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EDITORIAL

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Implementing culturally sensitive evidence-based nursing practice in intensive care

Evidence-based nursing practice has been widely advocated as practices based on evidence (usually research findings) are more likely to result in improved patient outcomes (Melnyk et al., 2010). Evidence-based nursing practice emphasizes nurses to base their clinical practice to the greatest extent on research findings, namely, nurses should use research findings to inform their clinical practice (Polit & Beck, 2008). However, the implementation of research findings could be limited by culture as findings generated from researches in one culture may not be applicable to another. Such situation may be even more complicated in ICUs due to the complex ICU environment and the varied ICU cultures among settings. Thus, localizing the evidence and implementing cultural sensitive evidence-based nursing practice is an important key to provide effective nursing care.

In the current issue, three papers illustrated ICU nursing practice in different countries including Philippine, Uganda, and China. The article from Philippine discussed the states of and challenges to critical care nursing practice in Philippines. Given the limited improvements of critical care nursing practice in Philippines, the author recommended more researches should be conducted to provide rationale to re-evaluate and improve the current critical care nursing practice recommendations and standards in Philippines. Similarly, another article discussed the nursing practice for sepsis management in Uganda. Currently there is no nursing practice guidelines for sepsis management available in Uganda, and the evidence regarding nursing care for managing sepsis may not be applicable to Uganda as most evidence are from high income countries rather than the low income country such as Uganda. Thus, conducting more researches in Uganda to provide evidence to develop localized nursing practice guidelines and improve nursing practice for sepsis management was recommended. As pressure ulcers are common among ICU patients due to the prolonged bedrest and the application of mechanical ventilation, one paper compared three commonly used pressure ulcer risk assessment scales in ICU to provide insights for ICU nurses to choose appropriate scale to accurately assess patients' risk of pressure ulcer and implement timely nursing care. In addition to these three papers, another two papers discussed the journey of establishing

Contents

Examining nursing practices for management of sepsis in low income countries: the case of Uganda

Cliff Asher Aliga, Judith Mtyabule, Grace Mary Nakate, Abigail Uchenna Emelonye2

Formation of the Southern Asia Association for Regional Cooperation Federation of Critical Care Nurses

Prahba Gautam, Subhash P Acharya, Jaya Kuruvilla, Ged Williams.....6

Commentary on challenges to critical care nursing practice in the Philippines

Jennifer Torralba Paguio, Aprille C Banayat.....8

Critical care in Africa: a new chapter begins

Ged Williams, Cliff Asher Aliga, Daniel Ntogwaichu, Halima Kabara, Faustina Adipa, Michael Mbogo.....12

Risk assessment tools for pressure injury in intensive care patients: a review

Fu Rong Xu, Ze Ya Shi, Fu Rong Yang.....16

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Southern Asia Association for Regional Cooperation Federation of Critical Care Nurses and the evolution of critical care in Africa. Collaboration with other critical care leaders or organizations is the key for the achievements obtained in developing critical care in Africa.

Nurses and practitioners are recommended to initiate researches in critical care and base their practice on the findings of these researches, which also conform to the aim of Connect. Additionally, industrial papers regarding critical care are welcomed.

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