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Реабілітаційне медсестринство в Україні: подолання розриву між політикою та практикою

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Rehabilitation nursing in Ukraine: bridging the gap between policy and practice

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Introduction

The full-scale war in Ukraine has dramatically increased the need for comprehensive, high-quality rehabilitation services for individuals affected by hostilities, including both military personnel and civilians. Many of the injured suffer from severe trauma and functional impairments that significantly impact their quality of life, making timely and effective rehabilitation a critical component of care. Ukraine's rehabilitation system has undergone significant transformation in response to these demands. Minister of Health Viktor Liashko noted that rehabilitation is now a central element of the Heroes' Policy – an initiative to support the rapid return of wounded defenders to full and active lives. By the end of 2023, the national rehabilitation strategy had evolved around three key pillars: quality, accessibility, and free provision, laying the groundwork for a resilient, inclusive, and evidence-based system. These pillars now form a strong foundation for the development of an evidence-based, inclusive, and resilient rehabilitation sector capable of meeting the growing and complex needs of the Ukrainian population.

Central to this transformation is a reconceptualization of rehabilitation itself, shifting from a passive, equipment-centered model to one that positions the patient as an active agent in the recovery process. In this contemporary framework, rehabilitation extends beyond mere physical restoration through technology; it prioritizes patient engagement, individualized care, and collaboration among interdisciplinary healthcare teams. The overarching objective is to restore functional independence and facilitate the patient's reintegration into essential areas of life, including employment, education, family responsibilities, and social participation. This model is consistent

with international best practices and is designed to address the growing and diverse rehabilitation needs of the Ukrainian population [1].

The World Health Organization (WHO) defines rehabilitation as “a set of interventions designed to optimize functioning and reduce disability in individuals with health conditions in interaction with their environment” [2]. In 2017, WHO launched Rehabilitation 2030: A Call to Action, emphasizing the unmet need for rehabilitation services and the necessity of integrating rehabilitation into all levels of healthcare. This initiative aims to make rehabilitation an integral part of healthcare and ensure universal healthcare coverage [3].

In 2018, the WHO reported a significant shortage of rehabilitation services, especially in low- and middle-income countries. The main problems include a lack of qualified specialists, limited funding and resources, and insufficient attention to developing rehabilitation services. In Ukraine, according to the Ministry of Social Policy, in 2020, the number of people with disabilities was over 2.7 million, an increase of 105,500 compared to 2001 [4]. Adoption of the Law of Ukraine “On Rehabilitation in the Healthcare Sector” No. 1053-IX as of 3 December 2020 was an important step towards addressing gaps in this area. The law contributes to improving the quality of life of individuals with various health conditions, including injuries, chronic diseases, and mental disorders [5].

Rehabilitation has become one of the priorities of the Ministry of Health of Ukraine since the onset of Russian's full-scale invasion of Ukraine. The war has exacerbated existing challenges, compelling the healthcare system to adapt to provide quality and accessible care to those affected. The war has also accelerated the transformation of educational programs, the expansion of professionals,

and the training of new specialists, thereby bringing Ukraine closer to global standards of rehabilitation medicine. These efforts ensure that everyone in need of rehabilitation can return to an active life.

In this context, rehabilitation nurses possess significant potential to expand their roles, but numerous challenges often hinder these advancements. First, it is necessary to pay attention to the international definition of *rehabilitation nursing as an independent and specialized branch of nursing that focuses on supporting individuals with disabilities and chronic illnesses in achieving optimal functionality and an improved quality of life* [6; 7].

Nurses have become integral to the delivery of rehabilitation services. The importance of nursing in the recovery process has grown dramatically in response to war-related demands. However, nurses working in rehabilitation face numerous challenges, including staffing shortages, excessive workloads, and outdated training methods. These systemic issues raise concerns about the quality of rehabilitation services and highlight the urgent need for reform and capacity-building within nursing education and practice [8].

The study aims to critically examine international frameworks for defining rehabilitation nurses' competencies and to substantiate the directions for developing a national professional standard in Ukraine, taking into account the challenges posed by martial law and the evolving needs of the national healthcare system.

