

# BHARATI VIDYAPEETH (DEEMED TO BE UNIVERSITY), PUNE

Faculty of Medical Sciences M.Sc. Nursing New Syllabus

# M.Sc. (Nursing) Revised Syllabus



# Bharati Vidyapeeth Deemed to be University College of Nursing Sangli, Pune and Navi Mumbai

Dr. (Mrs.) Nilima Rajan Bhore Dean, Faculty of Nag. / Principal BVDU, College of Nag. Sangli.



# BHARATI VIDYAPEETH (DEEMED TO BE UNIVERSITY)

### INTRODUCTION

Bharati Vidyapeeth which is the parent body of Bharati Vidyapeeth DeemedUniversity was established on 10 May 1964, by Dr. Patangrao Kadam with a widerobjective of contributing to intellectual awakening and social culturaltransformation through dynamic education. Under the imaginative, dynamic, andsocially committed leadership of the founder Dr. Patangrao Kadam, BharatiVidyapeeth Deemed University has made astonishing stride in the field ofeducation. The Vidyapeeth has so far established 156 educational institutionimparting education to the student's right from pre-primary stage to post graduatestage and Ph. D.

The ministry of human resources development (Department of Education, Government of INDIA) on the recommendation of University Grant Commission, New Delhi through their notification No.F. - 9-15/95 U.3 dated 26 April 1996 has declared the following institution of

Bharati Vidyapeeth at Pune as to be Deemed University.

- 1) Bharati Vidyapeeth Medical College, Pune
- 2) Bharati Vidyapeeth Dental and Hospital, Pune.
- 3) Bharati Vidyapeeth College of Ayurved, Pune
- 4) Bharati Vidyapeeth Homeopathic Medical College, Pune
- 5) Bharati Vidyapeeth College of Nursing, Pune.
- 6) Bharati Vidyapeeth Institute Yashwantrao Mohite College of Arts , Science and Commerce, Pune.
- 7) Bharati Vidyapeeth Institute New Law College, Pune.
- 8) Bharati Vidyapeeth Institute Social Science Center (M.S.W.), Pune
- 9) Bharati Vidyapeeth Institute Poona College of Pharmacy, Pune.
- 10) Bharati Vidyapeeth College of Engineering, Pune
- 11) Bharati Vidyapeeth Institute of Management & Entrepreneurship Development, Pune.
- 12) Bharati Vidyapeeth Institute Yashwantrao Chavan Institute of social sciencecentre, Pune
- 13) Bharati Vidyapeeth Institute Research and Development Centre in Applied Chemistry, Pune.
- 14) Bharati Vidyapeeth Institute College of Physical Education, Pune.
- 15) Bharati Vidyapeeth Institute of Environment Education and Research, Pune.
- 16) Bharati Vidyapeeth Rajiv Gandhi Institute of Information Technology, Pune.
- 17) Interactive Research School in Health Affairs (IRSHA).
- 18) Bharati Vidyapeeth Medical College & Hospital, Sangli
- 19) Bharati Vidyapeeth Medical College & Hospital, Mumbai.
- 20) Bharati Vidyapeeth Institute of Management & Research, New Delhi.
- 21) Bharati Vidyapeeth College of Architecture, Pune.
- 22) Bharati Vidyapeeth Institute of Hotel Management & Catering Technology, Pune.
- 23) Bharati Vidyapeeth Yashwantrao Mohite Institute of Management, Karad.
- 24) Bharati Vidyapeeth Institute of Management, Kolhapur

- 25) Bharati Vidyapeeth Institute of Management & Rural DevelopmentAdministration, Sangli.
- 26) Bharati Vidyapeeth Abhijit Kadam Institute of Management & Social Sciences, Solapur.
- 27) Bharati Vidyapeeth College of Engineering, New Delhi.
- 28) Bharati Vidyapeeth Deemed University Institute of Computer Application & Management, New Delhi.
- 29) Bharati Vidyapeeth Dental College & Hospital, Sangli.
- 30) Bharati Vidyapeeth Deemed University College of Nursing, Sangli.
- 31) Bharati Vidyapeeth Deemed University College of Nursing, Navi Mumbai

The association of Indian universities has also accepted this university as itsmember. This is probably the first only university having under its umbrelladiversified disciplines of professional and non-professional categories such as Medicine, Dentistry, Nursing, Ayurvedic, Homeopathic Medicine, Science, Commerce, Law and Humanities.

The degrees and diplomas awarded by this university have the same statusand recognition as those awarded by any Indian University recognized by the University Grant Commission, New Delhi. The University operates itseducational programme in accordance with the rules, regulations and guidelinesof various statutory Central Government Bodies like Medical Council of India, Dental council of India, Bar Council of India, Indian nursing Council, Central Council of Indian Medicine etc.

# COLLEGE OF NURSING, PUNE

Bharati Vidyapeeth's College of Nursing was established in the year 1992 withprior permission of University of Pune to which it was having affiliation. It isnow a constituent unit of Bharati Vidyapeeth University. This is the firstcollege of nursing in the Non- Government sector in Pune. Adequate facilities for clinical studies have been provided and the college is Dhankawadi, Pune.

The college has been approved by the Government of India, UGC and Maharashtra nursing council. The college has been approved by the Government of India, UGC and Maharashtra nursing council. The college hasseparate Hostel facilities for Boys and Girls. The Curriculum and Syllabus ismade and updated as per the present need in the Maharashtra nursing council, Indian nursing council and the need of society.

# COLLEGE OF NURSING, SANGLI.

Bharati Vidyapeeth Deemed University's College of Nursing, Sangli is startedin 2007 at Bharati Vidyapeeth Deemed University campus, Wanlesswadi, Sangli. The college is constituent unit of Bharati Vidyapeeth DeemedUniversity; The College has been started with permission from Government of Maharashtra, Maharashtra nursing council and Indian nursing Council. The college has 100 – intake capacity for B.Sc. (N), 30- intake capacity for P.B.B.Sc. (N) & 25- intake capacity for M.Sc. (N).

# COLLEGE OF NURSING, MUMBAI

Bharati Vidyapeeth College of Nursing, Navi Mumbai was established in the year 2009. The college has excellent infrastructure such as well-structured spacious class rooms, continuously updated laboratories, national and international books, journal and e-journals and hostels with all necessary amenities and facilities. The clinical teaching and training of students are conducted in the 392 bedded Navi Mumbai Municipal Corporation Hospital at Vashi. The students are also deputed for training to other reputed local hospitals in Mumbai such as Thane Regional Mental Hospital, TATA Cancer Hospital, and Wadia Hospital for specialized experience. The community Health experience is given in PHC at Wavanje village (Rural) and Juhugaon (Urban).

# **Programme outcomes: PO**

PO Sr. No	Programme outcomes
	PG programme:
PO <sub>1</sub>	Utilize/apply the concepts, theories and principles of nursing science
PO <sub>2</sub>	Demonstrate advance competence in practice of nursing
PO <sub>3</sub>	Practice as a nurse specialist.
PO <sub>4</sub>	Demonstrate leadership qualities and function effectively as nurse educator and manager.
PO <sub>5</sub>	Demonstrate skill in conducting nursing research, interpreting and utilizing the findings from health related research.
PO <sub>6</sub>	Demonstrate the ability to plan and effect change in nursing practice and in the health care delivery system.
PO <sub>7</sub>	Establish collaborative relationship with members of other disciplines
PO <sub>8</sub>	Demonstrate interest in continued learning for personal and professional advancement.

# Mapping of course outcome with PO and PSO

COURSE Name and Placement	COURSE OUTCOMES	Programme Specific Objectives	Mapping of course outcome with PO and PSO
NURSING EDUCATION Theory 150 Hours Practical 150 Hours Total: 300 Hours	Placement: First Year  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.	philosophies, trends in	

		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.	
ADVANCE NURSING PRACTICE Theory 150 Hours	The course is designed to develop an understanding of concepts and constructs of theoretical basis of	Appreciate and analyze the development of nursing as a profession.	
Practical 200 Hours Total : 350 Hours	advance nursing practice and critically analyze different theories of nursing and other disciplines.	2. Describe ethical, legal, political and economic aspects of health care delivery and nursing practice.	
	-	3. Explain bio- psycho- social dynamics of health, life style and health care delivery	

		T	
		system.	
		4. Discuss concepts, principles, theories, models, approaches relevant to 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.	
CLINICAL SPECIALITY – I MEDICAL SURGICAL NURSING Theory: 150 Hours Practical: 650 Hours Total: 800 Hours	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	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.	

	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.	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.	
		<ul> <li>9. Appreciate the legal &amp; ethical issues relevant to Medical – Surgical Nursing.</li> <li>10. Prepare a design for layout and management of Medical – Surgical Units.</li> </ul>	
		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.	
CLINICAL	This course is designed to	14. Teach Medical – Surgical Nursing to undergraduate nursing students & in-service nurses.  At the end of the course the	
SPECIALITY-I OBSTETRIC AND GYNAECOLOGICAL NURSING Theory: 150 Hours.	This course is designed to assist students in developing expertise and in-depth understanding in the field of Obstetric and Gynaecological Nursing. It	students will be able to:  1. Appreciate the trends in the field of midwifery, obstetrics and gynaecology as a speciality.	
Practical: 650 Hours. Total: 800 Hours.	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,	<ul><li>2. Describe the population dynamics and indicators of maternal and child health</li><li>3. Describe the concepts of biophysical, psychological and spiritual aspects of</li></ul>	

	manager, and researcher in the field of Obstetric and Gynaecological nursing	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	
CLINICAL SPECIALTY –I CHILD HEALTH (PAEDIATRIC) NURSING	This course is designed to assist students in developing expertise and in- depth understanding in the field of Pediatric	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	

Theory 150 Hours Practical 650 Hours Total: 800 Hours	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.	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 pediatric and 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/neonatal nursing	
		12. Recognize the role of pediatric nurse practitioner and as a member of the pediatric and neonatal health team	
		13. Teach pediatric nursing to undergraduate students & inservice nurses	

# CLINICAL SPECIALITY – I MENTAL HEALTH (PSYCHIATRIC) NURSING

Placement : 1st Year Course Description

Hours of Instruction Theory

150 hours

Practical 650 hours Total :

800 hours

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 behaviour.
- 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

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# **Contents**

Sr. No.	Contents	Page No.
1	Philosophy	13
2	Aim and Objective	13
3	Admission Requirements & Admission Procedure	13
4	Course Duration and Course Instructions	14
5	Subjects for Examination	14
6	Evaluation Scheme	16
7	Nursing Education	19
8	Advance Nursing Practice	
9	Nursing Research and Statistics	
	Paper I – Nursing Research	33
	Paper II- Statistics	39
10	Clinical Speciality I	
	<ol> <li>Community Health Nursing</li> </ol>	43
	ii. Mental Health Nursing	49
	iii. Obstetric and Gynecological Nursing	56
	iv. Child Health Nursing	65
	v. Medical Surgical Nursing	72
11	Nursing Management	83
12	Clinical Speciality II	
	i) Community Health Nursing	91
	ii) Mental Health Nursing	97
	iii) Obstetric and Gynecological Nursing	107
	iv) Child Health Nursing	115
	v) Medical Surgical Nursing	_
	a. Cardiovascular - Thoracic Nursing	124
	b. Neurosciences Nursing	133
	c. Oncology Nursing	142
	d. Critical Care Nursing	153
	e. Nephro-Urology Nursing	166
	f. Orthopedic Nursing	175
	g. Gastroenterology Nursing	183
13	Annexture I –Formats for Practical Examination	193

# **Philosophy:**

# M.Sc. Nursing program: Indian Nursing Council

National Health Policy (NHP) 2002 emphasis the need to prepare nurses to function in super Specialty areas who are required in tertiary care institution, entrusting some limited public health function 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 acute shortage of nursing faculty in undergraduate and post graduate nursing programme in India. Post graduate programme is essential to prepare nurses to improve the quality of nursing education and practice in India.

Post graduate programme in nursing built upon and extend competence acquired at the graduate level, emphasis 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 field 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 lifelong learning which fosters improvement of quality of care.

# AIM:

The aim of postgraduate programme in Nursing is to prepare graduate to assume the responsibility as nurse specialists, consultants, educators, administrators in a wide variety of professional settings.

# **OBJECTIVES:**

On Completion of Two years Masters in Nursing Programme, the graduates are able to:

- 1. Utilize/apply the concepts, theories and the 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 conduction nursing research, interpreting and utilizing the finding 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 Demonstrate interest in continued learning for personal and professional advancement.

# **ADMISSION REQUIREMENTS AND PROCEDURE:**

- 1. The candidate should be a registered nurse and registered midwife with any state nursing council in India.
- The minimum educational requirement shall be the passing of B.Sc. Nursing / B.Sc. Nursing Honors / Post Basic B.Sc. nursing /B.Sc. nursing through distance learning (Recognized by INC) with minimum of 55% of aggregate marks with relaxation of 5% marks for reserved class candidates.
- 3. Minimum ONE year of work experience after Basic B.Sc. Nursing/B.Sc./Nursing Honors.
- 4. Minimum ONE year of work experience prior or after Post Basic B.Sc. nursing.
- 5. Candidate shall be medically fit.

# **COURSE DURATION: TWO YEARS**

# **COURSE OF STUDY: FIRST YEAR**

Sr. No.	Subject	Theory Hours	Laboratory Hours	Clinical Hours	Total Hours
1	Nursing Education	150	00	150	300
2	Advance Nursing Practice	150	00	210	360
3	Nursing Research and Statistics*	150	100*	00	250
4	Clinical Speciality I	150	00	660	810
	Total Hours	600	100*	1020	1720

\*Sub Distribution of Hours for the subject Nursing Research and Statistics

Paper No.	Subject	Theory Hours	Laboratory Hours	Clinical Hours	Total Hours
I	Nursing Research	90	100*	00	190
II	Statistics	60	00	00	60

<sup>\*</sup> Laboratory Hours of Nursing Research to be utilized for preparation and presentation of Research Proposal.

# **SECOND YEAR**

Sr. No.	Subject	Theory Hours	Laboratory Hours	Clinical Hours	Total Hours
1	Nursing Management	150	00	150	300
2	Nursing Research and Statistics (Dissertation)	00	00	300	300
3	Clinical Speciality II	150	00	960	1110
	Total Hours	300	00	1410	1710

In addition to this - Educational Visit 2 weeks

Minimum Clinical Hours are prescribed here. Institute may plan more clinical hours to facilitate hand on training.

# LIST OF SUBJECTS FOR EXAMINATIONS

# **FIRST YEAR:**

# Theory:

- Nursing Education
- Advance Nursing Practice
- Nursing Research and Statistics
- Clinical Speciality I (One from the following)
  - a) Community Health Nursing
  - b) Mental Health Nursing
  - c) Child Health Nursing
  - d) Obstetric and Gynecological Nursing
  - e) Medical Surgical Nursing

# **Practical:**

- Nursing Education
- Clinical Speciality I (One from the following same as opted for theory)
  - a) Community Health Nursing
  - b) Mental Health Nursing
  - c) Child Health Nursing
  - d) Obstetric and Gynecological Nursing
  - e) Medical Surgical Nursing

# **SECOND YEAR:**

# Theory:

- Nursing Management
- Clinical Speciality II( One of the following as selected in first year)
  - a) Community health Nursing
  - b) Mental Health Nursing
  - c) Child Health Nursing
  - d) Obstetric and Gynecological Nursing
  - e) Medical Surgical Nursing (Any one sub specialty from the following as decided by the Institution) (i.e. Sub specialty of Medical Surgical Nursing)
    - i. Cardiovascular and Thoracic Nursing
    - ii. Critical Care Nursing
    - iii. Oncology Nursing
    - iv. Neurosciences Nursing
    - v. Nephro Urology Nursing
    - vi. Orthopedic Nursing
    - vii. Gastro Enterology Nursing

### **Practical:**

- Clinical Speciality II (One among the following as selected in first year)
  - a) Community health Nursing
  - b) Mental Health Nursing
  - c) Child Health Nursing
  - d) Obstetric and Gynecological Nursing
  - e) Medical Surgical Nursing (Sub specialty as decided by the Institution)
- Viva Voce on Dissertation (Nursing Research and Statistics)

# **SCHEME OF EVALUATION**

- 1. The candidate will be evaluated by:
  - Formative Evaluation by way of assignments and conducting TWO (one at the end of each term) Internal Assessment Examinations by Examination Cell.
  - Summative Evaluation by the University at the end of academic year. (After completion of Preliminary Examination).
- 2. Obtaining 50% marks as Internal Assessment is prerequisite for admission to University Examination.
- 3. Minimum 80% attendance is mandatory for appearing for University examination. However, the candidate has to compensate 100% of his/her absence in practical/clinical before award of degree.
- 4. A candidate has to pass in theory and practical examination separately. If the candidate fails in theory or practical examination, he/she has to **re appear** for both the examinations.
- 5. The candidate shall not be permitted to appear for subsequent higher examination conducted by the University unless he/she has passed previous university examination.
- 6. Maximum number of candidates for practical examination may be as per University norms, however should not exceed 06 candidates per day for clinical specialty.
- 7. All practical examinations must be held in the respective clinical areas.
- 8. One internal and one external examiner should jointly conduct practical examination for each candidate.
- 9. Minimum passing marks in all subjects are 50%.
- 10. For calculation of Internal Assessment Marks for Theory and Practical 50% of Internal Assessment Marks from Assignments and 50 % from Examinations conducted in whole year shall be taken together as Internal Assessment.
- 11. While calculating Internal Assessment Marks, any fraction of marks shall be rounded off to higher complete number.
- 12. Appearing for Preliminary examination is prerequisite for eligibility to appear for final examination.
- 13. A candidate who fails in examination shall be entitle for three attempts (including first attempt), however the maximum period to complete the course successfully should not exceed four years.

# SCHEME OF UNIVERSITY EXAMINATION

### FIRST VEAR.

LIK	OI YEAK:						
Sr.	Subject	Passing	Sub Head	Marks	Maximum	Minimum	Distinction
No.		Head		Distribution	Marks	to Pass	
			Theory	75	100	50	
1	Nursing Education	I	Internal Assessment	25	100	30	150
1	Nuising Education	1	Practical	50	100	50	130
			Internal Assessment	50	100		
2	Advance Nursing Practice	I	Theory	75	100	50	75
			Internal Assessment	25			13
3	Nursing Research &	т	Theory	75	100	50	75
3	Statistics*	I	Internal Assessment	25	100	30	75
			Theory	75	100	50	
4	Clinical Speciality I*	I	Internal Assessment	25	100	50	225
4	Clinical Speciality I*		Practical	100	200	100	223
			Internal Assessment	100			

# Division of Marks – Nursing Research and Statistics\*

Sr.	Subject	Paper	Sub Head	Marks Distribution	Maxim, Marks
No.	3	- ··· - ··			
		Paper I – Nursing Research	Theory	50	65
2	Nursing Research		Internal Assessment	15	0.3
3	and Statistics*	Paper II – Statistics	Theory	25	25
			Internal Assessment	10	33

<sup>\*</sup>Note: Paper I- Nursing Research and Paper II- Statistics to be amalgamated as a ONE PASSING HEAD (subject) and for Entry on the Mark sheet.

# FINAL YEAR:

	ID I DAIK,		1	1	1		
Sr.	Subject	Passing	Sub Head	Marks	Maximum	Minimum	Distinction
No.		Head		Distribution	Marks	to Pass	
1	Nursing Management	I	Theory	75	100	50	75
1	Thursing Management		Internal Assessment	25	100	50	75
		I	Theory	75	100	50	
2	Clinical Consciolity II*		Internal Assessment	25	100	50	225
2	Clinical Speciality II*		Practical	100	200	100	223
			Internal Assessment	100	200	100	
			Internal Assessment	50			
			Dissertation Evaluation	50	100	50	
	Dissertation & Viva		(External Examiner)	30			
3	Voce** (Nursing		Viva Voce – Internal	50			150
	Research and Statistics)		Examiner	30	100	50	
			Viva Voce – External	50	100	30	
			Examiner	30			

<sup>\*\*</sup> Acceptance of Dissertation by External Examiner is prerequisite for appearing for examination.

# 1<sup>st</sup> Year M.Sc. Nursing

# Subject No.1 NURSING EDUCATION

Total: 300 hours Theory: 150 hours Practical: 150 hours

# AIM:-

This course is designed to assist students to develop a broad understanding of fundamental principles, concepts, trends, and issues related to 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 programmes.

### **OBJECTIVES: -**

At the end of the course, students are able to:

- Explain the aim of education, philosophies, trends in education and health: its impacts on nursing education.
- Describe the teaching learning process
- Prepare and utilize various instructional media and methods in teaching learning process.
- Demonstrate competency in teaching using various instructional strategies.
- Critically analyze the existing nursing educational programmes, their problems, issues and future trends.
- Describe the process of curriculum development, and the need and methodology of curriculum change, innovation and integration.
- Plan and conduct continuing nursing educational programmes.
- Critically analyze the existing teacher preparation program in nursing.
- Demonstrate skill in guidance and counseling.
- Describe the problems and issues related to administration of nursing curriculum including selection and organization of clinical experience.
- Explain the development of standards and accreditation process in nursing education programs.
- Identify research priorities in nursing education.
- Discuss various models of collaboration in nursing education and services.
- Explain the concept, principles, steps, tools, and techniques of evaluation.
- Construct, administer and evaluate various tools for assessment of knowledge, skills and attitude.

# **COURSE CONTENT:**

### **Unit I -Introduction:**

- Education Definition, aims, concepts, philosophies& their education implications,
- Impact of Social, economical, political & technological changes on education:
- Professional education.
- Current trends and issues in education.
- Educational reforms and National Educational policy.
- Trends in development of nursing education in India.

# **Unit II -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(sociodrama), clinical teaching methods, programmes instruction, self directed learning (SDL), micro teaching, computer assisted instruction (CAI),computer assisted learning

# **Unit III -Instructional media and methods:**

- Key concepts in the selection and use of media in education
- Online methods of teaching and learning
- Developing learning resource material using different media
- Instructional aids types, uses, selection, preparation, utilization.
- Teacher's role in procuring and managing instructional Aid Project and non-projected aids, multimedia, videotele conferencing etc.

# **Unit IV - 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 referenced evaluation.

# Unit V- Standardized and non-standardized tests:

- Meaning, characteristics, objectivity, validity, reliability, usability, norms, construction of test 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.

# **Unit VI -Administration, Scoring and Reporting:**

- Administering a test; scoring, grading versus marks
- Objective tests, scoring essay test, methods of scoring, Item analysis.

# **Unit VII-Standardized Tools:**

• Test of intelligence aptitude, interest, personality, achievement, socio-economic status scale, test for special mental and physical abilities and disabilities.

