



**Hunter College  
Hunter-Bellevue School of Nursing  
School of Health Professions**

**11<sup>th</sup> Annual Spring Forum &  
Evidence-Based Practice Poster Day  
Wednesday, April 26, 2017**

**Abstract Book**

**Schools of the Health Professions  
Hunter-Bellevue School of Nursing**

**Co-Sponsored by the  
HBSOON Alumni Association  
Alpha Phi Chapter - STTI**

**Spring Forum &  
11<sup>th</sup> Annual Evidence-Based Practice Poster Day  
Location: East Rotunda of the Brookdale Campus, Hunter College**

**4:30 – 5:00 – Poster Gallery**

**5:00 – 5:15 – Spring Forum Presentation**

**5:15 – 6:30 – Poster Presentations**

**6:30 – 7:00 – Prizes and Certificates Awarded**

## Biographical Profile

**Pasquale Caponnetto, PhD is a Professor of Clinical Psychology at the School of Medicine at the University of Catania, Italy.** He is a Chief Psychologist at Mental Health Clinic *CTA Villa Chiara Psichiatria Riabilitativa e Ricerca*, Director of Research and Clinical Psychologists at the Anti-Smoking Center of University of Catania where he is actively involved in international clinical research, and a member of the Lega Italiana AntiFumo (LIAF). He completed post-graduate training in Ericksonian Psychotherapy at the Milton H. Erickson Foundation in Arizona (USA) and currently is pursuing an International PhD in Health Sciences at the University of Stirling, Scotland, UK.

Dr. Caponnetto's has published more than 40 papers on topics related to tobacco control and mental illness. A list of his publications can be found here.

<https://www.ncbi.nlm.nih.gov/pubmed/?term=caponnetto+pn>

Dr. Caponnetto is Principal Investigator and Co-investigator on numerous clinical trials past and present, focused on evaluating smoking cessation and harm reduction interventions among people at various disease states. His personal mission and vision is to help smokers quit, to reduce the harm from tobacco cigarettes among treatment resistant smokers, and to improve the quality of life in people suffering from mental illnesses.

Drs. Caponnetto, DiPiazza, and colleagues are partnering with the ambitious goal of dramatically expanding the tobacco harm reduction (THR) and cessation evidence-base globally for chronic smokers with mental illness. Currently, they are collecting data in the US and Italy for 2 studies, "The role of an electronic cigarette on smoking displacement in smokers with schizophrenia: A prospective 3-month pilot study," (clinical trials.gov # NCT03075202) and "The Perceived Influence of Sensory Sensations and Cues on Tobacco Cigarette Smoking Cessation Outcomes Among E-Cigarette Users." They have several papers in progress and a protocol for a large international 3-arm randomized controlled trial evaluating tobacco harm reduction approaches for treatment resistant smokers with schizophrenia.

**Jennifer DiPiazza, PhD is an Assistant Professor at Hunter-Bellevue School of Nursing and a Board Certified Psychiatric Nurse Practitioner.** Her research interests include cigarette smoking cessation and tobacco harm reduction for chronic cigarette smokers. Her earlier work as a psychiatric nurse practitioner at New York University, informs and motivates her research. In practice she treated many patients with standard treatments for smoking cessation. Despite patients' good intentions to quit smoking, the majority many whom also had mental health diagnoses, relapsed back to smoking. As part of her PhD at New York University she completed a fellowship in the Substance Abuse Research and Education and Training Program at the Center for Drug Use and HIV Research at New York University. This fellowship emphasized clinical research in substance abuse with the goal of positioning her to begin a program of research focused on substance abuse. Her published dissertation focuses on the factors associated with sustaining long-term cigarette smoking cessation among people with histories of repeated relapse.

THE ELEVENTH ANNUAL EVIDENCE-BASED PRACTICE POSTER  
DAY HUNTER-BELLEVUE SCHOOL OF NURSING AND HUNTER COLLEGE  
SCHOOLS OF THE HEALTH PROFESSIONS

Liz Capezuti, PhD, RN, FAAN: William Randolph Hearst Foundation Chair  
in Gerontology, Professor, Assistant Dean for Research, Director, Center  
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Director, Hunter College Health Professions Education Center (HPEC)  
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Grants and Contracts Manager:

Malini Lall: Bellevue School of Nursing, Hunter College, CUNY

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Association and the Alpha Phi Chapter of Sigma Theta Tau International  
for providing funding.

## Listing of Abstracts

### **Poster Number 1:**

The Effect of High-Fidelity Simulation Training on ICU Competency and Self-efficacy in Practicing Acute Care Physical Therapists: A Pilot Study

#### Authors:

Naomi Bloch, SPT  
Sarah Bogorad Mintz, SPT  
Lorena Rios, SPT  
Eric Tal., SPT  
Natalie Zych, SPT  
Neville Crick, PT, DPT  
Marissa Cuommo, PT, DPT, CCCE

#### Faculty Sponsor:

Dr. Nicki Silberman, PT, PhD, DPT

#### Background:

High-fidelity human simulation (HFHS) allows learners to practice skills in realistically simulated clinical settings. Research suggests that HFHS benefits medical professionals working in the intensive care unit (ICU). However, there is a lack of evidence on HFHS training for acute care physical therapists (PTs).

#### Purpose:

To evaluate the effect of HFHS training on PT competency and self-efficacy in the ICU.

#### Methods:

Six acute care PTs participated in three ICU HFHS experiences. All subjects completed self-efficacy surveys one week pre- and post-simulation. A senior PT measured subjects' ICU competency pre- and post-simulation. A focus group was conducted one week post-simulation to gather qualitative data about the learning experience.

#### Results:

There were significant improvements in three self-efficacy categories: performing a chart review ( $p=0.043$ ), understanding precautions/medications ( $p=0.039$ ), and implementing early mobilization ( $p=0.043$ ). No significant differences pre- vs. post-test competency assessment. Qualitative analysis of the focus group found four themes: 1) positive reinforcement and confidence building, 2) safe group learning environment promotes skill acquisition & ICU familiarity, 3) power of teamwork to achieve improved clinical collaboration, and 4) effective orientation to line management.

#### Conclusion:

Our study demonstrates an increase in the self-efficacy of practicing PTs in the ICU following simulation training. Qualitative data found that HFHS boosted confidence levels and highlighted

areas for improvement. Based on these results, we recommend HFHS as a training tool for practicing PTs to increase self-efficacy in the ICU environment.

**Poster Number 2:**

Effects of Neurodynamic Treatment on a Subject with Carpal Tunnel Syndrome

Authors:

Rachel Brown, SPT

Stefanie Cuttita, SPT

James Cascio, SPT

Maci Katz, SPT

Gary Krasilovsky PT, PhD

Faculty Sponsor:

Dr. Gary Krasilovsky

Background:

Carpal tunnel syndrome (CTS) results from compression of the median nerve at the wrist, causing impaired sensation and hand function. Neurodynamic mobilization may treat sensory symptoms of CTS by conducting “slider” techniques on the median nerve, thereby relieving stress from the surrounding structures. Current literature reveals a lack of evidence regarding the efficacy of neurodynamic treatment on relieving sensory symptoms.

Purpose:

The purpose of this study is to determine if nerve mobilization, independent of other treatment types, reduces sensory symptoms in CTS.

Methods:

Pre-test measures were conducted on 1 subject with a positive diagnosis of CTS. Treatment was then administered 3 times a week for 6 weeks. Reevaluation occurred after 3 weeks of treatment, at 6 weeks, and at a 3-month follow up. Outcomes include: Boston Carpal Tunnel Syndrome Questionnaire (BCTSQ), cutaneous sensation via Semmes-Weinstein monofilaments, muscle testing, Phalen’s Test, and Tinel’s sign.

Results/Conclusion:

At 3-month follow-up: BCTSQ scores improved; cutaneous sensation of median nerve decreased in right digit 1; sensory function did not demonstrate change; motor function of the right abductor pollicis brevis improved; time of onset of symptoms during exercise improved; right upper extremity range of motion did not demonstrate change, left upper extremity range increased by 15 degrees. Results did not fully support our hypothesis.

Acknowledgements:

Thank you to our participant, our research coordinator, Dr. Suzanne Babyar, and our advisor, Dr. Gary Krasilovsky.

**Poster Number 3:**

Enhancing Adult Protective Service Workers' Abilities to Detect Physical Signs of Elder Abuse: A Pilot Study

**Author:**

Anh Phuong Tran, BS, RN, ONC, HBSON Adult/Gerontological DNP Student

**Faculty Sponsor:**

Elizabeth Capezuti

**Background:**

Adult Protective Service (APS) workers are responsible for investigating allegations of elder abuse (EA). Accurate assessment of visual clues, such as body language and physical signs/markers of abuse, are essential to the investigation as is the ability to effectively communicate with other service providers (i.e. nurses, physicians, law enforcement, etc.). There is evidence that APS workers who are trained to detect EA are better equipped to assist older adults obtain needed resources than untrained workers, yet there are no national standards for APS education/training. APS worker training regarding physical signs of abuse and communication is lacking.

**Purpose:**

To enhance APS workers' abilities to detect and communicate the physical signs of EA.

**Theoretical Framework:**

Diffusion of Innovations model is used to guide this Capstone project.

**Methods**

Design: Pre/Post pilot and feasibility study

Sample: Experienced APS workers employed in the Manhattan, New York.

Setting: Brookdale Center for Healthy Aging at Hunter College and Manhattan APS offices.

Measures: (1) knowledge pre/post-test and (2) self-efficacy assessment on identifying physical signs of abuse and communication (3) training and (4) pocket resource guide evaluation.

Analysis: Paired sample T-test, descriptive statistics.

**Results:**

To be assessed, project is ongoing.

**Conclusions & Implications:**

Nurses have an increasing role in caring for clients in the community setting, including the care of the vulnerable older adult population. Providing education to enhance the ability of APS to recognize and communicate the physical signs of EA will likely help to improve the identification and care coordination of abused older adults thereby, leading to better case management and linkage to support services.