Object, materials and research methods

The study employed a bibliosemantic analysis of current international competency frameworks for rehabilitation nurses, drawing on sources indexed in leading scientometric databases such as Scopus, Web of Science, PubMed, Google Scholar, and PEDro. Theoretical research methods were applied, particularly the analysis and synthesis of regulatory and legal documents within Ukrainian legislation about rehabilitation and nursing, as well as guidelines from recognized international health and medical education organizations. This methodological approach aimed to identify global trends and key features in the professional development of rehabilitation nursing as an emerging specialization in Ukraine's healthcare system, particularly in the context of challenges posed by the ongoing war. Additionally, relevant scientific, pedagogical, and economic literature was examined to explore the theoretical foundations of the research topic. The collected material was systematically organized and summarized to draw conclusions and outline directions for future scientific inquiry.

Results

The recognition of the profession of *rehabilitation nurse* is supported by Ukraine's regulatory documents in Ukraine, emphasizing its critical role in patient assessment, the development and implementation of individualized rehabilitation plans, the maintenance of functional

abilities, prevention of complications, and the education and counseling of patients and their families. For the first time, the *rehabilitation nurse* position was officially included in the list of rehabilitation specialists under Ukrainian legislation, specifically in the Law "On Rehabilitation in Healthcare" [9]. This designation positions the rehabilitation nurse as a multidisciplinary team member alongside specialists such as physical and rehabilitation medicine physicians, physical therapists, occupational therapists, speech and language therapists, prosthetists, orthoptists, psychologists, and other professionals [10; 11].

A significant legislative change occurred on 21 August 2024 with the amendment to paragraph ten of part one, Article 10 of the Law of Ukraine, as updated by the Law No. 3911-IX. This amendment expands the scope of rehabilitation specialists' professional activities, enabling them to work within a multidisciplinary team and independently through individualized rehabilitation plans or therapy programs [12]. This innovation emphasizes the increased status and autonomy of the profession, allowing rehabilitation nurses to take a more active part in the planning and implementation of the rehabilitation process, but at the same time, poses additional challenges for educational institutions in preparing highly qualified personnel with such expanded responsibilities.

In parallel, the Ministry of Health of Ukraine launched the Strategic Directions for the Development of Nursing in 2024, a comprehensive framework to advance nursing education, practice, and leadership. This framework document envisages increasing the role of nurses in the healthcare sector, integrating international standards and innovations into nursing activities [13]. One of the key aspects of this strategy is the introduction of the concept of 'empowered nurse,' which involves granting nurses greater autonomy and expanding their professional competencies and job functions in the provision of healthcare services, which in turn will improve the accessibility and quality of healthcare [14].

The introduction of new initiatives provides rehabilitation nurses with opportunities for professional development, empowerment, and greater involvement in multidisciplinary teams, thereby enhancing the quality of rehabilitation care for patients. As specialists responsible for restoring the physical and mental health of people with disabilities and chronic diseases, rehabilitation nurses deliver specialized care management for all rehabilitation phases and age groups based on their professional expertise and comprehensive knowledge [15]. The definition of explicit models of nursing practice creates the basis for effective clinical practice and research in this area, and their integration into the rehabilitation process ensures the organization and implementation of measures adapted to patients' needs. Collaboration with medical teams, focused on an integrated approach, optimizes recovery outcomes and increases the effectiveness of rehabilitation strategies [16].

An analysis of international competency frameworks in rehabilitation nursing revealed diverse approaches to

defining the roles and functions of nurses within rehabilitation teams. An analysis of the competency frameworks for rehabilitation nurses, as outlined in the regulatory guidelines of leading institutions such as Sunnaas Hospital (Norway), the Royal College of Nursing (RCN, UK), and the Association of Rehabilitation Nurses (ARN, USA), reveals distinct conceptual models of rehabilitation care and the role of nurses within interdisciplinary teams [17; 18; 19; 20]. Despite variations in terminology and structural organization across these competency models, several core areas remain consistent across all three systems

Despite differences in terminology, structure, and implementation, the comparison revealed a set of consistent core competencies shared across all three systems. These competencies include:

1. Assessment of the patient's health status and functional capacity.
2. Development of rehabilitation care plans.
3. Implementation of therapeutic interventions.
4. Patient-centered care and education.
5. Multidisciplinary collaboration in rehabilitation teams.
6. Provision of psychosocial support.
7. Utilization of assistive technologies.
8. Engagement in professional development and contributions to scientific research [21; 22].

