

and 35% for more than 15 years. Consensus was reached on the description of a respirator incident (72.5%), on handling of an incident concerning duration; short- (73.9%), long- (79.7%), mild- (84.1%) and intense stimulation (84.0%) as well as on the presentation of an incident; isolated- (72.5%), clustered- (76.8%) or persistent incident (84.1%).

Conclusions Implementation of the descriptions formulated in this study could lead to a more common language among professionals in the care of the preterm infant suffering from respiratory insufficiency. Professionals speaking the same language will result in a better quality of care.

O-151

ATTITUDES OF MOTHERS ABOUT MEDICATION SAFETY OF CHILDREN

¹M Uzun, ²G Sahin, ²S Özcan, ³E Gülsuyu, ³F Pars, ⁴S Atak, ⁵S Ekici. ¹Child Health and Illnesses Nursing, Bulent Ecevit University, Zonguldak, Turkey; ²Nursing, Fatih Sultan Mehmet Educational and Research Hospital, Istanbul, Turkey; ³Nursing, Lütfü Kırdar Educational and Research Hospital, Istanbul, Turkey; ⁴Nursing, Anadolu Health Center, Istanbul, Turkey; ⁵Nursing, Dokuz Eylül University Educational and Research Hospital, Istanbul, Turkey

10.1136/archdischild-2014-307384.218

Background and aims Unintentional medication misuse can lead harm and additional healthcare costs. Children are vulnerable to mistakes in taking medications. Parents and caregivers administering medications can easily be confused by different instructions for use based on the child's age, weight, and other medical conditions. The aim of the study is to determine mother attitudes about medication safety of children.

Methods A descriptive quantitative approach was used in study. The data were obtained from 396 mothers at outpatient children clinic, by socio-demographic properties and medication safety questionnaire which was designed by researcher. Data was evaluated using the descriptive statistics available in the Statistical Package for Social Sciences Software (SPSS 16.0).

Results Most of the mothers were (46,4%) between 20–29, high-school graduate (30.3%) and housewife (84.1%). (77.0%) of children didn't have a chronic illness but (60,1%) followed up by a physician once a month. Mother attitudes about medication safety are; if the illness was known before (47.5%) buy and use the medicines of previous experiences. If they recognised the illness firstly, use the prescribed medication (99%). (81,6%) gave up medication when side effects occur. (99.0%) of them obey the medication dosage, (96.5%) of them reported the ineffectiveness of medication to physician. Residual medicines thrown down (74,5%) and if necessary stored at high places (85,6%). If they forgot to schedule of medication, they waited until the next dose (60%).

Conclusion Most of the mothers pay attention and perform true attitude for medication safety.

O-152

HEPARIN SOLUTION VS NORMAL SALINE FOR FLUSHING PERIPHERAL VENOUS CATHETERS IN CHILDREN. PRELIMINARY RESULTS OF A RCT

F Festini, F Giusti, D Ciofi, N Olivini, S Bisogni. Nursing Research Unit, Meyer Children Hospital University of Florence, Florence, Italy

10.1136/archdischild-2014-307384.219

Prolonging the duration of peripheral venous catheters (PVC) as long as possible in children is a nursing priority. However,

available studies provide conflicting evidence on what kind of flush solution should be used to increase the life of PVCs in children.

Goal To compare the effectiveness of Normal Saline (NS) vs Heparin solution (HS) in maintaining the patency of PVCs in hospitalised children.

Methods Single blind randomised controlled trial. The study compares two solutions used to flush PVCs between an access and another: NS only (group A) vs a solution of Heparin 50 U/ml in NS (HS) (group B). Subjects are children 2 to 14 with a G22 or G24 PVC, undergoing iv therapy twice-in-day, without coagulation problems and taking no immunosuppressant or steroid drugs. Recruited subjects are randomised in either group using a randomization list. The sample numerosity was set at 26 per group. The outcomes evaluated are: PVC duration on site in hours; onset of complication.

Preliminary results. So far 18 children have been recruited (9 group A, 9 group B). The two groups do not differ statistically with regards to age, sex, location and number of access to PVC.

Mean duration of CVPs is 31.4 h in group A and 120.2 h in group B ($p = 0.004$). Complications have arisen in 88.9% of subjects in group A and 44.4% in group A ($p = 0.06$).

Discussion Preliminary data show a relevant difference in PVCs flushed with HS. The study will continue until the numerosity of 52 subjects is reached.

Nutrition and Neonatal

O-153

THE EFFECT OF AROMATHERAPY, MUSIC THERAPY AND VIBRATION APPLICATIONS ON NEONATAL STRESS AND BEHAVIOURS

¹O Tosun, ¹E Erdem, ²F Elmali, ³S Kurtoglu. ¹Nursing, Erciyes University Faculty of Health Sciences, Kayseri, Turkey; ²Biostatistics and Medical Informatics, Erciyes University Faculty of Medicine, Kayseri, Turkey; ³Paediatrics, Erciyes University Faculty of Medicine, Kayseri, Turkey

10.1136/archdischild-2014-307384.220

Background and aims It is important for physicians and nurses at neonatal units using advanced technology to understand neonatal behaviours and to support newborns by complementary care applications. This randomised controlled study was conducted experimentally to determine the effect of aromatherapy (with lavender+sweet almond oil), music therapy (Traditional Turkish Music) and vibration application (with electric toothbrush) on neonatal stress and behaviours.

Methods The study was conducted in a university hospital in Kayseri, Turkey. Totally 80 preterm infants assigned randomly to 4 groups as control, aromatherapy, music therapy and vibration application. Data were collected with questionnaire form, Brazelton Newborn Behavioural Assessment Scale (BNBAS) and Newborn Stress Evaluation Form (NSEF). On the first, third and fifth days, BNBAS and NSEF were applied both pre- and post-intervention application continued one session/day for five days. Data were analysed with two-way analysis of variance for the repeated measurements, Student-Newman-Keuls tests.

Results Of the preterm infants, there was significant difference between measurement times in mean BNBAS scores ($p < 0.001$) and between measurement times ($p = 0.003$), group-time interactions ($p < 0.001$) and between groups ($p = 0.040$) in mean NSEF scores. Mean of differences between pre- and post-intervention of BNBAS and NSEF scores of complementary care