**Poster Number 4:**

Pre-Exposure Prophylaxis for HIV Prevention: Improving Adherence by Reducing Anxiety in Men Who Have Sex With Men

**Author:**

Rusty Greene, MSN, RN, DNP Student

**Faculty Sponsor:**

Dr. Caroline Hewitt

**Background:**

Pre-exposure prophylaxis (PrEP) is effective at preventing HIV transmission in HIV-negative men who have sex with men (MSM), but controversies surrounding its use have negatively impacted its utility as a method of HIV prevention. In addition to preventing HIV, MSM may take PrEP to relieve HIV-related anxiety in their daily lives. This highly desirable secondary benefit may improve PrEP uptake and adherence.

**Methods:**

Seventeen MSM initiating PrEP participated in a quality improvement project to determine if Next Step Counseling (NSC) was more effective than routine clinic-based counseling at reducing HIV-related anxiety and improving adherence to PrEP. A comparison group (n = 11) and an intervention group (n = 6) were both exposed to clinic-based counseling at initial prescription visits and 30-day follow up visits at the Project STAY clinic in New York City. The intervention group also participated in NSC at both visits. Anxiety levels were measured for all participants at initial visits and 30-day follow up visits using the Worry About Sexual Outcomes Scale (WASO).

**Results:**

Based on total WASO scores, intervention group participants experienced less HIV-related anxiety and higher levels of self-reported medication adherence after one month of PrEP use.

**Conclusions:**

While results from this project were not statistically significant, they indicate that NSC may be a valuable tool in developing counseling protocols for MSM taking PrEP.

**Acknowledgements:**

This project was supported by a grant from Hunter-Bellevue School of Nursing.

**Poster Number 5:**

Harm Reduction Education for Nurses: Where is it in the Curriculum?

**Authors:**

Norma Stephens Hannigan, Clinical Professor of Nursing

L. Synn Stern, RN, MPH, Health Services Coordinator, Washington Heights CORNER  
(Community Outreach and Resources, Needle Exchange and Harm Reduction (WHCP))

**Issue:**

According to the CDC, the number of deaths related to heroin overdoses in the U.S. has increased by 286% between 2002 and 2013 and rates continue to increase. Other complications of substance use plague the substance use disorder population. Harm reduction is a health care strategy that could potentially limit the number of overdoses and other complications of substance use disorders. Nurses and Nurse Practitioners work with persons suffering from substance use disorders but little is incorporated into nursing curricula related to harm reduction philosophy and practice. Ultimately, the aim is to reduce overdose deaths and other complications from substance use.

**Description:**

This scoping review of the literature was done to determine what is being included regarding harm reduction in nursing curricula. Identifying the availability of such information allows academics/researchers to narrow those gaps and broaden the knowledge base involving harm reduction and overdose/substance use complication prevention. Articles were chosen using the keywords: harm reduction, nursing education, nursing curriculum/a, substance abuse, heroin, overdose. The databases explored were CINAHL, PubMed, PsycINFO, Cochrane library, and Medline. The Arksey and O'Malley framework for developing a scoping review was employed.

**Results:**

Literature specific to harm reduction strategies in nursing curricula is limited mostly to Canadian, UK, and Australian journals. Based on the literature review, harm reduction in nursing education in the US is extremely limited.

**Conclusions and recommendations:**

More work is necessary to augment nursing education to include an understanding of harm reduction as it relates to substance use disorders.

**Poster Number 6:**

The Impact of Direct Written Performance Feedback in comparison to Voluntarily Accessed Performance Feedback on Sepsis Bundle Compliance within an Emergency Department Setting

**Author:**

Jessica Hsu, Graduate Student, ANP/GNC DNP

**Faculty Sponsor:**

Dr. Lynda Olender

**Problem Statement:**

The Surviving Sepsis Campaign (SCC) published best practice guidelines for the management of sepsis as a time-sensitive bundle of care; however, the publication of these guidelines does not necessarily lead to change in clinical behavior.

**Objective:**

To evaluate if a clinical dashboard and written performance feedback will improve sepsis bundle compliance in the Emergency Department (ED) of an academic hospital.

**Needs Assessment:**

This ED serves a large, multicultural, urban population. Of the patients that received sepsis care in this ED in 2016, average monthly performance rates of the time-sensitive sepsis protocol were: 79% two sets of blood cultures collected prior to antibiotic administration, 75% antibiotic administration within one hour of suspected sepsis, and 74% three-hour bundle compliance.

**Methods:**

This project will compare ED staff nurses' monthly performance rate of the three-hour sepsis bundle before and after monthly direct written performance feedback. This will compare the performance rates of the intervention group, nurses receiving written feedback in addition to access to the dashboard, to the control group, nurses who solely have access to the dashboard.

**Intervention:**

All ED staff nurses will have access to a dashboard displaying their individual sepsis guideline performance. Nurses in the intervention group will receive monthly direct written performance feedback by an advanced practice nurse (APRN).

**Evaluation:**

Directly delivering written feedback to staff nurses is likely to improve performance of the three-hour sepsis bundle. Monthly performance rates of the intervention and control group will be obtained over the six-month intervention period and compared to 2016 monthly performance rates.

**Poster Number 7:**

Intro to College: Recommended Practices of a Comprehensive Program for College Students with High Functioning Autism Spectrum Disorders

**Author:**

Abigail Marcus, Graduate Student, Speech-Language Pathology Program

**Faculty Sponsor:**

Dr. Donald Vogel

**Issue:**

Young adults described as having high-functioning autism spectrum disorder (HFASD) demonstrate deficits in social interaction abilities and typically have restrictive interests and routines. Being intellectually capable of attending college or university, they do, however, face challenges within the higher education setting. This literature review examined the challenges and needs of these students, and, the current programs and practices by speech-language university clinics available to them.

**Description:**

A systematic literature search was conducted using various electronic databases with topical search terms. Ultimately, 20 articles were selected for review and considered in developing a comprehensive intervention program plan for college students with high-functioning autism spectrum disorder (HFASD).

**Results:**

Five content-based categories were identified in the literature review: (1) transition from high school to college, (2) quality of life, (3) challenges and needs/accommodations, (4) parent, student, faculty or peer perspectives of needs and (5) intervention programs for college students with ASD. Speech-language university clinics with existing intervention programs for students with HFASD have supported them in the following skill areas: social skills, time management, self-advocacy, academic goal setting, career exploration, and independence in activities of daily living.

**Conclusion and Recommendations:**

Data about HFASD college students indicates that they face challenges that require significant support. The available research demonstrates how carefully designed programs based in speech-language university clinics can be effective in diminishing the barriers to academic and social success of these individuals when studying in the college environment. Compiling information from this literature review into a single document of data-driven suggestions will help facilitate the organization, implementation and satisfying outcomes at institutions that do not currently offer these supportive services for HFASD students.

**Poster Number 8:**

Improving the Efficacy and Experience of Hospice Delivery by MJHS to Orthodox Jewish Communities

**Author:**

Ian Sherman, RN, AGPCNP

**Faculty Sponsor:**

Elizabeth Capezuti, PhD, RN, FAAN

**Issue:**

Orthodox Jewish home hospice patients are disproportionately more likely to be discharged alive to an acute care hospital.

**Description:**

MJHS is piloting a specialized and highly trained Orthodox-specific hospice team to help address the cultural and religious components that often lead to live discharges.

**Lessons learned:**

The involvement of MJHS's Orthodox Jewish staff in the care of these patients prior to the formation of this team has proven key to preventing individual patients from becoming live discharges. This observation was the impetus for the formation of the team.

**Next steps:**

The team is currently being formed and trained, and is projected to be fully functional by May 2017. The results of the first six months of care will be analyzed with the expectation that live discharges will be proportionally reduced compared to a similar period of 2016. Also, qualitative

inquiries will be conducted, via staff interviews, to assess whether membership on this new team is related to increased job satisfaction and intention to remain in their current position.

**Abstract:**

Throughout the US, patients are discharged alive from home hospice programs at far higher than optimal rates. New York City based Metropolitan Jewish Health Services (MJHS) has noted, in the sub-population of Orthodox Jewish home hospice patients, a disproportionately high rate of unplanned “live discharges,” that are mostly due to transfers to emergency departments and acute care. This is attributed to difficulty convincing Orthodox patients and families of the ability of MJHS staff to address both the medical needs (pain, shortness of breath, etc.) and the specific cultural needs of these patients. A specific team of trained hospice providers, either Orthodox Jews themselves or other staff highly trained in the culture and community norms, will be assembled from current MJHS staff to address the needs of Orthodox Jewish home hospice patients, with the goal of decreasing “live discharges” from home hospice. In addition to the specific team for Orthodox Jews, the organization will liaise with Orthodox community resources and programs. The evaluation of this qualitative improvement project will include both changes in the rate of unexpected live discharges from this sub-population and the workplace experiences of hospice staff.

**Poster Number 9:**

An Educational QI Initiative on Healthy Timing and Spacing of Pregnancies (HTSP) for Nurses Working at the New York City Nurse-Family Partnership

**Author:**

Mitchell Solovay, DNP Student, MS, RN

**Faculty Sponsor:**

Dr. Caroline Hewitt

**Background:**

QI educational program was developed for Registered Nurses (RNs) working with the New York City Nurse Family Partnership Program to increase their knowledge and comfort level on Healthy Timing and Spacing of Pregnancies (HTSP) and family planning. HTSP is the amount of time between a live birth and the beginning of the next pregnancy. Births <24 months apart can impact the health of infant and mother. Infant problems include: preterm birth, low birth weight, small size for gestational age, increased risk of developmental problems. Adverse maternal outcomes include: uterine rupture, placental abruption, placenta previa. NFP goal is to have at least 24 months between first birth and conception of second pregnancy.

**Methods:**

Two hour educational program designed for RNs. Pretest and posttest were given the same day. A six week follow up posttest was given to the same group.

**Results:**

Posttests showed an 11.2% increase in knowledge and 50%-83% increase

**Conclusion:**

Training the trainer is a first start to increasing subsequent spacing by at least 24 months.

**Acknowledgement:**

QI was supported by NYC NFP and Hunter College-CUNY.

**Poster Number 10:**

A Literature Review of the Prevention of Alzheimer's Disease

**Authors:**

Jean Stigliano, Undergraduate, ADN  
Sheffiza Hamid, Undergraduate, ADN  
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Irish So, Undergraduate, ADN

**Faculty Sponsor:**

Dolores Weber, R.N., M.S., F.N.P.

