

Admission Guidelines

RULES AND REGULATION

M. Sc. (NURSING) POST GRADUATE DEGREE COURSE 2019-20

The course offered by **Sardar Patel University, Vallabh Vidyanagar** is recognized and approved by respective councils such as Indian Nursing Council, New Delhi, Gujarat Nursing Council, Ahmadabad, University Grant Commission and Govt. of Gujarat.

	TABLE: I Intake capacity of constitute college				
SR. NO	NO NAME OF COLLEGE INTAKE CAPACITY PLACE				
1	Dinsha Patel college of	10	Nadiad		
	Nursing				

DURATION:

The duration of the courses shall be TWO (2) academic years, This is subject to the rules of **Sardar Patel University Vallabh Vidyanagar**, Gujarat Nursing Council, Ahemdabad and Indian Nursing council, New Delhi.

MODE OF ADMISSION:

The admission procedure will be as under:-

- 1. Interested candidate must appear in Common entrance examination held by University.
- 2. Admission will be based purely on merit of entrance examination.
- 3. Selected candidate will have to appear personally before University admission committee with all original documents.
- 4. Candidate has to apply in the prescribed form along with self attested photo copy of all certificates as per University admission form.

DATE AND TIME OF ENTRANCE EXAMINATION & COUNSELLING:

The entrance examination & counseling will be conducted on declared date and time by the University.

ELIGIBILITY CRITERIA:

Candidate fulfilling the following criteria shall be eligible to apply for admission in M.Sc. Nursing course.

1. ELIGIBILITY CRITERIA

- 1.1 He/ She must be an Indian Citizen. He /She must be medically fit.
- 1.2 The candidates must have completed the recognized B. Sc (Nursing)/ Post basic Nursing or Equivalent course with minimum of 55% aggregate marks (5% relaxation of marks for SC/ST/SEBC candidates may be given.)
- 1.3 The candidate should have undergone in B. Sc. Nursing / Post Basic B.Sc. Nursing in an institution which is recognized by Nursing Council. Candidate must have minimum **one year** of experience after Basic B.Sc or minimum **one year** of experience prior or after Post Basic B.Sc. Nursing.
- 1.4 Candidate seeking admission for specialization in Midwifery (obstetrics) and obstetrical and Maternal-child health nursing shall be Registered Nurse and Registered Midwife, where as for specialties, candidate shall be registered Nurse.
- 1.5 A Candidate who is currently engaged in P.G. Nursing studies in this University or any other university or equivalent body is not eligible.
- 1.6 A candidate who is graduate of University other than Sardar Patel University should have to submit provisional eligibility certificate (P.E.C.) from Sardar Patel University within one month from the date of his/her admission, failing which the admission of candidate shall be cancelled without any notice thereof, fees forfeited and will not be eligible to apply in future, This provisional eligibility

certificate(PEC) should be submitted/checked by respective institute/ <u>college</u> where candidate get admission.

- 1.7 A candidate has to appear in competitive examination conducted in respective academic year for admission to Post-graduate nursing courses held by University.
- 1.8 Admission committee: Admission and placement of these candidates for particular post graduate course / subject / teacher & institute/ University shall be decide the members by Admission Committee.

PROCEDURE FOR ADMISSION:

Candidates who satisfy the eligibility norms lay down by respective councils and would be offered Admission to the M.Sc. Nursing shall be made on the basis of merit of marks obtained by the candidates in entrance examination.

Counseling shall be compulsory and shall be conducted by the committee consisting of members as decided by University.

Equal marks – in case of candidates securing equal marks, their inter-se-merit will be determined as under:

- Higher percentage of aggregate marks up to 3 decimal points.
- Then, the candidate having more experience.
- Then, the candidate older in age.
- In case of all the equality between two or more candidates lottery system will be applicable.

A. Counseling:

At the time of counseling, the eligibility of the candidate for admission shall be verified from the original documents and eligible candidates will be interview and then for admission as per the availability of seats. The candidate has to bring all the required Original documents as listed at the time of counseling. The admission shall not be granted if candidate fails to produce required original documents (viz. mark sheets of all years, caste certificate, non-creamy layer certified, income certificate etc. as applicable). Asking a candidate to report for counseling does not mean that he/she will be admitted to the course. The candidates will have to report for counseling personally at their own cost.

DEPOSIT/RETURN OF ORIGINAL DOCUMENTS:

- Candidate admitted to the programme will have to deposit their Original Documents to the university at the
 time of admission, failing which their admission shall be treated as forfeited
 automatically and the same will be offered to another candidate in the merit list. No
 Correspondence will be made by the candidate to that effect.
 - 2. If a candidate cancels his/her admission his/her Original Documents will be returned to him/her on completion of required formalities.

MEDICAL FITNESS CERTIFICATE:

Candidate, if selected, will have to produce medical fitness certificate from registered medical Officer.

WAITING LIST:

After the seats of a course are filled, the candidates who are not selected will be wait-listed for the course and will be given a waiting-list number. The waiting-list will be operated only if any vacancy arises. In such case the candidate will have to report immediately before admission committee.

CANCELLATION AND REFUND OF FEES:

In case of cancellation of admission the rules and regulation of University shall be followed.

ASSISTANCE IN BANK LOAN:

Admission card, fee particulars, affiliation papers, study certificate etc required for bank loan will be issued to candidate only after completion of admission formalities. University/college will not be responsible for any matter related to sanctioning of bank loans.

DOCUMENTS TO BE SUBMITTED AT THE TIME OF COUNSELLING:

The candidates are required to produce the original copies of the following documents along with two sets of their photocopies self attested, at the time of counseling. In case the candidate has submitted original documents to some other institute, he/she should bring a letter from head of that institute certifying submission of documents to that institute.

- 1) S.S.C./H.S.C./ Equivalent Examination marks statement and certificate.
- 2) Year wise Basic B.Sc. Nursing or Post Basic B.Sc. Nursing mark sheets.
- 3) Year wise GNM mark sheets if applicable.
- 4) Registration Certificate.
- 5) Experience certificate.
- 6) Leaving certificate/Transfer certificate/Relieving certificate from the institution last attended.
- 7) Proof of Age certificate.
- 8) Domicile certificate.
- 9) Medical fitness certificate from a registered Medical officer.
- 10) Caste certificates with latest crimiliar certificate.
- 11) Copy of Govt. Gazette in case of change in name.
- 12) Five Passport size recent color photographs.
- 13) A candidate who is working in government or private sector they have to produce NOC certificate of that institute.
- 14) Degree/provisional degree certificate.

DISCIPLINE:

The candidates admitted in the colleges are bound by the discipline and conduct rules of the College/university/councils.

RAGGING:

Ragging within or outside the educational institution is strictly prohibited. Ragging is criminal offence under the Anti-Ragging Act. The University/college has already framed rules and regulations in this regard and students involved in ragging will be subjected to such disciplinary proceeding including filing of a case as prescribed.

COURSE FEES:

Tuition fee: As decided by Fee Regulatory Committee (Medical) Ahmedabad

And university fee Regulatory Committee **Note:** Fee can be paid in two installments

DISTRIBUTION OF SEATS:

A. Govt. Quota Seats -75% of total seats

- B. Management Quota seats -25% of total seats (including Foreign Indian Student (NRI) quota)
 - If the seats remain vacant in government quota, it can be filled by the college as per university rules and regulations.
 - No admission shall be made after last date declared by Indian Nursing Council, New Delhi including the left over seats.

RESERVATION OF SEATS:

The reservation quota shall be as under:

- 1. Government seats shall be reserved for the candidate who is origin of Gujarat and falling under the following categories, namely:
 - a. Scheduled Castes (SC): 7 %
 - b. Scheduled Tribes (ST): 15 %
 - c. Socially and Educationally Backward Class (SEBC): 27 %
- **2.** *Explanation-* The reservation of the seats shall be for the candidates belonging to the Scheduled Castes (SC), Scheduled Tribes (ST), socially and Educationally Backward Classes (SEBC) including Widows, Orphan and physically challenged of any caste recognized as such in the State of Gujarat and not for those who have migrated from other States.

- **3.** A candidate seeking admission on reserved seat shall be required to produce a Certificate of Caste from which he originates:
 - Provided that the candidate belonging to Socially and Educationally Backward Class (SEBC) shall be required to produce a certificate to the effect of non-inclusion in Creamy Layer in addition to the caste certificate.
- **4.** No caste certificate shall be valid unless it is duly stamped, signed and issued by the authority empowered by the Government of Gujarat.
- 5. No certificate to the effect of non-inclusion in Creamy Layer shall be valid, unless it is duly stamped, signed and issued by the authority empowered by the Government of Gujarat. Such certificate shall have been issued on or after the 1st April of the academic year in which the candidate is seeking admission.
- **6.** If a candidate fails to submit the certificates as required under sub-rule (2) along with application form, his candidature shall be considered for admission under unreserved category.
- 7. If a candidate of reserved category gets admission on unreserved seat in order of merits, he may be given admission on the unreserved seat according to his preference.
- **8.** The admission of a candidate of a reserved category on a reserved seat shall be valid subject to the verification of cast certificate by the authority empowered by the State Government in this behalf. In case the caste certificate is found invalid on verification, he shall not have right to claim his admission on reserved seat and if he has been already granted admission, such admission shall be cancelled.
- **9.** After granting admission to all the candidates of reserved categories on respective reserved seats, the reserved category seats remaining vacant shall be transferred to the unreserved category seats.

Reservation for Physically Disabled Candidates:-

Three percent of the total available seats shall be reserved, for loco-motor disabled candidates of the respective category provided that a candidate having" loco-motor disability of lower limbs between 50% to 70% (upper limbs being normal) "shall be eligible to apply for admission in accordance with the guidelines/regulations of the Medical Council of India provided the candidate shall require to produce the certificate obtained in the perform prescribed in the application form. The certificate shall be obtained from the Medical Board constituted for this purpose by the State Government. The Certificate shall contain disability and suitability of such candidate for undertaking the course. If any seats remain vacant, the second preference shall be given to a candidate having locomotor disability of lower limbs between 40% to 50%.

No other disability certificate except the certificate which is issued as per the Performa annexed to the application form from Medical board constituted for the purpose regarding disability and suitability of such candidate for undertaking the course shall be treated as final.

The Candidate with a disability more than 70% will not be eligible for admission to any Courses on any category. No other disability will be allowed. The seats remaining vacant in reserved category shall be transferred to general category and vice versa.

THE FOREIGN INDIAN STUDENTS (NRI) SEATS

- ➤ 15% seats in private institute stand earmarked for the Foreign Indian Students (NRI). The Foreign Indian Student (NRI) will be part of management quota.
- I. The candidates for Foreign Indian Students (N.R.I.) seats in these institutions will be admitted on merit determined on the basis of marks obtained in the qualifying examination equivalent to B.Sc. Nursing examination. The equivalence, merit and eligibility of the candidates will be determined by the Sardar Patel University, V.V.Nagar, who will issue an eligibility certificate for such candidates.
- II. The criteria laid down for admission against seats reserved for N.R.I. candidates will be as under
 - a. A candidate shall be Non-Resident Indian, or
 - b. his/her parents or in absence of his/her parents, his/her legal guardian shall be Non-Resident Indian, or
 - c. He/she shall be dependent of Non-Resident Indian for the educational purposes and shall have necessary proof/evidence in support of his/her dependent.

NOTE:

- A. If sufficient number of candidates under first category is eligible and available, then they will be admitted first even if students under subsequent category are higher in merit.
- B. The Foreign Indian Students (NRI) students will have to submit a bank guarantee/ surety bond for the balance of fee if they opt to pay in installments.
- C. Any seats remaining vacant under Foreign Indian Students (NRI). Category shall go to the management quota.

- D. NRI unfilled seats shall be converted to management seats to be filled by management itself after a due notice in press and to the concerned authorities so that they may participate as member and supervise the counseling.
- E. Tution Fee for NRI candidate: As decided by Gujarat Regulation Fee Committee.

OTHER RULES:

- 1. A candidate who is in role in any other University other than Sardar Patel University shall have to submit Provisional Eligibility Certificate (P.E.C.) from Sardar Patel University within one month from the date of his/her admission, failing which the admission of candidate shall be cancelled and will not be eligible to apply in future.
- 2. Vacant seats: After the completion of admission process or offering admission to all the candidates whose names appears in the merit list, if the seats remained vacant. Such vacant seats shall be displayed on the official website/ notice board of the office of Admission Committee. In case any candidate requires admission on such vacant seats he shall apply directly to such Colleges or Institutions. The vacant seats shall be filled by giving priority to the students of Gujarat state. The Colleges or Institutions shall admit the candidate on the basis of inter-se merit of the applicant, subject to the eligibility criteria, in respect of the course the candidate is granted admission, as lay down by the Indian Nursing Council, Sardar Patel University.

Scheme of Examination

ject code	Year	Theory		Practical		
	r	al	nal	al	nal	
N. 101	g education					
N. 102	ce nursing practice					
N. 103	03 g research and statistics					
N. 104	al specialty - I					
	ear					
N. 201	g management					
	tation & Viva					
N. 202	al spatiality - II					

SARDAR PATEL UNIVERSITY VALLABH VIDYA NAGAR, GUJARAT, INDIA SYLLABUS M.SC (NURSING)



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	- Cardio Vascular & Thoracic Nursing			
	- Medical Surgical Nursing – Critical Care Nursing			

	- Medical Surgical Nursing - Oncology Nursing
	- Medical Surgical Nursing - Neurosciences Nursing
	- Medical Surgical Nursing - Nephro- Urology Nursing
	- Medical Surgical Nursing -Orthopedic Nursing
	- Medical Surgical Nursing - Gastro Enterology Nursing
	- Obstetric & Gynaecological Nursing
	- Paediatric (Child Health) Nursing
	- Psychiatric (Mental Health) Nursing
	- Community HealthNursing
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Philosophy

National Health Policy(NHP) 2002 emphasizes the need to prepare nurses to function in super-speciality areas who are required in tertiary care institutions, entrusting some limited public health functions to nurses after providing adequate training, and increase the ratio of degree holding vis a vis diploma holding nurses.

It is observed that there is an acute shortage of nursing faculty in under graduate and post graduate nursing programme in India

Indian Nursing Council believes that:

Post Graduate programme is essential to prepare nurses to improve the quality of nursing education and practice in India. .

Post graduate programme in nursing builds upon and extends competence acquired at the graduate levels, emphasizes application of relevant theories into nursing practice, education, administration and development of research skills.

The programme prepares nurses for leadership position in nursing and health fields who can function as nurse specialists, consultants, educators, administrators and researchers in a wide variety of professional settings in meeting the National priorities and the changing needs of the society.

This programme provides the basis for the post masteral programme in nursing. Further the programme encourages accountability and commitment to life long learning which fosters improvement of quality care.

Aim

The aim of the postgraduate program in nursing is to prepare graduates to assume responsibilities as nurse specialists, consultants, educators, administrators in a wide variety of professional settings

Objectives

On Completion of the two year M.Sc Nursing programme, the graduate will be able to:-

- 1. Utilize/apply the concepts, theories and principles of nursing science
- 2. Demonstrate advance competence in practice of nursing
- 3. Practice as a nurse specialist.
- 4. Demonstrate leadership qualities and function effectively as nurse educator and manager.
- 5. Demonstrate skill in conducting nursing research, interpreting and utilizing the findings from health related research.

- 6. Demonstrate the ability to plan and effect change in nursing practice and in the health care delivery system.
- 7. Establish collaborative relationship with members of other disciplines
- 8. continued learning for personal Demonstrate interest in and professional advancement.

Other Staff (Minimum requirements)

e)

Gardeners & Dhobi

(desirable)

(To be reviewed and revised rationalized keeping in and mind the mechanization and contract service)

uniz	ation and t	contract service)	
•	Minister	rial	
	a)	Administrative Officer	1
	c)	Office Superintendent	1
	d)	PA to Principal	1
	e)	Accountant/Cashier	1
•	Upper D	Division Clerk	2
•	Lower I	Division Clerk	2
•	Store Ke	eeper	1
	a)	Maintenance of stores	1
	b)	Classroom attendants	2
	c)	Sanitary staff	As per the physical space
	d)	Security Staff	As per the requirement
•	Peons/	Office attendants	4
•	Library	/	
	a)	Librarian	2
	b)	Library Attendants	As per the requirement
•	Hostel		
	a)	Wardens	2
	b)	Cooks, Bearers, Sanitary Staff	As per the requirement
	c)	Ayas /Peons	As per the requirement
	d)	Security Staff	As per the requirement

Depends on structural facilities

Eligibility Criteria/Admission Requirements:

- 1. The candidate should be a Registered Nurse and Registered midwife or equivalent with any State Nursing Registration Council.
- 2. The minimum education requirements shall be the passing of:
 - B.Sc. Nursing / B.Sc. Hons. Nursing / Post Basic B.Sc. Nursing with minimum of 55% aggregate marks.
- 3. The candidate should have undergone in B.Sc. Nursing / B.Sc. Hons. Nursing / Post Basic B.Sc. Nursing in an institution which is recognized by Indian Nursing Council.
- 4. Minimum one year of work experience afterBasic B.Sc. Nursing.
- 5. Minimum one year of work experience prior or after Post Basic B.Sc. Nursing.
- 6. Candidate shall be medically fit.
- 7. 5% relaxation of marks for SC/ST candidates may be given.

Entrance/Selection test

Selection of the candidates should be based on the merit of the entrance examination held by University or competent authority.

Regulations for examination:

Eligibility for appearing for the examination:

75% of the attendance for theory and practicals. However 100% of attendance for practical before the award of degree

Classification of results:

- 50% pass in each of the theory and practical separately.
- 50-59% Second division
- 60-74% first division
- 75% and above is distinction
- For declaring the rank aggregate of 2 years marks to be considered

If the candidate fails in either practicals or theory paper he/she has to re- appear for both the papers (theory and practical)

Maximum no. of attempts per subject is three (3) inclusive of first attempt. The maximum period to complete the course successfully should not exceed 4 years

Candidate who fails in any subject, shall be permitted to continue the studies into the second year. However the candidate shall not be allowed to appear for the Second year examination till such time that he/she passes all subjects of the first year M.Sc nursing examination

Practicals

- 4 hours of practical examination per student.
- Maximum number of 10 students perday per speciality.
- The examination should be held in clinical area only for clinical specialities
- One internal and external should jointly conduct practical examination
- Examiner Nursing faculty teaching respective speciality area in M.Sc nursing programme with minimum 3 years experience after M.Sc nursing.

Dissertation

Evaluation of the dissertation should be done by the examiner prior to viva Duration: Vivavoce -minimum 30 minutes perstudent

Guidelines for Dissertation

Tentative Schedule for dissertation

S. No.	Activities	Scheduled Time
1.	Submission of the research proposal	End of 9 th month of 1 st year
2.	Submission of dissertation – Final	End of 9 th month of II nd Year

Note: - Administrative approval and ethical clearance should be obtained

A. Research Guides

a) Qualification of Guide

Main guide: Nursing faculty / nursing expert in the same clinical speciality holding Ph.D./M.Phil/M.Sc. Nursing with a minimum of 3 years experience in teaching in the Post Graduate Programme in Nursing.

Co-Guide: A Co-Guide is a nursing faculty/expert in the field of study (may be from outside the college but should be within the city.)

b) Guide – Students Ratio

Maximum of 1:4 (including as co-guide)

c) Research Committee

There should be a research committee in each college comprising of minimum 5 members chaired by the Principal, College of Nursing.

Duration

Duration of the course is 2 years for M.Sc. (N)

Total hours for 2 years	3440 hours
40 hours per week	1720 hours
Total weeks available	43 weeks
Gazetted holidays	3 weeks
Examination	2 weeks
Vacation	4 weeks
Available	52 weeks

Course of Instruction Theory Practical (hrs) (hrs)

1st year		
Nursing education	150	150
Advance nursing practice	150	200
Nursing Research and statistics	150	100
*Clinical speciality –I	150	650

Total	600	1100
II nd Year	,	
Nursing Management	150	150
Nursing Research(Dissertation)		300
*Clinical Speciality-II	150	950
Total	300	1400

600

Educational visit 2 weeks

*Clinical Speciality – Medical Surgical Nursing (Cardio Vascular & Thoracic Nursing, Critical care Nursing, Oncology Nursing, Neurosciences Nursing, Nephro-Urology Nursing, Orthopedic Nurisng, Gastro Enterology Nursing,)Obstetric & Gynae cological Nursing, Child Health (Paediatric) Nursing, Mental Health(Psychiatric) Nursing, Community Health Nursing, Psychiatric (Mental Health) Nursing etc.

Note: Students have to maintain log book for each activity during the course of study Scheme of Examination

		Theory			Practical	
1st year	Hours	Internal	External	Hours	Internal	External
Nursing education	3	25	75		50	50
Advance nursing practice	3	25	75			
Nursing Research and						
statistics	3	25**	75*			
Clinical speciality -I	3	25	75		100	100
Total		100	300		150	150
II nd Year						
Nursing Management	3	25	75			
Dissertation & Viva					100	100
Clinical Speciality-II	3	25	75		100	100
Total		50	150		200	200

^{*} Nursing research=50 and statistics=25

- 1. Minimum pass marks shall be 50 % in each of the Theory and practical papers separately.
- 2. A candidate must have minimum of 80% attendance (irrespective of the kind of absence) in theory and practical in each subject for appearing for examination.
- 3. A candidate must have 100% attendance in each of the practical areas before award of degree
- 4. A candidate has to pass in theory and practical exam separately in each of the paper.
- 5. If a candidate fails in either theory or practical paper he/she has to re-appear for both the papers (Theory and practical).
- 6. Maximum no. of attempts permitted for each paper is 3 including first attempt.

^{**}Nursing research=15 and statistics=10

- 7. The maximum period to complete the course successfully should not exceed 4 (four) years
- 8. A candidate failing in more then two subjects will not be promoted to the IInd year.
- 9. No candidate shall be admitted to the subsequent IInd year examination unless the candidate has passed the Ist year examination.
- 10. Maximum number of candidates for all practical examination should not exceed 10 per day.
- 11. Provision of Supplementary examination should be made.
- 12. All practical examinations must be held in the respective clinical areas.
- 13. One internal and One external examiners(outside the University) should jointly conduct practical examination for each student
- 14. An examiner should be M.Sc (N) in concerned subject and have minimum of 3 (three) years post graduate teaching experience.
- 15. One internal and One external examiners(outside the University) should evaluate dissertation and jointly conduct viva-voce for each student
- 16. For Dissertation Internal examiner should be the guide and external examiner should be Nursing faculty / nursing expert in the same clinical speciality holding Ph.D./M.Phil/M.Sc. Nursing with a minimum of 3 years experience in guiding the research projects for Post Graduate students of Nursing.

Admission Strength

Annual admission strength for M.Sc (N) Programme should have prior sanction/permission from the Indian Nursing Council on the basis of clinical, physical facilities and teaching faculty.

Health Services

There should be provisions for the following health services for the students.

- (a) An annual medical examination.
- (b) Vaccination against Tetanus, hepatitis B or any other communicable disease as considered necessary.
- (c) Free medical care during illness and / provision of health insurance should be made.
- (d) A complete health record should be kept in respect of each individual students. The question of continuing the training of a student, with long term chronic illness, will be decided by the individual college.

CURRICULUM NURSING EDUCATION

Placement: Ist Year Hours of Instruction
Theory 150 Hours
Practical 150 Hours

Total: 300Hours

Course Description

This course is designed to assist students to develop a broad understanding of Fundamental Principles, concepts, trends and issues related to education and nursing education. Further, it would provide opportunity to students to understand, appreciate and acquire skills in teaching and evaluation, curriculum development, implementation, maintenance of standards and accreditation of various nursing educational programs.

Objectives

At the end of the course, students will be able to:

- 1. Explain the aims of education, philosophies, trends in education and health: its impact on nursing education.
- 2. Describe the teaching learning process.
- 3. Prepare and utilize various instructional media and methods in teaching learning process.
- 4. Demonstrate competency in teaching, using various instructional strategies.
- 5. Critically analyze the existing nursing educational programs, their problems, issues and future trends.
- 6. Describe the process of curriculum development, and the need and methodology of curriculum change, innovation and integration.
- 7. Plan and conduct continuing nursing education programs.
- 8. Critically analyze the existing teacher preparation programs in nursing.
- 9. Demonstrate skill in guidance and counseling.
- 10. Describe the problems and issues related to administration of nursing curriculum including selection and organization of clinical experience.
- 11. Explain the development of standards and accreditation process in nursing education programs.
- 12. Identify research priorities in nursing education.
- 13. Discuss various models of collaboration in nursing education and services.
- 14. Explain the concept, principles, steps, tools and techniques of evaluation
- 15. Construct, administer and evaluate various tools for assessment of knowledge, skill, and attitude.

