

# Importance of Community Health Workers in Education on Prevention and Warning Signs of Cardiorespiratory Arrest

Importância dos Agentes Comunitários na Educação Sobre Prevenção e Sinais de Alerta de Parada Cardiorrespiratória  
Importancia de los Agentes Comunitarios en la Educación Sobre Prevención y Señales de Paro Cardiorrespiratorio

## RESUMO

**Objetivo:** O objetivo geral foi analisar a relevância dos Agentes Comunitários de Saúde na educação da população sobre a prevenção de Doenças Cardiovasculares e o reconhecimento de sinais de Parada Cardiorrespiratória. Os objetivos específicos da pesquisa são compreender como os Agentes Comunitários de Saúde atuam na educação da população sobre prevenção de Doenças Cardiovasculares e sinais de alerta de Parada Cardiorrespiratória, avaliando suas estratégias, o conhecimento da comunidade, os desafios enfrentados e propondo melhorias em sua formação e suporte. **Método:** Revisão integrativa da literatura em seis etapas, com busca de artigos nas bases Scientific Electronic Library Online, Biblioteca Virtual em Saúde e Repositório da Coordenação de Aperfeiçoamento de Pessoal de Nível Superior. **Resultados:** Os estudos mostraram que os Agentes Comunitários de Saúde têm papel essencial na divulgação de informações sobre riscos de Doenças Cardiovasculares e sinais de alerta de Parada Cardiorrespiratória. Suas ações, como visitas domiciliares e atividades educativas, impactam positivamente a conscientização da população. Contudo, limitações como a falta de capacitação contínua e apoio institucional reduzem sua efetividade. **Conclusão:** O estudo confirma a importância estratégica dos Agentes Comunitários de Saúde na educação em saúde cardiovascular, destacando a necessidade de investimento em formação e suporte para melhorar a prevenção e o reconhecimento precoce de emergências.

**DESCRITORES:** Atenção Primária em Saúde; Enfermagem; Emergência.

## ABSTRACT

**Objective:** The general objective was to analyze the relevance of Community Health Agents in educating the population about the prevention of Cardiovascular Diseases and the recognition of signs of Cardiorespiratory Arrest. The specific objectives of the research are to understand how Community Health Agents operate in educating the population on the prevention of Cardiovascular Diseases and warning signs of Cardiorespiratory Arrest, evaluating their strategies, the community's knowledge, the challenges they face, and proposing improvements in their training and support. **Method:** Integrative literature review in six stages, with article searches in the databases Scientific Electronic Library Online, Virtual Health Library, and the Repository of the Coordination for the Improvement of Higher Education Personnel. **Results:** The studies showed that Community Health Agents play an essential role in disseminating information about the risks of Cardiovascular Diseases and warning signs of Cardiorespiratory Arrest. Their actions, such as home visits and educational activities, have a positive impact on public awareness. However, limitations such as lack of continuous training and institutional support reduce their effectiveness. **Conclusion:** The study confirms the strategic importance of Community Health Agents in cardiovascular health education, highlighting the need for investment in training and support to improve prevention and early recognition of emergencies.

**DESCRIPTORS:** Primary Health Care; Nursing; Emergency.

## RESUMEN

**Objetivo:** El objetivo general fue analizar la relevancia de los Agentes Comunitarios de Salud en la educación de la población sobre la prevención de Enfermedades Cardiovasculares y el reconocimiento de signos de Paro Cardiorrespiratorio. Los objetivos específicos de la investigación son comprender cómo actúan los Agentes Comunitarios de Salud en la educación de la población sobre la prevención de Enfermedades Cardiovasculares y los signos de alerta de Paro Cardiorrespiratorio, evaluando sus estrategias, el conocimiento de la comunidad, los desafíos enfrentados y proponiendo mejoras en su formación y apoyo. **Método:** Revisión integradora de la literatura en seis etapas, con búsqueda de artículos en las bases de datos Scientific Electronic Library Online, Biblioteca Virtual en Salud y el Repositorio de la Coordinación de Perfeccionamiento del Personal de Nivel Superior. **Resultados:** Los estudios mostraron que los Agentes Comunitarios de Salud desempeñan un papel esencial en la difusión de información sobre los riesgos de las Enfermedades Cardiovasculares y los signos de alerta de Paro Cardiorrespiratorio. Sus acciones, como visitas domiciliarias y actividades educativas, impactan positivamente en la concienciación de la población. Sin embargo, limitaciones como la falta de formación continua y el apoyo institucional reducen su efectividad. **Conclusión:** El estudio confirma la importancia estratégica de los Agentes Comunitarios de Salud en la educación en salud cardiovascular, destacando la necesidad de invertir en formación y apoyo para mejorar la prevención y el reconocimiento precoz de emergencias.