# **Unit VIII-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 program.

# **Unit IX -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.

# **Unit X - 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.

# **Unit XI - Teacher preparation:**

- Teacher roles & responsibilities, functions, characteristics, competencies, qualities, Preparation of professional teacher.
- Organizing professional aspects of teacher preparation program.
- Evaluation : self and peer
- Critical analysis of various programs of teacher education in India.

# **Unit XII -Guidance and counseling:**

- Concept, principles, need, difference between guidance and counseling, trends and issues.
- 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.

# **Unit XIII -Administration of Nursing Curriculum:**

- Role of curriculum coordinator planning, implementation and evaluation.
- Evaluation of educational programs in nursing course and program.
- Factors influencing faulty 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.

# **Unit XIV - Management of Nursing Educational Institutions:**

- Planning, organizing, staffing, budgeting, recruitment, discipline, public relation, performance appraisal, welfare services, library
- 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.

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# **NURSING EDUCATION**

Unit No.		Contents with distributed hours				
with total hours	Objectives	Must know	Desirable to know	Nice to know		
I (6 hours)	At the end of unit students are able to Knowledge: Understand educational aims concepts, and philosophy education. Understand and describe current trends in general and professional education, and national educational policy. Skill: Write philosophy and educational objectives for nursing education. Attitude: Incorporate changes in international professional education in Indian scenario and contribute in individual and personal development of student.	<ul> <li>Education Definition, aims, concepts, philosophy &amp; their education implications. (1 hours)</li> <li>Impact of Social, economical, political &amp; technological changes on education. (1 hours)</li> <li>Professional education. (1 hours)</li> </ul>	<ul> <li>Current trends and issues in education. (1 hours)</li> <li>Educational reforms and National Educational policy. (1 hours)</li> </ul>	Trends in development of nursing education in India (1 hours)		
II (15 hours)	At the end of unit students are able to Knowledge: Understand and describe the concept of teaching learning theories, leadership and educational aims and objectives.  Know types of domains, computer based education, and outcome based education.  Skill: Prepare aims and objectives for nursing education.  Attitude: Incorporate this knowledge with teaching activities.	<ul> <li>Concepts of teaching and learning. (2hours)         <ul> <li>Definition, theories of teaching and learning, relationship between teaching and learning. (2 hours)</li> </ul> </li> <li>Educational aims and objectives; types, domains, levels, elements and writing of educational objectives. (2 hours)</li> <li>Instruction strategies- Lecture, discussion, demonstration, simulation, laboratory, seminar, panel, symposium, problem solving, problem based learning (PBL),workshop, project, role – play (sociodrama),clinical teaching methods, programmes instruction, self directed learning (SDL),micro teaching, computer assisted instruction (CAI),computer assisted learning (CAL) (5 hours)</li> </ul>	Competency based education(CBE) and outcome based education(OBE) (2 hours)     Instructional design: Planning and designing the lesson, writing lesson plan: meaning, its need and importance, formats. (2 hours)			
III (6 hours)	At the end of unit students are able to <b>Knowledge:</b> Know the importance of selection of media in education. <b>Skill:</b> Select appropriate media for teaching learning process.		<ul> <li>Key concepts in the selection and use of media in education.(2 Hrs)</li> <li>Developing learning resource material using different media</li> <li>Instructional aids – types, uses,</li> </ul>	Teacher's role in procuring and managing instructional Aid —     Project and non-projected aids,		

	<b>Attitude:</b> Incorporate day today's teaching learning activities.			selection, preparation, utilization. (2 hours)	multimedia, video-tele conferencing etc.(2 Hrs
IV (8 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand meaning, process, purpose, and problem, and evaluation and measurement and different types of assessment.  Skill: Prepare different types of evaluation Performa.  Attitude: Incorporate with the day today activities for better learning	<ul> <li>Concept and nature of measurement and evaluation, meaning, process, purposes, problems in evaluation and measurement. (2 hours)</li> <li>Principles of assessment, formative and summative assessment – internal assessment external examination, advantages and disadvantages.(4 Hrs)</li> </ul>	•	Criterion and norm referenced Evaluation.(2 hours)	
V (16 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand standardized and non standardized tests. <b>Skill:</b> Prepare different types of questions and rating scales for day to day teaching and learning process. <b>Attitude:</b> Incorporate with the day today teaching and learning for the benefit of individual learners.	<ul> <li>Meaning, characteristics,</li> <li>objectivity, validity, reliability, usability, norms, construction of test (2 hours)</li> <li>Essay, short answer questions and multiple choice questions. (2 hours)</li> <li>Rating scales, checklist, OSCE/OSPE (Objective structured clinical / practical examination) (3 hours)</li> </ul>	•	Differential scales, and summated scales, sociometry, anecdotal record, attitude scale, critical incident technique. (3 hours) Question bank-preparation, validation, moderation by panel, utilization. (3 hours) Developing a system for maintaining confidentiality.(3Hrs)	
VI (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand administration scoring and reporting of test. <b>Skill:</b> Prepare a test and scoring and analysis. <b>Attitude:</b> Incorporate with the day today teaching and learning process.	<ul> <li>Administering a test; scoring, grading versus marks.(5 hours)</li> <li>Objective tests, scoring essay test, methods of scoring, Item analysis. (5 hours)</li> </ul>			
VII (12 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand standardized tools <b>Skill: Prepare</b> for the teaching learning process. <b>Attitude:</b> Incorporate with the day today teaching and learning process.	Test of intelligence aptitude, interest, personality, achievement, socio-economic status scale, test for special mental and physical abilities and disabilities (12 hours)			
VIII (8 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand different educational programmes in Nursing in India <b>Skill:</b> Prepare proposals for different	<ul> <li>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</li> </ul>		Perspectives of nursing education: Global and national. (3 hours)	

	programmes.  Attitude: Incorporate with the day today teaching and learning process	Practitioner programs.(5 hours)		
IX (12 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand continuing education in nursing and its different aspects <b>Skill:</b> Prepare programmes in nursing. <b>Attitude:</b> Incorporate with the day today teaching and learning process to improve individual student's knowledge.	<ul> <li>Concepts – Definition, importance, need scope, principles of adult learning, assessments of learning needs, priorities, resources.(4 hours)</li> <li>Program planning, implementation and evaluation of continuing education programs. (7 hours).</li> </ul>	Research in continuing education,     Distance education in nursing.     (1 hour)	
X (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand curriculum development and its philosophy evaluation strategy process of curriculum change <b>Skill:</b> Prepare curriculum for different nursing courses. <b>Attitude:</b> Incorporate with the day today nursing education for the benefit of nursing students.	<ul> <li>Definition, curriculum determinants, process and steps of curriculum development, Curriculum models, Types and framework. (2 hours)</li> <li>Formulation of philosophy, objectives, selection and organization of learning experiences; master plan, course plan, unit plan.(4 hours)</li> <li>Evaluation strategies.(2 hours)</li> </ul>	<ul> <li>Process of curriculum change, role of students, faculty, administrators, statutory bodies and other stakeholders.</li> <li>Equivalency of courses: Transcripts, credit system.( 2 Hrs)</li> </ul>	
XI (08 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand roles responsibilities qualities and preparation of professional teacher <b>Skill:</b> Acquire the qualities for teacher and teaching. <b>Attitude:</b> Incorporate with the day today nursing education for the benefit of nursing students.	<ul> <li>Teacher – roles &amp; responsibilities, functions, characteristics, competencies, qualities. (2 hours)</li> <li>Preparation of professional teacher.         Organizing professional aspects of teacher preparation program. (3 hours)     </li> </ul>	<ul> <li>Evaluation: self and peer.         <ul> <li>(1 hour)</li> </ul> </li> <li>Critical analysis of various programs of teacher education in India.(2 hours)</li> </ul>	
XII (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand roles different aspects of guidance and counseling along with techniques of professional preparations <b>Skill:</b> Acquire the knowledge for self preparation.	<ul> <li>Concept, principles, need, difference between guidance and counseling, trends and issues.(3 hours)</li> <li>Guidance and counseling services: diagnostic and remedial.(2 hours)</li> <li>Coordination and organization of services.</li> <li>Techniques of counseling: Interview, case work, characteristics of counselor, problems</li> </ul>	<ul> <li>Professional preparation and training for counseling.</li> <li>(2 hours)</li> </ul>	

	Attitude: Incorporate with the day today teaching learning process for improving knowledge of the students	in counseling.(2 hours)		
XIII (15 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand role of curriculum evaluation of educational of programmes in nursing education <b>Skill:</b> Prepare the plan and implement the curriculum effectively.  Attitude: Incorporate with the day today teaching learning process for improving knowledge of the students.	<ul> <li>Role of curriculum coordinator – planning, implementation and evaluation.(2 hours)</li> <li>Concept of faculty supervisor (dual) position. (2 hours)</li> <li>Curriculum research in nursing.(2 hours)</li> <li>Different models of collaboration between education and service.(3Hrs)</li> </ul>	<ul> <li>Evaluation of educational programs in nursing course and program. (3 hours)</li> <li>Factors influencing faulty staff relationship and techniques of working together.(3 hours)</li> </ul>	
XIV (14 hours)	At the end of unit students are able to  Knowledge: Understand the management of nursing education institutions.  Understand the orientation and accreditation and role of statutory bodies, union's & professional associations in nursing education  Skill: Prepare the plan to organize staffing and budgeting.  Prepare and maintain standards in nursing education.  Attitude: Incorporate with the day today teaching learning process for improving knowledge of the students.  Incorporate with the day today teaching learning process for improving knowledge of the students	<ul> <li>Planning, organizing, staffing, budgeting, recruitment, discipline, public relation, performance appraisal, welfare services, library services, hostel.         <ul> <li>(10 hours)</li> </ul> </li> <li>Development and maintenance of standards and accreditation in nursing education programs. (2 hours)</li> <li>Role of Indian Nursing Council, State Registration Nursing Councils, Boards and University. (1 hours)</li> </ul>	Role of Professional associations and unions. (1 hours)	

# **DISTRIBUTION OF LABORATORY HOURS:**

Unit numbers	Lab hours	Unit numbers	Lab hours	Unit numbers	Lab hours	
II	40	VII	06	XI	06	
III	10	VIII	08	XII	05	
V	10	IX	40	XIII	10	
VI	10	X	00	XV	05	
TOTAL	70	TOTAL	54	TOTAL	26	
GRAND TOTAL						

Teaching Strategy: - Lectures -150 hrs

Lab hours -150 hours

Teaching Methods: - Lecture cum discussion, Seminar, Panel discussion, Symposium, Group Discussion, Written assignments, Practice Teaching.

A.V. Aids: - Over head Projector, L.C.D, Computer assisted learning, Flip charts, Posters, Black Board, Computer assisted learning

# **ASSIGNMENTS:**

# THEORY:

Sr.	Assignment	No./	Marks per	Total
No.		Quantity	Assignment	Marks
1	Seminar	One	1X50	50
2	Preparation of Teaching –Learning Material (Group Work)	One	1X50	50
3	Developing Various Types of Evaluation Tools (Group	One	1X50	50
	Work			
4	Preparation of Blue Print, Unit Plan, Master Plan & Rotation	One	1X50	50
	Plan (Group Work)			
5	Preparation of Annotated Bibliography	One	1X25	25
			Total Marks	225

Sr.	Assignment	No./	Marks per	Total
No.		Quantity	Assignment	Marks
1	Class Room Practice Teaching	Four	1X50	200
2	Demonstration Practice Teaching	Four	1X50	200
3	Microteaching	Two	1X25	50
			Total Marks	450

# **Practical:**

# LIST OF RECOMMENDED BOOKS:-

- Aggrawal J.C, Principles, methods &techniques of teaching.
- Basavanthappa B.T, Nursing education.
- Bevies EmOliva, Curriculum Building in nursing.
- George Kurian Aleyamma, Principles of curriculum development and evaluation.
- Bhatia Kamala &BHATIA B.D ,Principles and methods of teaching
- Guilbert J.J,Educational hand book for health personnel.
- Neeraja K.P., Text book of nursing education.
- Guinee, Kathleen K, Teaching and learning in nursing.
- Joice B, ete Models of teaching in nursing.
- Dr. Bloom, Benjamin S Ed, Taxonomy of educational objectives: Cognitive domain.
- Dr. Rambhai N. Patel. Educational Evaluation (theory and Practi

# Subject No. 2 ADVANCE NURSING PRACTICE

Total Hours: 360 Theory: 150 Hours Practical: 200 Hours

# AIM:

The course is designed to develop an understanding of concepts and construct 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 are be able to:

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

### **COURSE CONTENT:**

# **Unit I - Nursing as a profession:**

- History of development of nursing profession, characteristics, criteria of the profession, respective 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.

# **Unit II -Health care delivery:**

- Health care environment, economics, constraints, planning process, polices,
- 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.

# **Unit III -Genetics:**

- Review of cellular division, mutation and law of inheritance, human genome project, The Genomic era.
- 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.

# **Unit IV - Epidemiology:**

- Scope, epidemiological approach and methods, Morbidity, mortality.
- Concepts of causation of diseases and their screening.
- Application of epidemiology in health care delivery, Health surveillance and health informatics, Role of nurse.

# Unit V - 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 and shock, altered body temperature, unconsciousness, sleep pattern and its disturbances, pain, sensory deprivation.
- Treatment aspects: pharmacological pre-post operative care aspects,
- Cardio pulmonary resuscitation
- Care of dying and dead,
- Infection prevention (including HIV) and standard safety measures, bio-medical waste management.
- Role of nurse-Evidence based nursing practice.

# Unit VI -Philosophy and Theories of Nursing:

- Values, conceptual models, approach.
- Nursing theories: Nightingale's, Henderson's, Roger's, Peplau's, Abdell's Lewine's, Orem's, Johnson's King's, Neumann's, Roy's, Watson parsce, etc and their application.
- Health belief models, communication and management, etc.
- Concept of Self health, Evidence based practices model.

# **Unit VII -Nursing process approach:**

- Health Assessment Illness status of patients/clients (Individuals, family, community), Identification of health illness problems, health behavior, signs and symptoms of clients.
- Methods of collection, analysis and utilization of data relevant to nursing process.
- Formation of nursing care plans, health goals, implementation, modification and evaluation of care.

# **Unit VIII -Psychological aspects and Human relation:**

- 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 IX -Nursing Practices:**

- 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 institution. Covid 19, Pandemic
- Health promotion and primary health care.
- Independent practices issues, Independent nurse-midwifery practitioners.
- Collaboration issues and models-within and outside nursing.
- Models of Prevention, Family nursing, Home nursing, Gender sensitive issues and women empowerment.
- Disaster nursing, Geriatric considerations in nursing, Evidence based nursing practices, Trans-cultural Nursing.

# Unit X -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, software.

# ADVANCE NURSING PRACTICE

Unit No.		Co	ntents with distributed hours	
with total hours	<b>Objectives</b>	Must know	Desirable to know	Nice to know
I (9 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand the history of development of nursing, code of ethics and professional conduct and role of regulatory bodies.  Gain knowledge regarding professional organizations Understand quality assurance. <b>Attitude:</b> In corporate in clinical field for better patient care.	<ul> <li>History of development of nursing profession, characteristics, criteria of the profession, respective of nursing profession-national, global. (1 hour)</li> <li>Code of ethics (INC), code of professional conduct (INC), autonomy and accountability, assertiveness, visibility of nurses, legal considerations. (2 hours)</li> <li>Role of regulatory bodies (1 hour)</li> </ul>	<ul> <li>Professional organizations and unions-self defense, individual and collective bargaining.(2 hours)</li> <li>Educational preparations,</li> <li>Continuing Education, career opportunities professional advancement &amp; Role and scope of nursing education.(1 hour)</li> <li>Role of research, leadership and management. (1 hour)</li> <li>Quality assurance in nursing(INC)</li> </ul>	Futuristic nursing.     (1 hour)
II (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand the healthcare delivery system at all levels in India. Gain knowledge regarding stake holders in the health care system, pattern of nursing care delivery system in India and different family welfare programmes. Gain knowledge of telemedicine. <b>Skill:</b> Use appropriate resources of IEC give effective health education. Operate telemedicine system.	<ul> <li>Health care delivery system-national, state, district and local level. (2 hour)</li> <li>Major stakeholders in the health care system-Government, non-govt., Industry and other professionals.(2 Hrs)</li> <li>Patterns of nursing care delivery in India. (1 hour)</li> </ul>	<ul> <li>Health care delivery concerns, national health and family welfare programs, intersectoral coordination, role of nongovernmental agencies.</li> <li>Information, education and communication (IEC) (2 hours)</li> </ul>	<ul> <li>Health care environment, economics, constraints, planning process, polices, political process vis a vis nursing profession.         <ul> <li>(2 hours)</li> </ul> </li> <li>Tele- medicine. (1 hr)</li> </ul>
III ( 10hours)	A t the end of unit students are able to <b>Knowledge:</b> Understand the cellular division, mutation and the law of inheritance. Gain knowledge of basic concept of genes, chromosomes, DNA, common genetic disorders and prenatal diagnosis and understand important of genetic counseling. <b>Skill:</b> Able to do basic genetic counseling.	<ul> <li>Basic concepts of Genes, Chromosomes &amp; DNA. (2 hours)</li> <li>Approaches to common genetic disorders. (2 hours)</li> <li>Genetic counseling. (1 hour)</li> </ul>	<ul> <li>Review of cellular division, mutation and law of inheritance, human genome project, The Genomic era.(2 hours)</li> <li>Genetic testing- basis of genetic diagnosis, Pre symptomatic and predisposition testing, Prenatal diagnosis &amp; screening, Ethical, legal &amp; psychosocial issues in genetic testing. (2 hours)</li> </ul>	Practical application of genetics in nursing. (1 hour)

(12 hours)	A t the end of unit students are able to <b>Knowledge:</b> Understand scope, epidemiological approaches morbidity, mortality and concept of causation of disease. Understand the health informatics and role of nurse. <b>Attitude:</b> Apply epidemiology in health care delivery system.	<ul> <li>Scope, epidemiological approach and methods.(4 hours)</li> <li>Application of epidemiology in health care delivery, Health surveillance and health informatics. (3 hours)</li> <li>Role of nurse. (1 hour)</li> </ul>	<ul> <li>Morbidity, mortality. (2 hours)</li> <li>Concepts of causation of diseases and their screening.(2 hours)</li> </ul>	
(20 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand Pathology and psychodynamics of disease causation, common problems in health care. Known CPR and EBP <b>Skill:</b> Able to give CPR effectively. <b>Attitude:</b> Incorporate with clinical and community practice for better care.	<ul> <li>Cardio pulmonary resuscitation.         <ul> <li>(3 hours)</li> </ul> </li> <li>Care of dying and dead (3 hours)</li> <li>Infection prevention (including HIV) and standard safety measures, bio-medical waste management (3 hours)</li> <li>Role of nurse-Evidence based nursing practice (1 hour)</li> </ul>	<ul> <li>Pathophysiology and Psychodynamics of disease causation (2 hours)</li> <li>Life processes, homeostatic mechanism, biological and psycho-social dynamics in causation of disease, life style (3 hours)</li> <li>Common problems: Oxygen insufficiency, fluid and electrolyte imbalance, nutritional problems, hemorrhage and shock, altered body temperature, unconsciousness, sleep pattern and its disturbances, pain, sensory deprivation. (3 hours)</li> </ul>	Treatment aspects:     pharmacological pre-     post operative care     aspects.(2 hours)
(20 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand nursing theories, conceptual models, concept of self health care and evidence based practice model.	<ul> <li>Nursing theories: Nightingale's,         Henderson's, Roger's, Peplau's,         Abdell's Lewine's, Orem's, Johnson's,         King's, Neumann's, Roy's, Watson         parsec, etc and their application. (12         hours)</li> <li>Health belief models, communication and         management, etc. (2 hours)</li> <li>Evidence based practices model.(1Hr)</li> </ul>	<ul> <li>Values, conceptual models, approach. (3 hours)</li> <li>Concept of Self health. (2 hours)</li> </ul>	
(10 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand health assessment, signs and symptoms of clients. Gain knowledge regarding nursing process. <b>Skill:</b> Develop skill in implementing nursing process. <b>Attitude:</b> Incorporate knowledge of nursing process for patient care.	<ul> <li>Health Assessment – illness status of patients / clients (Individuals, family, community) Identification of health-illness problems, health behaviors, signs and symptoms of clients. (4 Hrs)</li> <li>Methods of collection, analysis and utilization of data relevant to nursing process. (2 hours)</li> <li>Formulation of nursing care plans, health goals, implementation, modification and evaluation of care. (4 hours)</li> </ul>		

(23 hours)	A t the end of unit students are able to <b>Knowledge:</b> Understand growth and development in different stages of human life and defense mechanism. Understand stress and adaptation and techniques of counseling. <b>Attitude:</b> Incorporate with patient care in clinical and community settings. Incorporate with professional ethics.	<ul> <li>Human behavior, Life processes &amp; growth and development, personality development, defense mechanisms and communication (4 hours)</li> <li>Basic human needs Growth and development, (Conception through preschool, School age through adolescence, Young &amp; middle adult, and Older adult) (4 hours)</li> <li>Stress and adaptation, crisis and its intervention (3 hours)</li> </ul>	<ul> <li>Sexuality and sexual health.         <ul> <li>(2 hours)</li> </ul> </li> <li>Coping with loss, death and grieving (3 hours)</li> <li>Principles and techniques of Counseling (3 hours)</li> <li>Interpersonal relationships, individual and group, group dynamics. (3 Hrs)</li> </ul>	Organizational behavior (1 hours)
(26 hours)	At the end of unit students are able to Knowledge: Understand alternative modalities of care, complimentary therapies, disaster management and the extended and expanded role of nurse Know promotive, preventive, curative and restorative health care and models of prevention of gender sensitive issues, evidence based nursing practice and trans cultural nursing.  Skill: Able to prepare different models of EBP and its applications.  Attitude: Incorporate knowledge while providing comprehensive care.	<ul> <li>Models of Prevention. (2 hour)</li> <li>Family nursing, Home nursing.(2 Hrs)</li> <li>Disaster nursing. (6 hours)</li> <li>Evidence based nursing practices. (2 hours)</li> <li>Trans-cultural Nursing (2 hours)</li> </ul>	<ul> <li>Framework, scope and trends.         <ul> <li>(1 hour)</li> </ul> </li> <li>Alternative modalities of care, alternative systems of health and complimentary therapies.         <ul> <li>Extended and expanded role of the nurse, in promotive, preventive, curative and restorative health care delivery system in community and institution. (2 hours) Pandemic :Covid 19</li> </ul> </li> <li>Health promotion and primary health care. (2 hour)</li> </ul>	<ul> <li>Independent practices issues, Independent nurse-midwifery practitioners. (2 hour)</li> <li>Collaboration issues and models-within and outside nursing. (1 hour)</li> <li>Gender sensitive issues and women empowerment. (2 Hrs)</li> <li>Geriatric considerations in nursing.(2 hours)</li> </ul>
(10 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand the importance of use of computer application in patient care & nursing. <b>Skill:</b> Use computers in professional practice. <b>Attitude:</b> Incorporate this knowledge in professional and day today's life.	• Internet, literature search.(1 hour)	<ul> <li>Use of computers in teaching, learning, research and nursing practice. (2 hours)</li> <li>Windows, MS office: WORD, Excel, Power Point. (4 hours)</li> <li>Hospital management information system: software.(2 hours)</li> </ul>	• Statistical packages. (1 hour)

# AREAS OF CLINICAL EXPERIENCE AND DISTRIBUTION OF HOURS:

Sr. No.	Areas of clinical practice	Duration in Weeks
1	Medical Intensive Care Unit	1 weeks
2	Surgical Intensive Care Unit	1 weeks
3	Community Health Nursing Urban Area	1 weeks
4	Community Health Nursing Rural Area	1 week
5	Neonatal Intensive Care Unit	1 week
6	Pediatric Intensive Care Unit	1 week
7	Obstetric Ward	1 week
	Total Duration of Clinical Practice	07 weeks

# **TEACHING STRATEGY:**

Total Hours: 350 Lectures: 140 Hrs Clinical Hours -210

# **TEACHING METHODS:**

Lecture cum discussion, Seminar, Panel discussion, Symposium, Group Discussion, Written assignments A.V.AIDS:-

Over head Projector, L.C.D, Computer assisted learning, Flip charts, Posters, Black Board.