Course Content

Units	Hours		Course Content
	Theory	Practical	
I	10		 Introduction: Education: Definition, aims, concepts, philosophies & their education implications, Impact of Social, economical, political & technological changes oneducation:
II	20	30	Teaching – Learning Process □ Concepts of teaching and learning: Definition, theories of teaching and learning, relationship between teaching and learning. □ Educational aims and objectives; types, domains, levels, elements and writing of educational objectives □ Competency based education(CBE) and outcome based education(OBE) □ Instructional design: Planning and designing the lesson, writing lesson plan: meaning, its need and importance, formats. □ Instruction strategies – Lecture, discussion, demonstration, simulation, laboratory, seminar, panel, symposium, problem solving, problem based learning (PBL), workshop, project, role-play(socio- drama), clinical teaching methods, programmed instruction, self directed learning(SDL), micro teaching, computer assisted instruction(CAI), computer assisted learning (CAL)

Units	ts Hours		Course Content
	Theory	Practical	
Ш	10	10	 Instructional media and methods □ Key concepts in the selection and use of media in education □ Developing learning resource material using different media □ Instructional aids – types, uses, selection, preparation, utilization. □ Teacher's role in procuring and managing instructional Aids – Project and non-projected aids, multi media, video-tele conferencing etc
IV	10		 Measurement and evaluation: □ Concept and nature of measurement and evaluation, meaning, process, purposes, problems in evaluation and measurement. □ Principles of assessment, formative and summative assessment-internal assessment external examination, advantages and disadvantages. □ Criterion and norm referencedevaluation,
V	12	10	Standardized and non-standardized tests: Meaning, characteristics, objectivity, validity, reliability, usability, norms, construction of tests- Essay, short answer questions and multiple choice questions. Rating scales, checklist, OSCE/OSPE(Objective structured clinical/practical examination) Differential scales, and summated scales, sociometry, anecdotal record, attitude scale, critical incident technique Question bank-preparation, validation, moderation by panel, utilization Developing a system for maintaining confidentiality
VI	8	5	Administration, Scoring and Reporting Administering a test; scoring, grading versus marks Objective tests, scoring essay test, methods of scoring, Item analysis.
VII	12	6	Standardized Tools ☐ Tests of intelligence aptitude, interest, personality, achievement, socio-economic status scale, tests for special mental and physical abilities and disabilities.

Units	Hours		Course Content
	Theory	Practical	
VIII	5	6	Nursing Educational programs □ Perspectives of nursing education: Global and national. □ Patterns of nursing education and training programmes in India. Non-university and University programs: ANM, GNM, Basic B.Sc. Nursing, Post Certificate B.Sc. Nursing, M.Sc(N) programs, M.Phil and Ph.D) in Nursing, post basic diploma programs, nurse practitioner programs.
IX	12	25	 Continuing Education in Nursing Concepts - Definition, importance, need scope, principles of adult learning, assessments of learning needs, priorities, resources. Program planning, implementation and evaluation of continuing education programs. Research in continuing education. Distance education in nursing.
X	10	10	 Curriculum Development □ Definition, curriculum determinants, process and steps of curriculum development, Curriculum models, Types and framework. □ Formulation of philosophy, objectives, selection and organization of learning experiences; master plan, course plan, unit plan. □ Evaluation strategies, process of curriculum change, role of students, faculty, administrators, statutory bodies and other stakeholders. □ Equivalency of courses: Transcripts, credit system.
XI	8	4	Teacher preparation □ Teacher − roles & responsibilities, functions, characteristics, competencies, qualities, □ Preparation of professional teacher □ Organizing professional aspects of teacher preparation programs □ Evaluation: self and peer □ Critical analysis of various programs of teacher education in India.

Units	Hours		Course Content	
	Theory	Practical		
XII	10	5	Guidance and counseling □ Concept, principles, need, difference between guidance and counseling, trends andissues. □ Guidance and counseling services: diagnostic and remedial. □ Coordination and organization of services. □ Techniques of counseling: Interview, case work, characteristics of counselor, problems in counseling. □ Professional preparation and training for counseling.	
XIII	15	10	Administration of Nursing Curriculum □ Role of curriculum coordinator – planning, implementation and evaluation. □ Evaluation of educational programs in nursing-course and program. □ Factors influencing faculty staff relationship and techniques of working together. □ Concept of faculty supervisor (dual) position. □ Curriculum research in nursing. □ Different models of collaboration between education and service	
XIV	10		Management of nursing educational institutions □ Planning, organizing, staffing, budgeting, recruitment, discipline, public relation, performance appraisal, welfare services, library services, hostel,	
XV	5	5	 Development and maintenance of standards and accreditation in nursing education programs. Role of Indian Nursing Council, State Registration Nursing Councils, Boards and University. Role of Professional associations and unions. 	

Activities:

- Framing philosophy, aims and objectives.
- Lesson Planning.
- Micro teaching-2.
- Conduct practice teachings using different teaching strategies -10 (like lecture cum discussion, demonstration- lab method, fieldtrips, seminars, project, role play, panel discussion, clinical methodsetc)
- Preparation and utilization of instructional Aids using differentmedia.
- Develop course plans, unit plans, rotation plans.
- Conduct a continuing education workshop.
- Annotated bibliography.
- Critical evaluation of any nursing education program offered by a selected institution.
- Planning and Organizing field visits.

- Educational visits.
- Field visits (INC/SNRC) to get familiar with recognition/registration process.
- Construct, administer and evaluate tools (objective & essay type test, observation checklist, rating scale etc.)
- Observe and practice application of various non-standardized tests (intelligence, Aptitude, Personality, Sociometry, physical & mental disabilities tests.)

Methods of Teaching

- Lecture cum discussion
- Demonstration/ Return demonstration
- Seminar / Presentations
- Project work
- Field visits
- Workshop

Methods of evaluation

- Tests
- Presentation
- Project work
- Written assignments

Internal Assessment

Techniques Test- (2 tests) Assignment Seminar/presentation	Weightage 50 25 25 100
Practical – Internal assessment	
Learning resource material	25
Practice Teaching	50
Conduct Workshop	25
/Short Term Course	
Practical – external assessment Practice teaching- 1-	50
Preparation/use of learning resource material-1	25
Construction of tests/rotation plan.	25

ADVANCE NURSINGPRACTICE

Placement: 1ST Year Hours of Instruction

Theory 150 Hours Practical 200 Hours Total: 350 Hours

Course Description

The course is designed to develop an understanding of concepts and constructs of theoretical basis of advance nursing practice and critically analyze different theories of nursing and other disciplines.

Objectives:

At the end of the course the students will be able to:

- 1. Appreciate and analyze the development of nursing as a profession.
- 2. Describe ethical, legal, political and economic aspects of healthcare delivery and nursing practice.
- 3. Explain bio- psycho- social dynamics of health, life style and health care delivery system.
- 4. Discuss concepts, principles, theories, models, approaches relevant nursing and their application.
- 5. Describe scope of nursing practice.
- 6. Provide holistic and competent nursing care following nursing process approach.
- 7. Identify latest trends in nursing and the basis of advance nursing practice.
- 8. Perform extended and expanded role of nurse.
- 9. Describe alternative modalities of nursing care.
- 10. Describe the concept of quality control in nursing.
- 11. Identify the scope of nursing research.
- 12. Use computer in patient care delivery system and nursing practice.
- 13. Appreciate importance of self development and professional advancement.

Course Content

Unit	Hours	Content	
I	10	Nursing as a Profession History of development of nursing profession, characteristics, criteria of the profession, perspective of nursing profession-national, global Code of ethics(INC), code of professional conduct(INC), autonomy and accountability, assertiveness, visibility of nurses, legal considerations, Role of regulatory bodies Professional organizations and unions-self defense, individual and collective bargaining Educational preparations, continuing education, career opportunities, professional advancement & role and scope of nursing education. Role of research, leadership and management. Quality assurance in nursing (INC). Futuristic nursing.	
II	5	 Health care delivery Health care environment, economics, constraints, planning process, policies, political process vis a vis nursing profession. Health care delivery system- national, state, district and local level. Major stakeholders in the health care system-Government, non-govt, Industry and other professionals. Patterns of nursing care delivery in India. Health care delivery concerns, national health and family welfare programs, inter-sectoral coordination, role of non- governmental agencies. Information, education and communication (IEC). Tele-medicine. 	
III	10	Genetics □ Review of cellular division, mutation and law of inheritance, human genome project ,The Genomicera. □ Basic concepts of Genes, Chromosomes & DNA. □ Approaches to common genetic disorders. □ Genetic testing — basis of genetic diagnosis, Pre symptomatic and predisposition testing, Prenatal diagnosis & screening, Ethical, legal & psychosocial issues in genetic testing. □ Genetic counseling. □ Practical application of genetics in nursing.	
IV	10	Epidemiology Scope, epidemiological approach and methods, Morbidity, mortality, Concepts of causation of diseases and their screening, Application of epidemiology in health care delivery, Health survelliance and health informatics Role of nurse	

Unit	Hours	Content
V	20	Bio-Psycho social pathology Pathophysiology and Psychodynamics of disease causation Life processes, homeostatic mechanism, biological and psycho-social dynamics in causation of disease, life style Common problems: Oxygen insufficiency, fluid and electrolyte imbalance, nutritional problems, hemorrhage Jand shock, altered body temperature, unconsciousness, sleep pattern and its disturbances, pain, sensory deprivation. Treatment aspects: pharmacological and pre- post operative care aspects, Cardio pulmonary resuscitation. End of life Care Infection prevention (including HIV) and standard safety measures, bio-medical waste management. Role of nurse- Evidence based nursing practice; Best practices Innovations in nursing
VI	20	 Philosophy and Theories of Nursing Values, Conceptual models, approaches. Nursing theories: Nightingale's, Hendersons's, Roger's, Peplau's, Abdella's, Lewine's, Orem's, Johnson's, King's, Neuman's, Roy's, Watson parsce, etc and their applications, Health belief models, communication and management, etc Concept of Self health. Evidence based practice model.
VIII	10	 Nursing process approach Health Assessment- illness status of patients/clients (Individuals, family, community), Identification of health- illness problems, health behaviors, signs and symptoms of clients. Methods of collection, analysis and utilization of data relevant to nursing process. Formulation of nursing care plans, health goals, implementation, modification and evaluation of care.
IX	30	 Psychological aspects and Human relations Human behavior, Life processes & growth and development, personality development, defense mechanisms, Communication, interpersonal relationships, individual and group, group dynamics, and organizational behavior, Basic human needs, Growth and development, (Conception through preschool, School age through adolescence, Young & middle adult, and Older adult) Sexuality and sexual health. Stress and adaptation, crisis and its intervention, Coping with loss, death and grieving, Principles and techniques of Counseling.

Unit	Hours	Content
X	10	Nursing practice Framework, scope and trends. Alternative modalities of care, alternative systems of health and complimentary therapies. Extended and expanded role of the nurse, in promotive, preventive, curative and restorative health care delivery system in community and institutions. Health promotion and primary health care. Independent practice issues,- Independentnurse-midwifery practitioner. Collaboration issues and models-within and outside nursing. Models of Prevention, Family nursing, Home nursing, Gender sensitive issues and womenempowerment. Disaster nursing. Geriatric considerations in nursing. Evidence based nursing practice- Best practices Trans-cultural nursing.
XI	25	Computer applications for patient care delivery system and nursing practice Use of computers in teaching, learning, research and nursing practice. Windows, MS office: Word, Excel, Power Point, Internet, literature search, Statistical packages, Hospital management information system: softwares.

Practical

Clinical posting in the following areas:

Specialty area- in-patient unit
 Community health center/PHC
 Emergency/ICU
 2 weeks
 2 weeks

Activities

- Prepare Case studies with nursing process approach and theoretical basis
- Presentation of comparative picture of theories
- Family case- work using model of prevention
- Annotated bibliography
- Report of field visits (5)

Methods of Teaching

- Lecture cum discussion
- Seminar
- Panel discussion
- Debate
- Case Presentations
- Exposure to scientific conferences
- Field visits

Methods of evaluation:

- Tests
- Presentation
- Seminar
- Written assignments

Advance nursing Procedures

Definition, Indication and nursing implications;

 CPR, TPN, Hemodynamic monitoring, Endotrcheal intubation, Tracheostoma, mechanical ventilation, Pacemaker, Hemodialysis, Peritonial dialysis, LP, BT Pleural and abdominal parecentasis OT techniques, Health assessment, Triage, Pulse oxymetry

Internal Assessment

Techniques	Weightage
Test- (2 tests)	50
Assignment	25
Seminar/presentation	25
	100

CLINICAL SPECIALITY - I

MEDICAL SURGICAL NURSING

Placement: 1st Year

Hours of instruction Theory: 150 Hours Practical: 650 Hours Total: 800 Hours

Course Description

This course is common for the students undergoing clinical speciality-II in neuro science nursing/cardiovascular & thoracic nursing/critical care nursing/oncology nursing/orthopaedic and rehabilitation nursing/nephro & urology nursing, gastroenterology nursing/ geriatric nursing.

It is designed to assist students in developing expertise and in depth knowledge in the field of medical Surgical Nursing. It will help students to appreciate the patient as a holistic individual and develop skill to function as a specialized Medical-Surgical Nurse. It will further enable the student to function as educator, manager and researcher in the field of Medical – Surgical Nursing.

Objectives

At the end of the course the students will be able to:

- 1. Appreciate the trends & issues in the field of Medical Surgical Nursing as a speciality.
- 2. Apply concepts & theories related to health promotion.
- 3. Appreciate the client as a holistic individual.
- 4. Perform physical, psychosocial assessment of Medical Surgical patients.
- 5. Apply Nursing process in providing care to patients.
- 6. Integrate the concept of family centered nursing care with associated disorder such as genetic, congenital and long-term illness.
- 7. Recognize and manage emergencies with Medical-Surgical patients.
- 8. Describe various recent technologies & treatment modalities in the management of critically ill patients.
- 9. Appreciate the legal & ethical issues relevant to Medical Surgical Nursing.
- 10. Prepare a design for layout and management of Medical Surgical Units.

- 11. Appreciate the role of alternative systems of Medicine in care of patients.
- 12. Incorporate evidence based Nursing practice and identify the areas of research in the field of Medical Surgical Nursing.
- 13. Recognize the role of Nurse practitioner as a member of the Medical Surgical health team.
- 14. Teach Medical Surgical Nursing to undergraduate nursing students & in-service nurses.

COURSE CONTENT:

CO	COURSE CONTENT:				
Unit	Hours	Content			
I	5	Introduction: Historical development of Medical- Surgical Nursing in India. Current status of health and disease burden in India. Current concept of health. Trends & issues in Medical – Surgical Nursing. Ethical & cultural issues in Medical – Surgical Nursing. Rights of patients. National health policy, special laws & ordinances relating to older people. National goals. Five yearplans. National health programs related to adult health.			
П	20	Health Assessment of patients History taking. Physical examination of various systems. Nutritional assessment. Related investigations and diagnostic assessment.			
III	5	Care in hospital settings: Ambulatory care. Acute and Critical care. Long term care. Home Health Care. Characteristics, care models, practice settings, interdisciplinary team. Hospitalization- effects of hospitalization on the patient &family. Stressors & reactions related to disease process. Nursing care using Nursing process approach.			
IV	10	Management of patients with disorders of Gastro intestinal tract □ Review of anatomy and physiology. □ Common Disorders-etiology, Patho physiology, Clinical manifestations, complications, prognosis. □ Health assessment- History taking, physical examination, investigation and diagnostic assessment. □ Treatment modalities and trends. □ Nursing management. □ Related research studies. □ Evidence based nursing practice. □ Rehabilitation and follow-up.			

Unit	Hours	Content		
V	10	Management of patients with disorders of nervous system		
		 Review of anatomy and physiology. Common Disorders- etiology, Patho physiology, Clinical manifestations, complications, prognosis. Health assessment-History taking, physical examination, investigation and diagnostic assessment. Treatment modalities and trends. Nursing management. Related research studies. Evidence based nursing practice. Rehabilitation and follow-up. 		
VI	10	Management of patients with disorders of respiratory system		
		 Review of anatomy and physiology. Common Disorders- etiology, Patho physiology, Clinical manifestations, complications, prognosis. Health assessment-History taking, physical examination, investigation and diagnostic assessment. Treatment modalities and trends. Nursing management. Related research studies. Evidence based nursing practice. 		
		□ Rehabilitation and follow-up.		
VII	10	 Management of patients with disorders of cardio vascular system Review of anatomy and physiology. Common Disorders- etiology, Patho physiology, Clinical manifestations, complications, prognosis. Health assessment-History taking, physical examination, investigation and diagnostic assessment. Treatment modalities and trends. Nursing management. Related research studies. Evidence based nursing practice. Rehabilitation and follow-up. 		
VIII	5	Management of patients with disorders of blood		
		 Review of anatomy and physiology. Common Disorders- etiology, Patho physiology, Clinical manifestations, complications, prognosis. Health assessment-History taking, physical examination, investigation and diagnostic assessment. Treatment modalities and trends. Nursing management. Related research studies Evidence based nursing practice Rehabilitation and follow-up 		
IX	10	Management of patients with disorders of genito urinary system		
		 Review of anatomy and physiology. Common Disorders- etiology, Patho physiology, Clinical manifestations, complications, prognosis. 		

Unit	Hours	Content		
		☐ Health assessment-History taking, physical examination, investigation and diagnostic assessment.		
		m a later to the		
		□ Treatment modalities and trends. □ Nursing management.		
		□ Related research studies.		
		□ Evidence based nursing practice.		
		□ Rehabilitation and follow-up.		
X	10	Management of patients with disorders of endocrine system		
		□ Review of anatomy and physiology.		
		□ Common Disorders- etiology, Patho physiology, Clinical		
		manifestations, complications, prognosis.		
		□ Health assessment-History taking, physical examination,		
		investigation and diagnostic assessment.		
		□ Treatment modalities and trends.□ Nursing management.		
		□ Nursing management. □ Related research studies.		
		□ Evidence based nursing practice.		
		□ Rehabilitation and follow-up.		
XI	10	Management of patients with disorders of musculo-skeletal		
		system		
		 □ Review of anatomy and physiology. □ Common Disorders- etiology, Patho physiology, Clinical 		
		manifestations, complications, prognosis.		
		☐ Health assessment-History taking, physical examination,		
		investigation and diagnostic assessment.		
		□ Treatment modalities and trends.		
		□ Nursing management.		
		□ Related research studies.		
		□ Evidence based nursing practice.		
		□ Rehabilitation and follow-up.		
XII	8	Management of patients with disorders of integumentory system		
		 □ Review of anatomy and physiology. □ Common Disorders- etiology, Patho physiology, Clinical 		
		manifestations, complications, prognosis.		
		☐ Health assessment-History taking, physical examination,		
		investigation and diagnostic assessment.		
		□ Treatment modalities and trends.		
		□ Nursing management.		
		□ Related research studies.		
		□ Evidence based nursing practice.		
		□ Rehabilitation and follow-up.		
XIII	5	Management of patients with disorders of Eye and ENT		
		□ Review of anatomy and physiology.		
		□ Common Disorders-etiology, Patho physiology, Clinical		
		manifestations, complications, prognosis.		
		□ Health assessment-History taking, physical examination,		
		investigation and diagnostic assessment.		
		□ Treatment modalities and trends.		

Unit	Hours	Content		
		□ Nursing management.□ Related research studies.		
		Evidence based nursing practice.Rehabilitation and follow-up.		
		Renabilitation and follow-up.		
XIV	8	Management of patients with disorders of reproductivesystem		
		□ Review of anatomy and physiology.		
		□ Common Disorders- etiology, Patho physiology, Clinical		
		manifestations, complications, prognosis.		
		☐ Health assessment-History taking, physical examination,		
		investigation and diagnostic assessment.		
		☐ Treatment modalities and trends.		
		□ Nursing management.		
		Related research studies.		
		Evidence based nursing practice.		
		□ Rehabilitation and follow-up.		
XV	8	Geriatric nursing		
		□ Nursing Assessment-History and Physical assessment.		
		□ Ageing;		
		Demography; Myths andrealities.		
		Concepts and theories of ageing.		
		□ Cognitive Aspects of Ageing.		
		□ Normal biological ageing.		
		☐ Age related body systems changes.		
		Psychosocial Aspects of Aging.		
		 Medications and elderly. Stress & coping in older adults. 		
		□ Stress & coping in older adults. □ Common Health Problems & Nursing Management;		
		□ Psychosocial and Sexual.		
		□ Abuse of elderly.		
		□ Role of nurse for care of elderly: ambulation, nutritional,		
		communicational, psychosocial and spiritual.		
		□ Role of nurse for caregivers of elderly.		
		□ Role of family and formal and non formal caregivers.		
		□ Use of aids and prosthesis (hearing aids, dentures,		
		□ Legal & Ethical Issues.		
		Provisions and Programmes for elderly; privileges, Community Programs		
		and health services;		
		Home and institutional care.		
XVI	8	 ☐ Issues, problems and trends. Management of patients with communicable and sexually 		
43 7 1		transmitted diseases:		
		□ Review of immune system.		
		□ Common Disorders of immune system −HIV/AIDS.		
		Review of infectious disease process.		
		□ Communicable Diseases- etiology, Patho physiology, Clinical		
		manifestations, complications, prognosis.		
		□ Health assessment-History taking, physical examination,		
		investigation and diagnostic assessment.		
		□ Treatment modalities and trends.		

Unit	Hours	Content		
		 Nursing management. Related research studies. Evidence based nursing practice. Rehabilitation and follow-up. 		
XVII	8	Emergency, trauma and multi-system organ failure DIC (disseminated intravascular coagulation) Trauma, burns, poisoning Etiology, Patho physiology, Clinical manifestations, complications, prognosis. Health assessment-History taking, physical examination, investigation and diagnostic assessment. Treatment modalities and trends. Nursing management. Related research studies. Evidence based nursing practice. Rehabilitation and follow-up.		

Practical

Total = 660 Hours 1 Week = 30 Hours

S.No.	Dept/Unit	No. of Week	Total Hours
	General Medical Ward	4	120 Hours
	General Surgical Ward	4	120 Hours
	ICUs	4	120 Hours
	Oncology	2	60 Hours
	Ortho	2	60 Hours
	Cardio	2	60 Hours
	Emergency Department	2	60 Hours
	Neuro	2	60 Hours
	Total	22 Weeks	660 Hours

Student Activities:

- Clinical presentations
- History taking
- Health Assessment
- Nutritional Assessment
- Health Education related to disease conditions
- Case studies
- Project work
- Field visits

CLINICAL SPECIALITY-I

OBSTETRIC AND GYNAECOLOGICALNURSING

Placement: 1st year Hours of Instruction
Theory: 150 Hours.

Practical: 650 Hours. Total: 800 Hours.

Course Description

This course is designed to assist students in developing expertise and in-depth understanding in the field of Obstetric and Gynaecological Nursing. It will help students to appreciate the client as a holistic individual and develop skill to function as an independent midwifery practitioner. It will further enable the student to function as educator, manager, and researcher in the field of Obstetric and Gynaecological nursing

Objectives

At the end of the course the students will be able to:

- 1. Appreciate the trends in the field of midwifery, obstetrics and gynaecology as a speciality.
- 2. Describe the population dynamics and indicators of maternal and child health
- 3. Describe the concepts of biophysical, psychological and spiritual aspects of normal pregnancy, labor and puerperium.
- 4. Provide comprehensive nursing care to women during reproductive period and newborns.
- 5. Integrate the concepts of family centered nursing care and nursing process approach in obstetric and gynaecological nursing.
- 6. Identify and analyze the deviations from normal birth process and refer appropriately.
- 7. Describe the pharmacological agents, their effects during pregnancy, child birth, puerperium, lactation and the role of nurse
- 8. Counsel adolescents, women and families on issues pertaining to pregnancy, child birth and lactation
- 9. Describe the role of various types of complementary and alternative therapies in obstetric and gynaecological nursing.
- 10. Incorporate evidence based nursing practice and identify the areas of research in the field of obstetric and gynaecological nursing.
- 11. Describe the recent advancement in contraceptive technology and birth control measures
- 12. Appreciate the legal and ethical issues pertaining to obstetric and gynaecological nursing

Units	Hours	Content	
I	10	Introduction	
		□ Historical and contemporary perspectives	
		Epidemiological aspects of maternal and child health	
		☐ Magnitude of maternal and child health problems	
		☐ Issues of maternal and child health : Age, Gender, Sexuality, psycho Socio cultural factors	
		D. C. Leevi	
		□ Preventive obstetrics □ National health and family welfare programmes related to maternal and child	
		health: health care delivery system- National Rural health mission, Role of	
		NGO's	
		☐ Theories, models and approaches applied to midwifery practice	
		□ Role and scope of midwifery practice: Independent Nurse midwifery	
		practitioner	
		☐ Legal and Ethical issues: Code of ethics and standards of midwifery	
		practice, standing orders	
		□ Evidence based midwifery practice	
		□ Research priorities in obstetric and gynaecological nursing.	
II	15	Human reproduction	
		□ Review of anatomy and physiology of human reproductive	
		system: male and female	
		□ Hormonal cycles	
		□ Embryology	
		Genetics, teratology and counseling	
		□ Clinical implications	
III	25	Pregnancy	
		☐ Maternal adaptation : Physiological, psychosocial	
		• Assessment – Maternal and foetal measures Maternal measures:History taking , exmanination-General, physical and obstetrical measure,	
		taking , exmanination-General, physical and obstetrical measure, identification of high risk,	
		Foetal measure- clinical parameters, biochemical- human estriol,	
		Maternal Serum Alfa Feto Protein, Acetyl Choline esterase (AchE),	
		Triple Test Aminocentesis, Cordocentesis, chorionic villus sampling	
		(CVS)),	
		 Biophysical- (US IMAGING, Foetal movement count, Ultra Sonography, 	
		Cardiotocography, cardiotomography, Non Stress Test(NST),	
		Contraction stress test(CST), amnioscopy, foetoscopy,	
		 Radiological examination, Interpretation of diagnostic tests and nursing implications 	
		 Interpretation of diagnostic tests and nursing implications Nursing management of the pregnant women, minor disorders of pregnancy 	
		and management, preparation for child birth and parenthood, importance of	
		institutional delivery, choice of birth setting, importance and mobilizing of	
		transportation, prenatal counseling, role of nurse and crisis intervention,	
		identification of high risk pregnancy and refer	
		Alterial designation of the state of the sta	
		☐ Alternative/complementary therapies	

