

Effectiveness of Self Instructional Module on Knowledge and Practice Regarding use of Defibrillator among Staff Nurses

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Abstract

Background: Cardiovascular disease is the nation's number one killer claiming almost as many lives as cancer, accident, pulmonary infection and all other causes of death combined. A cardiac arrest, also known as cardiopulmonary arrest, cardiopulmonary arrest or circulatory arrest, is the abrupt cessation of normal circulation of the blood due to failure of the heart to contract effectively during systole [1]. Dysrhythmias (abnormal heart rhythms) are common in people with cardiac disorders but also occur in people with normal hearts. Because seconds can literally make the difference between life and death for the person who is experiencing a serious dysrhythmias, evaluating responsiveness, quickly activating the emergency medical services and initiating cardiopulmonary resuscitation can determine the outcome [2]. Nurses play an important role in controlling and preventing dysrhythmias. Lack of adequate knowledge regarding the use of defibrillator may be life threatening. Hence the study was undertaken to evaluate the effectiveness of self instructional module on knowledge and practice regarding use of defibrillator among staff nurses working in selected areas of hospitals of the city, Nagpur. **Objectives:** to assess the pre test and posttest knowledge and practice, and to associate the knowledge and practice score with selected demographic variables. **Methodology:** a pre-experimental one group pretest posttest design was adopted for the study. It was conducted over 60 staff nurses and was selected by using non probability purposive sampling technique. Pre test was done using self structured questionnaire for knowledge and observation check list for practice. After pretest, the researcher administered self instructional module regarding knowledge and practice. Post test was done after seven days and analysis showed that there was significant increase in knowledge and practice after administering self instructional module. The analysis reveals that post test mean knowledge score value which was 22.60 with SD of ± 2.36 when compared with pre test mean knowledge score value which was 11.83 with SD of ± 2.76 . The calculated t value 23.89 is greater than table value 2.00 at 0.05 level of significance. Thus H₁ is accepted and H₀ is rejected and post test mean practice score was higher 18.78 with SD of ± 1.73 when compared with pre test mean practice score value which was 11.43 with SD of ± 2.16 . The calculated t value 23.79 is greater than table value 2.00 at 0.05 level of significance. Thus H₁ is accepted and H₀ is rejected. **Conclusion:** The significant association was found on knowledge with area of work. Thus, the study concluded that self instructional module was effective in improving knowledge and practice regarding use of defibrillator.

Keywords: Staff Nurses; Use of Defibrillator; Self Instructional Module; Knowledge; Practice.

Introduction

A cardiac arrest, also known as cardiopulmonary arrest, cardiopulmonary arrest or circulatory arrest, is the abrupt cessation of normal circulation of the blood due to failure of the heart to contract effectively during systole.

Dysrhythmias (abnormal heart rhythms) are common in people with cardiac disorders but also occur in people with normal hearts. Dysrhythmias are often detected because of associated manifestation of dizziness, palpitation, and syncope. Abnormalities in conduction are dangerous because of reduced cardiac output, which can lead to impaired cerebral perfusion. The most serious complication of a dysrhythmias is sudden death. Because seconds can literally make the difference between life and death for the person who is experiencing a serious dysrhythmias, evaluating responsiveness, quickly activating the emergency medical services and initiating cardiopulmonary resuscitation can determine the outcome.

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Defibrillation is used in emergency situation as the treatment of choice for ventricular fibrillation and pulseless ventricular tachycardia, the most common cause of abrupt loss of cardiac function and sudden cardiac death. Defibrillation is not used for patients who are conscious or who have pulse. The sooner defibrillation, survival rate: if it is used, within 1 minute of the onset of ventricular tachycardia or fibrillation, the survival rate is 90%; if it is delay for 12minutes, the survival rate is 2% to 5%.

Defibrillation depolarizes a critical mass of myocardial cells all at once; when they repolarize, the sinus node usually recaptures its role as the pacemaker. The electric voltage required to defibrillate the heart is usually greater than that required for cardioversion and may cause more myocardial damage.

