

# **Methodist University's Center for Research and Creativity**

## **Poster Session Instructions:**

This session provides an opportunity for you to share your work and initiate conversations.

All posters for the Annual MU CRC Symposium must be displayed on the background provided by the Methodist University Center for Research and Creativity Director. The size and page orientation specifications have been set. DO NOT ADJUST

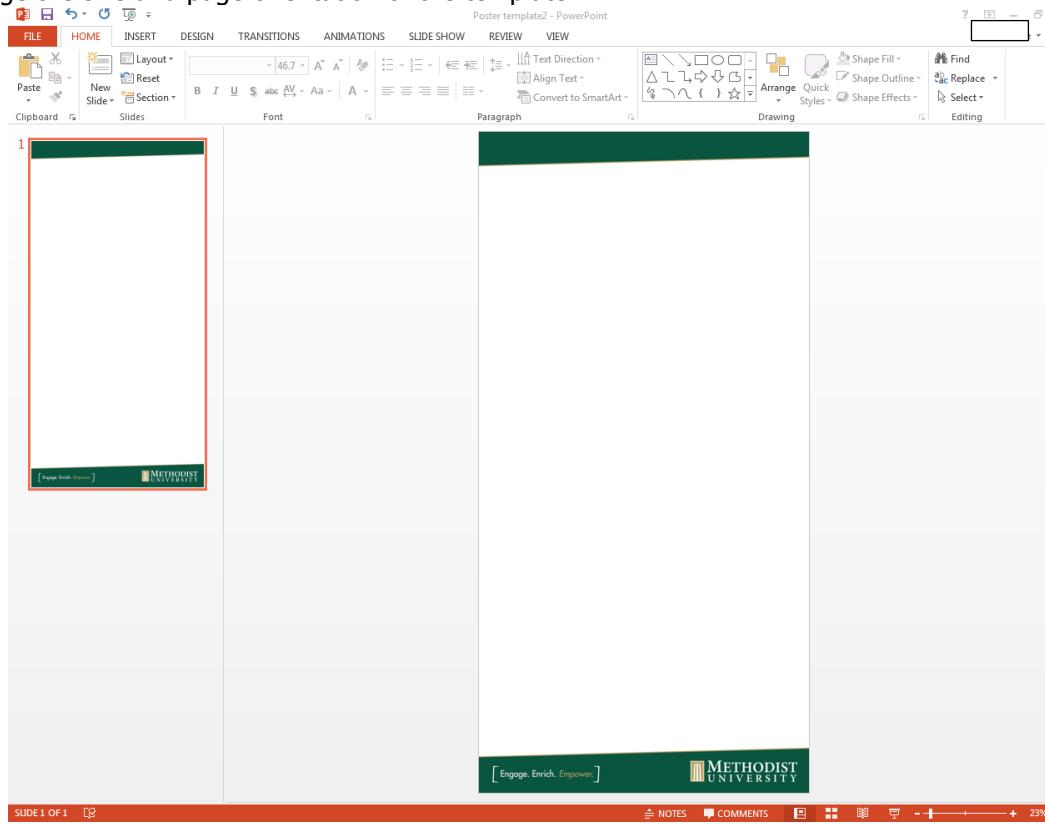
THE SIZE AND OR PAGE ORENTATION OF THE TEMPLATE. Posters can include: informative texts, display charts, diagrams, pictures, and/or graphs that depict program components, findings, samples of student work, participant testimony, and so forth.

A few recommendations:

