

Mosul Journal of Nursing

Online ISSN: 2663-0311 - Print ISSN: 2311-8784 Website: https://mjn.mosuljournals.com



Knowledge of Nurses About Cardiopulmonary Resuscitation at the Emergency Teaching Hospital in Sulaimani City





- 1. Assistant Lecturer, College of Nursing, University of Sulaimani, Iraq.
- 2. Lecturer, College of Nursing, University of Sulaimani, Iraq.

Article information

Article history:

Received 18 May 2023 Accepted on August 21, 2023 Available online January 12, 2024

Keywords:

Knowledge, sudden cardiac arrest, cardiopulmonary resuscitation

Correspondence:

Ghazi Hassan Mohammed Assistant Lecturer, College of Nursing, University of Sulaimani, Iraq.

Ghazi.mohammed@univsul.edu.iq

Abstract

Background: Nurses are expected to use cardiopulmonary resuscitation (CPR) techniques because they are skilled at caring for patients with life-threatening diseases.

Aim: To assess nurses' knowledge of cardiopulmonary resuscitation and to identify the relationship between nurses' knowledge of cardiopulmonary resuscitation and some demographic variables.

Methods: 41 nurses from the Emergency Teaching Hospital in Sulaimani City participated in this study. A non-probability convenience sampling technique was applied. The study used questionnaires designed according to the 2010 AHA guidelines for assessing knowledge of cardiopulmonary resuscitation.

Results: The result of the present study indicates that most nurses had fair knowledge of cardiopulmonary resuscitation (%63.4), More than a fourth (%26.8) had good knowledge, and only (%9.8) had poor knowledge. Knowledge of nurses affected by marital status (p < 0.05).

Conclusions: This study has revealed that most nurses at the Emergency Teaching Hospital in Sulaimani City had good knowledge about cardiopulmonary resuscitation, and there is a significant association between marital status and the level of knowledge of CPR. P value <

Recommendation: Based on the study's findings, we recommend improving the education of cardiopulmonary resuscitation among nurses in Emergency Teaching Hospital, which will help reduce the rate of mortality from cardiac arrest in the community.

DOI: 10.33899/min.2024.182201 Authors, 2024, College of Nursing, University of Mosul.

This is an open-access article under the CC BY 4.0 license (http://creativecommons.org/licenses/by/4.0/).

INTRODUCTION

Sudden cardiac arrest (SCA) poses a critical threat to life, and timely administration of medical intervention is crucial to prevent sudden cardiac death(Erickson et al., 2021; Zimmerman & Tan, 2021). Swift and adequate medical attention can significantly increase survival chances(Harmon, 2022). SCA is broadly classified into hospital and out-ofhospital incidents(Marijon et al., 2023). Estimates suggest that there are 95.9 cases of adult out-of-hospital cardiac arrest (OHCA) per 100,000 people annually(Rodríguez-Reyes et al., 2020a). A set of life-saving procedures known as cardiopulmonary resuscitation (CPR) is used in modern medicine to increase the survival rates of CNS(Rajagopalan et al., 2022). In a survey conducted in a significant western Turkish city, 40.7% of residents in a highly educated area said they had received cardiopulmonary resuscitation, and 3.6% said they had previously administered bystander CPR(Batelaan et al., 2021). According to Qara et al. (2019), this calls for a community understanding of recognizing cardiac arrest symptoms and when to begin CPR. Early detection and intervention in cardiac arrest save lives(Held et al., 2022). The chances of survival in cardiac arrest drop from 7 to 10% for each minute that CPR is delayed (Kaihula et al., 2018). Furthermore, it could shorten the time needed before being released from the hospital(Cone et al., 2020). The prognosis of cardiopulmonary arrest is inversely correlated with the amount of time that passes between the onset of efficient reanimation and the training of the medical staff who care for the patient, according to Rosón et al. (2003). Today, CPR has been simplified into a set of abilities anyone can learn, regardless of prior medical education(Rodríguez-Reyes et al., 2020b). This enables qualified medical employees to quickly begin this life-saving treatment(Harris & Lubitz, 2020). CPR training was previously restricted to medical practitioners. Later, it was discovered that many of these incidents occurred outside of medical settings and that those who witnessed the incident as a witness needed to perform early CPR. Accordingly, CPR is seen as a universally applicable skill(Holmstrom et al., 2023; Isath et al., 2022).