# **ASSIGNMENTS:**

# Theory:

Sr.	Assignment	No./	Marks per	Total
No.		Quantity	Assignment	Marks
1	Seminar	One	1X50	50
2	Nursing Care Plan (One in Each area of Clinical	Seven	1X25	175
	Experience)			
			Total Marks	225

# LIST OF RECOMMENDED BOOKS:

- Potter A.P Perry "Fundamentals of nursing" 6<sup>th</sup> edition.
- Kozier B et al, "Fundamentals of nursing concepts process and practices "2<sup>nd</sup> Indian print 2004.
- Brunner and Suddarth "Text book of Medical surgical nursing "10<sup>th</sup> edition.
- Zwemer "A Professional Adjustments and Ethics for Nurse in India" 6<sup>th</sup> Edition.
- Rosdhal, "Fundamentals of Nursing".
- Bolander, "Fundamentals of Nursing".
- Caol Taylor, "Fundamentals of Nursing".
- Basavanthappa B.T "Nursing Theories".
- Pearson Alan, Vaughan B, Fitzgerald M Nursing models for practice 3<sup>rd</sup> edition.
- Alligood M.R, Tomey A.M Nursing theory application and utilization.
- J.E Park Text book preventive and social medicine.

# Subject No.3 NURSING RESEARCH AND STATISTICS

Total: 250 hours Theory: 150 Hours Clinical: 100 Hours

**Paper I- Nursing Research** 

Total 200 Hours Theory- 100 Hours Clinical- 100 Hours

**Paper II – Statistics** 

Total: 50 Hours Theory- 50 Hours Clinical- 00 Hours

Paper I- NURSING RESEARCH

Total 200 Hours Theory- 100 Hours Clinical- 100 Hours

# AIM:-

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.

# **OBJECTIVES:-**

At the end of the course, the students are able to:-

- Define basic research terms and concepts.
- Review literature utilizing various sources.
- Describe research methodology
- Develop research proposal.
- Conduct a research study.
- Analyze and interpret the research data.
- Communicate research findings.
- Utilize research findings.
- Critically evaluate nursing research studies.
- Write scientific paper for publication.

# **COURSE CONTENT:**

# **Unit I -Introduction:**

- Methods of acquiring knowledge problem solving and scientific method.
- Inductive and deductive reasoning.
- Research definition, Characteristics, purposes, kinds of research.
- Historical Evolution of research in Nursing and Basic research terms.
- Scope of nursing research: problems in nursing, health and social research.
- Role of research in nursing.
- Evidence based practice.
- Ethics in research.
- Overview of Research process.

# **Unit II -Review of Literature:**

- Importance.
- Purposes.
- Scope.
- Sources.
- Criteria for selection of resources and Steps in reviewing literature.

# **Unit III -Research Approaches and designs:**

- Type: Quantitative and Qualitative.
- Historical, survey and experimental.

- Characteristics, types, advantages and disadvantages.
- Qualitative: Phenomenology grounded Theory, ethnography.
- Research designs, its importance, characteristics of good design.
- Threats to internal and external validity.

# **Unit IV -Research problem:**

- Identification of research problem.
- Sources of research problem
- Formulation of problem statement and research objectives.
- Definition of terms.
- Assumptions and delimitations and limitation.
- Identification of variables.
- Hypothesis definition, formulation and types.

# Unit V -Developing theoretical / conceptual framework:

- Theories:
- Nature.
- Characteristics.
- Purpose.
- Uses
- Using, testing and developing conceptual framework, models and theories.

# **Unit VI -Sampling:**

- Population and sample
- Factors influencing sampling.
- Sampling techniques.
- Sample size.
- Probability and sampling Error.
- Problems of sampling.

### Unit VII -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.

# **Unit VIII -Implementing research plan:**

- Pilot study.
- Review research plan (design).
- Planning for data collection.
- Administration of tool / interventions.
- Collection of data.

# **Unit IX - Analysis and interpretation of data:**

- Plan for data analysis: quantitative and Qualitative.
- Descriptive and Inferential Analysis.
- Preparing data for computer analysis and presentation.
- Statistical analysis.
- Interpretation of data.
- Conclusion and generalizations.
- Summary and discussion.

# Unit X -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.

# Unit XI -Writing scientific article for publication: purposes & style:

• Critical analysis of research reports and articles.

# Unit XII -Developing and presenting a research proposal.

# NURSING RESEARCH AND STATISTICS PAPER I-NURSING RESEARCH

Unit No.		Contents with distributed hours		
with total hours	Objectives —	Must know	Desirable to know	Nice to know
I (08 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand the problem solving and scientific methods, inductive and deductive reasoning, research terminologies, evidence based practice and ethics in research. <b>Skill:</b> Apply evidence based practice in nursing research. <b>Attitude:</b> Incorporate with nursing research.	<ul> <li>Introduction:</li> <li>Methods of acquiring knowledge – problem solving and scientific method. (1 hour)</li> <li>Inductive and deductive reasoning.(1 hour)</li> <li>Research – definition, Characteristics purposes, kinds of research.(1 hour)</li> <li>Historical Evolution of research in Nursing.(1 hour)</li> <li>Basic research terms.(1 hour)</li> <li>Scope of nursing research: Areas, problems in nursing, health and social research.(1 hour)</li> <li>Role of research in nursing.(1 hour)</li> <li>Evidence based practice.(hour)</li> <li>Ethics in research .(1 hour)</li> <li>Overview of Research process. (1 hour)</li> </ul>		
II (05 hours)	At the end of unit students are able to <b>Knowledge:</b> Describe the importance, purpose, scope, and sources of ROL. <b>Skill:</b> Apply steps in reviewing literature. <b>Attitude:</b> Recognize criteria for selection of resources.	Review of Literature:  Importance, Purposes (1 hour)  Scope, Sources (1 hour)  Criteria for selection of resources. (2Hrs)  Steps in reviewing literature.(1 Hr)		
III (12 hours)	At the end of unit students are able to <b>Knowledge:</b> Define and describe qualitative and quantitative research. <b>Skill:</b> Select appropriate design for research work and critically evaluate research designs. <b>Attitude:</b> Identify characteristics of qualitative & quantitative research design.	<ul> <li>Research Approaches and Design:</li> <li>Type: Quantitative and Qualitative.(2 hours)</li> <li>Historical, survey and experimental .(2 hours)</li> <li>Characteristics, type's advantages and disadvantages. (2 hours)</li> <li>Qualitative: Phenomenology grounded Theory, ethnography.(2 hours)</li> <li>Research designs, its importance.(2 hours)</li> </ul>	<ul> <li>Characteristics of good design. (1 hours)</li> <li>Threats to internal and external validity. (1hours)</li> </ul>	

IV (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Identify and describe research problem, sources of research problem & define various terms <b>Skill:</b> Formulate research hypothesis. <b>Attitude:</b> Recognize assumptions delimitations and limitations.	<ul> <li>Research Problem:</li> <li>Identification of research problem,(2 hours)</li> <li>Formulation of problem statement and research objectives (3 hours)</li> <li>Assumptions and delimitations and Limitation (1 hours)</li> <li>Identification of variables</li> <li>Hypothesis – definition, formulation and types. (2 hours)</li> </ul>	<ul> <li>Sources of research problem. (1 hours)</li> <li>Definition of terms. (1 hours)</li> </ul>
V (05 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and describe the nature, characteristics, purposes and uses of various nursing theories. <b>Skill:</b> Develop conceptual framework for their research work. <b>Attitude:</b> Identify and test various theories.	<ul> <li>Developing Theoretical/Conceptual framework:</li> <li>Theories: Nature, Characteristics, Purpose and Uses (2 hours)</li> <li>Using, testing and developing Conceptual framework, models and theories.(3 hours)</li> </ul>	
VI (08 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand, Describe and define population, sample, sampling technique and sample size and factors influencing sampling, probability and sampling error. <b>Skill:</b> Select and use appropriate sampling technique. <b>Attitude:</b> Identify& select appropriate population, sample, sampling technique and sample size.	<ul> <li>Sampling:</li> <li>Population and sample(1 hour)</li> <li>Sampling techniques (2 hour)</li> <li>Sample size (1 hour)</li> <li>Probability and sampling Error (2 hour)</li> <li>Problems of sampling (1 hour)</li> </ul>	Factors influencing sampling. (1 hour)
VII (16 hours)	At the end of unit students are able to <b>Knowledge:</b> Describe tools and methods of data collection. <b>Skill:</b> Calculate reliability of tools. <b>Attitude:</b> Formulate tools for data collection.	<ul> <li>Tools and Method of Data Collection:</li> <li>Data sources, methods/techniques -         Quantitative and qualitative. (4 hours)</li> <li>Tools for data collection – types, characteristics and their development(4 hours)</li> <li>Validity and reliability of tools Procedure for data collection. (4 hours)</li> </ul>	Concepts of data collection.(4 hours)

VIII (05 hours)	At the end of unit students are able to <b>Knowledge:</b> Define and describe pilot study. <b>Skill:</b> Conduct pilot study. <b>Attitude:</b> Formulate plan for data collection.	<ul> <li>Implementing Research Plan:</li> <li>Pilot study (1 hour)</li> <li>Planning for data collection (1 hour)</li> <li>Administration of tool .(1 hour)</li> <li>Interventions (1 hour)</li> <li>Collection of data. (1 hour)</li> </ul>	•	Review research plan (design) (1 hour)	
IX (08 hours)	At the end of unit students are able to <b>Knowledge:</b> Know and describe various methods for data analysis. <b>Skill:</b> Analyze data by using appropriate analysis method. <b>Attitude:</b> Formulate plan for data analysis.	<ul> <li>Analysis and Interpretation of Data:</li> <li>Plan for data analysis: quantitative and Qualitative. (2 hours)</li> <li>Descriptive and Inferential Analysis. (1 hours)</li> <li>Statistical analysis. (1 hours)</li> <li>Interpretation of data.(1 hours)</li> </ul>		Conclusion and generalizations Summary and discussion. (2 hours)	Preparing data for computer analysis and presentation (1hours)
X (06 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and describe various methods and styles of writing research report. <b>Skill:</b> Communicate research results effectively and Compare research reports.	<ul> <li>Reporting and Utilizing Research Findings:</li> <li>Writing research report purposes, methods and style-Vancouver, American Psychological Association (APA), Campbell etc(2 hours)</li> <li>Writing scientific article for publication: purposes &amp; style (2 hours)</li> </ul>	•	Communication of research results; oral and written. (2 hours)	
XI (03 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and describe criteria's for critical analysis. <b>Skill:</b> Analyze and communicate research articles critically. <b>Attitude:</b> Initiate critical analysis.	<ul> <li>Critical analysis of research articles. (1 hours)</li> <li>Presenting and communicating critique. (2 hours)</li> </ul>			
XII (04 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and describe criteria's for presenting research proposal. <b>Skill:</b> Present research proposal. <b>Attitude:</b> Prepare research proposal.	Preparation, presentation and approval of research proposal. (4 hours)			

#### **DISTRIBUTION OF CLINICAL HOURS:**

Unit No.	Activity to performed by the students	Allotted Hours
II	Review of literature.	05
III	Writing and Presenting Research Statement	25
IV	Developing Theoretical/Conceptual Framework	05
V	Developing Research Tools	10
VII	Critical analysis of research article and its presentation	15
VIII	Presentation of complete research proposal.	40
	Total Hours	100

**TEACHING STRATEGY:** Lecture -90

Practical Hours – 100

**TEACHING METHODS:** Lecture cum discussion, Symposium, Group Discussion, Written assignments. **A.V. AIDS:** Over head Projector, L.C.D, Computer Assisted learning, Flip charts, Posters, Black Board, and Computer assisted learning.

#### ASSIGNMENTS:

Sr.	Assignment	No./	Marks per	Total
No.		Quantity	Assignment	Marks
1	Group Project	One	1X100	100
2	Journal Presentation (Research Articles)	Two	1X25	50
3	Research Critique	One	1X50	50
4	Preparation & Presentation of Research Proposal	One	1X25	25
			Total Marks	225

#### LIST OF RECOMMENDED BOOKS:

- Basavanthappa B.T, Nursing Research
- Garrett H.E, Statistic in psychology &education
- Mahajan B.K. Mothods in Biostatistcs.
- Rose Hott &Budin.Notter's Essentials of Nursing Research 5<sup>th</sup> edition.
- Practical Nunshall, Nursing Research 3<sup>rd</sup> edition.
- P.K.Indirani, Research methods for Nurses.
- Polit, DF, &Beck C.T, Nursing Research principles &methods 7<sup>th</sup> edition.
- Polit, Beck & P Hungler, Nursing Research methods, Apprisal&Utilization
- Clifford etal, Getting Research into practice.
- Macnee C.L Understanding Nursing Research: Reading &using Research in Practice.

# Subject No. 3 NURSING RESEARCH AND STATISTICS Paper II – STATISTICS

Total Hours: 50 Theory Hours: 50

#### AIM:

This course is designed to assist the students to develop an understanding of the statistical methods and apply them in conducting research studies in nursing.

#### **OBJECTIVES:**

At the end of the course the students are able to:-

- Explain the basic concepts related to statistics.
- Describe the scope of statistics in health and nursing.
- Organize tabulate and present data meaningfully.
- Use descriptive and inferential statistics to predict results.
- Draw conclusions of the study and predicts statistical significance of the results.
- Describe vital health statistics and their use in health related research.
- Use statistical packages for data analysis.

#### **COURSE CONTENT:**

#### **Unit I -Introduction:**

- Concepts, types, significance, and scope of statistics meaning of data, parametric and non parametric 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.

#### **Unit II -Measures of central tendency:**

• Mean, Median, Mode.

#### **Unit III - Measures of variability:**

• Range, Percentiles, Average deviation, Quartile deviation, Standard deviation

#### **Unit IV -Normal Distribution:**

- Probability, Characteristics and application of normal probability curve; sampling error.
- **Cumulative distribution** The cumulative frequency graph, Percentiles and percentile ranks, The Cumulative percentage curve.

#### **Unit V - Measures of relationship:**

- Correlation need and meaning, Rank order correlation, Scatter diagram method, Product moment correlation.
- Simple linear regression analysis and Prediction.

#### **Unit VI -Designs and meaning:**

• Experimental designs, Comparison in pairs, randomized block design, Latin squares.

### Unit VII -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, Pearson's r

#### Unit VIII -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, spilt half method.

#### **Unit IX -Application of statistics in health:**

 Ratios, Rates, Trends, Vital health statistics – Birth and death rates, Measures related to fertility, morbidity and mortality.

#### **Unit X -Use of computers for data analysis:**

• Various statistical packages and its use for analysis.

# NURSING RESEARCH AND STATISTICS PAPER II -STATISTICS

Unit No.		Contents with distri	buted hours	
with total hours	<b>Objectives</b>	Must know	Desirable to know	Nice to know
I (05 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and describe the scope of statistics and meaning of data. <b>Skill:</b> Apply this knowledge in research work.	<ul> <li>Concepts, types, significance, and scope of statistics meaning of data, parametric and no-parametric data (2 hours)</li> <li>Sample, parameter (1 hour)</li> <li>Type and levels of data and their Measurement</li> <li>Organization &amp; presentation of data.(2 Hrs)</li> </ul>		
II (10 hours)	At the end of unit students are able to  Knowledge: Explain the tabulation of data and measures of central tendency.  Skill: Present the data in various forms and calculate central tendency.  Attitude: Apply this knowledge in research and professional work.	<ul> <li>Frequency distribution (2 hours)</li> <li>Graphical and tabular presentations(2 hours)</li> <li>Measures of central tendency :</li> <li>Mean (2 hours)</li> <li>Median (2 hours)</li> <li>Mode (2 hours)</li> </ul>		
	At the end of unit students are able to <b>Knowledge:</b> Understand and describe the measures of variability. <b>Skill:</b> Calculate the measures of variability. <b>Attitude:</b> Incorporate & relate with research work.	<ul> <li>Range (2 hours)</li> <li>Percentiles (2 hours)</li> <li>Average Deviation (2 hours)</li> <li>Quartile Deviation (2 hours)</li> <li>Standard Deviation (2 hours)</li> </ul>		
IV (8 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and describe normal distribution and cumulative distribution. <b>Skill:</b> Calculate probability and prepare cumulative frequency graphs.	<ul> <li>Normal Distribution:</li> <li>Probability (2 hours)</li> <li>Characteristics and application of normal probability curve. (2 hours)</li> <li>Sampling error. (1 hour)</li> <li>Cumulative distribution: The cumulative frequency graph Percentiles and percentile ranks. (2 hours)</li> <li>The Cumulative percentage curve or Ogive. (1 hr)</li> </ul>		
V (8 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and explain measures of relationship. <b>Skill:</b> Calculate measures of relationship and apply it in research studies.	<ul> <li>Correlation – need and meaning (1 hour)</li> <li>Rank order correlation (2 hours)</li> <li>Scatter diagram method.(2 hours)</li> </ul>	<ul> <li>Product moment correlation. (1 hour)</li> <li>Simple linear regression analysis and Prediction. (2 hrs)</li> </ul>	
VI	At the end of unit students are able to	Experimental designs	<ul> <li>Latin squares.</li> </ul>	

(2 hours)	<b>Knowledge:</b> Understand and describe different types of research design. <b>Skill:</b> Analyze and use research designs accurately.	Comparison in pairs, randomized block design.		(2 hours)		
VII (10 hours)	At the end of unit students are able to	<ul> <li>Non parametric test – Chi – square test (4 hours)</li> <li>Parametric test – 't' test, ANOVA, Pearson's r (4 hours)</li> </ul>	•	Sign median test, Mann-Whitney test. (1 hour) Manova, ancova, (1 hour)		
VIII (4 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and describe the uses of statistical methods in psychology and education. <b>Skill:</b> Develop skill for using statistical methods in psychology and education.	Reliability of test Scores: test-retest method, parallel forms, spilt half method. (2 hours)	•	Scaling – Z Score , Z Scaling.(1 hour) Standard Score and T score.(1 hour)		
IX (2 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand the importance and meanings of vital health statistics. <b>Skill:</b> Apply this knowledge in professional work. <b>Attitude:</b> Contributes in collecting and calculating vital statistics correctly.	<ul> <li>Ratios, Rates, Trends</li> <li>Vital health statistics – Birth and death rates. (1 hour)</li> <li>Measures related to fertility, morbidity and mortality.(1 hour)</li> </ul>				
X (1 hours)	At the end of unit students are able to <b>Knowledge:</b> Know the different available statistical packages.				•	Use of statistical package. (1 Hr)

#### **TEACHING STRATEGY:**

• Total Hours -60 Lecture - 60hrs

#### **TEACHING METHODS:**

• Lecture cum discussion, Seminar, Panel discussion, Symposium, Group Discussion Written assignments.

#### **A.V.AIDS:**

Over head Projector, L.C.D, Computer Assisted learning, Flip charts, Posters, Black Board

#### **ASSIGNMENTS:**

Sr.	Assignment	No./	Marks per	Total
No.		Quantity	Assignment	Marks
1	Tutorials	Four	1X25	100
			Total Marks	100

#### LIST OF RECOMMENDED BOOKS:

- Basavanthappa B.T, Nursing Research.
- Garrett H.E, Statistic in psychology & education.
- Mahajan B. K. Methods in Biostatistics.
- Rose Hott & Budin.Notter's Essentials of Nursing Research 5<sup>th</sup> edition.
- Practical Nunshall, Nursing Research 3<sup>rd</sup> edition.
- P.K.Indirani, Research methods for Nurses.
- Polit, D.F. & Beck C.T., Nursing Research principles &methods 7<sup>th</sup> edition.
- Polit, Beck & P Hungler, Nursing Research methods, Appraisal & Utilization
- Clifford etal, Getting Research in to practice.
- Macnee C.L Understanding Nursing Research: Reading &using Research in Practice.

## **Subject No.4** CLINICAL SPECIALITY: I

#### COMMUNITY HEALTH NURSING

Total Hours: 810 Theory Hours: 150 Clinical Hours: 660

AIM:-

The course is designed to assist students in developing expertise and in-depth understanding in the field of community health nursing. It would help the students to appreciate holistic life style of individuals, families and groups and develop skills to function as a Community health nurse specialist/practitioner. It would further enable the 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 able to:-

- Appreciate the history and development of the community health and community health nursing.
- Appreciate the role of individuals and families in promoting the health of the community.
- Perform physical, developmental ad nutritional assessment of the individuals, families and groups.
- Apply the concept of promotive, preventive, curative and rehabilitative aspects of health while providing the care to the patients.
- Integrate the concepts of family centered nursing approach while providing care to the community.
- Apply the nursing process approach while providing care to the individuals, families, groups and communities.
- Recognize and participate in the management of emergencies, epidemics and disasters.
- Apply recent technologies and care modalities while delivering community nursing care.
- Appreciate legal and ethical issues pertaining to community health nursing care.
- Conduct community health nursing projects.
- Participate in planning, implementation and evaluation of various national health and family welfare programmes at the local, state and the national level.
- Incorporate evidenced based nursing practice and identify the areas of research in the community settings.
- Participate effectively as a member of the community health team.
- Coordinate and collaborate with various agencies operating in the community by using an inter sectoral approach.
- Teach community health nursing to undergraduate, in-service nurses and community health workers.
- Demonstrate leadership and managerial abilities in the community health nursing practice.