Units	Hours	Content	
IV	25	Normal Labour and nursing management:	
		Essential factors of labour	
		□ Stages and onset	
		E' at at a District of a small beautiful and	
		First stage: Physiology of normallabour	
		Use of partograph: Principles, use and critical analysis, evidence	
		based studies	
		Analgesia and anaesthesia in labour	
		Nursing management	
		Second stage	
		Physiology , intrapartum monitoringNursing management.	
		Resuscitation , immediate newborn care and initiate breast feeding	
		(Guidelines of National neonatalogy forum of India)	
		(Guidelines of Tradional neonatalogy for anii of India)	
		Third stage	
		Physiology and nursing management	
		Thysiology and naising management	
		Fourth stage – Observation, critical analysis and Nursing	
		management.	
		Various child birth practice: water birth, position change etc	
		Evidence based practice in relation to labour intervention	
		Role of nurse midwifery practitioner	
		Alternative/complementary therapies	
V	20	Normal puerperium and nursing management	
		□ Physiology of puerperium	
		□ Physiology of lactation, lactation management, exclusive breast feeding	
		,Baby friendly hospitalintitative(BFHI)	
		□ Assessment of postnatal women .	
		☐ Minor discomforts and complications of puerperium ☐ Management of mothers during puerperium: Postnatal	
		exercises Rooming in, bonding, warm chain	
		□ Evidence based studies	
		Dala of names midwiferny nasotitioner	
		Role of nurse midwifery practitionerAlternative/complementary therapies	
X7T	20	1 1	
VI	20	Normal Newborn — Physiology and characteristics of normal newborn	
		□ Physical and Behavioural assessment of newborn	
		□ Needs of newborn	
		Essential newborn care: Exclusive breast feeding, Immunization,	
		Hygiene measures, Newbornnutrition	
		□ Organization of neonatal care, services(Levels), transport, neonatal	
		intensive care unit, organization and management of nursing services in	
		NICU	
		□ Observation and care of newborn	

	□ Parenting process

Units	Hours	Content	
VII	10	Pharmoco dynamics in obstetrics Drugs used in pregnancy, labour, post partum andnewborn Calculation of drug dose and administration Effects of drugs used Anaesthesia and analgesia in obstetrics Roles and responsibilities of midwifery nurse practitioner Standing orders and protocols and use of selected life saving drugs and interventions of obstetric emergencies approved by the MOHFW	
VIII	10	Family welfare services Population dynamics Demography trends: vital statistics, calculation of indicators especially maternal and neonatal mortality rates and problems and other health problems Recent advancement in contraceptive technology Role of nurses in family welfare programmes in all settings Role of independent nurse midwiferypractitioner Family life education Evidence based studies Information, Education and Communication(IEC) Management information and evaluation system(MIES) Teaching and supervision of health team members	
IX	5	Infertility Primary and secondary causes Diagnostic procedures Counseling: ethical and legal aspects of assisted reproductive technology(ART) Recent advancement in infertility management. Adoption procedures Role of nurses in infertility management.	
X	5	Menopause Physiological, psychological and social aspects Hormone Replacement Therapy Surgical menopause Counseling and guidance Role of midwifery nurse practitioner	
XI	5	Abortion Types, causes Legislations, Clinical rights and professional responsibility Abortion procedures Complications Nursing management Role of midwifery nurse practitioner	

S.No.	Deptt./Unit	No. of Week	Total Hours
1	Anetenatal Wards & OPDs	4	120
2	Labour Room	5	150
3	Postnatal Ward	2	60
4	Family Planning Clinics	2	60
5	PHC/Rural maternity settings	4	120
6	Gynae	2	60
7	Maternity OT	2	60
8	NICU	1	30
	Total	22 Weeks	660Hours

Procedures observed

- Diagnostic investigations : amniotcentecis, chordocentecis, chorionic villi sampling
- Infertility management: artificial reproduction : artificial insemination, invitro fertilization, and related procedures

Procedures assisted

Medical termination of pregnancy,

Procedures performed

- Antenatal assessment-20
- Postnatal assessment-20
- Assessment during labour : use of partograph 20
- Per vaginal examination-20
- Conduct of normal delivery-20
- Episiotomy and suturing-10
- Setting up of delivery areas
- Insertion of intra uterine devices(copper T)

Others

- Identification of high risk women and referral
- Health education: to women and their families
- Motivation of couples for planned parenthood

CLINICAL SPECIALTY -I

CHILD HEALTH (PAEDIATRIC) NURSING

Placement : Ist Year Hours of Instruction

Theory 150 Hours Practical 650 Hours Total: 800 Hours

Course Description

This course is designed to assist students in developing expertise and in-depth understanding in the field of Pediatric Nursing. It will help students to appreciate the child as a holistic individual and develop skill to function as neonatal and pediatric nurse specialist. It will further enable the student to function as educator, manager, and researcher in the field of Paediatric nursing

Objectives

At the end of the course the students will be able to:

- 1. Appreciate the history and developments in the field of pediatrics and pediatric nursing as a specialty
- 2. Apply the concepts of growth and development in providing care to the pediatric clients and their families.
- 3. Appreciate the child as a holistic individual
- 4. Perform physical, developmental, and nutritional assessment of pediatric clients
- 5. Apply nursing process in providing nursing care to neonates & children
- 6. Integrate the concept of family centered pediatric nursing care with related areas such as genetic disorders, congenital malformations and long term illness.
- 7. Recognize and manage emergencies in neonates
- 8. Describe various recent technologies and treatment modalities in the management of high risk neonates
- 9. Appreciate the legal and ethical issues pertaining to pediatricand neonatal nursing
- 10. Prepare a design for layout and management of neonatal units
- 11. Incorporate evidence based nursing practice and identify the areas of research in the field of pediatric/neonatalnursing
- 12. Recognize the role of pediatric nurse practitioner and as a member of the pediatric and neonatal healthteam
- 13. Teach pediatric nursing to undergraduate students & in-service nurses

Course Content

Unit	Hours	Content
I	10	Introduction
		 Historical development of Pediatrics and Pediatric Nursing in India;
		□ Current status of child health in India;
		□ Trends in Pediatrics and Pediatric Nursing,
		□ Ethical and cultural issues in pediatric care
		□ Rights of children
		□ National health policy for children, special laws and
		ordinances relating to children.
		□ National goals, □ Five yearplans,
		 Five yearpians, National health programs related to childhealth.
II	10 Hrs	Assessment of pediatric clients
	10 1110	☐ History taking
		□ Developmental assessment
		□ Physical assessment
		□ Nutritional assessment
		□ Family assessment
III	10	Hospitalized child
		□ Meaning of hospitalization of the child, preparation for
		hospitalization, effects of hospitalization on the child and family
		□ Stressors and reactions related to developmental stages, play activities for
		ill hospitalized child. □ Nursing care of hospitalized child and family -principles and practices
		= 1 turising out of hospitalized office and fundament
TX 7	15	
IV	15	Pre-natal Pediatrics Embryological and fetal development, Prenatal factors influencing growth
		and development offetus,
		Genetic patterns of common pediatric disorders, chromosomal
		aberrations, genetic assessment and counseling legal and ethical aspects
		of genetic, screening and counseling role of nurse in genetic counseling,
		☐ Importance of prenatal care and role of pediatric nurse.
V	15	Growth and Development of children
		Principles of growth and development,
		 Concepts and theories of growth and development, Developmental tasks and special needs from infancy to
		adolescence, developmental milestones,
		□ Assessment of growth and development of pediatric clients,
		Factors affecting growth and development.
VI	15	Behavioral Pediatrics and Pediatric Nursing
		□ Parent child relationship,
		□ Basic behavioral pediatric principles and specific behavioral
		pediatric concepts/disorders- maternal deprivation, failure

Unit	Hours	Content	
		to thrive, child abuse, the battered child, Common behavioral problems and their management, Child guidance clinic.	
VII	15	 Preventive Pediatrics and Pediatric Nursing □ Concept, aims and scope of preventive pediatrics, □ Maternal health and its influence on child health antenatal aspects of preventive pediatrics, □ Immunization, expanded program on immunization/universal immunization program and cold chain, □ Nutrition and nutritional requirements of children, changing patterns of feeding, baby- friendly hospital initiative and exclusive breast feeding, □ Health education, nutritional education for children □ Nutritional programs □ National and international organizations related to child health, Role of pediatric nurse in the hospital and community. 	
VIII	30	 Neonatal Nursing □ New born baby- profile and characteristics of the newborn, □ Assessment of the new born, □ Nursing care of the new born at birth, care of the new born and family, □ High risk newborn- pre term and term neonate andgrowth retarded babies, □ Identification and classification of neonates with infections, HIV & AIDS, Ophthalmia neonatorum, congenital syphilis. □ High risk new born- Identification, classification and nursing management □ Organization of neonatal care, services(Levels), transport, neonatal intensive care unit, organization and management of nursing services in NICU. 	
IX	30	IMNCI (Integrated management of neonatal and childhood illnesses)	

S.No.	Deptt./Unit	No. of Week	Total Hours	
1	Pediatric Medicine Ward	4	120 Hours	
2	Pediatric Surgery Ward	4	120 Hours	
3	Labor Room/Maternity Ward	2	60 Hours	
4	Pediatric OPD	2	60 Hours	
5	NICU	4	120 Hours	
6	Creche	1	30 Hours	
7	Child Guidance Clinic	1	30 Hours	
8	Community	4	120 Hours	
	Total	22 Weeks	660 Hours	

Student Activities

- Clinical presentations
- Growth & developmental assessment
- Assessment & prescription of nursing interventions for sick children
- Health education related to disease conditions
- Nutritional assessment
- Project work
- Field visits

CLINICAL SPECIALITY - I

MENTAL HEALTH (PSYCHIATRIC) NURSING

Placement: 1st Year

Hours of Instruction
Theory 150 hours
Practical 650 hours
Total: 800hours

Course Description

This course is designed to assist students in developing expertise and in-depth understanding in the field of Psychiatric Nursing. It will help students to appreciate the client as a holistic individual and develop skill to function psychiatric nurse specialist. It will further enable the student to function as educator, manager, and researcher in the field of Psychiatric nursing

Objectives

At the end of the course the students will be able to:

- 1. Appreciate the trends and issues in the field of psychiatry and psychiatric nursing.
- 2. Explain the dynamics of personality development and human behavior.
- 3. Describe the concepts of psychobiology in mental disorders and its implications for psychiatric nursing
- 4. Demonstrate therapeutic communications skills in all interactions
- 5. Demonstrate the role of psychiatric nurse practitioner in various therapeutic modalities
- 6. Establish and maintain therapeutic relationship with individual and groups
- 7. Uses assertive techniques in personal and professional actions
- 8. Promotes self-esteem of clients, others and self
- 9. Apply the nursing process approach in caring for patients with mental disorders
- 10. Describe the psychopharmacological agents, their effects and nurses role
- 11. Recognize the role of psychiatric nurse practitioner and as a member of the psychiatric and mental health team
- 12. Describe various types of alternative system of medicines used in psychiatric settings
- 13. Incorporate evidence based nursing practice and identify the areas of research in the field of psychiatric nursing

Course Content

Units	Hours	Content
I	15	Introduction Mental Health and Mental Illness Historical perspectives Trends, issues and magnitude Contemporary practices Mental health laws/Acts National mental health program -National mental health authority, state mental health authority Human rights of mentally ill Mental Health/ Mental Illness Continuum Classification of mental illnesses-ICD, DSM Standards of Psychiatric nursing Challenges and Scope of psychiatric nursing Multi-disciplinary team and role of nurse
II	10	Role of psychiatric nurse- extended and expanded Concepts of Psychobiology The Nervous System: An Anatomical Review
		 The Brain and limbic system Nerve Tissue Autonomic Nervous system Neurotransmitters Neuroendocrinology Pituitary, Thyroid Gland Circadian Rhythms
		 □ Genetics □ Neuro psychiatric disorders □ Psychoimmunology • Normal Immune response • Implications for psychiatric Illness □ Implications for Nursing
III	10	Theories of Personality Development and relevance to nursing practice Psychoanalytic Theory- Freud's Interpersonal Theory-Sullivan's Theory of Psychosocial Development-Erikson's Theory of object relations Cognitive Development Theory Theory of Moral Development A Nursing Model-Hildegard E. Peplau
IV	5	Stress and its management An introduction to the concepts of stress Psychological Adaptation to stress Stress as a Biological Response. Stress as an Environmental Event.

Units	Hours	Content
		□ Stress as Transaction between the Individual and the
		Environment.
		□ Stress management.
V	V 10 Therapeutic communication and interpersonal relationship	
		□ Review communication process, factors affecting
		communication
		□ Communication with individuals and in groups
		□ Techniques of therapeutic communication-touch therapy
		 Barrier of communication with specific reference to psychopathology
		□ Therapeutic attitudes
		 Dynamics of a therapeutic Nurse-client relationship;
		Therapeutic use of self Gaining self-awareness
		☐ Therapeutic nurse-patient relationship its phases; Conditions essential to
		development of a therapeutic relationship
		□ Therapeutic impasse and its management
VI	10	Assertive Training
V1	10	Assertive Training Assertive Communication
		□ Basic Human Rights
		□ Response Patterns
		(Nonassertive Behavior
		Assertive Behavior
		Aggressive Behavior
		Passive-Aggressive Behavior)
		□ Behavioral Components of Assertive Behavior
		☐ Techniques that Promote Assertive Behavior
		□ Thought-Stopping Techniques Method
		Role of The Nurse
VII	10	Promoting Self-Esteem
		□ Components of Self-Concept
		☐ The Development of Self-Esteem ☐ The Manifestations of Low-Self-Esteem
		□ Boundaries
		Role of The Nurse
		Role of The Nurse
	5	Women and Mental Health
		Normal reaction to conception, pregnancy and puerperium Problems
		related to conception, pregnancy and puerperium and its management. Counselling – Premarital, marital and genetic
		- Counseling – Fremaniai, mantai and genetic

Units	Hours	Content	
VIII	10	The nursing process in psychiatric/mental health nursing	
		□ Mental health assessment- History taking, mental status examination	
		□ Physical and neurological examination	
		Psychometric assessment Investigations, Diagnosis and Differential diagnosis.	
		☐ Investigations, Diagnosis and Differential diagnosis	
		☐ Interpretation of investigations ☐ Nurse's role	
		□ Nurse's role □ Nursing case management	
		Critical pathways of care	
		□ Documentation	
		☐ Problem-oriented recording ☐	
		Focus charting	
		☐ The PIE method	
IX	35	Psycho social and physical therapies	
121		☐ Individual therapy	
		□ Behavioural Therapy- Relaxation therapy, cognitive therapy, positive-	
		negative reinforcement, bio-feedback, guided imagery, ab-reactive therapy	
		□ Group Therapy	
		☐ Family Therapy	
		☐ Milieu Therapy The Therap out is Community	
		□ The Therapeutic Community□ Occupational therapy	
		□ Recreational therapy	
		□ Play therapy	
		□ Music therapy	
		□ Light therapy	
		□ Color therapy	
		□ Aroma therapy	
XI	5	Electroconvulsive Therapy	
		□ Historical Perspectives	
		□ Indications	
		□ Contraindications	
		□ Mechanisms of Action	
		□ Side Effects	
		Risks Associated with Electroconvulsive Therapy	
		☐ The Role of The Nurse in Electroconvulsive Therapy	
X	10	Psychopharmacology	
		□ Historical Perspectives	
		□ Role of a Nurse in Psychopharmacological Therapy	
		Antianxiety Agents	
		Antidepressants Agents	
		Mood stabilizers	
		• Antipsychotics	
		Sedative-Hypnotics	
		Central Nervous System Stimulants	
		□ Future developments	

Units	Hours	Content
XII	15	Alternative systems of medicine in mental health
		□ Types of Therapies
		Herbal Medicine
		• Unani
		• Siddha
		Homeopathic
		Acupressure and Acupuncture
		Diet and Nutrition
		Chiropractic Medicine
		Therapeutic Touch and Massage
		• Yoga
		Pet Therapy

S.No.	Area of Posting	No. of Week	Total Hours
1	Acute Psychiatric Ward	4	120 Hours
2	Chronic Psychiatric ward	4	120 Hours
3	Psychiatric Emergency Unit	2	60 Hours
4	O.P.D	2	60 Hours
5	Family Psychiatric Unit	2	60 Hours
6	Community Mental Health Unit	4	120 Hours
7	Rehabilitation / Occupational Therapy	4	120 Hours
	Unit/Half way home/ Day care centre		
	Total	22 Weeks	660 Hours

Student Activities

- History taking
- Mental health assessment
- Psychometric assessment
- Personality assessment
- Process recording
- Therapies- Group Therapy
- Family Therapy
- Psychotherapy
- Milieu Therapy
- The Therapeutic Community
- Occupational therapy
- Recreational therapy
- Play therapy
- music therapy
- Pet therapy
- Counselling
- Assisted ECT
- Assisted EEG
- Case studies
- Case presentation
- Project work
- Socio and psycho drama
- Field visits

CLINICAL SPECIALITY-I

COMMUNITY HEALTH NURSING

Placement: 1st Year

Hours of Instructions
Theory 150 hours
Practical 650hours
Total 800hours

Course Description

The course is designed to assist students in developing expertise and in-depth understanding in the field of Community Health Nursing. It would help students to appreciate holistic life style of individuals, families & groups and develop skills to function as Community Health Nurse specialist/practitioner. It would further enable student to function as an educator, manager and researcher in the field of Community Health nursing.

Objectives

At the end of the course, the student will be ableto:

- 1. Appreciate the history and development in the field of Community Health and Community Health Nursing.
- 2. Appreciate role of individuals and families in promoting health of the Community.
- 3. Perform physical, developmental and nutritional assessment of individuals, families and groups.
- 4. Apply the concepts of promotive, preventive, curative and rehabilitative aspects of health while providing care to the people.
- 5. Apply nursing process approach while providing care to individuals, families, groups and community.
- 6. Integrate the concepts of family centered nursing approach while providing care to the community.
- 7. Recognize and participate in the management of emergencies, epidemics and disasters.
- 8. Apply recent technologies and care modalities while delivering community health nursing care.
- 9. Appreciate legal and ethical issues pertaining to community health nursing care.
- 10. Conduct community health nursing care projects.
- 11. Participate in planning, implementation and evaluation of various national health and family welfare programmes at local, state and the national level.
- 12. Incorporate evidence based nursing practice and identify the areas of research in the community settings.

- 13. Participate effectively as a member of Community Healthteam.
- 14. Coordinate and collaborate with various agencies operating in the community by using inter-sectoral approach.
- 15. Teach community health nursing to undergraduates, in-service nurses and the community health workers.
- 16. Demonstrate leadership and managerial abilities in community health nursing practice

Course Content

Unit	Hours	Content	
I	10	Introduction	
		Historical development of Community Health and Community health Nursing-	
		World and India, various health and family welfare committees	
		□ Current status, trends and challenges of CommunityHealth Nursing	
		☐ Health status of the Community-community diagnosis	
		□ Scope of Community health Nursing practice	
		□ Ethical and legal issues	
		□ Socio-cultural issues in Community health Nursing	
		□ National Policies, plans and programmes	
		National health policy	
		National Population policy	
		National Health and welfare Programmes	
		National Health goals/ indicators/ Millenniumdevelopmental goals(MDG)/	
		Strategies	
		Planning process: Five year plans	
		National Rural Health Mission	
		Panchayat raj institutions	
II	10	Health	
		□ Concepts, issues	
		Determinants	
		□ Measurements	
		□ Alternate systems for health promotion and management of	
		health problems	
		□ Health economics	
		□ Health technology	
		□ Genetics and health	
		□ Waste disposal	
		□ Eco system	
III	15	Population dynamics and control	
		□ Demography	
		☐ Transition and theories of population	
		□ National population policy	
		□ National population programmes	
		□ Population control and related programmes	
		□ Methods of family limiting and spacing	
		□ Research, Census, National Family Health Survey	

Unit	Hours	Content		
IV	30	Community health Nursing		
		 Philosophy, Aims, Objectives, Concepts, Scope, Principles, Functions 		
		 Community health Nursing theories and models Quality assurance: Community health Nursing standards, competencies, 		
		Monitoring community health nursing, nursing audits		
		□ Family nursing and Family centered nursing approach		
		□ Family health nursing process		
		o Family health assessment		
		DiagnosisPlanning		
		PlanningIntervention		
		o Evaluation		
		□ Nursing care for special groups: children, adolescents, adults, women, elderly,		
		physically and mentally challenged- Urban and rural population at large		
		□ Community nutrition		
		□ Concept, role and responsibilities of community health Nurse practitioners/nurse midwifery practitioners-decision making skills,		
		professionalism, legal issues		
V	45	Maternal and neonatal care		
		☐ IMNCI(Integrated Management of Neonatal And Childhood Illnesses) module		
		□ Skilled Birth Attendant (SBA)module		
VI	15	☐ Disaster nursing (INC module on Reaching out: Nursing Care in emergencies)		
		emergeneres)		
VII	10	Information, education and communication		
		☐ IEC/BCC: Principles and strategies ☐ Communication Skills		
		☐ Management information and evaluation system: Records and		
		reports		
		□ Information technology		
		□ Tele-medicine and tele-nursing		
		□ Journalism □ Mass media		
		□ Folk media		
VIII	15	Health care delivery system: Urban, rural, tribal and difficult		
, , , ,		areas		
		□ Health organization: National, State, District, CHC, PHC, Sub Centre, Village -		
		Functions, Staffing, pattern of assistance, layout, drugs, equipments and		
		supplies,Roles and Responsibilities of DPHNO		
		□ Critical review of functioning of various levels, evaluation studies,		
		recommendations and nursing perspectives		
		 □ Alternative systems of medicine □ Training and supervision of health workers 		
	<u> </u>	Training and supervision of neutral workers		

Unit	Hours	Content
		☐ Health agencies: NGO's, Rolesand functions
		□ Inter-sectoral coordination
		□ Public private partnership
		□ Challenges of health care delivery system

1 Week = 30 Hours

S.No.	Deptt./Unit	No. of Week	Total Hours
1	Sub-centre, PHC, CHC	12	360 Hours
2	District family welfare bureau	1	30 Hours
3	Urban centers	6	180 Hours
4	Field visits	3	90 Hours
	Total	22 Weeks	660 Hours

Student Activities

- Identification of community leaders and resource persons(community mapping)
- Community health survey
- Community health nursing process- individual, family and special groups and community
- Counseling
- Health education campaign, exhibition, folk media, preparation of IEC materials
- Organising and participating in special clinics/camps and national health and welfare programmes-Organise atleast one health and family welfare mela/fair (all stalls of national health and family welfare activities should be included)
- Estimation of Vital health statistics -Exercise
- Drill for disaster preparedness
- Organise atleast one in-service education to ANM's/LHV/PHN/HW
- Nutrition Exercise on nutritional assessment on dietary planning, demonstration and education for various age groups
- Filling up of Records, reports and registers maintained at SC/PHC/CHC
- Assist women in self breast examination
- Conduct antenatal examination
- Conduct vaginal examination
- Conduct deliveries
- Post natal visits
- Perform Episiotomy and suturing
- Prepare Pap smear
- Conduct Insertion/Removal of IUD
- Blood Slide preparation
- Field visits
- Maintenance of log book for various activities

NURSING RESEARCH AND STATISTICS

Placement: 1st Year Hours of Instruction
Theory 150 Hours

Practical 100 Hours Total: 250 Hours

Part-A: Nursing Research

Theory 100 Hours
Practical 50 Hours
Total: 150 Hours

Course Description:

The course is designed to assist the students to acquire an understanding of the research methodology and statistical methods as a basis for identifying research problem, planning and implementing a research plan. It will further enable the students to evaluate research studies and utilize research findings to improve quality of nursing practice, education and management.

General Objectives:

At the end of the course, the students will be able to:

- 1. Define basic research terms and concepts.
- 2. Review literature utilizing various sources
- 3. Describe research methodology
- 4. Develop a research proposal.
- 5. Conduct a research study.
- 6. Communicate research findings
- 7. Utilize research findings
- 8. Critically evaluate nursing research studies.
- 9. Write scientific paper for publication.

Content Outline

Unit	Hours		Course Content
	Theory	Practical	
I	10		 Introduction: Methods of acquiring knowledge – problem solving and scientific method. Research – Definition, characteristics, purposes, kinds of research Historical Evolution of research in nursing Basic research terms Scope of nursing research: areas, problems in nursing, health and social research Concept of evidence based practice Ethics in research Overview of Research process
П	5	5	Review of Literature Importance, purposes, sources, criteria for selection of resources and steps in reviewing literature.
III	12		Research Approaches and designs Type: Quantitative and Qualitative Historical, survey and experimental – Characteristics, types advantages and disadvantages Qualitative: Phenomenology, grounded theory, ethnography
IV	10	5	Research problem: Identification of research problem Formulation of problem statement and research objectives Definition of terms Assumptions and delimitations Identification of variables Hypothesis – definition, formulation and types.
V	5	5	 Developing theoretical/conceptual framework. Theories: Nature, characteristics, Purpose and uses Using, testing and developing conceptual framework, models and theories.
VI	6		Sampling Population and sample Factors influencing sampling Sampling techniques Sample size Probability and sampling error Problems of sampling

Unit	Hours		Course Content
	Theory	Practical	
VII	20	10	Tools and methods of Data collection: □ Concepts of data collection □ Data sources, methods/techniques quantitative and qualitative. □ Tools for data collection – types, characteristics and their development □ Validity and reliability of tools □ Procedure for data collection
VIII	5		Implementing research plan □ Pilot Study, review research plan (design)., planning for data collection, administration of tool/interventions, collection of data
IX	10	10	Analysis and interpretation of data Plan for data analysis: quantitative and qualitative Preparing data for computer analysis and presentation. Statistical analysis Interpretation of data Conclusion and generalizations Summary and discussion
X	10		Reporting and utilizing research findings: Communication of research results; oral and written Writing research report purposes, methods and style- vancouver, American Psychological Association(APA), Campbell etc Writing scientific articles for publication: purposes & style
XI	3	8	Critical analysis of research reports and articles
XII	4	7	Developing and presenting a research proposal

Activities:

- Annotated Bibliography of research reports andarticles.
- Review of literature of selected topic and reporting
- Formulation of problem statement, objective and hypothesis
- Developing theoretical/conceptual framework.
- Preparation of a sample research tool
- Analysis and interpretation of given data
- Developing and presentingresearch proposal
- Journal club presentation
- Critical evaluation of selected research studies
- Writing a scientific paper.

