

Reduction of Birth Asphyxia and Related Complications in West Africa

Rebecca Poore, APRN MSN CCRN DNP Candidate, Oklahoma Wesleyan University Bartlesville Ok

Topic: Leading & Advancing Improvements in Health, Health Care, & Higher Education

Category: Quality Improvement/Evidence-Based Practice Project

Abstract

Background/Introduction

The moment of birth is vital for life called the Golden Minute, that requires intervention of the healthcare providers to provide an open airway to promote proper oxygenation for the neonate. The sixty seconds of ventilation can provide prevention of complications of asphyxia such as cerebral palsy, mental retardation, hypoxic ischemic encephalopathy, poor feeding resulting in failure to thrive, and muscular weakness.

Purpose

The purpose of the quality improvement DNP project is to reduce complications of asphyxia as a result of the intervention of the neonatal resuscitation course, Helping Babies Breathe. With the proper training of resuscitation evidence of asphyxia will be reduced.

Methods or Processes/Procedures

The design of the DNP project was a qualitative quasi-experimental research design. The intervention was a resuscitation course. The sampling method was a convenience sample.

Results

The Apgar scores at 1 min and 5 min before and after training were the dependent variables. The Thompson asphyxia scale was performed on every baby. The statistical test of the two-sample t-test was performed of the Apgar scores, which showed no significance. The Thompson scale showed clinical significance. The pre-and post written testing of the healthcare professionals means were not statistically significant.

Limitations

There were limitations with the demographic data form that will be expanded in the future, to maintain the wording to consist from all the participants. There would be pre-intervention material handed out to the healthcare professionals to complete. There would also be pre-intervention scenarios of OSCE with the use of simulation dolls, suctioning performance, and performance of bag-mask proper use. The length of time would be expanded.

Conclusions/Implications for Practice

Asphyxia are life changing and complex for the neonates medical care and family members. Prevention is the best avenue for the neonate. With every birth there must be a trained worker to manage the care of the birth with the first 60 seconds of life.

Biography

Rebecca Poore DNP ARNP FNP-C CCRN-K Education History: Doctor of Nursing Practice with Emphasis in Executive Leadership Oklahoma Wesleyan University Bartlesville Oklahoma. Graduated August 28, 2023 Master of Nursing with Family Nurse Practitioner. Graceland University, Independence Missouri Graduated August 2006 Employment History: Transitions Life Care Tulsa, Oklahoma Dates May 2013-present Oral Roberts University Tulsa, Oklahoma Assistant Professor 21 years/ International clinical coordinator at Manna Mission Hospital Accra, Ghana 13 years. Benin City, Nigeria 2 years. Dates: January 2002-May 2023 Cancer Care Associates Tulsa, Ok Radiology clinic Dates: 2010-2011 Pediatric Surgery Inc Tulsa, Ok Dates: Jan 2007- 2009

Contact Information

Rebecca Poore, DNP APRN FNP-BC CCRN-K
DNP APRN FNP-BC
Oklahoma Wesleyan University Bartlesville Ok
rebeccapoore50@gmail.com
(918) 853-8399