**DESCRIPTORES:** Atención Primaria en Salud; Enfermería; Emergencias.

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**INTRODUCTION**

According to the American Heart Association, cardiovascular diseases are the leading cause of death worldwide, requiring effective strategies for prevention and early recognition of events such as cardiopulmonary arrest<sup>1</sup>. In this context, Community Health Agents play an essential role in primary care, acting as a link between the community and the health system. However, in Brazil, these professionals emerged in the 1980s to expand access and promote preventive and educational actions through home visits and guidance to the population<sup>2</sup>.

The work of community health agents is focused on valuing and promoting the health of the population. Therefore, the work of Community Health Agents in the prevention of cardiovascular diseases and in the recognition of warning signs of Cardiac Arrest manifests itself in several ways<sup>3</sup>.

Through home visits and group activities, community agents can promote health education, disseminating information about risk factors for cardiovascular diseases and encouraging healthy habits. In addition, they can be trained to recognize warning signs of cardiovascular events, such as those that precede cardiopulmonary arrest, and advise the population to seek immediate medical attention. The study sought to answer the question of how important this role is in the prevention and early recognition of these conditions.

Therefore, the rationale for analyz-

ing the importance of community health workers in education on cardiovascular disease prevention and recognition of warning signs of cardiac arrest lies in the urgent need to optimize public health strategies to address the challenge of cardiovascular disease. By investing in training and recognizing the role of community health workers, it is possible to strengthen primary health care, decentralize prevention and health promotion actions, and reach populations that would otherwise have less access to crucial information.

The overall objective is to analyze the relevance of community health workers in educating the population about cardiovascular disease prevention and recognizing warning signs of cardiac arrest.

The specific objectives are: (1) To identify and describe the main strategies and approaches used by community health workers in disseminating information on cardiovascular disease prevention, including risk factors, healthy lifestyle habits, and the importance of regular medical checkups; (2) Assessing the knowledge of the population assisted by community health workers regarding the warning signs of cardiorespiratory arrest and the appropriate conduct to be taken upon their identification, seeking to highlight the impact of community health workers' actions in this regard; (3) Analyze the barriers and facilitators encountered by community health workers in the development of their educational activities related to the prevention of cardiovascular diseases and the recognition of signs of cardiopulmonary arrest, considering the context of primary health care; (4) Propose recommendations for improving the training and support of community health workers, aiming to optimize their performance in educating the population about the prevention of cardiovascular diseases and the recognition of warning signs of cardiopulmonary arrest, thus strengthening public health

strategies to address these conditions.

**METHOD**

This investigation adopts a methodological approach based on an integrative review of the literature, complemented by qualitative analysis, as it is appropriate to the complexity of the role of Community Health Agents in the prevention of Cardiovascular Diseases and the recognition of Cardiac Arrest. This methodology allows for a critical synthesis of scientific production, provided that it follows rigorous steps to ensure validity and reliability<sup>4</sup>.

The review was conducted in six stages. The first stage of the integrative review involved defining the theme and formulating the research question, focusing on the role of Community Health Agents in the prevention of Cardiovascular Diseases and the recognition of warning signs of Cardiac Arrest, with the guiding question: "How important is the role of Community Health Agents in educating the population about the prevention of Cardiovascular Diseases and the recognition of warning signs of Cardiac Arrest?" To guide the search for evidence, descriptors such as "Primary Health Care," "Nursing," and "Emergency" were defined and used in databases such as SciELO, BVS, and Portal CAPES, in addition to the bibliography of the selected articles.