#### **COURSE CONTENT:-**

#### **Unit I -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 Community Health Nursing, Health status of the Community.
- Scope of Community Health nursing practice, Ethical and legal issues.
- Socio-cultural issues in Community Health Nursing.
- National Policies, plans and programmers, National health policy, National Population policy, National Health and welfare Programmers, National Health goal/indicators/ Millennium developmental goals (MDG)/ Strategies.
- Planning process: Five year plans, National Rural Health Mission.

#### **Unit II -Health:**

- Concepts, Issues, Determinants, Measurements.
- Alternate system for health promotion and management of health problems.
- Health economics, Health technology, Genetics and health, Waste disposal, Eco system.

#### **Unit III -Population Dynamics and Control:**

- Demography, Transition and theories of population, National population policy, National population programmers.
- Population control and related programmers, Method of family limiting and spacing.
- Research, Census, National Family Health Survey.

#### **Unit IV - Community Health Nursing:**

• Philosophy, Aims, Objectives, Scope, Principles, Functions, Community Health Nursing Theories.

- Quality Assurance: Community Health Nursing standards, competencies, Monitoring community health nursing, nursing audits, Health assessment-individuals, groups and community.
- Roles and responsibilities of community health nurse, Family nursing and Family health centered nursing approach.
- Nursing care for special groups: children, adolescents, adults, women, elderly, physically and mentally challenged-Urban and rural population at large, Community diagnosis, setting objectives.
- Intervention: Micro and nursing plans, operationalisation and evaluation:
- Concept, role and responsibilities of community health nurse practitioners-decision making skills, follow nursing practice standards, advanced nursing practice, professionalism, legal.

#### Unit V -IMNCI (integrated management of neonatal and childhood illnesses):

- Integrated management of neonatal and childhood illness, Concept, iniquities in the Indian situation.
- Rationale for evidence-based syndrome approach, Components of the integrated approach.
- Principles of integrated care, The IMNCI case management process, Outpatient management of young infants.
- Learning objectives, Assessment of sick young infants, Treatment of sick young infants.
- Outpatient management of children, Age 2 month to 5 years, Assessment of sick children,
- Checking main symptoms-Cough or difficult breathing, Diarrhea, Fever, Ear problem, malnutrition, anemia immunization etc., Assessing other problems
- Treatment of sick children, Principles of management of sick children in a small hospital.
- Skilled Birth Attendant (SBA)

#### **Unit VI -Disaster Nursing:**

- Introduction: Concept, Definition.
- Types of disaster.
- Phases of disaster.
- Disaster management: Disaster response, disaster preparedness, and disaster mitigation.
- Epidemiological surveillance and disease control.
- Team approach.
- Intersectoral approach: Vaccination, nutrition, and rehabilitation.
- Role of NGO.
- State and central Govt.
- International help and collaboration.

#### **Unit VII -Information, Education and Communication:**

- IEC: 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.

#### Unit VIII -Health care delivery system: urban and rural:

- Functions, staffing, and pattern of assistance, layout, drugs, equipments and supplies: Village, Sub-centre, Primary health centre, Community health centre, district hospitals, sub-divisional hospitals, district family welfare bureau and tertiary care institution.
- Critical review of functioning of various levels, evaluation studies, recommendations and nursing perspectives
- Alternative system of medicine.
- Training and supervision of health workers.
- Health agencies: Roles and functions, Inter-sectoral coordination, Public private partnership.

## CLINICAL SPECIALITY- I COMMUNITY HEALTH NURSING

Unit No.		Contents with distribu	ted Hours	
& Total Hours	Objectives	Must know	Desirable to know	Nice to know
I (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Know the worldwide historical development of CHN practice. Understands the scope of CHN, legal, socio cultural and ethical issues in CHN <b>Attitude:</b> Understand her or his role in attaining national goals.	<ul> <li>Introduction:</li> <li>Current status, trends and challenges of Community Health Nursing (1 hour)</li> <li>Health status of the Community (1 hour)</li> <li>Ethical and legal issues (1 hour)</li> <li>National Policies, plans &amp; programmes</li> <li>National health policy, National Population policy.</li> <li>National Health &amp; welfare Programmes.</li> <li>National Health goal/ indicators/ Millennium developmental goals (MDG)/ Strategies</li> <li>Planning process: Five year plans</li> <li>National Rural Health Mission.(4 hours)</li> </ul>	Historical development of Community health and Community health Nursing-World and India, various health and family welfare committees. (1Hr)     Scope of community health nursing practice.(1 Hr)	• Socio-cultural issues in Community Health Nursing (1 hour)
II (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Explain the concepts and determinants of health. Understand the importance of use of technology in health care delivery. Know the relationship between genetics and health. <b>Skill:</b> Identify the problems of waste disposal and modify them to contribute in improving health and promotion of eco system suitable to health. <b>Attitude:</b> Incorporate alternative system of medicine in promotion of health.	Health:  Concepts, issues (1 hour)  Determinants (1 hour)  Measurements (1 hour)  Waste disposal (1 hour)  Eco system (1 hour)	<ul> <li>Health economics (1 hour)</li> <li>Health technology (2 hours)</li> </ul>	<ul> <li>Alternate system         For health promotion and management of health problems.         (1 hour)         Genetics and health. (1Hr)     </li> </ul>
III (15 hours)	At the end of unit students are able to  Knowledge: Understand the demography and population dynamics.  Know the national population policy and program.  Skill: Motivates people for adopting small family norms.  Attitude: Incorporate research knowledge in promoting health of community.	Population Dynamics and Control:  Demography (2 hours)  Transition and theories of population (1 hour)  National population policy  National population programmes. (2 hours)  Population control and related programmes (8 hours)	Research, Census, National Family Health Survey (1 hour)	Method of family limiting and spacing (1 hour)

IV (30 hours)	At the end of unit students are able to  Knowledge: Understands philosophy, aims and objectives, scope and principles of CHN.  Know the CHN theories and apply them in assessing quality of care  Skill: Do the health appraisal of individual, families and community.  Attitude: In corporate quality assurance norms while providing health care at all levels and all settings.	<ul> <li>Community Health Nursing:         <ul> <li>Philosophy, Aims, Objectives, Scope, Principles, Functions(4 hours)</li> </ul> </li> <li>Quality Assurance: Community Health Nursing standards, competencies, Monitoring community health nursing, nursing audits (2 hours)</li> <li>Health assessment- individuals, groups and community. (3 hours)</li> <li>Roles and responsibilities of community health nurse(3 hours)</li> <li>Nursing care for special groups: children, adolescents, adults, women, elderly, physically and mentally challenged- Urban and rural population at large.(2 hours)</li> <li>Community diagnosis, setting objectives.(3 hours)</li> </ul>	Community Health Nursing Theories. (4 hours)     Concept, role and responsibilities of community health nurse practitioners-decision making skills, follow nursing practice standards, advanced nursing practice, professionalism, legal issues. (3Hrs)	<ul> <li>Family nursing and Family health centered nursing approach.         <ul> <li>(3 Hrs)</li> </ul> </li> <li>Intervention: Micro and nursing plans, operatonalizati on and evaluation:         <ul> <li>(3 hours)</li> </ul> </li> </ul>
V (45 hours)	At the end of unit students are able to  Knowledge: Know the IMNCI and diseases incorporated in it.  Skill: Provides effective nursing care to neonate and children for the diseases incorporated under IMNCI Attitude: Becomes sensitive for drives under taken by Government to control morbidity and mortality among under 5 children.	<ul> <li>IMNCI:</li> <li>Integrated management of neonatal and childhood illness:</li> <li>Concept, iniquities in the Indian situation.</li> <li>Rationale for evidence-based syndrome approach.</li> <li>Components of the integrated approach.</li> <li>Principles of integrated care.</li> <li>The IMNCI case management process.(10 hours)</li> <li>Outpatient management of young infants.</li> <li>Learning objectives</li> <li>Assessment of sick young infants.</li> <li>Treatment of sick young infants. (9 hours)</li> <li>Outpatient management of children</li> <li>Age 2 month to 5 years.</li> <li>Assessment of sick children.</li> <li>Checking main symptoms.</li> <li>Cough or difficult breathing</li> <li>Diarrhea, Fever, Ear problem, malnutrition, anemia immunization etc.</li> <li>Assessing other problems.(9 hours)</li> <li>Skilled Birth Attendant (SBA) (3 hours)</li> </ul>	Treatment of sick children.(6 hours) Principles of management of sick children in a small hospital. (8 hours)	
VI (15 hours)	At the end of unit students are able to  Knowledge: Understand the concepts of disaster.  Know the measures to prevent disasters.  Skill: Able to seek cooperation and contribution of	Disaster Nursing:  • Introduction: Concept, Definition. (1 hour)  • Types and phases of disaster (2 hour)  • Disaster management: Disaster response, disaster	Role of NGO. (1 Hr) International assistance and collaboration.	

	all in prevention and management of disaster.	preparedness, and disaster mitigation. (4 hours)	(1 hour)	
	Attitude: Able to work as leader in disaster management.	• Epidemiological surveillance and disease control. (2 Hrs)		
		<ul> <li>Team approach, Intersectoral approach: Vaccination, nutrition, and rehabilitation. (3 hours)</li> </ul>		
		• Role of State and central Govt.(1 hour)		
VII (10 hours)	At the end of unit students are able to  Knowledge: Know the principles and strategies of IEC.  Skill: Communicate effectively and use the principles of IEC while giving health education.  Attitude: Listens carefully & develops habit of reading between the lines.	<ul> <li>Information, Education and Communication:</li> <li>IEC: Principles and strategies(2 hours)</li> <li>Communication skills (2 hours)</li> <li>Management information and evaluation system:         Records and reports (2 hours)</li> <li>Information technology(1 hour)</li> </ul>	<ul> <li>Tele-medicine and tele-nursing (1 hour)</li> <li>Journalism. (1hr)</li> </ul>	Mass media,     Folk media     (1 hour)
VIII (15 hours)	At the end of unit students are able to  Knowledge: Explain the organizational and functional structure of health care delivery system at all levels.  Skill: Review critically the functions of health personal at all levels.  Attitude: Communicate effectively and enhance Intersectoral co-ordination and co-operation in meetings health needs of population.	<ul> <li>Health Care Delivery System: Urban and Rural:</li> <li>Functions, staffing, pattern of assistance, layout, drugs, equipments and supplies:         Village, Sub-centre, Primary health centre,         Community health centre, district hospitals, sub-divisional hospitals, district family welfare bureau and tertiary care institution.(6 hours)</li> <li>Critical review of functioning of various levels, evaluation studies, recommendations and nursing perspectives.(3 hours)</li> <li>Health agencies: Roles and functions.(1 hour)</li> </ul>	<ul> <li>Alternative system of medicine.         <ul> <li>(1 hour)</li> </ul> </li> <li>Training and supervision of health workers         <ul> <li>(2 hours)</li> </ul> </li> </ul>	Inter-sectoral coordination (1 hour)     Public private partnership. (1 hour)

#### **DISTRIBUTION OF COMMUNITY EXPERIENCE:**

Sr. No.	Dept./ Unit	No. Of Weeks	Total Hours	Sr. No.	Dept./ Unit	No. Of Weeks	Total Hours
1	Sub-centre, PHC, CHC	12	360 Hours	3	Urban Centers	6	180 Hours
	District family welfare bureau	1	30 hours	4	Field Visits	3	90 Hours
	Total	13	390		Total	9	270
	Grand Total					22 Weeks	660 Hours

**TEACHING STRATEGY: -** Total Hours: 810 Lectures: 150 hours Clinical Hours: 660

**TEACHING METHODS:** - Lecture, Seminar, Group Discussion, Clinical Observation, Presentation, Workshops, Symposium, Field visits.

**A.V. AIDS:** - Over head Projector, L.C.D, Computer Assisted Instruction, Flip charts, Posters, Black Board.

#### **ASSIGNMENTS: Theory:**

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Seminar	Two	1X50	100
2	Panel Discussion (Group Work)	One	1X25	25
3	Speciality Related Journal Presentation	Two	1X25	50
4	Writing/Presenting Paper on Given Topic	One	1X50	50
			Total Marks	225

#### **Practical:**

Sr. No.	Assignment	No./	Marks per	Total
		Quantity	Assignment	Marks
1	Community Survey and Diagnosis	One	1X100	100
2	Family Care Plan -UPH	Two	1X25	50
3	Family Care Plan -RPH	Two	1X25	50
4	Clinical Performance Evaluation – UPH & RPH	Two	1X100	200
5	Organizing Training Programme for Health Personnel (Group Work)	One	1X100	100
6	Planning & Organizing Community Health Education Programme	Two	1X25	50
	(Group Work) – UPH & RPH			
7	Evaluation of Home Procedures	Two	1X25	50
8	Planning & Organizing School Health Programme (Group Work)	One	1X100	100
9	Drug Study (Minimum Ten Drugs)	One	1X50	50
			Total Marks	750

#### **RECOMMENDED BOOKS AND JOURNALS:-**

- Park's Text Book of Preventive and Social Medicine, Banarasidas Bhanot Publishers, Jabalpur, India.
- Text Book of Preventive and Social Medicine, Dr. Gupta and others, Jaypee Brothers.
- Essentials of Community Health Nursing, S. Kamalam, Jaypee Brothers.
- Community Health Nursing Principles and practice', K. K. Gulhani, Kumar Publishing House, New Delhi.
- Community and Public Health Nursing, Maria Stanhope & Jeanette Lancaster, Mosby Publication.
- Community health Nursing, B.T. Basavanthappa, Jaypee Brothers.
- Hand book of Preventive and Social Medicine, Vidya Ratan, Jaypee Brothers.
- Pocket Manuel of Community Health Nursing, Maheshwari Jaikumar, Jaypee Brothers.
- Evaluating Community Nursing', Karl Atkin & Others, Bailliere Tindall, London.
- Comprehensive Community Health Nursing Clemen Stone & Others, Mosby, Elsevier.
- Community Health Nursing Mannuel, Najoo Kotwal, TNAI.
- An Introduction to Community Health Nursing, Kasturi Sunder Rao
- 'NRHM News Letter', Dept. of Family Welfare, Govt. of India.
- 'Health Action' HAFA, Secundarabad.
- 'Maharashtra Arogya Patrika' M.S. Health & IEC Bureau, Pune.

#### Subject No.4

#### CLINICAL SPECIALITY- I

#### MENTAL HEALTH NURSING (PSYCHIATRIC NURSING)

Total Hours: 810 Theory Hours: 150 Clinical Hours : 660

#### AIM:

This course is designed for developing an understanding of the modern approach to mental health, identification, prevention, rehabilitation and nursing management of common mental health problems with special emphasis on therapeutic interventions for individuals, family and community.

#### **OBJECTIVES:**

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

- Understand the historical development and current trends in mental health nursing.
- Comprehend and apply principles of psychiatric nursing in clinical practice.
- Understand the etiology, psychodynamics and management of psychiatric disorders.
- Develop competency in assessment, therapeutic communication and assisting with various treatment modalities.
- Understand and accept psychiatric patient as an individual and develop a deeper insight into His/her own attitudes and emotional reactions.
- Develop skill in providing comprehensive care to various kinds of psychiatric patients.
- Develop understanding regarding psychiatric emergencies and crisis interventions.
- Understand the importance of community health nursing in psychiatry.

#### **COURSE CONTENT:-**

#### **Unit I -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.
- Multi-Disciplinary team and role of nurse, Role of psychiatric nurse –extended and expanded.

#### Unit II -Concepts of psychobiology:

- **The nervous system**: An anatomical review, The brain and limbic system, Nerve tissue, Autonomic nervous system, Neurotransmitters
- Neuro endocrinology: Pituitary, Thyroid Gland, Circadian Rhythms, Neuro psychiatric disorders.
- Genetics
- Psycho immunology: Normal Immune response, Implications for psychiatric illness.
- Implications for Nursing.

#### Unit III -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.

#### **Unit IV -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.
- Stress as transaction between the individual and environment & Stress management.

#### Unit V -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 in phases; Conditions essential to development of a therapeutic relationship.
- Therapeutic impasse and its management.

#### **Unit VI -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 and Role of the Nurse.

#### **Unit VII -Promoting Self-Esteem:**

- Components of Self-Concept.
- The Development of Self-Esteem.
- The Manifestations of Low-Self-Esteem.
- Boundaries and Role of the Nurse.

#### **Unit VIII - 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.
- Interpretation of investigations.
- Nurse's Role.
- Nursing case management- Critical pathways of care.
- Documentation:
- o Problem-oriented recording, Focus charting, The PIE method.

#### **Unit IX -Psychosocial Therapies:**

- Individual Therapy, Behavioral Therapy Relaxation Therapy, Cognitive Therapy, Positive Negative Reinforcement, Bio Feedback, Guided imagery, Group Therapy, Family Therapy, Milieu Therapy.
- The Therapeutic Community.
- Occupational Therapy, Recreational Therapy, Play Therapy, Music Therapy.

#### **Unit X -Psychopharmacology:**

- Historical Perspectives, Role of a Nurse in Psychopharmacological Therapy: Anti- anxiety Agents, Antidepressant Agents, Mood stabilizers, Antipsychotic, Sedative-Hypnotics, Central Nervous System Stimulants.
- Future developments.

#### **Unit XI -Electroconvulsive therapy:**

• Historical Perspectives, Indications, Contraindications, Mechanisms of Actions, Side Effects, Risks Associated with Electroconvulsive Therapy, The Role of the Nurse in Electroconvulsive Therapy.

#### **Unit XII -Alternative systems of medicine in mental health:**

• Herbal Medicine, Unani, Siddha, Homeopathy, Acupressure and Acupuncture, Diet and Nutrition, Chiropractic Medicine, Therapeutic Touch and Massage, Yoga, Pet Therapy.

# CLINICAL SPECIALITY- I MENTAL HEALTH NURSING (PSYCHIATRIC NURSING)

	(ISICHIAIRIC NORSING)			
Unit No.		Content	ts with distributed hours	
with total	Objectives			
hours		Must know	Desirable to know	Nice to know
I (15 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and describe historical development and current trends in mental health nursing. Understand the importance of community mental health nursing. <b>Skill:</b> Provide comprehensive care to various kinds of psychiatric patients and appreciates human rights of mentally ill. <b>Attitude:</b> Appreciates multi disciplinary approach in providing comprehensive care to psychiatric patients.	<ul> <li>Mental Health and Mental Illness:</li> <li>Contemporary practices(1 hour)</li> <li>Mental health laws/acts(1 hour)</li> <li>National mental health program –National mental health authority ,state mental health authority (3 hours)</li> <li>Human rights of mentally ill(1 hour)</li> <li>Classification of mental illnesses –ICD ,DSM (3 hours)</li> <li>Multi-Disciplinary team and role of nurse</li> <li>Role of psychiatric nurse –extended and expanded. (3 hours)</li> </ul>	Historical perspectives(1 hour)     Trends, issues and magnitude.     (1 hour)     Mental Health/ Mental Illness Continuum (1 hour)	
II (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and describe general structure and functions of the body. <b>Skill:</b> Correlate with abnormalities of nervous system <b>Attitude:</b> Apply this knowledge in the field of nursing practice.	<ul> <li>Concept of Psychobiology:</li> <li>Neurotransmitters (1 hour)</li> <li>Neuro psychiatric disorders. (1 hour)</li> <li>Implications for Nursing. (1 hour)</li> </ul>	<ul> <li>The nervous system: An anatomical review, the brain and limbic system, Nerve tissue, Autonomic nervous system.         <ul> <li>(2 hour)</li> </ul> </li> <li>Neuro endocrinology- Pituitary, Thyroid Gland         <ul> <li>Circadian Rhythms, Genetics</li> <li>Psycho immunology, Implications for psychiatric illness (4 hour)</li> </ul> </li> </ul>	Normal Immune response. (1 hour)
III (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand the concept of personality and influence on behavior and developmental psychology. <b>Skill:</b> Differentiate mentally healthy and mentally ill. <b>Attitude:</b> Apply this knowledge in nursing practice.	Theories of Personality Development and Relevance to Nursing Practice:  • Psychoanalytic Theory-Freud's (1 hour)  • Interpersonal Theory-Sullivan's (1 Hr) Theory of Psychosocial Development- Eriksson's. (1 hour)Theory of object relations. (1 hour)Cognitive Development Theory. (2 hrs)Theory of Moral Development. (2 hrs) A Nursing Model-Hildegard E. Peplau (2 Hr)		

