A Study To Assess The Effectiveness Of A Planned teaching Programme On Glasgow Coma Scale Of Head Injury Patient In Terms Of Knowledge And Practice Among Staff Nurses Working In Intensive Care Units Of Selected Government Medical College Attached Hospitals Of Gujarat State

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1. INTRODUCTION
About 1,25,000 acquire a disability every year secondary to TBI. About 9,700,000 Indians are living with disabilities related to TBI. Most affected are those within 15-25 years of age. Brain injuries can be classified into mild, moderate, and severe categories. The Glasgow Coma Scale (GCS), the most commonly used system for classifying TBI severity, grades a person's level of consciousness on a scale of 3–15 based on verbal, motor, and eye-opening reactions to stimuli. It is generally agreed that a TBI with a GCS of 13 or above is mild, 9–12 is moderate, and 8 or below is severe. Information about the cumulative research findings on the predictive ability of GCS scores aids nurses in providing support and education to family members during the acute stage of injury, and in coordinating the services of members of the healthcare team, which could result in improved outcomes for both patient and family.

2. OBJECTIVES
1. To assess the knowledge of staff nurses before and after administration of Planned Teaching Programme on Glasgow coma scale of Head Injury Patient in Intensive Care Units of Selected Government Medical College attached Hospitals of Gujarat State.
2. To assess the practice of staff nurses before and after administration of Planned Teaching Programme on Glasgow coma scale of Head Injury Patient in Intensive Care Units of Selected Government Medical College attached Hospitals of Gujarat State.

3. METHODS
The study was quasi experimental in nature with one group pre-test post-test design. The Planned teaching programme on Glasgowcoma scale was developed by reviewing the extensive Literature on maintenance of Glasgowcoma scale in terms of knowledge and practice. The samples of 40 staff nurses were selected through purposive sampling technique. A structured knowledge Questionnaire and structured observational checklist were prepared to assess the knowledge and the practice of the samples.
4. RESULTS

The mean Posttest Knowledge score 28.25 was higher than mean Pretest Knowledge score 14.0250 with the mean difference of 14.225. The mean posttest practice score 5.2 was higher than the mean pretest practice score is 1.37 with The mean difference of pretest and posttest practice score was 3.27. Significance of the difference between pretest and posttest knowledge and practice was statistically tested using paired ‘t’ test and it was found significant.

5. CONCLUSIONS

The data demonstrated there was significant increase in the knowledge and practice of the staff nurses after the administration of the planned teaching programme on Glasgow coma scale. Hence it is concluded that planned teaching programme was effective in improving the knowledge and practice of the staff nurses working in the Intensive Care Units.

6. RECOMMENDATIONS

The following recommendations are made on the basis of the findings of the present study.

1. A similar study can be replicated on a large sample covering the different department of the hospitals.
2. A comparative study can be conducted related to Glasgow coma scale assessment in Government Hospital attached Medical College and in Private Hospital of the Gujarat State.
3. A similar study can be undertaken with a control group design.
4. A study can be conducted which include revised trauma score for staff nurses.
5. A comparative study can be conducted to find out the effect of different teaching methods in improving knowledge and practice of nurses.
6. Similar study can be conducted on nursing student either B.Sc. (N) or G.N.M.

REFERENCES