METHOD

Design of the study: A quantitative descriptive study was used to assess nurses' knowledge of cardiopulmonary resuscitation in the Emergency Teaching Hospital in Sulaimani City.

Sample of the Study

Nonprobability, a convenience sample size of (41) was selected according to the original study criteria from March to May 2020. Nurses were selected from the Emergency Teaching Hospital in Sulaimani City.

The study instrument.

The researchers constructed the questionnaire to measure the variables underlying the present study, mainly to assess nurses' knowledge of cardiopulmonary resuscitation. Which consists of two parts:

Part One: The socio-demographic data form for nurses includes age, gender, marital status, academic qualification, and year of experience in an emergency.

Part 2: It was designed according to the 2010 AHA guidelines (Field et al., 2010). The first part dealt with general questions about the importance of CPR in clinical practice, the second addressed the main goal and precision of the CPR intervention, and the last segment addressed questions targeting the indications, methods, and effectiveness of CPR.

Data Collection: Before filling out the questionnaire, the purpose of the study was explained, and verbal consent was obtained from all participants. A self-administered questionnaire was prepared in English and distributed to all participants. Each subject takes approximately (20-25) minutes to complete the questionnaire.

Data Analysis: To achieve the stated objectives, the initial study data and the study data were analyzed using a statistical package for social sciences through descriptive analysis (frequency, percentages) for all variables. Analytical analysis was conducted to determine the association and differences between the variables compared.

RESULTS:

Table 1 provides a comprehensive overview of the characteristics of the study sample. Most participants (68.3%) were male, and the highest percentage (56.1%) fell within the age range of 25 to 29 years, with a mean age score of 30.8. Furthermore, a significant portion (80.5%) of the study sample was married, and a substantial number (95.1%) had completed their education at an institute or University. Regarding work experience, 65.9% of the participants had less than six years of experience.

Figure 1 visually represents the level of knowledge of the study sample. Most (63.4%) demonstrated fair knowledge, while 26.8% exhibited good knowledge, and 9.8% had poor knowledge about the subject matter.

Table 2 delves into a more detailed analysis of knowledge levels across various demographic variables. In particular, individuals aged 25-29 exhibited the highest level of good knowledge (39.1%), while those aged 35-39 demonstrated the highest percentage of fair knowledge (66.7%). Poor knowledge was more prevalent among participants over 39 years of age. Regarding gender, women showed a higher proportion of good knowledge (39.3%), while men had a higher prevalence of fair knowledge

(61.5%). Marital status revealed a significant association, with 100% of single participants demonstrating fair knowledge and 45.5% of married participants exhibiting good knowledge. Furthermore, half of the nurses who graduated from nursing school showed good knowledge, whereas 53.8% of those with institute or university qualifications had good knowledge.

Statistical analysis revealed a highly significant association between marital status and the level of knowledge about CPR at a p-value of 0.05. However, no significant associations were found between nurses' knowledge and age, gender, academic qualification, or years of experience.

These findings underscore the importance of considering demographic factors, particularly marital status, when assessing and addressing knowledge levels related to CPR among nurses. The results provide valuable information for tailoring targeted interventions to improve CPR knowledge within specific subgroups of the nursing population.

