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"EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING BASIC LIFE SUPPORT AMONG ALLIED HEALTH SCIENCE STUDENTS (B-PHARM) OF SELECTED COLLEGE AT CHENNAI"

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ABSTRACT

Cardiac arrest is characterized by the absence of pulse and breathing is an unconscious victim. The current approach for CPR is the chest compression-airway-breathing (CAB) sequence. Sudden cardiac arrest is rapidly becoming the leading cause of death. Once the heart ceases to function, a healthy human brain may survive without oxygen for up to 4 minutes without suffering any permanent damage. It is during those critical minutes that CPR (cardio pulmonary resuscitation) can provide oxygenated blood to the victim's brain and the heart, dramatically increasing his chance of survival. If properly instructed, almost anyone can learn and perform CPR. Recommending that chest compressions be the first step for lay and professional rescuers to revive victims of sudden cardiac arrest, the association said the A-B-Cs (Airway-Breathing-Compressions) of CPR should now be changed to CA-B (Compressions-Airway-Breathing).For more than 40 years, CPR training has emphasized the ABCs of CPR, which instructed people to open a victim's airway by tilting their head back, pinching the nose and breathing into the victim's mouth, and then giving chest compressions. This approach was causing significant delays in starting chest compressions, which are essential for keeping oxygen-rich blood circulating through the body. Changing the sequence from A-B-C to

C-A-B for adults and children allows all rescuers to begin chest compressions right away. People who handle emergencies such as police officers, firefighters, paramedics, doctors and nurses are all trained to do CPR.

KEYWORDS: Quasi experimental, effectiveness, cardiac arrest, basic life support

INTRODUCTION:

Basic life support (BLS) consists of a series of actions and skills performed by the rescuer based on assessment findings. The first actions the rescuer performs on finding an adult victim are to assess for responsiveness and to look for signs of breathing. This is done by tapping or shaking the victim's shoulder and asking, "Are you all right?" and scanning the victim's chest for signs of breathing. If the victim does not respond, there is no breathing or abnormal breathing. If the victim does not respond, there is no breathing or abnormal breathing (e.g., agonal gasps), and the rescuer is alone, the rescuer shouts for help. If someone responds, the rescuer sends him or her to activate the emergency defibrillator (AED)(if available).if no one responds, the rescuer activates the ERS, gets an AED, returns to the victim, and begins cardiopulmonary resuscitation (CPR) and defibrillation if necessary.

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OBJECTIVES:

1. To assess the knowledge level regarding cardio pulmonary resuscitation among pharmacystudents in selected college.

2. To find out the relationship between pretest and posttest knowledge score regarding CPRamong pharmacy students.

3. To evaluate the effectiveness of structured teaching program on knowledge regarding cardio pulmonary resuscitation among pharmacy students in selected college

4. To find out the association between knowledge regarding cardiopulmonary resuscitationamong pharmacy students with selected demographic variables.

METHODOLOGY:

The research design used for the present study was pre experimental one group pretest, posttest design. The research setting was Sree Balaji Medical College and Hospital Faculty of Pharmacy, Chennai-44. Sample size was 60 students selected by non-probability convenient sampling technique.

RESULT:

In pre-test majority of the pharmacy students 60(100%) have inadequate knowledge. No one has moderately adequate or adequate knowledge regarding basic life support. It denotes that the pharmacy students have very less or no knowledge about basic life support. In post-test 29(48.3%) gained moderately adequate knowledge, 28(46.6) gained adequate knowledge, 3(5.1) had inadequate knowledge. Also the pre-test mean and standard deviation was 33.5 and 6.1. The post-test mean and standard deviation was 70.2 and 3.4. The paired't' test value was 689, which reveals there was statistically highly significant at $p<0.001$. Therefore, the structured teaching program regarding basic life support among the allied health students (B-Pham) was found to be effective.

All the demographic variables had no association with the post-test level of knowledge.

CONCLUSION

The Results of the study shows that the structured teaching program was effective in improved their knowledge level regarding basic life support. Furthermore with changes in lifestyle many non-communicable diseases like coronary artery diseases, diabetes are on trends so, there are higher chances for people getting heart attack. Thus, the basic life support training programme can be implemented in colleges for the teachers as well as the students in order to save the life in emergency situations like sudden cardiac cardiac arrest and choking.

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