**Issue:**

Pre Alzheimer's disease is the sixth leading cause of death in the United States and affects approximately six million Americans. The research of causative factors and its associated prevention is still in its infancy. This literature review investigates the impact of lifestyle factors such as exercise, stress, diet, and sleep on the development of Alzheimer's disease.

**Description:**

This systematic search and limited review of the research literature was conducted using Medline, CINAHL, PubMed, and EBSCOhost databases. Keywords used included Alzheimer's disease, prevention, diet, sleep, stress, physical exercise, and cognition. Studies found comprised of an observational study, a quantitative study, and three systematic reviews.

**Results:**

A combination of healthy habits such as exercise, diet, stress management, and improved sleep may help ward off Alzheimer's. Evidence suggests that sleep disturbances and stress-released cortisol increase the risk for cognitive decline. The consumption of a Mediterranean-DASH Intervention for Neurodegenerative Delay diet and consistent physical activity has been shown to prevent Alzheimer's and provide protection for global cognition.

**Conclusions and recommendations:**

Lifestyle factors (diet, exercise, stress, and sleep) play a critical role in the cognitive decline related to Alzheimer's disease. Further research is warranted and can include randomized dietary intervention trials and human studies with objective sleep measures. Quality improvement for future studies must take basal nutrient intakes and nutrient biomarkers into account. In addition, data regarding brain structure and function from MRI, cerebrospinal fluid analysis or amyloid imaging must be analyzed to provide additional information regarding sleep, stress, and exercise.

**Poster Number 11:**

**Sepsis Education Intervention for Emergency Department Nurses**

**Author:**

Margaret Stroehlein, RN, ANP-BC, DNP Student

**Faculty Sponsor:**

Elizabeth Capezuti, PhD, RN, FAAN

**Background & Significance:**

Sepsis is a life threatening complication of an infection. Even with current quality initiatives sepsis remains the most expensive condition treated in US Hospitals. In 2011 \$20.3 billion was spent in the US with mortality rates for patients with severe sepsis and septic shock ranging from 10-50%. Early recognition and treatment is crucial to improve patient outcomes.

**Methods:**

One group, pre/post, quality improvement evaluation of an educational intervention targeting the ED RN's of South Shore Long Island Hospital.

**Agency Description:**

Based South Shore Long Island Hospital, a member hospital of a large health system, is a trauma center, general medical and surgical hospital in Bay Shore, NY, with 300 bed and 71,012 patients ED visits/year. The major concern at the Hospital is the lower than the state average rate of fluid bolus administration within 30 minutes for severe sepsis/septic shock in the ED.

**Purpose/Intervention:**

The purpose is to develop and then evaluate an educational program for Emergency Department nurses at South Shore Long Island Hospital to improve the nurses' knowledge and adherence to national guidelines (CMS, CDC, HANYS, IPRO, The Joint Commission, Surviving Sepsis Campaign).

**Evaluation:**

Outcomes include both nurses' knowledge of sepsis guidelines and nurses' adherence to those guidelines. An online pre-knowledge test distributed via Survey Monkey will be emailed by nursing management to all ED RN's a week before the education sessions. Following the intervention the same online survey will be sent via email by nursing management to all RN participants. Post intervention monitoring of fluid bolus administration rates within 30 minutes for severe sepsis/septic shock will be evaluated the quarter after the intervention. Data collection pre intervention and the quarter post intervention will be analyzed for improvements.

**Poster Number 12:**

**Respiratory Device-Related Pressure Injuries in Critical Care**

**Author:**

Anne E. Urquhart, BSN, RN, CCRN

**Institution:**

NYU Langone Medical Center

**Purpose:**

The quality improvement project took place in an 18-bed adult medical intensive care unit (MICU) at NYU Langone Medical Center (NYULMC) to address the rise in respiratory device-related pressure injuries (RDRPI) from non-invasive positive pressure ventilation (NIPPV) masks and endotracheal tube (ETT) holders. During the 1<sup>st</sup> quarter of 2016, the adult MICU at NYULMC had 11 medical device-related pressure injuries (MDRPI), 9 of which were respiratory device-related (RDR). Non-invasive positive pressure ventilation (NIPPV) masks and endotracheal tube (ETT) holders represented the primary devices that caused injury.

In 2015, the MICU had eliminated all non-device related pressure injuries and achieved two months of zero hospital acquired pressure injuries (HAPI). Only a total of two MDRPIs occurred in 2015. The aim of the project was to reduce the MICU's RDR pressure injury incidence rate by 50% in quarter 2 of 2016, with the long-term goal of zero pressure injuries in quarter 3 and quarter 4.

**Description:**

A nurse-led interprofessional team was established to address the gaps in knowledge and inconsistencies in care among respiratory therapy (RT) and nursing (RN) staff. The team included 5 MICU RNs, RT Director and Assistant Director, Wound and Ostomy Continence Nurse (WOCN), Critical Care Nurse Educator, and MICU nursing leadership. The team developed a standardized evidence-based lesson plan to educate RT and RN staff on hospital policy for respiratory device application, removal, assessment, rotation and documentation. One-on-one education sessions occurred during the last 2 weeks of March 2016, where 98% of RT and RN staff were educated prior to the April 1<sup>st</sup> start date. Random chart audits started April 1<sup>st</sup>. Audits were done weekly (2 charts/week) with a total of 30 charts by the end of each quarter. The team measured compliance of documentation for respiratory device rotation, off-loading, assessment, and that a dual RT/RN skin check was completed. Real-time feedback was given to RT and RN staff via face to face or e-mail regarding their documentation compliance. The unit monthly pressure injury incidence rates were still monitored using the current unit data metric collecting tool, which is a pressure incidence tracking log that is filled out by RN staff and reviewed by the WOCN and Unit Resource RN.

Interventions for skin assessment and prevention for patients with respiratory devices described in the lesson plan are based on recommendations from the latest release of the International Pressure Ulcer Guidelines from the European and US National Pressure Ulcer Advisory Panels (EPUAP and NPUAP) and the Pan Pacific Pressure Injury Alliance (PPPIA). According to the EPUAP-NPUAP-PPPIA (2014) guidelines, skin inspection is recommended to be performed at least twice daily to assess for signs of pressure-related injuries around and under the device and more frequently for patients vulnerable to fluid shifts or worsening edema. Therefore, the team instituted a dual RT/RN skin check to be completed and documented once per shift in addition to the twice daily assessment. Although off-loading and repositioning of devices are recommended for prevention, the frequency of off-loading and repositioning is not clearly stated in the guideline. Therefore, the team chose the frequency of off-loading and repositioning of respiratory devices using the manufacturer's recommendations and hospital standards.

#### Evaluation & Outcomes:

The MICU's RDR pressure injury quarter 1 incidence rate was 2.1%. In quarter 2, the RDR pressure injury incidence rate was 0.6%. In quarter 3 and 4 the RDR pressure injury rate was 0% and 0.45%, respectively.

Success of the project and interventions are measured by continuing to monitor the MICUs monthly pressure injury incidence rates by using the pressure incidence tracking log and monitoring documentation compliance for respiratory device rotation, off-loading, assessment, and that a dual RT/RN skin check was completed.

Respiratory devices are common amongst ICU patients. Ongoing education for both new and current staff is essential in preventing RDR pressure injuries. Collaborating and sharing the responsibility with RT, not only allows two sets of eyes to actively assess the patient, but also promotes interprofessional team building and shared ownership between RT and nursing.

#### References:

National Pressure Ulcer Advisory Panel, European Pressure Ulcer Advisory Panel and Pan Pacific Pressure Injury Alliance (2014). Prevention and treatment of pressure ulcers: Clinical practice guideline. Emily Haesler (Ed.). Cambridge Media: Osborne Park, Western Australia.

#### **Poster Number 13:**

Effects of Speaker Gender on Voice Onset Time in Korean-English Bilinguals

#### Author:

Gloria Lee, Hunter College Speech Language Pathology, M.S. Candidate

#### Faculty Sponsor:

Nancy Eng, PhD CCC-SLP, Speech-Language Pathology and Audiology, Department Chair

#### Abstract:

It is established in the literature that females exhibit larger voice onset time (VOT) values than males for long-lag stops (Whiteside and Irving, 1998). However, VOT values in Korean speakers show a conflicting pattern; males exhibit larger VOT values than females for long-lag stops (Oh,

2011). Given this finding, it would be interesting to see the VOT values of Korean-English bilinguals exhibit the same gender specific differences in VOT as Korean monolinguals. This current study investigates whether or not exposure to English has an effect on gender specific differences in VOT in Korean long-lag stops. Eight Korean-English bilinguals (4 male, 4 female) between ages 18-23 produced fortis, lenis, and aspirated stops in /Cin/ and /Can/ words in isolation and within a carrier phrase. All participants were born in Korea and immigrated to the United States before the age of 10, and have been exposed to both English and Korean on a daily basis since arrival. VOT values were measured from speech waveforms and wideband spectrograms displayed on Praat. These values were then compared to that of the monolingual Korean speakers Oh (2011)'s study. Results revealed that while Korean monolinguals exhibit unique gender-based differences in VOT values, no such differences exist in Korean-English bilinguals. Furthermore, significant differences were found in overall VOT values in monolingual and bilingual Korean speakers, supporting results from previous studies that found phonetic changes in L1 resulting from exposure L2 (Fledge, 1991).

#### Works Cited:

Flege, J. E. (1991). Age of learning affects the authenticity of voice-onset time (VOT) in stop consonants produced in a second language. *The Journal of the Acoustical Society of America*, 89(1), 395-411

Oh, E. (2011). Effects of speaker gender on voice onset time in Korean stops. *Journal of Phonetics*, 39(1), 59-67.

Whiteside, S. P., & Irving, C. J. (1998). Speakers' sex differences in voice onset time: a study of isolated word production. *Perceptual and motor skills*, 86(2), 651-654.

