



Original Article

# A Study to Assess the Effectiveness of a Self-Instructional Module on Knowledge Regarding Baby Bottle Syndrome among B.Sc. Nursing 3<sup>rd</sup> Year Students and Post Basic Nursing 1<sup>st</sup> Year Students in Selected Nursing Colleges of District Faridkot, Punjab

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Abstract

**Introduction:** One of the most common dental disorders that may harm an infant or young child’s teeth is Baby Bottle Syndrome. The top front teeth, which have such an impact on your child’s smile, are the most at risk of decay, but the Baby Bottle Syndrome puts other teeth at risk as well. It is mostly brought on by a child’s teeth being exposed to sugary drinks for extended periods of time during meals and snacks. Sweetened liquids, such as milk, formula, fruit juice, and the like An early childhood caries (ECC) and Baby Bottle Tooth Decay condition that affects infants and toddlers. This illness has a large and country-wide incidence rate, according to social status, ethnicity, and eating habits. Although it is only 1 to 12% in economically advanced countries, it may reach up to 70% in underdeveloped countries, making it critical for children to have a thorough understanding of the Baby Bottle Syndrome in order to avoid any issues or complications that may arise as a result.

**Aim of the Study:** The Aim of The Study is “to assess the Knowledge of B.Sc. Nursing 3<sup>rd</sup> Year students and PostBasic Nursing 1<sup>st</sup> Year students regarding Baby Bottle Syndrome Using Self-Instructional Module.”

**Material & Methods:** A pre-experimental study design with one group pre-test and post-test was adopted. 200 B.Sc. Nursing 3<sup>rd</sup> year students and Post Basic Nursing 1<sup>st</sup> Year students from Nursing colleges in the district of Faridkot, Punjab, were chosen using the purposive sampling technique, after administering the self-instructional module on Baby Bottle Syndrome. On the seventh day, a post-test was administered to measure the knowledge of the students. “J.W. Kenny’s System Open System Model was used as a conceptual framework for the study.”

**Results:** This result revealed that there is a significant improvement in the knowledge of B.Sc. Nursing 3<sup>rd</sup> Year students and PostBasic Nursing 1<sup>st</sup> Year students regarding Baby Bottle Syndrome Using Self-Instructional Module. When compared to the pre-test mean i.e.,  $12.23 \pm 3.221$ , the post-test mean was  $18.01 \pm 2.818$ . and Mean difference was (5.785). After applied the paired t test; results showed that  $t_{199}=24.985$ ,  $p=0.001$  which is very significant at the 0.01 level of significance. As a result, the null hypothesis is rejected in favor of the alternative. The research found that “Self-Instructional Module on Baby Bottle Syndrome (BBS) may help nursing students better understand the condition.”

**Conclusion:** The “Baby Bottle Syndrome Self-Instructional Module is beneficial in enhancing the Baby Bottle Syndrome knowledge of B.Sc. Nursing 3<sup>rd</sup> Year and Post Basic Nursing 1<sup>st</sup> Year students.”

**Keywords:** Baby Bottle Syndrome, Early Childhood Caries, Baby Bottle Tooth decay, Self-Instructional Module, Effectiveness, Knowledge, B.Sc. Nursing 3<sup>rd</sup> Year students, PostBasic Nursing 1<sup>st</sup> Year students.

## INTRODUCTION

*“Children are the greatest gift of God to mankind. Our love and care for them is our greatest gift to God who gave them to us”.*

- Godwin Orovwiroro

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Babies that utilize a Baby Bottle as a sleep aid are sometimes referred to as having “Baby Bottle Syndrome” or “Baby Bottle Tooth Syndrome,” respectively. Liquid from the Bottle pools behind the kid’s teeth when the youngster falls asleep with a full bottle in his or her mouth. The enamel on those little teeth becomes ruined because the germs that cause cavities have the time and sugar they require. The nipple end of the bottle prevents saliva from washing out carbohydrates from the top incisors, which is the most common site of early childhood cavities. The bottom front teeth may also be impacted, despite the fact that saliva and the tongue are better able to protect them.

