

significantly associated with age, weaning status and GCS of the patient ($p < 0.05$). Patients with lower GCS had higher chances of reintubation. Reintubation was not associated with sex, operation status and time of extubation.

Conclusion: The rate of unwanted extubations and subsequent reintubations in Neuro ICU, can be decreased with protocol based monitoring, and through well maintained registers by neuro nurses. The knowledge of determinants of self extubation and the predictive factors of reintubation can be used as an effective tool by Nurses, for the prevention of self extubation and accompanying complications.

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Assessment of the Knowledge and Skills in Caring for Life Threatening Arrhythmias among Nurses working in Critical Care settings at Muhimbili National Hospital, Dar-es Salaam, Tanzania

Dinnah I. Rubwanya

Emergency Medicine Department, MUHIMBILI NATIONAL HOSPITAL, DAR ES SALAAM/Tanzania

Study/Objective: The main objective of this study was to assess knowledge and skills in caring for life-threatening arrhythmias among nurses working in critical care settings at Muhimbili National Hospital (MNH).

Specific Objectives: 1. To determine the level of knowledge among nurses regarding caring for life-threatening arrhythmias in critical care settings at MNH. 2. To recognize skills of nurses regarding caring for life-threatening arrhythmias in critical care settings at MNH. 3. To identify barriers to acquiring higher knowledge and skills in caring for life-threatening arrhythmias among nurses in critical care settings at MNH.

Background: Life-threatening arrhythmias, if not intervened immediately, can cost a patient's life. There is no clear understanding on the nurse's knowledge and skill level in the areas of life-threatening arrhythmias, caring, and arrhythmia identification at Muhimbili National Hospital (MNH). Meanwhile, the intensity of barriers met by nurses on achieving higher levels of knowledge and skills in developing countries, including Tanzania, are significantly not analyzed. The aim of this study was to assess knowledge and skills in caring for life-threatening arrhythmias among nurses working in critical care settings at MNH.

Methods: A descriptive, cross-sectional study design was used while a convenience sampling method was employed. Data were analyzed by using SPSS Version 20.0. Results were presented in frequencies and percentages and presented using figures, tables, and text.

Results: The majority of the participants (60%) were identified as having high knowledge, while observational skills in caring for life-threatening arrhythmias among study participants was generally poor (15.6%). The most barriers identified in acquiring higher knowledge and skill was stress caused by overwhelming workload (68.8%).

Conclusion: The study revealed that nurses have a high knowledge level; however, the observational skills were low in

caring for patients with life-threatening arrhythmias. A high level of knowledge might be due to training performed; yet skills were low due to minimal usage of available equipment or guidelines.

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A Survey on Disaster Preparedness Knowledge and Attitudes of BAVU Nursing Department Students

Özcan Erdogan¹, Akif M. Donmez², Gizem Asar³, Duygu Yilmaz³

1. Disaster Management, bezmialem vakif university, istanbul/Turkey
2. Dİsaster Medİcİne Doctorate Programme, BEZMİALEM VAKİF UNİVERSİTY INSTITUTION OF HEALTH SCIENCES, ISTANBUL/Turkey
3. Nursİng Department, BEZMİALEM VAKİF UNİVERSİTY FACULTY OF HEALTH SCIENCES, ISTANBUL/Turkey

Study/Objective: The survey was aimed to determine knowledge and attitudes of BAVU (Bezmialem Vakif University/Istanbul-Turkey) nursing students as part of disaster preparedness.

Background: A disaster is something that affects our surroundings in such a negative way. It happens so unexpectedly and opens doors to many different crisis. The habitats for all human, plant, and animal has different kind of risks. Society had immigrated because of wars, diseases and seasonal differences. Health Professionals are expected to be ready for these catastrophic conditions.

Methods: Under the main three titles (demographic information, the level of information, attitude and behavior level), a total of 54 questions were addressed to 200 nursing students.

Results: All participants fulfilled the questionnaire. The results were adequate for assessment. The results emphasized that all factors (age, gender, class, marital status, city and country) affect the awareness of disasters. Health professionals are considered to have adequate knowledge and ability for disaster responses. Education procedures must be proactive and updated due to new situations.

Conclusion: As a result, countries of the whole World can stay in touch with disaster as a natural process. Last of all, disease, death, loss of function and reduction of labor due to disaster, countries must be ready to face such problems. The price to put against disaster, to minimize the loss and destruction of natural phenomena in the society against the general attitude, seems to depend on the level of knowledge and consciousness. Disaster planning, discipline and support should be implemented. It should not only be theoretical, but also ready for implementation. Nurses may encounter many traumatic situations and should be admitted to team work before and after the disaster. Participation in the exercises made within the scope of Hospital Disaster Plans can provide this.

