

MODULE 8: PICOT Individual Class Activities

A. Instructions:

1. Student will be assigned specific topic to work on based with respective clinical unit.
2. Formulate your PICOT question.
3. Find 3 resources that addresses your PICOT question. How much evidence is available to answer your question.
4. For reference use the APA format:  
Example: Thomas, G. (2014). Patient safety and culture of safety: Foundation of excellent health care. Retrieved from <https://www.Centerfortransforminghealthcare.org/assets/4/g/patient-safety-storyboard>
5. Check the PICOT RUBRIC for guidelines.
6. Submit in a typewritten form and 3-4 pages at most to the drop box under PICOT.
7. Submit on or before 5:00PM on September 3, 2021.

B. TOPICS:

Campus	Unit	TOPIC	Student
CMC	South 5	<p><b>1. Novice Nurses to engage in difficult conversation with patient.</b> Communication skills are fundamental to demonstrate internalization of professional skills &amp; care values. But novice nurse continue to report difficult in initiating &amp; engaging in conversation on difficult topics with their patients.</p>	Jacey Hise
CMC	South 6	<p><b>2. Effects of workplace climate or Burnout among medical-Surgical nurses.</b> Burnout is a maladaptive response to work-related stress that is associated with negative consequences for patient, clinicians &amp; healthcare system. Med-Surg nurses are at significantly high risk for burnout related tp patient-nurse ratio, limited resources, long hours &amp; poor management support.</p>	Lila Flores
CMC	South 6	<p><b>3. Nurses' Insight of technology used in language interpretation for patient with limited English proficiency.</b> To provide high quality care for patient with wide linguistic &amp; culture diversity. There has been an increasing emphasis on improving standards of care in clinician-patient communication. Nurses have a responsibility to be cultural competent and as result, many</p>	Dylan Kitten

		health care facilities have implemented policies & protocols regarding professional language interpretation.	
CMC	South 6	<p><b>4. The moral distress of nurses when patient refusal treatment because of cost.</b></p> <p>Nurses watch patient refused beneficial treatment they cannot afford despite of Nursing's moral standard to treat Patients Without regard to financial Constraints within Healthcare system.</p>	Elizabeth Velez
CMC	Heart Center 5	<p><b>5. Nurses address systemic racism during the ongoing COVID-19 crisis.</b></p> <p>There are nurse-specific issues related to the essential for nursing to engage with racism. Nurses need to publicly addresses the fact that they are on the side of the people they serve. People are looking for nurses to lead the unit staff, all places within health care institution where they have some racial &amp; ethnic differences &amp; diversity.</p>	Kaitlyn Patrick
CMC	Heart Center 5	<p><b>6. Magnet Hospital affects nurses in terms of success, value in hiring, retention, &amp; job satisfaction.</b></p> <p>Hospitals that achieved magnet recognition status continue to rise in the united states &amp; globally. However, despite of increasing evidence associating magnet hospitals with superior outcome, some research found slight difference between magnet &amp; non-magnet hospital.</p>	Juliet Osaghae
CMC	Heart Center 5	<p><b>7. Observed barriers to Rapid Response Team activations among nurses.</b></p> <p>Nurses are at the forefront of patient care; their bedside vigilance puts them in an optimal position to detect clinical deterioration quickly &amp; act accordingly. However, despite frequent rounding &amp; safety checks by nurses, patient still experience cardiopulmonary arrest. Nurses faces major barriers when it is necessary to seek additional assistance &amp; resources to manage &amp; stabilize the clinically deteriorating patient by calling RRT.</p>	Taylor Dockray