Preventing dental caries in young children is still a major issue in developed and developing nations alike, even though the frequency of dental caries in Western children has declined significantly. Variations in the prevalence of (ECC) Early Dental Caries may be seen not just among countries and regions but also across racial/ethnic groups, socioeconomic position, way of life, dietary habits, and dental hygiene practices. According to a survey of the literature, the incidence of Early dental caries ranges from 1 to 12% in fully developed nations. It has been estimated that 70% of the population in developing nations and the most vulnerable segments in affluent countries are affected. Low-income families are more likely to have children with early dental caries. From 11.4% in Sweden to 7 to 19.0% in Italy, the frequency was found in a wide variety of countries. Few Middle Eastern nations, such as Palestine (76%) and the United Arab Emirates, have recorded a significant frequency of early dental caries (83%). In Europe, epidemiological studies have shown that considerable percentages of preschoolers have Early Dental caries, indicating the widespread prevalence. Early dental caries affects a large percentage of the population, with the poorest households bearing the brunt of the condition.

Because infant feeding is essential to meet the nutritional and immunological stages of the baby, and the Baby Bottle Syndrome mainly consider one specific cause of tooth decay and early dental caries as it mostly occurs due to the prolonged exposure to milk or sugary liquids that are mainly milk or sugary liquids. Baby Bottle Syndrome may occur in children who drink milk or juice during nap and sleep, as well as those who ignore their oral hygiene. This has a significant effect on the dental health of Children, as well. In addition, I worked in a pediatric ward during my “B.Sc. Nursing 3rd year and M.Sc. Nursing degree.” Many of the women feed their children with bottles, even if they use unsanitary methods to feed their children. Children who rely heavily on Bottle feeding have dental difficulties, dental caries, delayed tooth development, discoloration of teeth, oral thrush, and early tooth decay because of their dependence on bottle feeding. As a researcher, I worked in the NICU and OPD of a children’s hospital and an immunization clinic. Researchers often saw that graduate students were unaware of the Baby Bottle syndrome. He thought it was sad. Despite the fact that they

didn’t teach women to avoid bottle feeding, surgery, liquids and dental appointments because they are aspiring nurses, they still need to know enough about the topics mentioned to be effective in the future. As a result, researchers believe that nursing students have enough understanding about Baby Bottle Syndrome to serve as effective educators of their patients’ families. Students may learn more about this subject by using the “Self-Instructional Module.”

## PROBLEM STATEMENT

A study to assess the effectiveness of the Self-Instructional Module on Knowledge regarding Baby Bottle Syndrome among B.Sc. Nursing 3<sup>rd</sup> Year students and Post Basic Nursing 1<sup>st</sup> Year students in selected Nursing Colleges of the district Faridkot, Punjab.

## AIM OF THE STUDY

The aim of the study is to assess the Knowledge of B.Sc. Nursing 3<sup>rd</sup> Year students and Post Basic Nursing 1<sup>st</sup> Year students regarding Baby Bottle Syndrome Using Self-Instructional Module.

## Objectives of the Study

- To assess the Knowledge regarding Baby Bottle Syndrome among B.Sc. Nursing 3<sup>rd</sup> year students and Post Basic Nursing 1<sup>st</sup> year students in selected Colleges of the district Faridkot, Punjab.
- To evaluate the effectiveness of the self-instructional module on knowledge regarding Baby Bottle Syndrome in terms of gain in post-test Knowledge among B.Sc. Nursing 3<sup>rd</sup> year students and Post Basic Nursing 1<sup>st</sup> year students in selected Nursing Colleges of the district Faridkot, Punjab.
- To find out the association between pre- and post-test regarding Baby Bottle Syndrome Knowledge score with socio-demographic variables.

## RESEARCH METHODOLOGY

A clear research technique was developed and put into practice in order to accomplish the study’s declared goals. The present study’s approach is explained below.

### Selection and Description of Research Setting

Investigator selected this College and easy to cooperation of students studying in these Colleges.

All five selected 5 nursing colleges were included in the study (one for the pilot study and 04 for the main study).