Table 1. Distribution of socio-demographic characteristics

Socio-demographic characteristics	Frequency	Percentage					
Age							
25-29	23	56.1					
30-34	9	22					
35-39	6	14.6					
>39	3	7.3					
Mean \pm SD= 30.8 \pm 4.7							
Gender							
Male	28	68.3					
Female	13	31.7					
Marital status							
Single	8	19.5					
Married	33	80.5					
Academic Qualification							
Nursing school	2	4.9					
Institute/University	39	95.1					
Years of experience in emergency							
1-5	27	65.9					
6-10	9	22					
11-15	3	7.3					
> 15	2	4.9					
total	41	100					

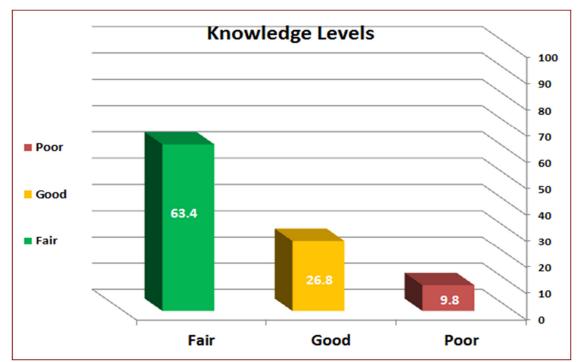


Figure (1) Distribution of nurses' knowledge levels on cardiopulmonary resuscitation. Table 2. Association between the knowledge and socio-demographic characteristics.

Variable	knowledge							
	GOOD		FAIR		POOR			
AGE	Frequenc	Percentag	Frequenc	Percentag	Frequenc	Percentag		
	y	e	y	e	y	e		
25 - 29	9	39.1%	12	52.2%	2	8.7%		
30 - 34	3	33.3%	4	44.4%	2	22.2%		
35 - 39	2	33.3%	4	66.7%	0	0		
>39	1	33.3%	1	33.3%	1	33.3%		
Chi-square = 3.448a		P value=0.751		Not Significant				
Gender								
Female	11	39.3%	13	46.4%	4	14.3%		
Male	4	30.8%	8	61.5%	1	7.7%		
Chi-square = 0.888a			P value=0.641		Not Significant			
Marital status								
Single	0	0%	8	100%	0	0%		
Married	15	45.5%	13	39.4%	5	15.1%		
Chi-square =9.466a		P value=0.009		highly Significant				
Education level								
Nursing School	1	50%	0	0	1	50%		
Institute&universit	14	35.9%	21	53.8	4	10.3%		
y degree								
Chi-square =3.644a		P value=0.162		Not Significant				
Years of experience								
1-5	10	37%	15	55.6%	2	7.4%		
6-10	3	33.3%	4	44.4%	2	22.2%		
11-15	1	33.3%	2	66.7%	0	0%		
>15	1	50%	0	0%	1	50%		
Chi-square=5.438a P value=0.4		-0.489	Not Significant					

DISCUSSION

A vital component of the medical team is nurses. They are essential for the institutional care of patients, especially those receiving critical and emergency treatment. People in critical care and emergency departments are likely to develop cardiac arrest, which can happen even in healthy people who do not even experience a heart problem. The objective of the current study is to examine the knowledge of nurses with CPR in a teaching hospital in Sulaimani City, Iraq. As the study shows, most of the study sample (63.4%) has a fair knowledge of CPR. The present study's result agreed with previous studies in Botswana, which found that nurses in the three district hospitals showed markedly deficient knowledge and skills. (Rajeswaran, Cox, Moeng, and 2018). Furthermore, Tsima. studies conducted in a tertiary care teaching hospital in Nepal in 2011 found that, in general, nurses' knowledge was low. (Valarmathi and Parajulee, 2014)

Regarding socio-demographic characteristics, the present study revealed that the majority (64.7%) of the study sample were male. These results agreed with many studies by Al-Ftlawi (2011) and Al-Ani et al. (2014), which indicated that most nurses were males.

