"AWARENESS REGARDING CORONARY ANGIOGRAPHY"

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ABSTRACT

Human being healthy should be ingredient of your overall daily life. living wage a healthy daily life can help out prevent chronic diseases and long-term illnesses. Feeling good about yourself and taking care of your health are important for your self-esteem and self-image. Maintain a healthy lifestyle by doing what is right for your body. **STATEMENT OF THE PROBLEM**"A Descriptive Studies To Assess The Knowledge Regarding Coronary Angiography Among 2nd Year G.N.M. Students In Selected Nursing College At Visnagar."**OBJECTIVES** 1.To assess the knowledge of G.N.M. students regarding coronary Angiography. 2. To find the association between the knowledge scores with selected Socio Demographic variables. **DESIGN:** Cross sectional research design**PARTICIPANTS:**It refers to GNM Studentsthose who studying in 2ND YEAR GNM standard at Nootan College of Nursing, Visnagar. **CONCLUSION**: The study concluded that Knowledge coronary Angiography.A disease is an abnormal condition heartwarming the body of an organism. It is often construct to be a medical condition allied with precise symptom and sing. It may cause by tangential factor such as transferable illness or it may be caused by interior dysfunctions, such as autoimmune disease. In human, Illness' is often used more mostly to refer to any circumstance that causes sting, dysfunction, pain, collectivepredicament, or fatality toThehuman beingafflict, of analogousharms for individuals for individuals in get in touch with the person.

KEY WORDS: Knowledge,coronary angiography, 2ND Year Students.

INTRODUCTION

Human being healthy should be part of your on the whole daily life. Living wage a healthy daily life can help put off unrelieved diseases and long-standingillness. Sensitivitygood qualityin relation tophysically and pleasingbe concerned of your health are essential for your self-respect and opinion of yourself. Sustainanin good physical shapestandard of living by responsibility what is accurate for your corpse.[1]

Severalillnessesareusuallyaccompanied by signalong withsymptom that confer us asuggestionwith the intent of all is not well through the implementation of the physically organs and structure. Accordingly these symptoms are second-hand as indicator which is of assistance in diagnose the category of illness.[2]

Cardiovascular diseases are the world'sleadingkiller, claim 17.1 million lives a year. Tobacco makes use of, bad for yougo on a diet, substantialsluggishness and destructivebe relevant of alcohol increase the risk of cardiovascular disease. Angiography is universallysecond-handpersistentcourse of action to diagnose structural and efficientillness of heart and immensevessel.[1,2]

Coronary angiography is performing to identifyobstacle in the coronary artery of the heart. A coronary angiogram is a course of action that uses X-ray imaging to perceive your heart's blood vessels. Angiography is also called a cardiac catheterization. In that course of action prevention inclusion of radiopaque catheter keen on the bulky vein and artery as of change in catheter model radiographic depiction and distinguishmedium, and the flowering of new-fangledoption for the dealing of coronary artery disease coronary angiography was industrial into a safe and widely practiced of cardiac catheterization.[3]

Ananalysiswith the aim of can be perform on each side of the heart cardiac angiography confirm the strength of your blood vessels and how blood flows in the course of them. It can rally round to analysis or studyvarioustroublesdisturbing blood vessels, as well as atherosclerosis reduction of the arteries, which could mean you're at risk of have a stroke of heart attack.[4]

METHODOLOGY

Research approach: Quantitative Research Approach

Researchdesign: Cross sectional research design

Study setting: The Studywasconducted in Nootan College of Nursing, Visnagar.

Population: GNM Students.

Target population: It refers to the studying in 2ND Year GNM

Accessible population: It refers to the studying in 2ND Year GNM in Nootan College of Nursing, Visnagar.

Sample: Thesampleforthepresentstudycompriseof 60 of GNMNootan College of Nursing, Visnagar.

Samplingtechnique: Purposivesamplingtechnique

Sample size: 60

Tool: Self-administeredquestionnairewasdoneto   checkthe   clarityoftheitems,   their feasibilityandpracticability.

SAMPLINGCRITERIA

➢ **Inclusion criteria:**

The students;who are

- 2nd year G.N.M students who are studying in selected nursing school at visnagar.

- 2nd year G.N.M students who can understand, comprehend and respond to English.

- 2nd year G.N.M students who are willing to participate.

➢ **Exclusion criteria:**

The 2nd year G.N.M students; who are

- Not willing to participate in the study.