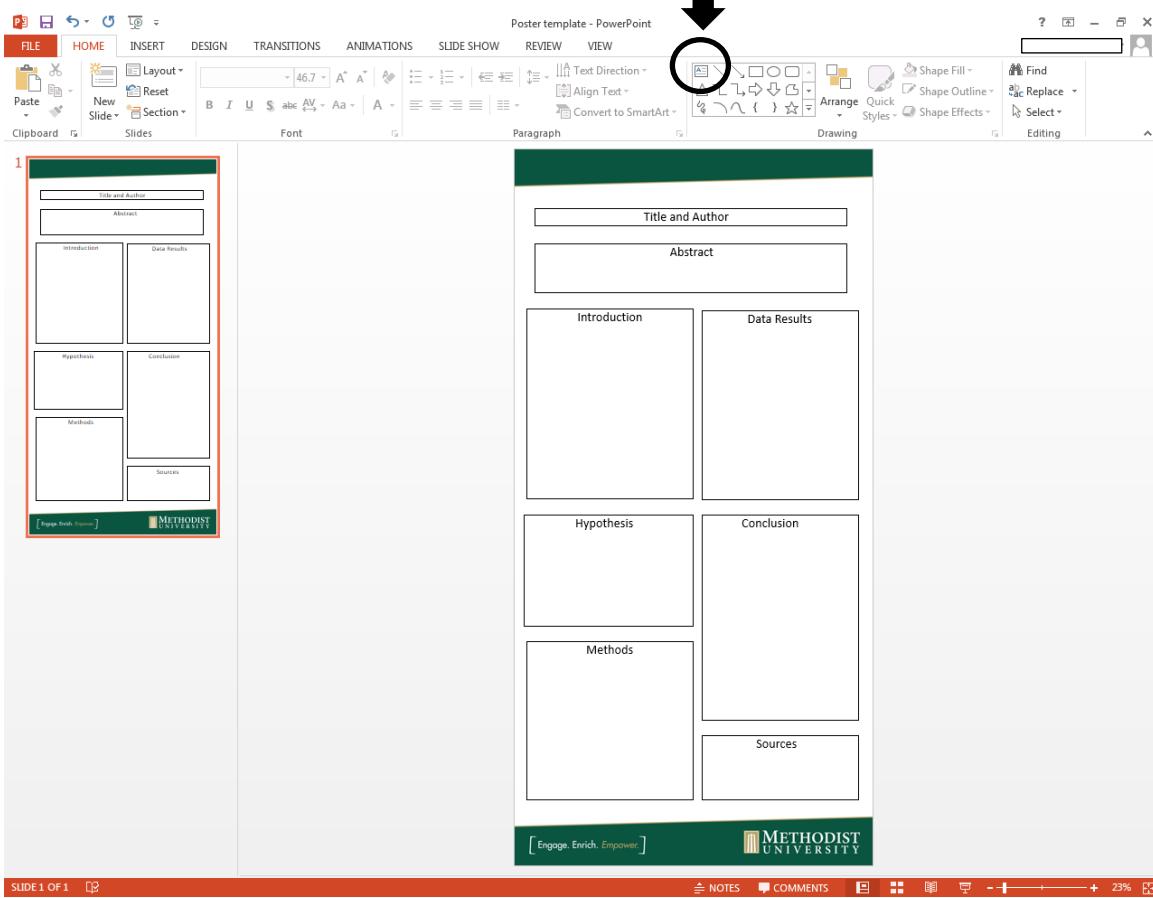
- Typically, a lighter background with dark or black font is the easiest to read.
- Choose a font that is easy to read (e.g., Times New Roman, Arial, Courier New, etc.).
- Make sure to "bold" your font.
- Font size should be large enough to be read from at least **three** feet away.
- Format your images/figures so that when they are printed at full-size they do not become pixelated.
- Avoid blocks of text. Instead use bullet points or single sentences.
- Organize the poster with headings so that your reader can focus on specific points.
- Organize your material so that it flows in a logical manner.

Directions for design:

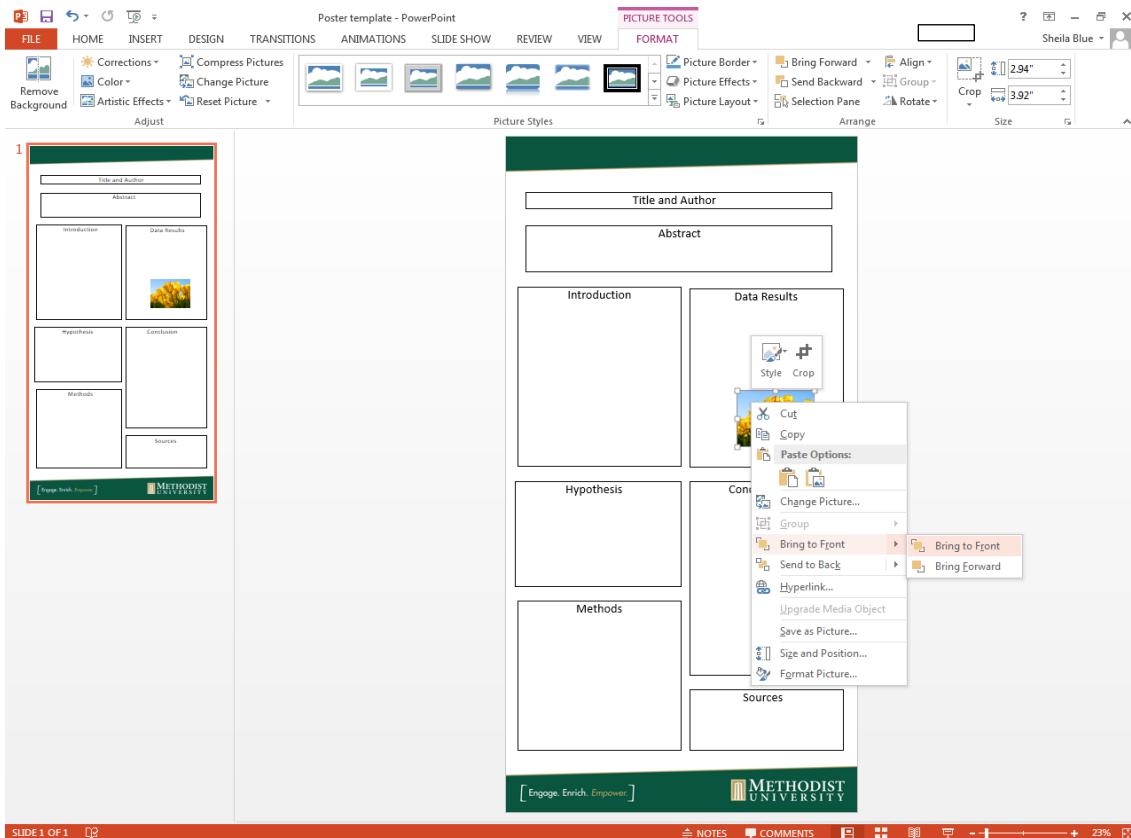
1. Presenters will be provided with the PowerPoint poster template from the MU CRC Director. Presenters ARE NOT to change the size and page orientation of the template.