The second stage of the integrative review consisted of establishing rigorous criteria for the inclusion and exclusion of studies, aiming to ensure the selection of relevant and quality evidence to answer the research question. Initially, with the search for the descriptors in Portuguese "Primary Health Care," "Nursing," and "Emergency," the following results were found:

**Table 1 – Initial results**

SOURCES OF INFORMATION	SEARCH STRATEGY	RESULTS
SciELO	Search by descriptors	07
CAPES Journals	Search by descriptors	52
BVS	Search by descriptors	374

Source: Authors (2025)

Given the breadth of the descriptor results, refinement mechanisms and criteria were applied to include or exclude materials. Inclusion criteria were defined that considered articles published in recognized databases that directly addressed the role of community health workers in education for the prevention of cardiovascular diseases or in the recognition of warning signs of cardiopulmonary arrest, adopting the time frame from 2011 to 2025, the Portuguese language, and the format of the material (available in full and free of charge).

**Table 2 – Application of refinement criteria**

INFORMATION SOURCES	SEARCH STRATEGY	RESULT
SciELO	Search by descriptors + Portuguese language + publication period + full text + main subject related to descriptors	06
CAPES JOURNALS	Search for descriptors + Portuguese language + publication period + full text + main subject related to the descriptors	37
BVS	Search by descriptors + Portuguese language + publication period + full text + main subject related to the descriptors	131

Source: Authors (2025)

After applying refinement criteria, the initial number of 433 articles was reduced to 174. Next, studies that did not directly address the role of Community Health Agents in cardiovascular health or that dealt only with other levels of care were excluded. Texts that were not available in full and materials not classified as scientific articles, such as monographs, theses, editorials, and reviews, were also discarded due to the possible absence of peer review. The screening continued with the reading of titles, abstracts, and, subsequently, the full texts of eligible articles. Duplicates found in different databases were eliminated, considering only the first record. At the end of the screening, 15 articles relevant to the theme remained.