The present study was conducted among “B.Sc. Nursing 3<sup>rd</sup> year students and Post Basic Nursing 1<sup>st</sup> year students in selected Nursing Colleges of the district Faridkot, Punjab

### Selection and Development of The Tool

On the basis of a developed framework to achieve the objectives of the study. The self -structured questionnaire was planned for the “knowledge assessment of B.Sc. Nursing



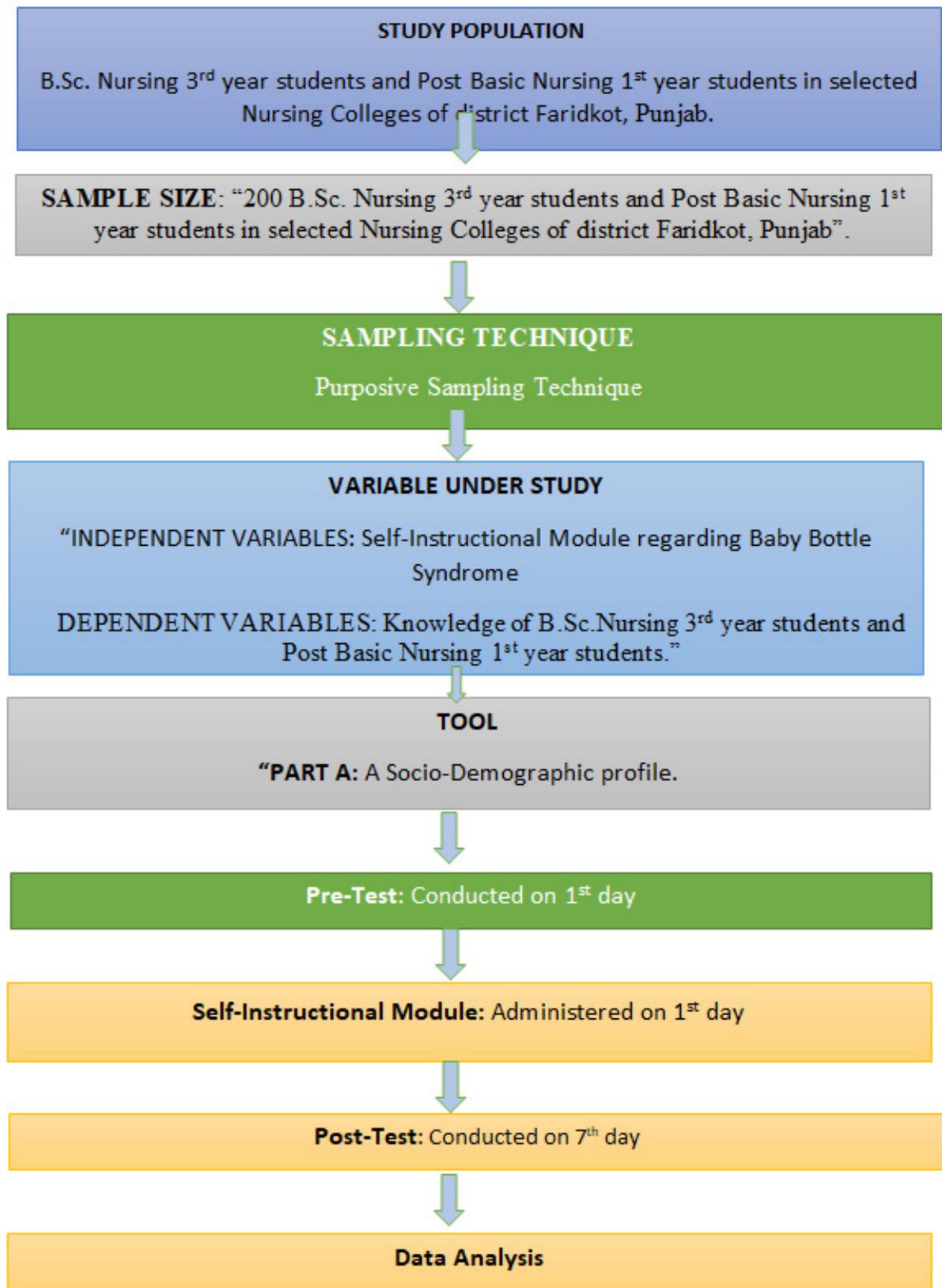


Figure 1: Schematic representation of methodology

**Table 1:** Distribution of First-Year Post-Basic Nursing Students and Third-Year B.Sc. Nursing Students by Selected Nursing Colleges in District Faridkot, Punjab

S. No.	Nursing colleges
1.	Baba Banda Bahadur College of Nursing, Faridkot
2.	Baba Farid College of Nursing, Faridkot
3.	Dashmesh College of Nursing, Faridkot
4.	Malwa College of Nursing, Faridkot
5.	University College of Nursing, Faridkot.