Method of Teaching

- Lecture-cum-discussion
- Seminar/Presentations
- Project
- Class room exercises
- Journal club

Methods of Evaluation

- Quiz, Tests (Term)
- Assignments/Term paper
- Presentations
- Project work

Internal Assessment

Techniques	Weightage (15marks)
Term Test(2 tests)	40%
Assignment	20%
Presentation	20%
Project work	20%
Total	100%

Part -B: Statistics

Hours of Instruction Theory 50 Hours Practical 50 Hours Total: 100Hours

Course Description

At the end of the course, the students will be able to develop an understanding of the statistical methods and apply them in conducting research studies in nursing.

General Objectives

At the end of the course the students will be able to:

- 1. Explain the basic concepts related to statistics
- 2. Describe the scope of statistics in health and nursing
- 3. Organize, tabulate and present data meaningfully.
- 4. Use descriptive and inferential statistics to predictresults.
- 5. Draw conclusions of the study and predict statistical significance of the results.
- 6. Describe vital health statistics and their use in health related research.
- 7. Use statistical packages for data analysis

Unit	Hours		Course Content	
	Theory	Practical		
I	7	4	 Introduction: Concepts, types, significance and scope of statistics, meaning of data, sample, parameter type and levels of data and their measurement Organization and presentation of data – Tabulation of data; Frequency distribution Graphical and tabular presentations. 	
II	4	4	Measures of central tendency: □ Mean, Median, Mode	
III	4	5	Measures of variability; □ Range, Percentiles, average deviation, quartile deviation, standard deviation	
IV	3	2	Normal Distribution: □ Probability, characteristics and application of normal probability curve; sampling error.	

Unit	Hours		Course Content
	Theory	Practical	
V	6	8	Measures of relationship: Correlation – need andmeaning Rank order correlation; Scatter diagram method Product moment correlation Simple linear regression analysis and prediction.
VI	5	2	Designs and meaning: □ Experimental designs □ Comparison in pairs, randomized block design, Latin squares.
VII	8	10	 Significance of Statistic and Significance of difference between two Statistics (Testing hypothesis) Non parametric test – Chi-square test, Sign, median test, Mann Whitney test. Parametric test – 't' test, ANOVA, MANOVA, ANCOVA
VIII	5	5	Use of statistical methods in psychology and education: □ Scaling – Z Score, Z Scaling □ Standard Score and T Score □ Reliability of test Scores: test-retest method, parallel forms, split half method.
IX	4	2	Application of statistics in health: Ratios, Rates, Trends Vital health statistics – Birth and death rates. Measures related to fertility, morbidity and mortality
X	4	8	Use of Computers for data analysis ☐ Use of statistical package.

Activities

- Exercises on organization and tabulation of data,
- Graphical and tabular presentation of data
- Calculation of descriptive and inferential statistics(chi square,t-test, correlation)
- Practice in using statistical package
- Computing vital health statistics

Methods of Teaching:

- Lecture-cum-discussion
- Demonstration on data organization, tabulation, calculation of statistics, use of statistical package, Classroom exercises, organization and tabulation of data,

• Computing Descriptive and inferential statistics; vital and health statistics and use of computer for data entry and analysis using statistical package.

Methods of Evaluation

• Test, Classroom statistical exercises.

Internal Assessment

Techniques

Weightage 10 marks

Test – (2 tests)

100%

NURSING MANAGEMENT

Placement: II Year

Hours of Instruction Theory 150 Hours Practical 150 Hours Total: 300 Hours

Course Description

This course is designed to assist students to develop a broad understanding of Principles, concepts, trends and issues related to nursing management. Further, it would provide opportunity to students to understand, appreciate and acquire skills in planning, supervision and management of nursing services at different levels to provide quality nursing services.

Objectives

At the end of the course, students will be able to:

- 1. Describe the philosophy and objectives of the health care institutions at various levels.
- 2. Identify trends and issues in nursing
- 3. Discuss the public administration, health care administration vis a vis nursing administration
- 4. Describe the principles of administration applied to nursing
- 5. Explain the organization of health and nursing services at the various levels/institutions.
- 6. Collaborate and co-ordinate with various agencies by using multi- sectoral approach
- 7. Discuss the planning, supervision and management of nursing workforce for various health care settings.
- 8. Discuss various collaborative models between nursing education and nursing service to improve the quality of nursingcare
- 9. Identify and analyse legal and ethical issues in nursing administration
- 10. Describe the process of quality assurance in nursing services.
- 11. Demonstrate leadership in nursing at various levels

Course Content

Unit	Hours	Content		
I	10	 Introduction □ Philosophy, purpose, elements, principles and scope of administration □ Indian Constitution, Indian Administrative system vis a vis health care delivery system: National, State and Local □ Organisation and functions of nursing services and education at National, State, District and institutions: Hospital and Community □ Planning process: Five year plans, Various Committee Reports on health, State and National Health policies, national population policy, national policy on AYUSH and 		
II	10	plans, Management		
		 Functions of administration Planning and control Co-ordination and delegation Decision making – decentralization basic goals of decentralization. Concept of management Nursing management Concept, types, principles and techniques Vision and Mission Statements Philosophy, aims and objective Current trends and issues in Nursing Administration Theories and models 		
		Application to nursing service and education		
III	15	Planning Planning process: Concept, Principles, Institutional policies Mission, philosophy, objectives, Strategic planning Operational plans Management plans Programme evaluation and review technique(PERT), Gantt chart, Management by objectives(MBO) Planning new venture Planning for change Innovations in nursing Application to nursing service and education		
IV	15	Organisation □ Concept , principles, objectives, Types and theories, Minimum requirements for organisation, Developing an organizational Structure, levels, organizational Effectiveness andorganizational Climate, □ Organising nursing services and patient care: Methods of patient assignment-Advantages and disadvantages, primary nursing care, □ Planning and Organising: hospital, unit and ancillary services(specifically central sterile supply department, laundry, kitchen, laboratory services, emergency etc)		

Unit	Hours	Content
		☐ Disaster management: plan, resources, drill, etc Application to nursing service and education
V	15	Human Resource for health Staffing Philosophy Norms: Staff inspection unit(SIU), Bajaj Committee, High power committee, Indian nursing council (INC) Estimation of nursing staff requirement- activity analysis Various research studies Recruitment: credentialing, selection, placement, promotion Retention Personnel policies Termination Staff development programme
		 Start development programme Duties and responsibilities of various category of nursing personnel Applications to nursing service and education
VI	15	 □ Roles and functions □ Motivation: Intrinsic, extrinsic, Creating motivating climate, ■ Motivational theories □ Communication: process, types, strategies, Interpersonal communication, channels, barriers, problems, Confidentiality, Public relations □ Delegation; common delegationerrors □ Managing conflict: process, management, negotiation, consensus □ Collective bargaining: health care labour laws, unions, professional associations, role of nurse manager □ Occupational health and safety Application to nursing service and education
VII	10	Material management Concepts, principles and procedures Planning and procurement procedures: Specifications ABC analysis, VED (very important and essential daily use) analysis Planning equipments and supplies for nursing care: unit and hospital Inventory control Condemnation Application to nursing service and education

VIII	15	Controlling	
		□ Quality assurance – Continuous Quality Improvement	
		Standards	
		• Models	
		Nursing audit	

Unit	Hours	Content
		 Performance appraisal: Tools, confidential reports, formats, Management, interviews Supervision and management: concepts and principles Discipline: service rules, self discipline, constructive versus destructive discipline, problem employees, disciplinary proceedings- enquiry etc Self evaluation or peer evaluation, patient satisfaction, utilization review
		Application to nursing service and education
IX	15	Fiscal planning Steps Plan and non-plan, zero budgeting, mid-term appraisal, capital and revenue Budget estimate, revised estimate, performance budget Audit Cost effectiveness Cost accounting Critical pathways Health care reforms Health economics Health insurance Budgeting for various units and levels Application to nursing service and education
X	10	Nursing informatics
VI	10	 □ Trends □ General purpose □ Use of computers in hospital and community □ Patient record system □ Nursing records and reports □ Management information and evaluation system(MIES) □ E- nursing, Telemedicine, telenursing □ Electronic medical records
XI	10	Leadership Concepts, Types, Theories Styles Manager behaviour Leader behaviour Effective leader: Characteristics, skills Group dynamics Power and politics lobbying Critical thinking and decision making Stress management Applications to nursing service and education

Unit	Hours	Content
XII	10	Legal and ethical issues
		Laws and ethics
		□ Ethical committee
		□ Code of ethics and professional conduct
		□ Legal system: Types of law, tort law, and liabilities
		□ Legal issues in nursing: negligence, malpractice, invasion of privacy, defamation of
		character
		□ Patient care issues, management issues, employmentissues
		□ Medico legalissues
		□ Nursing regulatory mechanisms: licensure, renewal, accreditation
		□ Patients rights, Consumer protection act(CPA)
		□ Rights of special groups: children, women, HIV, handicap, ageing
		□ Professional responsibility and accountability
		□ Infection control
		□ Standard safety measures

PRACTICALS

- 1. Prepare prototype personal files for staff nurses, faculty and cumulative records
- 2. Preparation of budget estimate, Revised estimate and performance budget
- 3. Plan and conduct staff development programme
- 4. Preparation of Organisation Chart
- 5. Developing nursing standards/protocols for various units
- 6. Design a layout plan for speciality units /hospital, community and educational institutions
- 7. Preparation of job description of various categories of nursing personnel
- 8. Prepare a list of equipments and supplies for specialityunits
- 9. Assess and prepare staffing requirement for hospitals, community and educational institutions
- 10. Plan of action for recruitment process
- 11. Prepare a vision and mission statement for hospital, community and educational institutions
- 12. Prepare a plan of action for performance appraisal
- 13. Identify the problems of the speciality units and develop plan of action by using problem solving approach
- 14. Plan a duty roster for speciality units/hospital, community and educational institutions
- 15. Prepare: anecdotes, incident reports, day and night reports, handing and taking over reports, enquiry reports, nurses notes, Official letters, curriculum vitae, presentations etc

- 16. Prepare a plan for disaster management
- 17. Group work
- 18. Field appraisal report

CLINICAL SPECIALITY - II MEDICAL

SURGICAL NURSING

SUB SPECIALITY - CARDIO VASCULAR AND THORACIC NURSING

Placement : II year Hours of Instruction
Theory : 150 hours.

Practical: 950 hours. Total: 1100hours.

Course Description

This course is designed to assist students in developing expertise and in-depth understanding in the field of cardiovascular and thoracic nursing. It will help students to develop advanced skills for nursing intervention in various cardio medical and surgical conditions. It will enable the student to function as Cardio vascular and Thoracic Nurse practitioner/specialist. It will further enable the student to function as educator, manager and researcher in the field of cardio vascular and thoracic nursing.

Objectives

At the end of the course the students will be able to:

- 1. Appreciate trends and issues related to cardio vascular and thoracic Nursing.
- 2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of cardio vascular and thoracic conditions
- 3. Participate in national health programs for health promotion, prevention and rehabilitation of patients with cardio vascular and thoracic conditions
- 4. Perform physical, psychosocial & spiritual assessment
- 5. Assist in various diagnostic, therapeutic and surgical procedures
- 6. Apply nursing process in providing comprehensive care to patients with cardio vascular and thoracic conditions
- 7. Demonstrate advance skills/competence in managing patients with cardio vascular and thoracic conditions including Advance Cardiac Life Support.
- 8. Describe the various drugs used in cardio vascular and thoracic conditions and nurses responsibility
- 9. Demonstrate skill in handling various equipments/gadgets used for critical care of cardio vascular and thoracic patients
- 10. Appreciate team work & coordinate activities related to patient care.
- 11. Practice infection control measures.
- 12. Identify emergencies and complications & take appropriate measures

- 13. Discuss the legal and ethical issues in cardio vascular and thoracic nursing
- 14. Assist patients and their family to cope with emotional distress, grief, anxiety and spiritual needs.
- 15. Appreciate the role of alternative system of medicine in care of patient
- 16. Incorporate evidence based nursing practice and identify the areas of research in the field of cardio vascular and thoracic nursing
- 17. Identify the sources of stress and manage burnout syndrome among health care providers.
- 18. Teach and supervise nurses and allied health workers.
- 19. Design a layout of ICCU and ICTU and develop standards for cardio vascular and thoracic nursing practice.

Content Outline

Unit	Hours	Content
I	5	Introduction
		☐ Historical development, trends and issues in the field of cardiology.
		□ Cardio vascular and thoracic conditions – major healthproblem.
		□ Concepts, principles and nursing perspectives
		□ Ethical and legal issues
		Evidence based nursing and its application in cardio vascular and thoracic
		nursing(to be incorporated in all the units)
II	5	Epidemiology
		Risk factors: hereditary, psycho social factors, hypertension,
		smoking, obesity, diabetes mellitusetc
		□ Health promotion, disease prevention, Life style modification
		□ National health programs related to cardio vascular and thoracic conditions
		□ Alternate system of medicine
		□ Complementary therapies
III	5	Review of anatomy and physiology of cardio vascular and
		respiratory system
		□ Review of anatomy and physiology of heart, lung, thoracic cavity and blood
		vessels. Embryology of heart and lung.
		□ Coronary circulation
		□ Hemodynamics and electro physiologyof heart.
		□ Bio-chemistry of blood in relation to cardio pulmonary function.
IV	20	Assessment and Diagnostic Measures:
		□ History taking
		□ Physical assessment
		Heart rate variability: Mechanisms, measurements, pattern, factors,
		impact of interventions on HRV
		□ Diagnostic tests
		Hemodynamic monitoring: Technical aspects, monitoring,
		functional hemodynamic indices, ventricular function indices,

Unit	Hours	Content
		output measurements (Arterial and swan Ganz monitoring).
		Blood gases and its significance, oxygen supply and demand
		Radiologic examination of the chest: interpretation, chest film findings
		• Electro cardiography(ECG): electrical conduction through the heart, basic
		electrocardiography, 12 lead electrocardiogram, axis determination
		- ECG changes in: intraventricular conduction abnormalities- Arrhythmias, ischemia, injury and infarction, atrial and ventricular enlargement, electrolyte imbalance,
		• Echocardiography: technical aspects, special techniques, echocardiography of cardiac structures in health and disease, newer techniques
		Nuclear and other imaging studies of the heart: Magnetic Resonance Imaging.
		 Cardio electrophysiology procedures: diagnostic studies, interventional and catheter ablation, nursing care
		• Exercise testing: indications and objectives, safety and personnel, pretest
		considerations, selection, interpretation, test termination, recovery period
		• Cardiac catheterization: indications, contraindications, patient preparation, procedure, interpretation of data
		Pulmonary function test: Bronchoscopy and graphies
		Interpretation of diagnostic measures
		Nurse's role in diagnostic tests
		□ Laboratory tests using blood: Blood specimen collection, Cardiac markers,
		Blood lipids, Hematologic studies, Blood cultures, Coagulation studies,
		Arterial blood gases, Blood Chemistries, cardiac enzyme studies, Serum
		Concentration of Selected drugs.
		□ Interpretation and role of nurse
V	25	Cardiac disorders and nursing management: □ Etiology, clinical manifestations, diagnosis, prognosis, related
		 Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, treatment modalities and nursing management of:
		Hypertension
		Coronary Artery Disease.Angina of various types.
		Cardiomegaly
		Myocardial Infarction, Congestive cardiac failure
		 Heart Failure, Pulmonary Edema, Shock. Rheumatic heart disease and other Valvular Diseases
		Inflammatory Heart Diseases, Infective Endocarditis,
		Myocarditis, Pericarditis.
		 Cardiomyopathy, dilated, restrictive, hypertrophic.
		Arrhythmias, heart block
		Associated illnesses
	L	

Unit	Hours	Content
VI	10	Altered pulmonary conditions
		□ Etiology, clinical manifestations, diagnosis, prognosis, related
		pathophysiology, treatment modalities and nursing management of:
		• Bronchitis
		Bronchial asthma
		Bronchiectasis
		• Pneumonias
		Lung abscess, lung tumour
		 Pulmonary tuberculosis, fibrosis, pneumoconiosis etc
		Pleuritis, effusion
		Pneumo, haemo and pyothorax
		Interstitial Lung Disease
		Cystic fibrosis
		Acute and Chronic obstructive pulmonary disease (conditions leading to)
		Cor pulmonale
		Acute respiratory failure
		Adult respiratory distress syndrome
		Pulmonary embolism
		Pulmonary Hypertension
	10	
VII	10	Vascular disorders and nursing management □ Etiology, clinical manifestations, diagnosis, prognosis, related
		pathophysiology, treatment modalities and nursing management of:
		Disorders of arteriesDisorders of the aorta
		• Aortic Aneurysms,
		Aortic dissection
		• Raynaud's phenomenon
		Peripheral arterial disease of the lower extremities Venevus through acids
		• Venous thrombosis
		• Varicose veins
		Chronic venous insufficiency and venous legulcers
X/111	10	Pulmonary embolism Cardia the main amount in the manner of the man
VIII	10	Cardio thoracic emergency interventions □ CPR- BLS and ALS
		☐ Use of ventilator, defibrillator, pacemaker
		□ Post resuscitation care.
		□ Care of the critically ill patients
		Psychosocial and spiritual aspects of care
		□ Stress management; ICUpsychosis
		□ Role of nurse
IX	10	Nursing care of a patient with obstructive airway
1/1	10	Assessment
		□ Use of artificial airway
		□ Endotracheal intubation, tracheostomy and its care
		□ Complication, minimum cuff leak, securing tubes
		Oxygen delivery systems.
		□ Nasal Cannula

Unit	Hours	Content
		 □ Oxygen mask, Venturi mask □ Partial rebreathing bag □ Bi-PAP and C-PAP masks □ Uses, advantages, disadvantages, nursing implications of each. Mechanical Ventilation □ Principles of mechanical ventilation
		 Types of mechanical ventilation and ventilators. Modes of ventilation, advantage, disadvantage, complications. PEEP therapy, indications, physiology, and complications. Weaning off the ventilator. Nursing assessment and interventions of ventilated patient.
X	10	 Congenital Heart Diseases, Etiology, clinical manifestations, diagnois, prognosis, related pathophysiology, treatment modalities and nursing managementof: Embryological development of heart. Classification – cyanotic and acyanotic heart disease. Tetralogy of Fallots. Atrial Septal Defect, Ventricular Septal Defect., Eisenmenger's complex. Patent ductus arteriosus, AP window Truncus Arteriosus. Transposition of great arteries. Total Anomaly of Pulmonary Venous Connection. Pulmonary stenosis, atresia. Coarctation of aorta. Ebstein's anomaly Double outlet right ventricle, Single ventricle, Hypoplastic left heart syndrome.
XI	10	Pharmacology Review Pharmacokinetics Analgesics/Anti inflammatory agents Antibiotics, antiseptics Drug reaction & toxicity Drugs used in cardiac emergencies Blood and blood components Antithrombolytic agents Inotropic agents Beta-blocking agents Calcium channel blockers. Vaso constrictors Vaso dilators ACE inhibitors. ACE inhibitors. Anticoagulents Antiarrhythmic drugs. Anti hypertensives Diuretics Sedatives and tranquilizers.

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Unit	Hours	Content	
		Antilipemics	
		□ Principles of drug administration, role and responsibilities of nurses and care of	
		drugs	
XII	20	Nursing Care of patient undergoing cardio thoracic surgery	
		□ Indications, selection of patient	
		 Preoperative assessment and preparation; counselling. Intraoperative care: Principles of open heart surgery, equipment, anaesthesia, 	
		cardiopulmonary by pass.	
		□ Surgical procedures for Coronary Artery Bypass Grafting, recent advances and	
		types of grafts, Valve replacement or reconstruction, cardiac transplant, Palliative	
		surgery and different Stents, vascular surgery, other recent advances.	
		☐ Thoracic surgery: lobectomy, pneumonectomy, tumour excisionetc	
		☐ Immediate postoperative care : assessment, post operative problems and	
		interventions: Bleeding, Cardiac tamponade, Low cardiac output, Infarction,	
		Pericardial effusion, Pleural effusion, Pneumothorax, Haemothorax, Coagulopathy,	
		Thermal imbalance, Inadequate., ventilation/perfusion, Neurological problems,	
		renal problems, Psychological problems.	
		□ Chest physiotherapy	
		□ Nursing interventions- life style modification, complementary	
		therapy/alternative systems of medicine.	
		☐ Intermediate and late post operative care after CABG, valve surgery, others.	
		Follow up care	
		Tollow up care	
XIII	5	Cardiac rehabilitation	
2411	Č	□ Process	
		□ Physical evaluation	
		□ Life style modification	
		□ Physical conditioning for cardiovascular efficiency through exercise	
		□ Counseling	
		□ Follow up care	
X/1X/			
XIV	5	Intensive Coronary Care Unit/intensive cardio thoracic unit: — Quality assurance	
		 Quality assurance Standards, Protocols, Policies, Procedures 	
		Infection control; Standard safety measures Nursing audit	
		Nursing auditDesign of ICCU/ICTU	
		Staffing; cardiac team	
		Burn out syndrome	
		□ Nurse's role in the management of I.C.C.U and ICTU.	
		Mobile coronary care unit. Planning inservice adjustional programme and teaching.	
		□ Planning inservice educational programme and teaching	

Total – 960 Hours 1 Weeks = 30 Hours

S.No.	Deptt/ Unit	No. of Week	Total Hours
1	Cardio thoracic -Medical	4	120 Hours
	-Surgical	4	120 Hours
2.	OTs (Cardiac and thoracic)	4	120 Hours
3.	Casualty	2	60 Hours
4.	Diagnostic labs including cath lab	2	60 Hours
5.	ICCU	4	120 Hours
6.	ICU	4	120 Hours
7.	CCU	4	120 Hours
8.	Paediatric Intensive	2	60 Hours
9.	OPD	2	60 Hours
	Total	32 Weeks	960 Hours

Essential Nursing Skills

Procedures Observed

- 1. Echo cardiogram
- 2. Ultrasound
- 3. Monitoring JVP, CVP
- 4. CT SCAN
- 5. MRI
- 6. Pet SCAN
- 7. Angiography
- 8. Cardiac cathetrisation
- 9. Angioplasty
- 10. Various Surgeries
- 11. Any other

I. Procedures Assisted

- 1. Arterial blood gas analysis
- 2. Thoracentesis
- 3. Lung biopsy
- 4. Computer assisted tomography (CAT Scan)
- 5. M.R.I.
- 6. Pulmonary angiography
- 7. Bronchoscopy
- 8. Pulmonary function test
- 9. ET tube insertion
- 10. Tracheostomy tube insertion
- 11. Cardiac catheterisation
- 12. Angiogram
- 13. Defibrillation
- 14. Treadmill test

- 15. Echo cardiography
- 16. Doppler ultrasound
- 17. Cardiac surgery
- 18. Insertion of chest tube
- 19. CVP Monitoring
- 20. Measuring pulmonary artery pressure by Swan-Ganz Catheter
- 21. Cardiac Pacing

II. Procedures Performed

- 1. Preparation of assessment tool for CT client (Cardiac, thoracic and vascular).
- 2. ECG Recording, Reading, Identification of abnormalities
- 3. Oxygen therapy Cylinder, central supply,

Catheter, nasal canula, mask, tent Through ET and Tracheostomy tube Manual resuscitation bag

- 4. Mechanical ventilation
- 5. Spirometer
- 6. Tuberculen skin test
- 7. Aerosal therapy
- 8. Nebulizer therapy
- 9. Water seal drainage
- 10. Chest physiotheray including Breathing Exercises Coughing Exercises

Percussion & Vibration

- 11. Suctioning Oropharyngeal, nasotracheal, Endotrachieal Through tracheostomy tube
- 12. Artificial airway cuff maintenance
- 13. CPR
- 14. Care of client on ventilator
- 15. Identification of different Arrhythmias Abnormal

pulses, respirations

B.P. Variation

Heart sounds

Breath sounds

- 16. Pulse oxymetry
- 17. Introduction of intracath
- 18. Bolus I.V. Injection
- 19. Life line
- 20. Maintenance of "Heplock"
- 21. Subcutaneous of Heparin
- 22. Obtaining leg measurements to detect early swellingin thrombophlebetes
- 23. Identification of Homans signs
- 24. Buergen Allenexercises

CLINICAL SPECIALITY - II

MEDICAL SURGICAL NURSING - CRITICAL CARE NURSING

Placement: II Year

Hours of instruction Theory: 150 hours Practical: 950 hours Total: 1100hours

Course Description

This course is designed to assist students in developing expertise and in- depth knowledge in the field of Critical care Nursing. It will help students to develop advanced skills for nursing intervention in caring for critically ill patients. It will enable the student to function as critical care nurse practitioner/ specialist. It will further enable the student to function as educator, manager and researcher in the field of Critical Care Nursing.

Objectives

At the end of the course the students will be able to

- 1. Appreciate trends and issues related to Critical Care Nursing.
- 2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of critically ill patients
- 3. Describe the various drugs used in critical care and nurses responsibility
- 4. Perform physical, psychosocial & spiritual assessment
- 5. Demonstrate advance skills/competence in managing critically ill patients including Advance Cardiac Life Support.
- 6. Demonstrate skill in handling various equipments/gadgets used for critical care
- 7. Provide comprehensive care to critically illipatients.
- 8. Appreciate team work & coordinate activities related to patient care.
- 9. Practice infection control measures.
- 10. Assess and manage pain.
- 11. Identify complications & take appropriate measures.
- 12. Discuss the legal and ethical issues in critical care nursing
- 13. Assist patients and their family to cope with emotional distress, spiritual, grief and anxiety
- 14. Assist in various diagnostic, therapeutic and surgical procedures
- 15. Incorporate evidence based nursing practice and identify the areas of research in the field of critical care nursing

- 16. Identify the sources of stress and manage burnout syndrome among health care providers.
- 17. Teach and supervise nurses and allied health workers.
- 18. Design a layout of ICU and develop standards for critical care nursing practice.