IV (5 hours)	At the end of unit students are able to <b>Knowledge:</b> Understands and describe the concept of stress and its influence on individual. <b>Skill:</b> Adobe stress. <b>Attitude:</b> Apply this knowledge stress management.	Stress and its Management:  • Stress as transaction between the individual and environment & Stress management.  (1 hour)	An introduction to the concepts of stress, Psychological Adaptation to stress, Stress as a Biological Response, Stress as an environmental event (4 hour)	
V (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand importance of therapeutic communication and inter personnel relationship. <b>Skill:</b> Acquire competency in assessment therapeutic communication and maintaining inter personnel relationship. <b>Attitude:</b> Appreciates importance of inter personnel relationship.	<ul> <li>Therapeutic Communication and Interpersonal Relationship:         <ul> <li>Techniques of therapeutic communication touch therapy, Barrier of communication with specific reference to psychopathology (2 hour)</li> <li>Dynamics of a therapeutic Nurse-client relationship; Therapeutic use of self Gaining self-awareness, Therapeutic nurse-patient relationship in phases; Conditions (3 hour)</li> <li>Essentiality of developing a therapeutic relationship, Therapeutic impasse and its management (2 hour)</li> </ul> </li> </ul>	<ul> <li>Review communication process ,factors affecting communication(1 hour)</li> <li>Communication with individuals and in groups. (1 hour)</li> </ul>	• Therapeutic attitudes. (1 hour)
VI (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and describe effective communication process. <b>Skill:</b> Communicate effectively with individuals, groups members of health team & establishes effective interpersonal relationship. <b>Attitude:</b> Appreciate importance of assertive communication.	Assertive Training:  • Role of the Nurse. (2 hours)	<ul> <li>Assertive Communication</li> <li>Response Patterns: Nonassertive         <ul> <li>Assertive, Aggressive Behavior</li> <li>Passive- Aggressive Behavior</li> <li>Behavioral Components of</li> <li>Assertive Behavior (4 hour)</li> </ul> </li> <li>Techniques that promote         <ul> <li>Assertive Behavior (2 Hrs)</li> </ul> </li> <li>Thought-Stopping Techniques         <ul> <li>Method (1 Hr)</li> </ul> </li> </ul>	Basic Human rights     (1 hour)
VII (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Develops understanding of self and others. Understand cognitive and affective process of human mind.	<ul> <li>Promoting Self Esteem:</li> <li>Components of Self-Concept(2 hours)</li> <li>The Development of Self-Esteem (2 Hrs)</li> <li>The Manifestations of Low-Self-Esteem. (2 hours)</li> <li>Role of the Nurse (2 hours)</li> </ul>	Boundaries. (2 hours)	
VIII (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand & describe	The Nursing Process in Psychiatric/Mental Health Nursing:	Documentation     Problem-oriented recording	

	nature purpose & process of assessment of mental health status.  Skill: Assist in psychological assessment and test &Implement this knowledge in caring client.  Attitude: Correlate with nursing care in clinical and community setting	<ul> <li>Mental health assessment-History taking mental status examination (2 hours)</li> <li>Physical and neurological examination, Psychometric assessment (2 hour)</li> <li>Investigations, Diagnosis, Differential diagnosis Interpretation of investigations Nurse's Role (3 hour)</li> </ul>	Focus charting The PIE method (2 hours)  Nursing case management Critical pathways of care (1 Hr))	
IX (35 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and explain treatment modalities & therapies used in mental disorders. <b>Skill:</b> Apply the steps of therapies in mentally ill patients. <b>Attitude:</b> Develops interest in understanding treatment modalities and its use in practice.	<ul> <li>Psychosocial Therapies:         <ul> <li>Behavioral Therapy –Relaxation therapy, cognitive therapy, positive-negative reinforcement, bio-feedback, guided imaginary (13 hours)</li> <li>Group Therapy (3 hours)</li> <li>Family Therapy/ Marital therapy (4 Hrs)</li> <li>Occupational therapy (3 hours)</li> </ul> </li> </ul>	Individual therapy, Milieu therapy, The Therapeutic Community, Recreational therapy, Play therapy, Music therapy (12 hours)	
X (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand and explain basic concepts psychopharmacology, drugs used and side effects of drugs. <b>Skill:</b> Recognize the effects and side effects of drugs. <b>Attitude:</b> Appreciate client's behavior under influence of drugs.	Psychopharmacology:  • Role of a Nurse in Psychopharmacological Therapy Anti anxiety Agents, Antidepressant Agents, Mood stabilizers Anti psychotics, Sedative-Hypnotics Central Nervous System Stimulants (8 hours)	Historical Perspectives     (1 hour)	• Future developments (1 hour)
XI (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Importance of ECT in mental disorders and role of nurse. <b>Skill:</b> Assist effectively while giving ECT.	<ul> <li>Electroconvulsive Therapy:</li> <li>Indications (1 hour)</li> <li>Contraindications (1 hour)</li> <li>Side Effects (2 hours)</li> <li>The Role of the Nurse in Electroconvulsive Therapy (2 hours)</li> </ul>	<ul> <li>Historical Perspectives (1 hour)</li> <li>Mechanisms of Actions. (1 hour)</li> </ul>	Risks Associated with Electroconvulsive Therapy (2 hours)
XII (15 hours)	At the end of unit students are able to <b>Knowledge:</b> Understand & explain importance of alternative system of medicine in psychiatric nursing. <b>Attitude:</b> Appreciate and incorporate alternative system of medicine.	Alternative System of Medicine in Mental Health:  • Homeopathic (1 hour)  • Diet and Nutrition (3 hours)  • Yoga (1 hour)  • Pet Therapy (1 hour)	<ul> <li>Acupressure &amp; Acupuncture (2 hours)</li> <li>Therapeutic Touch &amp; Massage (2 hour)</li> <li>Unani (1 hour)</li> <li>Siddha (1 hour)</li> </ul>	<ul> <li>Herbal Medicine (1 hour)</li> <li>Chiropractic Medicine (2 hours)</li> </ul>

#### AREA AND DISTRIBUTION OF CLINICAL EXPERIENCE HOURS:

Sr. No	Area of Clinical Posting	No. of Weeks -posting	Total Clinical 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 Unit/Half way home /Day care centre	4	120 Hours
	Total	22 weeks	660 Hours

#### **TEACHING STRATEGY:-**

Total Hours: - 810 Theory Hrs. - 150 Clinical Hrs. - 660

#### **TEACHING METHODS:-**

Lecture, Seminar, Laboratory Demonstration, Group Discussion, Clinical Observation, Bed Side clinic, Clinical Presentations, Workshops, Symposium, Field visits.

#### A.V. AIDS:-

Over head Projector, L.C.D, Computer Assisted Instruction, Flip charts, Posters, Black Board, Simulation models.

#### **ASSIGNMENTS:**

#### Theory:

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Seminar	Two	1X50	100
2	Panel Discussion (Group Work)	One	1X25	25
3	Speciality Related Journal Presentation	Two	1X25	50
4	Writing/Presenting Paper on Given Topic	One	1X50	50
			Total Marks	225

#### **Practical:**

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Case Study	Two	1X100	200
2	Case Presentation	Two	1X50	100
3	Nursing Care Plan	Two	1X50	100
4	Mental Status Examination	Two	1X25	50
5	Psychiatric History Taking	Two	1X25	50
6	Process Recording in Psychiatric Unit	Two	1X25	50
7	Clinical performance Evaluation	One	1X100	100
8	Drug Study (Minimum 20 drugs)	One	1X100	100
		_	Total Marks	750

#### **RECOMMENDED BOOKS:-**

- Gail Wiscars Stuart.Michele T. Laraia- "Principles and practice of psychiatric nursing"
- Michael Gelder, Richard Mayou, Philip Cowen-Shorter oxford text book of psychiatry
- M.S. Bhatia- A concised text Book of Psychiatric Nursing
- M.S. Bhatia-Essentials of Psychiatry
- Mary C Townsend-"Psychiatric Mental Health Nursing". Concept of care
- Bimla Kapoor-Psychiatric nursing Vol. I & II
- Niraj Ahuja- A short textbook of psychiatry
- The ICD10, Classification of mental and behavioral disorders, WHO, A.I.T.B.S. publishers, Delhi,2002
- De Souza Alan, De Souza Dhanlaxmi, De Souza A-"National series Child psychiatry"

- Patricia, Kennedy, Ballard-"Psychiatric Nursing Integration of Theory and Practice"
- Kathernic M. Fort in ash-Psychiatric Nursing Care plans
- Sheila M. Sparks, CynthiaM. Jalor- Nursing Diagnosis reference manual
- R. Sreevani-A guide to mental health & psychiatric nursing
- R. Baby-Psychiatric Nursing
- Varghese Mary-Essential of psychiatric & mental health nursing,
- Foundations Journals of mental health nursing
- American Journal of Psychiatry
- Deborah Antai Otoing. "Psychiatric Nursing" Biological and behavioral concepts. 2003
- Mary Ann Boyd. "Psychiatric Nursing". Contemporary practice

#### Subject No.4

#### CLINICAL SPECIALITY-I

#### OBSTETRIC AND GYNACOLOGICAL NURSING

Total Hours: 810 Theory Hours: 150 Clinical Hours: 660

#### AIM:

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

#### **OBJECTIVES:**

At the end of the course the students are able to:

- Appreciate the trends in the field of midwifery, obstetrics and gynecology as a Speciality.
- Describe the population dynamics and indicators of maternal and child health.
- Describe the concepts of biophysical, psychological and spiritual aspects of normal pregnancy, labour and puerperium.
- Provide comprehensive nursing care to women during reproductive period.
- Integrate the concepts of family centered nursing care and nursing process approach in obstetric and gynecological nursing.
- Identify and analyze the deviations from normal birth process and refer appropriately.
- Describe the pharmacological agents, their effects during pregnancy, child birth, puerperium, lactation and the role of nurse.
- Counsel adolescents, women and families on issues of pertaining pregnancy, child birth and lactation.
- Describe the role of various types of complementary and alternative therapies in obstetrics and gynecological nursing.
- Incorporate evidence based nursing practice and identify the areas of research in the field of obstetric and gynecological nursing.
- Describe the recent advancement in contraceptive technology and birth control measures.
- Appreciate the Legal and Ethical issues pertaining to obstetric and gynecological nursing.

#### **COURSE CONTENTS:**

#### **Unit I -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.
- 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 practice, standing orders.
- Evidence based midwifery practice.
- Research priorities in obstetric and gynecological nursing.

#### **Unit II -Human reproduction:**

- Review of anatomy and physiology of human reproductive system:-male and female.
- Hormonal cycle, Embryology, Genetics, teratology and counseling, Clinical implications.

#### **Unit III -Pregnancy:**

- Maternal adaptation: Physiological, psychological.
- Assessment:-Maternal and foetal measures.
- Maternal measures: History taking, Examination-general, physical and obstetrical measures, identification of high risk
- Foetal measures: Clinical parameters, bio chemical, human estriol, maternal serum Alfa Feto Protein, Acetyl choline esterase (AchE), Triple test Amniocentesis, Cordocentesis, and Chrionicvillus sampling (CVS).
- Biophysical :-US imaging, Foetal movement count, Ultra Sonography ,Cardio tomography, Contraction stress test(CST),Non stress test(NST) , Amnioscopy, Foetoscopy.

- Radiological examination.
- Interpretation of diagnostic tests and nursing implications.
- Nursing management of the 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, parental counseling, role of nurse and crisis intervention, identification of high risk pregnancy and
  referral system.
- Alternative/complimentary therapies.

#### **Unit IV -Normal labour and nursing Management:**

- Essential factors of labour, Stages and onset.
- **First stage**: Physiology of normal labour, Use of partograph: principles, use and critical analysis, evidence based studies, Analgesia and anaesthesia in labour, Nursing management.
- **Second stage:** Physiology, intra partum monitoring, nursing management, Resuscitation, immediate newborn care and initiate breast feeding (Guidelines of National neonatology forum of India).
- Third stage: Physiology and nursing management.
- Fourth stage: Observation, critical analysis and nursing management
- Various child birth practices: water birth, position change etc
- Evidence based practice in relation to labour intervention, Role of practitioner nurse midwife
- Alternative /complimentary therapies.

#### **Unit V -Normal puerperium and nursing management:**

- Physiology of puerperium.
- Physiology of lactation, lactation management, exclusive breast feeding, Baby friendly hospital imitative (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.
- Role of practitioner nurse midwife.
- Alternative/complementary therapies.

#### **Unit VI -Normal New Born:**

- Physiology and characteristics of normal newborn
- Physical and behavioural assessment of newborn
- Needs of newborn
- Essential newborn care: Exclusive breast feeding, Immunization, hygiene measures, newborn nutrition.
- Organization of neonatal care, services (levels), transport, neonatal Intensive care unit, organization and management of nursing unit, organization and management of nursing services in NICU.
- Observation and care of newborn.
- Parenting process.

#### Unit VII -Pharmoco dynamics in obstetrics:

- Drugs used in pregnancy, labour, post partum and newborn.
- Calculation of drug dose and administration.
- Effect of drugs used.
- Anaesthesia and analgesia in obstetrics.
- Role 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.

#### **Unit VIII -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 midwifery practitioner.
- Family life education, Evidence based studies.
- Information, education and communication (IEC), Management information and evaluation system (MIES).
- Teaching and supervision of health team members.

#### **Unit IX -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 nurse in infertility management.

#### **Unit X - Menopause:**

- Physiological, psychological and social aspects.
- Hormone replacement therapy, surgical menopause.
- Counseling and guidance, Role of practitioner nurse midwife.

#### **Unit XI - Abortion:**

- Types, causes, Legislations, Clinical rights and professional responsibility, Abortion procedures, Complication,
- Nursing management, Role of practitioner nurse midwife.

#### **PRACTICAL:**

#### • Procedures to be Observed:

Diagnostic Investigations: Amniocentesis, Chordocentesis, Chorionic villi sampling. Infertility Management: Artificial reproduction – Artificial insemination, invitro fertilization and related procedures.

- **Procedures to be assisted:** Medical Termination of Pregnancy.
- Procedures to be performed:

Sr. No.	Activity	No. of cases
1	Antenatal Assessment	20
2	Post natal Assessment	20
3	Assessment during labour: Use of partograph	20
4	Per vaginal examination	20
5	Conduct of normal delivery	20
6	Episiotomy and suturing	10
7	Insertion of intra uterine devices (cupper T)	
8	Setting up delivery areas	

#### • Others:

- 1. Identification of high risk women and referral.
- 2. Health Education: to women and their family members.
- 3. Motivation of couples for Planned Parenthood.

# CLINICAL SPECIALITY-I OBSTETRICS AND GYNACOLOGICAL NURSING

Unit No.		Со	ntents with distributed hours	
with total hours	<b>Objectives</b>	Must know	Desirable to know	Nice to know
I (10 hours)	Knowledge: Recognize the trends and issues in obstetrics and gynecological nursing. Describe the roll of nurse in family welfare programme.  Skill: Identify and differentiate various approaches applied in midwifery practice. Apply the theories and models in midwifery practice.  Attitude: Appreciate the importance of family welfare programme.	<ul> <li>National health and family welfare programmes related to maternal and child health:-Health care delivery system, National Rural health mission, Role of NGO's (2 hours)</li> <li>Evidence based midwifery practice (1 hour)</li> <li>Role and scope of midwifery practice:- Independent Nurse midwifery practice, standing orders (1 hour)</li> </ul>	<ul> <li>problems (1 hour)</li> <li>Issues of maternal and child health; Age, Gender, Sexuality Psycho socio-cultural factors.(1Hr)</li> <li>Preventive obstetrics (1 hour)</li> <li>Research priorities in obstetric and gynecological nursing.</li> <li>Theories, models and approaches applied to midwifery practice.(1Hr)</li> </ul>	
II (15 hours)	A t the end of unit students are able to <b>Knowledge:</b> Describe the anatomy and physiology of human reproductive system. <b>Attitude:</b> Combines various interaction skills for genetic counseling.	<ul> <li>Review of anatomy and physiology of human reproductive system:-male and female.(2 Hrs)</li> <li>Hormonal cycle.(1 hour)</li> </ul>	<ul> <li>Embryology. (2 hours)</li> <li>Genetics, teratology and counseling. (5 hours)</li> <li>Clinical implications. (5 hours)</li> </ul>	
III ( 25 hours)	At the end of unit students are able to <b>Knowledge:</b> Describe the diagnosis and management of women during antenatal period. Describe the concepts of biophysical and biochemical methods to asses maternal and fatal well being. Explain the role of midwives in preparation for child birth and parenthood. <b>Skill:</b> Identifies physiological changes during pregnancy. Detects the minor disorders of pregnancy. Identifies the high risk pregnancies. <b>Attitude:</b> Assist in fetal well being.	physical and obstetrical measures, identification of high risk. (5 hours)	<ul> <li>Fetal measures: Clinical parameters, bio chemical, human estriol, maternal serum Alfa Feto Protein, Acetyl choline esterase (AchE), Triple test Amniocentesis, Cordocentesis, Chrionicvillus sampling (CVS). (2 hours)</li> <li>Biophysical :-US IMAGEING, Foetal movement count, Ultrasonography, Cardio tocography, Contraction stress test(CST),Non stress test(NST) (3 hours)         Amnioscopy, Foetoscopy. Radiological examination     </li> </ul>	• Alternative/complimentary therapies (1 hour)

		Interpretation of diagnostic tests and nursing implications. (5 hours)  • Preparation for child birth and parenthood, importance of institutional delivery, choice of birth setting, importance and mobilizing of transportation, parental counseling, role of nurse and crisis intervention, identification of high risk pregnancy and referral. (2 hours)	
IV A t the end of unit students are able to		• Analgesia and anesthesia in labour. (2 hours)	• Various child birth practices:-water birth,
(25 hours)  Knowledge Interprets the partograph correctly.  Skill: Identifies the early signs of stages of labour. Apply the partograph labour process.  Attitude: Asses the newborn and performs newborn resuscitation.	<ul> <li>Management:</li> <li>Essential factors of labour</li> <li>Stages and onset (2 hours)</li> <li>First stage: Physiology of normal labour, Use of partograph: principles, use and critical analysis, evidence based studies. (2 hrs) Nursing management.(2 hours)</li> <li>Second stage: Physiology, intra partum monitoring, nursing management, Resuscitation, immediate newborn care and initiate breast feeding (Guidelines of National neonatology forum of India). (5 hrs)</li> <li>Third stage: Physiology and nursing management (5 hours)</li> <li>Fourth stage:-Observation, critical analysis and nursing management.</li> <li>Evidence based practice in relation to labour intervention.</li> <li>Role of practitioner nurse midwife. (4 hours)</li> </ul>	nours)	practices:-water birth, position change etc.  (1 hour)  Alternative /complimentary therapies. (2 hours)
V A t the end of unit students are able to	71 1	Alternative/complementary therapies.	
(20 hours) <b>Knowledge:</b> Describe the physiology of		(1 hour)  Minor discomforts and complications	
puerperium and its management.  Describe the physiology of lactation.	<ul><li>Physiology of puerperium. (2 hrs)</li><li>Physiology of lactation, lactation</li></ul>	• Minor discomforts and complications of puerperium.	
Skill: Detect the minor discomforts and	<ul> <li>Physiology of lactation, lactation management, exclusive breast feeding,</li> </ul>	(2 hours)	
complications of puerperium.	Baby friendly hospital imitative	Management of mothers during	

	1	(DEIII) (4 hours)		
		(BFHI). (4 hours)	puerperium:-postnatal exercises, Rooming in, bonding, warm chain.	
		<ul> <li>Assessment of postnatal women.</li> <li>(3 hours)</li> </ul>	(3 hours)	
		` /	(3 hours)	
		• Evidence based studies. (3 hours)		
		• Role of practitioner nurse midwife (2		
3.71	A	hours)		
VI	A t the end of unit students are able to		• Observation and care of newborn (2	• Parenting process.
(20 hours)	Knowledge: Describe the normal	Physiology and characteristics of	hours)	(2 hours)
	physiology of newborn. Describe the	normal newborn (3 hours)		
	organization and management of neonatal services in NICU	Physical and behavioral assessment of      Physical and behavioral assessment of		
		newborn. (2 hours)		
	<b>Skill:</b> Perform neonatal assessment and identify the normal characteristics of	<ul><li>Needs of newborn. (3 hours)</li><li>Essential newborn care:-Exclusive</li></ul>		
	newborn. Identifies the need of newborn.	breast feeding, Immunization, hygiene		
	Attitude: Displays confidence while	measures, newborn nutrition.(5 hours)		
	caring newborn.	<ul> <li>Organization of neonatal care, services</li> </ul>		
	caring newborn.	(levels), transport, neonatal intensive		
		care unit, organization and		
		management of nursing services in		
		NICU.(3 hours)		
VII	A t the end of unit students are able to	` /	Anaesthesia and analgesia in	
(10 hours)	Knowledge: Describe the	• Drugs used in pregnancy, labour, post	obstetrics. (1 hour)	
(	pharmacological agents, their effects	partum and newborn.	• Role & responsibilities of midwifery	
	during pregnancy, labour, puerperuim and	(2 hours)	nurse practitioner (2hrs)	
	newborn. Describe the role and	<ul> <li>Calculation of drug dose and</li> </ul>	<ul> <li>Standing orders and protocols and</li> </ul>	
	responsibility of midwife in	administration. (1 hour)	use of selected life saving drugs and	
	administration of drugs.	<ul> <li>Effect of drugs used.</li> </ul>	interventions of obstetric	
	<b>Skill:</b> Calculate the drug dose used.	(2 hours	emergencies approved by the	
	Identify the effects of drugs used.		MOHFW (2 hours)	
VIII	At the end of unit students are able to	Family Welfare Services:	<ul> <li>Role of nurses in family welfare</li> </ul>	<ul> <li>Family life education</li> </ul>
(10 hours)	<b>Knowledge:</b> Describe the population	<ul> <li>Population dynamics. (1 hour)</li> </ul>	programmes in all settings.	(1 hour)
	dynamics and indicators of maternal child	<ul> <li>Demography trends:-vital statistics,</li> </ul>	(1 hour)	
	health. Describe the methods of	calculation of indicators especially	Role of independent nurse midwifery	
	contraception and role of nurse in family	maternal and neonatal mortality rates	practitioner.	
	welfare programme.	and problems and other health	(1 hour)	
	<b>Skill:</b> Calculate the indicators of	problems.(2 hours)	<ul> <li>Teaching and supervision of health team members.</li> </ul>	
	maternal and child health.	Recent advancement in contraceptive  technology (1 hour)	team members. (1 hour)	
		technology.(1 hour)	<ul><li>Evidence based studies</li></ul>	
		• Information, education and	(1 hour)	
		communication (IEC), Management	(1 11041)	
1				

		information and evaluation system (MIES).(1 Hr)		
IX (5 hours)	At the end of unit students are able to <b>Knowledge:</b> Define infertility, Classify the infertility based on its etiology. Describe the ethical and legal aspects of ART. <b>Skill:</b> Identify the different diagnostic procedures used for infertility treatment. <b>Attitude:</b> Provide comprehensive nursing care to client with infertility & promote the interpersonal relationship.	<ul> <li>Infertility:         <ul> <li>Primary and secondary causes,</li> <li>Diagnostic procedures.(1 hour)</li> </ul> </li> <li>Counseling:-Ethical and legal aspects of assisted reproductive technology (ART) (1 hour)</li> <li>Recent advancement in infertility management. (1 hour)</li> <li>Role of nurse in infertility management. (1 hour)</li> </ul>	Adoption procedures     (1 hour)	
X (5 hours)	At the end of unit students are able to <b>Knowledge:</b> Asses the physiological and psychosocial aspects in menopause and participate in counseling & guidance. <b>Skill:</b> Identify the effects of HRT. <b>Attitude:</b> Recognize the different HRT.	<ul> <li>Menopause:</li> <li>Physiological, psychological and social aspects. (1 hour)</li> <li>Hormone replacement therapy. (1 hour)</li> <li>Surgical menopause.(1 hour)</li> </ul>	<ul> <li>Counseling and guidance.         <ul> <li>(1 hour)</li> </ul> </li> <li>Role of midwifery nurse practitioner.         <ul> <li>(1 hour)</li> </ul> </li> </ul>	
XI (5 hours)	At the end of unit students are able to <b>Knowledge:</b> Define abortion & classify the abortion and its causes. <b>Skill:</b> Perform different procedures related to abortion. <b>Attitude:</b> Initiate the building of interpersonal relationship with clients. Display confidents while caring patients with abortion.	<ul> <li>Abortion:</li> <li>Types, causes. (1 hour)</li> <li>Legislations, Clinical rights and professional responsibility. (1Hr)</li> <li>Abortion procedures. (1 hour)</li> <li>Complication.</li> <li>Nursing management. (1 hour)</li> <li>Role of midwifery nurse practitioner.(1 hour)</li> </ul>		

#### AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr. No.	Dept/Unit	No. of weeks	Total hours.
1	Antenatal wards & OPD	4weeks	120 hrs
2	Labour room	5 weeks	150 hrs
3	Postnatal ward	3 weeks	90 hrs
4	Family planning clinics	2 weeks	60 hrs
5	PHC/Rural maternity settings.	4 weeks	120 hrs
6.	Gynaec ward.	2 weeks	60 hrs
7	Maternity O.T	2 weeks	60 hrs
	TOTAL	22 WEEKS	660 HRS

#### TEACHING STRATEGY:

Total Hours 810 Theory Hours 150

Clinical Hours 660

#### **TEACHING METHODS:**

Lecture cum discussion, Seminar, Panel discussion, Symposium, Group Discussion Written assignments.