Regarding the age group, most of the respondents were between (25-29) years of age, and work experience ranging from 1 to 5 years could be explained by the fact that younger nurses were more engaged, driven, and recently graduated than their more senior counterparts in these fields. This result was supported by Winkelman et al. (2009), and their findings indicate that more of the nurses studied were between (20-30) years old. Regarding academic qualifications, the majority of the study sample were nurses who graduated from the institute or University and accounted for (95.1%). This result agrees with Wendel (2011), who found that most of the study

sample were nurses with bachelor's degrees. Furthermore, this study also highlighted an association between sociodemographic variables and knowledge levels, such as age, sex, marital status, years of experience, and qualifications. It revealed a significant association between marital status and no other significant variables.

CONCLUSIONS

The study concluded that most nurses in the Emergency Teaching Hospital in Sulaimani City had a good understanding of cardiopulmonary resuscitation. There was a highly significant association between marital status and the level of knowledge of CPR, while there was no significant association between the level of knowledge and age, gender, level of education, and years of experience in the emergency room.

DECLARATION SECTION

Acknowledgments

We thank Nurese for their time and responses and all emergency teaching hospital staff in Sulaimani City for their help and support in this study.

Ethical Considerations

This research study has received ethical approval from the Faculty of Nursing Ethics Committee, University of Sulaimani, Iraq.

Conflict of interest

Funding:

None to be declared.

Data availability:

Data are available by contacting the corresponding author by email.

Authors contribution

All authors have read and approved the manuscript.

REFERENCES

Al-Ani, BA and Mustafa, M.A. (2014). Assessment of nurses' knowledge toward cardiopulmonary resuscitation at al-Najaf city's teaching hospital, Kufa Journal for Nursing Sciences, 4(1), pp. 173–182. https://doi.org/10.36321/kjns.vi20141.243

Al-Ftlawi, D. Determination of nurses' knowledge toward care provided to patients with acute myocardial infarction in Al-Najaf City.

- Kufa journal for nursing sciences,2012; Vol.2, No.2: Pp.1–11.https://doi.org/10.36321/kjns.vi20122.3
- Batelaan, N. M., Seldenrijk, A., van den Heuvel, O. A., van Balkom, A., Kaiser, A., Reneman, L., & Tan, H. L. (2021). Anxiety, Mental Stress, and Sudden Cardiac Arrest: Epidemiology, Possible Mechanisms and Future Research. Front Psychiatry, 12, 813518.
- https://doi.org/10.3389/fpsyt.2021.813518
 Cone, D. C., Burns, K., Maciejewski, K., Dziura, J.,
 McNally, B., & Vellano, K. (2020).
 Sudden cardiac arrest survival in
 HEARTSafe communities. *Resuscitation*,
 146, 13-18.
 https://doi.org/10.1016/j.resuscitation.201

9.10.029

- Erickson, C. C., Salerno, J. C., Berger, S., Campbell, R., Cannon, B., Christiansen, J., Moffatt, K., Pflaumer, A., Snyder, C. S., Srinivasan, C., Valdes, S. O., Vetter, V. L., & Zimmerman, F. (2021). Sudden Death in the Young: Information for the Primary Care Provider. *Pediatrics*, *148*(1). https://doi.org/10.1542/peds.2021-052044
- Field, J., Hazinski, M., Sayre, M., Chameides, L., Schexnayder, S., Hemphill, R., Samson, R., Kattwinkel, J., Berg, R., Bhanji, F., Cave, D., Jauch, E., Kudenchuk, P., Neumar, R., Peberdy, M., Perlman, J., Sinz, E., Travers, A., Berg, M., Billi, J., Eigel, B., Hickey, R., Kleinman, M., Link, M., Morrison, L., O'Connor, R., Shuster, M., Callaway, C., Cucchiara, B., Ferguson, J., Rea, T., and Vanden Hoek, T. (2010). Part 1: Executive Summary: 2010 American Heart Association Guidelines for Resuscitation Cardiopulmonary and Emergency Cardiovascular Care. Circulation, 122(18 suppl 3), pp.S640-

https://doi.org/10.1161/CIRCULATIONA HA.110.970889

- Harmon, K. G. (2022). Incidence and Causes of Sudden Cardiac Death in Athletes. *Clin Sports Med*, 41(3), 369–388. https://doi.org/10.1016/j.csm.2022.02.002
- Harris, S. L., & Lubitz, S. A. (2020). Clinical and genetic evaluation after sudden cardiac arrest. *J Cardiovasc Electrophysiol*, *31*(2), 570–578.