Background and Need of the Study

Health data compiled from more than 190 countries shows that heart disease remains the No. 1 global cause of death with 17.3 million deaths each year, according to "Heart Disease and Stroke Statistics- 2015 Update: A Report From the American Heart Association." That number is expected to rise to more than 23.6 million by 2030, the report found.

A cardiovascular diseases (CVDs) have now become the leading cause of mortality in India. A quarter of all mortality is attributable to cardiovascular diseases. Ischemic heart disease and stroke are the predominant causes and are responsible for > 80% of cardiovascular diseases deaths. The Global Burden of Disease study estimate of age-standardized cardiovascular diseases death rate of 272 per 100000 population in India is higher than the global average of 235 per 100000 population.

Karen O krainec MSc, Devi K Banerjee MD, Mark JE isenberg MD, MPH (2004) have conducted the study and found that coronary artery disease (CAD) is the leading cause of cardiovascular mortality worldwide, with >4.5 million deaths occurring in the developing world. Despite a recent decline in developed countries, both coronary artery disease mortality and the prevalence of coronary artery disease risk factors continue to rise rapidly in developing countries. However, it is projected that coronary artery disease mortality rates will double from 1990 to 2020, with approximately 82% of the increase attributable to the developing world. Existing data suggest

that rapid socioeconomic growth in developing countries is increasing exposure to risk factors for coronary artery disease, such as diabetes, genetic factors, hypercholesterolemia, hypertension, and smoking. There is a relative lack of prevention and control measures to decrease exposure to these risk factors in developing countries.

Finamore S (2008) Cardiac arrest, as a result of ventricular fibrillation or pulseless ventricular tachycardia, is a common phenomenon, and the only treatment available is defibrillation. Currently, defibrillators deliver either a monophasic or biphasic shock, depending on the device used. In 2005, the American Heart Association published new cardiac arrest management guidelines, which included directions about energy selection for both types of defibrillators. These guidelines created a platform to address misconceptions that exist in the practice setting with regard to the use of biphasic defibrillators.

Thombare S. (2005) Cardiovascular disease is the nation's number one killer claiming almost as many lives as cancer, accidents, pulmonary infections, and all other causes of death combined. According to 2010 statistic from American Heart Association (AHA), nearly one million deaths from cardiovascular disease were reported, 53.6% of which resulted from heart attacks, 3.1% from hypertensive diseases, 0.7% from rheumatic heart disease, and 27.6% from all other cardiovascular diseases. Nowadays, use of defibrillation is a necessity in the level of care for clients managed in Intensive care and on general care units. The clients who need emergency defibrillation is a challenge to the nurses providing care. Therefore the nurses must be familiar with the equipment, complications and nursing management.

A study was conducted on registered staff nurses working in intensive care unit to assess their knowledge on use of defibrillator with a view to prepare an information booklet and found that 23% had good knowledge, 54% had poor knowledge and after giving instructional module knowledge was increased and also concluded that area of work does not show significant association.

The investigator own experience, discussion with experts and the influence of new models of defibrillator made her to realize that there is a need to educate the staff nurses those who are working in wards on use of defibrillator to handle any emergencies occurring in wards. Very rare study are done on nurses working in general medical surgical wards to assess their knowledge on use of defibrillator. Hence, investigator plans to design

the self instructional module on knowledge and practice regarding use of defibrillator among staff nurses working in selected areas of hospital.

Statement of the Problem

A study to assess the effectiveness of Self Instructional Module on knowledge and practice regarding Use of Defibrillator among staff nurses working in selected areas of hospitals of the city.

Objectives

- To assess the pre test knowledge and practice regarding Use of Defibrillator among staff nurses.
- To assess the post test knowledge and practice regarding Use of Defibrillator among staff nurses.
- on knowledge and practice regarding Use of Defibrillator among staff nurses.
- To associate the knowledge and practice score with selected demographic variables.