#### **Poster Number 14:**

#### **Pre Literacy in Late Talkers and Typically Developing 3-Year-Olds**

#### Authors:

Mikaela Kur, Graduate Speech-Language Pathology  
Elizabeth Lee, Graduate Speech-Language Pathology  
Rebeca Rubin, Graduate Speech-Language Pathology

#### Faculty Sponsor:

Michelle MacRoy-Higgins PhD CCC-SLP

#### Background:

The purpose of this study was to examine the early literacy skills in three-year-olds who were identified as late talkers (LT) at age two, as compared to typically developing (TD) age-matched peers, by measuring aspects of pre literacy skills including print awareness, and letter knowledge.

#### Methods:

Twenty-one, monolingual three-year-olds, participated in this study. Ten of the children (two female) had a history of being LT, and 11 (two female) served as age-matched TD controls. All participants completed a series of standardized speech and language assessments; pre literacy was

examined using the Test of Preschool Early Literacy (Lonigan, Wagner, Torgesen, Rashotte, 2007).

**Results:**

On average, participants who were LT scored in average range on standardized speech and language measures, but significantly poorer than TD peers. Similarly, participants who were LT scored in the average range on the print awareness and letter knowledge tasks, but significantly poorer than TD peers.

**Conclusions:**

Even though children who were LT demonstrated language skills in the average range, these children with a history of language delay are at risk for language-based skills such as literacy.

**Poster Number 15:**

Parental Reports on the Efficacy of an After-School Social Skills Program for Children

**Author:**

Taylor Soave, (Graduate, Speech-Language Pathology)

**Faculty Sponsor:**

Dr. Donald Vogel, AuD, CCC-A

**Background:**

The purpose of this study was to determine parental opinion on the efficacy of an after-school social skills program for children with social skills deficits. These deficits are hallmark characteristics of individuals with autism spectrum disorders (ASD). As social skills are important for functioning in many aspects of daily life, numerous interventions have been implemented to treat social communication impairments in students diagnosed with ASD. Yet, little research exists regarding the efficacy of after-school social skills intervention programs for students with and without the diagnosis of ASD.

**Methods:**

Eight children in a 6.5 to 8 year old social skills class attended an after-school social skills intervention program for ten weeks. Of the eight, only one child presented with a formal diagnosis of ASD. Parental opinions regarding their child's social skills deficits were collected pre- and post-treatment via surveys using Qualtrics Survey software with five parents completing the questionnaire.

**Results:**

All parents who completed the survey reported overall improvements in their child's social skills following after-school group therapy. Noteworthy improvements were reported in areas related to pragmatic behavior, while fewer improvements were reported in speech and language aspects of social communication.

**Conclusions:**

Although this is a limited study, it offers information that suggests via parental opinion that children's social skills improved following participation in the after-school social skills program. Interestingly, this was regardless of a diagnosis of ASD. Improvements were noted in areas related to pragmatic behaviors specifically targeted in the program's curriculum, supporting the program's purpose and design.

It is recommended that future research in this area contain a larger sample size to identify smaller effects and trends in improvement outcomes.

**Poster Number 16:**

**Improved Overall Function and Quality of Life in Patients with Parkinson's Disease through the Implementation of a LSVT BIG™ Program**

**Authors:**

Katelyn Walter, PT, DPT  
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Jennifer Metz, PT, DPT, CSCS  
Danielle DiCarlo, PT, DPT  
Andrea Sieban, SPT  
Maria Toscano, SPT  
Dan Atkins, SPT  
Javier Benitez, SPT

**Faculty Sponsor:**

Suzanne Babyar, PT, PhD

**Background:**

The purpose of this study was to determine if Lee Silverman Voice Therapy-BIG (LSVT-BIG™) improves gait, balance, endurance, functional performance, and quality of life (QOL) in patients with Parkinson's Disease (PD). Previous studies have found that LSVT-BIG™ has been shown to improve motor symptoms and quality of life in individuals with PD, however, there is limited research that specifically looks at improved quality of life using a depression scale.

**Methods:**

This study was an observational study using a within-subject design. 7 female and 17 male subjects with PD were observed before and after participating in the LSVT-BIG™ program. The outcome measures were: The Timed Up and Go (TUG), Functional Gait Assessment (FGA), Berg Balance Scale (BBS), Six-Minute Walk Test (6MWT), and the Geriatric Depression Scale (GDS).

**Results:**

There were statistically significant improvements in gait, balance, endurance, functional performance and quality of life in PD patients after completing the LSVT BIG™ program.

**Conclusions:**

LSVT BIG™ has the ability to not only improve deficits in gait, balance, endurance, and functional task performance of PD patients, but also quality of life, as measured by improved GDS scores.

Acknowledgements: Thank you to Burke Rehabilitation Hospital, Ben Gilbert, PT, MS, OCS, MBA, Cert. MDT, Director of Outpatient Rehabilitation, and the participants of the study.

**Poster Number 17:**

Authors:

Dana Krause

Rachel Smith

Faculty Sponsor:

Michelle MacRoy-Higgins PhD CCC-SLP

Background:

The purpose of this study was to examine phonological awareness skills in three year olds who were identified as late talkers (LT) at age two, as compared to age-matched, typically developing peers.

Methods:

Twenty-one three year olds ranging from 36-38 months participated in this study. At two years of age, ten of the participants (two female) were identified as LT, and eleven were identified as age- and gender-matched controls with typical language development (TLD). Speech, receptive language and expressive language were testing using standardized measures. Phonological awareness skills were measured using the phonological awareness subtest of the Test of Preschool Early Literacy (TOPEL; Lonigan et al., 2007).

Results:

On average, participants that were identified as LT scored within the average range on the speech, expressive language, and receptive language measures; however TLD participants outperformed the LT participants across all measures. Participants who were LT scored below average on phonological awareness measures.

Conclusions:

Although speech, receptive and expressive language were in the average range in the participants who were LT, they remain at risk for language-based learning skills such as literacy because of delays in phonological awareness ability.

**Poster Number 18:**

American Sign Language and Language Disorders in Children

Author:

Juliana Mazzone, Speech-Language Pathology

Faculty Sponsor:

Dr. Macroy-Higgins

**Issue:**

The field of Speech Language Pathology does not have appropriate resources to assess and diagnose language disorders in American Sign Language (ASL) users.

**Description:**

Many Speech Language Pathologists (SLPs) lack knowledge on the language development of ASL users. ASL users often receive inappropriate language intervention, as most SLPs are not fluent in ASL and may rely on an interpreter for diagnosing and treating such clients. The use of an interpreter can lead to skewed results as many SLPs are unaware of the culture and language rules of Deaf individuals. Milestones of English acquisition were compared to milestones of ASL acquisition in order to determine indicators of a language disorder in ASL users.

**Results:**

English and ASL follow a similar timeline for acquisition. However, some language milestones are achieved earlier in ASL. "Red flags" for language disorders in both ASL and spoken English follow a comparable pattern.

**Conclusions and recommendations:**

Most Deaf children have hearing parents who do not know ASL. Therefore, ASL users are at risk for a language delay due to lack of parental knowledge of ASL who subsequently provide their children with limited and delayed language exposure. It is important to be able to identify language milestones in ASL as compared to spoken English in order to recognize "red flags" that may indicate a language disorder in Deaf children.

**Poster Number 19:**

Title: Patient-Centered Dementia Care Education Program for Certified

Nursing Assistants (CNAs)

**Author:**

Edward Williams (The author name was also missing but I tracked it down from the document properties information in Word so hopefully this is accurate.)

**Background:**

Many older persons living in supervised residential facilities have some form of dementia. Caring for those with dementia can be a difficult job. Certified Nursing Assistants (CNAs) provide the bulk of care but their educational preparation is often inadequate for caring for their unique needs.

**Purpose:**

The aim of this study is to improve CNAs' dementia knowledge and communication skills.

**Method:**

A pre-post, single group design was used to evaluate the feasibility of the intervention in the following domains: dementia knowledge and communication skills. Five-day shift (7am-3pm) CNAs during alternate weekends in one unit (consisting primarily of residents 65 years and above and who have a diagnosis of dementia) of a 320-bed nursing home in Prospects Heights, Brooklyn participated in study.

**Method:**

The aim of this study is to improve CNAs' dementia knowledge and communication skills.

**Results:**

Overall dementia knowledge mean and standard deviation scores for CNAs before and after intervention were 14.40 (1.342) and 14.60 (1.140), respectively. Overall, mean score of use of appropriate communication techniques improved after intervention - only two participants improved post-intervention.

**Conclusion:**

The initial feasibility of this intervention points to a new direction in CNA training that is needed to improve the quality of life for persons with dementia.

**Poster Number 20:**

The Effects of Laryngeal Manual Therapies: a systematic review of the literature

**Author:**

Orit Greenberg, Graduate, Speech-Language Pathology MS program

**Faculty Sponsor:**

Dr. MacRoy-Higgins

**Issue:**

Laryngeal manual therapy (LMT) is one technique used by SLPs to treat muscle tension dysphonia (MTD). Due to increased reliance on LMT and increased recommendation of self-administration of LMT as home exercise program, it is critical to examine the effectiveness of LMT in treating MTD. This paper systematically reviewed research examining the objective outcomes and effects of LMT on management of MTD.

**Description:**

A systematic search identifying pertinent studies published from 1990-2016 in peer-reviewed journals was conducted. PubMed database was searched. The following keywords were utilized: "laryngeal manual therapy," "manual circumlaryngeal therapy," "muscle tension dysphonia therapy," "myofascial laryngeal release," "voice therapy/treatment outcome/effect" and "laryngeal massage." Studies were included based on quality of research and design. Using these search terms and database, 40 articles were identified, and four met the criterion of having objective (videostrobolaryngoscopy and acoustic measures) and subjective measures investigating voice outcomes post LMT for adults with MTD.

**Results:**

LMT is an effective direct treatment technique for patients with elevated laryngeal position, and symptoms of moderate-severe MTD. Both acoustical analysis and vocal tract discomfort scale showed positive evidence for LMT as a treatment method of hyperfunctional voice disorders.

**Conclusions and recommendations:**

Future investigations should include repeated objective measures, long-term effects (i.e., videostroboscopy, electromyography, electroglottography, and subglottal pressure measurements), and standardized manual therapy protocols. LMT should be recommended for people who have not responded to traditional voice therapy. Although research in this modality is still in its infancy, the promising evidence merits incorporating LMT into the treatment protocol for people with MTD.