#### A.V. AIDS:

Over head Projector, L.C.D, Computer Assisted learning, Flip charts, Posters, Black Board, and Computer assisted learning.

#### **ASSIGNMENTS:**

#### Theory:

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Seminar	Two	1X50	100
2	Panel Discussion (Group Work)	One	1X25	25
3	Speciality Related Journal Presentation	Two	1X25	50
4	Writing/Presenting Paper on Given Topic	One	1X50	50
			Total Marks	225

#### **Practical:**

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Nursing Care plans	Two	1X50	100
2	Case presentation	Two	1X50	100
3	Clinical Performance Evaluation	Two	1X100	200
4	Case Book	One	1X25	25
5	Drug Study	One	1X100	100
6	Case Study	Two	1X100	200
7	Preparation of OBG Instrument Book	One	1X25	25
			Total Marks	750

#### LIST OF RECOMMENDED BOOKS AND JOURNALS:

- Buckley Kathleen and Kulb Nancy W, "High Risk Maternity Nursing Manual"
- Bennet V Ruth & Brown K Linda, "Myle" text Book for Midwives
- Calander, R & A Miller, 'Obstetrics illustrated' IV edn, Churchill & Livigstone
- Dawn C.S, "Textbook of Obstetrics and Neonatology", Dawn Books, Calcutta.
- Dawn C.S, "Textbook of Gynaecologfy and contraception", Dawn Books, Calcutta.
- D.C Dutta, "Text book of Obstetrics", Vth edition
- D.C Dutta, "Text book of Gynaecology", Vth edn,
- Daftary Shrish N EL AL, "Holland and Brews Manual of Obstetrics", XVI edn,
- Dickason Elizabeth jean et al, "Maternal infant Nursing care, II edn,
- Hollan and Brews", Manual of Obstetrics", BI Churchill Livingstone
- Ladewing Patricia Wieland et al, "Essentials of Maternal Newborn Nursing", II edn,

- Menon Krishna & Palaniappan, "Clinical Obstetrics", IX EDN
- Rashmi Patil, "Instruments, Operatuions, Drugs in Obstetrics and Gynaecology",
- Philips Celeste R, "Family centered Maternity Newborn care", III edn,
- Tindall VR, Jeffcoate's Principles of Gynaecology
- Wonna Donna L, Perry Shannon et al", Maternal child Nursing", 1998, Iedn,
- American Journal of Nursing
- Health and population
- Indian Journal of Nursing and Midwifery
- Journal of Obstetrics and Gynaecology
- Journal of Paediatrics
- Journal of Family Welfare
- Nursing Journal of India
- Nursing Times
- Paediatrics today
- Paediatric clinics of India
- Obstetrics and Gynaecology Today.

#### Subject No. 4

#### CLINICAL SPECIALTY – I

## CHILD HEALTH NURSING (PAEDIATRIC NURSING)

Total Hours: 810 Theory Hours: 150 Clinical Hours: 660

#### AIM:

This course is designed to assist students in developing expertise and in-depth understanding

of the Pediatric Nursing field. 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 Pediatric nursing.

#### **OBJECTIVES:**

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

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

#### **COURSE CONTENT:**

#### UNIT I – INTRODUCTION:

- Historical development of Pediatrics and Pediatric Nursing
- Philosophy of pediatric care, Changing trends in Pediatric Nursing.
- Role of family in child care, Community-based nursing of the child and family
- Ethical and cultural issues in pediatric Care,
- Role of pediatric nurse in hospital and community for prevention and illness
- Rights of children and special laws and Ordinance relating to children.
- Current status of child health in India; National goals, Five year plans, National and international organizations related to child health, National health programs related to child health.

#### UNIT II -ASSESSMENT OF PEDIATRIC CLIENTS:

- History taking, Developmental assessment, Physical assessment, Nutritional assessment, Family assessment.
- Nursing process in care of children.

#### UNIT III -NURSING MANAGEMENT OF THE SICK/ HOSPITALIZED CHILD:

- Difference between child and adult Care, 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.

#### **UNIT IV -PRE-NATAL PEDIATRICS:**

- Embryological and fetal development, Prenatal factors influencing growth and development of fetus.
- 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.

#### UNIT V -GROWTH AND DEVELOPMENT OF CHILDREN:

- Principles of growth and development, Factors affecting growth and development
- Concepts and theories of growth & Development Biophysical Psycho-social theories Psychosexual theories Moral development theories Cognitive development theories Spiritual theories
- Development tasks and special needs from infancy to adolescence, developmental milestones,
- Assessment of growth and development of pediatric clients,
- Growth Monitoring, Role of play in growth and development of children.

#### UNIT VI -BEHAVIORAL / SOCIAL PEDIATRICS AND PEDIATRIC NURSING:

- Parent child relationship
- Basic behavioral pediatric principles and specific behavioral pediatric concepts/ disorders maternal deprivation, failure to thrive, child abuse, the battered child.
- Common behavioral and social problem and their management, Child guidance clinic.

#### UNIT VII -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.
- Mortality among children, MCH indicators, Recent trends in MCH services.
- Immunization, expanded program on immunization / universal immunization program and cold chain.
- Nutrition and Nutritional requirements of children,
- Fluid and electrolyte balance in Children
- Pattern of feeding, breast feeding, baby-friendly hospital initiative, Artificial feeding, Weaning
- Nutritional Programs and welfare Services.
- Health education, nutritional education for children.

#### **UNIT VIII - NEONATAL NURSING:**

- Neonatal resuscitation, New born baby-profile and characteristics of the new born
- Assessment of the new born
- Nursing care of the new born at birth, care of the new born and family,
- planning and organization of level I,II and III neonatal care units NICU and environment
- Equipment and personnel management
- High risk neonate pre term and term neonate and growth retarded babies.
- Low birth weight babies
- Transport of the high risk neonate to NICU
- Neonatal infections prevention and management
- Identification and classification of neonates with infection HIV and AIDS, Ophthalmic neonatrum, 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.

#### **Management of Neonatal Problems:**

• Respiratory distress syndrome & HMD, Neonatal Hypoglycemia, Neonatal Hyper bilirubinemia, Common metabolic problems, Nutritional requirements, Neonatal seizures, Neonatal mechanical ventilation, Thermo regulation, Follow up care and assessment of high risk infants

#### **Unit IX -IMNCI (Integrated Management of Neonatal and Childhood Illnesses):**

- Concept, Rationale for an evidence based syndromes approach & Components.
- Principles of IMNCI & Case management process, Outpatient management of young infants' age up to 2 months & of children age 2 months to 5 years, Principles of management of sick children in small hospital
- National Population policy 2000, Re productive and child health.

#### CLINICAL SPECIALTY – I

### **CHILD HEALTH NURSING**

(PAEDIATRIC NURSING)

Unit No.	Contents with distributed hours				
with total hours	<b>Objectives</b>	Must know	Desirable to know	Nice to know	
I (12 hours)	At the end of unit students are able to <b>Knowledge:</b> Know the basic needs of child health nursing and Understand the programmes of child health.  Attitude: Develop the positive attitude regarding child health.	<ul> <li>Introduction:</li> <li>Historical development of Pediatrics and Pediatric Nursing (1 Hour)</li> <li>Role of family in child care (1 Hour)</li> <li>Community-based nursing of the child and family (1 Hour)</li> <li>Ethical and cultural issues in pediatric Care (1 Hour)</li> <li>Role of pediatric nurse in hospital and community for prevention and illness.(1 Hour)</li> <li>Current status of child health in India; National goals, Five year plans, National and international organizations related to child health, National health programs related to child health. (5 Hrs)</li> </ul>	<ul> <li>Rights of children and special laws &amp; Ordinance relating to children.</li> <li>Changing trends in Pediatric Nursing. (1 Hour)</li> </ul>	Philosophy of pediatric care.     (1 Hour)	
II (10 hours)	<b>Knowledge:</b> Understand the deviation of growth and development.	<ul> <li>Assessment of Pediatric Client:</li> <li>History taking, Developmental assessment, Physical assessment, Nutritional assessment. (7 Hour)</li> <li>Nursing process in care of children (2Hour)</li> </ul>	• Family assessment (1 Hour)		
III (5 hours)	At the end of unit students are able to <b>Knowledge:</b> Distinguish the difference between the child and adult care. <b>Skill:</b> Create newer approach to the nursing care of child health.	<ul> <li>Hospitalized Child:</li> <li>Difference between child and adult Care (1Hour).</li> <li>Meaning of hospitalization of the child, preparation for hospitalization, effects of hospitalization on the child and family (1Hour).</li> <li>Nursing care of hospitalized child and FAMILY - principles and practices (1Hour).</li> </ul>		• Stressors & reactions related to developmental stages, play activities for ill / hospitalized child. (2Hour).	
IV (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Know the normal growth and development of fetus. <b>Skill:</b> Develop t he process of genetic counseling.	<ul> <li>Pre – natal Pediatrics:</li> <li>Embryological and fetal development, Prenatal factors influencing growth and development of fetus (5 hours)</li> <li>Genetic patterns of common pediatric disorders, chromosomal aberrations, genetic assessment (2 Hrs)</li> <li>Role of nurse in genetic counseling, Importance of prenatal care and role of pediatric nurse. (2 hrs.)</li> </ul>		Counseling legal and ethical aspects of genetic, screening and counseling.     (1 hour)	

At the end of unit students are able to <b>Knowledge:</b> Describe principles, factors, concepts and theories of growth and development. <b>Skill:</b> Identify deviations of growth and development of children & educate & motivate parents for normal growth and development of pediatric clients. <b>Attitude:</b> Create the normal growth and development chart of the child.	<ul> <li>Growth and Development of Children:</li> <li>Principles of growth and development (2 hours)</li> <li>Factors affecting growth &amp; development (2 hours)</li> <li>Assessment of growth and development of pediatric clients (3 hours)</li> <li>Growth Monitoring (1 hour)</li> </ul>	<ul> <li>Concepts and theories of growth &amp; Development Biophysical Psycho-social theories, psychosexual theories, Moral development theories Cognitive development theories Spiritual theories. (6 hours)</li> <li>Development tasks and special needs from infancy to adolescence, developmental milestones (4 hours)</li> </ul>	• Role of play in growth and development of children. (2 hours)
At the end of unit students are able to <b>Knowledge:</b> Know the concept of behavior and social pediatric nursing.	<ul> <li>Behavioral Pediatrics and Pediatric Nursing:</li> <li>Parent child relationship.(1 hour)</li> <li>Basic behavioral pediatric principles and specific behavioral pediatric concepts/ disorders – maternal deprivation, failure to thrive, child abuse, the battered child. Child guidance clinic.(9 hour)</li> </ul>	Common behavioral and social problem and their management. (5 hours)	
At the end of unit students are able to Knowledge: Know the programmes of preventive pediatrics.  Skill: Prepare t he parents to have a healthy child.	<ul> <li>Preventive Pediatrics and Pediatric Nursing:</li> <li>Concept, aims and scope of preventive Pediatrics (1 hour)</li> <li>Maternal health and its influence on child health antenatal aspects of preventive pediatrics. (3 hours)</li> <li>Mortality among children, MCH indicators. Recent trends in MCH services (3 hours)</li> <li>Immunization, expanded program on immunization / universal immunization program and cold chain. (4 hours)</li> <li>Nutrition and Nutritional requirements of children. (5 hours)</li> <li>Pattern of feeding, breast feeding, baby-friendly hospital initiative, Artificial feeding, Weaning. (6 hours)</li> </ul>	<ul> <li>Fluid and electrolyte balance in Children.         <ul> <li>(4 hours)</li> </ul> </li> <li>Nutritional Programs and welfare Services.         <ul> <li>(2 hours)</li> </ul> </li> <li>Health education, nutritional education for children.         <ul> <li>(2 hours)</li> </ul> </li> </ul>	

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VIII (33 hours)	At the end of unit students are able to Knowledge: Understand the assessment of newborn and identify the problems of neonate.  Skill: Organize the different levels of neonatal care units and Provide effective nursing care to neonate with problems.  Develop skill in neonatal resuscitation.  Attitude: Develop considerate attitude towards problem neonate and parents of such neonate. and develop the neonatal resuscitation.	<ul> <li>Neonatal Nursing:</li> <li>Neonatal resuscitation. (1 hours)</li> <li>New born baby-profile and characteristics of the new born. (1 hours)</li> <li>Assessment of the new born. (1 hours)</li> <li>Nursing care of the new born at birth, care of the new born and family. (1 hour)</li> <li>Planning and organization of level I, II and III neonatal care units. (1 hours)</li> <li>Low birth weight babies(1 hour)</li> <li>Transport of the high risk neonate to NICU. (1 hour)</li> <li>Neonatal infections prevention and management. (1 hour)</li> <li>High risk new born – Identification, classification and nursing management. (1 hour)</li> <li>Organization of neonatal care, services (Levels), transport, neonatal intensive care unit, organization and management of nursing services in NICU. (1 hour)</li> <li>Management of Neonatal problems (7 hours) Neonatal Hypoglycemia, Neonatal Hyper bilirubenemia, Common metabolic problems, Nutritional requirements, Ventilation, Thermo regulation.</li> <li>Management of Neonatal Problems: (10Hrs)</li> <li>Respiratory distress syndrome &amp; HMD, Neonatal Hypoglycemia, Neonatal Hyper bilirubinemia, Common metabolic problems, Nutritional requirements, Neonatal seizures, Neonatal mechanical ventilation, Thermo regulation, Follow up care and assessment of high risk infants</li> </ul>	•	NICU and environment (1 hours) Equipment and personnel management (1 hour) High risk neonate – pre term and term neonate and growth retarded babies. (1 hours) Identification and classification of Neonates with infection HIV and AIDS, Ophthalmic neonatrum, congenital syphilis. (2 hours) Respiratory distress syndrome & HMD (1 hour)	<ul> <li>Neonatal seizures         <ul> <li>(1 hour)</li> </ul> </li> <li>Neonatal             mechanical             <ul> <li>(1 hour)</li> </ul> </li> </ul>
IX (15 hours)	At the end of unit students are able to <b>Knowledge:</b> Know the concept and principles of IMNCI <b>Skill:</b> Develop the reproductive and child health programme. <b>Attitude:</b> Provides the comprehensive nursing care to patient with infertility.	<ul> <li>IMNCI:</li> <li>Concept, Rationale for an evidence based syndromes approach &amp; Components (2 hour)</li> <li>Principles of IMNCI &amp; Case management process. (1 Hr)</li> <li>Principles of management of sick children in small hospital.(1 hour)</li> </ul>	•	Outpatient management of young infants age up to 2 months (3 hours) Outpatient management of children age 2 months up to 5 years. (5 hours)	<ul> <li>National Population policy 2000 (1 hour)</li> <li>Re productive and child health. (2 hours)</li> </ul>

#### AREA AND DISTRIBUTION OF CLINICAL EXPERIENCE HOURS:

Sr. No.	Dept./Unit	No of weeks Of Posting	Total Clinical Hours
1.	Pediatric Medicine Ward	4	120 Hours
2.	Pediatric Surgery Ward	4	120 Hours
3.	Labor Room	2	60 Hours
4.	Maternity Ward	2	60 Hours
5.	Pediatric OPD	2	60 Hours
6.	NICU	4	120 Hours
7.	Crèche /Day care Centre	1	30 Hours
8.	Child Guidance Clinic	1	30 Hours
9.	Community	2	60 Hours
	Total	22 Weeks	660 Hours

**TEACHING STRATEGY:** - Total teaching hours: 810

Theory hours: 150

Clinical Experience: 660

**TEACHING METHODS-:** Lecture, Seminar, Laboratory Demonstration, Group Discussion, Clinical Observation, Bed Side clinic, Clinical Presentations, Workshops.

**A.V. AIDS:-**Over head Projector, L.C.D, Computer Assisted Instruction, Flip charts, Posters, Black Board, Models, Simulation.

#### **ASSIGNMENTS: Theory:**

Sr. No.	Assignment	No./Quantity	Marks perAssignment	Total Marks
1	Seminar	Two	1X50	100
2	Panel Discussion (Group Work)	One	1X25	25
3	Speciality related Journal (Article) presentation	Two	1X25	50
4	Paper writing/Presentation on given topic	One	1X50	50
			Total Marks	225

#### Practical:

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Case Study	Two	1X100	200
2	Case presentation	Two	1X50	100
3	Clinical Performance Evaluation	Two	1X100	200
4	Drug Study	One	1X100	100
5	Nursing Care plan	Two	1X50	100
6	Field Visit Reports	One	1X50	50
			Total Marks	750

#### LIST OF RECOMMENDED BOOKS:

- Achar ST and Viswanathan -"Text book of Pediatrics; A Clinical Approach"
- Alexander N M, Brown MS;-" Pediatric Physical Diagnosis for Nurses"
- Ball- "Pediatric Nursing caring for children"
- Behrman, Richard K & Vaughan-"Nelson's Textbook of Pediatrics"
- Blake G, Florence & Wright- "Essentials of Pediatric Nursing"
- Barbara EW- "Guidelines in the care of the low birth weight"
- Bowden Greenberg- "Pediatric Nursing Procedure"
- Browder J J- "Nursing care of children" F A Davis
- Cameron, Jelinek et al;-"Text Book of Emergency Pediatric Medicine"
- Cloherty, John P & Stark, Ann R-"Manual Neonatal care"
- David Hull & Johnstan D- "Essentials Of Pediatrics"
- Elizabeth Hurlock-"Child Development"
- Ghai O P-"Essential Text Book Of Pediatrics"
- Ghosh Shanti- "Nutrition and child care"
- Ghosh Shanti- "Know your child"

- Gupte Suraj;-"Neonatal Emergencies"
- Gupte Suraj-"A Short Text book of Pediatrics"
- Guha DK-"Neonatology"
- Guha DK- "Manual of Practical newborn Care"
- Hathfield N- "Introductory Pediatric Nursing"
- Helens CL & Roberts- "Pediatric Nursing"
- Khilnany- "Practical approach to Pediatric Intensive Care"
- Kulkarni MC- "Manual of Neonatology"
- Klosner & Nancy Hathfield- "Introductory Maternity and Pediatric Nursing"
- Merenstein & Gardner-"Handbook of neonatal intensive care"
- Mcmillan, Fergin et al;-" Oski's Pediatrics-Principle & practice"
- Marlow Dorothy -"Textbook of Pediatric Nursing"
- Parthasarthy et al- "IAP Textbook of Pediatrics"
- Park's "Text book of Preventive and Social medicine"
- Roberts KD Edwards JM- "Pediatric Intensive Care"
- Richard Polin-"Pediatric Secrets"
- Selekman- "Pediatric Nursing"
- Singh Meherban; "Care of Newborn"
- Singh Meherban; "Drugs Used in Children"
- Slota; "Core curriculum for Pediatric Critical Care Nursing"
- Speer; "Pediatric Care planning"
- Vidhyasagar & Sarnaik; "Neonatal & Pediatric Intensive Care"
- Wagle CS; "Short Text Book of Pediatrics" Vohra Book Centre,
- Whaley & Wong; "Nursing care of Infants and Children"
- Whaley, Lucilla F Donna L; "Essentials of Pediatric Nursing"
- Udani RH; "Neonatal Resuscitation"

# Subject No.4 CLINICAL SPECIALITY –I

#### MEDICAL SURGICAL NURSING

Total Hours: 810 Theory hours: 150 Clinical hours: 660

#### AIM:

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 a skill to function as a specialized Medical – Surgical Nurse .It will further enable the student to function as a n educator, manager and researcher in the field of Medical –Surgical Nursing.

#### **OBJECTIVES:**

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

- Appreciate the trends and issues in the field of Medical –Surgical Nursing as a speciality.
- Apply nursing concepts and theories related to health promotion.
- Apply the client as a holistic individual.
- Perform physical and psychosocial assessments of a Medical –Surgical Patient.
- Apply nursing process in providing care to the patients.
- Integrate the concept of family centered nursing care with associated disorders such as genetic, congenital and long term illness.
- Recognize and manage emergencies with medical surgical patients.
- Describe various recent technologies and treatment modalities in the management of critically ill patients.
- Appreciate the legal and ethical issues relevant to Medical –Surgical Nursing.
- Prepare a design for layout and management of Medical –Surgical Unit.
- Appreciate the role of alternative systems of Medicine in the care of patients.
- Incorporate evidence based Nursing practice and identifies the areas of Nursing Research in the field of Medical Surgical nursing.
- Recognize the role of Nurse Practitioner as a member of the Medical –Surgical health team.
- Teach Medical and Surgical Nursing to under graduate nurse s ad in-service nurses.

#### **COURSE CONTENT:**

#### **Unit I -Introduction:**

- 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 years plans. National health programs related to adult health.

#### **Unit II -Health assessment of patients:**

• History taking. Physical examination of various systems. Nutritional assessment. Related investigations and diagnostic assessment.

#### **Unit III -Care in hospital setting:**

- 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.

#### Unit IV -Management of patients with disorders of Gastro intestinal tract:

#### Review of anatomy and physiology:

- 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 V - Management of patients with disorders of Nervous System:

- Review of anatomy and physiology.
- Disorders-etiology, Pathophysiology, 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 VI -Management of patients with disorders of Respiratory System:

- Review of anatomy and physiology.
- Disorders-etiology, Pathophysiology, 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 VII -Management of patients with disorders of cardio Vascular System:

- Review of anatomy and physiology.
- Disorders-etiology, Pathophysiology, 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 VIII -Management of patients with Disorders of Blood:

- Review of anatomy and physiology.
- Disorders-etiology, Pathophysiology, 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 IX -Management of patients with disorders of Genito Urinary System:

- Review of anatomy and physiology.
- Disorders-etiology, Pathophysiology, 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 X - Management of patients with disorders of Endocrine System:

- Review of anatomy and physiology.
- Disorders-etiology, Pathophysiology, 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 XI -Management of patients with disorders of Musculo-Skeletal System:

- Review of anatomy and physiology.
- Disorders-etiology, Pathophysiology, 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 and Rehabilitation and follow-up.