https://doi.org/10.1111/jce.14333

Hatzakis, KD, Kritsotakis, EI, Karadimitri, S., Sikioti, T. and Androulaki, Z.D., 2008. Community cardiopulmonary resuscitation training in Greece (Vol 31, pg. 165, 2008). RESEARCH IN NURSING & HEALTH,

- 31(5), pp.540-540.https://doi.org/10.1002/nur.20300
- Held, E. P., Reinier, K., Chugh, H., Uy-Evanado, A., Jui, J., & Chugh, S. S. (2022). Recurrent Out-of-Hospital Sudden Cardiac Arrest: Prevalence and Clinical Factors. *Circ Arrhythm Electrophysiol*, *15*(12), e011018. https://doi.org/10.1161/circep.122.011018
- Holmberg, M., Holmberg, S., and Herlitz for the Swedish Cardiac Arrest Registry, J., 2001. Factors that modify the effect of bystander cardiopulmonary resuscitation on survival in patients with outpatient cardiac arrest in Sweden. European Heart Journal, 22(6), pp.511-519.

https://doi.org/10.1053/euhj.2000.2421

- Holmstrom, L., Chugh, H. S., Uy-Evanado, A., Sargsyan, A., Sorenson, C., Salmasi, S., Norby, F. L., Hurst, S., Young, C., Salvucci, A., Jui, J., Reinier, K., & Chugh, S. S. (2023). Sudden Cardiac Arrest During Sports Activity in Older Adults. *JACC Clin Electrophysiol*, *9*(7 Pt 1), pp. 893–903. https://doi.org/10.1016/j.jacep.2022.10.03
 - https://doi.org/10.1186/s12913-018-3725-2 https://doi.org/10.5152/TJAR.2015.61587 https://doi.org/10.9790/1959-03121619
- Isath, A., Rao, S. D., Siroky, G. P., Padmanabhan, D., Bandyopadhyay, D., Krittanawong, C., Mohammed, S., Chahal, C. A. A., Perimbeti, S., Mehta, D., & Contreras, J. (2022). Trends, Prevalence, and Outcomes of Sudden Cardiac Arrest Post Cardiac Transplant: A Nationwide 16-Year Study. *Curr Probl Cardiol*, 47(8), 100901. https://doi.org/10.1016/j.cpcardiol.2021.100901
- Kaihula, WT, Sawe, H.R., Runyon, M.S., and Murray, B.L., (2018). Assessment of knowledge and skills among healthcare providers in an urban tertiary referral hospital in Tanzania. BMC Health Services Research, 18(1), 935.
- Marijon, E., Narayanan, K., Smith, K., Barra, S., Basso, C., Blom, M. T., Crotti, L., D'Avila, A., Deo, R., Dumas, F., Dzudie, A., Farrugia, A., Greeley, K., Hindricks, G., Hua, W., Ingles, J., Iwami, T., Junttila, J., Koster, R. W., Le Polain De Waroux, J. B., Olasveengen, T. M., Ong, M. E. H., Papadakis, M., Sasson, C., Shin, S. D., Tse, H. F., Tseng, Z., Van Der Werf, C., Folke, F., Albert, C. M., & Winkel, B. G. (2023). The Lancet Commission to reduce the global burden of sudden cardiac death: a call for multidisciplinary action. Lancet, 402(10405), 883-936. pp.