Course Content

Unit	Hours	Content
I	5	 Introduction to Critical Care Nursing □ Historical review- Progressive patient care(PPC) □ Review of anatomy and physiology of vital organs, fluid and electrolyte balance □ Concepts of critical care nursing □ Principles of critical care nursing □ Scope of critical care nursing □ Critical care unit set up including equipments supplies, use and care of various type of monitors & ventilators □ Flow sheets
П	10	 Concept of Holistic care applied to critical care nursing practice Impact of critical care environment on patients:- Risk factors, Assessment of patients, Critical care psychosis, prevention & nursing care for patients affected with psychophysiological & psychosocial problems of critical care unit, Caring for the patient's family, family teaching The dynamics of healing in critical care unit:-therapeutic touch, Relaxation, Music therapy, Guided Imagery, acupressure Stress and burnout syndrome among health teammembers
III	14	Review Pharmacokinetics Analgesics/Anti inflammatory agents Antibiotics, antiseptics Drug reaction & toxicity Drugs used in critical care unit (inclusive of ionotropic, life saving drugs) Drugs used in various body systems IV fluids and electrolytes Blood and blood components Principles of drug administration, role of nurses and care of drugs
IV	5	Pain Management □ Pain & Sedation in Critically ill patients □ Theories of pain, Types of pain, Pain assessment, Systemic responses to pain □ pain management-pharmacological and non-pharmacological measures □ Placebo effect

Unit	Hours	Content
V	5	Infection control in intensive care unit □ Nosocomial infection in intensive care unit; methyl resistant staphylococcus aureus (MRSA), Disinfection, Sterilization, Standard safety measures, Prophylaxis for staff
VI	10	Gastrointestinal System Causes, Pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: Medical, Surgical and Nursing management of:-Acute Gastrointestinal Bleeding, Abdominal injury, Hepatic Disorders:-Fulminent hepatic failure, Hepatic encephalopathy, Acute Pancreatitis, Acute intestinal obstruction, perforative peritonitis
VII	10	Renal System Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: Medical, Surgical and Nursing management of:-Acute Renal Failure, Chronic Renal Failure, Acute tubular necrosis, Bladder trauma Management Modalities: Hemodialysis, Peritoneal Dialysis, Continuous Ambulatory Peritoneal Dialysis, Continuous arterio venus hemodialysis, Renal Transplant,
VIII	10	Nervous System □ Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: Medical, Surgical and Nursing management of:-Common Neurological Disorders:-Cerebrovascular disease, Cerebrovascular accident, Seizure disorders, GuilleinBarre-Syndrome, Myasthenia Gravis, Coma, Persistent vegetative state, Encephalopathy, Head injury, Spinal Cordinjury □ Management Modalities: Assessment of Intracranial pressure, Management of intracranial hypertension, Craniotomy □ Problems associated with neurological disorders: Thermo regulation, Unconsciousness, Herniation syndrome
IX	5	Endocrine System □ Causes, Pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: Medical, Surgical and Nursing Management of :-Hypoglycemia, Diabetic Ketoacidosis, Thyroid crisis, Myxoedema, Adrenal crisis, Syndrome of Inappropriate/ hypersecretion of Antidiuretic Hormone (SIADH)
X	15	 Management of other Emergency Conditions □ Mechanism of injury, Thoracic injuries, Abdominal injuries, pelvic fractures, complications of trauma, Head injuries □ Shock: Shock syndrome, Hypovolemic, Cardiogenic, Anaphylactic, Neurogenic and Septicshock □ Systemic inflammatory Response: The inflammatory response, Multiple organ dysfunction syndrome □ Disseminated Intravascular Coagulation □ Drug Overdose and Poisoning, □ Acquired Immunodeficiency Syndrome (AIDS)

Unit	Hours	Content
		 □ Ophthalmic: Eye injuries, Glaucoma, retinal detachment □ Ear Nose Throat: Foreign bodies, stridor, bleeding, quincy, acute allergic conditions □ Psychiatric emergencies;, suicide, □ crisis intervention
XI	20	Cardiovascular emergencies Principles of Nursing in caring for patient's with Cardiovascular disorders Assessment: Cardiovascular system: Heart sounds, Diagnostic studies:- Cardiac enzymes studies, Electrocardiographic monitoring, Holter monitoring, Stress test. Echo cardiography, Coronary angiography, Nuclear medicinestudies Causes, Pathophysiology, Clinical types, Clinical features, Diagnostic Prognosis, Management: Medical, Surgical & Nurisng management of:-Hypertensive crisis, Coronary artery disease, Acute Myocardial infarction, Cardiomyopathy, Deep vein thrombosis, Valvular diseases, Heart block, Cardiac arrhythmias & conduction disturbances, Aneurysms, Endocarditis, Heart failure Cardio pulmonary resuscitation BCLS/ ACLS Management Modalities: Thrombolytic therapy, Pacemaker – temporary & permanent, Percutaneous transluminal coronary angioplasty, Cardioversion, Intra Aortic Balloon pump monitoring, Defibrillations, Cardiac surgeries, Coronary Artery Bypass Grafts (CABG/MICAS), Valvular surgeries, Heart Transplantation, Autologous blood transfusion, Radiofrequency Catheter Ablation
XII	15	Respiratory System Acid-base balance & imbalance Assesment: History & Physical Examination Diagnostic Tests:Pulse Oximetry, End —Tidal Carbon Dioxide Monitoring, Arterial blood gas studies, chest radiography, pulmonary Angiography, Bronchoscopy, Pulmonary function Test, Ventilation perfusion scan, Lung ventilation scan Causes Pathophysiology, Clinical types, Clinical features, Prognosis, Management: Medical, Surgical and Nursing management of Common pulmonary disorders:-Pneumonia, Status asthmaticus, interstitial drug disease, Pleural effusion, Chronic obstructive pulmonary disease, Pulmonary tuberculosis, Pulmonary edema, Atelectasis, Pulmonary embolism, Acute respiratory failure, Acute respiratory distress syndrome (ARDS), Chest Trauma Haemothorax, Pneumothorax Management Modalities:-Airway Management Ventilatory Management:-Invasive, non- invasive, long term mechanical ventilations Bronchial Hygiene:-Nebulization, deep breathing exercise, chest physiotherapy, postural drainage, Inter Costal Drainage, Thoracic surgeries

Unit	Hours	Content	
XIII	7	Burns Clinical types, classification, pathophysiology, clinical features, assessment, diagnosis, prognosis, Management: Medical, Surgical & Nursing management of burns Fluid and electrolyte therapy – calculation of fluids and its administration Pain management Wound care Infection control Prevention and management of burn complications Grafts and flaps Reconstructive surgery Rehabilitation	
XIV	5	Obstetrical Emergencies □ Causes, Pathophysiology, Clinical types, clinical features, diagnostic Prognosis, Management: Medical, Surgical and Nursing management of :Antepartum haemorrhage, Preeclampsia, eclampsia, Obstructed labour and ruptured uterus, Post partum haemorrhage, Peurperal sepsis, Obstetricalshock	
XV	10	 Neonatal Paediatric emergencies □ Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and Nursing management of • Neonatal emergencies □ Asphyxia Neonatarum, Pathological Jaundice in Neonates, Neonatal seizures, Metabolic disorders, Intra cranial Hemorrhage, Neonatal Sepsis, RDS/HMD (Respiratory Distress Syndrome/Hyaline Membrane Disease), Congenital disorders:- • Cyanotic heart disease, tracheo oesophageal fistula, congenital hypertropic pyloric stenosis, imperforateanus • Pediatric emergencies □ Dehydration, Acute broncho pneumonia, Acute respiratory distress syndrome, Poisoning, Foreign bodies, seizures, traumas, Status asthmaticus 	
XVI	2	Legal and ethical issues in critical care-Nurse's role Brain death Organ donation & Counselling Do Not Resuscitate(DNR) Euthanasia Living will	
XVII	2	Quality assurance Standards, Protocols, Policies, Procedures Infection control; Standard safety measures Nursing audit Staffing Design of ICU/CCU	

S.No.	Deptt./Unit	No. of Week	Total Hours
3	Burns ICU	2	60 Hours
5	Medical ICU	8	240 Hours
6	Surgical ICU	12	360 Hours
9	CCU	2	60 Hours
10	Emergency Department	3	90 Hours
12	Dialysis Unit	1	30 Hours
13	Transplant Room	2	60 Hours
14	Paediatric/ NICU	2	60 Hours
	Total	32 Weeks	960 Hours

ESSENTIAL CRITICAL CARE NURSING SKILLS

I. Procedures Observed

- 1. CT Scan
- 2. MRI
- 3. EEG
- 4. Hemodialysis
- 5. Endoscopic Retrograde cholangio Pancreaticogram(ERCP)
- 6. Heart/ Neuro/GI./ Renal Surgeries

II. Procedures Assisted

- 1. Advanced life support system
- 2. Basic cardiac life support
- 3. Arterial line/arterial pressure monitoring/bloodtaking
- 4. Arterial blood gas
- 5. ECG recording
- 6. Blood transfusion
- 7. IV cannulation therapy
- 8. Arterial Catheterization
- 9. Chest tube insertion
- 10. Endotracheal intubations
- 11. Ventilation

- 12. Insertion of central line/cvp line
- 13. Connecting lines fordialysis

III. Procedure Performed

- 1. Airway management
 - a. Application of oropharyngeal airway
 - b. Oxygen therapy
 - c. CPAP (Continuous Positive Airway pressure)
 - d. Care of tracheostomy
 - e. Endotracheal extubation
- 2. Cardiopulmonary resuscitation, Basic cardiac life support, ECG
- 3. Monitoring of critically ill patients clinically with monitors, capillary refill time (CRT) assessment of jaundice, ECG.
- 4. Gastric lavage
- 5. Assessment of critically ill patients

Identification & assessment of risk factors, Glasgow coma scale, and dolls eye movement, arterial pressure monitoring, cardiac output/pulmonary artery pressure monitoring, and detection of life threatening abnormalities

- 6. Admission & discharge of critically ill patients
- 7. Nutritional needs gastrostomy feeds, pharyngeal feeds, jejunostomy feeds, TPN, formula preparation & patient education.
- 8. Assessment of patient for alteration in blood sugar levels monitoring blood sugar levels periodically & administering insulinperiodically.
- 9. Administration of drugs: IM, IV injection, IV cannulation & fixation of infusion pump, calculation of dosages, use of insulin syringes/ tuberculin, monitoring fluid therapy, blood administration.
- 10. Setting up dialysis machine and starting, monitoring and closing dialysis
- 11. Procedures for prevention of infections:

Hand washing, disinfection & sterilization surveillance, and fumigation universal precautions.

- 12. Collection of specimen.
- 13. Setting, use & maintenance of basic equipment, ventilator, O2 analyzer, monitoring equipment, transducers, defibrillator, infusion & syringe pumps, centrifuge machine.

IV Other Procedures:

CLINICAL SPECIALITY-II

MEDICAL SURGICAL NURSING- ONCOLOGY NURSING

Placement: II Year Hours of Instruction
Theory: 150 hours

Practicals: 950 hours
Total: 1100 hours

Course Description

This course is designed to assist students in developing expertise and in-depth understanding in the field of oncology Nursing. It will help students to develop advanced skills for nursing intervention in various oncological conditions. It will enable the student to function as oncology nurse practitioner/specialist and provide quality care. It will further enable the student to function as educator, manager, and researcher in the field of oncology nursing

Objectives

- 1. Explain the prevention, screening and early detection of cancer
- 2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of oncological disorders of various body systems
- 3. Describe the psychosocial effects of cancer on patients and families.
- 4. Demonstrate skill in administering/assisting in various treatment modalities used for patients with cancer
- 5. Apply nursing process in providing holistic care to patients with cancer.
- 6. Apply specific concepts of pain management
- 7. Appreciate the care of death and dying patients and value of bereavement support.
- 8. Describe the philosophy, concept and various dimensions of palliative care
- 9. Appreciate the role of alternative systems of medicine in care of cancer patients
- 10. Appreciate the legal & ethical issues relevant to oncologynursing
- 11. Recognize and manage Oncological emergencies
- 12. Counsel the patients with cancer and their families
- 13. Incorporate evidence based nursing practice and identify the areas of research in the field of oncology nursing
- 14. Recognize the role of oncology nurse practitioner as a member of oncology team
- 15. Collaborate with other agencies and utilize resources in caring for cancer patients.

- 16. Teach and supervise nurses and allied health workers.
- 17. Design a layout and develop standards for management of oncology units/hospitals and nursing care.

Content outline

Unit	Hours.	Content
I	4	 Introduction □ Epidemiology-Incidence, Prevalence – Global, National, State and Local □ Disease burden, concept of cancer, risk factors □ Historical perspectives □ Trends and issues □ Principles of cancer management □ Roles and responsibilities of oncology nurse
П	5	The Nature of Cancer Normal cell biology The Immune system Pathological and pathophysiological changes intissues Biology of the cancer cell Clone formation Transformation Tumor stem lines Structure of a solid tumor Products produced by the tumor Systemic effects of tumor growth
Ш	4	Etiology of Cancer Carcinogenesis, Theories of cancer causation Risk factors Carcinogens – genetic factors, chemical carcinogens, radiation, viruses, Immune system failure, rapid tissue proliferation Hormone changes, diet, emotional factors.
IV	10	 Diagnostic Evaluation Health assessment: History taking, physical examination, Staging and grading of tumors, TNM Classification Common diagnostic tests Blood investigation: Haemetological, Bio-chemical, Tumor markers, Hormonal assay Cytology:Fine needle aspirationcytology(FNAC) Histopathology: Biopsy Radiological assessment: MRI, Ultrasound, Computed tomography, Mammography, Positron emission tomography(PET), Radio nuclide imaging, Functional metabolism imaging Endoscopies

	Nurses responsibilities in diagnosticmeasures

Unit	Hours.	Content
V	10	Levels of prevention and care Primary prevention – Guidelines for cancer detection, general measures, Warning signs of cancer, Self examination-Oral, Breast, Testicular Secondary prevention – early diagnosis. Screening Tertiary prevention – disability limitation, Rehabilitation: Mobility, Speech, Bowel and bladder, Ostomies etc Patient and family education, Discharge instruction, follow-up care and use of community resources.
VI	25	Cancer Treatment Modalities and Nurse's Role
		 Surgery Principles of surgical oncology Current surgical strategy, Determining surgicalrisk Special surgical techniques Pre-intra-postoperative nursing care Acute and chronic surgical complications Future directions and advances Chemotherapy Principles and classification of chemotherapeutics Pharmacology of antineoplastic drugs- Mechanism of action, Absorption, protein binding, Bio-transformation, excretion, common side effects, drug toxicity Calculating drug doses,
		 Therapeutic response to chemotherapy-Tumor variables, drug resistance, Safety precautions
		 Radiation Therapy Physics of radiotherapy Types of ionizing rays Radiation equipments: Linear accelerator, cobalt, Implants, Isotopes, Types of therapies: Oral, Brachy therapy, tele therapy, selectron therapy Effects of radiation on the body tissue, Radiation biology – cell damage hypoxic cells, alteration of tumor kinetics. Approaches to radiation therapy – External radiotherapy Internal radiotherapy – unsealed, Sealed sources. Effectiveness of radiotherapy-Radiosensitivity, treatment effects Complications of radiotherapy Radiation safety: Standards of Bhaba Atomic Research

	Centre(BARC)

Unit	Hours.	Content
		 Bone Marrow Transplantation /Stem CellTransplantation Types, indications, transplantation procedure, complications and nursing managment Types and donor sources Preparation and care of donor and recipient Bone marrow bank Legal and ethical issues
	 Immunotherapy (Biotherapy) Concepts and principles Classification of agents Treatment and applications 	
		 Gene Therapy Current Concepts and practices
		□ Alternative and Complementary Therapies • Current practices
VII	10	 Pain management:- Theories, typesand Nature of cancer pain Pathophysiology of pain Pain threshold
		 Assessment of pain Principles of cancer pain control Pharmacological: Opioid and non-opioid analgesic therapy Patient controlled analgesia(PCA) Other invasive techniques of pain control Recentdevelopments in Cancer pain Non- Pharmacological pain relief technique- Complementary therapies(Music, massage, meditation, relaxation techniques, biofeed backetc) Psychological intervention in pain control Alternative system of medicines Role
		of nurse

VIII	5	Palliative care	
		□ Definition and scope, philosophy	
		□ Concept and elements of palliative care	
		□ Global and Indian perspective of palliative care	
		□ Quality of life issues	
		□ Communication skill	
	□ Nursing perspective of palliative care and its elements		
	□ Home care		
		□ Hospice care	
		Role of nurse in palliative care	

Unit	Hours.	Content		
IX	2	 Infection control: Process of infection, risk of hospitalization, nosocomial infections-prevention and control of infection in acute, long term care facility and community based care Standard safety measures 		
X	30	Nursing Care of Patients With Specific Malignant Disorders Malignancies of G.I. system-oral, oesophagus, stomach, rectal, liver & pancreas, care of ostomies/stoma Respiratory malignancies Genito urinary system malignancies- prostate Bladder, renal testicular malignancies, Gynecological malignancies-cervix, uterus, ovary Hematological malignancies-Lymphomas, Leukemias. Malignancies of musculoskeletal system Endocrine malignancies Skin Head and Neck -brain tumors Other malignancies – Breast cancer, AIDS related Malignancies (Kaposi's Sarcoma)		
XI	10	Paediatric malignancies □ Leukemia,Lymphoma, Neuro- blastoma □ Wilm's tumor, Soft tissue sarcoma, Retinoblastoma □ Nursing Management of childrenwith Paediatric Malignancies		
XII	15	Nursing Management of Physiological Conditions and Symptoms Of Cancer Patient Nutrition: - effects of cancer on nutritional Status and its consequences:-Anemia, Cachexia, Xerostomia, mucositis, Dysphagia, nausea and vomiting, constipation, diarrhoea, electrolyte imbalances, taste alterations Impaired mobility: Decubitus ulcer, pathologic fractures, thrombophlebitis, pulmonary embolism, contractures, footdrop Other symptoms		

Unit	Hours.	Content	
XIII	10	Cancer Emergencies Disseminated intravascular coagulation(DIC), Malignant pleural effusion Neoplastic cardiac tamponade and septic shock spinal cord compression Superior venacava syndrome Metabolic emergency: hyper and hypo calcemia Surgical emergency Urological emergency Hemorrhage Organ obstruction Brain metastasis Nurses role in managing oncologic emergencies	
XIV	8	Psycho-Social Aspects of Nursing Care Psychological responses of patients with cancer Psychosocial assessment — Crisis intervention, coping mechanisms Stress management, spiritual/cultural care and needs Counseling: individual and family Maximizing quality of life of patient and family Ethical, moral and legal issues— End of life care Grief and grieving process Bereavement support Care of Nurses who care for the dying.	
XV	2	Layout and Design of an oncology institution/ ward, OPD, chemotherapy unit, Bone marrow transplantation unit, Pain clinic etc Practice Standards of oncology nursing Policies and Procedures Establishing Standing orders and Protocols Quality Assurance Programme in oncology units Nursing audit	

Clinical Experience

S.	Deptt./ Unit	No. of Week	Total Hours
No.			
1	Medical Oncology ward	6	180 Hours
2	Surgical Oncology ward	6	180 Hours
3	Bone marrow transplantation Unit	2	60 Hours
4	Operation Theatre	2	60 Hours
5	Radiotherapy Unit	2	60 Hours
6	Chemotherapy Unit	4	120 Hours
7	Out patient department and pain clinic	2	60 Hours
8	Pediatric Oncology ward	2	60 Hours
9	Palliative Careward	2	60 Hours
10	Community oncology	2	60 Hours
11	Hospice	1	30 Hours
12	Other field visits	1	30 Hours
	Total	32 Weeks	960 Hours

Procedures Observed

- 1. CT Scan
- 2. MRI
- 3. PET Scan(Positron Emission Tomography)
- 4. Ultra sound
- 5. Mammography
- 6. Radio Nuclide Imaging
- 7. Bone Scan
- 8. Thyroid Function Test
- 9. Functional and Metabolic Imaging
- 10. Transportation of radioactive materials
- 11. Others

Procedures Assisted

- 1. IV cannulation Open method
- 2. Chemotherapy
- 3. Radiotherapy Brachytherapy Low Density Radiation, High Density Radiation.
- 4. Interstitial implantation
- 5. Bio-therapy and Gene therapy
- 6. Teletherapy Treatment planning
- 7. Bone marrow aspiration and biopsy
- 8. Biopsy tissue
- 9. FNAC Fine Needle Aspiration Cytology andbiopsy

- 10. Advance Cardiac life support
- 11. Endotracheal intubation
- 12. Defibrillation Ventilation
- 13. Tracheostomy
- 14. Thoracentesis
- 15. Paracentesis
- 16. Lumbar Puncture
- 17. Arterial Blood Gas
- 18. Nerve Block
- 19. Chest tube insertion
- 20. Intercostal drainage
- 21. CVP monitoring

Procedure Performed

- 1. Screening forcancer
- 2. Assessment of pain
- 3. Assessment of Nutritional status
- 4. Care of Tracheostomy
- 5. Endotracheal intubation
- 6. Gastric gavage
- 7. Pap smear
- 8. IV cannulation
- 9. Care of surgical flaps
- 10. Care of ostomies
- 11. Blood transfusion and component therapy
- 12. Counseling
- 13. Practice standard safety measures
- 14. Care of dead body and mortuary formalities

Other procedures

(As per the institutional protocol):

1. Alternative therapies

CLINICAL SPECIALITY - II

MEDICAL SURGICAL NURSING- NEUROSCIENCES NURSING

Placement : II Years

Hours of Instruction
Theory – 150 Hours
Practical- 950 Hours

Total: 1100 Hours

Course Description

This course is designed to assist students in developing expertise and in- depth knowledge in the field of neurology and neurosurgical Nursing. It will help students to develop advanced skills for nursing intervention in caring for patients with neurological and neurosurgical disorders. It will enable the student to function as neuroscience nurse practitioner/ specialist. It will further enable the student to function as educator, manager and researcher in the field of neurology and neurosurgical Nursing.

Objectives

At the end of the course the students will be able to

- 1. Appreciate trends and issues related to neurology and neurosurgical Nursing.
- 2. Review the anatomy and physiology of nervous system
- 3. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of patients with neurological and neurosurgical disorders
- 4. Perform neurological assessment and assist in diagnostic procedures
- 5. Describe the concepts and principles of neurosciencenursing
- 6. Describe the various drugs used in neurosciences and nurses responsibility
- 7. Assist in various therapeutic and surgical procedures in neuroscience nursing
- 8. Demonstrate advance skills/competence in managing patients with neurological and neurosurgical disorder following nursing process approach
- 9. Identify psychosocial problems of patients with disabilities and assist patients and their family to cope with emotional distress, spiritual, grief and anxiety
- 10. Participate in preventive, promotive and rehabilitative services for neurological and neurosurgical patients.
- 11. Explain the legal and ethical issues related to brain death, organ transplantation and practice of neuroscience nursing
- 12. Incorporate evidence based nursing practice and identify the areas of research in the field of neuroscience nursing

- 13. Organise and conduct inservice education program for nursing personnel.
- 14. Develop standards of care for quality assurance in neuroscience nursing practice
- 15. Identify the sources of stress and manage burnout syndrome among health care providers.
- 16. Teach and supervise nurses and allied health workers.
- 17. Plan and develop physical layout of neuro intensive care unit

Course Content

Unit	Unit Hours Content	
I	5	 Introduction Introduction to neuroscience(neurological and neurosurgical) nursing History-Development in neurological and neurosurgical nursing, Service & education Emerging trends and issues in neurology and neuro surgery and its implication to nursing. neurological and neurosurgical problems— Concepts, principles and nursing perspectives Ethical and legal issues Evidence based nursing and its application in neurological and neurosurgical nursing
II	5	Epidemiology Major health problems- Risk factors associated with neurological conditions- Hereditary, Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic considerations, occupational and infections. Health promotion, disease prevention, life style modification and its implications to nursing Alternate system of medicine/complementary therapies
III	10	Review of Anatomy and physiology Embryology Structure and functions of Nervous system- CNS, ANS, cereberal circulation, cranial and spinal nerves and reflexes, motor and sensory functions Sensory organs

Unit	Hours	Content		
IV	15	Assessment Assessment History taking Physical assessment, psychosocial assessment Neurological assessments, Glasgow coma scale interpretation & its relevance to nursing. Common assessment abnormalities Diagnostic measures Cerebro spinal fluid analysis Radiological studies-Skull and spine X-ray Cerebral Angiography, CT Scan Single Photon Emission Computer Tomography(SPECT), MRI (Magnetic Resonance Imaging), MRA, MRS, Functional MRI, Myelography, PET (Positron Emission Test), Interventional radiology. Electorgraphic studies- Electro encephalo graphy, MEG, EMG, video EEG, Nerve conduction studies-Evoked potentials, visual evoked potentials, brain stem auditory evoked potentials, somatosensory evoked potentials Ultrasound studies-Carotid duplex, transcranial Doppler sonography, Immunological studies Biopsies – muscle, nerve and Brain. Interpretation of diagnostic measures Nurse's		
V	5	Meeting Nutritional needs of neurological patients □ Basic nutritional requirements □ Metabolic changes following injuryand starvation □ Nutritional assessment □ Common neurological problems that interfere with nutritionand strategies for meeting their nutritional needs □ Special metabolic and electrolyte imbalances □ Chronic fatigue syndrome		
VI	5	Drugs used in neurological and neurosurgical disorders Classification Indications, contraindications, actions and effects, toxic effects Role of nurse		

Unit	Hours	Content		
VII	10	 Traumatic conditions. Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of Cranio cerebral injuries. Spinal & Spinal cord injuries. Peripheral nerve injuries. Unconsciousness 		
VIII	10	Cerebro vascular disorders. Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of Stroke & arterio venous thrombosis. Haemorrhagic embolus. Cerebro vascular accidents. Intracranial aneurysm. Subarchnoid Haemorrhage. Arterio venous fistula. Brain tumours Diseases of cranial nerves; Trigiminal neuralgia, Facial palsy, Bulbar palsy.		
IX	10	 Degenerating and demyelinating disorders □ Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and Nursing management of • Motor neuron diseases. • Movement disorders- Tics, dystonia, chorea, wilson's disease, essential tremors • Dementia. • Parkinson's disease. • Multiple sclerosis. • Alzemier's 		
X	10	Neuro infections □ Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and Nursing management of Neuro infections • Meningitis-types • Encephalitis. • Poliomyelitis. • Parasitic infections. • Bacterial infections • Neurosyphilis. • HIV & AIDS. • Brain abscess.		