#### Unit XII -Management of patients with disorders of Integumentory System:

- Review of anatomy and physiology.
- Disorders-etiology, Pathophysiology, 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 XIII -Management of patients with disorders of Eye and ENT:

- Review of anatomy and physiology.
- Disorders-etiology, Pathophysiology, 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 XIV -Management of patients with Disorders of Reproductive System:

- Review of anatomy and physiology.
- Disorders-etiology, Pathophysiology, 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 XV -Geriatric Nursing:**

- Nursing Assessment History and Physical assessment.
- Ageing: Demography; Myths and realities, Concepts and theories of ageing, Cognitive Aspects of Ageing, Normal biological ageing, Age related body systems changes, Psychosocial Aspects of Ageing, Medications and elderly, 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 care givers of elderly, Role of family and formal and non formal caregivers.
- Use of aids and prosthesis (hearing aids, dentures),
- Provisions and Programmes for elderly; privileges, Community Programs and health services; Home and institutional care.
- Legal & Ethical Issues, Issues, problems and trends.

#### Unit XVI -Management of patients with communicable and Sexually Transmitted Diseases:

- Review of immune system, Disorders of immune system HIV / AIDS. Review of infectious disease process.
- Communicable diseases-etiology, Pathophysiology, 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 XVII - Emergency, Trauma and Multi-System Organ Failure:

- DIC (disseminated intravascular coagulation), Trauma burns, poisoning.
- Etiology, Pathophysiology, 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.

# CLINICAL SPECIALITY –I MEDICAL SURGICAL NURSING

Unit No.		Contents w	ith distributed hours			
with total hours	<b>Objectives</b>	Must know	Desirable to know	Nice to know		
I (5 hours)	At the end of unit students are able to <b>Knowledge:</b> Know about current status of medical surgical nursing. <b>Skill:</b> Recognize ethical and cultural needs of patients. <b>Attitude:</b> Appreciate the role of nurse in health team.	<ul> <li>Introduction:</li> <li>Historical development of Medical – Surgical Nursing in India. (1 hour)</li> <li>National health policy, special laws &amp; ordinances relating to older people. (1 hour)</li> <li>National goals.</li> <li>Five years plans, National health programs related to adult health. (1 hour)</li> </ul>	<ul> <li>Current status of health and disease burden in India.</li> <li>Current concept of health. (1 hour)</li> <li>Trends &amp; issues in Medical – Surgical Nursing.</li> <li>Ethical &amp; cultural issues in Medical – Surgical Nursing.</li> <li>Rights of patients. (1 hour)</li> </ul>			
II (20 hours)	At the end of unit students are able to <b>Knowledge:</b> Recall health assessment of various patients. <b>Skill:</b> Perform the assessment correctly. <b>Attitude:</b> Relate investigations and diagnostic assessments with disease conditions.	<ul> <li>Health Assessment of Patient:</li> <li>History taking. (2 hours)</li> <li>Physical examination of various systems. (7 hours)</li> <li>Nutritional assessment.(3 hours)</li> </ul>	Related investigations and diagnostic assessment.     (8 hours)			
III (5 hours)	At the end of unit students are able to <b>Knowledge</b> : Find out the appropriate care to be given in the hospital setting <b>Skill:</b> Render nursing care using nursing process approach. <b>Attitude:</b> Justify the reaction related to stress in disease condition.	<ul> <li>Care in Hospital Setting:</li> <li>Ambulatory care, Acute &amp; Critical care, long term care. (1 hour)</li> <li>Characteristics, care models, practice settings, interdisciplinary team. (1 hour)</li> <li>Hospitalization- effects of hospitalization on the patient &amp; family. (1 hour)</li> <li>Nursing care using Nursing process approach. (1 hour)</li> </ul>	<ul> <li>Stressors &amp; reactions related to disease process.(1 hour)</li> <li>Home Health Care.</li> </ul>			
IV (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Describe anatomy physiology, etiology, Pathophysiology, clinical manifestation, diagnostic assessment, management of complication of patients with disorders of gastrointestinal tract.	<ul> <li>Management of patient with Gastro</li> <li>Intestinal Tract Disorders:         <ul> <li>Disorders-etiology, Patho physiology, Clinical manifestations, complications, prognosis.(3 hours)</li> </ul> </li> <li>Health assessment-History taking, physical</li> </ul>	<ul> <li>Review of anatomy and physiology. (1 hour)</li> <li>Treatment modalities and trends. (1 hour)</li> </ul>	O. Related research studies. (1 hour)		

	Skill: Demonstrate skill in providing nursing care to the patient with GIT disorders after assessment  Attitude: Recognize and relate the nursing research and evidence based nursing practice.	examination, investigation & diagnostic assessment. (2 hours)  Nursing management.(1 hour)  Evidence based nursing practice.  Rehabilitation and follow-up.(1 hour)	
V (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Explain anatomy physiology, etiology, Pathophysiology, clinical manifestation, diagnostic assessment, management of complication of patients with disorders of nervous system. <b>Skill:</b> Apply nursing process providing comprehensive care to the patients and demonstrate advanced skills and competence in managing patients in nervous system disorders. <b>Attitude:</b> Recognize and relate the nursing research and evidence based nursing practice.	<ul> <li>Management of patient with Disorders of Nervous System:</li> <li>Disorders-etiology, Pathophysiology, Clinical manifestations, complications, prognosis. (2 hours)</li> <li>Health assessment-History taking, physical examination, investigation and diagnostic assessment. (2 hours)</li> <li>Treatment modalities and trends. (1 hour)</li> <li>Nursing management. (1 hour)</li> <li>Related research studies. (1 hour)</li> <li>Evidence based nursing practice. (1 hour)</li> <li>Rehabilitation and follow-up.(1 hour)</li> </ul>	Review of anatomy and physiology. (1 hour)
VI (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Explain anatomy and physiology, etiology, Pathophysiology, diagnosis assessment, management and complication of patients with disorders of respiratory system. <b>Skill:</b> Assess the diagnostic, treatment modalities & new trends and demonstrate advance skills/competent in managing patients with respiratory system. <b>Attitude:</b> Recognize and relate t he nursing research and evidence based nursing practice	<ul> <li>Management of patient with Disorders of Respiratory System:         <ul> <li>Disorders-etiology, Patho physiology, Clinical manifestations,</li> <li>Complications, prognosis (2 hours)</li> </ul> </li> <li>Health assessment-History taking, physical examination, investigation and diagnostic assessment. (2 hours)</li> <li>Treatment modalities and trends. (1 hour)</li> <li>Nursing management. (1 hour)</li> <li>Related research studies. (1 hour)</li> <li>Evidence based nursing practice. (1 hour)</li> <li>Rehabilitation and follow-up.(1 hour)</li> </ul>	Review of anatomy and physiology. (1 hour)
VII (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Explain anatomy and physiology, etiology, Pathophysiology, diagnosis assessment, management and complication of patients with disorders of cardiovascular system. <b>Skill:</b> Assess the diagnostic, treatment	<ul> <li>Management of patient with Disorders of Cardio vascular System:</li> <li>Disorders-etiology, Pathophysiology, Clinical manifestations, Complications, prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnostic assessment.(4 Hours)</li> </ul>	Review of anatomy and physiology. (1Hour)

	modalities and new trends and demonstrate advance skills/competent in managing patients with cardiovascular system.  Attitude: Recognize and relate t he nursing research and evidence based nursing practice	<ul> <li>Treatment modalities and trends. Nursing management. Related research studies.</li> <li>Evidence based nursing practice.</li> <li>Rehabilitation and follow-up.(5 Hours)</li> </ul>	
VIII (5 hours)	At the end of unit students are able to <b>Knowledge:</b> Explain anatomy and physiology, etiology, Pathophysiology, diagnosis assessment, management and complication of patients with disorders of blood. <b>Skill:</b> Perform physical, psychosocial and spiritual assessment. Assess diagnostic, treatment modalities & new trends Demonstrate advance skills/competent in managing patients with disorders of blood. <b>Attitude:</b> Recognize and relate the nursing research and evidence based nursing practice	<ul> <li>Management of patient with Disorders of Blood:</li> <li>Disorders-etiology, Pathophysiology, Clinical manifestations, Complications, prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnostic assessment. (2 hour)</li> <li>Treatment modalities and trends. (1 hour)</li> <li>Nursing management.</li> <li>Related research studies.</li> <li>Evidence based nursing practice.</li> <li>Rehabilitation and follow-up (1 hour)</li> </ul>	Review of anatomy and physiology.     (1 hour)
IX (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Explain anatomy and physiology, etiology, Pathophysiology, diagnosis assessment, management and complication of patients with disorders of urinary system. <b>Skill:</b> Perform physical, psychosocial and spiritual assessment, Assess diagnostic, treatment modalities and new trends Demonstrate advance skills/competent in managing patients with disorders of urinary system. <b>Attitude:</b> Recognize and relate t he nursing research and evidence based nursing practice.	<ul> <li>Management of patient with Disorders of Genito Urinary System:         <ul> <li>Disorders-etiology, Pathophysiology, Clinical manifestations,</li> <li>Complications, prognosis. (2 hours)</li> </ul> </li> <li>Health assessment-History taking, physical examination, investigation and diagnostic assessment. (2 hours)</li> <li>Treatment modalities and trends. (1 hour)</li> <li>Nursing management. (1 hour)</li> <li>Related research studies. (1 hour)</li> <li>Evidence based nursing practice. (1 hour)</li> <li>Rehabilitation and follow-up(1 hour)</li> </ul>	Review of anatomy and physiology. (1 hour)
X (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Explain anatomy and physiology, etiology, Pathophysiology, diagnosis assessment, management and complication of patients with disorders of endocrine system. <b>Skill:</b> Perform physical, psychosocial and	Management of patient with Disorders of Endocrine System:  1. Disorders-etiology, Pathophysiology, Clinical manifestations, Complications, prognosis. (3 Hours)  2. Health assessment-History taking, physical	Review of anatomy and physiology. (1 Hours)

	spiritual assessment. Assess the diagnostic, treatment modalities and new trends. Demonstrate advance skills/competent in managing patients with disorders of endocrine system.  Attitude: Recognize and relate t he nursing research and evidence based nursing practice.	examination, investigation and diagnostic assessment. (2 Hours)  3. Treatment modalities and trends.(1 Hours)  4. Nursing management. (1 Hours)  5. Related research studies.  6. Evidence based nursing practice.(1 Hours)  • Rehabilitation and follow-up.(1 Hours)	
XI (10 hours)	At the end of unit students are able to <b>Knowledge:</b> Explain anatomy and physiology, etiology, Pathophysiology, diagnosis assessment, management and complication of patients with disorders of musculo-skeletal system. <b>Skill:</b> Perform physical, psychosocial and spiritual assessment. Assess the diagnostic, treatment modalities and new trends Demonstrate advance skills/ competent in managing patients with disorders of musculo-skeletal system. <b>Attitude</b> Recognize and relate t he nursing research and evidence based nursing practice.	<ul> <li>Management of patient with Disorders of Musculo Skeletal System:</li> <li>Disorders-etiology, Pathophysiology, Clinical manifestations,         Complications, prognosis.         (3 Hours)</li> <li>Health assessment-History taking, physical examination, investigation and diagnostic assessment. (2 Hours)</li> <li>Treatment modalities and trends. (1 Hour)</li> <li>Nursing management. (1 Hour)</li> <li>Related research studies.</li> <li>Evidence based nursing practice. (1 Hour)</li> <li>Rehabilitation and follow-up.(1 Hour)</li> </ul>	Review of anatomy and physiology. (1 Hour)
XII (8 hours)	At the end of unit students are able to Knowledge: Explain anatomy and physiology, etiology, Pathophysiology, diagnosis assessment, management and complication of patients with disorders of integumentary system.  Skill: Perform physical, psychosocial and spiritual assessment. Assess the diagnostic, treatment modalities and new trends.  Demonstrate advance skills in managing patients with disorders of integumentary system.  Attitude: Recognize and relate t he nursing research and evidence based nursing practice.	<ul> <li>Management of patient with Disorders of Integumentory System:         <ul> <li>Disorders-etiology, Pathophysiology, Clinical manifestations,</li> <li>Complications, prognosis.</li> <li>(2 hours)</li> </ul> </li> <li>Health assessment-History taking, physical examination, investigation and diagnostic assessment. (1 hour)</li> <li>Treatment modalities and trends. (1 hour)</li> <li>Nursing management. (1 hour)</li> <li>Related research studies.</li> <li>Evidence based nursing practice. (1 hour)</li> <li>Rehabilitation and follow-up(1 hour)</li> </ul>	Review of anatomy and physiology. (1 hour)
XIII (5 hours)	At the end of unit students are able to <b>Knowledge:</b> Explain anatomy and physiology, etiology, Pathophysiology,	Management of patient with Disorders of Eye and ENT:  • Disorders-etiology, Pathophysiology, Clinical	Review of anatomy and physiology. (1 hour)

	diagnosis assessment, management and complication of patients with disorders of Eye and ENT <b>Skill:</b> Perform physical, psychosocial and spiritual assessment. Assess the diagnostic, treatment modalities and new trends  Demonstrate advance skills/competent in managing patients with disorders of Eye and ENT <b>Attitude:</b> Recognize and relate t he nursing research and evidence based nursing practice.	manifestations, Complications, prognosis. (1 hour)  Health assessment-History taking, physical examination, investigation and diagnostic assessment. (1 hour)  Treatment modalities and trends. (1 hour)  Nursing management.  Related research studies.  Evidence based nursing practice.  Rehabilitation and follow-up.(1 hour)	
XIV (8 hours)	At the end of unit students are able to <b>Knowledge:</b> Explain anatomy and physiology, etiology, Pathophysiology, diagnosis assessment, management and complication of patients with disorders of reproductive system. <b>Skill:</b> Assess the diagnostic, treatment modalities and new trends Demonstrate advance skills/competent in managing patients with disorders of reproductive system. & relate nursing research and evidence based nursing practice.	<ul> <li>Management of patient with Disorders of Reproductive System:</li> <li>Disorders-etiology, Pathophysiology, Clinical manifestations, Complications, prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnostic assessment. (3 hour)</li> <li>Treatment modalities and trends. Nursing management. Related research studies.</li> <li>Evidence based nursing practice. (3 hour)</li> <li>Rehabilitation and follow-up.(1 hour)</li> </ul>	Review of anatomy and physiology. (1 hour)
XV (8 hours)	At the end of unit students are able to <b>Knowledge:</b> Explain anatomy and physiology, etiology, Pathophysiology, diagnosis assessment, management and complication of patients with disorders of geriatric nursing. <b>Skill:</b> Perform physical, psychosocial and spiritual assessment. Assess the diagnostic, treatment modalities and new trends Demonstrate advance skills/competent in managing patients with disorders of geriatric nursing. <b>Attitude:</b> Recognize and relate t he nursing research and evidence based nursing practice.	Geriatric Nursing:  Nursing Assessment – History and Physical assessment. Ageing: Demography; Myths and realities. Concepts and theories of ageing.(1Hr  Cognitive Aspects of Ageing. Normal biological ageing. Age related body systems changes,Common Health Problems & Nursing Management; Psychosocial and Sexual.(3Hrs) Role of nurse for care of elderly; ambulation, nutritional communicational, Psychosocial and spiritual. Role of nurse for care givers of elderly. Role of family and formal and non formal caregivers. Home and institutional care.(2 hour)	<ul> <li>Psychosocial Aspects of Ageing.</li> <li>Medications and elderly.</li> <li>Stress &amp; coping in older adults. (1 hour)</li> <li>Abuse of elderly.</li> <li>Use of aids and prosthesis (hearing aids, dentures),</li> <li>Legal &amp; Ethical Issues.</li> <li>Provisions and Programmes for elderly; privileges, Community Programs and health services;</li> <li>Issues, problems and trends. (1 hour)</li> </ul>
XVI (8 hours)	At the end of unit students are able to <b>Knowledge:</b> Explain anatomy and	Management of patient with Communicable and Sexually Transmitted Diseases:	• Review of immune system. (1 hour)

patients with commutransmitted diseases.  Skill: Perform compthe diagnostic, treatr trends. Demonstrate managing patients wwith communicable diseases.  Attitude: Recognize research and evidence.	t, management and ents with disorders of inicable and sexually  plete assessment, Assess ment modalities and new advance skills in rith disorders of patients and sexually transmitted  te and relate t he nursing the based nursing practice.	Review of infectious disease process.  Communicable diseases-etiology, Pathophysiology, Clinical manifestations complications, prognosis.(3 hours)  Health assessment-History taking physical examination, investigation and Diagnostic assessment. (1 hour)  Treatment modalities and trends, Nursing management. Related research studies. Evidence based nursing practice. (2 hrs)  Rehabilitation and follow-up.(1 hour)	
(8 hours)  Knowledge: Explate physiology, etiology diagnosis, assessment complication of patient trauma and multisystem organization of patient trauma and multisystem organization of emergent multisystem organization.	on anatomy and c, Pathophysiology, at, management and ents with emergency, atem organ failure. Assess the at modalities and new crate advance ananaging patients with acy, trauma and	Etiology, Patho- physiology, Clinical manifestations, complications, prognosis. (2 hours)  Health assessment-History taking, physical examination, investigation and Diagnostic assessment. (1 hour) Treatment modalities and trends. Nursing management. (1 hour) Related research studies.	

#### AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr. No.	Unit		No of weeks	Total Hours		Unit	No of weeks	Total Hours
1	OPD		1	30	7	Emergency Department	2	60
2	Eye Ward		1	30	8	Cancer Ward	1	30
3	ENT		1	30	9	Cardiothoracic Ward	3	90
4	Dermatology ward		1	30	10	.Neurology unit	2	60
5	Burns and plastic Surgery v	vard.	1	30	11	Orthopedic Ward	2	60
6	Medical –Surgical ICU		4	120	12	Nephrology/Urology	2	60
					13	GI units	1	30
Tot	Total Clinical Hours 9			270	7	Total Clinical Hours	13	390
	Grand Total Clinical Hours						22 weeks	660

**TEACHING STRATEGY:** Total hours: 810 Theory hours: 150 Clinical Hours: 660 **TEACHING METHODS:** Lecture, Seminar, Laboratory Demonstration, Group Discussion, Clinical Observation, Presentation, Bed Side clinic, Clinical Presentation, Workshops.

**A.V. AIDS:** Over head Projector, L.C.D, Computer Assisted Instruction, Flip charts, Posters, Black Board, Models, and Simulation.

#### **ASSIGNMENTS: Theory:**

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Seminar	Two	1X50	100
2	Panel Discussion (Group Work)	One	1X25	25
3	Speciality related Journal (Article) presentation	Two	1X25	50
4	Writing/Presenting Paper of Given Topic	One	1X50	50
			Total Marks	225

#### **Practical:**

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Case study	Two	1X100	200
2	Case presentation	Two	1X50	100
3	Clinical Performance Evaluation	Two	1X100	200
4	Drug Book	One	1X100	100
5	Nursing Care Plans	Two	1X50	100
6	Project Work (Group Work)	One	1X50	50
			Total Marks	750

#### LIST OF RECOMMENDED BOOKS:

- Text book of Medical Surgical Nursing –Brunner and Suddarth
- Medical Surgical Nursing -Clinical Positive outcome-Joyce and Black
- Medical Surgical Assessment and Management of clinical problems –Lewis, Colliner
- Medical Surgical Nursing –A Psychopathologic Approach –Luckmann and Sorensen
- Medical Surgical Nursing –A Nursing process Approach
- Medical Surgical nursing –B.T.Basvanthappa
- Moroneys Surgery for nurses –Colmer
- API Textbook of Medicine:-Shah N.S
- Fundamental of Operation theatre Services –Datta T.K
- Essentials of Orthopaedics:-Maheshwari
- Davidsons Principles and Practice of Medicine –Haslett C,Chilvers E.R.
- Watsons Clinical Nursing and related sciences –Walsh M
- The Lippincott Manual of Nursing practice –Netttina, Sandra

# Final Year M.Sc. Nursing

### Subject No. 1 NURSING MANAGEMENT

Total: 300 Hours Theory: 150 Hours Practical: 150

Hours **AIM:** 

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 are able to:

- Describe the philosophy and objectives of the health care institutions at various levels.
- Identify trends and issues in nursing
- Discuss the public-administration, health care administration vis a vis nursing administration.
- Describe the principles of administration applied to nursing.
- Explain the organization of health and nursing services at the various levels/institutions.
- Collaborate and co-ordinate with various agencies by using multispectral approach.
- Discuss the planning, supervision and management of nursing workforce for various health care settings.
- Discuss various collaborative models between nursing education and nursing service to improve the quality of nursing care.
- Identify and analyze-legal and ethical issues in nursing administration.
- Describe the process of quality assurance in nursing services.
- Demonstrate leadership nursing at various levels.

#### **CONTENTS:**

#### **Unit I -Introduction:**

- Philosophy, purpose, elements, principles and scope of administration.
- Indian Administrative system vis a vis health care delivery system: National, State and Local, Indian constitution.
- Planning process: Five year plans, Various Committee Reports on health, State and National Health policies, national population policy, national policy on AYUSH and plans.

#### **Unit II - Management:**

- Functions of administration: Planning and control, Co-ordination & delegation.
- Decision making-decentralization basic goals of decentralization. Concept of management.
- Nursing Management:
- Concept, types and principles. Vision and Mission Statements. Philosophy, aims and objective
- Current trends and issues in Nursing Administration, Theories and models
- Application to nursing service and education.

#### **Unit III -Planning:**

- Planning process: concept, Principles, Mission, philosophy, objectives, Strategic planning, Operational plans, and Management plans.
- Programme evaluation and review technique (PERT), Gantt chart, management by objectives.
   (MBO)
- Planning new venture. Planning for change. Application to nursing service and education.

#### **Unit IV -Organization:**

- Concept, principles, objectives, Types and theories, Minimum requirements for organization, Developing an organizational Structure, levels, organizational effectiveness and organizational Climate.
- Organizing nursing services and patient care: Methods of patient assignment Advantages and disadvantages, primary nursing care,
- Planning and Organizing: hospital, unit and ancillary services (specifically central sterile supply department, laundry, kitchen, laboratory services, emergency etc)
- Disaster management: plan, resources, drill, etc. Application to nursing service and education.

#### **Unit V - Human Resource for Health:**

- Staffing: Philosophy, Norms: Staff inspection units (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.
- Duties and responsibilities of various categories of nursing personnel. Applications to nursing service and education.

#### **Unit VI -Directing:**

- 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 delegation errors.
- Managing conflict: process, management, negotiation, consensus
- Collective bargaining: health care labor laws, unions, professional associations, role of nurse manager. Occupational health and safety. Application to nursing service and education.

