First Name Last Name

**Professors Name** 

Subject

Date

PICOT Response

Design and Sample size description

The study was quantitative and it entailed the collection of Baseline biometric data from a cohort adult patients with diabetes. During the study, the researcher conducted home visits to 19 patients, which were conducted by doctoral students from the Rutgers University School of nursing. As part of the study, the visits included knowledge assessment, diabetes self-management education, review of foods in the home and providing education on the proper use of monitoring tools like the blood pressure monitor and glucometer. In the study, Biomarkers were then obtained and post-intervention and were then compared to the baseline biomarkers. The data describing lifestyle were collected and opportunities in regard to customized patient education was also provided.

Intervention, comparison and outcome variables

In the study all participants in the project received information on the targeted goals for A1C, blood pressure, glucose and BMI in regard to the American Diabetes Association guidelines.

There was a determined and individualized group visits during the visits on non-group

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participants. During this time the participants were also provided with free blood pressure monitors as part of self-management behaviors (Lavelle, et al.). Later on there was follow up.

Measurement

The means of the group were calculated during the pre- and post- intervention data for the different biomarkers (fasting glucose, A1C, diastolic pressure, systolic pressure and BMI).

Calculations were made on different values and analysed through the Microsoft excel.

Quantified results for intervention

Of the 19 participants in the project who received in-home DSME, fourteen completed all which

is equal to 74% retention rate during the tome of study. Of the 14 retained, 13 went on the

subsequent in-office appointment overlooking family medicine in the event that blood pressure

and BMI was obtained. All the fourteen participants completed lab monitoring in addition to

A1C (Lavelle, et al.).

Interpretation

The study suggests that DSME improves outcomes of diabetes thus improvement to health

indicators. Most improvements were also seen in A1C and serum glucose in addition 90% of

participation. The improvement was also not likely due to mean change (p<0.05) (Lavelle, et

al.). This call for additional study on the use of DSME as an effective tool in care.

## **Works Cited**

Lavelle, D., et al. "Diabetes Self-Management Education in the Home." Cureus, 2016,

doi:10.7759/cureus.710.

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