognition, Physical Performance, and Brain Anatomy in Older Adults with Mild Cognitive Impairment
	Isadora Cristina Ribeiro, Universidade Estadual de Campinas (UNICAMP), Brazil
15:35-15:55	Title: Views of Chief Nursing Officers of CAR ICOM on Strengths, Challenges, Opportunities of COVID-19 Pandemic
	Audrey Gittens, University of Technology, Jamaica
	Title: User Experience of Virtual Reality in Nursing Education
15:55-16:15	Lizhu Zhang, University of Minnesota, USA
	NETWORKING

End of Day 2

SPEAKER TALKS

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VIRTUAL EVENT 6th Asia-Pacific







Advanced Nursing Practice, Nursing Education And Leadership Conclave

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Analysis of Postoperative Sexual Life and Influencing Factors in Male Patients Undergoing Transurethral Resection of Bladder Tumor

Sen Hu, Xiaoqing Wang and Fengjie Zhang

Henan Provincial People's Hospital, Zhengzhou University People's Hospital, China

Background: To investigate the changes in sexual quality of life (QoL) and its influencing factors in male patients with bladder tumors after transurethral resection of bladder tumors and drug perfusion and to provide a reference for formulating intervention measures.

Methods: A total of 122 male patients who underwent transurethral resection of the bladder tumor (TURBT) and regular bladder instillation after surgery at a tertiary hospital in Henan Province were selected as the observation group. The control group comprised 122 patients who underwent a single intravesical instillation after TURBT between January 2021 and May 2024. The two patient groups were compared using the Sexual Life Quality (SLQ) questionnaire. We analyzed the factors influencing sexual quality of life in the observation group and their correlation with erectile function and postoperative urinary function. A database was established using SPSS 27.0 for the statistical analysis.

Results: The sexual quality questionnaire score was lower in the observation group than in the control group (P < 0.05). Age, income, medical insurance payment method, and occupation significantly affected the postoperative sexual quality of life scores of patients with bladder cancer (P < 0.05). The quality of sexual life was negatively correlated with postoperative urination and positively correlated with the International Erectile Function Score.

Conclusion: Male patients with regular bladder perfusion after TURBT experienced poorer sexual lives due to psychological stress caused by drug perfusion, repeated indwelling catheters, and the disease itself.



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Table 1: Multiple linear regression analysis of postoperative sexual quality of life in male patients with TURBT in the observation group

Independent Variable	Partial Regression Coefficient	Standard Error	Standardized Regression Coefficient	t	q
Constant	0.688	0.933	_	0.737	0.463
Postoperative erectile function	1.168	0.039	0.947	30.136	0
Occupation	0.608	0.291	0.066	2.088	0.039

Note: R2=0.741, adjusted R2=0.685, F=45.639, P<0.001.

Healthcare workers should provide information on how diagnosis and treatment affect patients ' sexual function, help them make informed treatment decisions, and offer personalized professional support to enable early sexual rehabilitation.

Biography

Sen Hu, Henan Provincial People's Hospital/Zhengzhou University People's Hospital, Member of the Specialized Committee of the World Federation of Chinese Medicine Societies Member of the Chinese and Western Medicine Branch of the Chinese Society of Traditional Chinese Medicine Information, deputy leader and secretary-general of the Department of Neurosurgery (Precision Therapy Group of Neuro-tumors) of the Henan Medical Popular Science Association, and secretary-general of the Zhong yuan Neuro-tumor Forum of the World Federation of Neurosurgical Societies (WFNS). He is proficient in R language, Python, and Stata data processing, and is committed to the research of electronic medical record structuring, big data, and data mining.



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Effect of Early Postoperative Coffee Consumption on Intestinal Function Recovery in Patients with Cervical Cancer Surgery under ERAS Concept

Wang Yan and Wu Zhimin

Obstetrics and Gynecology, First Affiliated Hospital of Army Military Medical University, China

Objective: To explore the effect of early postoperative coffee consumption on the recovery of intestinal function in patients with cervical cancer undergoing laparoscopic surgery under the concept of ERAS.

Methods: The 110 patients, from February 1 to December 31, 2022, who were treated with laparoscopic radical surgery for cervical cancer in the Department of gynaecology of Southwest Hospital of the Army Military Medical University were selected as the study objects; these patients were divided into experimental group and control group by random number table, with 55 patients in each group. The control group took food immediately after the operation, that is, the patient began to eat immediately after returning to the ward after the operation; The control group took 50-250ml of warm water in the first 2 hours, and took it orally in 5-10 times, with an interval of 10-30min;250-500ml of liquid food can be taken in 2-4h,in 3-5 times, with an interval of 10-30min (such as rice soup, warm water, etc.). The experimental group was intervened by consumption coffee at the early stage after operation, that is, the patients were given 150-200ml of coffee orally at 2h, 6h and 18h after awakening, and drank it within 20min each time. Both groups of patients were fasting for 6 hours and liquid fasting for 2 hours before operation, and did not use mechanical enema for intestinal preparation. After operation, routine nursing was performed, such as pipeline nursing, bed activity guidance, wound and pain nursing.

Result: The time of the first bowel movement time, defecation ,tolerance to solid food and the average postoperative hospital days in the experimental group was shorter than that in the control group(p<0.05).



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Table1:

Table 1: Comparison of gastrointestinal function recovery and average postoperative hospitalization days between the two groups of patients ($\bar{x}\pm s$) [n (%)]

groups	n	Time to first anal defecation/h	First bowel movement Time/h	First solid tolerance time/h	Average postoperative Hospital days/d
control subjects	55	16.3± 7.442	28.68±10.99	58.68±10.39	9.47±2.30
experimental group	55	14.5 ±6.75	24.38± 9.22	54.12±9.16	7.72±1.28
P-value		<0.05	<0.05	<0.05	<0.05

The detection level of CRP value and the incidence of gastrointestinal complications in the experimental group were lower than those in the control group 24 hours after operation (p<0.05).

Table2:

Table 2: Comparison of 24h postoperative VAS scores, CRP values between the two groups of patients ($\bar{x}\pm s$,分)

groups	n	VAS score	CRP value
control subjects	55	4.5(3-6)	46.20±14.38
experimental group	55	3.5(2-5)	42.88±11.30
P-value		<0.05	<0.05

Biography

Wang Yan is a Specialist nurse, gynecological tumor case manager, tumor movement rehabilitation therapist, clinical responsibility group leader.

Her main achievements: obtained ISPN certification, obtained 4 national patents, published 5 papers. Nursing testimonies: Be myself light, illuminate myself, warm others.



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Efficacy and Safety of Diferent Polymyxin-Containing Regimens for the Treatment of Pneumonia Caused by Multidrug-Resistant Gram-Negative Bacteria: A Systematic Review and Network Meta-Analysis

Zhanguo Liu¹, Yi Zhou¹, Guizhong Wang¹, Ying Zhao¹, Weijia Chen¹, Xuyan Chen¹, Yuqi Qiu¹, Yuanyu Liu¹, Shuqi Wu¹, Jianbin Guan¹, Ping Chang¹ and Yong Liu²

¹Department of Critical Care Medicine, Zhujiang Hospital, The Second School of Clinical Medicine, Southern Medical University, China

²Department of Intensive Care Unit, Shenzhen Hospital, Southern Medical University, China

The optimal administration of polymyxins for multidrug-resistant gram-negative bacterial (MDR-GNB) pneumonia remains unclear. This study systematically evaluated the efficacy and safety of three polymyxin-containing regimens—intravenous (IV), inhaled (IH), and intravenous plus inhaled (IV+IH)—through a network meta-analysis. Data from 19 observational studies and 3 randomized controlled trials (RCTs), involving 3318 patients, were analyzed. Primary outcomes included overall mortality, while secondary outcomes encompassed microbial eradication, clinical success, acute kidney injury (AKI), and bronchospasm incidence. Pairwise meta-analysis revealed that the IV+IH regimen significantly reduced overall mortality compared to the IV regimen, while the IH regimen showed no significant difference. Network meta-analysis demonstrated that the IV+IH regimen had significantly lower mortality (OR 0.67; 95% CI 0.50–0.88), higher clinical success (OR 1.90; 95% CI 1.20–3.00), and better microbial eradication (OR 2.70; 95% CI 1.90–3.90) than the IV regimen. The IH regimen significantly reduced AKI compared to IV and IV+IH regimens. In conclusion, the IV+IH regimen may be the most effective for MDR-GNB pneumonia, offering lower mortality and higher microbial eradication, while the IH regimen is superior in reducing AKI.



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Biography

Zhanguo Liu is the Director of the Department of Critical Care Medicine at Zhujiang Hospital, Southern Medical University, and the Executive Director of the Zhujiang ECMO Rescue Center. Chief Physician, Doctoral Supervisor and Postdoctoral Co-Supervisor. visiting scholar at the University of California, San Diego (UCSD). Chair of the Critical Care Management Branch of the Guangdong Medical Industry Association, Vice Chair of the Critical Care Medicine Branch of the Guangdong Medical Association, and Vice Chair of the Extracorporeal Life Support Committee of the Guangdong Medical Doctor Association. With years of experience in medical practice, teaching, and research in critical care medicine focused on the early diagnosis of severe infections, organ protection, immune regulation, as well as organ replacement and life support therapies.



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Prognostic Values of Serum Lactate-to-Bicarbonate Ratio and Lactate for Predicting 28-Day in-Hospital Mortality in Children with Dengue Shock Syndrome

Thanh Nguyen Tat¹, Tung Trinh Huu² and Luan Vo Thanh²

¹Woolcock Institute of Medical Research, Vietnam ²Children Hospital No.2, Vietnam

Background & Objectives: This study aimed to assess the clinical utility of blood lactateto-bicarbonate (L/B) ratio, as a prognostic factor for 28-day in-hospital mortality in children with dengue shock syndrome (DSS), admitted to the pediatric intensive care unit (PICU).

Methods: This single-center retrospective study was conducted at a tertiary children's hospital in southern Vietnam from 2013 to mid-2022. Prognostic models for DSS mortality were developed, using a predefined set of covariates in the first 24h of PICU admission. Area under the curves (AUCs), multivariable logistic and LASSO regressions, bootstrapping and calibration slope were performed.

Main results: A total of 492 children with DSS and complete clinical and biomarker data were included in the study analysis, and 26 (5.3%) patients died. The predictive values for DSS mortality, regarding lactate showing AUC 0.876 (95% CI, 0.807-0.944), and that of L/B ratio 0.867 (95% CI, 0.80-0.934), (P-values of both biomarkers < 0.001). The optimal cut-off point of the L/B ratio was 0.25, while that of lactate was 4.2 mmol/L (as shown in **Table 1**). Multivariable model showed significant clinical predictors of DSS mortality including severe bleeding, cumulative amount of fluid infused and vasoactive-inotropic score (> 30) in the first 24h of PICU admission. Combined with the identified clinical predictors, the L/B ratio yielded higher prognostic values (odds ratio [OR] = 8.66, 95% confidence interval [CI], 1.96-38.3; P < 0.01) than the lactate-based model (OR = 1.35, 95% CI, 1.15-1.58; P < 0.001). Both the L/B and lactate models showed similarly good performance, as shown with high AUC, low Brier score and good calibration plots (**Figure 1**).

Conclusion: Considering that L/B ratio has a better prognostic value than the lactate mod-



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el, L/B ratio therefore may be considered a potential prognostic biomarker in clinical use for predicting 28-day mortality in PICU-admitted children with DSS.

Abbreviations: DSS = dengue shock syndrome; L/B = lactate-to-bicarbonate ratio, MV = Mechanical ventilation; PALF = Dengue-associated pediatric acute liver failure; PICU = Pediatric intensive care unit; WHO = World Health Organization

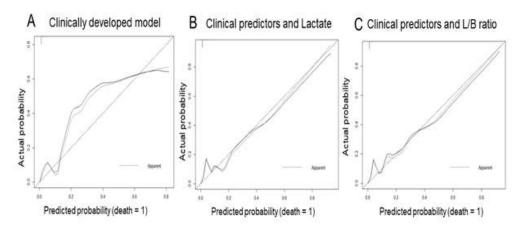
One figure and one table can be included in your results and discussions.

Table 1. Area under the receiver operating characteristic curve (AUC) for blood lactate, bicarbonate, and lactate/bicarbonate (L/B) ratio and cutoffs for 28-day mortality

Parameters AUC of 28-day mortality (95% confidence interval)		<i>P</i> -v	alue	
Lactate (mmol/L)	0.876	0.807-0.944	< 0.001	
Bicarbonate (mEq/L)	0.672	0.567-0.777	< 0.01	
L/B ratio	0.867	0.80-0.934	< 0.001	
Optimal cutoff points	Sensitivity	Specificity	Accuracy	Youden Index
Lactate $\geq 4.2 \text{ (mmol/L)}$	0.731	0.867	0.86	0.60
L/B ratio ≥ 0.25	0.730	0.831	0.83	0.56

Abbreviations: AUC = Area under the curve (%); L/B = Lactate-to-bicarbonate ratio

Figure 1. Calibration plots for: (1) clinically developed model with identified predictors (**Fig. 1A**), (2) clinical predictors and the blood lactate model (**Fig.1B**), and (3) clinical predictors and lactate-to-bicarbonate (L/B) ratio model (**Fig.1C**). The lactate and L/B prognostic models for DSS mortality showed good consistency between predicted data (x-axis) and observed values (y-axis). However, the model with only clinical predictors showed poor consistency between predicted and actual values.





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Thanh Nguyen Tat, M.D, PhD, and an infectious disease specialist. He have been working as a clinical researcher in paediatric and adult infectious diseases, mainly in paediatric and tropical disease studies, for 15 years at the Children Hospital 2, the Oxford University of Clinical Research Unit (OUCRU), Vietnam and currently Woolcock Institute of Medical Research, Australia and Vietnam. His key research interests include Paediatrics, PICU, Dengue, Tuberculosis, HIV/AIDS, Systemic invasive mycoses (Talaromycosis, Histoplasmosis and Cryptococcis), Viral hepatitis, Epidemiology and Clinical trials, Statistical modelling, and Machine learning in Tropical Diseases. He has oriented himself towards becoming an independent researcher in tropical diseases, particularly Dengue. He aims to conduct high-impact studies to improve dengue's diagnosis, advanced prognosis, and management to reduce the global burden of this disease in endemic countries. It is his honour to have an opportunity to deliver a presentation at this conference, and he is very thankful.



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Innovative Modification of Scaffolds in Conjunction with Computational Methodologies for the Design of Potential Androgen Receptor Antagonists in the Context of Prostate Cancer Treatment

Sanmati Kumar Jain¹, Ajay Kumar Gupta¹ and Piyush Ghode²

¹Department of Pharmacy, Drug Discovery and Research Laboratory, Guru Ghasidas Vishwavidyalaya (A Central University), India ²SVKM's NMIMS, School of Pharmacy & Technology Management, India

Androgens, including testosterone and dihydrotestosterone, play critical roles in prostate growth and development. The over-expression of androgenic receptors facilitates the progression of prostate cancer and makes these receptors an important target for therapeutic interventions for this disease. Enzalutamide is a drug that is used to treat prostate cancer. However, it is associated with side effects such as cardiovascular toxicity, acute myocarditis, high blood pressure, and seizures. The aim of this research was to develop new and safer enzalutamide analogues and to predict the pharmacokinetics and toxicity profiles of these enzalutamide analogues. In addition, molecular docking studies were carried out to predict biological interactions with the androgen receptor. A total of 195 analogues were produced by replacing amide group of Enzalutamide, from which 23 bioisosteres were selected on the basis of pharmacokinetic, toxicological screening and then docking studies were carried out. The expected physicochemical, medical and ADMET properties of the developed bioisosteres proved to be optimal to good compared to enzalutamide. In addition, the drug similarity and drug score of the analogues exceeded that of enzalutamide. Docking studies of analogues suggest that EZ8, EZ10, and EZ12 formed hydrogen bonds with the SER778 residue. This residue is likely involved in the antagonistic activity against androgen receptors. The results obtained from the ADMET analysis, drug likeness evaluation, drug score assessment, and docking studies of the synthesized enzalutamide analogues suggest that the ligands EZ12, EZ8, and EZ10 could be promising candidates for the development of anti-androgen agents aimed at treating prostate cancer.