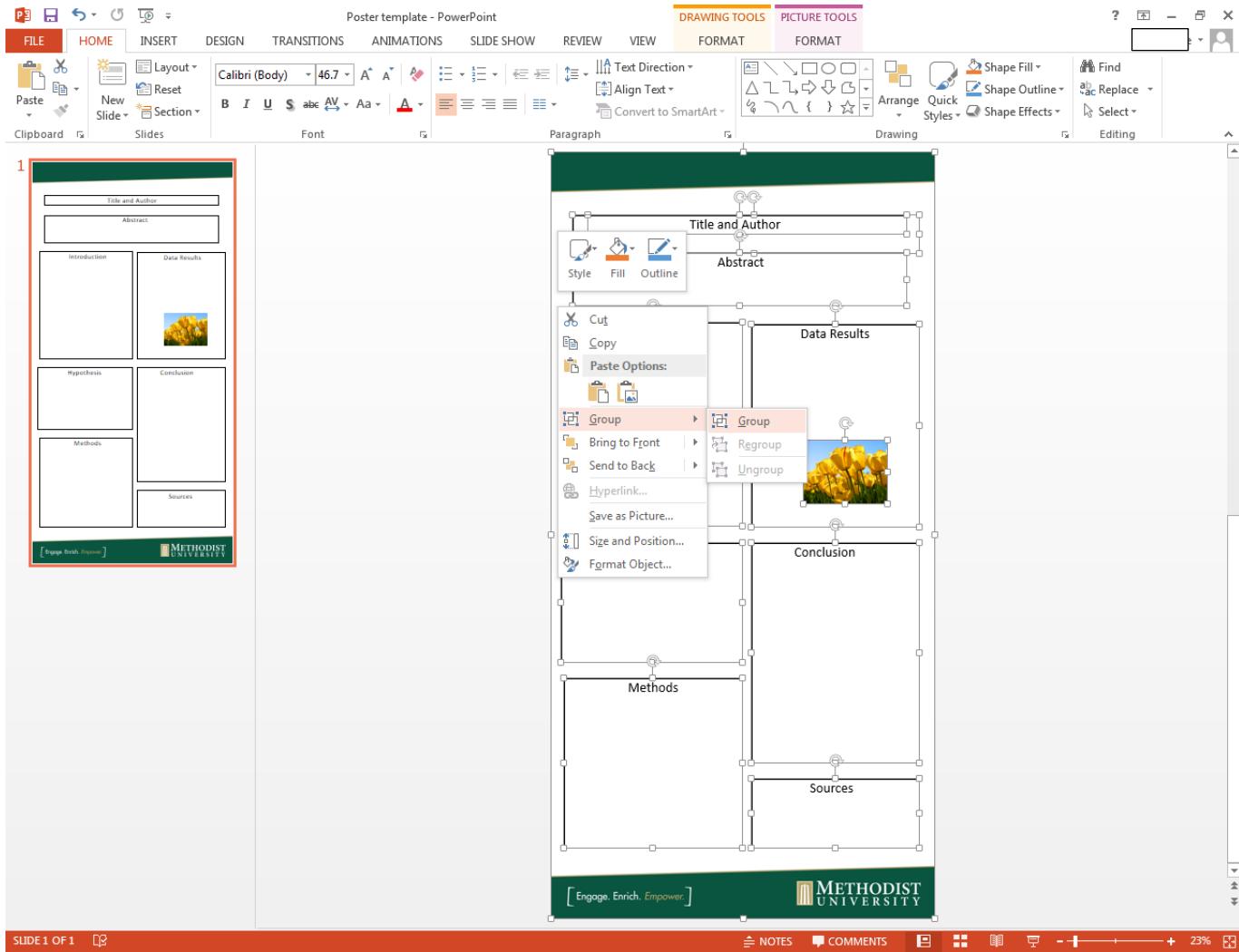
2. In order to add text to the slide, return to the "Home" tab and insert text boxes where you want to add your text. You can format your text boxes as you wish (e.g., adding a border, altering the color of the textbox background, etc.).



