

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

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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

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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

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