Unit	Hours	Content			
XI	10	Paroxysmal disorders. Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of Epilepsy and seizures. Status epilepticus. Syncope. Menier's syndrome. Cephalgia.			
XII	10	 Developmental disorders. Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis Management: medical, surgical and Nursing management of Hydrocephalus. Craniosynostosis. spina bifida- Meningocele, Meningomyelocele encephalocele syringomyelia. Cerebro vascular system anomalies. Cerebral palsies. Down's syndrome 			
XIII	10	 Neuro muscular disorders. Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and Nursing management of Polyneuritis – G B Syndrome. Muscular dystrophy. Myasthenia gravis. Trigeminal neuralgia. Bell's palsy. Menier's disease Carpal tunnel syndrome Peripheral neuropathies 			
XIV	5	Neoplasms – surgical conditions. □ Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and Nursing management of • Space occupying lesions -types • Common tumors of CNS,			
XV	5	Other disorders Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and Nursing management of Metabolic disorders- diabetes, insipidus, metabolic encephalopathy Sleep disorders Auto immune disorders- multiple sclerosis, inflammatory myopathies			

Unit	Hours	Content		
XVI	10	Neuro emergencies □ Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and Nursing management of • Increased intracranial pressure • Unconscious • Herniation syndrome • Seizures • Severe head injuries • Spinal injuries • Cerebro vascular accidents		
XVII	5	Rehabilitation. Concept and Principles of Rehabilitation. Factors affecting quality of life and coping Rehabilitation in acute care setting, and following stroke, head injury and degenerative disorders of brain Physiotherapy. Counselling Care giver's role Speech & LanguageNeurogenic communication disorders, Speech therapy		
XVIII	5	Ethical and legal issues in neuroscience nursing Brain death and organ transplantation Euthanasia Negligence and malpractice Nosocomial infections		
XIX	5			

S.No.	AREA OF POSTING	No. of Week	Total Hours
1	O.P.D.	2	60
2	Casualty	2	60
3	Diagnostics	2	60
4	Neuro psychiatry	1	30
5	Neuro Medical wards	4	120
6	Paediatric Neuro ward	2	60
7	Neuro surgical wards	4	120
8	Head Injury ward	3	90
9	ICU- neuro medicine	4	120
10	I.C.U neuro surgical	4	120
11	Rehabilitation	2	60
12	Operation Theatre	2	60
	Total	32 Weeks	960 Hours

ESSENTIAL NEURONURSING SKILLS

I. Procedures Observed

- 1. CT scan
- 2. MRI
- 3. PET
- 4. EEG
- 5. EMG
- 6. Sleep pattern studies/Therapy
- 7. Radiographical studies
- 8. Neuro surgeries
- 9. Nerve conduction studies
- 10. Ultrasound studies
- 11. Any other

II. Procedures Assisted

- 1. Advanced Cardiac life support
- 2. Lumbar Puncture
- 3. Biopsies muscle, nerve and Brain
- 4. Arterial Blood Gas
- 5. ECG Recording
- 6. Blood transfusion
- 7. IV cannulation open method

- 8. Endotracheal intubation
- 9. Ventilation
- 10. Tracheostomy
- 11. ICP monitoring
- 12. Gama Knife
- 13. Cereberal angiography
- 14. Myelography
- 15. Neuro surgeries

III. Procedures Performed:

- 1. Airway management
 - a. Application of Oro Pharyngeal Airway
 - b. Care of Tracheostomy
 - c. Conduct Endotracheal Intubation
 - d. use of AMBU bag, artificial respirators
 - e. Setting of Ventilators and Care of patientson ventilators
- 2. Cardio Pulmonary Resuscitation Defibrillation
- 3. Neurological assessment -Glasgow coma scale
- 4. Gastric Lavage
- 5. IV Cannulation
- 6. Administration of emergency IV Drugs, fluid
- 7. Care of patients with incontinence, bladder training Catheterization
- 8. Care of patients on traction related to the neurological conditions
- 9. Blood Administration.
- 10. Muscle strengthening exercises
- 11. Guidance and counseling
- 12. Monitoring management and care of monitors.

IV. Other Procedures:

CLINICAL SPECIALITY - II

MEDICAL SURGICAL NURSING- NEPHRO-UROLOGY NURSING

Placement: II Year

Hour of Instruction Theory: 150 Hours Practical: 950 Hours Total: 1100 Hours

Course Description

This course is designed to assist students in developing expertise and in-depth understanding in the field of Nephro and urological Nursing. It will help students to develop advanced skills for nursing intervention in various nephro and urological conditions. It will enable the student to function as nephro and urology nurse practitioner/specialist and provide quality care. It will further enable the student to function as educator, manager, and researcher in the field of nephro and urology nursing

Objectives

At the end of the course the students will be able to:

- 1. Appreciate trends and issues related to **nephro and urological** nursing
- 2 Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of **nephro and urological** conditions
- 3. Perform physical, psychosocial & spiritual assessment
- 4. Assist in various diagnostic, therapeutic and surgical interventions
- 5 Provide comprehensive nursing care to patients with **nephro and urological** conditions
- 6 Describe the various drugs used in **nephro and urological** conditions and nurses responsibility
- 7. Demonstrate skill in handling various equipments/gadgets used for patients with **nephro and urological** conditions
- 8 Appreciate team work & coordinate activities related to patient care.
- 9. Practice infection control measures.
- 10 Identify emergencies and complications & take appropriate measures
- 11. Assist patients and their family to cope with emotional distress, grief, anxiety and spiritual needs
- Discuss the legal and ethical issues in **nephro and urological** nursing
- 13. Identify the sources of stress and manage burnout syndrome among health care providers

- 14. Appreciate the role of alternative system of medicine in the care of patient
- 15. Incorporate evidence based nursing practice and identify the areas of research in the field of **nephro and urological** nursing
- 16 Teach and supervise nurses and allied health workers.
- 17. Design a layout of kidney transplant unit and dialysis unit
- 18. Develop standards of nephro urological nursing practice

Course Content

Unit	Hours	Content
I	5	 Introduction Historical development: trends and issues in the fieldof nephro and urological nursing. nephro and urological problems Concepts, principles and nursing perspectives Ethical and legal issues Evidence based nursing and its application in nephro and urological nursing(to be incorporated in all the units)
П	5	Epidemiology Major health problems- urinary dysfunction, urinary tract infections, Glomuerular disorders, obstructive disorders ad other urinary disorders. Risk factors associated with nephro and urological conditions conditions-Hereditary, Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic considerations. Health promotion, disease prevention, life style modification and its implications to nursing. Alternate system of medicine/complementary therapies.
III	5	Review of anatomy and physiology of urinary system Embryology Structure and functions Renal circulation Physiology of urine formation Fluid and electrolyte balance Acid base balance Immunology specific to kidney
IV	20	Assessment and diagnostic measures History taking Physical assessment, psychosocial assessment Common assessment abnormalities-dysurea, frequency, enuresis, urgency, hesistancy, hematuria, pain, retention, burning on urination, pneumaturia, incontinence, nocturia, polyurea, anuria, oliguria, Diagnostic tests-urine studies, blood chemistry, radiological procedures-KUB, IVP,nephrotomogram, retrograde pylogram, renal arteriogram, renalultrasound, CT scan, MRI, cystogram, renal

Unit	Hours	Content
		scan, biopsy, endoscopy-cystoscopy, urodynamics studies- cystometrogram, urinary flow study, sphincter electromyography, voiding pressure flow study, videourodynamics, Whitaker study
		Interpretation of diagnostic measures Nurse's role in
		diagnostic tests
V	5	Renal immunopathy/Immunopathology General Concept of immunopathology Immune mechanism of glomerual vascular disease Role of mediater systems in glomerula vascular disease
VI	15	Urological Disorders and Nursing Management Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of Urinary tract infections- pyelonephritis, lower urinary tract infections, Disorders for ureters, bladder and urethera Urinary tract infections- Urinary dysfunctions- urinary retention, urinary incontinence, urinary reflux, Bladder disorders- neoplasms, calculi, neurogenic bladder, trama, congenital abnormalities Benign prostrate hypertrophy(BPH) Ureteral disorders: ureteritis, ureteral trauma, congenital anomalies of ureters Uretheral disorders- tumours, trauma, congenial anomalies of ureters,
VII	25	Glomueral disorders and nursing management Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing managementof Glomueralo nephritis- chronic, acute, nephriticsyndrome Acute Renal failure and chronic renalfailure. Renal calculi Renal tumours-benign and malignant Renal trauma Renal abscess Diabetic nephropathy Vascular disorders Renal tuberculosis Polycystic Congenital disorders Hereditary renal disorders
VIII	10	 □ Management of Renalemergencies □ Anuria □ Acute Renal failure □ Poisoning □ Trauma □ Urine retention

Unit	Hours	Content
		□ Acute graft rejection
		☐ Hematuria ☐ Nurse's role
		In Nurse's role
IX	10	Drugs used in urinary disorders
		□ Classification
		☐ Indications, contraindications, actions and effects, toxic effects ☐ Role of nurse
		Role of fluise
X	10	Dialysis
		□ Dialysis- Historical, types, Principles, goals
		Hemodialysis- vascular access sites- temporary and permanent
		Peritoneal dialysis Dialogic Property and a series
		Dialsyis Procedures- steps, equipments, maintenance,
		Role of nurse- pre dialysis, intra and post dialysis
		□ Complications- □ Counseling
		patient education
		□ Records and reports
VI	10	
XI	10	 □ Kidney transplantation □ Nursing management of a patient with Kidney transplantation
		□ Nursing management of a patient with Kidney transplantation □ Kidney transplantations- a historical review
		□ Immunology of graft rejections
		□ The recipient of a renal transplant
		□ Renal preservations
		□ Human Leucocytic Antigen(HLA)typing matching and cross matching
		in renal transplantation
		□ Surgical techniques of renaltransplantations
		Chronic renal transplantrejection
		Complication after KTP: Vascular and lymphatic, Uroloical,
		cardiovascular, liver and neurological, infectious complication WTP in children and management of padietric patient with WTP
		 □ KTP in children and management of pediatric patient with KTP □ KTP in developing countries
		□ RIP in developing countries □ Results of KTP
		□ Work up of donor and recipient for renal transplant
		□ Psychological aspect of KTP and organ donations
		□ Ethics in transplants
		□ Cadaveric transplantation
XII	5	□ Rehabilitation of patient with nephrological problems
		□ Risk factors and prevention
		Rehabilitation of patients on dialysis and after kidney transplant
		Rehabilitation of patients after urinary diversions
		□ Family and patient teaching
XIII	10	Pediatric urinary disorders
		☐ Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology,
		medical, surgical and nursing management of children with Renal Diseases -UTI, ureteral reflux, glomerulo nephritis, nephrotic syndrome infantile nephrosis,
		cystic kidneys,
		familial factors in renal diseases in childhood, Haemolytic uraemic

Unit	Hours	Content
		syndrome. Benign recurrent haemturia, nephropathy, wilms' tumour
XIV	5	Critical care units- dialysis, KTP unit Philosophy, aims and objectives Policies, staffing pattern, design and physical plan of Dialysis and KTP units Team approach, functions Psychosocial aspects in relation to staff and clients of ICU, dialysis unit In-service education Ethical and legal issues
XV	5	 Quality assurance in nephrological nursing practice Role of advance practioner in nephrological nursing Professional practice standards Quality control in nephrological nursing Nursing audit

Practicals

Total = 960 Hours 1 Week = 30 Hours

S. No.	Deptt./ Unit	No. of Week	Total Hours
1	Nephrology Ward	6	180 Hours
2	Pediatrics	2	60 Hours
3	Critical Care Unit	2	60 Hours
4	Urology Ward	6	180 Hours
5	Dialysis Unit	4	120 Hours
6	Kidney Transplantation Unit	2	60 Hours
7	URO OT	2	60 Hours
8	Emergency Wards	2	60 Hours
9	Uro Nephro OPDs	4	120 Hours
10	Diagnostic Labs	2	60 Hours
	Total	32 Weeks	960 Hours

Procedures observed

I. Procedures Observed

- 1. CT Scan
- 2. MRI
- 3. Radiographic studies
- 4. Urodynamics
- 5. Hemodialysis
- 6. Renal Surgeries

II. Procedures Assisted

- 1. Blood transfusion
- 2. I V cannulation therapy
- 3. Arterial Catheterization
- 4. Insertion of central line/cvp line
- 5. Connecting lines fordialysis
- 6. Peritoneal dialysis
- 7. Renal biopsy
- 8. Endoscopies- Bladder, urethra

III. Procedure Performed

- 1. Health assessment
- 2. Insertion of uretheral and suprapubic catheters
- 3. Urine analysis

- 4. Catheterisation
- 5. Peritoneal dialysis
- 6. Bladder irrigation
- 7. Care of ostomies
- 8. Care of urinary drainage
- 9. Bladder training
- 10. Care of vascular access
- 11. Setting up dialysis machine and starting, monitoring and closing dialysis
- 12. Procedures for prevention of infections:
- 13. Hand washing, disinfection & sterilization surveillance, and fumigation universal precautions.
- 14. Collection of specimen.
- 15. Administration of drugs: IM, IV injection, IV cannulation & fixation of infusion pump, calculation of dosages, blood administration. monitoring -fluid therapy, electrolyte imbalance,
- 16. Nutritional needs, diet therapy & patient education.
- 17. Counselling

IV. OTHER PROCEDURES:

CLINICAL SPECIALITY - II

MEDICAL SURGICAL NURSING - ORTHOPEDIC NURSING

Placement: II Year

Hours of Instruction Theory: 150 Hours Practical: 950 Hours Total: 1100 Hours

Course Description

This course is designed to assist students in developing expertise and in-depth understanding in the field of orthopedic nursing. It will help students to develop advanced skills for nursing intervention in various orthopedic conditions. It will enable the student to function as orthopedic nurse practitioner/specialist providing quality care. It will further enable the student to function as educator, manager, and researcher in the field of orthopedic nursing.

Objectives

At the end of the course the students will be able to:

- 1. Appreciate the history and developments in the field of orthopedic nursing
- 2. Identify the psycho-social needsof the patient while providing holistic care.
- 3. Perform physical and psychological assessment of patients with orthopedic conditions and disabilities.
- 4. Describe various disease conditions and their management
- 5. Discuss various diagnostic tests required in orthopedic conditions
- 6. Apply nursing process in providing care to patients with orthopedic conditions and those requiring rehabilitation.
- 7. Recognize and manage orthopedic emergencies.
- 8. Describe recent technologies and treatment modalities in the management of patients with orthopedic conditions and those requiring rehabilitation.
- 9. Integrate the concept of family centered, long term care and community based rehabilitation to patients with orthopedic conditions.
- 10. Counsel the patients and their families with orthopedic conditions
- 11. Describe various orthotic and prosthetic appliances
- 12. Appreciate the legal and ethical issues pertaining to patients with orthopedic conditions and those requiring rehabilitation.
- 13. Appreciate the role of alternative system of medicine in care of patients with orthopedic conditions

- 14. Incorporate evidence based nursing practice and identify the areas of research in the field of orthopedic nursing.
- 15. Recognize the role of orthopedic nurse practitioner and as amember of the orthopedic and rehabilitation team.
- 16. Teach orthopedic nursing to undergraduate students and in-service nurses.
- 17. Prepare a design and layout of orthopedic and rehabilitative units.

Course Content

Unit	Hours	Content
I	5	Introduction
		 Historical perspectives – History and trends in orthopedic nursing Definition and scope of orthopedic nursing Anatomy and physiology of Musculo-skeletal system
		Posture, Body landmarks Skeletal system Muscular system.
		Nervous system - Main nerves
		□ Healing of - Injury, bone injury,□ Repair of ligaments
		□ Systemic response to injury
		☐ Ergonomics, Body mechanics, biomechanical measures
		□ Orthopedic team
II	8	Assessment of Orthopedic Patient
		Health Assessment: History, physical examination-Inspection, palpation,
		movement, Measurement, muscle strength Testing. □ Diagnostic studies – Radiological studies, Muscle enzymes,
		serologic studies
III	10	Care of patients with devices
		□ Splints, braces, various types of plaster cast
		□ Various types of tractions,
		 □ Various types of orthopedic beds and mattresses □ Comfort devices
		☐ Comfort devices ☐ Implants in orthopedic
		□ Prosthetics and Orthotics
IV	15	Injuries
		Trauma & Injuries
		☐ Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, management, medical surgical and nursing management of :
		Early management of Trauma
		• Fractures
		• Injuries of the
		□ Shoulder and arm
		□ Elbow, fore arm, wrist, hand
		□ Hip, thigh, knee, leg, ankle, foot□ Spine
		□ Spine

Unit	Hours	Content
		 Head injury Chest injury Polytrauma Nerve injuries Vascular injuries Soft tissue injuries Sports injuries Amputation
V	8	 Infections of Bones and Joints □ Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, management, medical surgical and nursing management of: • Tuberculosis • Osteomyelitis • Arthritis • Leprosy
VI	5	Bone Tumours □ Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, management, medical surgical and nursing management of: • Bone tumors – Benign, Malignant and metastatic • Differenttypes of therapies for tumors
VII	10	 Deformities □ Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis – medical surgical and nursing management of:Scoliosis, Kyphosis,Lordosis □ Congenital disorders: Congenital dislocation of hip(CDH), Dislocation of patella, knee, □ Varus and valgus deformities, □ Deformities of digits, □ Congenital torticollis. □ Meningocele, meningomyelocele, spina bifida, □ Chromosomal disorders. □ Computer related deformities
VIII	5	Disorders of the spine □ Intervertebral disc prolapse, Fracture of the spine □ Low back disorder – Low back pain, PND, spinal stenosis, spondylosis
IX	5	 Nutritional/Metabolic and Endocrine Disorders □ Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, medical surgical and nursing management of: • Rickets, • Scurvy, • Hyper vitaminosis A and D, • Osteomalacia,

Unit	Hours	Content
		 Osteoporosis Paget's disease, gout, Gigantism, Dwarfism, Acromegaly. Therapeutic diets for various orthopedic disorders
X	8	 Neuro-Muscular Disorders: □ Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, medical surgical and nursing management of: • Poliomyelitis, Cerebral Palsy • Myasthenia gravis • Spina bifida. • Peripheral nerve lesion, • Paraplegia, Hemiplegia, Quadriplegia. • Muscular dystrophy
XI	8	 Chronic/Degenerative Diseases of Joints and Autoimmune Disorders: □ Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis – medical surgical and nursing management of:
XII	5	Orthopedic Disorders in Children: General and special consideration on pediatric orthopedics Genetic disorders Congenital anomalies Growth disorders Genetic counseling Nurses role in genetic counseling
XIII	5	Geriatric Problems ☐ Geriatric population, types of disabilities, causes, treatment and Management — Hospitalization, rest, physiotherapy, involvement of family members, social opportunities. ☐ Care at home — involvement of family and community, follow up care and rehabilitation
XIV	6	Pharmacokinetics □ Principles of drug administration □ Analgesics and anti inflammatory agents □ Antibiotics, Antiseptics, □ Drugs used in orthopedics and neuromuscular disorders □ Blood and blood components □ Care of drugs and nurses role

Unit	Hours	Content
XV	30	Nurses Role in Orthopedic Conditions
		□ Gait analysis□ Urodynamic studies
		Prevention of physical deformities
		☐ Alteration of body temperature regulatory system and immune systems
		 Immobilization – cast, splints, braces and tractions Prevention and care of problems related to immobility
		□ Prevention and care of problems related to immobility □ Altered sleeppatterns
		□ Impaired communication
		□ Self care and activities of daily living
		□ Bladder and bowel rehabilitation
		□ Sensory function rehabilitation
		□ Psychological reaction related to disabilities and disorders.
		□ Coping of individual and family with disabilities and disorders
		□ Maintaining sexuality
		□ Spirituality – A rehabilitative prospective
		Outhonodia Paganeturativa Sunganias
		Orthopedic Reconstructive Surgeries Replacement surgeries – Hip, Knee, Shoulder
		□ Spine surgeries
		☐ Grafts and flaps surgery
		□ Deformity correction.
		Physiotherapy
		Concepts, Principles, purpose,
		 Mobilization – Exercises: types, re-education in walking: Crutch walking, wheel chair, Transfer techniques,
		 Types of gaits: Non-weight bearing, partial weight bearing, four point
		crutch, tripoid, walking with sticks, calipers
		• Forms of therapies: Hydrotherapy, electrotherapy, wax bath, heat therapy,
		ice, helio therapy, radiant heat,
		Chest physiotherapy
VVI	0	Rehabilitation
XVI	8	□ Principles of rehabilitation, definition, philosophy, process,
		□ Various types of therapies
		□ Special therapies and alternative therapies
		□ Rehabilitation counseling
		□ Preventive and restorative measures.
		□ Community based rehabilitation (CBR)
		□ Challenges inrehabilitation.
		Role of the nurse in rehabilitation,
		Legal and ethical issues in rehabilitation nursing
		□ Occupational therapy
XVII	5	National Policies and Programmes
		□ National programmes for rehabilitation of persons with disability -
		National Institutes, artificial limbs manufacturing Corporation, District
		Rehabilitation Centers and their schemes
		□ Regional rehabilitation centers etc.

Unit	Hours	Content
		 Public policy in rehabilitation nursing The persons with disabilities act 1995, Mental rehabilitation and Multiple disabilities act 1992, The National Trust Rules 1999 and 2000 Rehabilitation Council of India Legal and ethical aspects in orthopedic nursing Rehabilitation health team and different categories of team members.
XVIII	4	Quality assurance Standards, Protocols, Policies, Procedures Nursing audit Staffing Design of orthopedic, physiotherapy and rehabilitation unit

Practicals

- 1. Clinical practice in Orthopedic, physiotherapy and Rehabilitation Units.
- 2. Application of tractions and plaster casts and removal of tractions and plaster casts and other appliances.
- 3. Apply Theories and Nursing Process in the management of patients with orthopedic conditions.
- 4. Provide various types of physical and rehabilitative therapies
- 5. Provide health education on related disease conditions.
- 6. Unit management and plan designing

S. No.	Deptt./Unit	No. of Week	Total Hours
1	Orthopedic Ward	8	240 Hours
2	Orthopedic Operation theatre	4	120 Hours
3	Neurosurgical Ward	2	60 Hours
4	Orthopedic O.P.D.	4	120 Hours
5	Casualty/Emergency and Trauma	4	120 Hours
6	Rehabilitation Units	2	60 Hours
7	Physiotherapy Unit	4	120 Hours
8	Paediatric /paediatric surgery unit	2	60 Hours
9	Field Visit	2	60 Hours
	Total	32 Weeks	960 Hours

Procedures Observed

- 1. X Ray
- 2. Ultrasound
- 3. MRI
- 4. C T Scan/bone scan
- 5. Arthroscopy
- 6. Electrothermally assisted capsule shift or ETAC (Thermal capsulorrhaphy)
- 7. Fluroscopy
- 8. Electromyography
- 9. Myelography
- 10. Discography
- 11. Others

Procedures Assisted

- 1. Blood Transfusion
- 2. IV cannulation and therapy
- 3. Ventilation
- 4. Various types of tractions
- 5. Orthopedic surgeries Arthrocentesis, Arthroscopy, Bone lengthening, Arthrodesis, grafting, Fractures fixation, reconstructive, reimplantation, replantation, spinal decompression, transplantation of bone, muscle or articular cartilage, autografting, allografting.
- 6. Injection Intra articular, intra osseous.
- 7. Advance Life Support

Peocedures Performed

- 1. Interpretation of X ray films.
- 2. Application and removal of splints, casts, and braces.
- 3. Care of tractions skin and skeletal traction, pin site care.
- 4. Cold therapy.
- 5. Heat therapy
- 6. Hydrotherapy
- 7. Therapeutic exercises
- 8. Use of TENS (Transcutaneous electrical nerve stimulation)
- 9. Techniques of transportation
- 10. Crutch walking, walkers, wheel chair.
- 11. Use of devices for activities of daily living and prevention of deformities.
- 12. Administration of drugs: IV injection, IV cannulation, and Blood transfusion.
- 13. Procedures for prevention of infections: disinfection and sterilization, surveillance, fumigation.
- 14. Special skin/ part preparations for orthopedic surgeries.
- 15. Surgical dressings Debridement.
- 16. Bladder and bowel training

Other Procedures

CLINICALSPECIALITY - II

MEDICAL SURGICAL NURSING - GASTRO ENTEROLOGY NURSING

Placement : II Year

Hours of Instruction Theory: 150 hrs. Practical: 950 hrs. Total: 1100hrs.