**Table 2:** Criterion measure

Maximum Score=25	Minimum Score=0		
Level of knowledge	Scoring (%)	Scoring	Coding
Excellent	>80	>20	1
Good	50-80	13-20	2
Average	<50	<13	3

3<sup>rd</sup> year students and Post Basic Nursing 1<sup>st</sup> year students regarding Baby Bottle Syndrome.”

“After an extensive review of literature and discussion with the guide and co-guide and other experts, tool was prepared to assess the socio-demographic data and level of knowledge regarding Baby Bottle Syndrome.”

“SECTION A: Socio-demographic profile. It consists of 09 items.

SECTION B: Self- Structured questionnaire, it consists of 25 items to assess the knowledge of B.Sc. Nursing 3<sup>rd</sup> year students and Post Basic Nursing 1<sup>st</sup> year students regarding Baby Bottle Syndrome.”

### Development and Description of Self-Instructional Module

A self-Instructional Module (SIM) was created in accordance with the intended goals. The researcher followed many processes in building a Self-Instructional Module, including the selection and arrangement of information, the design of the format and the creation of a content blueprint, the creation of a first draft, and validation.

### Preparation of Self-Instructional Module

The self-Instructional module was developed after a review of literature, seeking the opinion of experts, internet books, journals and from personal experiences. The main factors considered for the preparation of a self-instructional module are convenience, self-pacing and independent study. Appropriate and colorful illustrations were incorporated to enhance understanding. It is envisaged that self-pacing would give learning opportunities to both slow and fast learners. The final draft of the self-instructional module was prepared after suggestions given by the experts.

The self-instructional module consisted of an introduction, and definition, incidence, causes, signs and symptoms, diagnosis, effects, management, prevention, and conclusion regarding Baby Bottle Syndrome.

The steps involved in the development of the self-Instructional Module were

- Preparation of the first draft of the SIM (Self-Instructional Module) regarding Baby Bottle Syndrome
- Selection of the content of the self-instructional module
- Organization of the content
- Content validity of the self-instructional module
- Editing of self-instructional module
- Preparation of the final draft of the self-instructional module
- Given the self-instructional module for the B.Sc. Nursing 3<sup>rd</sup> year students and Post Basic Nursing 1<sup>st</sup> year students in selected Nursing Colleges of the district Faridkot, Punjab.”

### Description of the Final Tool

- The tool for data collection consists of two sections.

#### Section A: Socio-demographic Profile

- It consists of 09 items: Age, Sex, Residence, class, types of college, Marital status, Source of information previous Knowledge, and attended any additional workshop/ Seminar related to Baby Bottle Syndrome.

#### Section B: Self- Structured questionnaire.

It consists of 25 items to assess the knowledge of B.Sc. Nursing 3<sup>rd</sup> year students and Post Basic Nursing 1<sup>st</sup> year students regarding Baby Bottle Syndrome

## ANALYSIS AND INTERPRETATION OF DATA

### Section-I

Finding related to Socio-demographic Profile of B.Sc. Nursing 3<sup>rd</sup> Year Students & Post Basic Nursing 1<sup>st</sup> Year Students.

### Section II

Findings related to Information of Baby Bottle Syndrome (BBS) among B.Sc. Nursing 3<sup>rd</sup> Year Students & Post Basic Nursing 1<sup>st</sup> Year students.

### Section III

Findings related to the pre-test level of Knowledge regarding Baby Bottle Syndrome (BBS) among B.Sc. Nursing 3<sup>rd</sup> Year students & Post Basic Nursing 1<sup>st</sup> Year students.

### Section IV

Findings related to Post-test Level of Knowledge regarding Baby Bottle Syndrome among B.Sc. Nursing 3<sup>rd</sup> Year students & Post Basic Nursing 1<sup>st</sup> Year students.

### Section V

Findings related to the effectiveness of the Self-Instructional Module on knowledge regarding Baby Bottle Syndrome (BBS) among B.Sc. Nursing 3<sup>rd</sup> year Students & Post Basic Nursing Year Students.