These shared competency domains were synthesized into a comparative matrix (Table 1), illustrating the variations and commonalities in how rehabilitation nurses'

roles are conceptualized and practiced in Norway, the UK, and the USA.

Although studying rehabilitation nurses' competencies in different countries allows assessing best practices, their direct implementation in Ukraine is ineffective. The rehabilitation care system in Ukraine has its peculiarities, including limited interdisciplinary interaction, insufficient autonomy of nurses in clinical decision-making, and different levels of training.

Developing a professional standard for rehabilitation nurses is necessary to create an effective rehabilitation system. Such a standard should contain clearly defined competencies, powers, and levels of responsibility, considering the specifics of Ukrainian realities. It will improve the quality of services and create conditions for the professional development of nurses in this area [23].

The role of nursing in addressing patients' rehabilitation needs is expanding, particularly in areas such as spasticity management, bladder and bowel care, complication prevention, and patient mobility support. Moreover, contemporary rehabilitation practices require nurses to be proficient in operating advanced medical technologies, including Bladder Scanners and Vacuum-Assisted Closure (VAC) systems, necessitating specialized knowledge and technical skills. Ensuring the effectiveness of rehabilitation interventions and patient safety becomes challenging without appropriate training.

An analysis of the current state of the rehabilitation sector in Ukraine highlights several systemic challenges that impact rehabilitation nursing practice. According to

Table 1

Comparative Matrix of Rehabilitation Nursing Competencies in Norway, the UK, and the USA
Developed by the authors based on official competency frameworks from Sunnaas Hospital (Norway), the Royal College of Nursing (UK), and the Association of Rehabilitation Nurses (USA).

No.	Competency Area	Sunnaas Hospital (Norway)	Royal College of Nursing (UK)	Association of Rehabilitation Nurses (USA)
1	Assessment of patient's health and functional status	Holistic assessment of physical, cognitive, psychological, and social status	Clinical evaluation including fall risk and pain assessment	Functional assessment and continuous monitoring of vital signs
2	Development of rehabilitation care plans	Individualized plans with active family involvement	Personalized rehabilitation pathways tailored to patient needs	Comprehensive planning based on interdisciplinary goals
3	Implementation of therapeutic interventions	Mobilization techniques, respiratory support, and spasticity management	Evidence-based interventions with outcomes monitoring	Use of therapeutic technologies to support vital functions
4	Patient-centered care and education	Training in adaptation and self-care methods	Individual education sessions	Patient and family education to reduce dependence
5	Multidisciplinary collaboration	Coordination with physicians, PTs, OTs, and other specialists	Team-based approach within an interdisciplinary context	Integration within interprofessional rehabilitation teams
6	Psychosocial support	Assistance in managing anxiety, stress, and emotional adjustment	Addressing emotional and psychological needs	Holistic, patient-centered support and counseling
7	Utilization of assistive technologies	Application of mobile and prosthetic devices in patient care	Use of telehealth and digital monitoring tools	Development and use of adaptive and assistive technology
8	Professional development and research engagement	Development of educational programs and evaluation of rehabilitation effectiveness	Implementation of clinical guidelines and participation in research initiatives	Research project leadership and outcome evaluation

chief and senior nurses from leading rehabilitation centres in Ivano-Frankivsk, Lviv, and Rivne, the primary challenges include:

1. **Nursing workforce shortage.** At the Rivne Regional Hospital for War Veterans, the average age of nurses ranges from 42 to 52 years, indicating an aging workforce. Younger professionals are reluctant to pursue careers in rehabilitation units due to the high physical and emotional demands and the profession's low perceived prestige.

2. **Excessive workload.** A single nurse is often responsible for more than 25 patients with varying degrees of severity, including individuals with spinal cord injuries, amputations, and multiple traumas. Such challenging working conditions contribute to professional burnout and negatively affect the quality of patient care.

3. **Staff migration to fewer demanding roles.** Nurses are increasingly transitioning to positions as physical therapy or occupational therapy assistants, which offer more favourable working conditions, including the absence of night shifts, a structured schedule, and reduced physical demands. This trend exacerbates the staffing shortage in rehabilitation units.