CMC	ED-Adult	<p><b>8. Preventing falls among elderly patient with mental health issues.</b>        Inpatient falls are among the most common incidents reported in the different unit. Elderly patient with mental health issues is more substantial risk for falls because they take psychotropic medication, experience agitation &amp; have a limited ability to follow instructions &amp; reality limitation.</p>	Alyson Chauncey
CMC	ED-Adult	<p><b>9. Safe and sensitive care to LGBTQ patients &amp; families.</b>        The LGBTQ population has faced continual discrimination. Health disparities have developed over time because of the reluctance of this population to seek medical attention with providers who, often mistreat them, discriminate, or even refused to treat them.</p>	Dakota Clevenger
CMC	Heart center 5	<p><b>10. Devices related to Hospital-Acquired pressure injuries (HAPI).</b>        Nationally, the annual cost of treating HAPI is in billion &amp; became a quality indicative of high-reliability organization, The Center for Medical &amp; Medicaid Service has financially incentivized hospital to reduce HAPI by denying re-imburement for harms.</p>	Alyssa Gonzales
CMC	MICU	<p><b>11. Delirium in Critically ill patient.</b>        Delirium is a complex syndrome prevalent in the intensive care unit. It has been associated with significant morbidity including distress, longer hospital stays, prolonged cognitive impairment and increase mortality.</p>	Karli Workman
CMC	SICU 3	<p><b>12. Critical Care Orientation: Unit based to Centralized.</b>        The continuing nursing shortage &amp; turnover Rates. ICU (Intensive Care Unit) intensify the need for thorough orientation. Program. Successful orientation programs Prepare newly hired nurses to provide safe, High quality patient-centered care.</p>	Amber Bloedel
CMC	SICU 3	<p><b>13. Building staff commitment for early</b></p>	Emily Goolsby

		<p><b>mobility for critically ill patients.</b>  Immobility contributes to many adverse effects in critically ill patients. Early progressive mobility can mitigate the negative effects, but it is not widely implemented.</p>	
CMC	SICU 4	<p><b>14. Post cardiothoracic surgery: safety &amp; effective of early oral hydration.</b>  Patient fast after cardiothoracic surgery because of concern of nausea, vomiting, dysphagia, &amp; aspiration pneumonia. Maintaining NPO status after extubation adds another dimension of discomfort because of the thirst they experience during recovery.</p>	Sheralyn Garrido
CMC	CICU	<p><b>15. Relationship between intubation setting, presence of aspiration biomarkers, and clinical outcomes.</b>  Oral endotracheal is performed in a variety of setting with different airway access complexities. Emergency department, ICU &amp; pre-hospital intubation are more urgent &amp; less controlled. Environmental condition, lighting, &amp; working space further complicates oral endotracheal intubation &amp; airway management.</p>	Jenna Dixon
CMC	ED-Adult	<p><b>16. Unit Nursing Leaders competency during disaster, emergencies &amp; outbreaks.</b>  Nurse leader's competency in disaster planning &amp; preparedness is vital to effective management. Nurse leaders must also have competency to execute response plan, lead response &amp; recovery effort.</p>	Brandon Thomas
CMC	ED Adult	<p><b>17. Nurses' role in Trauma-related hemorrhagic shock care management.</b>  Hemorrhagic shock remains a primary cause of death from traumatic injury. Emergency nurses play a vital role in the assessment &amp; management of care. However vast literature discussed the role of physician or paramedics but few literatures about role of ED nurses.</p>	Madison Gage
W & C	ED-Pedi	<p><b>18. Domino effect of the Pandemic among</b></p>	Lily Fields

		<p><b>children &amp; family diagnosed with COVID-19.</b></p> <p>Societal disruptions pose threats to safety, mental health &amp; family stability. COVID-19 have caused enormous loss &amp; suffering for people across the global. There are some social consequences including isolation, economic hardship, family relationship stress, disruption of education &amp; erosion of mental health.</p>	
W& C	PICU	<p><b>19. Compassion fatigue among PICU Nurses</b></p> <p>PICU nurses have high rates of burnout &amp; secondary traumatic stress which can result for low compassion satisfaction.</p>	Klaryza Torrez
W & C	PICU	<p><b>20. Importance of Navigator-Based intervention to support communication in PICU.</b></p> <p>Communication in PICU between families &amp; health care team affects the family experience &amp; patient outcomes. High quality communication can result in decrease of failed care plans &amp; same time honor the values of patient &amp; their family.</p>	Macee Reed
W & C	PICU	<p><b>21. “Good Death” in Pediatric Intensive Care Unit.</b></p> <p>Societal attitudes about end-of-life events are odds with how, where &amp; when children die. Parent’s ideas about what constitutes a “good death” in PICU vary widely. Sudden or traumatic death require clinicians’ close attention to fast-evolving symptoms as well as acknowledgement of families in crisis.</p>	Keaton Carothers
W& C	PICU	<p><b>22. Nurse-Sensitive quality metrics to Benchmark in Pediatric cardiovascular care.</b></p> <p>Nursing care has a significant impact on patient outcome in pediatric setting. It is important to determine the current state of pediatric patient’s cardiovascular state.</p>	Miure Mathew
W C	NICU	<p><b>23. NICU “Baby steps” discharge checklist.</b></p>	Ashley Hagood