Table 8 shows the effectiveness of the self-instructional module on knowledge regarding Baby Bottle Syndrome (BBS) among B.Sc. Nursing 3<sup>rd</sup> year Students & Post Basic Nursing Year Students.



**Table 3:** Socio-demographic Profile of Nursing Students of B.Sc. Nursing 3<sup>rd</sup> Year Students & Post Basic Nursing 1<sup>st</sup> Year Students N=200

S. No.	Variables	F	%
1.	Age (years)		
	18-20	63	31.5
	21-23	119	59.5
	Above 23	18	9.0
2.	Gender		
	Male	43	21.5
	Female	157	78.5
3.	Residence		
	Rural	110	55.0
	Urban	90	45.0
4.	Marital Status		
	Single	180	90.0
	Married	20	10.0
5.	Type of Colleges		
	Government	98	49.0
	Private	102	51.0
6.	Class		
	B.Sc.(N) 3 <sup>rd</sup> Year	139	69.5
	Post Basic Nursing 1 <sup>st</sup> Year	61	30.5

**Table 4:** Information on Baby Bottle Syndrome (BBS) among Nursing Students of B.Sc. Nursing 3<sup>rd</sup> Year Students & Post Basic Nursing 1<sup>st</sup> Year students.

N=200

S. No.	Variables	f	%
1.	Previous information regarding BBS		
	Yes	59	29.5
	No	141	70.5
2.	Sources of Information regarding BBS (n=59)		
	Book/Journals	20	33.9
	Teacher & Friends	7	11.9
	Health Personnel	23	38.9
	Social Media	9	15.3
3.	Attended Workshop/ Seminar on BBS		
	Yes	51	25.5
	No	149	74.5

**Table 5:** Pre-test Level of Knowledge regarding Baby Bottle Syndrome (BBS) among B.Sc. Nursing 3<sup>rd</sup> Year Students & Post Basic Nursing 1<sup>st</sup> Year Students

S. No.	Aspect of knowledge items	Maximum possible score	Maximum obtained score	Minimum obtained score	Mean score Pre-test	Median Score Pre-test	SD pre-test
1.	25 questions regarding Baby Bottle Syndrome (BBS)	25	20	4	12.23	12.00	3.221

**Table 6:** Frequency and Percentage distribution of Pre-test Level of Knowledge regarding Baby Bottle Syndrome (BBS) among B.Sc. Nursing 3<sup>rd</sup> Year students & Post Basic Nursing 1<sup>st</sup> Year Students. N = 200

S. No.	Level of Knowledge	f	%
	Good	86	43.0
	Average	114	57.0
	Excellent	0	0

The pre-test mean score was  $12.23 \pm 3.221$ , while the post-test mean score was  $18.01 \pm 2.818$ . The mean difference was 5.785. So, here Paired t test was applied to find out statistically difference between pre and post-test scores of knowledge regarding Baby Bottle Syndrome (BBS). The result found that  $t_{199} = 24.985, p = 0.001$ , which indicate highly significant result at the 0.01 level. Hence Null hypothesis is rejected and the alternative hypothesis is accepted. The study concluded that the self-instructional module is effective in enhancing the knowledge of baby bottle syndrome (BBS) among nursing students.

Objective 3: To find out the association between pre and post-test regarding Baby Bottle Syndrome Knowledge score with socio-demographic variables.

### Section VI

Findings related to association Between pre-test regarding Baby Bottle Syndrome (BBS) Knowledge Score with Socio-demographic variables among B.Sc. Nursing 3<sup>rd</sup> Year Students & Post Basic Nursing 1<sup>st</sup> Year students.

### Section VII

Findings related to association between pre-test on Information regarding Baby Bottle Syndrome (BBS) Knowledge Score with Socio-demographic variables. Among B.Sc. Nursing 3<sup>rd</sup> Year Students & Post Basic Nursing 1<sup>st</sup> Year students.

### Section VIII

Findings related to association Between post-test regarding Baby Bottle Syndrome (BBS) Knowledge Score with Socio-demographic variables among B.Sc. Nursing 3<sup>rd</sup> Year Students & Post Basic Nursing 1<sup>st</sup> Year students.

### Section IX

Findings related to association between post-test on Information regarding Baby Bottle Syndrome (BBS) Knowledge Score with Socio-demographic variables among B.Sc. Nursing 3<sup>rd</sup> Year Students & Post Basic Nursing 1<sup>st</sup> Year students.

