

Can Nurses master Pediatric Cardiac Auscultation (following appropriate Teaching and Practice)?



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Introduction.

Pediatric cardiac auscultation (PCA) proficiency is a key clinical skill, fundamental for the efficiency of any pediatric cardiovascular disease (CVD) screening program and for a cost-effective use of pediatric cardiology services. We aimed to test the **hypothesis** that following structured teaching **non-medical personnel (nurse students) can also become masters of PCA**

Methods

- Pilot study
- two volunteer nurse students
- full attendance of a **3-month teaching program of PCA** including attendance
 - 1) **e-learning material** (videlectures) as open-courses free web lectures available at University of Crete web-site (Fig. 1)
 - 2) **interactive, multimedia-based PCA lectures and workshops** for medical students, with reproduction of digital phonocardiograms (Ref.1,2)
 - 3) weekly **attendance of an academic pediatric cardiology outpatient clinic.**
- Teaching outcomes were assessed:
 - 1) both students **validating a series of recorded digital phonocardiograms** representing innocent and abnormal murmurs, additional sounds (clicks, pericardial friction) and heart tone abnormalities (wide S2 split)
 - 2) one student **recording and interpreting digital phonocardiograms of 30 school children** participating on a pediatric CVD screening program.
 - Their performance was **compared to that of 34 medical students** attending the same teaching program (1) and against expert pediatric cardiologist, all validating the same digital phonocardiograms (2)

Results

A. Interpretation of Digital Phonocardiograms against medical students.

Differentiation of normal vs abnormal auscultation

Sensitivity	Specificity	
100%	33%	for both nurses vs
98%	65%	for medical students (mean)

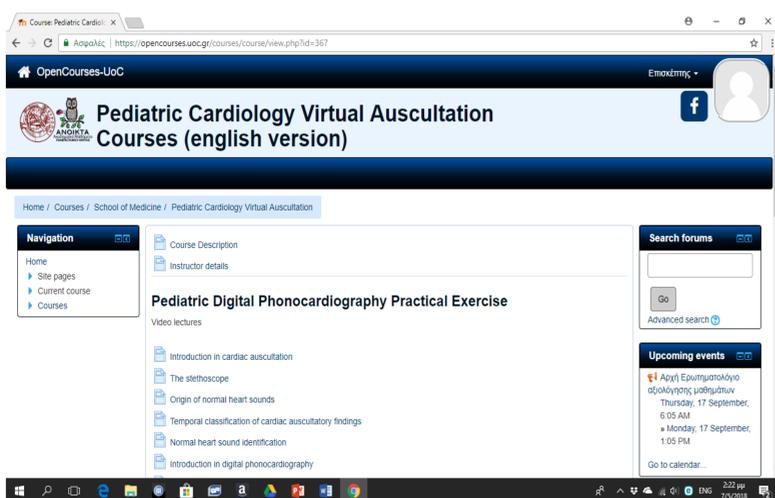
Auscultation quality scores

(composite score of cardiac auscultation detailed description variables)

8,7 and 7,8	for nurse students vs
7,8	for medical students (mean)

B. Interpretation of Digital Phonocardiograms against expert.

- **Complete agreement** in **18/30 validations (60%)** including normal auscultation (n=10), innocent murmur (n= 6), abnormal murmur (n=1), abnormal extra sounds (n=1).
- **Disagreement**
 - a) **detection only by expert:**
 - innocent murmur (n=4),
 - abnormal murmur (n=1),
 - abnormal extra sound (n=2).
 - a) **detections only by student:**
 - innocent murmur (n=3, no murmur by expert),
 - abnormal murmur (n=1, innocent murmur by expert),
 - additional sound (n=2, abnormal murmur in 1 case by expert).



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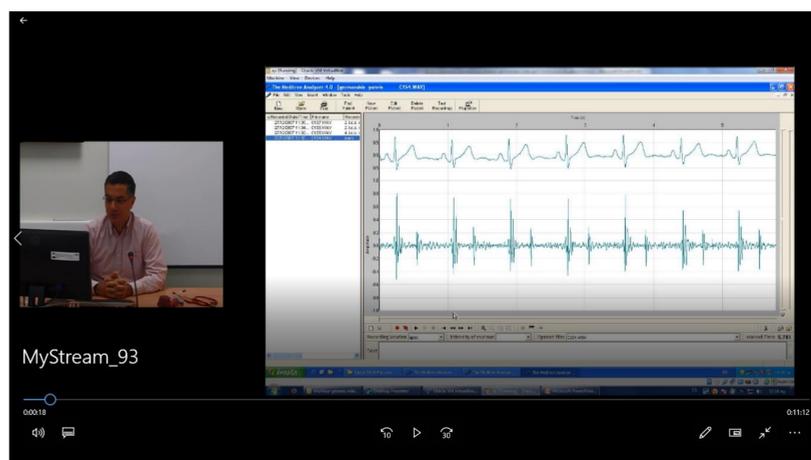


Fig.1 Web-lectures in pediatric cardiac auscultation including digital phonocardiograms

Conclusions

Pediatric Cardiac Auscultation proficiency can be achieved also by non-physicians, including training nurses, following structured intensive teaching combining e-learning and practical exercise.

The role of trained nurses supporting pediatric CVD screening programs, including cardiac auscultation, should be further investigated.

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Authors declare that there is no conflict of interest

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