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Biography

Dr. Sanmati Kumar Jain received his M. Pharm. and Ph.D. Degrees from Dr. Harisingh Gour Vishwavidyalaya in Sagar, Madhya Pradesh, India. He is currently a Professor of Pharmaceutical Chemistry at Guru Ghasidas Vishwavidyalaya (A Central University) in Bilaspur, Chhattisgarh, India. With more than 23 years of teaching experience, he has authored over 100 research/review articles, secured 53 patents, published 70 book chapters, and written three books along with two textbooks. Additionally, he has supervised 32 master's theses and three doctoral students. His research focuses primarily on drug design and medicinal chemistry.



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Youth Council for Breast Health: A BCYW Foundation's Global Initiative Empowering Young Women on Nursing Campuses to Promote Breast Health Awareness for a Breast Cancer-free Future

Smriti Arora¹, Kamli Prakash², Sandhya Chacko², Xavier Belsiyal¹, Sanchita Pugazhendi², Sunil Saini³ and Rakesh Kumar^{3,4}

¹College of Nursing, All India Institute of Medical Sciences, India ²Himalyan College of Nursing, Swami Rama Himalayan University, India ³Cancer Research Institute, Himalayan Institute of Medical Sciences, SRHU, India ⁴Breast Cancer in Young Women Foundation, USA

Background: Breast cancer, once primarily a disease of older women, is increasingly impacting those under the age of 40. In 2022, one-third of the global female population was aged 15-to-34. Nearly half (47.5%) of Breast Cancer in Young Women (BCYW) cases occur in the 20-to-34 age group, below the recommended mammography screening age. The WHO predicts an increase in such cases by 2050, with the average age of diagnosis expected to be 33.72 in 2040. This suggests that individuals likely to be diagnosed in 2040 are approximately 17-to-18 years today. The global rise in breast cancer incidence among young women is driven by several factors, including limited awareness of breast health and cancer, lack of self-breast care, and lifestyle choices. There is an urgent need for early, targeted interventions to reduce breast cancer risk and ensure timely diagnosis among young women on educational and workplace campuses.

Grassroot Intervention: To tackle this challenge, the BCYW Foundation launched the **Youth Council for Breast Health** (https://ycbh.org/), a global initiative for proactive breast health and breast cancer awareness across nursing and medical schools - the future healthcare providers. Here, we will share a positive experience from over 30 Nursing Schools in Uttarakhand State. YCBH chapters empower young adults on campuses worldwide by providing essential resources and current information to prevent breast cancer. By combining global collaboration with local action, each chapter is led by students and trainees under the supervision of local faculty/staff/leaders. The authors invite you to start a chapter at



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your nursing college (https://ycbh.org/start-a-ycbh-chapter/). These volunteer-led initiatives empower young women with knowledge and elevate awareness about breast health, risk factors, lifestyle changes, etc. Each chapter concentrates on three goals: raising awareness, disseminating information, and engaging 250 young adults annually.

Conclusions: This initiative empowers young people to lead healthier lives and advocate for a breast cancer-free future.

Main Messages: First, young women can develop breast cancer too! Second, early detection is essential! Third, empowering young women on campuses will create a lasting impact on women's health and lives.

Biography

Prof. Smriti Arora serves as the Professor cum Principal at the College of Nursing, AIIMS Rishikesh, bringing over 25 years of extensive experience in nursing education, clinical practice, and research. She holds a BSc (Hons) and MSc in Nursing from the prestigious AIIMS New Delhi and is a recognized Ph.D. Nursing Guide by the Indian Nursing Council.

Prof. Arora is actively involved in several professional bodies, serving as the Vice President of the Pediatric Nurses' Network of India (PNNFI), Joint Secretary of the Commonwealth Nurses and Midwives Federation (CNRI) – North Zone, and is a member of NNF, NQOCN, IANN, TNAI, and SPHERE. Her academic and clinical interests span across Quality Improvement, Pediatric Nursing, Maternal and Child Care, Community Health, and Women Empowerment.

She has played a pivotal role as a **National Mentor** for the Nationwide Quality of Care Network (NQOCN) for Quality Improvement and is a **National Trainer** for Simulation-Based Education. Prof. Arora has significantly contributed to public health initiatives including the Breastfeeding Promotion Network of India, COVID-19 pediatric care, neonatal resuscitation, and HIV/AIDS awareness. She has authored two books published by CBS and Elsevier and has been honored by the Indian Academy of Pediatrics for her work in basic newborn care and resuscitation programs.

Adding to her international credentials, she has completed a course in Traditional Chinese Medicine in Beijing, China. Her research contributions are widely recognized, with over **350 citations** in reputed academic journals.

Prof. Arora is a respected leader, educator, and advocate in the nursing profession, continuously striving for excellence in patient care and capacity building in healthcare.



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Effect of a Multidimensional Teaching Intervention on Questioning Ability, Levels of Questions, and Critical Thinking Disposition Among Neophyte BSN Students in Islamabad

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¹Shifa Tameer-e-Millat University, Pakistan ²University of Leeds, UK

Background: Questioning is a recognised strategy to promote critical thinking (CT), which is beneficial for students' academic achievement and professional career. In the literature, various strategies are employed individually or in combination to enhance students' questioning ability (QA) and CT. However, the results of these strategies are inconclusive in promoting QA and CT. A comprehensive approach incorporating training, practice, and a supportive environment may yield more favourable outcomes. This study examined the effects of a multidimensional teaching intervention on questioning ability, level of questions, and CT disposition among novice BSN students in Islamabad.

Methodology: A pre-post quasi-experimental study design with a control group was used. A sample of 273 (intervention group = 133; control group = 140) nursing students from private, semi-private, and public universities were recruited. The intervention was based on literature and Vygotsky's Social learning theory. It included questioning strategies (peer questioning and questioning the author), King's questioning stems for pre-reading material, and teacher training on questioning significance. Teachers provided feedback on students' questions, and students were awarded marks for formulating questions. Contextually developed questioning ability and Pakistan critical thinking scales collected data. Blooms taxonomy determined levels of questions (LOQs). Data were analysed using SPSS version 25. Ethical approvals were obtained.

Results: The intervention group demonstrated significant improvements in QA (p<0.001), LOQs (p<0.001), and CTD (p<0.001) compared to the control group. A significant difference in all the outcomes of the study was found across all settings; however, the most substantial improvement was noted in the public university. Demographic factors did not signifi-



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cantly influence post-test QA and CTD levels; nevertheless, the intervention enhanced QA and CTD.

Conclusion: This study demonstrates the efficacy of a multidimensional teaching intervention for enhancing nursing students' QA, LOQs, and CTD. Further research could examine the intervention's long-term effects.

Biography

Muhammad Ishtiaq currently serves as an Associate Professor and Assistant Dean of Undergraduate Programs at Shifa College of Nursing, a constituent college of Shifa Tameer-e-Millat University. His academic leadership is complemented by a strong foundation of practical experience gained during his tenure at the Tameere-Millat Foundation, where he held various roles including School Health Nurse, Project Coordinator, and Project Manager.

He is actively involved in teaching across multiple academic levels. He teaches Biostatistics and Epidemiology to undergraduate students, Theoretical Basis of Nursing to master's students, and co-teaches Nursing Philosophy and Multi-Mixed Methods Research to PhD candidates. His academic interests lie in critical thinking, public health nursing, and oncology nursing—areas in which he has conducted and supervised numerous research projects.

His scholarly contributions include a range of publications in both national and international journals, and he serves as a reviewer for several esteemed nursing journals. In addition to his academic and research roles, He plays a significant part in nursing education governance. He is the Coordinator of the Institution Inspection Team for the Pakistan Nursing and Midwifery Council and is a member of the Board of Studies for nursing colleges in Rawalpindi and Islamabad.

In recognition of his outstanding contributions to nursing education, he was honored with the Best Teacher Award by Shifa College of Nursing in 2015.



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How effective is I – PRF in Managing TMJ Pain Associated with Internal Derangement in Adult Patients: Our Experience

Nithin Kumar¹, Mariea Francis² and Sai Sindhu VK³

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Purpose: Temporomandibular joint (TMJ) pain associated with internal derangement is a common condition that can significantly impact an individual's quality of life. Unfortunately, current treatment options often fall short of providing long-lasting relief. Injectable platelet-rich fibrin (I-PRF) is currently gaining popularity as a novel approach in managing TMJ pain. This prospective clinical study aimed to investigate the efficacy of I-PRF in mitigating TMJ pain and improving jaw function in individuals with clinically diagnosed TMJ pain associated with internal derangement. Through the utilization of validated outcome measures, including pain intensity assessments and functional examinations, this research seeks to provide comprehensive insights into the potential benefits of I-PRF for TMJ disorders.

Methods: A total of 68 participants, aged 18-60 years, clinically diagnosed with TMJ pain, were recruited from dental clinics and specialist referrals. Participants were randomly assigned to either the intervention group (I-PRF injections) or the control group (placebo). Primary outcome measures included TMJ pain intensity and jaw function, assessed using the Visual Analog Scale and functional examinations, respectively. Secondary outcomes comprised patient-reported outcomes (PROs) on quality of life and satisfaction. Data were collected at baseline and six, 12-, and 24-weeks post intervention.

Results: Baseline characteristics demonstrated successful randomization, with no significant differences in age, gender, or TMJ pain duration between groups. Post intervention, the intervention group exhibited a significant and sustained reduction in TMJ pain intensity compared to controls (p<0.001). Improvements in jaw function was also notable



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in the intervention group at all follow-up time points (p<0.001). PROs related to quality of life and satisfaction substantially increased in the intervention group compared to controls (p<0.001).

Conclusion: I-PRF demonstrated significant efficacy in reducing TMJ pain intensity, improving jaw function, and enhancing PROs. These findings support the consideration of I PRF as a valuable therapeutic intervention for individuals with TMJ pain.

Biography

Dr. Nithin Kumar, PhD, is a distinguished consultant in the field of oral and maxillofacial surgery. With over a decade of academic experience working in India, middle east and central Asian countries, he has made significant contributions in the field of medicine with numerous international publications. Dr. Kumar holds a PhD and MDS (Master of Dental Surgery) in oral and maxillofacial surgery, demonstrating his commitment to advancing knowledge in his field. Currently, Dr. Kumar serves as the Deputy Dean and Associate Professor at Central Asian University in Tashkent, Uzbekistan. His leadership role underscores his dedication to academic excellence and research as well as imparts valuable knowledge to the next generation of oral and maxillofacial surgeons. His areas of expertise and research interests includes understanding and managing Temporomandibular joint (TMJ) conditions, orthognathic surgery and orofacial infection.



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The Effects of Pretreatment with Atorvastatin Fenofibrate, or Both Drugs in a Mouse Model of Acute Lipemia Induced by the General Lipase Inhibitor Poloxamer 407

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¹Scientific Research Institute of Neurosciences and Medicine, Russia ²University of Missouri, USA ³University Canada West, Canada ⁴Institute of clinical and Experimental Lymphology, SB Russian Academy, Russia

Dyslipidemia is a well-known risk factor for the development of cardiovascular diseases and atherosclerosis. The effects of combined pretreatment with atorvastatin and fenofibrate (Tricor) were studied in a mouse model of acute lipemia induced by a general lipase inhibitor, poloxamer 407 (P-407, 250 mg/kg). This lipemia is characterized by significantly increased serum levels of triglycerides (TG), low-density lipoprotein (LDL) cholesterol, together with decreased concentration of high-density lipoprotein (HDL) cholesterol. Atorvastatin pretreatment had a hypolipidemic effect, decreasing concentrations of LDL cholesterol and increasing HDL cholesterol. Pretreatment of mice with fenofibrate decreased TG level, increasing HDL cholesterol. Elevation of the serum cystatin C level was found in control and lipemic mice pretreated with atorvastatin, fenofibrate, or both. Liver expression of lysosomal acid lipase increased in atorvastatin- or/and fenofibratepretreated groups of lipemic mice. It was concluded that increased expression of lysosomal acid lipase is related to the removal of lipid droplets from hepatocytes, thus preventing acute lipemia. Lastly, cystatin C may be a "theranostic" biomarker for hypolipidemic drugs.

Biography

Prof. Tatiana Alexandrovna Korolenko was born on May 26, 1940, in Tashkent, then part of the Soviet Union. She graduated from middle school in Tashkent in 1947 with a gold medal, recognizing her outstanding academic performance.

She began her medical education at Tashkent Medical Institute in 1949 and later transferred to Novosibirsk



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Medical University in 1950, where she completed her studies in 1955. From 1956 to 1960, she worked as a scientific research worker, marking the beginning of a long and distinguished career in medical science.

In 1962, Prof. Korolenko earned her Ph.D. at the Moscow Institute of Psychiatry. She then joined the Central Research Laboratory of Novosibirsk Medical Institute, where she continued her scientific work from 1962 to 1975. In 1978, she successfully defended her Doctoral Dissertation in Biochemistry.

Prof. Korolenko served as a professor of Biochemistry and Doctor of Medical Sciences at the Research Institute of Physiology in Novosibirsk, Russia. She has mentored 14 doctoral candidates (aspirants) and led numerous research initiatives throughout her career.

Her work has received international recognition, and she has participated in scientific conferences across Europe, the United States, Canada, and Japan. She is also a member of the European Group for the Study of Lysosomes, reflecting her specialization in this important field of biomedical research.



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Factors Affecting Nurses' Workload According to Cheltenham Patient Classification Scale in Pediatric Intensive Care Units of Adana Provincial Center Public Hospitals

Şenay Çetinkaya² and Emra Doğan¹

¹Graduated from Çukurova University Health Sciences Institute, Turkey ²Head of the Department of Child Health and Disease Nursing, Faculty of Health Sciences, Çukurova University, Turkey

Objective: This study was conducted to determine the workload of nurses working in Pediatric Intensive Care Unit and the factors affecting it.

Method: The study was performed cross-sectionally between 1 November 2016 and 30 November 2016 in Children Intensive Care Units of Adana Numune Training and Research Hospital, Adana Obstetrics and Gynecology Hospital and Cukurova University Medical Faculty Balcalı Hospital. Data were collected by nurses filled in with "Nurse's Descriptive Features and Workload Form", "Workload Scale", "Cheltenham Patient Classification Scale, Intensive Care Nurse Activities Form". Ethical approval and official permission were obtained from the institutions to conduct the research.

Results: The average age of the nurses participating in the survey was 30.90±5.97. 72.6% of the nurses have undergraduate degrees and 54.8% have 5 years or less of professional experience. 60% of the nurses look after to average 2 patients daily. 47.9% of the nurses described the workload as over and 43.8% as very much. According to the nurses, at the beginning of the factors that increase the work load is doing non-duty work (32.4%). Of the patients, 2.2% were in Type 1 class, 8.8% were in Type 2 class, 22.2% were in Type 3 class and 66.6% were in Type 4 class. It was determined that of nurses 35.4% have time for Category 1, 24.9% for Category 2, 18.3% for Category 3, 6.5% for Category 4, 14.5% for Category 5, and 0.1% for Category 6. According to this study, it was determined that the nurses in proportion as 60.4% (Category 1 and 2) allocated time to direct nursing practices and the nurses allocated more than half of their working time directly to their patients.



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Conclusion: It may be suggested that it may be increased the activities due to reducing the workload of nurses, had balanced number of patients taken care of and considering care needs of patients. The practices used by nurses working in pediatric intensive care clinics are of great importance as they increase the length of stay of the patients in the intensive care unit and the quality of care.

