

**KNOWLEDGE EVALUATION THEORETICAL AND PRACTICAL NURSES IN
THE ELECTROCARDIOGRAM**

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ABSTRACT

What is the level the evaluation of the nurses to know the ECG? What is the difference between the theoretical and practical their knowledge of in the ECG. To identify the evaluation of the nurses to know the ECG. To identify the theoretical and practical knowledge and the difference between them at nurses. This chapter includes electrocardiography and its functions, Waves and interval describe and another objectives This study included a sample of nurses number them (60), as well the study is using questionnaire include (30) items for checking sample's Knowledge about electrocardiogram. For the purpose of data analysis was used Arithmetic mean, Standard deviation, Percentage and Dependent sample T-test. The study shows that the percentage of successful Knowledge about electrocardiogram is 95 %, While the proportion of failures 5%. For the practical part in Knowledge about electrocardiogram was 100% successful.

INTRODUCTION

An electrocardiogram (ECG) (electro – relating to or caused by electricity, cardio – from the Greek word kardia ‘heart’ and gram– from the Greek word gramma ‘thing written’) can be defined as a record or display of a person’s heartbeat produced by electrocardiography. The electrocardiogram (ECG) is a recording of body surface potentials generated by the electrical activity of the heart. The recording and interpretation of the ECG has a very long history, and is an important aspect of the clinical evaluation of an individual’s cardiac status and overall health. In this laboratory project we will design a filter for conditioning, the ECG signal and a monitoring system to detect abnormal rhythms. ECG monitoring is one of the most valuable diagnostic tools in modern medicine. The goals of ECG monitoring in hospital settings have expanded from simple heart rate and basic rhythm interpretation to the diagnosis of complex cardiac arrhythmias, myocardial ischaemia and prolonged QT interval. ECG monitoring must be meticulously undertaken. Potential consequences of poor technique include misinterpretation of cardiac arrhythmias, mistaken diagnosis, wasted investigations and mismanagement of the patient.