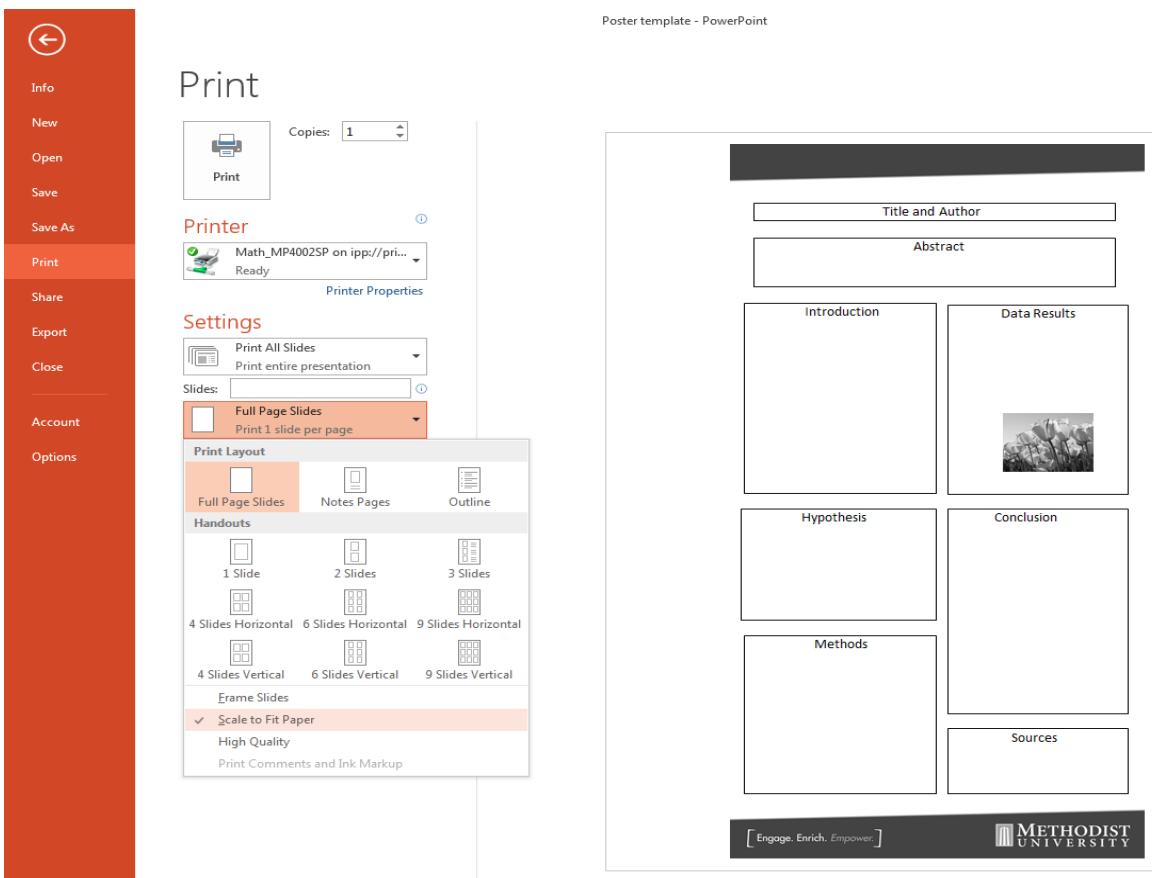
3. You will need to add figures/images separately. You can insert images using the "Insert" tab and selecting "Picture". Simply, insert the image and place it where you need it. You may need to bring the image to the front so that it is not hidden behind your text boxes and background image.



- Once you have added all of your information (i.e., text and images) you will need to review your poster to see how it will look at full size. To accomplish this adjust your zoom to 100%. Then scroll through your entire poster to ensure the font size is correct and that all images are clear.
- Proofread your work carefully!!** Thoroughly check your spelling, word choices, and sentence structure. This includes the information found within your textboxes and your images.
- Review your poster with your project advisor(s)/mentor(s).**
- Once you verify that your poster is formatted correctly you will want to "lock" the components in place so that they do not shift when the file is opened on other computers. To accomplish this, enter the following command: "Ctrl + A". This will select everything on your poster. Right click in the white space on the poster and select the "Group" option and then "group" again.



8. **Save your poster.** If you want to print it on a standard sheet of paper (8 x 11 in) in order to review it before printing the full size, then go to the "File" tab. Select "Print", "Full Page Slides", but make sure to select "Scale to Fit Paper".



9. Once you are satisfied, upload your poster to <https://postersubmissions.questionpro.com>. The MU CRC Director will notify you once the Monarch Press has printed your poster.

### \*Below are examples of posters that have been completed in past MU CRC Symposiums

**Mandatory Flu Vaccines And Health Care Workers**  
by  
Matthew D. Gatling

**Abstract**  
Health care workers (HCWs) are highly exposed to influenza in health care settings. Mandatory HCW influenza vaccinations proactively provide for protection of self, patients, and our family members.

**Why Should HCWs Advocate for Mandatory Flu Vaccination?**

As healthcare providers, we believe in *primum non nocere*. “First, do no harm”.

**Benefits to Mandatory HCW Flu Vaccination**

- Proven benefits outweigh ALL risks.
- No out of pocket cost for employees = no financial burden.
- HCWs themselves are protected from the flu as well as protecting patients from secondary hospital flu infection and cross contamination from patient to patient and patients to family members at home.
- Unvaccinated HCWs take the chance of becoming vectors for influenza.
- Mandatory vaccination program results have proven, decreased, numbers of serologically confirmed infections .