Biography

Prof. Dr. Şenay Çetinkaya has 5 patent applications. These patent applications are related to medical devices. The first of these has been approved for European and American patents. She won the Innovative Nurse of the Year award with one, a silver medal with the other and first place in a congress she attended with the other. She has 1 US, 2 European, 3 German, 1 UK, 1 French, 1 Turkish patent and 3 Turkish Utility Model certificates. Prof. Dr. Şenay Çetinkaya, who completed her undergraduate, graduate and doctoral education at the Ege University Nursing Department, has been continuing to educate undergraduate and graduate students in the field of nursing for 35 years. She worked for 8 years at the Ege University Thoracic and Cardiovascular Surgery Intensive Care Nursing Department. She has only taught undergraduate and graduate courses in the field of Child Health and Diseases Nursing for 27 years of her 35 years of education. She has been serving as the Head of the Department of Child Health and Diseases Nursing at Çukurova University for 16 years. During this period, she served as the Erasmus Faculty coordinator. Under his supervision, 21 graduate students and 5 PhD students graduated. He is an international book editor (1 book), book chapter author (9 book chapters). She has published in 14 SCI journals, 14 original research articles, non-SCI international refereed journals 25 articles and national 34 articles.



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Management of Oral Manifestations of Chronic Graft-Versus-Host Disease: The future is here

Yehuda Zadik

Department of Oral Medicine, Faculty of Dental Medicine, The Hebrew University of Jerusalem and Hadassah Medical Center, Israel

Chronic graft-versus-host disease (GVHD) can manifest in the oral cavity with lichenoid and ulcerative mucosal lesions, xerostomia, restricted jaw opening, and taste alterations. Indirectly, patients may also develop oral candidiasis, irreversible dental caries, and are at a significantly higher risk of developing oral cancer. This lecture will review evidence-based therapeutic approaches currently available for managing these manifestations and present innovative treatments for these indications.

Biography

Professor Yehuda Zadik is a specialist in oral medicine, a graduate of the Hebrew University-Hadassah School of Dental Medicine in Jerusalem, Israel. Currently, he is the director of the Oral Medicine Clinic for Hematologic and Oncologic Patients in the Department of Oral Medicine and the director of the Saligman Clinics at the Hebrew University's Faculty of Dental Medicine, and Hadassah Medical Center.

Professor Zadik has published over 150 articles in scientific literature and has contributed 7 chapters to medical books. In recent years, his research and scientific publications have focused on various oral complications in cancer patients, with an emphasis on oral mucositis and chronic graft-versus-host disease.

Professor Zadik is the former chair of the Israeli Society of Oral Medicine.



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Educating Staff in Care for High-Risk Infants and Children – Experiences from a Global Intervention

Niels Peter Rygaard

Child Psychologist, Fairstart Foundation, Denmark

Objective: The presentation shares experiences from the Fairstart Foundation's global educations in attachment theory-based care for infants and children. Methods: In six-month online classrooms, mental health workers study attachment theory, group development, and learning theory. As part of the curriculum, a student trains a local group of foster-or-kin-ship parents, refugee- and other high-risk parents in quality care, during six three-hour session meetings. Students use Fairstart ´s online group training sessions in 20 language versions, each adapted to local culture. The intervention is implemented on close partnerships with NGO ´s and government agencies. 820 partner staff in Asia, Greenland, Europe and Africa have graduated and trained groups of foster-, kinship and high-risk parents, caring for 70.000 infants, children and youth. Outcomes: pre-and-post training scores indicate improvements in partner staff competences, reduced caregiver stress, and improved child development.

Biography

Niels Peter Rygaard, Danish-American child psychologist, CEO and co-founder at the non-profit www. fairstartfoundation.com. His foundation designs staff educations in care and learning for high-risk infants and children, developed in close partnerships with government agencies and NGOs. His books and papers focus on global psychology, implemented by low-cost large scale interventions, to empower local professional care systems. Niels is the chief editor of the 2024 PCUN edition "Children Around the World - the Future of our Earth", where researchers worldwide describe their child intervention programs. He is an active member of the Danish and American Psychologist Associations, the European Federation of Psychologist Associations, the work group for migrant children at PCUN advising the United Nations, and the World Association of Infant Mental Health. In 2020 he received the APA International Award for humanitarian work for underserved populations, and in 2023 the International Council of Psychologists Human Rights Award.



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Conditions of Nurses' Work in a Shift System during the COVID-19 Pandemic in Poland

Lidia Sierpińska^{1, 2,3}, Edyta Ptasińska⁴ and Elżbieta Araminowicz-Kierklo^{1,5}

¹Military Clinical Hospital No. 1 with Polyclinic, Independent Public Health Care Unit, Poland ²Radom Higher School, Poland ³Vincent Pol University, Poland ⁴Students' Scientific Circle, Radom Higher School, Poland ⁵Uinversity of Warmia and Mazury, Poland

The aim of the study was evaluation of work conditions of nurses engaged in shift work in hospital wards during the COVID-19 in Poland. The study was conducted in 2020, and included 108 nurses working in a shift system in hospital wards. The research method was a diagnostic survey, using an author-constructed questionnaire. The majority of nurses (88.9%) reported a negative effect of shift work on their physical health: 'musculoskeletal pain', 'elevated arterial blood pressure', and 'hormonal disorders' - 54.5% of respondents used pharmacological treatment. The causes of physical disorders were: 'microclimate', 'physical effort', 'noise', and 'forced body position'. Shift work exerted a negative effect on psychological health of the majority of respondents (75.0%): 'deconcentration', 'sleep disorders', 'feeling of occupational burnout' - treatment in 38.9% of respondents - **Figure 1**.

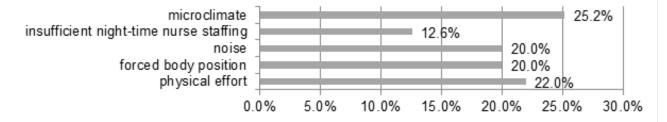


Figure 1

Most frequent noxious factors affecting the state of physical health occurring in shift work according to respondents' opinions.



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Psychological health disorders were caused by: 'circadian rhythms disturbance by shift work', 'chronic stresses, and 'conflicts at work'. 69.7% of respondents reported that their shift work was disturbed by organizational factors, including: a 'badly planned work schedule', 'enhanced pace of work due to staff shortage', 'ambiguous division of duties, rights, responsibilities', 'shortages of equipment at the workplace' – **Figure 2**.

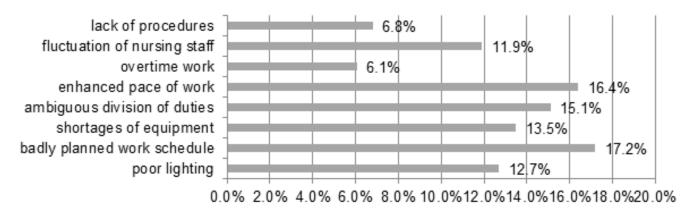


Figure 2

Most frequent organizational factors hindering shift work in a hospital ward according to respondents' opinions.

The examined nurses experienced a negative effect of shift work during COVID-19 pandemic on the state of their physical health, and psychological health, which, for some of them, was the cause of using pharmacological treatment. Many organizational factors hindered nurses' work in work in a shift system during the COVID-19 pandemic in Poland.

Biography

Lidia Sierpińska, Master of Science in Nursing, Doctor of Medical Sciences. Specialist in public health and in the field of epidemiological nursing.

She has 33 years of experience as a Head nurse in the Military Clinical Hospital No.1 with Polyclinic, Independent Public Health Care Unit, Lublin, Poland. And 14 years experience as the Plenipotentiary Commander for quality management systems. She was an adjunct for 18 years at the Radom School of Higher Education in the nursing speciality.

She was the National consultant for defence in the field of nursing for 16 years. And a Member of the Bioethics Committee for Scientific Research for 6 years, at the Medical University, Lublin. Also, she has 3 years of experience as a Research and didactic employee at Vincent Pol University in Lublin in the nursing speciality.

Many publications have been done within the scope of issues concerning quality management of medical services, and problems of hepatitis C as a risk factor for hospital-acquired infections.



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The Quality of Antimicrobial Susceptibility Test Discs and Implications for Patient Outcomes

Stefan T Orszulik

Oxoid Ltd, UK

Disc diffusion remains the main technique for evaluating antibiotic activity in clinical microbiology laboratories. This review looks at recent publications into the quality of antimicrobial discs and the impact on clinical outcomes. The usual standards expected for new medical devices in terms of quality control, QA, and evidence-based assessment of outcomes are almost completely lacking. For instance, the assay protocol endorsed by the FDA, DIN, and WHO has been shown to be invalid. Despite decades of research and practice in this field, the true quality of manufactured discs in terms of a validated, quantitative, analysis is lacking. Recent data indicate that a large proportion of discs do not meet the specifications, and that disc diffusion is a poor predictor of clinical outcomes. In addition, lack of harmonisation between EUCAST and CLSI, despite many years of effort, may arise due to quality issues. EUCAST have stated that they do not hold any quantitative data on the discs used in their work; consequently, any data arising from the use of such discs, including quality zone sizes and break points, should be regarded as potentially unsafe. This field lacks scientific rigour, which may have contributed to adverse clinical outcomes and the emergence of antimicrobial resistance. This review proposes a systematic approach to improve the quality and effectiveness of disc diffusion testing.

Biography

Stefan T Orszulik received a BSc and PhD from Royal Holloway College, University of London. Following postdoctoral research at the University of Strathclyde, Glasgow, he worked mostly in industry on a range of technologies including polymers, medical diagnostics, and lubricants. He has edited several books, and his research interests include quality improvement using 6-sigma techniques, materials chemistry, and medical devices.



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A System to Simplify and Facilitate Thyroid Function Test Interpretation

Robert F. Dons¹ and Jeff Gustafson²

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The results of paired tests for thyrotropin (TSH) and free thyroxine (FT4) must be interpreted in the context of a patient's history, physical exam, and clinical evidence for hypothyroid, euthyroid, or hyperthyroid status. Awareness of medications, thyroid disorders, and test artifacts influencing paired tests for TSH and FT4 (thyroid function test pairs, TFTP) is needed for their interpretation and to guide follow-up studies and disease management. Based on these variably complex factors, interpretations were generated for concordant, discordant, and anomalous TFTP patterns. Both primary care providers considering specialty referrals and endocrinology specialists themselves will benefit from these interpretations identifying the wide variety of thyroid disorders (n=85), prescription pharmaceuticals, and test artifacts that can influence any TFTP result. Reliance on memory and experience are inadequate for complete and accurate assessment of the multiplicity of TFTP interpretations found (n>190). The TFTP interpretation database created and methodology to support the validity and use of any interpretation is ready for dissemination as a smart phone app and will be of high utility for both primary care providers and endocrine specialists.

Biography

Dr. Robert Dons serves as a U.S.-based locum tenens consulting specialist in endocrinology and metabolism seeing patients with thyroid, pituitary, adrenal, and diabetes disorders nationwide. His doctoral studies in Illinois were followed by clinical training in Chicago and research activity at the National Institutes of Health in Bethesda, MD. His focus on thyroid disorders and their effects on thyroid tests and the ways pharmaceuticals affect these tests led to the 2008 publication of a manual describing methods to diagnose the wide variety of endocrine and metabolic disorders. Outside of the clinic, he enjoys fitness activities and time spent with his family, 5 children and many grandchildren.

Area Focus: Support for Advanced Nursing Practice in Diagnosis of Thyroid Disorders.



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Advanced nursing practice involves nurses who have acquired specialized knowledge, skills, and training through advanced education. Advanced Practice Registered Nurses (APRNs), include Nurse Practitioners (NPs), Clinical Nurse Specialists (CNSs), Nurse Anaesthetists (CRNAs), and Nurse Midwives (CNMs). APRNs play a critical role in the healthcare system by providing primary and specialized care, often serving as primary care providers, especially in underserved areas in which thyroid disorders are common and their management less than ideal.

Future Research Perspectives

Outcome Measurement: Researching the impact of APRNs on patient outcomes, healthcare costs, and access to care related to thyroid disorders.

Education and Training: Evaluating the effectiveness of advanced nursing education programs and identifying best practices for training APRNs to become more expert in thyroid diagnosis and management.

Cutting-Edge Technologies and Innovations: Use of iPhone App for interpreting tests.

Telehealth and Telemedicine: Expanding the use of telehealth to provide remote thyroid consultations, follow-ups, and patient education.

Artificial Intelligence (AI): Implementing AI-driven tools to aid in diagnosis, treatment planning, and predictive analytics to anticipate patient needs.

Electronic Health Records (EHRs): Enhancing EHR systems for better integration and accessibility, improving care coordination and patient safety.



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The Neurobiology of Violence and Victimization: Etiology Biological Substrates Clinical Implications, and Preventive Strategies

William P. French

Department of Psychiatry and Behavioral Sciences Seattle Childrens, Department of Psychiatry and Behavioral Medicine Seattle, University of Washington, USA

Objectives: This presentation will summarize the critical components of a previously published chapter the author (and presenter) contributed for the book *School Violence and Primary Prevention*, 2nd Edition, published in 2023. This chapter *The Neurobiology of Violence and Victimization: Etiology, Biological Substrates, Clinical Implications, and Preventive Strategies* explores the relationship between violence and victimization through the lens of neurobiology. By the conclusion of this presentation, attendees will have an increased understanding of (1) the neurobiological substrates involved in the formation of the trauma response and in a subset of people who display aggressive and violent behaviors; (2) the relationship between victimization and the perpetration of violence; and (3) clinical applications and prevention strategies that can be employed to reduce the prevalence of victimization and the perpetration of violence.

Methods: For the 2nd edition of this chapter, the author expanded on his 1st edition chapter by undertaking a review (beginning in early 2020) of additional relevant literature, which was then used to update the text and references from the 1st edition. Additionally, a new section on preventive strategies and additional resources was added. During the presentation, the author will summarize the key *take home points* from the chapter, including the most relevant neurobiological research findings and clinical and preventive implications.

Results: Attendees should expect to broaden their understanding of how brain processes (e.g., neurobiological substrates, genetic material, epigenetics, etc.) interact with the environment in the formation of psychopathological states, such as complex trauma, PTSD, impulsive aggression, and psychopathy.





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Conclusion: Exposure to trauma, especially exposure to adverse childhood events, is implicated in the development mental and physical illnesses across the lifespan. Oftentimes, victims of violence later become perpetrators of violence. A better understanding of the neurobiological substrates associated with these conditions can inform preventive and treatment strategies.

Biography

Dr. William P. French is an associate professor and a faculty member in the Child and Adolescent Psychiatry Division of the University of Washington Department of Psychiatry and Behavioral Sciences. His interests include, integrating mental health care into primary care settings, including school-based health care centers, treating children with trauma-related backgrounds and disruptive behaviors, such as ADHD and oppositional defiant disorder. Dr. French's research and publication efforts have focused on ADHD, disruptive behaviors and aggression, emotional dysregulation/irritability, health care delivery, and improving clinical supervision of child and adolescent psychiatry trainees. He is highly involved in the child and adolescent training program at UW/Seattle Children's and provides supervision for trainees at four outpatient clinical rotation sites. He is cochair of the American Academy of Child and Adolescent Psychiatry's (AACAP's) Systems of Care Committee.



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Variation in Fetal Weight Percentile Estimates

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¹University of Colorado, USA ²University of Washington, USA

Purpose and Background: The fetal percentile is based on three parameters: estimated fetal weight, gestational age and ethnic growth charts. All the three parameters are prone to errors, and can overdiagnose growth retardation (IUGR) and macrosomia. However, weight percentiles are generally reported without any error. The calculation of error in fetal weight percentiles has never been assessed. In an attempt to do so, we reviewed the weight percentile distribution of all second and third trimester fetal US exams to determine what the error in weight percentile would be.

Aims: Demonstrate that there is significant skew in the assessment of fetal weight percentiles towards the high and low ends of the distribution. This is a cause of false positive diagnoses of IUGR and macrosomia.

Methods and Materials: After IRB approval the radiology information system data base was searched for all obstetrical US reports obtained during the late second and third trimesters from 7/1/2014 until 7/1/2020. Demographic information as well as fetal weight and weight percentile information were obtained from these reports and graphed. The resulting data was then integrated by the method of rectangles to determine the number and percent of fetuses 1 and 2 standard deviations from the mean. A graph showing the results if the expected weight percentile distributions were truly Gaussian versus what we actually observed were constructed. This process was repeated by dividing the data by gestational age at the time of the exam, and by ethnicity.