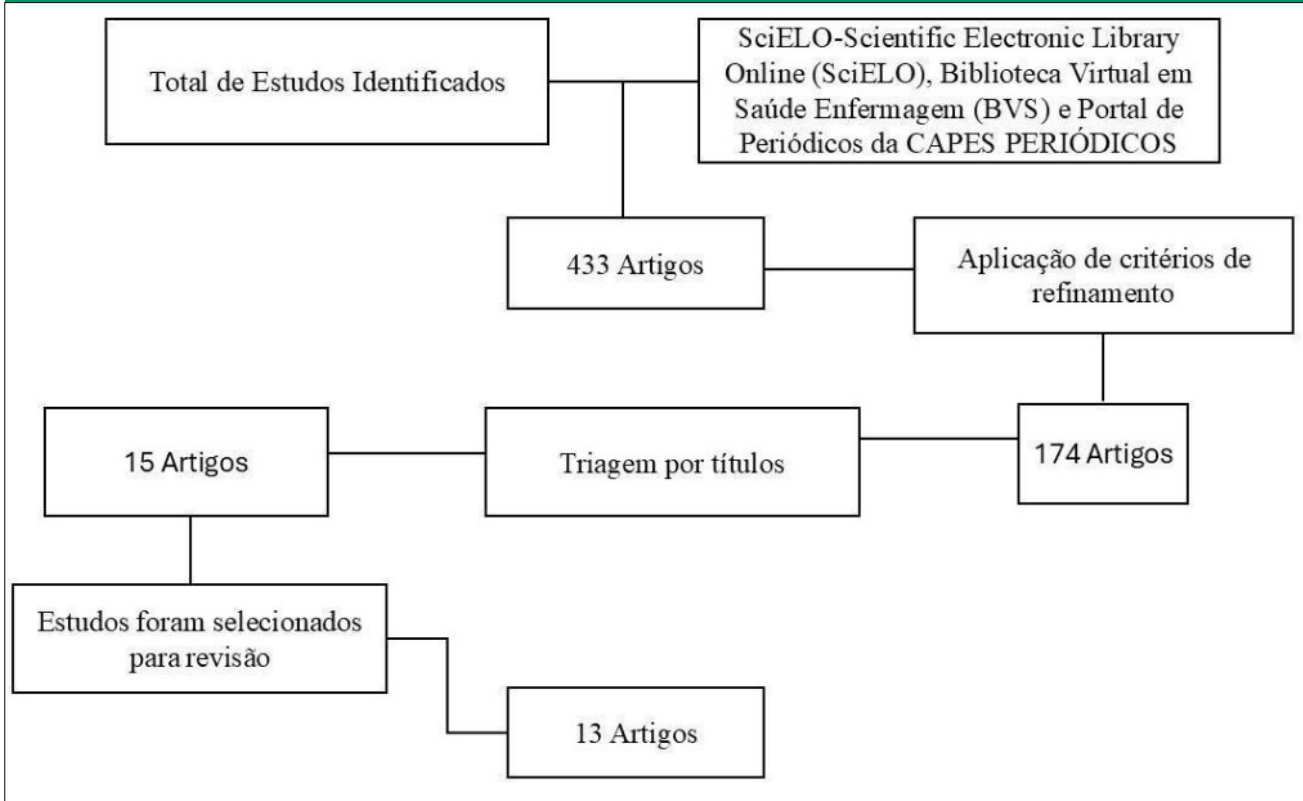
**Quadro 3 – Triagem por títulos**

INFORMATION SOURCES	SEARCH STRATEGY	RESULTS
SciELO	Screening by titles	0
CAPES JOURNAL	Screening by titles	05
BVS	Screening by titles	10

Source: Authors (2025)

From the final screening, 433 studies were found, 259 were excluded for not meeting the inclusion criteria, 15 studies were selected and read by titles and abstracts, and 2 were excluded. For full reading, 13 studies were selected for review.

Figure 1 – Flowchart of the sample selection process



Source: Authors (2025)

The final stages of the integrative review involved the extraction and categorization of data from the studies by relevant themes, such as educational strategies and the performance of Community Health Agents, followed by a critical analysis of the methodologies and results. The narrative interpretation considered the quality and relevance of the findings, culminating

in an organized synthesis that highlighted the contribution of community health workers in the prevention of cardiovascular diseases and the recognition of cardiopulmonary arrest, in addition to pointing out gaps for future research.

results presented in Table 9 below detail the contributions of each study in relation to the importance of community health workers in education for the prevention of cardiovascular disease and recognition of warning signs of cardiopulmonary arrest.

RESULTS

Based on the selected authors, the

Quadro 4 – Síntese dos estudos

Reference	Year	Objective of the study/document	Main Results/Relevant Content	Contribution to the Integrative Review
Sales et al.	2022	To understand aspects of the structure and process of emergency care in Family Health Units.	Insufficient resources and need to strengthen care for acute complaints.	It highlights the precarious nature of resources and the need for training.
Oliveira et al.	2016	Analyze the perception of ESF professionals regarding urgent and emergency care.	Low effectiveness of care due to lack of preparation and resources.	Reinforces the need for public policies and professional training.
Moraes e Paiva	2017	Assess the knowledge of primary health care nurses on basic life support.	Low overall performance; better performance among younger nurses and those who have recently updated their training.	Indicates the need for continuing education for emergencies.