**Poster Number 21:**

**Relational Coordination Between Primary Care and Mental Health Services: Reduced Emergency Department Utilization by Mental Health Patients for Perceived Medical Emergencies**

Author:

Mary Schaeffer, DNP Program Student, Hunter-Bellevue School of Nursing

Faculty Sponsor: Elizabeth Capezuti

Purpose:

Determine if a standardized system of communication between Mental Health and Primary Care providers significantly reduces Emergency Room (ER) utilization by Mental Health patients with perceived Medical Emergencies at the Brooklyn Veterans Administration Medical Center for medical problems and improves the satisfaction of providers.

Background:

Primary Care (PC) and Mental Health (MH) providers at the Brooklyn Veterans Administration Medical Center lack a formal process for coordination between MH and PC providers, thus leading to increased use of emergency services, often unnecessarily, and at greater cost, to address medical care needs. The opportunity to collaborate and consult to reduce prevent unnecessary ER visits, while improving provider satisfaction, is missed.

Methods:

A two-group pretest-posttest design will be used. Mental Health and Primary Care providers will formally collaborate on the care of patients that are in both provider's panels. Inclusion criteria: patients with chronic metabolic disorders including hypertension, diabetes and hyperlipidemia as well as mental health disorders. Prior to implementation of the improved communication program, the patients will be assessed for number of ER visits over the past 6 months. The providers will complete a questionnaire examining their satisfaction with the current coordination between providers. The providers will meet have scheduled meetings to develop relationships, and coordination and consultation plans, while also maintaining contact via email. After 6 months, the number of ER visits for the patients will be calculated, and the providers will be re-assessed for their level of satisfaction. Before and after results will be assessed for statistical significance of changes.

Significance:

Improving communication between providers will significantly reduce ER visits for patient while improving provider satisfaction with relational coordination of outpatient care and services and collaboration between MH and PC.

**Poster Number 22:**

**Psychosocial Benefits and Clinical Applications: A Tutorial on Emotion Word Learning in Children With Language Impairments**

**Author:**

Tzvia Garris, Graduate Student, Speech-Language Pathology Program

**Faculty Sponsor:**

Dr. Michelle Macroy-Higgins

**Purpose:**

Individuals with language impairments are at greater risk for problematic behaviors, psychiatric disorders, poor emotional engagement in relationships, and overall poorer mental health outcomes as compared with peers with typical language development. The purpose of this study was to inform speech-language pathologists about the psychosocial challenges frequently associated with child language impairment, and explore vocabulary-specific interventions that may facilitate improved psychosocial wellbeing in this population.

**Method:**

A review of the literature on psychosocial functioning of children with language impairments was conducted. An overview of emotion word development was first outlined and the connection between emotion word vocabulary and psychosocial functioning was explored in children who were typically developing and those with language impairments.

**Results:**

Knowledge of emotion words plays an important role in self-knowledge, sharing of emotions, interpretation of social cues, and personal narrative production. Emotion word development tends to be disordered in children with language impairments, and may be influenced by factors such as maternal elaborative reminiscing and emotion-focused literacy interventions.

**Conclusions:**

The psychosocial significance of emotion word knowledge makes it a highly functional target for clinical intervention. Best practices for vocabulary intervention, including modeling in naturally occurring contexts and explicit instruction, should be applied when targeting emotion words. Research on emotion word interventions specifically for language-impaired children is lacking. By integrating emotion words into language therapy, speech-language pathologists can give children with language impairment functional vocabulary for inter- as well as intra-personal communication.

**Poster Number 23:**

**LGBT Health Needs: A Quality Improvement Project for Increasing Knowledge & Social Sensitivity at North Shore University Hospital**

Author:

Bryanna Kelly, RN, BS-DNP

Faculty Sponsor:

Caroline Hewitt

Background:

The U.S. Department of Health and Human Services established national goals addressing the health disparities and barriers to quality health care existing in Lesbian, Gay, Bisexual, and Transgender (LGBT) populations, including social stigma and a lack of culturally-sensitive health providers. Project purposes were to raise awareness of LGBT health/social issues and to improve the cultural-sensitivity of staff at North Shore University Hospital (NSUH) using focused education on ways to provide safer, non-discriminatory, and linguistically-appropriate environments and deliver efficacious patient-specific interventions to best support LGBT patients, families, and staff.

Methods:

Two separate educational sessions on LGBT health/social issues were offered at NSUH in November 2016. Participants were voluntarily recruited via email, flyer-advertisement, and verbal exchange. A single group, pre/posttest design was used to collect anonymous survey data of participants' demographics, LGBT health knowledge, perceived self-efficacy in caring for LGBT patients/families, and views on LGBT-specific staff training and its relevance to their professional roles. This project was granted IRB exempt status by the institutional review boards of both NSUH and Hunter College of CUNY.

Results:

Posttest results revealed statistically significant, positive increases to participants' knowledge, self-efficacy, and perceptions on the relevance/applicability of LGBT-specific staff training to their professional roles. Relatively speaking, 67% and 28% of participants strongly agreed and agreed that they would like to become more knowledgeable about LGBT health/social needs.

Conclusion:

Although currently limited, LGBT-specific training can be useful to all hospital staff and may greatly enhance the health and well-being of LGBT populations.

**Poster Number 24:****Nursing Care of Women Receiving Regional Analgesia and Anesthesia in Labor****Authors:**

Melody To, RN to BSN  
Stephanie Jaramillo, RN to BSN  
Jennifer Amachee, Undergraduate  
Evelin Gonzalez, Undergraduate  
Krizzy Mallari, Undergraduate  
Ka Man Yeung, Undergraduate

**Faculty Sponsor:**

Lorie S. Goshin PhD, RN

**Issue:**

In 2011, the Association of Women's Health, Obstetric, and Neonatal Nurses released a clinical practice guideline focused on minimizing the occurrence of adverse effects and clinical complications of obstetric anesthesia and analgesia during the laboring process. Recommendations on patient assessments, symptom management and interventions to practice during client care are given based on research, evaluation and scoring of the literature found. The guideline is applicable to pregnant women undergoing regional analgesia/anesthesia with intrapartum pain management

**Description:**

This clinical practice guideline utilized systemic review and meta-analysis using CINAHL, Medline, Internet Grateful Med and Cochrane Database for literature research. The guideline criteria excluded women with contraindications for intrapartum pain management. It included pregnant women who consented to analgesia/anesthesia under the care of their providers, and it only included research on pregnant women from hospital settings in labor and delivery. The guideline was only limited to English articles published between 2000 to 2009. A quality rating tool and grading system for levels of evidence were provided and described in the guideline. However, there was a lack of strength ratings for each recommendation. Expert consensus among the obstetric team, nurses, and anesthesiologists were used for quality ratings and therefore, the quality-of-evidence rating was rated as level III evidence.

**Results:**

The clinical practice guideline recommends pre-anesthesia preparation by assessing women's knowledge on analgesia/anesthesia before proceeding to procedure, assessing maternal and fetal responses to medication while managing its side effects. It is also recommended that during post-anesthesia care that the nurse ensures recovery of the sensory and motor functions leading to a full scope of care related to regional analgesia and anesthesia in labor.

**Conclusions and recommendations:**

We recommend use of this guideline by labor and delivery nurses. It used several reliable databases like CINAHL and appropriate search terms to answer the aims. The criteria used for inclusion were appropriate, and inconclusive studies were included. This meant the guideline did not show bias since poor evidence was included. Even though the copy of the guideline did not

explicitly demonstrate the quality and strength of each article, the quality rating tool was provided and evidence was graded on a scale of III. These qualifying statements allow healthcare providers have leeway in their practice without putting the patient at risk. Therefore, we recommend the guideline, but this would only be applicable to pregnant women who chose to receive analgesia and anesthesia care under the care of health care providers in the hospital setting.

**Poster Number 25:**

A Literature Review of the Prevalence of Sexual Abuse in Men and the Barriers to Treatment

**Authors:**

Aszeem Alli, Undergraduate, AND  
Robin Garcia, Undergraduate, AND  
Jin Hui Jiang, Undergraduate, ADN  
Luying You, Undergraduate, ADN

**Faculty Sponsor:**

Professor Barbara Rome, RN, MS, SANE-A

**Issue:**

In the United States sexual violence is often associated with women, however 6% of males report to have been sexually abused as reported by the Centers for Disease Control and Prevention (CDC). Unfortunately this is just an estimate because sexual violence is highly under reported. The aim of this literature review is to understand the prevalence, barriers and treatments available to male survivors of sexual violence.

**Description:**

This review of the literature was conducted using CINAHL, Google Scholar, Centers for Disease Control and Prevention, U.S. Department of Veterans Affairs, and Men's Health. Keywords used included sexual abuse, men, barriers, prevalence, and treatment.

**Results:**

Key findings indicate that the barriers preventing men from seeking services and treatment include: mistaken stereotypical beliefs "myths", stigma, gender and knowledge related barriers, which discourage the survivors from seeking help or disclosing the assault.

**Conclusions and recommendations:**

While Six percent of men in our country report sexual abuse; the statistics are estimated to be at least 1 in 10 males being victims of sexual violence. Male survivors have a higher incidence of post-traumatic stress disorder (PTSD), anxiety disorders, depression, and substance abuse. Psychotherapy such as cognitive processing therapy and prolonged exposure therapy are available, yet little research has been done to evaluate the effectiveness of these therapies. Moreover, male victims are less likely to report the sexual abuse or seek treatment, leading to poorer outcomes. More efforts to raise awareness are needed and more research is needed to evaluate treatment options and effectiveness for male victims.

**Poster Number 26:****Changes in the Interpretation of Text Message Intentionality Across Different Age Groups**

Author:

Megan Valentin

Faculty Sponsor:

Don Vogel

Abstract:

The use of text deformations is an evolving feature of the conventions of mobile texting. Observing patterns in the interpretation of text deformations will give insight into the soft rules, if they exist, of textese (the abbreviated language used in text messages). Cross generational differences in the interpretation of texts could lead to communication breakdowns. In order to mend those communication breakdowns for populations with or without varying communication disorders, it is important to understand how and when they occur. Because texting is a part of daily communication, clinicians should not underestimate its influence on their client's social functioning. We recruited 10 participants who were 18-24 years old and 10 participants who were 40 years old and older to compare interpretations of texts that contain varying text deformations. The participants were presented with 5 short texts that were altered with one of three variable text deformations (punctuation, additional letters, or capitalization) or written using standard grammar; and asked to select the emotion most closely associated with that text. A possible relationship between age and interpretation of text message intentionality will be discussed.

