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To cite this article: Maria Rodriguez, Cátia Balsinha, Nataliya Garcia, Valéria Vicente & Ana Cristina Neves (2021) A teaching tool for nursing procedure with oxygen therapy, *Annals of Medicine*, 53:sup1, S96-S97, DOI: [10.1080/07853890.2021.1895964](https://doi.org/10.1080/07853890.2021.1895964)

To link to this article: <https://doi.org/10.1080/07853890.2021.1895964>



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Published online: 28 Sep 2021.



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antibiotics can circulate. They also reinforce the need for good hygiene and disinfection of the site between appointments.

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Acknowledgements

The authors acknowledge funding from Egas Moniz, CRL.

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DOI: 10.1080/07853890.2021.1895586

A teaching tool for nursing procedure with oxygen therapy

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ABSTRACT

Introduction: Oxygen therapy is applied in a variety of clinical situations where patients have low levels of oxygen in the blood and is part of one of the procedures in nursing care. Knowing that home care is more beneficial for the patient, because it promotes a faster recovery and guarantees comfort and safety, preserving its autonomy [1], it is pertinent to train (enable) both patients and informal caregivers (e.g. family, friends), with the correct knowledge (empowerment) and procedures to follow. Nurses have a fundamental role in the training of patients and/or informal caregivers, knowing their difficulties and realities, thus enabling caregivers to be autonomous in-home care [2–4]. This work presents an original educational tool that uses pictograms to teach and empower patients and/or caregivers to use oxygen therapy materials correctly at home.

Materials and methods: An Educational Tool for Health purposes was originally designed using pictograms, which illustrates/anticipates the therapeutic procedures, destined for patients who need oxygen therapy with regularity. The instrument is made up of a set of pictograms that complement the clinical nursing procedure on oxygen therapy (teaching step by step the therapeutic) and a good practice manual (helps to understand oxygen therapy and serves as a record and monitoring of the difficulties experienced).

Results: The use of pedagogic tools for health using pictograms can be a strategy to improve interpersonal communication between nurse and the patient and/or informal caregiver [5]. They can also be used as complementary learning tools, because of their universal character, the pictograms constitute an effective way to overcome individual constraints, such as literacy level, familiarity with the images, interpretation, and perception of what is being pictorially represented [6]. The suggested good practice manual is interactive and dynamic, enabling both patient and informal caregiver to focus and actively participate.

Discussion and conclusions: The Strategies for Health Education are increasingly relevant on what concerns the change in health behaviour. Pedagogical materials of this nature facilitate the understanding and use of therapeutic procedures used daily, allowing to reduce the excessive dependence of professionals and health services and are fundamental contributions for a greater autonomy and adherence to the health behaviours of the patient and/or informal caregiver.

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Acknowledgements

The authors are grateful to ESSEM, for the support given on the Pedagogical *Simulacrum*. No funding to declare.

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DOI: 10.1080/07853890.2021.1895964

Can prior hospitalisation experiences influence satisfaction with nursing care? Results in a school-aged children sample

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ABSTRACT

Introduction: Patient satisfaction is considered an important and relevant patient outcome in the nursing field [1], and prior hospitalisation experiences have impact in the overall satisfaction with care [2]. Regarding children satisfaction, authors conceptualise satisfaction through the comparison of previous experiences [3]. This study aims to identify if prior hospitalisation experiences influences satisfaction with nursing care, in school-aged children (7–11 years).

Materials and Methods: An observational, cross-sectional, exploratory-descriptive study with a convenience sample was performed. Data were collected from January 2015 to December 2016. The "Children Care Quality at Hospital" [4] instrument was used after translation and validation to Portuguese [5]. In this questionnaire children were asked to rate nursing care from 1 (less satisfied) to 5 (more satisfied). Statistical analysis was performed using SPSS statistical tool (version 24.0). In order to verify the association between the variable's prior to hospitalisation experience and patient satisfaction, Student's *t*-test was applied with a 95% confidence interval. Authorisation was obtained from ethics committees in each of the 6 hospitals where the study was applied, and also from the National Data Protection Commission.

Results: In this sample ($n = 252$) children mean age was 8.9 years ($SD = 1.4$), and it mainly consisted of boys (52.8%, $n = 133$). Most children had prior hospitalisation experiences (63.5%, $n = 160$), 35.7% ($n = 90$) have never been hospitalised before, and 2 children answered, "I do not know". Nursing care was rated with a score of 4.51 ($SD = 0.645$). There was no significant difference between having or not having prior hospitalisation experiences and the score attributed by children ($t = 1.47$; $p = .821$).

Discussion and conclusions: In this sample, children are satisfied with nursing care provided during hospitalisation. In previous studies with adult population, prior experiences seem to have a negative effect on the overall satisfaction [2,6]. Specifically in school-aged children, previous experiences positively influences satisfaction with nursing care [4]. However, this was not verified in our study. We suggest that further studies should be developed some time after the hospitalisation experience, for example 6 months, to understand the most relevant experiences and their influence on the satisfaction with hospital nursing care.

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Acknowledgements

The authors would like to thank children and their parents for their collaboration in the study.

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