Santos et al.	2017	Report on first aid training experience in primary care Basic care.	A simulation-based course promoted the integration of theory and practice.	Points to the effectiveness of practical training for improving care.
Palmeira e Machado	2011	Evaluate the door-to-electrocardiogram time in patients with chest pain.	95.8% underwent ECG after more than 10 minutes; impairment in early diagnosis of AMI.	Shows the importance of streamlining emergency procedures.
Lemes et al.	2015	Investigate primary care-sensitive cases in emergency departments.	64% of cases were sensitive to primary care.	Evidence of need to strengthening resolution in Primary Care.
Moraes e Paiva	2017	Assess the knowledge of primary care nurses about basic life support.	Low overall performance; better performance among younger nurses and those who had recently received refresher training.	Indicates the need for continuing education for emergencies.
Santos et al.	2017	Report experience of first aid training in primary care.	Simulation-based course favored the articulation of theory and practice.	Points to the effectiveness of practical training for improving care.
Palmeira e Machado	2011	Evaluate the door-to-electrocardiogram time in patients with chest pain.	95.8% underwent ECG after more than 10 minutes; impairment in early diagnosis of AMI.	Shows the importance of streamlining emergency procedures.
Ribeiro et al.	2019	Present the SBC guidelines on cardiopulmonary arrest.	Details the cardiopulmonary resuscitation protocol.	Provides technical information on cardiopulmonary arrest.
Celeste, Maia e Andrade	2021	Identify requirements for training nursing staff in urgent and emergency care.	Only 50% of professionals feel competent; lack of use of protocols.	Evidence of preparation failures and need for systematic training.
Félix et al.	2023	Assess self-confidence before and after BLS training with in situ simulation.	Significant increase in professionals' self-confidence after intervention.	Demonstrates the effectiveness of practical simulation as a teaching method.
Conceição et al.	2024	Analyze the preparedness of nursing professionals for emergency situations emergencies in Primary Health Care.	Deficiencies in infrastructure, training, and knowledge of protocols.	Reflects the importance of continuing education in Primary Health Care.

Source: Authors (2025)

## DISCUSSION

The analysis of the selected studies reveals a consensus on the importance of Community Health Agents in the context of cardiovascular health.

The review of the studies showed critical deficiencies in the training of nursing professionals for urgent and emergency care in Primary Health Care.

The analysis of the selected studies revealed significant structural and professional deficiencies in urgent and emergency care in Primary Health Care. The family health units investigated have insufficient resources to deal with urgent situations, highlighting the need to strengthen care by improving the availability of materials and professional training<sup>5</sup>.

Corroborating these findings, it is observed that the low effectiveness of

the emergency care network stems from the lack of preparation of professionals, as well as the lack of physical and material resources. This scenario compromises the effectiveness of Primary Care, weakening its role as the gateway to the Unified Health System (SUS)<sup>6</sup>.

With regard to nurses' knowledge in emergency situations, the overall average score on the basic life support knowledge test was worryingly low (4.5±1.9 points). Younger nurses with less training and previous experience in emergency care or cardiology performed better, reinforcing the importance of continuing education programs<sup>7</sup>.

In addition, a first aid training course for primary care workers was a positive experience. The theoretical and practical methodology, based on simulated care, facilitated learning and highlighted the need for systematic training<sup>8</sup>.

Regarding the care of patients with chest pain, the door-to-electrocardiogram time was greater than ten minutes in 95.8% of cases. This delay exceeds the recommended time for early diagnosis of acute myocardial infarction, worsening the prognosis of patients.

Approximately 64% of the cases attended at a non-hospital emergency care unit were considered conditions sensitive to primary care, such as respiratory infections and abdominal pain. This data reinforces the need to strengthen primary care as the organizer of the healthcare network<sup>10</sup>.

Most nursing professionals working in Primary Health Care have encountered emergency situations, but only 75% had received any training and only 50% felt able to act in urgent and emergency situations. In addition, none of the participants used triage protocols, such as the Manchester Scale, highlight-

ing flaws in safety and clinical practice<sup>11</sup>.

These gaps were identified through an action research study with in situ simulation, which found that most health professionals had no prior training in basic life support or in urgent and emergency care. However, after training, there was a significant improvement in self-confidence scores for emergency response, demonstrating that practical simulation is an effective teaching and learning strategy for improving professional performance<sup>12</sup>.