**Poster Number 27:****The Influence of Sensory-Perceptual Features on Lexical Decision Response Times**

Authors:

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Faculty Sponsors:

Jet M. J. Vonk, M.A., M.Phil., The Graduate Center, CUNY

Michelle Macroy-Higgins, PhD, CCC-SLP

Background:

An increase in the number of semantic features associated with a word has been found to facilitate word recognition. However, most studies that reported this effect implemented feature generation methodology. Such ratings capture semantic richness but are difficult to quantify and classify, and do not include the strength of association of each feature with the word. The present study investigates subjective ratings of how strongly a feature (e.g., action, sound, sight) is associated

with a word to specifically determine the contribution of sensory-perceptual semantic information to its concept.

**Methods:**

Approximately 300 participants, aged 20-88, were recruited via Amazon Mechanical Turk and completed a rating study on Qualtrics. Each participant rated 114 verbs or 244 nouns on a single semantic feature on a seven-point Likert scale. Ultimately, all 358 words were individually rated approximately 20 times on six semantic features. The relationship between these ratings and the reaction times associated with the same words on a prior lexical decision task (LDT) was then analyzed.

**Results:**

Ratings in our study align well with predefined semantic categories (e.g., 'tools') and concrete words were associated with more sensory-perceptual features than abstract words. Nouns rated as highly associated with smell/taste were responded to faster in a LDT.

**Conclusions:**

Word recognition is not generally facilitated by semantic richness independent of the psycholinguistic factors controlled for in this study. However, the significant evolutionary role of the olfactory and gustatory systems might explain why nouns with a higher rating on smell/taste were responded to faster in a LDT.

**Poster Number 28:**

A Literature Review on Screen Time Use by Adolescence and the Effect on Lifestyle Choices and Obesity

**Authors:**

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Renz Nikka De Gula, Undergraduate Nursing, Queensborough Community College  
Maria Virginia Villadiego-Punto, Undergraduate Nursing, Queensborough Community College  
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Catherine Kim, Undergraduate Nursing, Queensborough Community College

**Faculty Sponsor:**

Georgina Colalillo, MS, RN, CNE

**Issue:**

Adolescence is a critical time for weight gain and developing unhealthy sedentary behaviors that could lead to obesity and poor cardiovascular and musculoskeletal outcomes. Screen time perpetuates sedentary behaviors. Adolescents between the ages of 15-18 spend on average seven and half hours a day in front of a screen of some source. Living this sedentary lifestyle can lead to cardiovascular disorders such as hyperlipidemia and hypertension. The progression of blocked arteries increases every hour as an adolescent spends in front of a screen. Screen-time in adolescence and its impact on health has not been adequately studied. This literature review addressed the following question: How does screen time use in today's adolescent population affect their lifestyle choices and influence their risk for obesity?

#### **Description:**

A literature search was done to explore the correlation between increased screen time in adolescents and the influence it has on their risk of obesity. Articles were gathered from CINAHL, ProQuest and PubMed. Keywords used included adolescents, screen time, obesity, lifestyle, sedentary lifestyle, fitness, and physical activity. The studies found consisted of cross-sectional studies, longitudinal studies, and voluntary participant surveys.

#### **Results:**

Key findings indicate that increased screen time does, in fact, affect adolescents' lifestyle choices and strongly correlate to their increased risk of obesity. Not meeting ST guidelines had 69% higher odds of being overweight and obese. A significant difference between snacks and meals during screen time, 69.3% and 22.6% respectively, projects poor nutrition choices. Less consumption of vegetables and fruits causes adolescents to be susceptible to eating more empty calories such as cookies, chips, soda and alcohol.

#### **Conclusions and recommendations:**

Adolescents who partake in excessive screen time, such as television watching, tend to choose unhealthy food choices because they are the main targets of junk food marketing companies. Obesity is strongly linked to the dual scenario of excessive screen time and having a television in the bedroom. Recommendations include awareness of marketing ploys, education of complications, screening tools and measures of prevention, including reduced screen time, daily exercising, and conscious eating.

#### **Poster Number 29:**

Difference Between Jamaican Creole and Standard American English

#### **Author:**

Christina Oros, Graduate Student, Department of Speech Language Pathology

#### **Faculty Sponsors:**

Taryn Malcolm

Nancy Eng

#### **Background:**

The purpose of this study was to examine the differences between Jamaican Creole (JC) and Standard American English (SAE) observed in bilingual speakers. It is predicated that percentage of daily language use will predict instances of language mixing, particularly of copula structures, in bilingual speakers of JC and SAE.

#### **Methods:**

Six participants that were born in Jamaica and completed some level of secondary school in Jamaica prior to immigrating to the U.S were tested. Participants were asked to complete a language profile questionnaire and produce four oral narratives—two in JC and two in SAE. Narratives were analyzed for language mixing between JC and SAE.

**Results:**

Individuals that indicated greater daily usage of JC were more likely to produce instances of mix JC copula structures into their SAE narratives. In addition to mixing copula forms, participants often produced other variations in verb structures.

**Conclusions:**

Frequency of daily language use influences productions in bilingual speakers, resulting in variations of verb structures particularly the copula. This mixing in healthily bilingual speakers may lay the foundation for better understanding pathological language mixing in bilingual speakers of SAE and JC.

**Poster Number 30:**

A Literature Review on the Guideline of Difficult Intravenous Access

**Authors:**

Kayla Lau, Undergraduate Generic  
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Jacqueline Li, Undergraduate Generic  
Xiaolu Li, Undergraduate Generic  
Shujuan Li, Undergraduate Generic  
Naomi Wang, Undergraduate Generic

**Faculty Sponsor:**

Lorie Goshin, PhD, RN

**Issue:**

Establishing successful intravenous access in a timely manner is imperative to resuscitating a critically ill patient in a fast paced environment, like the emergency department. Multiple attempts at intravenous access can cause delays in care for the patient and frustration and loss of productivity in the health care team. This research appraisal evaluates the Emergency Nurses Association clinical practice guideline on interventions to improve IV access with fewer attempts, less pain, and/or improved patient satisfaction while in the Emergency Department (ED).

**Description:**

This appraisal assessed the quality, accuracy, and consistency of this Clinical Practice Guideline using Melnyk & Fineout-Overholt grading system and Emergency Nurses Association's classification of levels of recommendation for practice. The guideline used meta-analyses, systematic reviews, and research articles from emergency department settings, non-ED settings, and position statements. Databases used include PubMed, CINAHL, Cochrane - British Medical Journal, and the National Guideline Clearinghouse. Searched words used include difficult intravenous access, heat, ultrasound, and interosseous.

**Results:**

The evidence tables were consistent with the guideline purpose and supported the recommendations. Overall, the authors clearly, accurately, and consistently provided each intervention with sufficient research supportive of the interventions.

**Conclusions and recommendations:**

This clinical guideline is recommended for implementation in patients with difficult intravenous access in the ED. The ultrasound guided intravenous access and the intraosseous vascular access are two highly recommended interventions presented by the guideline.

**Poster Number 31:**

Effects of Kinesiophobia on Length of Stay and Recovery Outcomes in Total Knee Arthroplasty (TKA) Patients

**Authors:**

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Vyacheslav Nisonov, Graduate student, Department of Physical Therapy at Hunter College

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**Faculty Sponsor:**

Suzanne Babyar, Staff, Department of Physical Therapy at Hunter College

**Background:**

Kinesiophobia, or fear of movement, is linked to the slowing of recovery in patients undergoing total knee arthroplasty (TKA). The purpose of this study is: 1) Identify the prevalence of kinesiophobia in patients recovering from TKA in an in-patient setting; 2) Determine factors associated with kinesiophobia in these patients; and, 3) Determine if rehabilitation outcomes and length of stay are associated with kinesiophobia in this population.

**Methods:**

The Tampa Scale for Kinesiophobia (TSK) was administered to 348 patients admitted to in-patient rehabilitation following unilateral or bilateral TKA. Patient function was evaluated using the Functional Independence Measure (FIM). Knee range of motion and strength were recorded at admission and discharge. Co-morbid conditions, time post-surgery, age, gender, and prior level of function were documented.

**Results:**

36.4 % unilateral and 34.8 % bilateral TKA patients exhibited kinesiophobia. No significant difference in proportions between groups was found. Logistic regression failed to predict kinesiophobia status from admission impairments and function in unilateral TKA patients.

Factors associated with kinesiophobia were admission cognitive FIM scores along with limited AROM extension of the left lower extremity at admission for bilateral TKA.

Patients with unilateral TKA and kinesiophobia had a total LOS 1 day greater than those without kinesiophobia.

**Conclusion:**

Kinesiophobia could not be predicted by specific factors and did not appear to influence functional outcome. It is clinically meaningful to note that in cases of unilateral TKA and kinesiophobia total LOS averaged one day longer than for patients without kinesiophobia.

**Poster Number 32:**

60 is the new 40: A rise in STIs in people over 40

**Author:**

Amanda Andreani  
Monique Gimena  
Ghislene Gonzalez  
Jaclyn Sablian  
Marion Yuga

**Faculty Sponsor:**

Janice Molloy RN, MS, CEN, Sponsoring Faculty

**Issue:**

The prevalence of sexually transmitted infections (STIs) is on the rise among the middle aged/elderly population.

**Description:**

Research was conducted with a focus on the cause and prevention of sexually transmitted infections. The following search engines were utilized as a reference: CINAHL, Proquest and the CDC for relevant data published.

**Results:**

Normal and pathological changes of aging have contributed to the prevalence of STIs. A loss of a partner or spouse either from death or divorce, has launched them out of monogamy and back into the dating arena contributing to a sexually active life. Consequently, several adults are looking towards sites and apps to find dates which increases the risk of contracting an STI as it is likely they do not have knowledge about the person's sexual history. Risky sexual behaviors such as lack of condom usage puts many individuals at risk. Education on safe sexual practices places an important role to prevent STI's among older adults. It is important that sexually active adults talk to their Health care provider about yearly STI screening and be advised about counseling sessions offered by Medicare free of cost.