Results: Demographic data:- Total:6259, White:3434, Black:403, Asian:91, Native Ameri-



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can:499,Hispanics:29, Not available:1803. Mean age: 31.68 years. Distributions of fetal weight were skewed significantly at the tail ends. The graphs of observed to expected weight percentiles for all the data, and by gestational age and ethnicity also add the error.

Conclusions: Fetal weight percentiles are significantly skewed at the tails and they should also be reported in a range, and the error should be documented so as to improve screening of such fetus. Mid third trimester ultrasound exams are the best time to evaluated fetal weight and weight percentile and perhaps these should not be reported earlier in gestation.

Clinical Relevance/Application: The recognition of the large error associated with the assignment of weight percentile is very important in those clinical situations where the absolute weight and Dopplers suggest a healthy baby but an erroneous weight percentile suggest IUGR or macrosomia. Knowledge of which can potentially save them from overutilization of resources, interventions and reduce maternal stress.

Biography

Dr. Garvit Khatri is an accomplished radiologist and an Assistant Professor at CU Denver, where he is dedicated to advancing the field of radiology through education, research, and clinical excellence. He serves as the Section Director of Quality and is the Associate Program Director, playing a crucial role in shaping the training and development of future radiologists.

In addition to his academic responsibilities, Dr. Khatri is a member of the ASER AI Expert Panel and serves as an editor for *Abdominal Radiology* and *WFUMB Open Access*, where he contributes his expertise to the advancement of radiological science and practice.

He completed his medical training at the University of Washington in Seattle and further honed his skills at Safdarjung Hospital in Delhi. An active researcher, Dr. Khatri has authored several articles and delivered presentations on various topics in radiology, showcasing his commitment to sharing knowledge and advancing the specialty. His work emphasizes the importance of quality and innovation in radiological practices.



Advanced Nursing Practice, Nursing Education And Leadership Conclave

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Truth, Meaning, and Attachment in Healing PTSD

Robert S. Brown^{1,2}

¹United States Army Reserve (Retired), Charlottesville, USA ²Former Clinical Professor, University of Virginia, USA

From 2005 to 2016, I was a PTSD Subject Matter Expert on a military post in Virginia. My patients were redeploying from combat in Iraq and Afghanistan. All suffered from combat-induced PTSD. Many also experienced major depression or prolonged grief.

These Soldiers were initially resistant to therapy owing to their traumatic regression to an anxious, avoidant, or disorganized attachment style. The use of attachment therapy was an essential first step in recovery by reestablishing **a trusting, supportive relationship.**

Using elements of Object Relations Therapy, the patients needed "object constancy," meaning no surprises. Slowly, their confidence returned in observing the expected. These outpatients were given my cell phone number, but I was rarely called. My demeanor, outer clothing, items on my desk, and the sanctity of their appointment, as far as possible, were unchanged.

I found no value in their repetitive retelling of their trauma. When the Soldier discovered the truth of his or her trauma, free of misunderstanding and irrational guilt, the trauma was healed.

They knew I cared for them by my consistent kindness, nonjudgment acceptance, and my memory of their innermost thoughts and feelings. Nine years after retiring, I receive text messages and phone calls from these courageous people, evidence of healthy bonds with people who had lost meaningful relationships



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Biography

Dr. Brown is an exceptional psychiatrist, mentor, and friend. His wit and wisdom are matched by his grace and compassion. For five decades, he was dedicated to his profession and his patience. Dr. Brown has been tirelessly working to improve the lives of others through healing of body, mind, and spirit, since he retired, by writing and giving digital presentations: meaningfulwordswork.com. Kurt Miceli, MD, MA, Chief Medical Officer, Elwyn.



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Bathing and Showering Challenges for Individuals Aging with Long-Term Mobility Disabilities: Insights and Innovations in Assistive Technology

Pallabi Bhowmick

University of Illinois Urbana-Champaign, USA

Self-care and bathing activities are among the most challenging, dangerous, and consequential activities for individuals aging with mobility disabilities, with most individuals unable to bathe or shower without either professional caregiver or family care partner assistance. Yet their technology needs remain largely unexplored. Researchers on the Rehabilitation Engineering Research Center on Technologies to Support Aging among People with Long-Term Disabilities (RERC TechSAge) conducted two user needs studies exploring challenges and strategies for everyday activities among individuals with long-term mobility impairments (lasting at least 10 years). We analysed data on bathing/showering challenges from a subsample of participants (n=28) from these two studies, aged 52-86 (M=64; SD=9.2), who were wheelchair users and were unable to stand due to lower body mobility impairments. Findings reveal several critical issues and adaptive strategies around bathing/showering. Firstly, 82% of the participants either stopped bathing (i.e., submerging in a tub) or could not bathe without assistance, relying instead on overhead shower systems and adaptations like roll-in, no-threshold showers, grab bars, and shower chairs/benches. Secondly, majority transitioned to handheld showerheads over fixed showerheads, and to using bathing wands/reacher sticks for greater flexibility in cleaning themselves. Lastly, several participants expressed concerns about the loss of upper body strength with age, making it difficult to use heavy showerheads or adjust water temperature with controls that are difficult to reach and press. These findings underscore the need for customizable, assistive showering devices for individuals who must shower in a seated position, a research area that has received limited attention. A promising solution could be the design and development of a lightweight robotic showerhead with accessible controls, which could significantly enhance independence and quality of life for these individuals.



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Biography

Dr. Pallabi Bhowmick is a Postdoctoral Researcher at the University of Illinois Urbana-Champaign. She earned her PhD in Health Informatics/HCI from Indiana University Bloomington, where her dissertation focused on aging research and the use of tangible IoT technologies to reduce social isolation among older adults in the United States. She holds an MS in Informatics from Technical University of Munich, Germany, and a B.Tech degree in Computer Science and Engineering from India. Before transitioning to academia, she gained industry experience as a Software Developer at Wipro and Intel. Currently, as a Postdoc, she is exploring Human-Robot Interaction, specifically how robots can support both professional and family caregivers in assisting older adults with cognitive and mobility impairments. Dr. Bhowmick is committed to enhancing accessibility and combating ageism in technology design, aiming to improve the quality of life for older adults. She is deeply invested and adept in translating academic research into practical, user-centered solutions.



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Risks, Signs, and Interventional Strategies for Depression of Chinese Cancer Patients in a Cultural Context

Amy Y. Zhang¹ and Lili Tang²

¹Case Western Reserve University, USA ²Peking University Cancer Hospital & Institute, China

Objective: We aimed to acquire Chinese cancer patients' perspectives of depressive experience to identify risks and symptomatic signs of cancer-induced depression in order to inform culturally appropriate interventional strategies in a Cultural context.

Methods: We used purposive sampling to enroll depressed and nondepressed Chinese cancer patients, phenomenology methods to conduct in-depth interview with each participant, and qualitative data analysis to identify thematic codes that were later converted quantitively and analyzed statistically.

Results: Thirty depressed and 21 nondepressed Chinese patients with breast, stomach, colorectal, and prostate cancers were enrolled. Compared to the nondepressed participants, the depressed participants more frequently reported financial (p = .009), family (p = .012), and physical stress (p = .05). Most study participants (60.8%) rejected using the word "depression." However, the depressed participants more frequently reported sleep disturbance (p = .001), rumination (p = .002), crying (p = .001), feeling guilty (p = .017), fear of losing family (p = .007), and suicidal ideation (p = .024, .009, respectively) and felt less optimistic about the future (p = .035).

Conclusion: The study findings revealed finance and family conflict to be major socioeconomic risks of depression. The findings alert Chinese health providers to attend nonverbal signs (e.g., crying), ruminative thought patterns, and sleep problems for detecting depression and providing timely patient referrals to supportive care. They also suggested interventional strategies to reduce risks and symptoms of depression in Chinese cancer patients.



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Biography

Dr. Amy Zhang is a U.S. Fulbright Scholar and a tenured associate professor at the Frances Payne Bolton School of Nursing, Case Western Reserve University in Cleveland, Ohio, U.S.A.

Dr. Zhang has been a principal investigator of research projects funded by the National Institutes of Health (NIH), American Cancer Society and other funding sources in the U.S. She has also served on the NIH and Fulbright grant review panels, institutional committees and national organizations.

Dr. Zhang will present her research findings on psychosocial and behavioral research of cancer patients.



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Artificial Intelligence in Early Development and Learning: Capability, Caution, and Framing the Way Forward

Gary J. Dickelman

EPSScentral LLC, USA

Educators and learning-design professionals increasingly ask how emerging AI tools affect children from birth to age 8. Early screen-time guidelines, rooted in health and safety, now collide with evidence that well-designed and facilitated AI fosters language development, curiosity, and personalized support. At the same time, new risks—bias, hallucination, interpretability gaps, and eventual AGI/ASI—challenge researchers, policymakers, and practitioners. This inquiry addresses questions in six categories:

- 1. Guidelines How have recommendations on AI use and screen time evolved in the past 18 months?
- 2. Cognitive impact What do recent studies reveal about AI's effects on early cognitive development and its impact in later life?
- 3. Neuroscience How does AI-mediated experience shape neural plasticity?
- 4. Policy What positions have global education ministries adopted on AI in early learning?
- 5. Practice Which frameworks guide responsible AI use by teachers and caregivers?
- 6. Modeling the child mind To what extent do modern neural nets reflect children's learning processes, and where do interpretability gaps pose risks?

The inquiry surveys current research, classroom/learning practices, and policy statements that illuminate these issues, then proposes a dynamic early-learning lifecycle that embeds AI as an adaptive, continually evaluated component. While primarily evidence-based, it offers informed conjectures to spark further investigation.



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Biography

Gary J. Dickelman is a thought leader, researcher, strategist, and solution provider for the knowledge ecosystem: technology-based learning, performance support, predictive analytics, knowledge management, and artificial intelligence. He has developed global knowledge solutions while directing cross-functional teams in the learning and knowledge spaces. Solutions include global eLearning, software simulations, predictive analytics, just-in-time reference, emergency management, business continuity, pandemic response, customer support, digital transformation, and AI integration. Dickelman has authored scores of peer-reviewed articles, contributed to industry books, publishes the p-literate.com blog, and has served as author/editor of industry journals. He has served as adjunct faculty for university graduate programs in the learning technologies and human performance engineering. Dickelman works across a plethora of industries, including nuclear power, career development, finance, insurance, publishing, travel, hospitality, education, sales/marketing, defence, security, and the performing arts.



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COVID-19 Vaccine Hesitancy among Marshallese in Northwest Arkansas (USA)

Pearl A. McElfish¹, Rachel S. Purvis¹, Ramey Moore¹, Martha O. Rojo², Sheldon Riklon¹, Eldon Alik³, Derek Alik¹ and Benetick Kabua Madison⁴

¹College of Medicine, University of Arkansas for Medical Sciences, USA ²College of Nursing, University of Arkansas for Medical Sciences, USA ³Republic of the Marshall Islands Consulate, USA ⁴Marshallese Educational Initiative, USA

Introduction: COVID-19 has disproportionately affected Pacific Islander communities, with disparities in the prevalence of infection, serious illness, and death compared to non-Hispanic whites in the US. Marshallese Pacific Islanders face significant COVID-19 disparities.

Methods: This exploratory study aimed to understand Marshallese community attitudes about the COVID-19 vaccine to identify and implement culturally relevant strategies to encourage vaccine uptake. Data were collected from 17 participants in three focus groups.

Results: Using content analysis, researchers identified two global themes: (1) barriers to vaccination and (2) facilitators of COVID-19 vaccine uptake. Within these themes, participants described fear, lack of knowledge about vaccines, negative perceptions of the COVID-19 vaccine, health concerns, and transportation as barriers to vaccination. Participants described several factors influencing vaccine behavior, including location of and personnel at vaccine clinics, vaccine experiences, the need for trusted information, positive perceptions, cultural leaders, and mandates.

Discussion: The qualitative study makes a significant contribution as the first to report community perceptions and experiences related to the COVID-19 vaccine in Marshallese participants' own words. Findings show that cultural influencers and brokers are crucial bridges for public health messaging related to COVID-19 vaccination targeted to this vulnerable and underserved population. Culturally appropriate and effective public health



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messaging can help achieve vaccine equity and improve COVID-19-related health disparities in the Marshallese community.

Biography

Dr. Pearl McElfish serves as the founding Director of the Institute for Community Health Innovation at the University of Arkansas for Medical Sciences. Dr. McElfish holds a PhD in public (health) policy, a master's degree in business administration, and a master's degree in community and economic development. She is a certified Project Management Professional and a Certified Community Developer.

Dr. McElfish is a national and international leader in rural health and health equity research and methodological research related to the best methods for conducting community-based participatory research and disseminating research results to participants and communities.

In addition to her research, Dr. McElfish has led large inter- and intra-institutional efforts to develop academic programs, graduate medical education, clinical programs, and population health efforts.

Dr. McElfish has been awarded more than \$180 million in federal, state, and private foundation grants, and she has published more than 270 peer-reviewed articles.



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Transfers of the Sternal Head of Pectoralis Major and Latissimus Dorsi to Treat Sprengel Syndrome

Ricardo Berriel Mendes, José Carlos Garcia Jr., Bassem Elhassan and Paulo Cavalcante Muzy

Institute NAEON, Brazil

This technical note introduces a novel surgical procedure for the treatment of Sprengel's Syndrome, a rare congenital condition characterized by an elevated, hypoplastic, and malrotated scapula. Traditional treatments have had limited success, prompting the development of this new approach. The technique, grounded in orthopedic principles, combines muscle and bone repositioning to improve range of motion, reduce pain, and achieve aesthetic normalization.

The surgery involves clavicle morcellation and a posterior longitudinal approach for muscle release and transfer. The patient is positioned laterally under general anesthesia, with evoked potential monitoring to prevent neurological complications. Clavicle morcellation is performed to facilitate scapula movement and prevent brachial plexus impingement. The procedure includes releasing fibrous bands and specific muscles around the scapula, with careful attention to avoid nerve damage.

The innovative aspect lies in the transfer of the sternal head of the pectoralis major and the latissimus dorsi to the inferior aspect of the scapula, aiming to restore functional scapula movement. A case report of a 4 year old patient demonstrates the procedure's efficacy, highlighting improvements in scapular elevation and deltoid strength. Cosmetic enhancements are also noted. This approach potentially offers significant advantages for patients with Sprengel's Syndrome.

Conclusion: The note concludes with a discussion on the rationale behind muscle transfers and their role in enhancing scapular movements, providing a promising outlook for this challenging congenital condition.



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Biography

Ricardo Berriel Mendes is a distinguished Brazilian orthopedic surgeon specializing in shoulder and elbow surgery as well as sports medicine. His academic and professional journey reflects a strong commitment to advancing orthopedic techniques and delivering exceptional patient care.

Dr. Mendes earned his Medical Degree from Estácio de Sá University, Rio de Janeiro, Brazil (2008–2014). He completed his Residency in Orthopedics and Traumatology at the Federal University of the State of Rio de Janeiro (2016–2019). During this period, he honed his expertise in musculoskeletal health and minimally invasive surgical techniques.

Dr. Mendes's professional affiliations reflect his dedication to continuous learning and collaboration in the field of orthopedics:

- In 2019, he became a member of the Arthroscopy Association of North America (AANA).
- In 2020, he joined the Brazilian Society of Orthopedics and Traumatology (SBOT) and the Brazilian Medical Association (AMB).
- In 2021, he became a member of the Brazilian Society of Shoulder and Elbow Surgery (SBCOC) and the Brazilian Society for Tissue Regeneration (SBRET).
- In 2022, he was admitted as a member of the International Society of Arthroscopy, Knee Surgery and Orthopaedic Sports Medicine (ISAKOS).