Primary care professionals are not adequately prepared to meet urgent and emergency demands, highlighting structural deficits, lack of training, and lack of mastery of care protocols. The study reinforced that continuing education is essential to minimize the damage resulting from inadequate care and improve the effectiveness of the healthcare network<sup>13</sup>.

Thus, studies converge on the urgent need to implement systematic training programs in first aid, BLS, and critical situation management in Primary Health Care. In addition, the adoption of active methodologies, such as in situ simulation, has proven to be a strategic tool for strengthening the skills of professionals, promoting the quality and safety of the care provided.

Given this scenario, it is essential to invest in the infrastructure of basic units, promote continuous training of professionals, and restructure the urgent and emergency care network to ensure quality care and resolution in Primary Care.

It is therefore clear that community health workers are fundamental in the prevention of cardiovascular diseases and in the recognition of warning signs of cardiorespiratory arrest. However, the research highlights a strong need for investment in training and support to enhance their impact on public health. Investing in continuing education programs in cardiovascular health, provid-

ing adequate support, and promoting the integration of community health workers with primary health care teams are essential measures to strengthen public health strategies to address these conditions and enhance the role of community health workers in promoting cardiovascular health and reducing preventable mortality associated with cardiovascular diseases.

Based on the synthesis of the included studies, the articles were organized into three main thematic areas. This categorization aims to facilitate a more in-depth analysis of the results and highlight the contributions of each study to this integrative review.

1. Structure and Care Process in Family Health Units (USF) Articles: Sales et al. (2022); Oliveira et al. (2016); Lemes et al. (2015).

Discussion: These studies point to insufficient resources, low effectiveness of care, and the need to strengthen the effectiveness of Primary Health Care. A precariousness in emergency care structures is identified, reinforcing the lack of structural investments and professional training. The study by Lemes et al. shows that 64% of care classified as sensitive to Primary Health Care was provided in emergency units, signaling a deviation from the basic function of Primary Health Care and an overload of the emergency system.

2. Training and updating of health professionals in primary health care Articles: Moraes and Paiva (2017) [two occurrences]; Santos et al. (2017); Celeste, Maia, and Andrade (2021); Félix et al. (2023); Conceição (2020).

Discussion: Studies reiterate the poor performance of younger professionals or those with less experience, associated with a lack of ongoing training. There is a strong emphasis on the effectiveness of simulation courses that combine theory and practice. Celeste et al. reveal that only 50% of professionals received adequate training in protocols,

which compromises their performance in emergency situations. The need for continuing education and quality practical training is reiterated as an essential measure to improve care.

3. Protocols and Response Time in Cardiovascular Emergencies Articles: Palmeira and Machado (2011) [two occurrences]; Ribeiro et al. (2019).

Discussion: These studies address technical and temporal aspects, such as door-to-ECG time and the use of protocols in cases of acute myocardial infarction (AMI). The fact that 95.8% of patients underwent an electrocardiogram (ECG) after 10 minutes highlights critical failures in immediate care, compromising early diagnosis. Ribeiro et al. detail SBC guidelines and reinforce the importance of adherence to cardiopulmonary resuscitation protocols. The discussion points out that standardizing procedures can save lives and needs to be incorporated as a priority in Primary Health Care teams.

Convergence: All studies converge on the idea that there are significant gaps in the structure, training, and protocols of Primary Health Care, especially in emergency care and cardiovascular disease prevention.

Practical implications: It is essential to promote continuing education, integration between community health workers and multidisciplinary teams, and the creation of clear workflows and protocols to ensure rapid and effective responses.

Role of community health workers: Although not the direct focus of all studies, the data support the importance of preparing and integrating community health workers into the early response system, given their strategic role in health education and identifying warning signs.

Conclusion of the articles: The analysis of the articles highlights a systemic deficit that ranges from infrastructure to the technical qualifications of primary

health care teams, compromising the quality of care in cardiovascular emergencies. The integration of Community Health Agents as educators and liaisons between the community and health services appears to be a promising strategy for reducing preventable mortality from cardiovascular disease and cardiopulmonary arrest.

