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A STUDY TO EVALUATE INFORMATION, THOUGHTS WITH PERFORM OF RADIOGRAPHERS ABOUT COVID-19 DISEASE IN INTEGRAL HOSPITAL LUCKNOW

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Abstract

Radiographers who are trying to save lives and who are fighting on the front lines to protect the public. The COVID-19 disease is presently a matter of global public health concern as it could be potentially fatal. Radiographers must have at the moment, inadequate knowledge of prevention measures, and their erroneous practices may directly increase the risk of spread. The ongoing severe acute respiratory syndrome (SARS)-CoV-2 pandemic has expanded globally. The aim of the current study is to assess the knowledge, attitudes, and practices (KAP) of radiographers in Delhi towards SARS-CoV-2 infection.

Introduction

Coronavirus disease 2019 (abbreviated "COVID-19") is a life minacious respiratory disease induced by a Novel Severe Acute Respiratory Syndrome corona virus (SARS-CoV2) [1]. Coronavirus was thought to be arise from a sea food market Wuhan, China and is blameworthy for bilateral interstitial pneumonia. Coronavirus is a zoonotic pathogen that can be disseminated initially via animal-to-human and then human-to-human interaction. Coronaviruses (CoV) are a large classification of viruses that mainly causes respiratory infections. Coronavirus belongs to the Corona viridae family which has a cover surrounding the nucleocapsid and a linear, non-segmented, positive sense, single-stranded RNA of 26 to 32-kb size. They are petal or club shaped or crowned-like spikes seems like solar corona. They are 120–160 nm large spherical viruses having a helical uniformity (Sastry & Bhat,

2019).On December 30 2019, the current corona-virus Disease 2019 (COVID-19) was initially defined in Wuhan-China, and then it spread worldwide rapidly [3]. Due to the abrupt expand of this exceedingly disseminated coronavirus to many countries, World Health Organization (WHO) proclaimed it as a "public health emergency of international concern" on January 30, 2020. Later, due to the steady rise in the integer of affected countries, cases, and calamities; WHO declared COVID- 19 as a global pandemic on March 11 2020. SARS-COV-2 is dispersed from person-to-person by close contiguity (within about 6 ft) via the respiratory discharges in coughs or sneezes or by touching virus-contaminated surfaces or objects. Old age people or a person already having chronic sickness are more prone to high risk factors for severe disease and death

Objectives

To assess the knowledge of radiographers regarding COVID-19 infection.

To assess the attitude of radiographers regarding COVID-19 infection.

To assess the practice of radiographers regarding COVID-19 infection.

Methodology

Sample and sampling technique.

Sample size in present investigation was n=150 while sampling technique used is convenience sampling data was collected from visiting patients to radiology department and exclusion criteria was patients who were not interested.

Design of research

This study comprised of cross-sectional research design and quantitative approach is used.

Procedure

The Questionnaire based survey entitled COVID-19 and Practices of radiographers in medical institutions wasconducted among patients visiting in radiology department at Integral University. The study was carried out at Integral University. The questionnaire was self-structured, the questionnaire related to the study was in the form of multiple-choice questions, questionnaire was given to each participant. The questions of the questionnaire are divided into three sections.

Results and discussion.

Table 9: Age with Knowledge Attitude Practice (KAP)

Knowledge attitude practice		Age				χ^2value	DOFdf	P-Value	Interpret ation at 95% CI
		18–30	31–40	41–50	More Than 50				
Knowledge	**excellent knowledge**	43	24	8		21.164	4	0.0002	Significantsignificant
	good knowledge	69	6	3					
	poor knowledge	18	4	0					
Attitude	**favourable attitude**	1297	357	116		13.85	4	0.007	Significantsignificant
	neutral attitude	337	72	13					
Un	**favourable attitude**	316	81	36					
Practice	**good practice**	115	28	11		2.552	2	0.279	Non- significant

The above Table 9 stated the Pearson's Chi-Square value as 21.164 with the significance of 0.0002 (at 95% CI) which is obviously less than 0.05, means the test is statistically significant. So, we reject null hypothesis H0 and conclude there exist a strong statistical association between knowledge of radiographers regarding COVID-19 infection and their age. Chi-Square value as 13.85 with the significance of 0.007 (at 95% CI) which is obviously less than 0.05, means the test is statistically significant. So, we reject null hypothesis H0 and conclude there exist a strong statistical association between attitude of radiographers regarding COVID-19 infection and their age.

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