		Transition to home is critically important. The care goals is to ensure parents have the necessary knowledge, skills & resources to care for their child.	
W & C	NICU	<p><b>24. Formula vs. Donor breast milk for Preterm low-birth weight infant.</b></p> <p>The growth &amp; development of preterm can be a challenged by gastrointestinal immaturity. Breast milk is the best source but unavailable at times. The next option is either formula or donor breast milk.</p>	Mariah Newton
W & C	NICU	<p><b>25. Importance of adequate communication in the Neonate Intensive care unit.</b></p> <p>THE NICU is a distressful environment for parents. Throughout the admission, parents interact with the healthcare team. The process of communication is essential. Good communication assure that parents feel more involved in the care of their child.</p>	Amanda Dunkle
W & C	NICU	<p><b>26. Respectful care in the Neonatal Intensive care.</b></p> <p>The ability for the mother to achieve the highest level of autonomy during the NICU stay relies on the ability to comprehend &amp; understand the course of care. Providing support to the mother to assume opportunities for bonding &amp; care provision are essential.</p>	Jacqueline Perez
W & C	Mom & Baby	<p><b>27. Alcohol use in Pregnancy</b></p> <p>Alcohol consumption during pregnancy can influence fetal development, causing lifelong behavioral, intellectual &amp; physical impairments known as FETAL ALCOHOL SPECTRUM DISORDER. Despite it is recognized risks, alcohol use in pregnancy is still common.</p>	Francesca Abuda
W & C	Staffing	<b>28. Reproductive care during COVID 19.</b>	Laura Contreras

		<p>Radical shifts in the way the reproductive care is provided &amp; how women experience it have occurred during the COVID-19 pandemic. The crisis is reshaping reproductive care in way that could have a long-lasting impact.</p>	
W & C	ED Pedi	<p><b>29. Correlation of Pediatric Autoimmune Neuropsychiatric disorder (PANDAS) with Streptococcal infection.</b>  If PANDAS is undiagnosed &amp; untreated can suddenly &amp; drastically disrupt the lives of previously healthy child &amp; family. The key is prompt diagnosis &amp; appropriate treatment is to provide awareness that Strep infection may present with neuro psychiatric symptoms.</p>	Kate Harkey
W & C	Pedi	<p><b>30. Nurses' point of view in addressing Multi drug resistant pathogens in Pediatric Palliative care patients.</b>  Children with life-limiting conditions have significantly increased risk of multi drug resistance pathogens colonization. Caring requires the application of safe hygiene concept however isolation reduce the quality life of patients &amp; families.</p>	Zachary Taylor
W & C	Pedi	<p><b>31. Understanding of advance care planning in children with medical complexity (CMC)</b> often have multiple life-limiting conditions with no unifying diagnosis &amp; an unclear prognosis. Advance care planning conversation be uniquely tailored to this population.</p>	Taylor Burris
W & C	ED Pedi	<p><b>32. Impact of COVID-a9 to the mental health of children.</b>  School closure extensively disarray the lives of students &amp; their family. Also, have consequences for child health, mental health. . Most mental health disorders begin in childhood. If untreated, mental health problems can lead to many negative health &amp; social issues.</p>	Calla Beard

W & C	Pedi	<p><b>33. Approaches to empower nurses to feel respected &amp; supported.</b></p> <p>Situations are always difficult when a nurse adamantly disagree with a decision made by the nursing leaders. These situations become more complicated when the nurse feel disrespected or not supported by their decisions.</p>	Adrienne Rey
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W & C	Pedi	<p><b>34. Provision of Evidence-Based Practice during the COVID-19 pandemic.</b></p> <p>In different ways the COVID 19 pandemic is unexplored water in health care, yet in other ways it is not. Ensuring that nurses seek &amp; rely on credible sources to guide nursing care during a pandemic is essential to counter anxiety &amp; chaos.</p>	Breanna Luer
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