Operational Definitions

Assess: In this study, it refers to estimate the knowledge and practice of staff nurses regarding use of defibrillator.

- *Effectiveness:* In this study effectiveness means improvement of knowledge and practice of staff nurses regarding use of defibrillator.
- *Self instruction module:* In this study it refers to systematically developed self learning material prepared by investigator to improve the knowledge and practice of staff nurses regarding use of defibrillator.
- *Knowledge:* In this study knowledge it refers to the information with regards to use of defibrillator among staff nurses in term of correct response to the items on structured knowledge questionnaire.
- *Practice:* In this study, practice means, the implementation of use of defibrillator by the staff nurses in term of correct response to the items on observational checklist.
- *Defibrillator:* In this study defibrillator means manual external defibrillator that delivers an electrical shock that completely depolarizes the myocardium, producing a brief period of asystole.

- *Staff nurses:* In this study staff nurses refers to, GNM, B.Sc nursing and PBBSc nursing qualified registered nurses working in selected hospitals of the city.
- *Areas:* In this study the areas means medical surgical wards.

Delimitation

This study is delimited to the staff nurses working in medical surgical wards.

Hypothesis

Hypothesis is tested at 0.05 level of significance

H_0 - There will be no significant difference between pre test and post test knowledge and practice score regarding use of defibrillator among staff nurses.

H_1 - There will be significant difference between pre test and post test knowledge and practice score regarding use of defibrillator among staff nurses.

Conceptual Framework

The conceptual framework selected for the study is based on ErsestineWiedenbach's "Prescriptive Theory" (Helping art of clinical nursing).

Review of Literature

The literature reviewed has been organized into the following categories:

- Literature related to cardiac arrest.
- Literature related to defibrillator.
- Literature related to knowledge and practice on Use of Defibrillator.
- Literature related to effectiveness of self instructional module

Methodology

Research approach: Quantitative approach is used.

Research design: Showing pre experimental one group pre test post test design.

Setting of the study: Latamangeshkar hospital, Nagpur.