**Table 7:** Post-test Level of Knowledge regarding Baby Bottle Syndrome (BBS) among B.Sc. Nursing 3rd Year Students & Post Basic Nursing 1st Year Students. Table: Post-test

S. No.	Aspect of knowledge items	Maximum possible score	Maximum obtained score	Minimum obtained score	Mean score Post-test	Median Score Post-test	SD Post-test
1.	25 questions regarding Baby Bottle Syndrome (BBS)	25	24	10	18.01	18.00	2.818

**Table 8:** Frequency and Percentage distribution of Post-test Level of Knowledge regarding Baby Bottle Syndrome (BBS) among B.Sc. Nursing 3rd Year students & Post Basic Nursing 1st Year Students. N = 200

S. No.	Level of Knowledge	f	%
1	Excellent	42	21.0
2	Good	150	75.0
3	Average	8	4.0

### Discussion In Reference To Other Related Studies

The result of the present study shows that the Self-Instructional regarding “Baby Bottle Syndrome among B.Sc. Nursing 3<sup>rd</sup> Year students and Post Basic Nursing 1<sup>st</sup> year students” was effective in improving the knowledge of the “B.Sc. Nursing 3<sup>rd</sup> year students and Post Basic Nursing 1<sup>st</sup> Year students. When conducted on 200 subjects of selected Nursing Colleges of the district Faridkot, Punjab. The Findings of the present study concluded that the pre-test mean score was  $12.23 \pm 3.221$  while the post-test mean score was  $18.01 \pm 2.818$ .

The mean difference was 5.785. So here paired t-test was applied to find out statistically difference between pre- and post-test scores of knowledge regarding “Baby Bottle Syndrome (BBS)”. The result found that  $t_{199} = 24.985$ ,  $p = 0.001$ , which indicate significant at the 0.01 level. Hence Null hypothesis is rejected and the alternative hypothesis is accepted. The study concluded that the self-instructional module is effective in enhancing the knowledge of” baby bottle syndrome (BBS)” among nursing students. Whereas the chi-square test is applied to find the association, Pre-test Gender, types of colleges, previous information regarding baby bottle syndrome are highly significant, whereas age, Residence, Marital status, class, sources of information and additional workshop/seminar on Baby Bottle Syndrome are found non-significant at the 0.05 level.

On the other hand, to find the association post-test, chi-square is applied to age, gender, and marital status, which are found Significant whereas residence, type of colleges, class, previous

**Table 10:** Association between pre-test regarding Baby Bottle Syndrome knowledge score with socio-demographic variables. N = 200

S. No.	Variables	Knowledge		$\chi^2$ values	df	p-value
		Good	Average			
1.	Age (years)					
	18–20	26	37			
	21–23	55	64	2.282	2	.320 <sup>NS</sup>
2.	Gender					
	Male	7	36			
	Female	79	78	15.957	1	.001*
3.	Residence					
	Rural	50	60			
	Urban	36	54	.601	1	.438 <sup>NS</sup>
4.	Marital Status					
	Single	81	99			
	Married	5	15	2.938	1	.087 <sup>NS</sup>
5.	Type of Colleges					
	Government	53	45			
	Private	33	69	9.628	1	.002*
6.	Class					
	B.Sc. Nursing 3 <sup>rd</sup> Year	60	79			
	Post Basic Nursing 1 <sup>st</sup> Year	26	35	.005	1	.943 <sup>NS</sup>

\*=significant at 0.05 level

**Table 9:** Effectiveness of the Self-Instructional Module on knowledge regarding Baby Bottle Syndrome (BBS) among B.Sc. Nursing 3rd year Students & Post Basic Nursing year Students.