Dr. Mendes pursued a Subspecialty in Sports Medicine (2021–2022) with the NAEON Group in São Paulo, further refining his skills in treating sports injuries and complex shoulder and elbow conditions. His dedication to professional growth led him to pursue two prestigious international fellowships in 2023, one at Clinique Bizet, Paris, France, and another at Clinique de L'Union, Toulouse, France.

Currently, Dr. Mendes serves as the Director and Head of the Fellowship Program in Shoulder and Elbow Subspecialty at the NAEON Group in São Paulo, Brazil (since 2023). His leadership role involves training the next generation of shoulder and elbow specialists and contributing to advancements in the field through research and clinical excellence.



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Compassion as a Tool to Enhance Communication between Nurses and Children in the Oncology Pediatric Ward

Tania Villalobos Luján¹ and Michelle Wyndham-West²

¹University of Calgary, Canada ²OCAD, Canada

This research project (RP) centers care and builds on frameworks in human-computer interaction (HCI) in care through the development of a communication tool designed to foster compassion and emotional connection between pediatric oncology patients and the nurses that care for them. Using an experience-based co-design (EBCD) approach, this project emphasizes the importance of integrating care ethics into participatory design processes to create tools that address the unique emotional and practical needs of users. It explores the question: What value do the personal experiences of participants bring to the design of tools intended for their use?

The process began with interviews conducted with four pediatric oncology patients and nine nurses, aiming to identify and understand the emotional dynamics experienced during hospital procedures and understanding how emotions moved between them in particular moments. Insights from these interviews were used to develop emotional maps, which directly informed the design of a mobile application. This tool allows users to collaborate by recording personalized audio messages that capture feelings and agreements, offering emotional support during difficult and distressing procedures.

Participants tested a prototype of the tool in a series of workshops, providing feedback that guided its refinement into a final version. The findings showed that pediatric patients and nurses were receptive to using a tool to enhance their collaboration and interconnectedness. The EBCD methodology proved effective in capturing and addressing abstract emotional needs, while participatory co-creation ensured the tool was tailored to the specific needs of its users.



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By focusing on fostering relational accountability and integrating care ethics into design, this research builds on Interaction Design Practice as a form of caregiving. This project establishes a framework for designing caring relationships between tools that centers the emotions and experiences of both pediatric patients and the nurses that care for them.

Biography

Tania, originally from Mexico City, is a PhD student in the Department of Computational Media Design at the University of Calgary, where she is also part of the Interaction Lab. She holds a Master's degree in Inclusive Design from OCAD University. Supported by a scholarship in transdisciplinary studies, her research explores the intersection of decolonial gender theory, care, and its applications in data science and technology. Tania focuses on knowledge sharing through relational methods such as narratives, storytelling, and codesign practices in communal spaces, with a particular emphasis on centring the voices of racialized and marginalized communities.



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Unseen is to Unexist: The Crucial Importance of Young Women's Peacebuilding Approaches in Northern Ethiopia

Christina Beyene

Department of Peace and Conflict Studies, University of Manitoba, Canada

Peacebuilding is a complex endeavour that requires an all-hands-on deck effort to deliver multi-faceted approaches which engage all members of society including women and in particular, young women who have been traditionally excluded. The argument of this paper is that despite significant barriers to participation in formal peacebuilding arenas, through their resiliency, young women often find unique ways to overcome these barriers and influence change directly or indirectly. This study focuses on Northern Ethiopia. Currently, African perspectives are underrepresented in the PACS literature, creating persistent gaps in our knowledge regarding peacebuilding approaches in this region. Further gaps exist regarding the exploration of Indigenous peacebuilding practices in Eastern and Northern African societies.

Biography

Christina Beyene is a doctoral Candidate in the Peace and Conflict Studies (PACS) program at the University of Manitoba. She earned a bachelor's degree in political studies from the University of Manitoba and a master's degree in public administration from the University of Manitoba and the University of Winnipeg's joint program. She has worked in the public policy, post-secondary and settlement sector advocating for equitable educational policy. She is also a gender advocate for East African women and youth.



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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 ²Department of Psychiatry, Federal University of Rio Grande do Sul, Brazil ³Health Research Institute, University of Canberra, Australia

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.

SPEAKER TALKS

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VIRTUAL EVENT 6th Asia-Pacific ADVANCED NURSING PRACTICE NURSING EDUCATION AND EADERSHIP CONCLAVE

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Listening to the Voices of Cares: A Cultural Perspective on the Lived Experience

Gihane Endrawes

School of Nursing and Midwifery, Western Sydney University, Australia

Globally, it is estimated that one in four families will have a relative with mental illness at some point in their lives. The deinstitutionalisation movement, which aimed to transition patients from hospitals to community integration, has resulted in many families becoming primary caregivers. The burden on these families is well-documented in the literature, with research indicating that carers are at risk of developing mental health issues due to the stressors of their caregiving role. This paper presents findings from a qualitative study exploring the lived experiences of immigrant families caring for a person with mental illness in Australia. It examines the social, financial, physical, emotional, and psychological impacts on these families. Issues such as stigma, shame, and blaming the carer are also discussed. The paper aims to raise awareness among mental health professionals about the needs of carers, helping them to cope more effectively with caregiving adequate and appropriate information about mental illness, practical advice on managing the person with mental illness, and information about available support services. The paper also discusses implications for practice, research, and education.

Biography

Gihane worked as lecturer with more than 20 years' experience in teaching, coordinating under-graduate and post-graduate subjects, experience in HDR supervision, leading research teams and obtaining research grants, and is collaborating with industry, national and international scholars on a number of joint projects. Her research interests are in mental health, CALD issues, quality of life and nursing education; Her publications reflect her research interests.



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Primary Cutaneous Melanoma Management in 2024

Alexander Nirenberg¹, Anthony Joseph Dixon^{1,2}, Michael Sladden³, Christos C. Zouboulis⁴, Catalin M. Popescu⁵, Howard K. Steinman⁶, Caterina Longo^{7,8}, Zoe Lee Dixon^{1,9} and Joseph Meiron Thomas¹⁰

¹Department of Research, Australasian College of Cutaneous Oncology, Australia ²Research, American Osteopathic College of Dermatology, USA ³Department of Dermatology, University of Tasmania, Australia ⁴Departments of Dermatology, Venereology, Allergology and Immunology, Staedtisches Klinikum Dessau, Brandenburg Medical School Theodor Fontane and Faculty of Health Sciences Brandenburg, Germany ⁵Department of Dermatology, Carol Davila University of Medicine and Pharmacy, Romania ⁶Department of Surgery, Campbell University, USA ⁷Department of Dermatology, University of Modena and Reggio Emilia, Italy ⁸Department of Dermatology, Centro Oncologico ad Alta Tecnologia Diagnostica, Azienda Unità Sanitaria Locale—IRCCS di Reggio Emilia, Italy ⁹Better Rehab-Occupational Therapy, Australia ¹⁰Department of Surgery, Formerly of Royal Marsden Hospital, UK

We review new research since 2018 into melanoma diagnosis, prognostic indicators and management, including our own research, with the aim updating protocols for optimal management of melanoma.

Current guidelines into management of melanoma need to be updated. These include reversing the trend towards shave biopsies for diagnosis, complete narrow excision being optimal for diagnosis and determining pathological parameters. We have introduced the BAUSSS (Breslow thickness, patient Age, presence of Ulceration, melanoma Subtype, patient Sex and melanoma Site) algorithm to provide a more accurate method of determining mortality risk than older currently employed approaches which include sentinel lymph node biopsy. In primary melanomas, wide local excision is the only surgery that can be re-



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garded as therapeutic and required, although for melanoma in situ Mohs' margin control surgery may be considered. The benefit of sentinel lymph node biopsy is a particularly poor prognostic indicator for patients under 40 and over 60 years of age. Choice of patients for adjuvant therapy should take these findings into account. These findings also indicate the benefit of making changes in choosing which patients will most likely benefit from drug therapy. Patients who have had one melanoma are at increased risk of another melanoma. Follow-up of patients includes regular skin checks with dermoscopy and photography, sun exposure advice, and possibly giving vitamin D supplementary therapy.

Biography

Alexander Nirenberg is a dermatopathologist with extensive teaching and research experience including melanoma research as part of the Global Melanoma Initiative, an international group of experts which includes dermatologists, surgeons, pathologists, medical researchers, and a general practitioner. He is on the board of the Australasian College of Cutaneous Oncology which is involved in teaching and research. He is the Head of Anatomical Pathology at Dorevitch Pathology in Melbourne, Australia. He is the current President of the Australasian Dermatopathology Society and a member of the Executive Committee of the International Society of Dermatopathology. He has been extensively published and spoken at conferences.



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The Impact of VR-Based Safety Experience Education on Safety Awareness, Safety Behavior and Accident Prevention: The Empirical Study of VR Application in Industrial Safety Education in Korea

Gil-Sang Jang¹, Ok-Seol Kim² and Seok-In Mun³

¹Professor of College of Business Administration, University of Ulsan, Republic of Korea ²PhD candidate of College of Business Administration, University of Ulsan, Republic of Korea ³Head of Educational Contents Department, KOSHA, Republic of Korea

This paper examines the impact of VR (Virtual Reality)-based safety education on safety awareness, safety behavior, and accident prevention. It also investigates the mediating effects of safety awareness and safety behavior in the relationship between VR-based safety education and accident prevention.

To achieve the research objectives, responses from 957 safety managers and workers who participated in the 'Mobile VR Safety Experience Support' program, promoted by the Korea Occupational Safety and Health Agency (KOSHA), were analyzed using SPSS 24.0 and AMOS 20.0.

The analysis results showed that VR-based safety education has a significant positive (+) impact on safety awareness, safety behavior, and accident prevention. Additionally, safety awareness has a significant positive (+) impact on safety behavior and accident prevention, and safety behavior has a significant positive (+) impact on accident prevention (see Figure 1). Furthermore, safety awareness and safety behavior were found to mediate the relationship between safety education and accident prevention. Additionally, it was confirmed that a sequential multiple mediation effect exists in which VR-based safety education influences safety awareness, which in turn affects safety behavior, ultimately leading to accident prevention (see Table 1).

The findings suggest that organizations and safety policymakers should prioritize immersive VR-based safety experience education as a core component of safety programs. Emphasizing both cognitive (awareness) and behavioral (action) aspects in safety education



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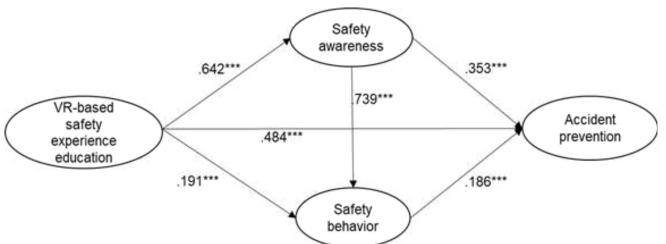


Figure 1. Structural Equation Model

Table 1.	Results	ofme	ediation	effect	analysis

	Estimate	S.E.	р	Result	
Direct Effects					
H3	VR-based safety education → Accident prevention	0.484	0.064	0.002	Accept
Indirect Effects					
H7	VR-based safety education → Safety awareness → Accident prevention	0.227	0.058	0.004	Accept
H8	VR-based safety education →Safety behavior → Accident prevention	0.036	0.017	0.002	Accept
H9	H9 VR-based safety education → Safety awareness → Safety behavior → Accident prevention		0.033	0.001	Accept
	Sum	0.351	0.046	0.001	
Total Effects		0.835	0.035	0.002	

Biography

Gil-sang Jang received his B.S. degree in Industrial Engineering from the University of Ulsan in 1986, his M.S. degree in Industrial Engineering from KAIST in 1988, and his Ph.D. in Management Information Systems from KAIST in 1997, South Korea. He is currently a professor in the Big Data Management track of the School of Business and Economics Convergence at the University of Ulsan. His main research interests include big data analytics and AI applications in the field of Management Information Systems, as well as AR/VR technologies. He also actively supervises numerous master's and doctoral students in the field of occupational safety and health and has published extensively in related areas.



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Psychosocial Effect of Appearance Changes Associated With Cancer: A Scoping Review

Madoka Wakabayashi¹, Koji Tanaka² and Kyoko Nagata²

¹Graduate School of Medical Sciences, Division of Health Sciences, Kanazawa University, Japan ²Faculty of Health Sciences, Institute of Medical, Pharmaceutical and Health Sciences, Kanazawa University, Japan

Aims: To synthesize the psychosocial effects of appearance changes and identify knowledge gaps.

Background: Cancer, along with its treatment, often leads to changes in appearance. Understanding the psychosocial effects of these changes is crucial for improving the quality of life of cancer survivors.

Design: Scoping review of the peer-reviewed literature.

Data Sources: Systematic search of PubMed, CINAHL, and PsycARTICLES databases from 2014 to April 2024.

Review Methods: Following the framework proposed by Arksey and O'Malley and using the PRISMA Extension for Scoping Reviews.

Results: Twenty-five studies addressing appearance changes related to specific cancer types, survivor demographics, treatment stages, or providing a comprehensive overview irrespective of cancer type or attributes were reviewed. Key findings were psychosocial effects based on survivors' age and cancer type, universal psychosocial effects transcending cancer types and treatment methods, the need for appearance-related care, and the gap between survivors' needs and the care provided.

Conclusion: To bridge the gap between the needs of cancer survivors and appearance care provided by healthcare professionals, further appearance-related research is essential. Additionally, research should focus on promoting the socialization of appearance care by



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fostering collaboration not only within the medical field but also with domains such as the beauty industry.

Biography

Madoka Wakabayashi is a first-year Ph.D. student in the Graduate School of Medical Sciences, Division of Health Sciences, at Kanazawa University. She is a licensed registered nurse and public health nurse, and she received her M.A. in Health Science from the same university in 2024. Her research interests focus on the lived experiences of cancer survivors. She has also been actively involved in breast cancer survivor peer-support group meetings for over a year.



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The Effect of Developmental Care on the Length of Hospital Stay and Family Centered Care Practice for Very Low Birth Weight Infants in Neonatal Intensive Care Units: A Cluster Randomized Controlled Trial



Xiaojing Hu^{1,2,15}, Tianchan Lyu^{1,2}, Ruming Ye¹, Liling Li², Lili Zhang³, Juan Xiao³, Yuelan Ma⁴, Fang Li⁵, Hui Rong⁵, Dan Liu⁶, Hua Wang⁶, Yan Wang⁷, Weiwei Gu⁸, Yan Xuan⁹, Xiaochun Chen¹⁰, Qiaoling Fan¹¹, Yunfei Tang¹², Xianghui Huang¹, An Qin¹³, Yili Zhang¹⁴ and Yalan Dou²

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Objective: To evaluate the effect of implementing developmental care on the length of hospital stay, the improvement of care practice in neonatal intensive care units, as well as the short-term outcome of very low birth weight infants.

Design: Cluster-randomized controlled trial.



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Setting(s) and participants: From March 1, 2021 to March 1, 2022, 1400 very low birth weight infants were recruited from 14 tertiary neonatal intensive care units in China.

Methods: We assigned 14 neonatal intensive care units to either developmental care or standard care. The length of hospital stay of the infants was the primary outcome analyzed at the individual level. Secondary outcomes were family centered care practice including parental involvement, the skin-to-skin care, exclusive breast milk, oral immune therapy and breastfeeding. The environmental management (noise and light) and the short-term outcomes were also evaluated.

Results: The length of hospital stay for the developmental care group was 65 % as long as that for the control group (HR: 0.65, 95 % CI, 0.451-0936, p = 0.021). After controlling the covariables, the adjusted HR = 0.755 (95 % CI, 0.515 to 1.107, p = 0.150). When compared to the control group, the developmental care group had greater access to SSC, with 22 infants (3.8 %) in the developmental care group compared to 13 infants (1.7 %) in the standard care group (p = 0.013). A greater proportion of infants in the developmental care group were fed at the breast, than those in the standard care group (136 [23.6 %] vs 9 [1.1 %]; p = 0.029). Compared to the control group, exclusively breast milk was significantly more favorable in the developmental care group (435 [75.6 %] vs 114 [15.0 %]; p = 0.001). The difference remained significant even after adjusting for covariates. However, the rate of oral immune therapy and parental involvement was similar in the two groups. The average noise and light levels in the developmental care group were significantly lower than those in the standard care group. After adjusting for confounders, the difference remained significant. There were no significant differences among groups in the mortality and major morbidity.