Variables

- *Independent variables:*

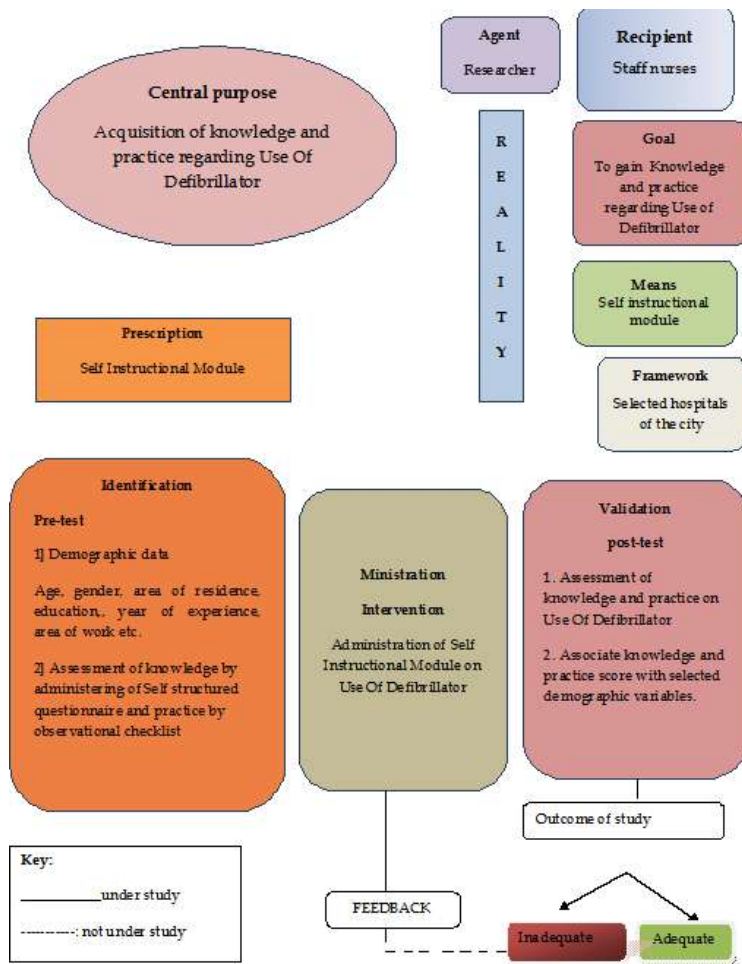


Fig. 1: Conceptual framework based on modified Widenbanch Prescriptive Theory

Self instructional module on knowledge and practice regarding use of Defibrillator.

• *Dependent variables:*

Knowledge and practice regarding use of Defibrillator among staff nurses working in selected areas of hospitals of the city.

• *Demographic variables:*

It includes, age, gender, professional education, training received from, area of work, experience in year etc

Population:

• *Target population*

It includes the staff nurses working in selected areas of hospital of the city.

• *Accessible population*

It comprises of staff nurses working in selected areas of hospital of the city who were available at

the time of data collection and who were fulfilling the inclusive criteria.

Sampling

- *Sample size:* 60
- *Sampling technique:* Non probability purposive sampling technique was used.

Sampling criteria

• *Inclusive criteria:*

Inclusive criteria was, staff nurses who are:

1. Registered nurses and are having RGNM, B.sc nursing and P.B.B.Sc/PC B.Sc Nursing qualification.
2. Able to read and understand English.
3. Willing to participate in study.
4. Available at the time of data collection

• *Exclusive criteria :*

Exclusive criteria was, staff nurses who are:

- Working in intensive care unit, operative theatre and casualty.

Description of tools

Section A: Demographic variables.

Section B: Self structured knowledge questionnaire

Section C: Observational checklist.

Section D: Self instructional module.

Validity

Content and construct validity of tool was determined by 24 experts including medical surgical nursing subjects experts, cardiologist and statistician etc.

Reliability

Karl pearson corelation coefficient formula was used. The corelation coefficient 'r' of the questionnaire was 0.88, which is more than 0.8. Hence the questionnaire was found to be reliable.

The reliability of the observation checklist was calculated by the inter rater technique and it was found 0.85 thus, there was good agreement and the observation check scale was found to be reliable.

Pilot Study

Pilot study was conducted from 4th December 2017 to 12 December 2017 for a period of 7 days. A sample of 6 staff nurses was selected from the selected areas of hospital of the city. The pilot study was feasible in terms of time, money and resources.

Data Collection

The main study data was gathered from 15 December 2017 to 13 January 2018. Permission was obtained from concerned authority. The samples were approached in small groups on a daily basis. Before giving the questionnaire self introduction was given by the investigator and the purpose of the study mentioned. Consent of the samples were taken. The pretest questionnaires were distributed to the samples and collected back after 31 minutes. Practice was checked by using observational checklist. After the pretest, the investigator administered the treatment (self instructional module on use of Defibrillator) after 7 days post test was taken.

Results

Section I: Description of staff nurses with regards to their demographic variables

The table 1 shows that majority 68.3% of the staff nurses were in the age group of 21-30 years, while majority 98.3% of the staff nurses were females.

Table 1: Table showing frequency and percentage wise distribution of staff nurses according to their demographic variables

n=60

Sr. No.	Demographic Variables	Frequency (F)	Percentage (%)	
	Age (in years)	21-30 yrs	41	68.3
		31-40 yrs	6	10.0
		41-50 yrs	13	21.7
		51 yrs and above	0	0
Gender	Male	1	1.7	
	Female	59	98.3	
Professional Education	RGNM	58	96.7	
	BBS	2	3.3	
	PBBSc	0	0	
Training Received from	Private Hospital	49	81.7	
	Government Hospital	11	18.3	
Area of work	Medicine Ward	23	38.3	
	Surgical Ward	12	20	
	Orthopaedic Ward	12	20	
	Other	13	21.7	
Experience in years	<1 yr	12	20	
	1 to 5 yrs	26	43.3	
	6 to 10 yrs	6	10	
	>10 yrs	16	26.7	

Educational status reveals that 96.7% of them were educated upto RGNM/GNM, 81.7% of staff nurses training receive from private hospital, 38.3% of them were working in medicine ward, majority 43.3% of the staff nurses had working experience of 1-5 years.