N=200

S. No.	Knowledge score	Mean	SD	MD	t value	Df	p value
1	Pre-test Score	12.23	3.221				
2	Post-test Score	18.01	2.818	5.785	24.985	199	.001*

NB: SD= Standard deviation, MD=Mean difference, df= degree of freedom, \*=significant at 0.01 level



**Table 11:** Association between pre-test on Information Regarding Baby Bottle Syndrome (BBS) Knowledge Score with Socio-demographic variables N=200

S. No.	Variables	Knowledge		$\chi^2$ value	df	p-value
		Good	Average			
7.	Previous information regarding Baby Bottle Syndrome					
	Yes	19	40	3.980	1	.046*
	No	67	74			
8.	Source of Information regarding Baby Bottle Syndrome (n=59)					
	Book/journals	12	8	.101	4	.101 <sup>NS</sup>
	Teacher& friends	5	2			
	Health personal	7	16			
	Social Media	2	7			
9.	Have you attended any additional Workshop/ Seminar on Baby Bottle Syndrome					
	Yes	22	29	.001	1	.982 <sup>NS</sup>
	No	64	85			

\*=significant at 0.05 level

**Table 12:** Association between post-test regarding Baby Bottle Syndrome knowledge score with socio-demographic variables.

N=200

S. No.	Variables	Knowledge			$\chi^2$ values	df	p-value
		Excellent	Good	Average			
1.	Age (years)						
	18–20	11	51	1	18.888	4	.014*
	21–23	29	87	3			
	Above 23	2	12	4			
2.	Gender						
	Male	4	35	4	7.718	2	.018*
	Female	38	115	4			
3.	Residence						
	Rural	25	82	3	1.344	2	.497 <sup>NS</sup>
	Urban	17	68	5			
4.	Marital Status						
	Single	37	139	4	15.577	2	.003*
	Married	5	11	4			
5.	Type of Colleges						
	Government	24	69	5	2.238	2	.350 <sup>NS</sup>
	Private	18	81	3			
6.	Class						
	B.Sc. 3 <sup>RD</sup> Year	27	107	5	.961	2	.605 <sup>NS</sup>
	Post Basic Nursing 1 <sup>st</sup> Year	15	43	3			

\*=significant at 0.05 level

**Table 13:** Association between post-test on Information Regarding Baby Bottle Syndrome (BBS) Knowledge Score with Socio-demographic variables

S. No.	Variables	Knowledge			$\chi^2$ values	df	p-value
		Excellent	Good	Average			
1.	Previous Information regarding Baby Bottle Syndrome						
	Yes	9	48	2	1.844	2	.398 <sup>NS</sup>
	No	33	102	6			
2.	Sources of Information regarding Baby Bottle Syndrome						
	Book/journals	6	13	1	11.899	8	.156 <sup>NS</sup>
	Teacher& Friends	2	4	1			
	Health Personal	1	22	0			
	Social Media	4	5	0			
3.	Have You Attended any additional Workshop/Seminar on Baby Bottle Syndrome						
	Yes	11	37	3	.672	2	.715 <sup>NS</sup>
	No	31	113	5			

\*=significant at 0.05 level

information, sources of information, and additional workshop/ seminar on Baby Bottle Syndrome are found non-significant at the 0.05 level.

## LIMITATION

- The sample consisted of just 200 “B.Sc. Nursing 3<sup>rd</sup> Year and Post Basic Nursing 1<sup>st</sup> Year students”; hence, it was difficult to generalise.
- A purposive Sampling approach was employed for data collection, limiting the generalizability of the study to a specific setting.
- The research instrument was not standardized. Therefore, all constraints associated with the use of the created tools were applied to this study.

## REFERENCES

1. Makwana Namrata K. Determinates of bottle feeding among 0-24 Months children: International Journal of Pediatric Research, 2020; 7(1); Pp. 14-17.
2. Alazmah A. Early Childhood Caries: A Review. J Contemp Dent Pract 2017;18(8);723-737
3. Chen Kitty Jieyi, Gao Sherry Shiqian, Duangthip Duangporn. Early Childhood caries and oral health care of Hong Kong Preschool Children: Clinical, cosmetic and Investigational Dentistry, 2019 Jan 18:11; pp 27-35.
4. Dayal G.A. studied to assess the effectiveness of a self-instructional module on knowledge regarding Baby Bottle Syndrome among primipara mothers, in a selected Hospital at Bengaluru. Unpublished thesis of the Department of Child Health Nursing, Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore, 2018.
5. Parmeela G, Padmaja A. The effectiveness of a structural teaching programme on knowledge, attitude, and practice regarding baby bottle tooth decay among mothers of infants: IOSR Journal of Nursing and Health Science, 2017 July-Aug; pp 48-56.

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Q2 Kindly provide all Tables intext citation in increasing order