Course Description

This course is designed to assist students in developing expertise and in-depth understanding in the field of gastro enterology Nursing. It will help students to develop advanced skills for nursing intervention in various gastro enterology conditions. It will enable the student to function as gastro enterology nurse practitioner/specialist and provide quality care. It will further enable the student to function as educator, manager, and researcher in the field of gastro enterology nursing

Objectives

At the end of the course the students will be able to

- 1. Appreciate trends and issues related to gastro enterologynusing
- 2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of gastrointestinal conditions
- 3. Participate in national health programs for health promotion, prevention and rehabilitation of patients with gastrointestinal conditions
- 4. Perform physical, psychosocial & spiritual assessment
- 5. Assist in various diagnostic, therapeutic and surgical procedures
- 6. Provide comprehensive care to patients with gastrointestinal conditions
- 7. Describe the various drugs used in gastrointestinal conditions and nurses responsibility
- 8. Demonstrate skill in handling various equipments/gadgets used for patients with gastrointestinal conditions
- 9. Appreciate team work & coordinate activities related to patient care.
- 10. Practice infection control measures.
- 11. Identify emergencies and complications & take appropriate measures
- 12. Assist patients and their family to cope with emotional distress, grief, anxiety and spiritual needs
- 13. Discuss the legal and ethical issues in GE nursing

- 14. Identify the sources of stress and manage burnout syndrome among health care providers
- 15. Appreciate the role of alternative system of medicine in care of patient
- 16. Incorporate evidence based nursing practice and identify the areas of research in the field of gastrointestinal nursing
- 17. Teach and supervise nurses and allied health workers.
- 18. Design a layout of Gastro entrology intensive care unit (GEICU), liver care/transplant unit

Course Content

Unit	Hours	Content
I	5	 Introduction Historical development: trends and issues in the field of gastro enterology. Gastro enterological problems Concepts, principles and nursingperspectives Ethical and legal issues Evidence based nursing and its application in gastrointestinal nursing(to be incorporated in all the units)
II	5	Epidemiology Risk factors associated with GE conditions- Hereditary, Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic considerations Health promotion, disease prevention, life style modification and its implications to nursing National health programmes related to gastroenterology Alternate system of medicine/complementary therapies
III	5	Review of anatomy and physiology of gastrointestinal system Gastrointestinal system Liver, biliary and pancreas Gerontologic considerations Embryology of GI system Immunology specific to GI system
IV	15	Assessment and diagnostic measures History taking Physical assessment, psychosocial assessment Diagnostic tests Radiological studies: Upper GIT- barium swallow, lower GIT- Barrium enema, Ultra sound: Computed tomography MRI Cholangiography: Percutaneous transheptatic Cholangiogram(PTC) Magnetic Resonance Cholangio pancreotography (MRCP) Nuclear imaging scans(scintigraphy) Endoscopy

Unit Hours	Content
	 Colonoscopy Proctosigmoidoscopy Endoscopic Retrogrde Cholongiopancreotography (ERCP) Endoscopic ultrasound Peritonoscopy(Laproscopy) Gastric emptying studies Blood chemistries: Serum amylase, serumlipase Liver biopsy Miscellaneous tests:Gastric analysis, fecal analysis Liver function tests: Bile formation and excretion, dye excretion test, Protein metabolism, haemostatic functions- prothrombin vitamin K production, serum enzyme tests,Lipid metabolism- serum cholesterol Interpretation of diagnostic measures Nurse's
V 25	Gastro intestinal disorders and nursing management □ Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of • Disorders of the mouth:Dental caries,Peridontal disease,Acute tooth infection, Stomatitis, Thrush (moniliasis),Gingivitis, Leukoplakia, Inflammation of the parotid gland, Obstruction to the flow of saliva,Fracture of the jaw • Disorders of the oesophagus: Reflux oesophagitis, Oesophageal achalasia, Oesoophageal varices, Hiatus hernia, Diverticulum • Disorders of the stomach and duodenum: Gastritis, Peptic ulcer, Dumping of the stomach, Food poisoning, idiopathic gastroparesis, Aerophagia and belching syndrome, Ideopathic cyclic nausea and vomiting, Rumination syndrome, Functional dyspepsia, Chronic Non specific (functional) abdominal pain • Disorders of the small intestine — Malabsorption syndrome — tropical sprue — Gluten — sensitive enteropathy (Coeliac disease) — Inflammatory diseases of intestines and abdomen,: appendicitis, Peritonities, Intestinal obstruction, Abdominal TB, Gastrointestinal polyposis syndrome — Chronic inflammatory bowel disease, Ulcerative colites, crohn's disease — Infestations and infections — Worm infestations, Typhoid, Leptospirosis — Solitary rectal ulcer syndrome — Alteration in bowel elimination (diarrhoea, constipation, fecal impaction, fecal incontinence, Irritable bowel syndrome, Chronic idiopathic constipation, Functional diarrhoea Anorectal Conditions: Hemorrhoide, Anal fissure, Anal fistula, Abscess, Strictures, Rectal prolapse, Pruritis ani, Pelonidal disease, Anal condylomas, Warts

Unit	Hours	Content
VI	15	Disorder of liver, pancreas gall bladder and nursing management
		□ Disorders of liver biliary tract :
		□ Viral Hepatitis – A, B, C, D & E
		Toxic hepatitis • Circhosic of liver liver feilure Liver transplantation
		 Cirrhosis of liver, liver failure, Liver transplantation Non cirrhotic portal fibrosis
		<u>^</u>
		• Liver abscess,;
		Parasitic and other cysts of the liver Discrete Coll Plant Print Plant P
		Disorders of the Gall Bladder and Bile Duct: Chalegystitis
		☐ Cholecystitis☐ Cholelitheasis
		□ Choledocholilethiasis
		□ Disorders of the pancreas: Pancreatitis,
		□ Benign tumors of isletcells
		□ Disorders of the Peritoneum
		Infections of the peritoneum
		□ Surgical peritonitis
		□ Spontaneous bacterial peritonitis
		□ Tuberculosis peritonitis
		□ Disorders of the Diaphragm
		Diaphragmatic hernia
		Congenital hernias
		Paralysis of diaphragm
		Tumors of the diaphragm
		□ Hiccups
VII	15	Gastro intestinal emergencies and nursing interventions
		□ Etiology, clinical manifestations, diagnosis, prognosis, related
		pathophysiology, medical, surgical and nursing managementof:
		• Esophageal varices,
		Ulcer perforation,
		Acute cholecystitis
		Diverticulitis
		• Fulminant hepatic failure
		Biliary obstruction
		Bowel obstruction
		Gastroenteritis
		• Intussusception
		Acute intestinal obstruction, perforation
		Acute pancreatitis
		Cirrhosis of liver complications
		• Liver, spleen, stomach pancreatic, mesenteric, boweland greater
		vessel injuries A cute appendicitie (peritopitie)
		Acute appendicitis /peritonitis Acute abdomen
		Acute abdomen Feed principles
*/***	1=	• Food poisoning
VIII	15	□ Congenital Anomalies of Esophagus
		Esophageal atresia Tracheo esophageal fistula
		Tracheo esophageal fistula

Unit	Hours	Content
		Esophageal stenosis
		Esophageal duplications
		Dysphagia – Lusoria – aberrent right subclavian artery appropriate acceptages.
		compressing esophagusEsophageal rings – schalzkiring
		Esophageal webs
		Esophagean wees
		□ Congenital Anomalies of Stomach
		Gastric atresia
		Micro gastria
		Gastric diverticulum
		Gastric duplication
		Gastric teratoma
		Gastric volvulus
		Infantile hypertrophic pyloric stenosis
		Adult hypertrophic pyloric stenosis
		□ Congenital Anomalies of Duodenal
		Duodenal Atresia or stenosis
		Annular pancreas
		Duodenal duplication cysts
		Malrotation and mid gut volvolus
		□ Developmental anomalies of the intestine:
		Abdominal wall defects (omphalocele and Gastroschisis)
		Meckel's diverticulum
		Intestinal atresia
		□ Hirschsprung's disease

IX	15	Pharmo Kinetics
		□ Drugs used in GIT
		□ Principles of administration
		□ Roles responsibilities of nurses
		□ Drugs in Peptic ulcer disease
		□ Proton Pump inhibitors
		☐ H2 ReceptorAntagonists
		□ Cytoprotective Agents:
		□ Drugs used in Diarrhea
		□ Drugs used in constipation
		□ Drugs used in Inflammatory Bowel Disease
		□ Aminosalicylates
		□ Corticosteroids
		□ Immunomodulators
		□ chemotherapy
		□ Antibiotics
		□ Antiemetics:
		□ Anticholinergics
		□ Antihistaminics
		□ Antihelminthics
		□ Vitamin Supplements

Unit	Hours	Content		
X	10	Nutrition and nutritional problems related to GI system		
		□ Nutritional assessment and nursing interventions		
		□ Therapeutic diets		
		Adverse reactions between drugs and various foods		
		☐ Malnutrition- etiology, clinical manifestations and management		
		☐ Tube feeding, parenteral nutrition, total parenteral nutrition		
		Obesity- etiology, clinical manifestations andmanagement Description of the content of t		
		□ Eating disorders- anorexia nervosa, bulimia nervosa □ Recent advances in nutrition		
		Recent advances in nutrition		
XI	15	Malignant disorders of gastro intestinal system		
		□ Etiology, clinical manifestations, diagnosis, prognosis, related		
		pathophysiology, medical, surgical, other modalities and nursing management		
		of:		
		Malignancy of oral cavity ,Lip,Tongue,buccal mucosa, oropharynx, Salivary gland		
		• Esophageal, Gastric, Carcinoma of bowel - Small bowel,		
		Colorectal and Anal carcinoma,		
		Liver, biliary tract and Pancreatic carcinoma		
XII	5	Administration and management of GE unit		
		□ Design & layout		
		□ Staffing,		
		□ Equipment, supplies,		
		□ Infection control; Standard safety measures		
		□ Quality Assurance:-Nursing audit –records /reports, Norms, policies and		
		protocols		
		□ Practice standards		
XIII	5	Education and training in GE care		
		□ Staff orientation, training and development,		
		□ In-service educationprogram,		
		Clinical teaching programs		

S.No.	Deptt./Unit	No. of Week	Total Hours
1	Diagnostic labs	2	60 Hours
2	Emergency and casualty	3	90 Hours
3	Liver transplant unit	1	30 Hours
4	GE Medical Ward	6	180 Hours
5	GE Surgical Ward	8	240 Hours
6	OT	2	60 Hours
7	ICU	4	120 Hours
8	Pediatric gastroenterology	2	60 Hours
9	Oncology	2	60 Hours
10	GE OPD	2	60 Hours
	Total	32 Weeks	960 Hours

Procedures Assisted

- 1. Endoscopy room Upper G.I. Endoscopy (Diagnotic and therapeutic).
- 2. Sigmoidoscopy
- 3. Colonoscopy
- 4. Polypectomy
- 5. Endoscopic retrograde cholangio pancreatiography (ERCP)
- 6. Liver biopsy
- 7. Percutaneous catheter drainage (PCD) of Pseudocystpancreas
- 8. Abdominal paracentesis
- 9. Percutaneous aspiration of liver abscess
- 10. GE Lab: PT, HbsAg, Markers A, B, C virus, CBP, ESR, Stool Test

Procedures Performed

- 1. History and Physical assessment
- 2. RT intubation / extubation / aspiration/suction
- 3. Gastric lavage and gavage
- 4. Bowel wash
- 5. Therapeutic Diets
- 6. Ostomy feeding
- 7. Stoma care
- 8. Monitoring vital parameters
- 9. Plan of inservice education programme for nursing staff and Class-IV employees
- 10. Counseling

CLINICAL SPECIALITY – II OBSTETRIC AND GYNAECOLOGICAL NURSING

Placement - II Year Hours of Instruction

Theory: 150 hrs Practical: 950 hrs Total: 1100 hrs

Course Description

This course is designed to assist the student in developing expertise and in-depth understanding in the field of Obstetric and gynecological Nursing. It will help the student to develop advanced nursing skills for nursing interventions in various obstetrical and gynecological conditions. It will further enable the students to function as midwifery nurse practitioner/ specialist, educator, manager and researcher in the field of obstetric and gynecological nursing.

Objectives

At the end of the course, the student will be able to:

- 1. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of women with obstetric and gynaecological conditions
- 2. Perform physical, psychosocial, cultural & spiritual assessment
- 3. Demonstrate competence in caring for women with obstetrical and gynaecological conditions
- 4. Demonstrate competence in caring for high risknewborn.
- 5. Identify and Manage obstetrical and neonatal emergencies as per protocol.
- 6. Practice infection control measures
- 7. Utilize recent technology and various diagnostic, therapeutic modalities in the management of obstetrical, gynecological and neonatal care.
- 8. Demonstrate skill in handling various equipments/gadgets used for obstetrical, gynaecological and neonatal care
- 9. Teach and supervise nurses and allied health workers.
- 10. Design a layout of speciality units of obstetrics and gynecology
- 11. Develop standards for obstetrical and gynaecological nursing practice.
- 12. Counsel women and families
- 13. Incorporate evidence based nursing practice and identify the areas of research in the field of obstetrical and gynaecological nursing
- 14. Function as independent midwiferynurse practitioner

Contents Outline

Unit	Hours	Content
I	25	 Management of problems of women during pregnancy Risk approach of obstetrical nursing care, concept &goals. Screening of high-risk pregnancy, newer modalities of diagnosis. Nursing Managementof Pregnancies at risk-due to obstetrical complication Pernicious Vomiting. Bleeding in early pregnancy, abortion, ectopic pregnancy, and gestational trophoblostic diseases. Hemorrhage during late pregnancy, ante partum hemorrhage, Placenta praevia, abruptio placenta. Hypertensive disorders in pregnancy, pre-eclampsia, eclampsia, Heomolysis Elevated liver enzyme LowPlatelet count (HELLP) Iso-immune diseases. Rh and ABO incompatibility Hematological problems in pregnancy. Hydramnios-oligohydramnios Prolonged pregnancy- post term, post maturity. Multiple pregnancies. Intra uterine infection & pain during pregnancy. Intra Uterine Growth Retardation(IUGR), Premature Rupture of Membrane(PROM), intra uterine death
II	15	Pregnancies at risk-due to pre-existing health problems Metabolic conditions. Anemia and nutritional deficiencies Hepatitis Cardio-vascular disease. Thyroid diseases. Epilepsy. Essential hypertension Chronic renalfailure. Tropical diseases. Psychiatric disorders Infections Toxoplasmosis Rubella Cytomegalo virus Herpes (TORCH); Reproductive Tract Infection(RTI);STD; HIV/AIDS, Vaginal infections; Leprosy, Tuberculosis Other risk factors: Age- Adolescents, elderly; unwed mothers, sexual abuse, substance use Pregnancies complicating with tumors, uterineanomalies, prolapse, ovarian cyst
III	15	Abnormal labour, pre-term labour & obstetrical emergencies Etiology, pathopyhsiology and nursing managementof • Uncoordinated uterine actions, Atony of uterus, precipitate labour, prolonged labour. • Abnormal lie, presentation, position compound presentation.

	ı			
		 Contracted pelvis-CPD; dystocia. Obstetrical emergencies Obstetrical shock, vasa praevia, inversion of 		
		uterus, amniotic fluid embolism, rupture uterus, presentation and		
		prolapse cord.		
		Augmentation of labour. Medical and surgical induction.		
		Version		
		Manual removal of placenta.		
		Obstetrical operation: Forceps delivery, Ventouse,		
		Caesarian section, Destructive operations		
		Genital tract injuries-Third degree perineal tear, VVF,RVF		
		□ Complications of third stage of labour:		
		Post partum Hemorrhage.		
		Retained placenta.		
IV	10	post partum complications		
		□ Nursing management of		
		Puerperal infections, puerperal sepsis, urinary applications, puerperal various thrombosis and		
		complications, puerperal venous thrombosis and pulmonary embolism		
		 Sub involution of uterus, Breast conditions, 		
		Thrombophlebitis		
		Psychological complications, post partumblues,		
İ		depression, psychosis		
V	25	High Risk Newborn		
		□ Concept, goals, assessment, principles.		
		□ Nursing management of		
		Pre-term, small for gestational age, post-mature infant, and baby of		
		diabetic and substance use mothers.		
		Respiratory conditions, Asphyxia neonatorum, neonatal apnoea		
		meconium aspiration syndrome, pneumo thorax, pneumo mediastinum		
		Icterus neonatorum.		
		Birth injuries.		
		Hypoxic ischaemic encephelopathy		
		Congenital anomalies.		
		Neonatal seizures.		
		Neonatal hypocalcaemia, hypoglycemia,		
		hypomagnesaemia.		
		Neonatal heart diseases.		
		Neonatal hemolytic diseases		
		• Neonatal infections, neonatal sepsis, opthalmia		
		neonatorum, cogenital syphilis, HIV/AIDS		
		Advanced neonatal procedures.		
		Calculation of fluid requirements.		
		• Hematological conditions – erythroblastosis fetalis,		
		hemorrhagic disorder in the newborn		
		Organization of neonatal care, services(Levels), transport, neonatal intensive care unit, organization and management of pursing services in NICU.		
		management of nursing services in NICU		
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VI	15	HIV/AIDS			
		□ HIV positive mother and her baby			
		□ Epidemiology			
		□ Screening			
		□ Parent to child transmission(PTCT)			
		□ Prophylaxis for mother and baby			
		□ Standard safety measures			
		□ Counseling			
		□ Breast feeding issues			
		□ National policies and guidelines			
		□ Issues: Legal,ethical, Psychosocial and rehabilitation			
		Role of nurse			
VII	25	Gynecological problems and nursing management			
		□ Gynecological assessment			
		Gynecological procedures			
		Etiology, pathophysiology, diagnosis andnursing			
		management ofMenstrual irregularities			
		Diseases of genital tract			
		Genital tract infections			
		Uterine displacement			
		Genital prolapse			
		Genital injuries			
		Uterine malformation			
		 Uterine fibroid, ovarian tumors, Breast carcinoma, Pelvic 			
		inflammatory diseases, reproductive tract malignancies,			
		hysterectomy – vaginal and abdominal.			
		• Sexual abuse, rape, trauma, assault			
VIII	5	Administration and management of obstetrical and			
		gynaecological unit			
		□ Design & layout			
		□ Staffing,			
		□ Equipment, supplies,			
		□ Infection control; Standard safety measures			
		□ Quality Assurance:-Obstetric auditing –records/reports, Norms,			
		policies and protocols			
		□ Practice standards for obstetrical and gynaecological unit			
IX	5	Education and training in obstetrical and gynaecological care			
		□ Staff orientation, training and development,			
		□ In-service educationprogram,			
		□ Clinical teaching programs.			

S.No.	Deptt./ Unit	No. of Week	Total Hours
1	Antenatal OPD including Infertility clinics/Reproductive medicine, Family welfare and post partum clinic / PTCT	6	180 Hours
2	Antenatal and Postnatal ward	6	180 Hours
3	Labour room	4	120 Hours
4	Neonatal Intensive Care Unit	3	90 Hours
5	Obstetric/Gynae Operation Theatre	3	90 Hours
6	Gynae Ward	4	120 Hours
7	CHC, PHC, SC	6	180 Hours
	Total	32 Weeks	960 Hours

Essential Obstetrical And Gynecological Skills

Procedure Observed

- Assisted Reproductive Technology procedures
- Ultra sonography
- Specific laboratory tests.
- Amniocentesis.
- Cervical & vaginal cytology.
- Fetoscopy.
- Hysteroscopy.
- MRI.
- Surgical diathermy.
- Cryosurgery.

Procedures Assisted

- Operative delivery
- Abnormal deliveries-Forceps application, Ventouse, Breech
- Exchange blood transfusion
- Culdoscopy.
- Cystoscopy
- Tuboscopy
- Laparoscopy.
- Endometrial Biopsy
- Tubal patent test
- Chemotherapy
- Radiation therapy
- Medical Termination of Pregnancy.
- Dilatation and Curettage

Procedures Performed

- History taking.
- Physical Examination-General
- Antenatal assessment. 20
- Pelvic examination
- Assessment of risk status.
- Assessment of Intra uterine foetal well-being.kick chart and foetal movement chart, Doppler assessment, Non Stress Test, Contraction stress test(Oxytocin challenge test)
- Universal precautions- Disposal of biomedical waste.
- Per Vaginal examination and interpretation (early pregnancy, labour, post partum).
- Utilization of Partograph
- Medical & Surgical induction(Artificial rupture of membranes).
- Vacuum extraction
- Conduct of delivery.
- Prescription and administration of fluids and electrolytes through intravenous route.
- Application of outlet forceps, delivery of breach Burns Marshall, Loveset manoeuvere
- Repair of tears and Episiotomy suturing.
- Vacuum extraction
- controlled cord traction, Manual removal of placenta, placental examination,
- Manual vacuum aspiration
- Postnatal assessment.- 20
- Management of breastengorgement
- Thrombophlebitis (white leg)
- Postnatal counseling.
- Reposition of inversion of uterus.
- Laboratory tests: Blood- Hb, Sugar, Urine-albumin, sugar
- Breast care, breast exam, and drainage breast abscess.
- Postnatal exercise.
- Assessment –New born assessment; physical and neurological, Apgar score, high-risk newborn, Monitoring neonates; Clinically and With monitors, Capillary refill time, Assessment of jaundice, danger signs
- Anthropometric measurement
- Neonatal resuscitation
- Gastric Lavage
- Care of newborn in multi channel monitor and ventilator.
- Care of newborn in radiant warmer and incubator.
- Kangaroo mother care.
- Assisting mother with exclusive Breast-feeding
- Feeding technique: Katori, spoon, naso/orogastric, Total Parenteral nutrition
- Assessement, calculation and administration of fluids and medications:
 - Oral
 - I.D.
 - I.M.
 - I.V.- Securing IV line, infusion pump

- Administration of drug per rectum
- Capillary blood sample collection.
- Oxygen therapy.
- Phototherapy.
- Chest physiotherapy.
- counseling Parental, bereavment, family planning, infertility etc
- Setting of operation theatre.
- Trolley and table set up for Obstetrical & gynaecoligical

operations.

