Despite the compelling long-term benefits of cardiac rehabilitation (CR) on quality of life and mortality, only one-third of patients with post-myocardial infarcts participate in the nation. A lack of provider knowledge and perceptions of CR benefits interplay to hinder the implementation of guidelines based secondary prevention treatment.

**Objectives**

Determine the effect of a CR educational intervention among APNs with the aim to:
1. Determine existing attitudes and perceptions toward CR
2. Identify facilitators and barriers to CR endorsement
3. Increase CR knowledge by 20% over 12-weeks

**Methods**

**Design:** Single group pre/post-test  
**Setting:** Metropolitan teaching hospital in Northeastern US  
**Sample:**  
- All APNs working in inpatient cardiology departments  
**Intervention:**  
- Three 1-hour face to face sessions  
- Multimodal with lectures, visual aid, handout  
- Addressed key areas  
  - ACC/AHA guidelines  
  - CR benefits, eligibility, referral  
**Measures and Analysis:**  
- 5-point Likert scale attitude and perception survey, descriptive statistics  
- Pre/post 20-item questionnaire: paired t-test  
- Program evaluation

**Sample Characteristics**

<table>
<thead>
<tr>
<th>Characteristics of Advanced Practice Nurses (N = 20) (APNs)</th>
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</thead>
<tbody>
<tr>
<td>Age, mean (SD)</td>
<td>41.4 (7.4)</td>
</tr>
<tr>
<td>Sex, n (%)</td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>7 (35.0)</td>
</tr>
<tr>
<td>Female</td>
<td>13 (65.0)</td>
</tr>
<tr>
<td>Years of cardiac experience, n (%)</td>
<td></td>
</tr>
<tr>
<td>0-5 years</td>
<td>3 (15.0)</td>
</tr>
<tr>
<td>6-10 years</td>
<td>9 (45.0)</td>
</tr>
<tr>
<td>11-15 years</td>
<td>5 (25.0)</td>
</tr>
<tr>
<td>16 years and above</td>
<td>3 (15.0)</td>
</tr>
<tr>
<td>SD = standard deviation</td>
<td></td>
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</tbody>
</table>

**CR Attitudes and Perceptions**

- APNs demonstrated neutral to positive attitudes with four domains emerged as facilitators and barriers of CR endorsement at the bedside.

**Results**

CR knowledge  
- The mean knowledge test scores increased by 30% from 12.5 (SD 1.73) to 18.5 (SD 1.35), with \( p < 0.0001 \).

**Clinical Impact**

- More than 90% APNs agreed the intervention improved their confidence level in discussing CR at the bedside.

**Conclusions**

A multimodal educational intervention tailored to APNs is efficacious and feasible in improving knowledge and attitudes of CR. The results support continued expansion for standardized education targeted to frontline providers in addressing potential barriers to patient participation.