- https://doi.org/10.1016/s0140-6736(23)00875-9
- Perkins, G., Lockey, A., de Belder, M., Moore, F., Weissberg, P., and Grey, H. (2015). National initiatives to improve the outcomes of out-of-hospital cardiac arrest in England. Emergency Medicine Journal, 33(7), pp.448-451.https://doi.org/10.1136/emermed-2015-204847
- Qara, FJ, Alsulimani, L.M., Fakeeh, MMM, and Bokhary, D.H., 2019. Knowledge of non-medical people about Cardiopulmonary Resuscitation in the case of cardiac arrest: A Cross-sectional Study in the Population of Jeddah, Saudi Arabia. Emergency Medicine International, 2019. https://doi.org/10.1155/2019/3686202
- Rajagopalan, B., Shen, W. K., Patton, K., Kutyifa, V., Di Biase, L., Al-Ahmad, A., Natale, A., Gopinathannair, R., & Lakkireddy, D. (2022). Surviving sudden cardiac arrest-successes, challenges, and opportunities. *J Interv Card Electrophysiol*, 64(3), 567-571. https://doi.org/10.1007/s10840-021-00969-1
- Ratha, K., Panda, S. and Pradhan, R., 2014. Evaluate the effectiveness of the planned teaching program on Basic Life Support (BLS) among intern (BSc Nursing) students at Selected Nursing College, Bhubaneswar, Odisha. Nurs Health Sci, 3(1), pp.16-19.
- Rodríguez-Reyes, H., Muñoz-Gutiérrez, M., & Salas-Pacheco, J. L. (2020a). Current behavior of sudden cardiac arrest and sudden death. *Arch Cardiol Mex*, 90(2), 183-189.
 - https://doi.org/10.24875/acme.M2000011 4 (Comportamiento actual del paro cardíaco súbito y muerte súbitos.)
- Rodríguez-Reyes, H., Muñoz-Gutiérrez, M., & Salas-Pacheco, J. L. (2020b). Current behavior of sudden cardiac arrest and sudden death. *Arch Cardiol Mex*, 90(2), 200-206.
 - https://doi.org/10.24875/acm.19000157 (Comportamiento actual del paro cardíaco súbito y muerte súbitos.)
- Rosón, JF, Bailén, M.R., Rodrguez, J.P., Cuadra, JR, Cruz, A.C., and Castellanos, M.D., 2003. Evaluation of the control and funcionamiento of cardiopulmonar reanimation carros of a hospital. Medicina intensiva, 27(6), pp.399-403.https://doi.org/10.1016/S0210-5691(03)79918-5
- Sasson, C., Rogers, M.A., Dahl, J., and Kellermann, A.L., 2010. Predictors of survival from outpatient cardiac arrest: a systematic

- review and meta-analysis. Circulation: Cardiovascular Quality and Outcomes, 3(1), pp.63-81.https://doi.org/10.1161/CIRCOUTCO
 MES.109.889576
- Smith, G.B., (2010). In-hospital cardiac arrest: Is it time for a hospital 'chain of prevention?' Resuscitation, 81(9), pp.1209-1211.https://doi.org/10.1016/j.resuscitation.2010.04.017
- Wendel J. Nurses' Knowledge, Preferences, Practices, and Perceived Barriers: Family-Tree Resuscitation. Ball State University Muncie, Indiana, July 2011,
- Winkelman JL, Fischbach R, Spinello EF. Assessing CPR Training: The Willingness of Teaching Credential Candidates to Provide CPR in a School Setting California State University, Journal Education for Health, 2009; Vol. 22, No.3: Pp.1-11.
- zbilgin,., Akan, M., Hanc, V., Aygün, C. and Kuvaki, B., 2015. Izmir's report evaluates public awareness, knowledge, and attitudes about cardiopulmonary resuscitation. Turkish Journal of Anesthesiology and Reanimation, 43(6), p. 396.
- Zimmerman, D. S., & Tan, H. L. (2021). Epidemiology and risk factors of sudden cardiac arrest. *Curr Opin Crit Care*, 27(6), 613-616.