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Success Strategy for Nursing Professionals in Health and Disasters

Yudix Ferreira Rodríguez¹, Inarvis Medina González², Norberto Valcárcel Izquierdo³, Guillermo Mesa Ridel¹, Eva C. Apodaca Pérez¹

1. Situaciones Especiales En Salud Pública, Escuela Nacional de Salud Pública (ENSAP), La Habana/Cuba
2. Investigaciones, Escuela Nacional de Salud Pública (ENSAP), La Habana/Cuba
3. Educación Avanzada, Instituto Superior pedagógico Enrique José Varona, La Habana/Cuba

Study/Objective: This was descriptive, cross-sectional research conducted in the Latin American Center for Disaster Medicine (CLAMED) in the period from March 2010 to October 2013. The objective that was developed: Designing a strategy for the improvement of nurses in helping to raise their professional skills in disaster.

Background: Some of the most serious consequences of disasters are often: the impact it has on populations with increased morbidity and mortality, deterioration of environmental hygiene, the risk of epidemics, damage to health infrastructure, inaccessibility to services, and involvement in the development of health programs. Thus, the higher the vulnerability, there will be an increased risk of the occurrence of disasters and the exponential association of the frequency and intensity of threats. As such, governments and health systems in many countries should focus their efforts on preparing health professionals, as well as for the prevention and mitigation of disasters.

Methods: The research, supported in different areas of knowledge, made possible the construction of its theoretical framework, relying on documentary analysis, system approach, modeling, and historical and logical thought. From the research process, the level of knowledge of nurses on disaster risk reduction was diagnosed, and in that sense, a strategy that asks for consideration was prepared.

Results: It was found that 66.6% had not received readying on the issue Health and Disasters. It was evident that general disasters and organization of prehospital and hospital care in disaster situations were the issues that most impacted the level of knowledge, behaving 24.6% and 18.1%, respectively. They were diagnosed as having an insufficient level of knowledge for disaster risk reduction.

Conclusion: A strategy for nurses in Health and Disasters showing a harmonious configuration in the system, given the close link between the different organizational forms of post-graduate training in Cuba, was designed.

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Evaluation on the Myth Evaluations of Nursing Students on Elders in Cases of Disasters and Emergencies

Cüneyt Çalışkan¹, Hüseyin Koçak¹, Arife Silabçılar², Seyran S. Şenveli²

1. Emergency Aid And Disaster Management, Çanakkale Onsekiz Mart University, Çanakkale/Turkey
2. Nursing, School of Health, Çanakkale/Turkey

Study/Objective: This study aims to examine some factors that affect the myth evaluation of students studying at the Nursing Department of a university, on elders in cases of disasters and emergencies.

Background: Even though there are many evidence-based studies on disasters, there are many mis-informations (myths) about its medical and social outcomes. Myth evaluations constitute one of the first steps of helping the elderly population.

Methods: The cross-sectional epidemiological study has been conducted on the students of Çanakkale Onsekiz Mart University, Department of Nursery. The data of the research has been collected by means of a survey that had been composed by the authors. Within the survey, some questions of a survey study used in a research about elders by the UN Office for Disaster Risk Reduction (UNISDR), and the myth questions from the book *International Disaster Nursing* (Editors: Robert Povers & Elaine Daily, 2010). In the research, the elder vulnerability index, elder valence index and elder myth index have been generated. In the further analysis of the data, the logistic regression method where the elder myth index in dichotomous structure, was included as a dependent variable, has been used.

Results: In all, 80,4% of the 377 students participating in the study are women, 56,0% of them are junior class students, 93,6% of them are living with both their parents, and 38,5% of them have experienced disasters. In the group where the average (SS) age is 19,89 (1,7), the average points of the participants are 2,97 (1,07) for the elder myth index, 30,94 (6,19) for the vulnerability index, and 6,41 (1,73) for the valence index. According to the logistic regression result, the junior classes are ranking 2,11 (GA: 1,06 – 4,23, p < 0,05) times above the elder disaster myth index average.

Conclusion: Myth evaluations of the students about the elder individuals in case of emergencies and disasters should be improved.

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Development and Effect of a Multi-Modality Disaster

Training Program for Hospital Nurses

Jiyoung Nob¹, Hyun Soo Chung²

1. Center For Disaster Relief, Training, And Research, Yonsei University Severance Hospital, Seoul/Korea, Republic of
2. Emergency Medicine, Yonsei University College of Medicine, Seoul/Korea, Republic of

Study/Objective: To develop a multi-modality disaster training program for hospital nurses, and to investigate the effect of the program.

Background: Despite the importance and perception of nurses in disaster crisis, a standardized program to develop competencies is still lacking in Korea. There are few programs focusing on the prehospital aspect of disaster, but none exist that focus on nurses left in the hospital to care for victims transported from the scene. Since disaster response requires multiple aspects of competencies, such as triaging, incident command, life-saving procedures, teamwork, communication, and leadership, it is important to develop a multi-modality training program that is best suitable for the content to be trained.

Methods: The educational intervention consisted of a 3-day workshop (see Table below) for a selected 24 emergency nurses. Pre- and post-surveys were conducted to evaluate the differences in perception of disaster nursing. Disaster Preparedness