Items	NIDCAP group $(n = 575)$	$\begin{array}{l} \text{Control group} \\ (n=758) \end{array}$	OR (95 % CI); p value ^a	Mean difference (95 % Cl); p value	Adjusted OR (95 % CI); p value ^b	Adjusted mean difference (95 % CI); p value
Family centere	d care practices					
SSC	22 (3.8 %)	13 (1.7%)	-3.302(-5.865)	-0.738); 0.012	-3.819(-6.830, -0.808); 0.013	
Parental involvement	260 (45.2 %)	71 (12.3 %)	2.177 (0.034, 4.3	389); 0.054	2.342 (0.054, 4.737); 0.055	
Exclusive breast milk	435 (75.6%)	114 (15.0 %)	6.959 (2.995, 10.922); 0.001		8.436 (3.555, 13.318); 0.001	
OIT	309 (53.7 %)	94 (12.4%)	2.428 (0.433, 5.290); 0.096		2.782 (0.375, 5.938); 0.084	
Breastfeeding	136 (23.6 %)	9 (1.18 %)	-5.103 (-9.148,	-1.057); 0.013		
Environmental	management pro	actices				
Noise, db	52.37 ± 8.39	58.35 ± 21.42	-6.667(-11.339, -1.996); 0.005		6.715 (-11.373, -2.055); 0.005	
Light, lux	$\textbf{6.74} \pm \textbf{11.13}$	70.40 ± 85.18	-57.594 (-101.170, -14.018); 0.010		-57.502 (-101.090, -13.914); 0.010	

Assessment of family centered care and environmental practices with univariate and multivariable analyses.

Data are n (%), median (IQR), mean (SD), or n/N (%). DC = developmental care. OR = odds ratio.

^a Based on generalized linear mixed model to account for the clustering.

^b Adjusted for gestational age, birthweight, 5 min Apgar score, singleton status, surfactant use, antenatal steroid use, and cesarean delivery.

Conclusions: Developmental care might have developed an accumulated effect over time on the length of hospital stay among very low birth weight infants. The implementation of developmental care can greatly improve family centered care practices and the neonatal



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intensive care unit environment.

Biography

Xiaojing Hu

Xiaojing Hu holds a Doctor of Medicine degree from Fudan University. She is a Doctoral Advisor. She works in Children's Hospital of Fudan University as the Vice Director of Nursing Department. Her research focuses on maternal and child nursing, as well as critical and emergency nursing. She serves as the Director of the Neonatal Nursing Branch of the China Medicine Education Association, a member of the Expert Database of the Pediatric Committee of the Chinese Nursing Association, a Council Member of the Shanghai Nursing Association, and a member of its Pediatric Committee. Additionally, she is an Academic Editorial Board Member of *Journal of Nursing Management*.

Tianchan Lyu

Tianchan Lyu is a neonatal nursing specialist and emerging leader in pediatric healthcare. Currently serving as Secretary of the Neonatal Group within the National Children's Medical Center Pediatric Nursing Alliance, they hold pivotal roles in advancing neonatal care standards, including as Vice Chair of the Neonatal Nursing Group under the China Maternal and Child Health Association and member of its Smart Care Branch. Her expertise focuses on preterm infant oral feeding and the specialized management of extremely low birth weight and very low birth weight infants, ensuring optimal outcomes for this vulnerable population.



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Towards Sustainable Primary Healthcare in Hong Kong: Applying Social Ecological Model with ESG and SDG Insights

Mei Mei LAU¹, Ben Yuk Fai FONG¹ and Tommy K. C. NG²

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As Hong Kong implements its Primary Healthcare Blueprint and district health centre (DHC) model, community engagement and empowerment remain critical yet underdeveloped components in achieving sustainable health outcomes. This study adopts the Social Ecological Model (SEM) to examine the multilayered factors influencing community engagement and empowerment in Hong Kong's primary healthcare environment. SEM enables a comprehensive analysis of how individual behaviors, interpersonal relationships, community structures, organizational practices, and policy environments interact to shape healthcare participation. This study extends previous work on health-social care integration by exploring how social dimensions of Environmental, Social, and Governance (ESG) frameworks and the United Nations Sustainable Development Goals (SDGs), particularly SDG 3 (Good Health and Well-being), SDG 10 (Reduced Inequalities), and SDG 17 (Partnerships for the Goals) in the community-based primary healthcare strategies. Based on recent policy development and global health models as a foundation, the paper explores how the "social" part of ESG can connect with local community health systems. It emphasizes the importance of including every relevant stakeholder in health planning, designing services with community input, and making sure that outreach efforts are fair, especially for older adults and underserved groups. The SEM framework facilitates a structured examination of both barriers and motivators of community participation, and highlights the opportunities for connecting local actions with global sustainability agendas. By rethinking how communities are involved, and linking these efforts to ESG and SDG goals, the study suggests ways to make healthcare systems stronger and more effective. It finally provides practical recommendations for using ESG-based measures and SDG targets to improve primary healthcare services in Hong Kong. To conclude, this work encourages a shift in healthcare



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systems from just focusing on medical services to creating models of care that are inclusive, community-focused, and accountable.

Biography

Dr. Mei Mei Lau is a Lecturer at the School of Professional Education and Executive Development (SPEED), The Hong Kong Polytechnic University. She holds a PhD and specializes in marketing, management, education, and cross-cultural studies. Dr. Lau is passionate about equipping students with practical skills and fostering lifelong learning through a student-centered approach to teaching. Her teaching areas include marketing principles, organizational behavior, and general education.

Dr. Lau's research focuses on innovative technologies, marketing strategies, higher education, and sustainable practices in business and education. She actively contributes to curriculum development and collaborates with industry professionals to ensure her courses align with real-world demands. With a strong academic background, she has authored over 40 peer-reviewed articles, contributing significantly to her fields of specialization.



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Heart Rate Variability Analysis as a Promising Tool for Anticipating the Effects of Lifestyle Interventions in Health and Disease

Anjana Dwivedi

Birla Institute of Technology, India

Background: Heart Rate Variability (HRV) is a crucial indicator of autonomic nervous system function and cardiovascular health. Recent interest has emerged in the scientific investigation of the impact of yoga practices on HRV and blood pressure. Hridaya Mudra, a specific hand gesture (yoga mudra), has been posited to influence these health parameters. This particular study aims to evaluate both the short- and long-term effects of Hridaya Mudra on HRV indices and blood pressure among healthy young college students. Other studies investigating the effect of other lifestyle interventions like grounding and Power mudra had been found significantly (p< 0.05) impacting the physiological and psychological well being

Methods: In this randomized controlled trial, 60 healthy college students (aged 18-25) were assigned to either the Hridaya Mudra group (n=30) or the control group (n=30). The intervention group performed Hridaya Mudra on an average 5 days in a week for 25-30 minutes over 8 weeks. HRV and blood pressure were measured for assessment of baseline, acute effect after performing mudra for 25-30 minutes and after 8 weeks to see the long term effect. HRV indices including the standard deviation of NN intervals (SDNN) and the root mean square of successive differences (RMSSD) were assessed using Kubios Premium ver 2.0 software from electrocardiogram recordings done on Biopac MP45. Blood pressure was recorded using a digital blood pressure machine.

Results: Post intervention, the Hridaya Mudra group showed significant increases in all parameters compared to the control groups, indicating improved HRV. Systolic and diastolic blood pressure measurements were also significantly closer to the ideal value (p<0.05). Mental clarity, focus, attention, sense of coherence and cardiac coherence have significantly increased on practice of power mudra and grounding has significantly improved grip



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strength and fatigue time and also reduced anxiety.

Table 1: Immediate (short-term) effect of intervention on systolic (SBP) and diastolic (DBP)
 blood pressures

	Systolic blood pressure	Diastolic blood pressure	
Pre Mudra	128.38	80.23	
	± 13.82	± 12.37	
	120.47	75.79	
Post Mudra (short-term)	± 10.70	± 8.19	

a)

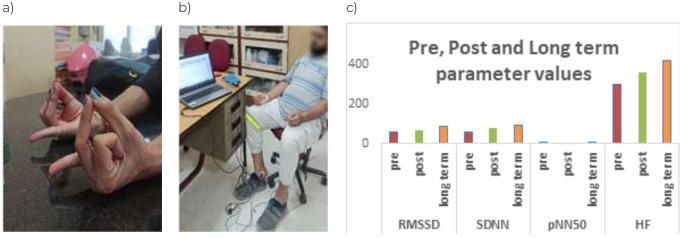


Figure 1: a) Hand gesture representing Hriday mudra (index finger at the base of thumb. tips of middle and ring fingers touching the tip of thumb and little finger straight outward; b) ECG recording in Lead II configuration, c) Pre, Post (short-term) and Long term RMSSD, SDNN, pNN50 and HF power values in experimental group

Conclusion: Hridaya Mudra demonstrates both short- and long-term impacts on HRV and blood pressure among healthy young college students. The practice significantly improves HRV indices and helps in maintaining optimum blood pressure for an individual. These findings suggest that incorporating Hridaya Mudra into daily routines could be a valuable intervention for enhancing autonomic regulation and cardiovascular health. Further research is warranted to explore the underlying mechanisms and long-term impacts of this practice on a larger group of participants especially those with cardiovascular ailments.

Biography

Dr. Anjana Dwivedi is an Assistant Professor in the Department of Bioengineering and Biotechnology, Birla Institute of Technology, Mesra, Ranchi, India and a life member of Biomedical Engineering Society of India, Indian Society for Technical Education, International Society for Computational Biology and Association of Microbiologists of India. Her research interests include systems biology, biomedical signals, and lifestyle medicine.



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Preparedness of Semi-Urban Healthcare Systems, Outpatient Perspective

Sandesh Akre¹ and Divya Patil²

¹Research Scholar, IIHMR University, India ²MET Institute of Management, India

Outpatient care serves as the first point of contact for a majority of healthcare seekers, particularly in diverse and semi-urban districts like Palghar, India. While organizational preparedness has been widely studied, the patient's perspective remains underexplored. This study aims to evaluate the readiness of outpatient healthcare services in Palghar District from a patient-centric lens. It assesses how well current systems meet patient expectations in terms of accessibility, quality, efficiency and overall satisfaction.

A mixed-method approach was employed, combining quantitative surveys with 150+ outpatients and qualitative interviews with 30+ patients across 10+ healthcare facilities. Data were collected on perceived wait times, availability of services, quality of interactions with healthcare providers, infrastructure adequacy and trust in local healthcare systems. A readiness index was developed based on patient feedback, with scores aggregated across five dimensions: service accessibility, communication, infrastructure, responsiveness, and perceived outcomes.

Findings reveal significant gaps in patient-perceived readiness, particularly in the public sector, where infrastructure and communication gaps often lead to referrals to urban centers like Mumbai. Despite infrastructural development, over 60% of patients expressed a preference for external facilities for specialized or dependable care. The study concludes that enhancing patient-centric readiness requires more than infrastructure; it demands empathetic communication, streamlined patient flow and locally available diagnostic and pharmacy services. Recommendations include integrating telemedicine for follow-ups, community feedback mechanisms and targeted investments in outpatient diagnostics. This patient-centered approach is crucial for strengthening trust and reducing urban healthcare dependency, ultimately guiding inclusive healthcare reforms in semi-urban India.



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Facility ID	Service Accessibility	Communica- tion Quality	Infrastruc- ture Adequa- cy	Responsive- ness	Perceived Outcomes	Average Readiness Score
PHC-01	65	50	55	58	60	57.6
PHC-02	60	52	50	55	58	55
CHC-01	72	60	70	68	74	68.8
CHC-02	75	62	72	70	77	71.2
Private-01	85	80	90	82	88	85
Private-02	88	78	85	84	90	85
District Hospital	70	65	75	66	73	69.8
Clinic-01	55	45	40	50	52	48.4
Clinic-02	58	48	42	52	54	50.8
Mobile Unit	63	50	50	60	65	57.6

Table 1: Readiness Score across surveyed facility

Palghar District, located in western Maharashtra, offers a distinctive lens into India's B-type suburban healthcare landscape. Despite its proximity to Mumbai, Palghar embodies the challenges of semi-urban and rural coexistence—marked by scattered settlements, socio-economic diversity, and mixed access to public infrastructure. With a population exceeding 2.9 million, the district illustrates India's broader struggle to deliver equitable outpatient care in transitional zones between metropolitan hubs and rural hinterlands. Palghar's healthcare ecosystem reflects both promise and pressure: dependable facilities exist, but gaps in service delivery, diagnostics, and supply chains remain prevalent. This research uses Palghar as a representative microcosm to explore outpatient care realities from a patient's perspective. The district's juxtaposition of access and insufficiency, dependence and autonomy, makes it an ideal setting to study the preparedness and patient-centric responsiveness of outpatient services. Insights from Palghar offer scalable lessons for similar suburban districts across India, where healthcare infrastructure often lags behind population needs.

Biography

Prof. Sandesh Akre is Assistant Professor at MET Institute of Management and a Research Scholar at IIHMR University, Jaipur, India. With qualifications including MMS, BE, UGC NET, SET, and CCNA, he specializes in healthcare analytics, data science, and GIS-based resource allocation for healthcare, supply chain, and rural development. His expertise spans Python, R, Tableau, and Excel for policy and social value creation. He holds two copyrights and one patent in Operations, IT Security and Healthcare. His research Papers are published in Q1, Q2, Q4 and IEE Journals.



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Globin Chain Analysis Using Direct Injection Mass Spectrometry Guides Pathologists to Suggest Appropriate Molecular Testing

Deepalakshmi PD and Sujay Ramaprasad

Neuberg Anand Academy of Laboratory Medicine Pvt Ltd, India

Objectives: To screen and confirm the clinically significant variants HbS, HbC, HbE, HbD-Punjab, and HbO-Arab in adults and newborns. To provide mass information about the rare α and β thal variants that guides pathologists in the diagnosis of hemoglobinopathies.

Scope: The study focuses on the methodology for detecting Hemoglobin variants that are common and rarely observed in the Indian population.

Methods: Anonymised left-over samples were utilised for the study after obtaining approval from the Institutional Human Ethics Committee. The sample types are EDTA whole blood and dry blood spot (DBS) cards. For the clinically significant variants, the proteins extracted from samples (n=65) were digested with trypsin. The tryptic peptides containing the mutation were subsequently fragmented in TQMS to get sequence information on the variants. Two qualitative methods - a screening method (multiple reaction monitoring) which monitors two diagnostic ions from each peptide and a confirmatory method (pseudo parallel reaction monitoring) which monitors all the amino acids of a peptide, were developed to identify Hb variants. Patent published for confirmation method (202141053167, PCT/IB2022/061103). The intact mass of Hb rare variants was measured using direct injection MS followed by deconvolution of the mass spectral data. The methods were validated by comparing with capillary electrophoresis.

Results: The MS method has a sensitivity and specificity of 100% for detecting clinically significant variants compared with capillary electrophoresis. Rare variants like HbJ Cambridge/Rambam, HbJ Bangkok, Hb Hofu, Hb Koln, Hb Alperton, were confirmed using molecular sequencing. a variants HbJ Paris I, HbJ Meerut, HbQ India were identified based on geographical location and other laboratory findings.



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Conclusion: The utility of TQMS has been demonstrated in the screening and confirmation of clinically significant Hb variants. The globin chain analysis method has been translated to clinical laboratories for detecting common and rare variants in adults and newborns.