Level of significance $p < 0.05$

Above table 4 shows the overall mean knowledge scores of pre test and post test which reveals that post test mean knowledge score was higher 22.60 with SD of ± 2.36 when compared with pre test mean

Section - II: Description on pretest and posttest knowledge and practice of staff nurses regarding Use of Defibrillator

Table 2: Table showing comparison of pretest and post test knowledge grading score n=60

Grading	Pretest		Posttest	
	Frequency	Percentage	Frequency	Percentage
Excellent	0	0.0%	50	83.33
Very Good	7	11.67%	10	16.67
Good	32	53.33%	0	0
Average	21	35%	0	0
Poor	0	0.0%	0	0

Table 3: Table showing comparison of pretest and post test practice grading score n=60

Grading	Pretest		Posttest	
	Frequency	Percentage	Frequency	Percentage
Excellent	1	1.67%	55	91.67
Very Good	38	63.33%	5	8.33
Good	21	35%	0	0
Poor	0	0%	0	0

Section III: Description on the effectiveness of self instructional module on knowledge and practice of staff nurses regarding use of defibrillator

Table 4: Table showing effectiveness of self instructional module on knowledge score of pretest and posttest of staff nurses regarding use of defibrillator.

Overall	Mean	SD	Mean percentage	Calculated t value	Df	Table value	p-value
Pre Test	11.83	2.76	10.76	23.89	59	2.00	0.0001
Post Test	22.60	2.36					Highly Significant

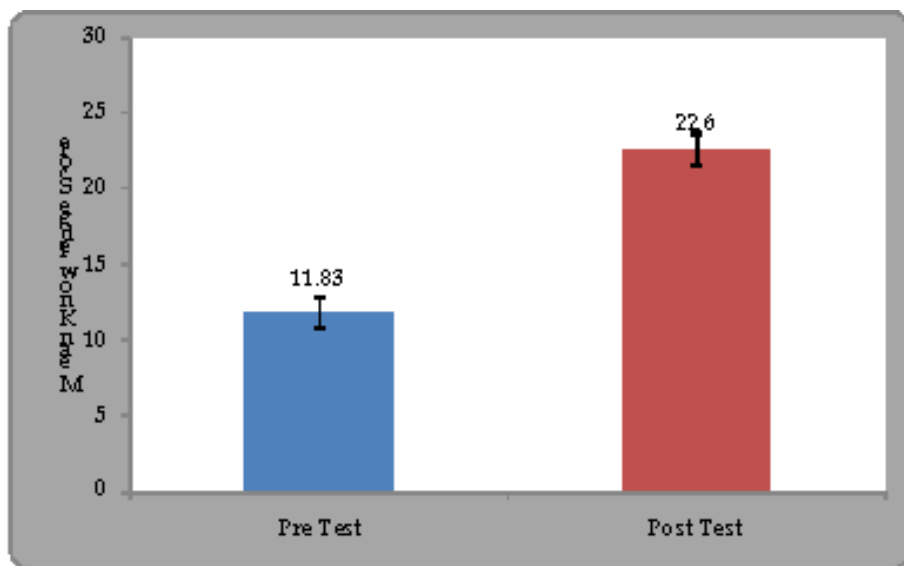


Fig. 2: Bar diagram representing effectiveness of self instructional module on knowledge score of pretest and posttest of staff nurses regarding use of defibrillator.