## CONCLUSION

Cardiovascular diseases remain the leading cause of death in Brazil and

worldwide, requiring effective prevention and early recognition of emergencies such as cardiopulmonary arrest. The integrative review revealed that Community Health Agents play a fundamental role in promoting heart health by conducting home visits, providing personalized guidance, and encouraging healthy habits. By addressing risk factors such as high blood pressure, obesity, diabetes, smoking, and physical inactivity, these professionals help the population make informed decisions to take care of their own health.

Community Health Agents contribute to the recognition of warning signs that precede cardiac arrest, such as chest pain, shortness of breath, and loss of consciousness, providing guidance on the importance of seeking immediate medical help. However, challenges such as lack of specific training, work overload, and scarce resources still limit their performance. Investing in the training, recognition, and work structure of these professionals is essential to strengthen prevention efforts and reduce deaths from heart disease.

## References

1. AHA – American Heart Association. Doenças cardíacas continuam sendo a principal causa de morte, à medida que os principais fatores de risco à saúde continuam a aumentar. Newsroom, 2025. Disponível em: <https://newsroom.heart.org/news/heart-disease-remains-leading-cause-of-death-as-key-health-risk-factors-continue-to-rise>. Acesso em: 16 mar. 2025.
2. Santos, RC. et al. Agente comunitário de saúde ou “técnico de enfermagem comunitária”? Dilemas e disputas na profissionalização. *Tempus–Actas de Saúde Coletiva*, v. 15, n. 01, p. 247-274, 2021.
3. Caldeira MA., Vieira, MA., & Figueiredo, FA. O papel dos agentes comunitários de saúde no programa saúde da família-psf: valorização e impacto na promoção da saúde. *RECIMA21 – Revista Científica Multidisciplinar*, v. 5, n. 1, 2024; p. e514892.
4. Mendes KDS, Silveira RC de CP, Galvão CM. Revisão integrativa: método de pesquisa para a incorporação de evidências na saúde e na enfermagem. *Texto & Contexto - Enfermagem*. 2008 Dec;17(4):758–64.
5. Sales PS et al. O atendimento às urgências em unidades de saúde da família. *Enfermagem em Foco*, v. 13, 2022.
6. Oliveira TAD et al. Percepção de profissionais da estratégia saúde da família sobre o atendimento de urgência e emergência. *Ufpe.br*. 2025
7. Moraes TPR & PAIVA, EF. Enfermeiros da Atenção Primária em suporte básico de vida. *Puc-campinas.edu.br*. 2024.
8. Santos EC et al. Capacitação em primeiros socorros para equipes de saúde da atenção básica: relato de experiência. 2017; 10.4025/ciencuccuid-saude.v16i2.36909
9. Palmeira NCL & Machado RC. Tempo porta eletrocardiograma: avaliação do atendimento a pacientes com infarto agudo do miocárdio. *Rev. enferm. UFPE on line*, 2011; 1898-1904.
10. Lemes RA et al. atendimentos sensíveis à atenção básica em uma unidade não hospitalar de urgência e emergência. *Rev. enferm. UFPE on line*, 2015; 9777-9783.
11. Celeste LEN, Maia MR, Andrade VA. Capacitação dos profissionais de enfermagem frente às situações de urgência e emergência na atenção primária a saúde: revisão integrativa. *Research, Society and Development*. 2021 Sep 26;10(12):e443101220521.
12. Félix BIR et al. SIMULAÇÃO IN SITU PARA O TREINAMENTO DE SUPORTE BÁSICO DE VIDA NO CONTEXTO DA ATENÇÃO PRIMÁRIA: estudo piloto. *Revista Enfermagem Atual In Derme [Internet]*. 2023 [cited 2025 Jun 15];97((ed. esp)):e023075–5.
13. Conceição G et al. O preparo dos profissionais de enfermagem da atenção básica de saúde frente as situações de urgência e emergência. *Revista JRG de Estudos Acadêmicos [Internet]*. 2024 Jun 3 [cited 2024 Oct 4];7(14):e141133–3.