**Conclusions and recommendations:**

While STIs among the middle aged and elderly community have escalated over the decade. It is our recommendation that nurses must teach our older generation how to use barrier methods and to screen yearly. If nurses teach with an open and nonjudgemental attitude, our patients are more likely to communicate and gain the effective knowledge needed to prevent these infections.

**Poster Number 33:**

A Literature Review: How does the lack of diversity within the nursing workforce affect patient care?

**Authors:**

Samina Auni, Undergraduate, Generic Nursing Program, HBSON

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Fatima Zahra Boualaoui, Undergraduate, Nursing Generic Program, HBSON

Leizl Samano, Undergraduate, Generic Nursing Program, HBSON

**Faculty Sponsor:**

Charles Reuter, Assistant Professor

**Issue:**

Inspired by recent legislative policies and rhetoric against certain minority groups in the United States (U.S.), we aim to explore how the lack of diversity within the nursing workforce affects patient care. According to the U.S. Census Bureau, the American population consists of 37% ethnic minorities. However, only 19% of the nursing workforce is from an ethnic minority background. This literature review examines how this imbalance impacts patient outcomes.

**Description:**

Articles were retrieved from CINAHL, Google Scholar, PubMed, and Hunter One Search.

Keywords used included nursing workforce, ethnic minority, patient satisfaction, diversity nursing, minority nursing, and cultural disparities. Studies used comprised of six quantitative studies, two systematic reviews, one prospective cohort, two literature reviews, one concept analysis, and one cross-sectional study.

**Results:**

Key findings suggest that the lack of diversity within the nursing workforce negatively impacts patient care in terms of rejecting diagnoses/treatments, early discharge, or expressing the intention not to return to the hospital. The findings also imply that a lack of cultural competency can affect subjective assessments, as well as patient satisfaction ratings.

**Conclusions and recommendations:**

Evidence supports the hypothesis that lack of diversity negatively impacts patient care. As such, more efforts should be made to diversify the nursing workforce to obtain a better representation of the population. Thus, strategies to recruit, retain, and encourage minority nursing students can be effective in creating a diverse workforce. Further research should explore establishing a stronger causal link between nursing workforce diversity, cultural competency, and quality of care.

**Poster Number 34:**

Effect of Constraint-Induced Movement Therapy on a Woman with Severe Post-Stroke Upper-Extremity Hemiplegia: A Case Report

**Authors:**

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**Background:**

In constraint-Induced Movement Therapy (CIMT), individuals post-stroke engage in high volume task exercises with the weaker upper extremity (UE) while the unaffected limb is restrained. Research has shown the efficacy of CIMT in patients with mild to moderate weakness, however subjects with more severe impairments are excluded from CIMT trials. This single case report examined the effects of a 3-week trial of CIMT on UE function for a subject with severe post-stroke impairments.

**Methods:**

The subject was a 67-year-old woman 4 years post-stroke with severe left UE weakness without isolated movement. She completed a 3-week CIMT program in which her right UE was restrained while her left UE engaged in intense, repetitive training. This training included massed practice of task-oriented exercises with therapist supervision over the course of a 7-hour day during weekdays, with a modified independent weekend program. Pretest and posttest measures included the Wolf Motor Function Test (WMFT) and Fugl-Meyer Assessment (FMA).

**Results:**

There were no significant changes in any outcomes measures after 3 weeks of intervention. Both outcome measures showed slight improvements, but no significant or functional gains.

**Conclusions:**

Although the outcome measures revealed no signs of functional gain post-intervention, there were observable motor changes in the subject's affected UE. Further research is warranted to see if a modified, long-term version of CIMT would benefit this population.

**Poster Number 35:**

Name (Primary presenter): Shannon Kearney and Dolores Paul

Program: Undergraduate Queensborough- Hunter Dual Joint BSN program

Name (Other presenters): Beverly Valerio(QCCSN Undergrad), William Browne(QCCSN Undergrad), Jung Eun Kim (QCCSN Undergrad)

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## Psychosocial Wellbeing of Systemic Lupus Erythematosus: The Invisible Illness Initiative

Dolores Paul(QCCSN Undergrad), Shannon Kearney(QCCSN Undergrad), Beverly Valerio(QCCSN Undergrad), William Browne(QCCSN Undergrad), Jung Eun Kim (QCCSN Undergrad)

Sponsoring Faculty: Shenaz Georgilis Assistant Professor

**Issue:** Systemic Lupus Erythematosus (SLE) is a chronic autoimmune disorder that results in multisystem tissue damage. There is emerging evidence that SLE damages brain structures responsible for cognition and emotional processing, thus leading to neuropsychiatric symptoms and psychosocial difficulties. Depression and emotional distress has been reported among 50% of SLE patients, however neither symptom serves as a criterion set by the American College of Rheumatology to diagnose SLE. This finding is concerning and may point to a possible discrepancy in managing neuropsychiatric symptoms of SLE and subsequent psychosocial consequences.

**Description:** A literature review was performed using databases such as Pubmed, Medline, and ProQuest. Keywords used included lupus, depression, cognition, and quality of life.

**Results:** Findings point to a sense of “invisibility” among patients due to the presence of vague, subjective symptoms that are minimized by healthcare providers who place greater emphasis on the management of objective symptoms. In addition, patients who reported unmet psychological needs and poor social support were found to have greater difficulty in disease management. In contrast to other symptoms of SLE, health related quality of life is largely influenced by anxiety and depression.

**Conclusions and recommendations:** Healthcare professionals must incorporate this knowledge and properly assess for the presence of cognitive and emotional distress among SLE patients and how it may impact their psychosocial functioning. Proper identification and treatment of psychosocial distress may prevent worsening symptoms, narrow the perceived invisibility of the illness, and improve overall quality of life.

**Poster Number 36:**

An investigation of range of motion and flexibility following Cryo/Cuff® application to the shoulder girdle in healthy subjects

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Julia Lipovac (Graduate, Hunter College Physical Therapy)

Tom Holland (Faculty Advisor)

Suzanne Babyar (Faculty Advisor)

**Background:** Cryotherapy has been associated with producing an increase in joint viscosity and decrease in soft tissue extensibility. However, previous research has demonstrated that cold application in conjunction with stretching may lead to increases in flexibility. It is unclear whether stretching confounds the impact of cold application on flexibility. There is limited research focusing on the effects of cryotherapy on shoulder flexibility. Therefore, isolated cold application to the shoulder requires further investigation.

**Objective:** 1) Examine if cold application directly influences muscle flexibility;  
2) Determine the optimal time after application if cold increases flexibility;  
3) Determine the duration of the effect of cold application on flexibility.

**Methods:** 10 adults between the ages of 23 and 32 with no previous shoulder injury or medical instability were recruited. Cryo/Cuff® was applied for 10 minutes to each participant's randomly selected shoulder. Bilateral shoulder internal and external rotation was measured using goniometry and Apley's Scratch Test prior to application as well as immediately, 5 minutes, and 10 minutes post application.

**Results:** There was no interaction among cooling (cooled vs. non-cooled), side (dominant vs. non-dominant) and time (before Cryo/Cuff application, immediately after, 5 minutes after and 10 minutes after); (Wilks' Lambda  $F(3,6) = .952$ ,  $p = .956$ ). Paired t-tests revealed no statistically significant changes over time when the non-dominant arm ( $n=7$ ) or dominant arm ( $n=3$ ) was chilled ( $p > 0.05$ ).

**Conclusion:** Isolated cryotherapy neither increased nor decreased shoulder flexibility. If clinicians are using the Cryo/Cuff® to decrease shoulder pain prior to AROM exercises, they should be aware that this type of cold application will not increase stiffness or have an adverse effect on joint ROM and muscle flexibility.

**Poster Number 37:**

Effects of intermittent vs. continuous walking on kinetic and kinematic variables in persons with Multiple Sclerosis (pwMS): partial results of an ongoing study.

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**Background:** Previous research has shown that pwMS can walk longer distances with less fatigue with intermittent walking than continuous walking. The specific reasons for this improvement have not been examined. The purpose of this ongoing study is to investigate the effects of intermittent (INT) versus continuous (CONT) walking on gait kinematics in pwMS using the ProtoKinetics Movement Analysis Software (PKMAS) in combination with the Zenō Walkway. We hypothesize that gait kinematics would have less variability in the INT vs. CONT conditions, and that greater changes in gait symmetry would indicate fatigue.

**Methods:** Using a randomized crossover design, ambulatory subjects were recruited from MS practices. In the CONT condition, subjects walked 6 minutes continuously. In the INT condition subjects walked for three 2-minute bouts with a seated 2-minute rest between each 2-minute walk. Kinematic data were collected using the Protokinetics Zenō walkway. Distance walked was measured at 1-minute intervals for each condition.

**Results:** Six subjects (Mean EDSS 4.2) have completed the study. In the INT condition, the L/R ratio of percent stance time at minute one compared to minute six was more equal than in the CONT condition ( $p = .054$ ). Subjects walked significantly farther in the INT condition than in the CONT condition (1215 ft. vs. 1148 ft.,  $p = .05$ ).

**Conclusions:** Analysis of preliminary results indicates that stance time became less symmetrical in the CONT condition than in the INT condition as the distance walked increased. This provides a possible explanation for the difference in distances walked in these 2 conditions. It is hoped that by increasing the sample size, a more complete explanation will emerge.

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**Poster Number 38:**

Implementation & Outcomes of Oral Care Screening in Skilled Nursing Facility: Examining Readmission Risk and Evaluating Patient Care

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Faculty Advisor/Supervisor: Dr. Vogel AuD, CCC-A

Advisor/Supervisor: Faerella Boczko, M.S., CCC-SLP, BCS-S

**Background:** Poor oral hygiene has been found to be a significant risk factor in the development of pneumonia. This risk is compounded when a diagnosis of dysphagia is present due to the risk of aspirating material containing bacteria. The current study aims to investigate: 1.) The correlation between Oral Cavity Health Assessment (OCHA) scores and LACE scores (measure of risk for hospital readmission) 2.) Difference in quality of oral hygiene as measured by OCHA scores between short-term care and long-term care units 3.) The effect of independence in oral care on quality of oral hygiene as measured by OCHA scores 4.) The difference in quality of oral hygiene between patients with and without a dysphagia diagnosis.