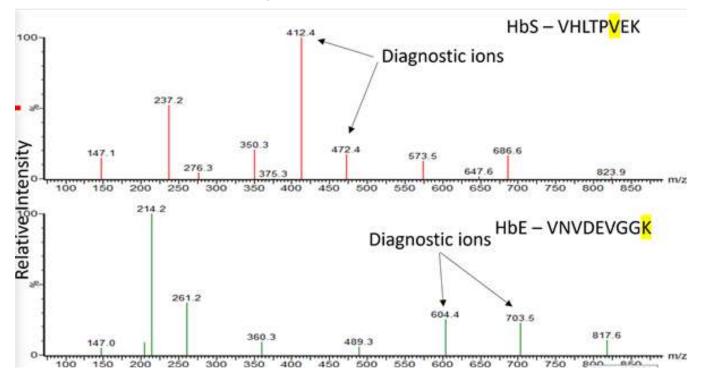


Figure 1: Confirmation of HbS and HbE using ESI TQMS. The mutated amino acids in the peptide sequence are highlighted. For screening the variants, only the diagnostic ions are monitored.

Case no.	Mutation	Mass difference (Da)	Variant
1	α120AlaGlu	α+58	HbJ Meerut
2	α12AlaAsp	α+44	HbJ Paris I
3	α64 AspHis	α+22	HbQ India
4	β69GlyAsp	β+58	Hb J Cambridge
5	β56GlyAsp	β+58	HbJ Bangkok
6	β126ValGlu	β+30	Hb Hofu
7	β98ValMet	β+32	Hb Köln
8	β135AlaVal	β+28	Hb Alperton

Table 1: Rare variants identified using a combined approach of TQMS, Capillary electrophoresis

Biography



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Dr. Deepalakshmi PD is a distinguished mass spectrometrist specializing in developing liquid chromatography mass spectrometry (LCMS) based diagnostic methods for patient care. She earned her Ph.D. in Biochemistry from the University of Madras in 1995 and has conducted research at esteemed institutions, including the Indian Institute of Science, National Centre for Biological Sciences in Bengaluru, India, Ohio State University in Columbus, US and Oxford University, Oxford, UK.

Currently, Dr. Deepalakshmi leads the Research and Development division at the Neuberg Anand Academy of Laboratory Medicine (NAALM), Bengaluru. Her work focuses on understanding hemoglobinopathies, multiple myeloma, amyloidosis with the aim of developing cost-effective LCMS diagnostic tools.

Dr. Deepalakshmi has made significant contributions to scientific literature by publishing 30 peer-reviewed research articles in national and international journals. She has authored a book chapter on Advances in proteomics. She has published two patents on novel mass spec-based methods for the diagnosis of hemoglobinopathies.



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The Effect of Drama Therapy on Depressive Symptoms and Quality of Life among Older Adults in Residential Care Facilities

Samer H. Sharkiya

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Background: Drama therapy is an effective therapeutic modality for managing psychological health and quality of life. There are limited studies examining the effect of drama therapy on depressive symptoms and quality of life among older adults globally and in Israel. Therefore, this study purposed to evaluate the effect of drama therapy on depressive symptoms and quality in residential care facilities in Israel.

Methods: A pre–post-test equivalent group design was utilized and 160 older adults were selected using a simple random method from the residential care facilities in Israel, where they were distributed into a control group (n=80) and an experimental group (n=80). The experimental group received eight sessions of drama therapy and the control group received usual care. A self-reporting questionnaire included the Geriatric Depression Scale and the WHOQOL-OLD-BREF.

Results: The findings revealed that all participants in both groups had mild depressive symptoms (control M= 6.84, SD=1.55; experimental M= 7.23, SD=1.41) and poor quality of life (control M= 10.55, SD= 0.93; experimental M= 10.29, SD=0.77) before intervention and there were no differences between two groups. There were improvements in depressive symptoms (control [M= 6.78, SD=1.46]; experimental [M=5.46, SD= 1.58]) and quality of life (control [M= 10.63, SD= 0.94]; experimental [M=12.64, SD= 0.89]) after intervention for both groups. Also. significant differences were found between the two groups after intervention in depressive symptoms and quality of life (p < .001), indicating that the experimental group had higher improvements in the aforementioned variables compared to control group.

Conclusions: Overall, drama therapy is an effective method for minimizing depressive symptoms and enhancing quality of life among older adults in residential care facilities. This therapy could be adjunct to usual care to minimize the levels of depressive symptoms



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and improve quality of life among older adults.

Biography

Dr. Samer Sharkia. He is 39 years old, he holds a Ph.D. in Nursing, and has over 15 years of extensive experience in geriatrics and healthcare management. He has been married to Fidaa, a senior pharmacist, and together they have two wonderful children, Karim (11) and Jude (7). Throughout his career, he has completed numerous advanced training and enrichment courses to continuously expand my clinical knowledge and professional expertise.

His vision: He firmly believes in the importance of integrating practice, research, and education, and in their responsibility as leaders to prepare the next generation of healthcare professionals to meet the challenges of tomorrow.

- Director of the Complex Nursing Department at Dorot Geriatric Hospital, Netanya, Israel.
- Lecturer at the Academic College of Israel, Ramat Gan, Department of Nursing, and adjunct lecturer at various higher education institutions across Israel.
- Founder and owner of Healthy Science, a project and business providing expert lectures and training on geriatrics and leadership for staff in geriatric hospitals.
- Certified graduate of the Board of Directors Course at the National Center for the Training of Directors.
- · Gerontologist and active member of the Israeli Gerontological Society.
- Graduate of NETA, an advanced senior leadership program in Israel.
- Researcher in the fields of gerontology and innovation, with a particular focus on improving the quality of care for geriatric patients.
- Author of over 20 publications in esteemed international peer-reviewed journals.



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Worm Ball Induced Acute Abdomen in a 2-Year-Old -A Case Report

Meghna Kinjalk and Partap Yadav

Lady Hardinge Medical College, India

One of the reasons for acute abdomen in tropical country is worm infestation, causing obstruction, perforation or intussusception.

In tropical countries especially with unhygienic living conditions Ascaris lumbricoides is the most common parasite.

Case - We report a case of worm infestation by Ascaris lumbricoides in the entire length of small intestine in a 2-year-old boy, who underwent exploratory laparotomy and enterotomy for removal of worm masses.

Clinical discussion – In developing countries roundworm infestation is very common. Children may present with acute abdomen demanding urgent exploration and removal of worms.

Conclusion: Worm infestation is common in tropical countries, especially developing country like India. Radiological imaging may aid in the diagnosis, but the diagnosis of worm masses has always been an intraoperative surprise.





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Biography

Dr. Meghna Kinjalk is a distinguished Pediatric Surgeon with an M.Ch. in Pediatric Surgery from the prestigious Maulana Azad Medical College, New Delhi. She currently serves as an Assistant Professor at Lady Hardinge Medical College, New Delhi, India, where she is actively involved in clinical work, academic teaching, and research.

Dr. Kinjalk has made significant contributions to pediatric surgical literature, with 24 research papers published in indexed journals and authorship of chapters in two medical textbooks. She has also delivered 25 Continuing Medical Education (CME) presentations, reflecting her commitment to knowledge dissemination and professional development.

Her dedication to research was recognized with the Third Prize for Best Research Paper awarded by the Indian Association of Pediatric Surgeons (IAPS) Research Unit. Through her academic and clinical endeavors, Dr. Meghna Kinjalk continues to advance the field of pediatric surgery in India.



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Ultrasound Role in Diagnosis and Prediction of Surgery in Neonates with Necrotizing Enterocolitis

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Objective: Abdominal ultrasonography (AUS) assessment of the neonatal abdomen is emerging as a potential useful addition to traditional abdominal radiographs (AXR) to confirm the diagnosis of necrotizing enterocolitis (NEC). The goal of this study was to assess the abdominal sonographic findings of premature infants with NEC, in order to determine whether AUS is more effective than AXR in the diagnosis of NEC.

Methods: This cross-sectional study was performed on consecutive neonates with clinical suspicion of NEC admitted in our hospital's NICU (Ali-Asghar Children's Hospital, Tehran, Iran). We prospectively evaluated the hospitalized subjects using AXR and AUS from May 2018 to May 2020.

Results: A total of 53 neonates were included in the study. These patients were divided into two groups: suspected NEC patients (stage I) including 31 subjects and definite NEC patients (stage II and III) including 22 neonates. We found a substantial agreement between the two modalities regarding the detection of pneumoperitoneum and pneumatosis intestinalis (k: 0.658 for both). The concordance concerning portal venous gas detection was considered slight (k: 0.315). Thirty-eight patients did not show any signs of portal venous gas in either of AUS or AXR. On the contrary, four patients demonstrated evidences of portal venous gas in both AUS and AXR. AUS detected ten more portal venous gas than AXR. AXR found no cases with positive portal venous gas that were undetected by AUS. The most predictive indicator for surgical intervention in neonates was the presence of free echogenic ascites and loculated fluid.

Conclusion: Our findings demonstrated that AUS is superior to AXR in demonstrating por-



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tal venous gas and pneumatosis intestinalis. Hence, it seems that AUS is a useful adjunct to AXR in the management of NEC.

Table:

Table 2. Comparisons between the two studied groups (suspected group and definite group) regarding X-ray and US findings

/ariables		Category	Suspected	Definite	p-value
		Normal	5 (15.6)	0 (0.0)	
B X-ray		Diffuse gas filling	27 (84.4)	12 (57.1)	
	BLGP	Focal gas filling	0 (0.0)	2 (9.5)	<0.001*
	BLOP	Gasless or decreased intestinal gas	0 (0.0)	3 (14·3)	<0.001
		Separation bowel loops	0 (0.0)	4 (19.1)	
N (%)		Yes	0 (0.0)	6 (28.6)	0.000*
	PI	No	32 (100.0)	15 (71.4)	0.002*
		Yes	1 (3.1)	2 (9.5)	0.10
	PVG	No	31 (96·9)	19 (90.5)	0.19
		Yes	0 (0.0)	2 (9.5)	0.07
	PnP	No	32 (100.0)	19 (90.5)	0.07
		Normal	25 (78.1)	6 (28.6)	
	BWT	Thick (>2·7 mm)	7 (21.9)	13 (61.9)	<0.001*
		Thin (<1 mm)	0 (0.0)	2 (9.5)	
1514/5		Yes	4 (12.5)	8 (38·1)	0.00*
	IBWE	No	28 (87.5)	13(61.9)	0.02*
		Yes	3 (9.4) 10 (47.6)	0.000	
	PVG	No	29 (90.6)	11 (52·4)	0.006*
		Yes	3 (9.4)	12 (57.1)	-0.001*
	PI	No	29 (90.6)	9 (42·9)	<0.001*
US	DraD	Yes	0 (0.0)	1 (4.8)	0.70
N (%)	PnP	No	32 (100.0)	20 (95·2)	0.39
Pe		Normal	19 (59·4)	1 (4.8)	
	Ascites	Free Fluid anechoic	13 (40·6)	10 (47.6)	<0.001*
	Ascites	Free Fluid with echo	0 (0.0)	7 (33·3)	<0.001
		Loculated	0 (0.0)	3 (14·3)	
	Deristalsia	Decreased	8 (25.0)	20 (95·2)	
	Peristalsis	Normal	24 (75.0)	1 (4.8)	<0.001*
		Normal	9 (64·3)	3 (20.0)	
	CDBL	No vascularity	0 (0.0)	6 (40.0)	0.02*
		Increase vascularity	5 (35.7)	6 (40.0)	

BLGP: bowel loop gas pattern; PI: pneumatosis intestinalis; PVG: portal venous gas; BWT: bowel all thickness; IBWE: increased bowel wall echogenicity; CDBL: color doppler bowel loop; PnP: Pneumoperitoneum



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Figure 2. Loculated fluid collection with internal echo

Biography

Dr. Ehsan Ranjbar is a Board-Certified Radiologist with a Master of Public Health from Tehran University of Medical Science and a Doctor of Medicine from the same institution. He completed his Diagnostic and Interventional Radiology residency at Mazandaran University of Medical Science, Sari, Iran, and achieved certification from the Iranian Board of Radiology. His research interests include new imaging techniques, microvascular imaging, and the application of machine learning and deep learning in medical imaging, particularly breast MRI and pituitary MRI. Dr. Ranjbar has contributed to numerous publications on imaging biomarkers, lung cancer management, and pediatric diagnostics. He actively engages in radiology education through online platforms such as YouTube, Telegram, and Instagram. He also collaborates with the Iranian Elite Network of Radiology Association and has presented at multiple Iranian Congresses of Radiology.



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"Are You Aware Enough of Feeding Birds, Sweetie?" A Semiotic View on Environmental Awareness in Iraqi Preschool Children's Drawings

Huda Halawachy and Ahmed J. Himmadi

Department of English, University of Mosul, Iraq

The globe is facing threatening natural disruptions such as climate change, pollution, deforestation, animal extinction, etc. Since children are more susceptible to environmental harm, raising environmental awareness in children at early ages becomes a mandatory item in the educational system. The current qualitative research attempts to examine Iragi preschool children's drawings on environmental care based on one observable problem: the Iragi educational system for preschool children lacks items on environmental awareness and sustainability. We carefully designed the study aiming to describe and analyses the Iragi kindergarteners' views on nature and the way(s) they are aware of protecting the threatened biodiversity in a war-zone area like Iraq. Piercean semiotic categories, viz. icon, index, and symbol sound to be a workable model to detect the children's 27 drawings. As a procedure to collect the corpus, the co-authors moved to Al-Jawsag Private Kindergarten located on the right side of Mosul, Nineveh, Iraq on June 28 th,2022-a day visit. The children were informed about the visit days back. The participants were 20 kindergarteners aged (4-6 years). The co-authors joined one class where they warmed up the children to think about the natural surroundings. Supported by 6 posters on children's environmental awareness prepared by the researchers with some questions addressing the children (lasted for 10 minutes), the latter were allotted (30 minutes) to draw depending on what they perceived. The total number of drawings was 27- (20 drawings gained from the class and (7drawings) found on the boards in the kindergartens' administration which were significant too. The drawings were categorised into 'realistic drawings' (20 drawings) and 'realistic and scribble drawings' (7 drawings). Results showed that environmental elements as plants, water, sun, soil, mountains were iconically represented as part of a healthy environment. Colors as blue, green, brown, and red symbolized a gorgeous clean nature. Indixally,



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the children were not able to communicate messages on how to keep Mother Earth safe as they are unaware of their imbalanced surroundings.

Biography

Huda HALAWACHY is an Assistant Professor at the Department of English in the College of Arts at the University of Mosul, Mosul, Nineveh, Iraq. She was awarded her PhD working on her dissertation titled: "A Synthetic Approach to the Study of Avoidance in Language Production" in English Language and Linguistics in 2008 from the University of Mosul. Huda packs a lot of information into the Master Theses and Dissertations she is supervising and her publications. Serving as a peer-reviewer for Scopus–indexed journals adds to her career a lot. Huda participated in conferences – in Iraq, Jordan, France, Denmark, England, the USA, Italy, Georgia, Germany, India, and Turkey. She has been also nominated as the Chairperson of the Local Organizing Committee for the Nigeria Eco Linguistics Association (NEA) Conference held in collaboration with the International Eco Linguistics Association IEA (8th-10th September 2021). She is so keen to write more about the environment in her academic works.



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Tarlov Cysts: Towards a more Comprehensive Clinical Understanding

Ricky Rasschaert¹ and Mieke Hulens²

¹Department of Neurosurgery, AZ Rivierenland, Belgium ²Department of Rehabilitation Sciences, University of Leuven, Belgium

Tarlov cysts remain a topic of controversy, from the first publication of Tarlov in 1938 and even now a myriad of treatments have been proposed for larger sacral cysts. For several reasons which will be discussed, Tarlov cysts have the tendency to be regarded as incidental findings. However with a comprehensive history taking and perineal nerve conduction studies we might be able to distinguish better the symptomatic perineural cysts from the truly incidental finding.

As these cysts are being considered as dilations of the nerve root sleeve the hydrostatic pressure together with pulsatile/dynamic features are coined to be the generators of the cysts and growth mechanism. An increase in intracranial pressure has been measured in our case series and with positive effects on the symptoms with CSF evacuation and Acetamolozide. Even small cysts seems to react positively on these diagnostic tests.