**Nurse-to-Patient Ratios: Patient Outcome and Nursing Careers**  
By: Kathy McGlothen

If you follow throughout the medical field that low nurse staffing has a negative consequence on both the nurses and patients (Wise, Fry, Duffield, Roche, & Buchanan, 2015). When a unit is understaffed not only does the nurses get burnt out, but the patients also do not get to receive the care they deserve. Having the right nurse-to-patient ratio plays an important role, especially in certain units.

**WORKLOAD & STRESS**

Many nurses face the issue of being in a unit that is understaffed and having to be overburdened with too many patients during each shift. Even on days when all hands are on deck, having a normal ratio of eight patients to one nurse can be a heavy load to deal with. National Institute for Occupational Safety and Health and Care Excellence (NICE) stated that patients in acute settings are at risks if a nurse has to care for more than eight patients at one time (Serrati, 2013).

**NURSE STAFFING RELATED TO JOBS SATISFACTION**

High workload & poor staffing ratios are associated with:

- Nurse burnout
- Low job satisfaction
- Increased nurse stress

Nurse stress is related to :

- Adverse patient events
- Nurse injuries
- Quality of care
- Patient satisfaction

**PROS FOR HAVING RATIOS**

The main purpose is to quality of care & patient safety purposes that decreasing the number of patients per nurse would elevate the level of care by promoting quality of care. It is also noted that busy & fatigued nurses may overlook (Serrati, 2013). It was suggested that better working conditions for nurses would reduce the rates of burnout & stress among nurses & provide a satisfying working environment (Wise, Fry, Duffield, Roche, & Buchanan, 2015).

**CONS FOR HAVING RATIOS**

Staffing levels that are associated with their workload when ratios were implemented, they were less satisfied with their ability to have a control in decision making. As the ratios are in effect at all times, breaks were not scheduled based on the availability of nursing staff, which may change thus conflicting with planned tasks or personal preference for breaks (Serrati, 2013).

**THE PERFECT RATIO**

There is no single ratio or formula that can calculate the answer to the demand of having the perfect nurse-to-patient ratio (Wise, Fry, Duffield, Roche, & Buchanan, 2015). Having the right number of nurses per ratio is not a common answer. We should strive to have the right staff with the right skills at the right place at the right time (Serrati, 2013). Ratios can be used to determine the optimal staffing levels in every clinical situation; their purpose is to force an increase in nursing supply and to prevent individual with from becoming understaffed (Wise, Fry, Duffield, Roche, & Buchanan, 2015).

**Outpatient Nursing Care for PTSD**  
Damian C Boggs

**Introduction**  
Post Traumatic Stress Disorder (PTSD) is often underdiagnosed in outpatient settings. Patients often do not recognize or attempt to mask psychological symptoms of PTSD while seeking treatment for physical symptoms that can be associated to the trauma itself. This places a burden on health care on nurses being able to recognize their at risk populations, what signs and symptoms are associated with PTSD, and how to manage care for these patients when they are diagnosed.

<p><b>Identifying Symptoms and Questions</b></p> <ul style="list-style-type: none"> <li>History to Recall Traumatic Event</li> <li>Withdrawal</li> <li>Self Medicating</li> <li>Sleep Disturbances</li> <li>Grieving</li> <li>Easily Angered</li> </ul>	<p><b>Ability to Recall Traumatic Event</b></p> <ul style="list-style-type: none"> <li>Avoidance Behaviors</li> <li>Hyperarousal</li> <li>Attachment to others</li> <li>Self-Destructive Behaviors</li> </ul>
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**ICU Patient After Circumstances**

In Isolation	In Quarantine
30%	25%
US Population	15%

**Recognizing at Risk Populations**  
There is an estimated 22.2 million (6.5% of the US population) people who have PTSD in the US. Specific patient populations are at a higher risk for exposure to traumatic events and have a higher prevalence of PTSD. The chart above highlights three specific groups commonly seen in outpatient settings.

**Management of Care**

- Organizing referrals and appointments
- Education on medications
- Connecting the patient with community resources
- Involving the patient's family and support system in care
- Meeting the patient's needs and expectations