- Pap smear.
- Vaginal smear.
- Insertion of pessaries,
- Insertion of IUD and removal.
- Teaching skills
- communication skills
- Prepare referral slips
- Pre transport stabilization
- Networking with other stake holders

CLINICAL SPECIALTY -II PEDIATRIC (CHILD HEALTH) NURSING

Placement : II Year

Hours of Instruction Theory 150 hours Practical 950 hours Total: 1100 hours

Course Description

CLINICAL SPECIALTY -II PEDIATRIC (CHILD HEALTH) NURSING

Placement : II Year Hours of Instruction
Theory 150 hours
Practical 950 hours

Total: 1100hours

Course Description

This course is designed to assist students in developing expertise and in- depth understanding in the field of Pediatric Nursing. It will help students to develop advanced skills for nursing intervention in various pediatric medical and surgical conditions. It will enable the student to function as pediatric nurse practitioner/specialist. It will further enable the student to function as educator, manager, and researcher in the field of Paediatric nursing

Objectives

At the end of the course the students will be able to:

- 1. Apply the nursing process in the care of ill infants to pre adolescents in hospital and community
- 2. Demonstrate advanced skills/competence in nursing management of children with medical and surgical problems
- 3. Recognize and manage emergencies in children
- 4. Provide nursing care to critically ill children
- 5. Utilize the recent technology and various treatment modalities in the management of high riskchildren
- 6. Prepare a design for layout and describe standards for management of pediatric units/hospitals
- 7. Identify areas of research in the field of pediatric nursing

Course Content

Unit	Hours	Content	
I	5	Introduction	
		□ Current principles, practices and trends in Pediatric Nursing	
		□ Role of pediatric nurse in various settings -Expanded and extended	
II	35	□ Pathophysiology,assessment(including interpretation of	
		various invasive and non-invasive diagnostic procedures), treatment	
		modalities and nursing intervention in selected pediatric medical	
		disorders	
		Child with respiratory disorders:	
		- Upper respiratory tract: choanal atresia, tonsillitis, epistaxis,	
		aspiration.	
		- Lower respiratory tract: Broncheolitis,	
		Bronchopneumonia, Asthma, cystic fibrosis • Child with gastro-intestinal disorders:	
		- Diarrheal diseases, gastro-esophageal reflux.	
		- Hepatic disorders: Hepatitis, Indian childhood cirrhosis,	
		liver transplantation.	
		- Malabsorption syndrome, Malnutrition	
		Child with renal/ urinary tract disorders: Nephrotic syndrome,	
		Nephritis, Hydronephrosis, hemolytic-uremic syndrome, kidney	
		transplantation	
		Child with cardio-vascular disorders: A coviral Phaymatic force, Phaymatic heart disease.	
		- Acquired: Rheumatic fever, Rheumatic heart disease,	
		 Congenital: Cynotic andacynotic Child with endocrine/metabolic disorders: Diabetes insipidus, 	
		Diabetes Mellitus – IDDM, NIDDM, hyper and hypo thyroidism,	
		phenylketonuria, galactosemia	
		Child with Neurological disorders: Convulsions, Meningitis,	
		encephalitis, guillian- Barre syndrome	
		Child with oncological disorders: Leukemias, Lymphomas,	
		Wilms' tumor, nephroblastomas, neuroblastomas,	
		Rhabdomyosarcoma, retinoblastoma, hepatoblastoma, bone	
		tumors	
		 Child with blood disorders: Anemias, thalassemias, hemophilia, polycythemia, thrombocytopenia, and 	
		disseminated intravascular coagulation	
		Child with skin disorders	
		Common Eye and ENT disorders	
		Common Communicable diseases	
III	35	□ Assessment(including interpretation of various invasive and	
		non-invasive diagnostic procedures), treatment modalities including	
		cosmetic surgery and nursing interventions in selected pediatric	
		surgical problems/ DisordersGastrointestinal system: Cleft lip, cleft palate and conditions	
		requiring plastic surgery, Tracheo esophageal	
		fistula/atresia, Hirschsprungs' disease/megacolon, malrotation,	
		intestinal obstruction, duodenal atresia,	

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	gastrochisis, exomphalus, anorectal malformation, omphalocele, diaphragmatic hernia		
•	Anomalies of the nervous system: Spina bifida,		
	Meningocele, Myelomeningocele, hydrocephalus		
•	Anomalies of the genito-urinary system: Hypospadias,		
	Epispadias, Undescended testes, Exstrophy bladder		
	Anomalies of the skeletal system		
•	Eye and ENT disorders		
•	 Nursing management of the child with traumaticinjuries: General 		
	principlesof managing Pediatric trauma		
	- Head injury, abdominal injury, poisoning, foreign body		
	obstruction, burns		
	- & Bites		
•	Child with oncological disorders: Solid tumors of childhood,		
	Nephroblastoma, Neuro blastoma, Hodgkin's/Non Hodgkin's		
	Lymphoma, Hepatoblastoma, Rhabdomyosarcoma		
•	Management of stomas, catheters and tubes		
•	Management of wounds and drainages		
10 Intens	sive care for pediatric clients		
	esuscitation, stabilization & monitoring of pediatric patients		
	natomical & physiological basis of critical illness ininfancy and		
ch	ildhood		
	re of child requiring long-term ventilation		
	□ Nutritional needs of critically illchild		
	1 / 1 1		
	Documentation		
NO TT: 1			
_	Risk Newborn oncept, goals, assessment, principles.		
	ursing management of		
•	Post-mature infant, and baby of diabetic and substance use mothers.		
•	Respiratory conditions, Asphyxia neonatorum, neonatal apnoea		
	meconium aspiration syndrome, pneumo thorax, pneumo		
	mediastinum		
•	Icterus neonatorum.		
•	Birth injuries.		
•	Hypoxic ischaemic encephelopathy		
•	Congenital anomalies.		
•	Neonatal seizures.		
•	Neonatal hypocalcaemia, hypoglycemia,		
	hypomagnesaemia.		
•	Neonatal heart diseases.		
•	Neonatal hemolytic diseases		
1 -	Neonatal infections, neonatal sepsis, opthalmia		
•	Neonatai infections, neonatai sepsis, optnaimia		
	neonatorum, cogenital syphilis, HIV/AIDS		
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	Re Re Ar Ch Ca Nu Le Int Do		

		 Hematological conditions – erythroblastosis fetalis, hemorrhagic disorder in the newborn Organization of neonatal care, services(Levels), transport, neonatal intensive care unit, organization and management of nursing services in NICU 	
VI	10	 Developmental disturbances and implications for nursing Adjustment reaction to school, Learning disabilities Habit disorders, speech disorders, Conduct disorders, Early infantile autism, Attention deficit hyperactive disorders (ADHD), depression and childhood schizophrenia. 	
VII	10	Challenged child and implications for nursing Physically challenged, causes, features, early detection& management Cerebral palsied child, Mentally challengedchild. Training & rehabilitation of challengedchildren	
VIII	5	Crisis and nursing intervention The hospitalized child, Terminal illness & death during childhood Nursing intervention-counseling	
IX	5	Drugs used in Pediatrics □ Criteria for dose calculation □ Administration of drugs, oxygen and blood □ Drug interactions □ Adverse effects and their management	
X	10	Administration and management of pediatric care unit Design & layout Staffing, Equipment, supplies, Norms, policies and protocols Practice standards for pediatric care unit Documentation	
XI	5	Education and training in Pediatric care Staff orientation, training and development, In-service educationprogram, Clinical teaching programs.	

Practical

Total = 960 Hours 1 Week = 30 Hours

• Field visits:

Field visits:

S. No.	Deptt./ Unit	No. of Week	Total Hours
1	Pediatric medicine ICU	4	120 Hours
2	Pediatric surgical ICU	4	120 Hours
3	NICU	4	120 Hours
4	Pediatric OT	2	60 Hours
5	Pediatric medicine ward	6	180 Hours
6	Pediatric surgery ward	6	180 Hours
7	Emergency/Casualty	4	120 Hours
8	Field visits*	2	60 Hours
	Total	32	960 Hours

^{*}Child care center, Anganwadi, play school, Special schools for challenged children, Juvenile court, UNICEF, Orphanage, Creche, SOS village

Essential

I. Procedures Observed:

- Echo cardiogram
- Ultrasound head
- ROP screening (Retinopathy of prematurity)
- Any other

II. Procedures Assisted

- Advanced neonatal life support
- Lumbar Puncture
- Arterial Blood Gas
- ECG Recording
- Umbilical catheterization arterial and venous
- Arterial B P monitoring
- Blood transfusion- exchange transfusion full and partial
- IV cannulation & therapy
- Arterial catheterization
- Chest tube insertion
- Endotracheal intubation
- Ventilation
- Insertion of long line
- Assist in surgery

III. Procedures Performed:

- Airway Management
- Application of Oro Pharyngeal Airway
- Oxygen therapy
- CPAP(Continuous Positive Airway Pressure)
- Care of Tracheostomy
- Endotracheal Intubation
- Neonatal Resuscitation
- Monitoring of Neonates clinically & with monitors, CRT(Capillary Refill Time), assessment of jaundice, ECG
- Gastric Lavage
- Setting of Ventilators
- Phototherapy
- Assessment of Neonates: Identification & assessment of risk factors, APGAR Score, gestation age, Anthropometric assessment, Weighing the baby, Newborn examination, detection of life threatening congenital abnormalities,
- Admission & discharge of neonates
- Feeding management of breast feeding, artificial feeding, expression of breast milk, OG(Orogastric) tube insertion, gavage feeding, TPN, Breast feeding counseling
- Thermoregulation- Axillary temperature, Kangaroo Mother Care (KMC), Use of Radiant warmer, incubators, management of thermoregulation & control
- Administration of Drugs: I/M, IV injection, IV Cannulation & fixation infusion pump, Calculation of dosages, Neonatal formulation of drugs, use of tuberculin/ insulin syringes, Monitoring fluid therapy, Blood administration.
- Procedures for prevention of infections: Hand washing, disinfections & sterilization, surveillance, fumigation
- Collection of specimens
- Setting, Use & maintenance of basic equipment: Ventilator, O2 analyzer, monitoring equipment, Photo therapy unit, Flux meter, Infusion pump, Radiant warmer, incubator, Centrifuge machine, Bilimeter, Refractometer, laminar flow

IV. Other Procedures:

CLINICAL SPECIALITY - II PSYCHIATRIC (MENTAL HEALTH) NURSING

Placement: II Year

Hours of Instruction Theory 150 hrs Practical 950 hrs Total: 1100Hours

CLINICAL SPECIALITY - II PSYCHIATRIC (MENTAL HEALTH) NURSING

Placement: II Year Hours of Instruction
Theory 150 hrs
Practical 950 hrs

Total: 1100Hours

Course Description

This course is designed to assist students in developing expertise and in-depth understanding in the field of Psychiatric Nursing. It will help students to develop advanced skills for nursing intervention in various psychiatric conditions. It will enable the student to function as psychiatric nurse practitioner/specialist. It will further enable the student to function as educator, manager, and researcher in the field of Psychiatric nursing

Objectives

At the end of the course the students will be able to:

- 1. Apply the nursing process in the care of patients with mental disorders in hospital and community
- 2. Demonstrate advanced skills/competence in nursing management of patients with mental disorders
- 3. Identify and care for special groups like children, adolescents, women, elderly, abused and neglected, people living with HIV/AIDS.
- 4. Identify and manage psychiatric emergencies.
- 5. Provide nursing care to critically ill patients with mental disorders
- 6. Utilize the recent technology and various treatment modalities in the management of patients with mental disorders
- 7. Demonstrate skills in carrying out crisis intervention.
- 8. Appreciate the legal and ethical issues pertaining to psychiatric nursing.
- 9. Identify areas of research in the field of psychiatric nursing.
- 10. Prepare a design for layout and describe standards for management of Psychiatric units/emergency units/hospitals
- 11. Teach psychiatric nursing to undergraduate students & in-service nurses.

Course Content

Unit	Hours	Content			
I	2	Principles and practice of Psychiatric nursing			
		□ Review			
II	10	Crisis Intervention			
		□ Crisis, Definition			
		□ Phases In The Development of A Crisis			
		 Types of Crisis; Dispositional , Anticipated Life Transitions Traumatic Stress, Maturational/ Development , Reflecting Psychopathology 			
		□ Psychiatric Emergencies and theirmanagement			
		☐ Grief and grief reaction			
		□ Crisis Intervention; Phases			
		□ Post traumatic stress disorder (PTSD)			
		□ Role of the Nurse			
III	4	Anger/ Aggression Management			
		☐ Anger and Aggression, Types, PredisposingFactors			
		□ Management□ Role of The Nurse			
		Role of The Nurse			
IV	5	The Suicidal Client			
		□ Epidemiological Factors			
		Risk Factors			
		 Predisposing Factors: Theories of Suicide-Psychological, Sociological ,Biological 			
		□ Nursing Management			
***	_				
V	5	Disorders of Infancy, Childhood, and Adolescence Mentally Challenged			
		□ Autistic Disorders			
		□ Attention-Deficit/Hyperactivity Disorder			
		□ Conduct Disorders, behavioural disorders			
		□ Oppositional Defiant Disorder			
		□ Tourette's Disorders□ Separation Anxiety Disorder			
		 Separation Anxiety Disorder Psychopharmacological Intervention and Nursing 			
		Management Management			
X/T	-	Delinium Demontic and Ammetic Discorders			
VI	5	Delirium, Dementia, and Amnestic Disorders Delirium			
		□ Dementia			
		□ Amnesia			
		□ Psychopharmacological Intervention and Nursing			
		Management			
VII	10	Substance-Related Disorders			
		□ Substance-Use Disorders			
		□ Substance-Induced Disorders			
		☐ Classes Of Psychoactive Substances			
		□ Predisposing Factors			

Unit	Hours	Content		
		 The Dynamics Of Substance-Related Disorders The Impaired Nurse 		
		Codependency		
		☐ Treatment Modalities For Substance-Related Disorders and Nursing Management		
VIII	10	Schizophrenia and Other Psychotic Disorders (CheckICD10) Nature of the Disorder Predisposing Factors		
		Cabinatania Taman		
		Schizophrenia - Types Disorganized Schizophrenia		
		Catatonic Schizophrenia		
		Paranoid Schizophrenia		
		Undifferentiated Schizophrenia		
		Residual Schizophrenia		
		□ Other Psychotic disorders		
		Schizoaffective Disorder Richard Research		
		Brief Psychotic Disorder String and String an		
		Schizophrenicform Disorder - But the But the Company of the		
		 Psychotic Disorder Due to a General MedicalCondition Substance-Induced Psychotic Disorder 		
		□ Treatment and Nursing Management		
IX	8	Mood Disorders		
		□ Historical Perspective		
		□ Epidemiology		
		 □ The Grief Response □ Maladaptive Responses To Loss 		
		☐ Maladaphive Responses To Loss ☐ Types Of Mood Disorders		
		□ Depressive disorders		
		□ Bipolar disorders		
		□ Treatment and Nursing Management		
X	8	Anxiety Disorders		
		□ Historical Aspects		
		□ Epidemiological Statistics		
	☐ How Much is too Much?			
		□ Types • Panic Disorder		
		Generalized AnxietyDisorder		
		• Phobias		
		Obsessive-Compulsive Disorder		
		Posttraumatic Stress Disorder		
		Anxiety Disorder Due to a General Medical Condition Substance Induced Anxiety Disorder		
		 Substance-Induced Anxiety Disorder Treatment Modalities 		
		□ Psychopharmacology & Nursing Management		
XI	5	Somatoform And Sleep Disorders		
		Somatoform Disorders		
		□ Historical Aspects		

Unit	Hours	Content				
		Epidemiological Statistics				
		Pain Disorder				
		Hypochondriasis				
		Conversion Disorder				
		Body Dysmorphic Disorder				
		□ Sleep Disorder				
		□ Treatment Modalities and Nursing Management				
XII	4	Dissociative Disorders and Management				
		□ Historical Aspects				
		Epidemiological Statistics Application of the Navine Management				
		☐ Application of the Nursing Management				
		☐ Treatment Modalities and Nursing Management				
XIII	4	Sexual And Gender Identity Disorders				
		□ Development Of Human Sexuality				
		□ Sexual Disorders				
		□ Variation In Sexual Orientation				
		□ Nursing Management				
XIV	4	Eating Disorders				
		□ Epidemiological Factors				
		□ Predisposing Factors : Anorexia Nervosa And Bulimia Nervosa obesity				
		□ Psychopharmacology				
		□ Treatment & Nursing Management				
XV	4	Adjustment and Impulse Control Disorders				
		 Historical and Epidemiological Factors Adjustment Disorders 				
		 Adjustment Disorders Impulse Control Disorders 				
		☐ Treatment & Nursing Management				
		Treatment & Ivarsing ividing chem				
XVI	4	Medical Conditions due to Psychological Factors				
		□ Asthma				
		□ Cancer□ Coronary Heart Disease				
		□ Coronary Heart Disease □ Peptic Ulcer				
		□ Essential Hypertension				
		☐ Migraine Headache				
		□ Rheumatoid Arthritis				
		□ Ulcerative Colitis				
		□ Treatment & Nursing Management				
XVII	8	Personality Disorders				
		□ Historical perspectives				
		□ Types Of Personality Disorders				
		Paranoid Personality Disorder				
		Schizoid Personality Disorder				
		Antisocial Personality Disorder				
		Borderline Personality Disorder				

		 Histrionic Personality Disorder Narcissitic Personality Disorder Avoidance Personality Disorder 			
		Avoidance Personality Disorder			
		•			
		Avoidance Personality Disorder Dependent PersonalityDisorder			
		<u> </u>			
		Obsessive-Compulsive Personality Disorder President Administration Personality Disorder			
		Passive-Aggressive Personality Disorders Light Control of the Control of th			
		☐ Identification, diagnostic, symptoms			
		□ Psychopharmacology □ Treatment & Nursing Management			

XVIII	8	The Aging Individual □ Epidemiological Statistics			
		□ Biological Theories			
		□ Biological Aspects of Aging			
		□ Psychological Aspects of Aging			
		□ Memory Functioning			
		□ Socio-cultural aspects of aging			
		Sexual aspects of aging			
		 Special Concerns of the ElderlyPopulation Psychiatric problems among elderlypopulation 			
		☐ Treatment & Nursing Management			
XIX	5	The person living with HIV Disease			
		 Psychological problems of individual HIV/AIDS Counseling 			
		□ Treatment & Nursing Management			
XX	5	Problems Related to Abuse or Neglect			
		□ Vulnerable groups, Women, Children, elderly, psychiatric patients,			
		under privileged, challenged			
		 □ Predisposing Factors □ Treatment & Nursing management-Counseling 			
XXI	7	Community Mental Health Nursing			
		□ National Mental Health Program- Community mental health program			
		□ The Changing Focus of care			
		-			
		· · · · · · · · · · · · · · · · · · ·			
		Secondary prevention			
		Tertiary Prevention			
		□ Community based rehabilitation			
	_				
XXII	5	Ethical and Legal Issues in Psychiatric/Mental Health			
XXII	5	Ethical and Legal Issues in Psychiatric/Mental Health Nursing Ethical Considerations			
XXI	7	Community Mental Health Nursing National Mental Health Program- Community mental health program The Changing Focus of care The Public Health Model The Role of the Nurse Case Management The community as Client Primary Prevention Populations at Risk Secondary prevention Tertiary Prevention Community based rehabilitation Ethical and Legal Issues in Psychiatric/Mental Health			

Unit	Hours	Content			
		 Nurse Practice Acts Types of Law Classification within Statutory and Common Law Legal Issues in Psychiatric/Mental HealthNursing Nursing Liability 			
XXIII	5	Psychosocial rehabilitation Principles of rehabilitation Disability assessment Day care centers Half way homes Reintegration into the community Training and support to care givers Sheltered workshops Correctional homes			
XXIV	5	Counseling Liaison psychiatric nursing Terminal illnesses-Counseling Post partum psychosis-treatment, care and counseling Death dying-Counseling Treatment, care and counseling – • Unwed mothers • HIV and AIDS			
XXV	5	Administration and management of psychiatric units including emergency units Design & layout Staffing, Equipment, supplies, Norms, policies and protocols Quality assurance Practice standards for psychiatric nursing Documentation			
XXVI	5	Education and training in psychiatric care Staff orientation, training and development, In-service education program, Clinical teaching programs.			

S.No.	Area of Posting	No. of Week	Total Hours
1	Acute Psychiatric Ward	4	120 Hours
2	Chronic Psychiatric Ward	4	120 Hours
3	De-addiction Unit	4	120 Hours
4	Psychiatric Emergency Unit	4	120 Hours
5	O.P.D (Neuro and psychiatric)	3	90 Hours
6	Child Psychiatric Unit and child guidance clinic	2	60 Hours
7	Post natal ward	1	30 Hours
8	Family Psychiatric Unit	2	60 Hours
9	Field visits	2	60 Hours
10	Rehabilitation	2	60 Hours
11	Community Mental Health Unit	4	120 Hours
	Total	32 Weeks	960 Hours

Essential Psychiatric nursing skills

Procedures Observed

- 1. Psychometric tests
- 2. Personality tests
- 3. Family therapy
- 4. Assisted
- 5. CT
- 6. MRI
- 7. Behavioral therapy.

Procedures Performed

- 1. Mental status examination
- 2. Participating in various therapies Physical; ECT,
- 3. Administration of Oral, IM, IV psychotropic drugs
- 4. Interviewing skills
- 5. Counseling skills
- 6. Communication skills
- 7. Psychoeducation
- 8. Interpersonal relationship skills
- 9. Community Survey for identifyingmental health problems
- 10. Rehabilitation therapy
- 11. Health education and life skills training.
- 12. Supportive psychotherapic skills
- 13. Group therapy
- 14. Milieu therapy
- 15. Social/Recreational therapy.
- 16. Occupational therapy.

CLINICAL SPECIALITY – II COMMUNITY HEALTH NURSING

Placement: II Year

Hours of Instruction Theory- 150 hours Practicals- 950 hours Total- 1100 hrs

Course Description

This course is designed to assist students in developing expertise and in-depth understanding in the field of community health nursing. It will help students to develop advanced skills for nursing intervention in various aspects of community health care settings. It will enable the student to function as community health Nurse practitioner/specialist. It will further enable the student to function as educator, manager and researcher in the field of community health nursing.

Objectives

At the end of the course the students will be able to:

- 1. Appreciate trends and issues related to community health Nursing- reproductive and child health, school health, Occupational health, international health, rehabilitation, geriatric and mental health.
- 2. Apply epidemiological concepts and principles in community health nursing practice
- 3. Perform community health assessment and plan healthprogrammes
- 4. Describe the various components of Reproductive and child health programme.
- 5. Demonstrate leadership abilities in organizing community health nursing services by using inter-sectoral approach.
- 6. Describe the role and responsibilities of community health nurse in various national health and family welfare programmes
- 7. Participate in the implementation of various national health and family welfare programme
- 8. Demonstrate competencies in providing family centered nursing care independently
- 9. Participate/Conduct research for new insights and innovative solutions to health problems
- 10. Teach and supervise nurses and allied health workers.
- 11. Design a layout of sub center/Primary health center/Community health cenre and develop standards for community health nursing practice.

Content Outlines

Unit	Hours	Content				
I	20	Epidemiology				
		 Epidemiology Introduction Concept, scope, definition, trends, History and development of modern Epidemiology Contribution of epidemiology Implications Epidemiological methods Measurement of health and disease: Health policies Epidemiological approaches Study of disease causatives Health promotion Levels of prevention Epidemiology of Communicable diseases Non-communicable diseases Regring and re-emerging diseases Epidemics National Integrated disease Surveillance Programme Health information system Epidemiology study and reports Role of Community health nurse 				
Unit II	40	2 77 7 2				

Unit	Hours	Content		
III	15	Introduction: definition, concepts, objectives,. Health assessment, Screening, identification, referral and follow up, Safe environment Services, programmes and plans- first aid, treatment of minor ailments Inter-sectoral coordination Adolescent health Disaster, disaster preparedness, and management Guidance and counseling School health records - maintenance and its importance Roles and responsibilities of community health nurse		
IV	15	International health Global burden of disease Global health rules to halt disease spread Global health priorities and programes International quarantine Health tourism International cooperation and assistance International travel and trade Health and food legislation, laws, adulteration of food Disaster management Migration International health agencies –World Health organizations, World health assembly, UNICEF, UNFPA, SIDA, US AID, DANIDA, DFID. AusAID etc International health issues and problems International nursing practice standards International health vis-a vis national health International health days and theirsignificance		
V	15	Education and administration Quality assurance Standards, Protocols, Policies, Procedures Infection control; Standard safety measures Nursing audit Design of Sub-Centre/Primary Health Centre/Community health center Staffing; Supervision and monitoring-Performance appraisal Budgeting Material management Role and responsibilities of different categories of personnel in community health Referral chain- community outreachservices Transportation Public relations Planning in-service educational programme and teaching		

Unit	Hours	Content			
		☐ Training of various categories of health workers- preparation of manuals			
VI	10	Geriatric Concept, trends, problems and issues Aging process, and changes Theories of ageing Health problems and needs Psycho-physiological stressors and disorders Myths and facts of aging Health assessment Home for aged-various agencies Rehabilitation of elderly Care of elderly Elderly abuse Training and supervision of care givers Government welfare measures Programmes for elderly- Role of NGOs Roles and responsibilities of Geriatric nurse in the			
VII	10	Rehabilitation Introduction: Concepts, principles, trends, issues, Rehabilitation team Models, Methods Community based rehabilitation Ethical issues Rehabilitation Council of India Disability and rehabilitation- Use of various prosthetic devices Psychosocial rehabilitation Rehabilitation of chronic diseases Restorative rehabilitation Role of voluntary organizations Guidance and counseling Welfare measures Role and responsibilities of community healthnurse			
Unit VIII	10	Community mental health Magnitude, trends and issues National Mental Health Program- Community mental health program The Changing Focus of care The Public Health Model Case Management- Collaborative care Crisis intervention Welfare agencies Population at Risk The community as Client Primary Prevention			

Unit	Hours	Content		
		 Secondary prevention Tertiary Prevention Community based rehabilitation Human rights of mentally ill Substance use Mentally challengedgroups Role of community health nurse 		
IX	15	Occupational health Introduction: Trends, issues, Definition, Aims, Objectives, Workplace safety Ergonomics and Ergonomic solutions Occupational environment- Physical, social, Decision making, Critical thinking Occupational hazards for different categories of people- physical, chemical, biological, mechanical, ,Accidents, Occupational diseases and disorders Measures for Health promotion of workers; Prevention and control of occupational diseases, disability limitations and rehabilitation Women and occupational health Occupational education and counseling Violence at workplace Child labour Disaster preparedness and management Legal issues: Legislation, Labour unions, ILO andWHO recommendations, Factories act, ESI act Role of Community health nurse, Occupational health team		

S.No.	Deptt./Unit	No. of Week	Total Hours
1	Urban and Rural community	17	510 Hours
2	School Health	3	90 Hours
3	International health	2	60 Hours
4	Administration(SC/PHC/CHC)	2	60 Hours
5	Occupational health	2	60 Hours
6	Community Mental Health	2	60 Hours
7	Home for aged and Hospice	2	60 Hours
8	Rehabilitation	2	60 Hours
	Total	32 Weeks	960 Hours

Categorisation of practical activities

Observed

- MCH office and DPHNO
- CHC/ First Referral Unit(FRU)
- Child guidance clinic
- Institute/Unit for mentally challenged
- District TB centre
- AIDS control society
- Filariasis clinic
- RCH clinic
- STD clinic
- Leprosy clinic
- Community based rehabilitation unit
- Cancer centers
- Palliative care
- Home of old age
- Mental health units
- De-addication centres
- School health services
- Industry
- Selected industrial healthcenters
- ESI unit
- Municipality/ corporation office

Assisted

- Laparoscopic sterilization
- Vasectomy
- All clinics related to RCH
- Monitoring of national health and family welfare programmes

Performed

- Conduct various clinics
- School health assessment.
- Health survey.
- Health assessment
- Drug administration as per the protocols
- Treatment of minor ailments
- Investigating outbreak of epidemic.
- Screening for leprosy, TB and non-communicable disease
- Presumptive and radical treatment for Malaria.
- Counselling
- Report writing
- Referrals
- Writing a project proposal
- Material management-requisition for indent, condemnation, inventory maintenance,
- Training and Supervision of various categories of personnel
- Liaison with NGO's

STAFFING PATTERN RELAXED TILL 2012

Qualifications & Experience Of Teachers Of College Of Nursing

Post, Qualification & Experience

Sr.

No.

- 1. Professor-cum-Principal
 - Masters Degree in Nursing
 - 10 years of experience and minimum of 5 years of teaching experience <u>Desirable</u>: Independent published work of high standard/doctorate degree / M.Phil.

2. Professor-cum-Vice Principal

- Masters Degree in Nursing
- 10 years of experience and minimum of 5 years of teaching experience <u>Desirable</u>: Independent published work of high standard/doctorate degree / M.Phil.

3. Reader / Associate Professor

- Master Degree in Nursing.
- 7 years of experience and minimum of 3 years teaching experience <u>Desirable</u>: Independent published work of high standard/doctorate degree / M.Phil.

4. Assistant Professor /Lecturer

- Master Degree in Nursing.
- 3 years experience

Pay scales- as per UGC scales