4. **Insufficient professional training.** The absence of specialized training programs for rehabilitation nurses leads to inadequate proficiency in operating modern medical equipment, such as the Guldman lift. Consequently, staff do not have the necessary skills to operate essential devices, which reduces the overall effectiveness of patient care.

5. **Inadequate remuneration.** Nurses' salaries do not correspond to the complexity and demands of their work, contributing to high staff turnover and discouraging long-term career commitment in rehabilitation nursing.

6. **Shortage of young professionals.** Medical college graduates rarely choose careers in rehabilitation nursing, hindering workforce renewal and exacerbating long-term staffing shortages in the sector.

7. **Discrepancy between training and job requirements.** Retraining massage therapists with nursing qualifications to become physical or occupational therapy assistants presents additional challenges. Short-term training programs, typically 150 to 300 hours, are insufficient to equip professionals with the necessary competencies for providing complex rehabilitation care [24].

These problems reduce the quality of rehabilitation services and pose risks to patient safety. Nurses accompany patients at all stages of rehabilitation, from inpatient treatment to long-term rehabilitation in the community. They are the only specialists in the multidisciplinary team with the patient 24/7. Nurses are the first to notice even the slightest changes in a patient's condition, respond promptly to deviations, and provide round-the-clock care and support. In the evenings, weekends, and holidays, when other team members are unavailable, they are the ones who take full responsibility for the patient's condition.

According to the Law of Ukraine, 'On State Financial Guarantees of Medical Care for the Population,' medical rehabilitation is included in the medical guarantees program. As of December 2024, Ukraine's network

of institutions providing rehabilitation services has been significantly expanded. Currently, 319 institutions offer inpatient rehabilitation care, and 479 offer outpatient care. In 2024, almost 366,000 patients received free rehabilitation services, and the National Health Service of Ukraine paid over UAH 4 billion for these services. These figures indicate increased availability and volume of rehabilitation services [25; 26].

Discussion

Despite positive advancements in the nursing sector in Ukraine, the absence of a clearly defined professional standard for nurses and nursing assistants remains a significant barrier to advancing the profession. Developing such a standard is critical for delineating these professionals' competencies, responsibilities, and scope of practice. Moreover, the ongoing debate about the feasibility of establishing a rehabilitation nurse specialization reflects broader uncertainty within the medical community. Some healthcare experts argue that basic training provided by existing nursing educational institutions is sufficient and question the need for additional expenditures on specialized training or adapting curricula to international rehabilitation standards [27].

However, this perspective underestimates the complexity of rehabilitation care and the need for advanced professional knowledge and specialized competencies. Moreover, the general qualification requirements for nurses lack a precise definition of their functions, role within multidisciplinary teams, and level of autonomy in the rehabilitation process.

In developing a Ukrainian rehabilitation nursing model, the comparative analysis of international competency frameworks (as presented in Table 1) provides valuable insights into shared global standards and national distinctions. These models consistently emphasize a holistic, patient-centered approach and highlight the importance of interdisciplinary collaboration. Key competency domains such as patient assessment, individualized rehabilitation planning, implementation of therapeutic interventions, psychosocial support, integration of assistive technologies, and continuous professional development are consistently represented across all three systems. Despite terminology and national priorities variations, these shared domains reflect a unified understanding of core competencies essential to effective rehabilitation nursing practice [28; 29].

Therefore, adapting international competency frameworks to the Ukrainian healthcare context offers a strategic pathway for strengthening rehabilitation nurses' professional identity, autonomy, and effectiveness. Such adaptation must be context-sensitive for developing a Ukrainian model of rehabilitation nurse competencies that addresses the current challenges and needs of the country's healthcare system.

Introducing a national professional standard for rehabilitation nurses would define precise professional requirements and align the field more closely with international standards. This advancement would enable nurses to play a more active role in the rehabilitation process, fostering

opportunities for professional development, enhancing the status of the nursing profession, and ultimately improving the quality of rehabilitation care in Ukraine [30; 31]. The expanding responsibilities of rehabilitation nurses demand specialized knowledge and technical skills. Without proper training, the use of technologies such as Bladder Scanners and VAC systems is limited, diminishing the effectiveness of interventions. Establishing a national standard would facilitate the creation of relevant training programs, define role expectations, and support nurse empowerment.