Although the Tarlov cysts may not cause radicular pain in the corresponding dermatomes directly, individuals with Tarlov cysts frequently report a range of symptoms that have previously been linked to symptomatic Tarlov Cysts, including bladder, bowel, sphincter, and sexual symptoms, as well as local pain. Additionally, seemingly unrelated symptoms, such as headaches, fatigue, cognitive difficulties, neuropathic pain localized in other parts of the body, and autonomic dysfunctions, are commonly reported. These symptoms may be associated with elevated cerebrospinal fluid pressure within the nerve root sheath. Elevated pulsatile cerebrospinal fluid pressure underlies the formation of Tarlov Cysts at the dorsal root ganglion and may gradually contribute to small-fiber dysfunction by irritating, compressing and damaging small nerve fibers within the dorsal root ganglion.



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As several studies show radiculopathy and axial pain as a general finding in idiopathic intracranial hypertension an "idiopathic cerebrospinal pressuredysregulation syndrome" might be proposed as a common denominator.

In our presentation we will show our own results together with a literature study leading to the new insights as described above.

Biography

Dr. Ricky Rasschaert is neurosurgeon and spine surgeon at the AZ Rivierenland in Antwerp, Belgium. The use of minimally invasive techniques and spinal reconstructive surgery are his main interests.

He is a member of several Neurosurgical and Spine societies and has a teaching position at Odisee, University of applied Sciences.

He does research involving the treatment of Tarlov cysts, the link with cerebrospinal fluid and small fiber neuropathy. Other research projects involve hemostats and pertners in other projects.

As head of the Neurosurgery Department and member of the OR committee he is also involved in hospital management and governance.

As an medico-legal expert the management of complications and the impact on the health care profenssionals as well as the patient is a side interest.



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Time to Bridge the Clinical Divide?

Adam Widdison

Royal Cornwall Hospital, UK

For millennia the consultation has been at the heart of the care pathway. It is the opportunity for the health care practitioner (HCP) to meet the patient, to learn about them and their problem, to formulate a diagnosis and plan management, and for the patient to meet the HCP, to learn their opinion and get help with a problem. However, as the number and availability of guidelines, and tests has increased, so the perceived value of the consultation among many has declined, yet it remains valued by experienced clinicians.

It is likely the difference between the way trainee HCPs and experienced clinicians manage the consultation is a cause. Trainee HCPs are taught to use a proscribed history and examination format that has changed little for more than a hundred years, whereas experienced clinicians manage the consultation flexibly to suit the context, the patient, the problem and the information learnt. Early in the consultation they determine the aims and the initial focus. Thereafter, the consultation is managed flexibly in response to the patient and the information learnt with questions being asked and signs sought to ensure that the consultation is meaningful for the patient and for the clinician, and the outcome meets the aims. A meaningful consultation with a good finish is likely to be a successful consultation, leaving the patient happy and more likely to adhere and comply with future care.

Given the profound changes in medicine and patient knowledge and attitudes and to ensure HCPs are able to adapt to future changes such as AI it is time to bridge the clinical divide, to update the way the consultation is managed.



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Biography

His undergraduate medical training was at Oxford University, after which he worked in various teaching hospitals in Southern England before being appointed as a Consultant Surgeon at the Royal Cornwall Hospital (RCHT) in 1995. RCHT is one of the busiest acute general teaching hospitals in England, giving him a wealth of clinical and teaching experience. He have a Doctor of Medicine degree, an FRCS, Hunterian professorship and a post-graduate certificate of education and have co-authored 4 book chapters, 7 review articles and about 40 published articles (https://www.researchgate.net/profile/Adam-Widdison-2). He was a consultant for 25 years, and served numerous roles including Honorary lecturer, educational supervisor and appraiser, Associated Dean, Clinical tutor, College Tutor, Mentor, Coach, Specialty lead, and Divisional director of Surgery before retiring in 2020 to write "The Expert Clinician: Bridging the Clinical Divide" (https://www.linkedin.com/feed).



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Nurse Leaders' Knowledge of Leadership Skills

Monisola Y. J. OMISHAKIN¹ and Ijeoma L. OKORONKWO²

¹School of Healthcare and Nursing, BPP University, UK ²Department of Nursing Sciences, Faculty of Health Science & Technology, University of Nigeria Enugu Campus, Nigeria

Nurse leadership is paramount to the growth of nursing profession because it determines the course of practice for its followers, their intention to progress their career and remain in the profession and ultimately being satisfied with their job (Gottlieb et al., 2021). The purpose of the study was to describe nurse leaders' knowledge of leadership skills. The cross-sectional study was conducted among twenty-two (22) Nurse leaders purposively selected from UNIOSUN Teaching Hospital, Osogbo, Nigeria. The instrument for data collection was the Nurse leaders' knowledge on leadership skill questionnaire developed by the researcher with an internal consistency of 0.874. Data was analysed with descriptive statistics. The results of the study revealed that all the respondents had a minimum of a first degree in Nursing, 11(50%) of the respondents did not take any course or training on leadership before assuming leadership role. 15(68.2%) of the respondents had poor knowledge scores, 6(27.3%) had fair knowledge scores and 1(4.5%) had good knowledge score. These findings were in agreement with the study by Mondini et al. (2020) that revealed that professionals who updated or held leadership positions presented a higher leadership behaviour, and stated that 61% of the nurses in their study were unaware of authentic leadership model and supported by Breejen-de Hooge et al (2021) which also revealed the pressing need for education and training for nurses on how to develop leadership. It was concluded that majority of the nurse leaders had poor leadership knowledge skills. It is vital that nurses develop their knowledge and professional skills to deliver high quality care to patients and affect their followers positively. It was recommended that all nurse leaders take leadership courses or training before assuming the role of leadership and there must be a succession transition plan.



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Biography

Monisola has been working in the healthcare industry for over 16 years, with experience in clinical practice, nursing and midwifery education, administration and research. She is passionate about patient-centred care, maternal and adolescent health, midwifery education and healthcare leadership with focus on capacity building. She is an RN, RM, RPHN and RME with the Nursing Midwifery Council of Nigeria. Monisola obtained her Nursing degree from Ladoke Akintola University of Technology, Nigeria and MSc. Nursing from University of Ibadan, Nigeria. She has pursued additional qualifications in Education (PGDE) and a Fellow of the West African College of Postgraduate Nurses and Midwives- Maternal, Child and Reproductive Health Faculty. She is a member of Sigma Theta Tau International Honor Society of Nursing (STTI) (Alpha Alpha Upsilon Chapter) and a Doctoral scholar.

Monisola currently works at the School of Healthcare and Nursing, BPP University, London as a Lecturer in the MSc. Leadership program where she is involved in teaching, mentoring and offering pastoral care to students, leading courses, dissertation supervision, developing and evaluating curriculum. She loves traveling, meeting new people, helping young people, motivational speaking and counselling.



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Matricaria pubescens Supplementation and Its Implications for Preventive Care in Metabolic Health in Rats

Houssem CHENNA^{1,2}, Yahia KHELEF³, Imen HALIMI², Chaouki DJOUDER², Mustafa Abdullah YILMAZ⁴, Oğuz ÇAKIR⁴, Mahieddine BOUMENDJEL², Amel BOUMENDJEL² and Mahfoud MESSARAH²

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This study aimed to investigate the protective effects of Matricaria pubescens (M. pubescens) powder supplementation on obesity and its related complications in rats fed a highfat diet (HFD). Four groups were established: the first group served as the control and received a standard diet; the second group (HFD) received only a high-fat diet containing 30% sheep fat; the third group (Control+MP) received the standard diet supplemented with 5% (w/w) *M. pubescens* powder; and the fourth group (HFD+MP) was given a high-fat diet supplemented with 5% *M. pubescens* powder for 16 weeks. Biochemical analyses were conducted on plasma samples, and histological examinations were performed on liver, kidney, and adipose tissues.

The results showed that the high-fat diet induced significant increases in body weight, body mass index (BMI), thoracic and abdominal circumferences, along with liver and adipose tissue hypertrophy and kidney atrophy. The HFD also elevated hepatic (AST, ALT, ALP, total and direct bilirubin) and renal (creatinine and uric acid) biomarkers, as well as triglyceride and glucose levels, indicating insulin resistance. Additionally, hepatic TNF- levels were significantly increased compared to controls.

Histological analysis supported these findings, revealing lipid droplet accumulation, cel-



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lular swelling, ballooning with nuclear displacement, and tissue hemorrhages in the liver. Kidney sections showed lipid deposits, tubular dilation, and glomerular atrophy with widened Bowman's space. Adipose tissue showed an increased adipocyte surface area and a reduced adipocyte count. However, *M. pubescens* supplementation in the HFD group significantly improved all these parameters.

In conclusion, *M. pubescens* powder demonstrated beneficial effects against obesity and its complications, likely due to its richness in phytochemical compounds that exert hypolipidemic, antioxidant, and anti-inflammatory properties.

Biography

Dr. Houssem Chenna is currently a Scientific Researcher at the Pharmaceutical Sciences Research Center (CRSP) in Constantine, Algeria. He obtained his PhD in Biochemistry and Immunology from Badji Mokhtar University in Annaba, Algeria, where he is also affiliated with the Laboratory of Biochemistry and Environmental Toxicology. His research interests centre on the biochemical and immunological effects of natural compounds, with a particular focus on their role in managing metabolic disorders such as obesity, insulin resistance, and non-alcoholic fatty liver disease. Dr. Chenna has actively contributed to research exploring the antioxidant and anti-inflammatory properties of various medicinal plants. He is deeply committed to the advancement of preventive healthcare through natural product-based research and interdisciplinary collaboration. His work aims to bridge traditional medicine with modern biomedical science to develop innovative, accessible solutions for chronic health conditions.



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Online Medication Therapy Management (OMTM) in a Changing World: Assessing Knowledge, Practice, and Barriers in Oyo State, Nigeria

Hamidu Adediran Oluyedun, Lukman Tunde Fasasi and Ayodele Samuel Jegede

Department of Sociology, Faculty of the Social Sciences, University of Ibadan, Nigeria

Background: In order to solve current challenges, social science, health, and technology must align. Online Medication Therapy Management (OMTM), which operates online, constitutes an important telemedicine solution that enhances healthcare delivery accessibility while building resilience, particularly during difficult times for all healthcare facilities. The COVID-19 pandemic highlighted the necessity of telemedicine solutions, yet Nigerian research on OMTM is limited This study investigates how pharmacists and patients in Oyo State, Nigeria, engage with OMTM through their understanding and implementation, and the challenges they face under modern societal conditions that require healthcare delivery to become more resilient and adaptable.

Aim: This study investigates the impact of pharmacists' knowledge and practice of Online Medication Therapy Management (OMTM) on patients' satisfaction with pharmaceutical services in public hospitals in Oyo State.

Methods: This study conducted qualitative research by interviewing 24 patients/relatives, along with key informant interviews of twelve hospital pharmacists and directorate-level pharmacists in Oyo State. The Social Action and Consumer Satisfaction Equity theories were used to explain how pharmacists implement innovative medication therapy based on patient needs during emergency situations, as Oyo State, Nigeria, is the research setting. The researchers applied thematic analysis to discover the main factors behind OMTM adoption.

Results: The research showed inadequate recognition and implementation of OMTM by both pharmacists and patients, although results were generally low across the board. The



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barriers that prevented pharmacists from working with OMTMs included insufficient training, along with limited access to patient health records and inadequate infrastructure. Customers displayed uncertainties about improper medical diagnoses, along with dosage mix-ups, while emphasising the importance of physical consultation meetings. Multiple obstacles preventing OMTM adoption consist of poor rural-urban infrastructure, technical challenges, and insufficient government backing, as well as patient preference towards physical consultations, limited digital skills and language proficiency, and socio-cultural and religious factors.

Conclusion: The research establishes the requirement for better education and medical staff training, along with improved health facilities, to promote OMTM adoption in Oyo State. The successful implementation of OMTM depends on solving these barriers, as it will unlock health services' potential in shortage situations and underdeveloped areas. OMTM demonstrates an effective path to develop healthcare systems that can better resist sudden changes in the future world.

Biography

Hamidu Adediran Oluyedun was born six decades ago in Ibadan, South West Nigeria. With over thirty years of experience in lecturing, facilitating, motivating, coaching, mentoring, and guiding professionals in the healthcare industry, he has established himself as a respected educator and leader in the field.

He began his academic journey with a first degree in Pharmacy and went on to earn three Master's degrees—in Human Nutrition, Sociology, and Social and Administrative Pharmacy (Consultancy level). He later completed a Doctor of Philosophy (Ph.D.) in Medical Sociology, demonstrating a strong interdisciplinary foundation and commitment to advancing healthcare education.

Dr. Oluyedun has taught in multiple institutions, including three universities in Nigeria. He currently serves as a Pharmacology lecturer at the Oyo State College of Nursing and Midwifery in Ibadan and also contributes as a visiting lecturer at several other colleges.

Throughout his distinguished career, Dr. Oluyedun has been the recipient of numerous academic and professional accolades. These include the prestigious Health Laureate in Africa (2006), the Bulgaria Embassy Award, and the Geneva Health Forum Award—an honor he has received four times—along with several other local and international recognitions.

His scholarly contributions include numerous international abstract publications and journal articles. Beyond academia, he has led and executed several impactful community-based projects, further underscoring his dedication to societal development.

A Fellow of Pharmacy in both Nigeria and West Africa, Dr. Hamidu Adediran Oluyedun continues to inspire and shape the future of healthcare through his multifaceted expertise and unwavering commitment to excellence.



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Medical Education about Clinical Guidelines through "symbolic" Al: Project and Main Results

Paolo Terenziani^{1,2}

¹Department of Science and Technological Innovation, University of Eastern Piedmont, Italy ²Integrated Laboratory of AI and Medical Informatics DAIRI + DISIT, Italy

Artificial Intelligence (AI) has the potentiality to innovate education in healthcare. Since 1996 we work on the GLARE (Guideline Acquisition, Representation and Execution) decision support system, within a long-term project for the design of advanced AI supports for the management of Computer-Interpretable Clinical Guidelines (CIGs). In the talk, I will highlight the methodology and the main results of the two-year project "Personalized Training of Professional Competences with AI", in which we are investigating the adoption of AI and CIG systems for medical education (of students, physicians, nurses, and healthcare personnel in general). In the project, we address different tasks related to the adoption of medical knowledge and "symbolic" AI methodologies for medical education, including knowledge acquisition, representation and reasoning. Our approach supports three main facilities:

(i) the navigation of CIGs,

(ii) their simulated application to case studies, to show learners, step-by-step, how to apply CIGs to specific case studies, and

(iii) learners' testing, through an evaluation of the conformance between learners' proposal about the management of a case study and CIG's recommendations for it.

Our approach is domain-independent, and we use the melanoma and the dyslipidemia guidelines as concrete examples. We are currently proposing a six-month course for a cohort of more than 50 medical students, distinguishing between a class adopting the Albased facilities we developed and a control class. At the end of the course (April 2025) the learning results of the two classes will be compared, and the results will be discussed at the Conference.



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Biography

Since 2000, Paolo Terenziani is *Full Professor* at the Institute of Computer Science of DISIT, University of Eastern Piedmont, Alessandria, Italy. The research activity of Paolo Terenziani started in 1987 and concerns Artificial Intelligence (knowledge representation, temporal reasoning, conformance analysis, process mining), Temporal Databases (query and data semantics, temporal indeterminacy, periodic data) and Medical Informatics (clinical guidelines, decision support systems). Regarding these topics Paolo Terenziani has published more than 170 papers in peer-reviewed international journals, books, conference proceedings and workshops. He has won "distinguished\best" paper awards in several international conferences, including AMIA 2012, Chicago, USA, November 2012 (more than 1000 submissions). He is currently the responsible of the Integrated Laboratory of Artificial Intelligence and Medical Informatics of the Alessandria Hospital and the University of Eastern Piedmont, Alessandria, Italy.