- Not available during the study.

STATISTICALANALYSIS

Description of tool:

Self administered knowledge questionnaire,Self administeredknowledge questionnaire is a structured questionnaire which consists of 2 sections.

Section A:

Socio-Demographic Data: The first part of the tool consists of seven items for obtaining information of the selected socio demographic factors such as age, gender, religion, type of family, place of residence and source of information.

Section B:

Self-administered knowledge questionnaire, Self-administered knowledge questionnaire was prepared in the form of multiple choice questions. It consists of 30items regarding Coronary Angiography.

The 'Total maximum score is 30'

- 'For every right answer the score is – 1'

- 'For every wrong answer the score is – 0'

The knowledge level has been arbitrarily divided in to three categories based on the knowledge score.

Poor knowledge: 0 - 33.33 %

Average knowledge: 36.33% - 66.67%

Good knowledge: 70% - 100%

Table 2: scoring and interpretation

LEVEL OF KNOWLEDGE	SCORE	PERCENTAGE
POOR	0-10	0 - 33.33 %
AVERAGE	11-20	36.33% - 66.67%
GOOD	21-30	70% - 100%

Both descriptive and inferential statistics were used to analysis the data. The analysis and interpretations of

data collected from 60 GNM students to assess the knowledge regarding the coronary angiography of

Nootan College of nursing, Visnagar.

The data were examined using the Mean, Standard deviation, t-test, and chi-square test.

Table 2: Frequency distributed according to level of knowledge.

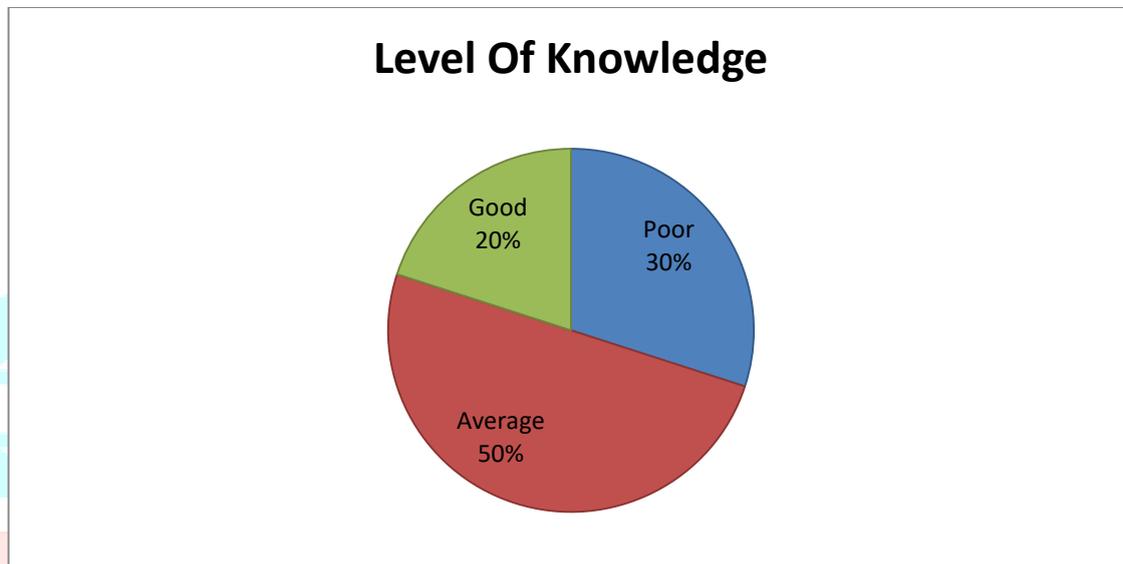| LEVEL OF KNOWLEDGE	SCORE	FREQUENCY	PERCENTAGE
POOR	0-10	18	30%
AVERAGE	11-20	30	50%
GOOD	21-30	12	20%

Figure I: Frequency distribution according to level of knowledge.