Table 5: Table showing effectiveness of self instructional module on practice score of pretest and posttest of staff nurses regarding use of defibrillator n=60

Overall	Mean	SD	Mean percentage	Calculated t value	Df	Table value	p-value
Pre Test	11.43	2.16	7.35	23.79	59	2.00	0.0001
Post Test	18.78	1.73					Highly Significant

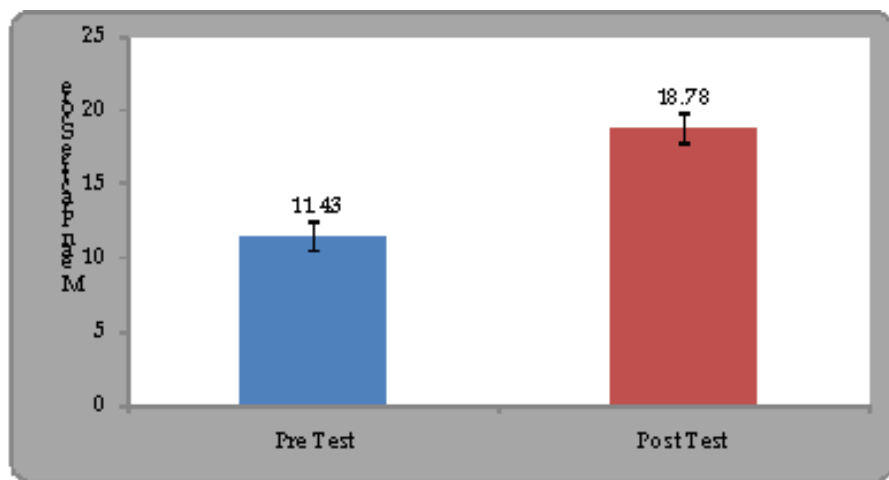


Fig. 3: Bar diagram representing effectiveness of self instructional module on knowledge score of pretest and posttest of staff nurses regarding use of defibrillator.

knowledge score value which was 11.83 with SD of ± 2.76 . The calculated t value 23.89 is greater than table value 2.00 at 0.05 level of significance. Hence it is statistically interpreted that self instructional module on knowledge regarding use of defibrillator was effective. Thus H_1 is accepted and H_0 is rejected.

Level of significance $p < 0.05$

Above table 5 shows the overall mean practice scores of pre test and post test which reveals that post test mean practice score was higher 18.78 with SD of ± 1.73 when compared with pre test mean practice score value which was 11.43 with SD of ± 2.16 . The calculated t value 23.79 is greater than table value 2.00 at 0.05 level of significance. Hence, it is statistically interpreted that self instructional module on practice regarding use of defibrillator was effective. Thus H_1 is accepted and H_0 is rejected.

Section III Description on association on knowledge and practice score with selected demographic variables

The analysis shows that the area of work was associated with knowledge score while none of the other demographic variables were associated with knowledge and practice score.

Discussion

Binu Xavier (2013) have conducted a quasi

experimental study with one group pretest and posttest. Without control group design was undertaken in Vinayaka Missions Hospital, Salem to assess the effectiveness of self instructional module regarding emergency management of patient with myocardial infarction on knowledge among staff nurses. Data was collected from 98 staff nurses selected by convenient sampling technique using closed ended questionnaire from 19.09.2009 to 02.10.2009. Data was analyzed by using descriptive and inferential statistics. Demographic characteristic reveals that the highest percentage (69%) of the staff nurses were in the age group of 21-25 years, were females (74%) were having B.Sc. nursing degree (80%). Highest percentage were having 3-4 yrs years of experience (69%), were working emergency unit (3%), ICU (Intensive Care Unit) (20%), and general ward (29%) and other wards (48%) and did not attend in-service program (93%). The overall pretest mean score 22.06 ± 1.92 which is 48% whereas in the post test the mean score (30.04 ± 2.82) which is 65% of the total score with an overall difference of 17% of pretest score reveals good knowledge. Highly significant difference found between the pretest and posttest knowledge score when compared with the demographic variables of staff nurses ($p < 0.05$). Indicated that self instructional module was effective.