Another critical factor is the strategic integration of nurses into multidisciplinary teams. Nurses are often the first to respond to clinical deterioration and play a critical role in supporting both physical recovery and psychological adaptation. Despite their key role, the work of nurses in rehabilitation remains underestimated. They are the backbone of the continuity of the rehabilitation process, creating the conditions for restoring a patient's functionality and improving their quality of life. Their roles go beyond physical care to include emotional support, especially as patients cope with traumatic injuries or long-term disabilities.

Given the ongoing expansion of the rehabilitation sector in Ukraine, including establishing new departments and services, it is imperative to train a new generation of nurses and support the professional sustainability of those already in the field. Rehabilitation nursing must be seen not only as a clinical specialization but as a vocation that requires commitment to continuous learning and professional excellence.

Finally, with the growing demand for rehabilitation services, further supported by national healthcare policies and funding, Ukraine must invest in its nursing workforce. A clearly defined professional standard would not only address competency gaps and improve care quality but also reinforce the crucial status of rehabilitation nurses within the healthcare system.

Prospects for further research

Prospects for further research include developing criteria for integrating professional labour functions into

the professional standard for the Rehabilitation Nurse specialization, which will contribute to more precise regulation of qualification requirements, professional responsibilities, and labour relations between employers and specialists within the Ukrainian healthcare system.

Conclusions

An analysis of international competency frameworks for rehabilitation nurses has identified a consistent approach to defining the professional role of these specialists within the healthcare systems of high-income countries. These frameworks emphasize the significance of professional autonomy, specialized competencies, and interdisciplinary collaboration within multidisciplinary teams. They may serve as reference models for developing a national professional standard for rehabilitation nursing in Ukraine, considering domestic legislative developments and the challenges of martial law.

The advancement of rehabilitation nursing in Ukraine is occurring under challenging socio-economic conditions and workforce constraints resulting from the ongoing war with Russia. Despite recent regulatory progress, the sector faces critical issues, including a shortage of qualified personnel, excessive workloads, limited specialized training opportunities, and a lack of structured support for early-career professionals. These circumstances underscore the urgent need to formalize the professional status of rehabilitation nurses and nursing assistants by establishing clear professional standards that delineate core competencies, scopes of responsibility, and standardized procedures for clinical practice.

Officially recognizing rehabilitation nursing as a distinct area of professional practice will enhance the quality of care and contribute to the sustainable development of human resources in healthcare. Creating a contemporary training model for rehabilitation nurses – tailored to the Ukrainian context – represents a strategically important step toward aligning the national healthcare system with global standards in rehabilitation.

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Purpose. Based on a critical examination (or comparative analysis) of international frameworks for defining rehabilitation nurses' competencies, the study aims to substantiate the directions for developing a national professional standard for rehabilitation nurses in Ukraine, taking into account the challenges posed by martial law and the evolving needs of the national healthcare system.

Materials and methods. A bibliosemantic review of global rehabilitation nursing competency frameworks was conducted using Scopus, Web of Science, PubMed, Google Scholar, and PEDro databases.

Results. Rehabilitation nursing in Ukraine is evolving to meet growing healthcare demands and align with international standards. However, the profession faces significant challenges, including staff shortages, excessive workloads, and insufficient training. Analysis of the regulatory framework, current trends, and competency gaps, particularly in the ongoing war, helped identify priority areas for professional standard development and workforce training under unstable conditions. A comparative analysis of rehabilitation nursing roles in the UK, Norway, and the USA revealed common approaches to education and team integration that may guide the creation of a Ukrainian competency model. Key issues include inconsistencies in required competencies, gaps in legal regulation, and the lack of a structured educational pathway. Addressing these challenges through regulatory enhancement, workload standardization, and national professional standards is essential for advancing rehabilitation nursing.

Conclusion. A comprehensive understanding of the role, competencies, and professional autonomy of rehabilitation nurses, along with an analysis of countries with established regulatory frameworks, is essential for the development of a national professional standard that is responsive to the specific needs of Ukraine's healthcare system.

Key words: rehabilitation nursing, professional standard, competency matrix, rehabilitation.