**Methods:** 214 Participants from a sub-acute rehabilitation/long-term care skilled nursing facility received an oral care screening and a visual assessment of the oral cavity via the Oral Cavity Health Assessment (OCHA). LACE scores were obtained upon admission to the facility.

**Results:** No significant difference in oral hygiene scores was found between short-term care and long-term care units. No significant correlation was found between OCHA scores and LACE scores. Patients with a dysphagia diagnosis presented with significantly worse oral hygiene than patients without a dysphagia diagnosis. Patients with a dependence on staff for oral care presented with significantly decreased oral hygiene than patients who reported to independently perform oral care.

**Conclusions:** Education regarding risks of poor oral hygiene should be provided to both staff and patients especially those with a dysphagia diagnosis.

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**Poster Number 39:**

Title: Testing the Efficacy of Brain Training Apps

Authors: Dana Stubel, BA, Amanda Tasolides, BS, Jamie Torcicollo, BS and Nancy Eng, PhD, CCC-SLP

Faculty Sponsor: Nancy Eng, PhD, CCC-SLP

**Abstract**

**Background:** Those looking to improve their cognitive skills turn to readily available apps such as Luminosity or Elevate. However, the efficacy of “brain-training” apps in providing cognitive benefits has been questioned. This project was developed to assess whether or not the use of the commercially available app Elevate impacts performance of cognitive processing, executive functioning, and language skills in an adult with a history of learning disabilities.

**Method:** The subject of this project, MW, is a 43 year old bilingual (Cantonese and English) speaking female with a history of learning disabilities, including difficulties with language. MW was administered therapy twice a week for an hour, using the cognitive brain-training app Elevate. MW was also instructed to use the apps at home three to five times per week for 30 minutes.

**Results:** When working within the Elevate application, MW’s performance, from baseline to current level, improved 52% in writing, 35% in listening, 32% in speaking, 53% in reading, and 51% in math. Despite these improvements, MW continues to display difficulties in working memory, reading comprehension, auditory comprehension, grammaticality judgment, and semantic knowledge in real world application.

**Conclusion:** Based on provider observations and data collected from provider made materials, MW’s improved performance in the areas of writing, listening, speaking, and reading did not generalize to tasks outside of the Elevate application. Provider made materials assessed MW’s ability to correctly identify synonyms, antonyms and homophones, judge and use appropriate syntax, comprehend written passages and respond to wh-questions. Further analysis of these findings will be conducted when post therapy CASL assessment occurs.

**Poster Number 40:**

Name: Ashley Papa

Speech-Language Pathology at Hunter College

Faculty: Taryn Malcolm, Donald Vogel

Telepractice as a means for Voice Therapy for Vocal Cysts

**Background:** Telepractice in Speech-Language Pathology has been proven to be a viable means of service delivery. This case study examines telepractice as the means of service delivery for a client with a right anterior saccular cyst secondary to moderate muscle tension dysphonia. The client, an

occupational voice user, encounters high vocal demands at his job. Vocal symptoms include a mildly strained and rough vocal quality. The client was also noted to speak with a rapid rate and utilized infrequent, shallow replenishing breaths.

**Methods:** Therapy techniques included a combination of vocal hygiene, resonant voice therapy, and counseling via Google Hangouts. Treatment was provided once a week, for 45 minutes, over a period of eight weeks. Baseline data was taken prior to treatment, and was compared to post-treatment data collected halfway through therapy, immediately following therapy, and three months post therapy. The patient's acoustic and perceptual vocal parameters were measured using PRAAT, an online computer software. The patient was also given a home exercise program to complete each week.

**Results:** From a clinical standpoint, the patient's fundamental frequency, shimmer, and s/z ratio improved from the first to second assessment. At end of study, the patient reported less throat clearing and decreased strain in vocal quality compared to the beginning of the study.

**Conclusions:** Telepractice in this study was a feasible and convenient means of service delivery for providing resonant voice therapy. Future research should include exploration of alternate methods of voice therapy to determine feasibility using telepractice.

#### **Poster Number 41:**

Attention allocation of late-talkers and typically developing three-year-olds during word learning:  
A one-year follow-up

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Michelle MacRoy-Higgins, PhD( Faculty at Hunter College, Department of Speech Language Pathology)

**Background:** There is evidence to suggest that differences in attention allocation may contribute to early and continued language delay in children. The purpose of this study is to examine attention allocation patterns in children who showed early expressive language delay as toddlers (late talkers) as compared to peers with no history of early expressive language delay.

**Methods:** Ten three-year-olds who were late talkers (two female) and ten three-year-olds who had typical language development (two female) completed this study. They were given series of

standardized speech and language measures and participated in a word-learning task in which novel pseudo-words were presented for unfamiliar objects during one session (fast mapping).

Results: On average, children who were late talkers scored in the average range on standardized measures, indicating age-appropriate speech and language skills. Participants who were late talkers did not learn as many words during the fast mapping task, measured by comprehension and naming, as compared with gender and age-matched peers. Attention allocation to the novel objects was shorter in children who were late talkers, as compared with the control participants.

Conclusions: Differences in attention may contribute to initial delays in vocabulary development as well as continued difficulties learning new words in a subset of children identified as late talkers. Increasing attention allocation may facilitate language learning.

**Poster Number 42:**

A Study of Graduate Students Reflections on Elder and End-of-Life Care for Prisoners  
Steven L. Baumann, PhD, GNP, PMHNP & Vidette Todaro-Franceschi, PhD, RN, FT

Faculty, Hunter-Bellevue School of Nursing, Hunter College of CUNY

Significance & Background: The worldwide demographic shift towards increased numbers of older adults is affecting all facets of contemporary life, including prisons. It is the responsibility of public higher education to be leaders in preparing nurses and advance practice nurses to provide humane and effective elder-care and end-of-life care in a variety of settings.

Purpose: The purpose of this study was to explore the ethical and professional issues related to eldercare and end-of-life care in prisons.

Conceptual Framework: The findings of this study were considered from two different nursing perspectives, the humanbecoming tradition and the science of unitary human beings.

Methods: Humanbecoming hermeneutic sciencing was used to explore the personal reflective essays of 21 graduate nursing students who attended Susan J. Loeb, presentation titled "Enhancing End-of-Life (EOL) Care for Prisoners through Partnering with the Prison Community." The lecture was part of the annual Viola S. Shifrin Lecture in Palliative Care Nursing Studies at Hunter-Bellevue School of Nursing.

Findings/Conclusions: The student essays were synthesized to construct a summary essay, from which four themes were identified: aging in prison, dying in prison, ethical and professional issues in the elder and end-of-life care of prisoners, and ethical and professional issues in research involving elderly and end-of-life care of prisoners. These findings were interpreted in light of two different nursing perspectives; the humanbecoming tradition and unitary nursing science, from a global perspective.

**Poster Number 43:**

Beware the new Cause of Liver Disease, the Standard American Diet: A Literature Review of the Risk Factors and Strategies to Treat Liver Failure.

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Ioana Jucan (Undergraduate, ADN)

Daniela Cruz-Rivera (Undergraduate, ADN)

Samantha Lavoie (Undergraduate, ADN)

Faculty Sponsor: Tina Bayer, RN MS ANP-BC

**Issue:** Many factors contribute to liver failure such as hepatitis, malnutrition, obesity alcohol abuse, Tylenol overdose and hemochromatosis. Understanding the etiology of liver disease and the many factors that contribute to liver failure enables one to utilize strategies to reduce the risk of the disease and its progression. This literature review addresses causes of liver disease and prevention strategies taken to reduce these risks.

**Description:** The comprehensive search and specific review of research literature was completed utilizing CINAHL, LexisNexis, EBSCO, ProQuest and Google. Keywords included hepatitis, malnutrition, fatty liver disease, NASH, NAFLD, alcoholism, cirrhosis, Tylenol overdose, hemochromatosis, prevention and liver failure. Review of literature consisted of a comprehensive view of peer reviewed journals, newspaper articles and the following websites: Johns Hopkins, The Mayo Clinic and the American Liver Foundation.

**Results:** Key findings indicate 38,000 people die each year in the United States from this preventable disease. Treatment and prevention of liver disease is dependent upon early identification, effective lifestyle changes and dietary modifications.

**Conclusions and recommendations:** Many people believe that liver disease is primarily related to substance abuse. However research proves that obesity, high fat and high triglyceride diets cause damage comparable to alcohol and drug abuse. Patients who consume high fat diets are susceptible to developing cirrhosis, hepatocellular carcinomas, non-alcoholic fatty liver disease and liver failure. Early diagnosis and lifestyle modifications are key to preventing the progression of the disease. Left untreated liver disease can lead to cerebral edema, bleeding disorders, infection, kidney failure and death. It is imperative that patients avoid risky behavior, drink alcohol in moderation, vaccinate, use medications wisely and maintain healthy weight with exercise and proper nutrition.

**Poster Number: 44**

Blima Marcus

### Increasing BRCA Screening in Eligible Women In Brooklyn

This DNP capstone project proposes to increase genetic screening for cancer among Orthodox Jewish women. Women of Ashkenazi descent have a tenfold increase in carrying the BRCA mutations, which are associated with a significantly increased likelihood of developing breast cancer, ovarian cancer, as well as other cancers. However, few providers fully assess patient's family histories and many carriers are missed. Orthodox Jewish women may have barriers to this health screening, including concerns about stigma and marriageability, low educational attainment, fear, and, for some, lack of sources due to insularity.

This intervention used the Health Belief Model (HBM) as a framework to understand women's fears and health beliefs in a sample of 31 women in the Orthodox Jewish community. A mailed educational intervention will be provided to increase knowledge of cancer genetic screening, using the HBM constructs of perceived susceptibility, perceived barriers and perceived benefits. To evaluate outcomes, intent to be tested using a five-point Likert scale will be measured after the intervention. This capstone project proposes to increase knowledge and uptake of cancer screenings, and improve overall health outcomes in this community.