Impact of Adopting Guidelines Supporting Family Presence During Resuscitation (FPDR) on Nurses’ Perception of Risks, Benefits, Self-confidence, and Practice of FPDR in a Rural Midwestern Medical Center

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Rankings of Effectiveness (Ackley, Ladwig, Swan, & Tucker, 2008) of nursing activity or intervention are as follows:

**Effective:** Research validates the effectiveness of the nursing activity or intervention, preferably with Level 1 or with Level 2 evidence.

**Possibly Effective:** There are some research studies that validate the effectiveness of the nursing activity or intervention, but with insufficient strength to recommend that nurses institute the activity or intervention at this time. Generally, more research is needed.

**Not Effective:** Research has shown that the nursing activity or intervention is not effective and generally should not be used.

**Possibly Harmful:** There are some studies that show harm to clients when using the nursing activity or intervention, and the nurse should evaluate carefully whether the activity is ever appropriate.

Levels of Evidence (Ackley et al., 2008) referred to in the above effectiveness rating are:

**Level I:** Evidence obtained from at least one large (multi-site) well-designed RCT (randomized controlled trial).

**Level II:** Evidence from a systematic review or meta-analysis of all relevant RCTs or evidence-based clinical practice guidelines based on systematic reviews of RCTs or three of more RCTs of good quality that have similar results.

**Level III:** Evidence obtained from well-designed controlled trials without randomization (i.e. quasi-experimental).

**Level IV:** Evidence from well-designed case-control or cohort studies.

**Level V:** Evidence from systematic reviews of descriptive and qualitative studies.

**Level VI:** Evidence from a single descriptive or qualitative study.

**Level VII:** Evidence from the opinion of authorities and/or reports of expert committees.
References