Мета дослідження – проаналізувати міжнародні підходи до визначення компетентностей медичних сестер у сфері реабілітації та обґрунтувати шляхи формування національного професійного стандарту в Україні, адаптованого до умов воєнного стану та потреб системи охорони здоров'я.

Матеріали та методи. Здійснено бібліосемантичний аналіз сучасних міжнародних рамок компетентності медичних сестер у сфері реабілітації на основі джерел, представлених у провідних наукометричних базах даних: Scopus, Web of Science, PubMed, Google Scholar та PEDro. У процесі дослідження застосовано теоретичні методи, зокрема аналіз і синтез нормативно-правових актів законодавства України у сфері реабілітації та медсестринства, а також рекомендацій авторитетних міжнародних організацій у галузі охорони здоров'я та медичної освіти. Метою такого підходу було виявлення глобальних тенденцій і особливостей професійного становлення медсестринства в галузі реабілітації як нової спеціалізації в українській системі надання медичної допомоги у відповідь на виклики, спричинені війною. Крім того, проаналізовано науково-педагогічні та економічні публікації, що розкривають теоретичні засади досліджуваної проблематики. Проведено систематизацію отриманого матеріалу та його узагальнення з метою формулювання висновків і визначення напрямів подальших наукових пошуків.

Результати. Реабілітаційне медсестринство в Україні розвивається відповідно до зростаючих потреб та міжнародних стандартів, але залишаються такі проблеми, як нестача кадрів, високе робоче навантаження та недостатній рівень підготовки. Результати дослідження показали, що аналіз нормативно-правової бази, сучасних тенденцій та прогалин у компетенціях реабілітаційних медсестер, з урахуванням викликів, спричинених триваючою війною, дозволяє визначити пріоритетні напрямки для розвитку професійних стандартів та підготовки медичних кадрів у сфері реабілітації в умовах нестабільної ситуації. Порівняльний аналіз ролі реабілітаційних медсестер у Великій Британії, Норвегії та США виявляє спільні підходи до підготовки та інтеграції команд, які можуть слугувати основою для створення української моделі компетенцій. Серед ключових викликів – невідповідність компетенцій, прогалини в нормативно-правовій базі та відсутність структурованої освіти. Посилення нормативно-правової бази, визначення стандартів робочого навантаження та розробка професійних стандартів є

критично важливими для покращення реабілітаційного медсестринства. Необхідні подальші дослідження для встановлення кваліфікаційних вимог та узгодження практики з поточними потребами реабілітаційної медицини.

Висновки. Проведений аналіз міжнародних рамок компетентності медичних сестер у реабілітації засвідчив наявність спільного підходу до визначення професійної ролі цих фахівців у системах охорони здоров'я країн з розвинутою економікою. Такі рамки підкреслюють важливість високого рівня автономії професії «Медсестринство», спеціалізованих компетентностей а також міждисциплінарної співпраці в мультидисциплінарній команді. Вони можуть бути використані як орієнтир для створення національного професійного стандарту в Україні, з урахуванням вітчизняного контексту, законодавчих змін і викликів, що виникли в умовах воєнного стану.

Розвиток реабілітаційного медсестринства в Україні відбувається у складних соціально-економічних і кадрових умовах, викликаних війною з рф. Попри позитивні зрушення в нормативному полі, галузь стикається з низкою проблем: дефіцит фахівців, високе навантаження, недостатній рівень спеціалізованої підготовки, відсутність системної підтримки молодих кадрів. У таких умовах постає нагальна потреба у формалізації професійного статусу медичних сестер і братів у реабілітації через впровадження чіткого професійного стандарту, який визначатиме рамку компетентностей, межі відповідальності та алгоритми практичної діяльності.

Визнання реабілітаційного медсестринства як окремої галузі професійної практики сприятиме не лише підвищенню якості медичної допомоги, але й створенню умов для сталого кадрового розвитку. Формування сучасної, адаптованої до українських реалій моделі підготовки медичних сестер у сфері реабілітації є стратегічно важливим кроком на шляху до інтеграції української медицини у світовий реабілітаційний простір.

Ключові слова: реабілітаційне медсестринство, професійний стандарт, матриця компетентностей, реабілітація.

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