Above study reveals that knowledge of staff nurses was poor in pretest. In present study also pretest knowledge score of staff nurses regarding

use of defibrillator was poor but after administration of self instructional module knowledge and practice score of staff nurses was increased in post test. This indicate that self instructional module was effective.

Jayakrishnan K. (2016) [11] conducted a descriptive study with cross sectional survey approach to find the extend of knowledge and practice among the staff nurses with OT (Operation Theatre), ICU(Intensive Care Unit) and ward experience in IMS AND SUM hospital. 100 staff nurse were selected by purposive sampling technique and data was collected. The association between practice and demographic data characteristics reveals that practice is significantly associated with age, department of service, year of service; and rest are not showing any significant association.

In above study practice was associated with age, department of service, year of service, but in present study knowledge is associated with the area of work. While practice was not associated with any other demographic variables.

Conclusion

Thus it was concluded that self instructional module on knowledge regarding use of defibrillator among staff nurses in selected hospitals of the city was found to be effective as a teaching strategy. Hence, based on the above cited findings, it was concluded undoubtedly that the written prepared material by the investigator in the form of self instructional module helped the staff nurses to increase knowledge and practice regarding use of defibrillator.

Implication of the Study:-

The findings of this study have implications for nursing practice, nursing education, nursing administration, and nursing research

Nursing practice

- Health care services are an essential component of community health care nursing, the role of the personnel is to conduct and participate in national programme to increase knowledge related to use of defibrillator among staff nurses.
- It will also help the nurses to keep update knowledge regarding various aspects of use of defibrillator
- When professional liability is recognized, it defines the parameters of the profession

and the standards of professional conduct. Nurses should therefore enhance their professional knowledge.

- The self instructional module can be used for imparting knowledge regarding various aspects of use of defibrillator to health team members.
- Self instructional module would serve as a ready reference material for the health team members. The information is particularly useful for the nurses for educating the relatives and other health team members the benefits of proper use of defibrillator.

Nursing education

- Nurse who are up to date with the knowledge regarding use of defibrillator are the better person to impart their knowledge to the nursing student which will ultimately decrease the mortality related to cardiovascular diseases.
- Now days, much emphasis is given on comprehensive care in the nursing curriculum. So this study can be used by nursing teachers as an informative illustration for nursing students.
- Self instructional module could help educators to use it as a tool for teaching.
- Students must be given clinical field assignment, in which they must be given opportunity to interact with people and create awareness regarding use of defibrillator.
- Teacher training programs must also include the topic of use of defibrillator.

Nursing administration

- Findings of the study can be used by the Nursing Administrator in creating policies and plans for providing education to the staff nurses and health professionals.
- It would help the nursing administrators to be planned and organized in giving continuing education to the nurses and to others for applying and updating the knowledge regarding use of defibrillator.
- In-service education must be conducted for the nurses to create awareness regarding use of defibrillator.
- It can help to prevent the client from sudden cardiac death.

Nursing research

- The findings of the study have added to the existing body of the knowledge in relation with use of defibrillator which will enhance the knowledge and would help to keep it updated.
- Other researchers may utilize the suggestions and recommendations for conducting further study.
- The tool and technique used has added to the body of knowledge and can be used for further references.

Limitation:

- The study was conducted only on staff nurses.
- The sample size was small to generalize the findings of the study.
- The study was limited to measure the knowledge of staff nurses in selected hospitals of the city.
- The tool for data collection was prepared by investigator herself. Standardized tool was not used

Recommendations:

- A similar study can be replicated on a larger population for a generalization of findings.
- A Study may be conducted to evaluate the effectiveness of self instructional module versus planned teaching programme on use of defibrillator.
- A comparative study can be done to assess the knowledge of use of defibrillator among staff nurses in community and in hospital setting.
- A descriptive study can be carried out to assess the attitude and practice of staff nurses on use of defibrillator.
- A similar study can be carried out to evaluate the effectiveness of video assisted self instructional module on use of defibrillator.

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