Table 3: Frequency distribution of subjects according to their socio-demographic data n = 60

SR.NO	SOCIO DEMOGRAPHIC VARIABLES	FREQUENCY (F)	PERCENTAGE (%)
1	**Age(in yrs)**		
	20-24	14	23.33
	25-29	34	56.66
	30 and above	12	20
2	**Gender**		
	Male	28	46.66
	Female	32	53.33
3	**Religion**		
	Hindu	50	83.33
	Muslim	7	11.66
	Christian	3	5
	other	0	0
4	**Type of family**		
	Nuclear	22	36.66
	Joint	21	35
	Extended	17	28.33
5	**Place of Residence**		
	Rural	13	21.66

	Semi Urban	29	48.33
	Urban	18	30
6	**Source of information**		
	Self reading	23	38.33
	Mass Media	18	30
	Family / relatives	10	16.66
	Magazines/ books	9	15

Table 4: Mean, SD value of knowledge score about coronary angiography

No of sample	Total score	Mean	Standard Deviation
60	869	14.483	6.137

Table 6: Association between the knowledge scores with their selected socio demographic variables.

n = 60

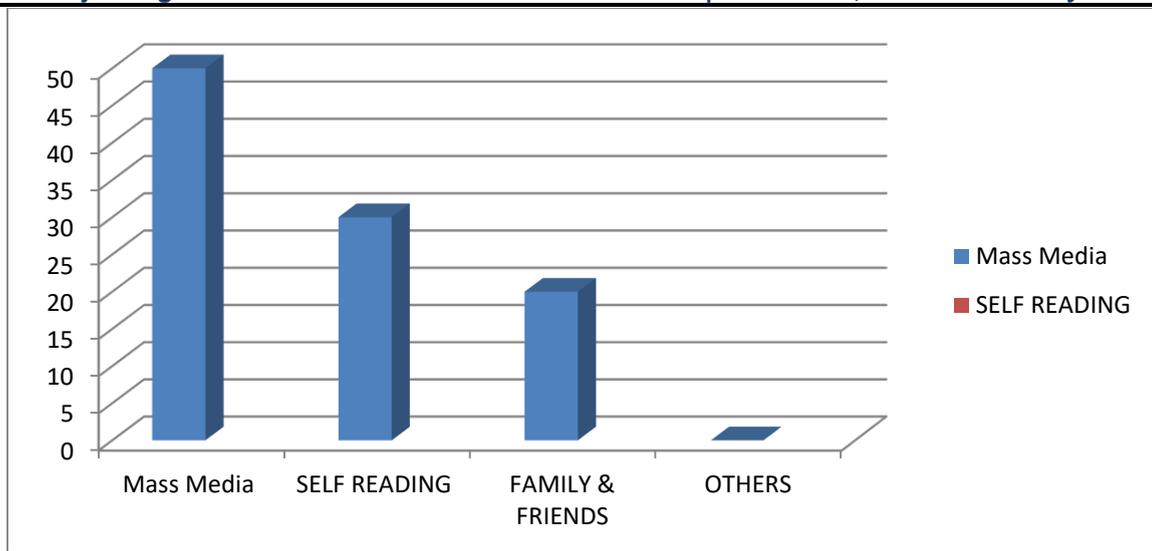| SR.NO	SOCIO DEMOGRAPHIC VARIABLES	GOOD	AVERAGE	POOR	Chi square x^2 value
1	**Age(in yrs)**				
	20-24	3	7	4	x^2= 1.007
	25-29	7	18	9	df - 4
	30 and above	2	5	5	**NS**
2	**Gender**				
	Male	5	13	10	x^2=0.82
	Female	7	17	8	df – 4 **NS**
3	**Religion**				
	Hindu	6	28	16	x^2=12.85
	Muslim	4	2	1	df – 4
	Christian	2	0	1	**S**
	other	0	0	0	
4	**Type of family**				
	Nuclear	3	12	7	x^2=1.85
	Joint	6	10	5	df – 4
	Extended	3	8	6	**NS**
5	**Place of Residence**				
	Rural	3	6	4	x^2=6.027
	Semi Urban	6	18	5	df – 4
	Urban	3	6	9	**NS**
6	**Source of information**				
	Self reading	4	12	7	x^2=4.657
	Mass Media	6	8	4	df – 9
	Family / relatives	2	5	3	**NS**
	Magazines/ books	0	5	4	

Figure 6: Bar graph showing percentage distribution of subjects according to their source of information

Conclusion:

This study helps the nurse researcher to develop an appropriate health education tools for educating GNM Students regarding Coronary angiography, nurse play the important role in health care delivery system. The nurse can insist on the entire student nurse regarding coronary angiography, their complication and prevention. It implies that a nursing administrator should tack part in developing protocols, standing orders related to design of the educational program me and strategies for GNM Students regarding Coronary angiography

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