#### **Unit VII - 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.

#### **Unit VIII -Controlling:**

- Quality assurance: Standards, Models, Nursing audit. Performance appraisal: Tools, formats, Management, interviews. Supervision and management: concepts and principles.
- Discipline: service rules, self discipline, constructive versus destructive discipline, problem employees, disciplinary proceedings enquiry etc. Application to nursing service and education.

#### **Unit IX -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.
- Budgeting for various units and levels. Application to nursing service and education.

#### **Unit X - Nursing Informatics:**

- 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, tele nursing. Electronic medical records.

#### **Unit XI-Leadership:**

- Concepts, Types, Theories, Styles, Managerial behavior, Leadership behavior
- Effective leader: Characteristics, Skills, Group dynamics.
- Power and politics, Lobbying. Critical thinking and decision making.
- Stress management. Applications to nursing service and education.

#### **Unit XII -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, employment issues. Medico legal issues. Nursing regulatory mechanisms: licensure, renewal, accreditation Patient's rights of special groups: children, women, HIV, handicap. Professional responsibility and accountability. Infection control. Standard safety measures.

#### **PRACTICAL:**

- Prepare prototype personal files for staff nurses, faculty and cumulative records.
- Preparation of budget estimate, revised estimate and performance budget.
- Plan and conduct staff development programme.
- Preparation of Organization Chart.
- Developing nursing standards/protocols for various units.
- Design a layout plan for specialty units /hospital, community and educational institutions.
- Preparation of job description of various categories of nursing personnel.
- Prepare a list of equipments and supplies for specialty units.
- Assess and prepare staffing requirement for hospitals, community and educational institutions.
- Plan of action for recruitment process.
- Prepare a vision and mission statement for hospital, community and educational institutions.
- Prepare a plan of action for performance appraisal.
- Identify the problems of the specialty units and develop plan of action by using problem solving approach.
- Plan a duty roster for specialty units/hospital, community and educational institutions.
- Prepare: anecdotes, incident reports, day and night reports, handing and taking over reports, enquiry reports, nurse's notes, Official letters, curriculum vitae, presentations etc.
- Prepare a plan for disaster management.
- Group work.
- Field appraisal report.

### **NURSING MANAGEMENT**

Unit No.	<b>Objectives</b>	Contents with	h distributed Hours	
& Hours		Must Know	Desirable to Know	Nice to Know
I (10Hrs)	At the end of unit students are able to:  Knowledge: Recall and understand the philosophy, aim & objectives and principles of administration.  Skill: Develop philosophy, aim and objectives for the institution.  Attitude: Apply principles of administration in the field of nursing practice.	<ul> <li>Introduction:</li> <li>Philosophy, purpose, elements, principles and scope of administration.(5 Hrs)</li> </ul>	<ul> <li>Planning process: Five year plans, Various         Committee Reports on health, State and recent             National Health policies, national population             policy, national policy             on AYUSH and plans.     </li> <li>(3 Hrs)</li> </ul>	• Indian Administrative system vis a vis health care delivery system: National, State & Local, Indian constitution. (2hr)
II (10Hrs)	At the end of unit students are able to:  Knowledge: Understand and classify the functions of administrator.  Skill: Formulate the philosophy, aim and objectives for administration in nursing education institute and hospital.  Attitude: Utilize the knowledge of general administration into nursing practice.	<ul> <li>Management:</li> <li>Functions of administration. Planning and control. Co-ordination and delegation.</li> <li>Decision making-decentralization basic goals of decentralization. Concept of management.(5 Hr)</li> <li>Nursing Management:</li> <li>Concept, types &amp; principles. Current trends and issues in Nursing Administration. Application to nursing service &amp; education. (2 Hrs)</li> </ul>	<ul> <li>Vision and Mission Statements.(1Hr)</li> <li>Philosophy, aims and objective of Nursing Administration.(1Hr)</li> </ul>	• Theories and models of Nursing Administration (1Hr)
III (15Hrs)	At the end of unit students are able to:  Knowledge: Explain the importance of planning and describe different types of planning.  Skill: Plan for various activities curricular and co-curricular in nursing service and education.  Attitude: Takes initiative to practice MBO.	<ul> <li>Planning:</li> <li>Strategic planning. Operational plans.</li> <li>Management plans.(4Hrs)</li> <li>Programme evaluation and review technique (PERT), Gantt chart, management by objectives (MBO). Application to nursing service and education. (4 Hrs)</li> </ul>	<ul> <li>Planning process:         concept, Principles,         Mission, philosophy,         objectives. (2 Hrs)</li> <li>Planning for change.         (3Hrs)</li> </ul>	• Planning new venture.(2Hr)
IV (15Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain various patterns of organization.  Skill: Develop the organizational charts and organization of nursing services in the hospital.  Attitude: Incorporate this knowledge in	<ul> <li>Organization:</li> <li>Organizing nursing services and patient care: Methods of patient assignment – Advantages and disadvantages, primary nursing care.(5Hrs)</li> <li>Planning and Organizing: hospital, unit and ancillary services (specifically central</li> </ul>	<ul> <li>Disaster management:         plan, resources, drill, etc.         (3 Hrs)</li> <li>Developing an         organizational Structure,         levels, organizational         effectiveness and</li> </ul>	<ul> <li>Concept, principles, objectives, Types and theories, Minimum requirements for</li> </ul>

	developing effective nursing services.	sterile supply department, laundry, kitchen, laboratory & emergency services  • Application to nursing service and education. (3Hrs)	organizational Climate.(3Hrs)	organization. (1 Hr)
V (15Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain the staffing process and INC norms for staffing.  Skill: Forecast the staff requirement for various institutions  Attitude: Consider individual differences while assigning placement for various categories of nursing personnel.	<ul> <li>Human Resource for Health:</li> <li>Staffing- Philosophy, Estimation of nursing staff requirement – activity analysis, Various research studies. (5Hrs)</li> <li>Recruitment: credentialing, selection, placement, promotion. (1Hr)</li> <li>Duties and responsibilities of various categories of nursing personnel. Applications to nursing service and education. (2 Hrs)</li> </ul>	<ul> <li>Norms: Staff inspection units (SIU), Bajaj Committee, High power committee, Indian nursing council (INC)</li> <li>Staff development programme. Retention. (5 Hr)</li> </ul>	<ul> <li>Personnel policies. (1Hr)</li> <li>Termination. (1hr)</li> </ul>
VI (15Hrs)	At the end of unit students are able to:  Knowledge: Illustrate the process of direction.  Skill: Motivate various categories of personnel for higher positions and quality output.  Attitude: Identify conflict situations promptly and manage effectively	<ul> <li>Poirecting:</li> <li>Roles and functions. (1Hr)</li> <li>Motivation: Intrinsic, extrinsic, Creating motivating climate, Motivational theories. Communication: process, types, strategies, Interpersonal communication, channels, barriers, problems. (7 Hrs)</li> <li>Delegation: common delegation errors.</li> <li>Managing conflict: process, management, negotiation, consensus.</li> <li>Occupational health and safety. Application to nursing service and education. (4 Hrs)</li> </ul>	Confidentiality, Public relations.(1Hr)	• Collective bargaining: health care labour laws, unions, professional associations, role of nurse manager. (2Hr)
VII (10Hrs)	At the end of unit students are able to:  Knowledge: Understands and explains the procedures related to procurement of hospital supplies  Skill: Practice VED and ABC analysis for maintaining inventories economically.  Attitude: Shows interest in cost effective management of material and disseminates the same to others.	<ul> <li>Material Management:</li> <li>Concepts, principles and procedures.</li> <li>ABC analysis, VED (very important and essential daily use) analysis (4 hrs)</li> <li>Planning equipments and supplies for nursing care: unit and hospital (2 hrs)</li> <li>Inventory control. Condemnation.</li> <li>Application to nursing service and education. (2 hrs)</li> </ul>	Planning and procurement procedures:     Specifications (2 hrs)	
VIII (15Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain quality assurance, its importance and models and methods in nursing service.	<ul> <li>Controlling</li> <li>Quality assurance, Standards, Models     Nursing audit. (4 hrs)</li> <li>Performance appraisal: Tools, formats,</li> </ul>	Discipline: service rules, self discipline, constructive versus	

	Skill: Supervises the nursing services for quality performance and care.  Attitude: Uses discipline constructively for the growth of the individual & organization.	<ul> <li>Management, interviews (4 hrs)</li> <li>Supervision and management: concepts and principles. Application to nursing service &amp; education. (4Hrs)</li> </ul>	destructive discipline, problem employees, disciplinary proceedings enquiry etc. (3 hrs)	
IX (15Hrs)	At the end of unit students are able to:  Knowledge: Explain different types of budgets with their importance at various levels.  Skill: Prepare budget for the unit/institution Attitude: Practices budgeting within the constraints to manage the unit effectively and efficiently.	<ul> <li>Fiscal Planning:</li> <li>Budget estimate, revised estimate, performance budget Audit. (6 hrs)</li> <li>Cost effectiveness Health care reforms, Health economics</li> <li>Budgeting for various units and levels.</li> <li>Application to nursing service &amp; education. (6 Hrs)</li> </ul>	<ul> <li>Steps</li> <li>Plan and non-plan, zero budgeting, mid- term appraisal, capital and revenue.(2 hrs)</li> </ul>	<ul> <li>Cost         accounting</li> <li>Critical         pathways.(1hr)</li> </ul>
X (10Hrs)	At the end of unit students are able to:  Knowledge: Explain the importance of nursing informatics and understands it place in rendering quality care.  Skill: Participates in development of nursing informatics system. Attitude: Pay special attention to user friendly information system to enhance cooperation from all.	<ul> <li>Nursing Informatics:</li> <li>Use of computers in hospital and community. (2 hrs)</li> <li>Patient record-system.(1 hr)</li> <li>Nursing records and reports. (1 hr)</li> <li>Management information and evaluation system (MIES) (2 hrs)</li> <li>Electronic medical records. (1 hr)</li> </ul>	<ul><li>Trends</li><li>General purpose.(1 hr)</li></ul>	• E- Nursing. Telemedicine, tele-nursing. (2 hrs)
XI (10Hrs)	At the end of unit students are able to:  Knowledge: Understands and explains various leadership styles and their implications. Skill: practices & uses power appropriately to foster individual development and quality administration.  Attitude: Incorporates critical thinking in decision making related to leadership roles.	<ul> <li>Leadership:</li> <li>Concepts, Types, Theories, Styles (2 hr)</li> <li>Manager behavior. Leader behavior (2 hr)</li> <li>Effective leader: Characteristics, Skills,</li> <li>Group dynamics, Critical thinking and decision making.</li> <li>Applications to nursing service and education. (3 Hrs)</li> </ul>	<ul><li>Power and politics</li><li>Lobbying (2 hrs)</li></ul>	• Stress management. (1 hr)
XII (10Hrs)	At the end of unit students are able to:  Knowledge: Understands and explains the ethical and legal aspects of nursing as a profession.  Skill: Practices nursing skills legally and ethically.  Attitude: Protect rights of the clients with different vulnerable status.	<ul> <li>Legal and Ethical Issues Laws and Ethics:</li> <li>Legal system: Types of law, tort law, and liabilities. Legal issues in nursing: negligence, malpractice, invasion of privacy, defamation of character. (2 hr)</li> <li>Patient care issues, management issues, employment issues. Medico legal issues. Nursing regulatory mechanisms: licensure, renewal, accreditation (3 hr)</li> <li>Patient's rights. Rights of special groups: children, women, HIV, handicap (1 hr)</li> </ul>	<ul> <li>Ethical committee</li> <li>Code of ethics and professional conduct. (1 hr)</li> <li>Professional responsibility and accountability. (1 hr)</li> </ul>	Infection control.     Standard safety measures. (2 hrs)

#### AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr. No.	Dept / Unit Shift	Hours/Day	Total hours
1.	Morning Shift	7 Hrs/dayX5days/weekX2weeks	70
2.	Evening Shift	7 Hrs/dayX5days/weekX2weeks	70
3.	Night Shift	12 Hrs/NightX3 Nights/Week X 1 week	36
	Total		176

#### Note:

- Preferably, students shall work in the wards of their own specialty. However depending on needs, they may be
  posted in other wards.
- Posting in the Nursing Superintendent's office as per rotation.
- Field Visits related to Administration may be arranged during this period.
- Students from Community Health Nursing specialty may be clubbed with other specialty groups.

#### **TEACHING STRATEGY:**

• Total Hours: 300 Theory Hours: 150 Clinical Hours: 150

#### **TEACHING METHOD:**

• Lectures, Seminars, Case presentation & discussion. Clinical observation.

#### A.V. AIDS:

• OHP, LCD, Posters, Blackboard, Demonstration.

#### **ASSIGNMENTS:**

**THEORY AND PRACTICAL:** There is no practical examination, therefore, the assignments completed as part of practical during positing in the wards will be considered as (practice of implementation of theory knowledge), theory Assignments and marks will be considered as internal assessment in theory.

Sr.	Assignment	No./	Marks per	Total
No.		Quantity	Assignment	Marks
1	Seminar	One	1X50	50
2	Preparation of forms for various types of performance appraisal and appraising one staff nurse during their posting in the ward.	One	1X25	25
3	Organizing staff development programme (Group work)	One	1X50	50
4	Preparation of Proforma for evaluation of students (4)	One	4X05	20
5	Preparation of cumulative record	One	1X05	05
6	Night report	One	1X10	10
7	Day report	One	1X10	10
8	Preparation of duty rotation for one ward and for hospital for a period of one week.	One	1X10	10
9	Report of Visit to Medical Record Department	One	1X10	10
10	Incidental report of any incident occurred in the ward during their posting.	One	1X10	10
			Total Marks	200

#### **RECOMMENDED BOOKS:**

- Agarwal R.S. Organization and Management.
- Arora M. Hospital Management.
- Chaterjee K.D. -A Hand Book on Accounting for Hospital Management.
- Pandya S.R. Administration and Management of Education
- Yoder, Will P. and Kowalski K.K. Beyond Leading and Managing (Nursing Administration)
- Shaarma R.N. Educational Administration, Management and Organization.
- Koontz H and Weihrich H. Essentials of Management.
- Joshi M. Hospital Administration.

- Momin Hospital Administration.
- Gupta S.K., Kant S. and Chandrashekhar Kant Hospital and Health Care Administration: Appraisal.
- Tabis S.A. Hospitals and Nursing Homes Planning.
- Hubber D.T. Leadership and Nursing Management.
- Huston C.J. Leadership Roles and Management Function in Nursing.
- Huston C.J Leadership and Nursing Care Management.
- Marquis B.L. Leadership and Management Function in Nursing.
- Anderson M.A.-Nursing Leadership Management and Professional Practice.
- Arora V.S. -Nursing and Administration.
- Basawanthappa B.T. Nursing Administration.
- Eilis J.R. and Hartley C.L Nursing in Today Issues and Management.
- Goel S.L. and Kumar R. Nursing Services (Management and Administration)
- Agarwal R. Organization and Management.
- Nagarath A. and Singh M. Practical Management of Labour.
- Sakharkar B.M. Principles of Hsopital Administration and Planning.
- RAmasamy Principles of Management.
- Agarwal J.C. School Organization and Management.
- George M.A. The Hospital Administratior.
- Mathelli T.M.- The Nurse Manager Survival Guide.

# Subject No.2 CLINICAL SPECIALITY -II

#### **COMMUNITY HEALTH NURSING**

Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

#### AIM:

The 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 advance skills for nursing interventions in various aspects of community care settings. It will enable the students to function as community health nurse practioner /specialist. It will further enable the students to function educator, mangers and researcher in the field of community health nursing.

#### **OBJECTIVES:**

At the end of the course the students are able to:

- Appreciate trends and issues related to community health nursing- reproductive and child health, school health, occupational health, international health, rehabilitation, geriatric and mental health.
- Apply epidemiological concept and principles in community nursing practice.
- Perform community health assessment and plan health programmers.
- Describe various components of reproductive and child health programme.
- Demonstrate leadership abilities in organizing community health nursing services by using inter sectoral approach.
- Describe the role and responsibilities of community health nurse in various national health and family welfare programmers'.
- Participate in the implementation of various national health and family welfare programme.
- Demonstrate competencies in providing family centered nursing care independently.
- Participate /conduct research for new insights and innovative solutions to helath problems.
- Teach and supervise nurses and allied health workers.
- Design a layout of sub centre/primary health centre/community health centre and develop standards for community health nursing practice.

#### **COURSE CONTENTS:**

#### **Unit I -Epidemiology:**

- Introduction Concepts, 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 and non communicable diseases. Emerging and re emerging disease epidemics. National Integrated disease Surveillance Programme. Health information system. Epidemiology study and reports. Role of community health nurse.

#### **Unit II -National Health and Family welfare programmers:**

- Objectives, Organization/manpower/resources, Activities, goals, Intersectoral approach, item/purpose, role and responsibilities of community health nurse:
- National Vector Borne Disease Control Programme, National Filaria control programme .National Leprosy
  eradication programme, Revised National TB control programme, National programme for control of
  Blindness, National Iodine Deficiency control programme, National Mental Health Programme, National
  AIDS control programme, National Cancer control programme.
- NRHM. Health Schemes: ESI, CGHS, Health Insurance.

#### **Unit III -School Health:**

• Introduction: Definition, concepts and objectives Health assessment, screening, identification, referral and follow up. Safe environment. Services, programmers' and plans – first aid, treatment of minor ailments. Intersectoral coordination. Adolescent health. Disaster: Preparedness and management. School health records: maintenance and its importance. Role and responsibilities of community health nurse.

#### **Unit IV -International Health:**

• Global burden of disease. Global health rules and halt disease spread. Global health priorities and programmers. 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 Assembly. International health issues and problems. International

nursing practice standards. International health vis a vis national health. International health days and their significance.

#### **Unit V - Education and Administration:**

• Quality assurance. Standards, protocols, Policies and procedures. Infection control: standard safety measures. Nursing audit. Design of sub centre, primary health centre and community health centre. Staffing, supervision and monitoring performance. Budgeting. Material Management. Role and responsibilities of different categories of personnel in community health. Referral chain, community outreach services. Transportation. Public relations.

#### **Unit VI – Geriatric Nursing:**

• Concepts, trends, problems and issues. Aging process and changes. Theories of aging. Health problems and needs. Psycho-physical stressors and disorders. Myths and facts of aging. Health Assessment. Rehabilitation of elderly. Care of elderly. Elderly abuse. Training and supervision of care givers. Government welfare measures- programmers' for elderly and role of NGOs. Role and responsibilities of Geriatric nurse in the community.

#### **Unit VII -Rehabilitation:**

• Introduction: Concept, principles, trends and issues. Rehabilitation team, Modes and methods, Community based rehabilitation. Ethical issues. Rehabilitation council of India. Disability and rehabilitation – Use of various prosthetic devices. Psychological rehabilitation, Rehabilitation of client with chronic disease conditions. Restorative rehabilitation, Vocational rehabilitation. Role of voluntary organizations. Guidance and counseling, Welfare measures. Role and responsibilities of community health nurse.

#### **Unit VIII -Community Mental Health:**

Magnitude, trends and issues. National Mental Health Program- Community Mental Health Programme. The
changing focus of care. The Public Health model. Case management: Collaborative management. Crisis
intervention. Welfare agencies. The community as a client: Primary prevention, Population at risk, Secondary
prevention, Tertiary prevention. Community based rehabilitation. Human rights of mentally ill. Role of
community health nurse.

#### **Unit IX -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 of occupational diseases, disability limitation and rehabilitation. Women and occupational health. Occupational education and counseling. Violence at work place. Child labour. Disaster preparedness and management. Legal issues: Legislation, Labour Unions, ILO and WHO recommendations, Factories Act, ESIS Act. Role of community health nurse and occupational health team.Concept of Ecological Health

#### PRACTICAL ACTIVITIES:

#### **Activities to be observed:**

MCH Office and DPHNO,CHC/ First Referral Unit, Child guidance unit, Institute/Unit of mentally challenged, District Tuberculosis centre, AIDS Control society, Filariasis Clinic, RCH clinic, STD clinic, Leprosy Clinic, Community based rehabilitation Unit, Cancer centre, Home for old age, Mental Health Unit, De addiction centre, School health services, Industry, Selected industrial health centers, ESI Unit, Municipality/Corporation office.

#### **Activities to be Assistance in:**

• Laparoscopic sterilization, Vasectomy, All clinics related to RCH, Monitoring of National Health and Family Welfare Programmers.

#### **Activities to be performed:**

Conduct various clinics, School health assessment, Health Survey, Health Assessment, Drug administration as per the protocol, Treatment of minor ailments, Investigating outbreak of Epidemics, Screening for Leprosy, TB and non communicable diseases, Presumptive and radical treatment of malaria, Counseling, Report writing, Writing a project proposal, Material Management- requisition of indent, condemnation, inventory maintenance, Training and supervision of various categories of personnel.

### CLINICAL SPECIALITY -II

### **COMMUNITY HEALTH NURSING**

Unit No.	<b>Objectives</b>	Contents		
& Hrs.		Must know	Desirable to Know	Nice to Know
I (20 Hrs)	At the end of unit students are able to:  Knowledge: Understand and discuss the concept, principles and importance of epidemiology in community health nursing.  Skill: Use the knowledge of epidemiology in the practice of community health nursing.  Attitude: Apply the principles of epidemiology in establishing relationship between disease causation and disease prevalence and contribute in control of epidemics and improving the health of the given community.	Epidemiology: Introduction:     Introduction – Concepts, scope, definition, trends, History and development of modern epidemiology. Contribution of epidemiology. Epidemiological methods. Measurement of health and disease. Epidemiological approaches: Study of disease causatives, health promotion, Levels of prevention. Epidemiology of communicable diseases and non communicable diseases. Health information system. Epidemiology study and reports. Role of community health nurse.(15 Hrs)	<ul> <li>Implications.</li> <li>Health policies.</li> <li>Emerging and re emerging disease epidemics.(3 Hrs)</li> </ul>	National Integrated disease Surveillance Programme.(2 Hrs)
II (50 Hrs)	At the end of unit students are able to: <b>Knowledge:</b> Illustrate the objectives of National Health Programme and discuss the activities undertaken in implementation of each national Health Programme. <b>Skill:</b> Understand and incorporate provisions made for each national Health Programme in the field of community health nursing practice. <b>Attitude:</b> Appreciate the importance of inter sectoral approach in achieving the goals and targets.	National Health and Family welfare programmers:  Objectives, Organization/manpower/ resources, Activities, goals, Inter sectoral approach, item/purpose, role and responsibilities of community health nurse: National Vector Borne Disease Control Programme. National Filaria control programme. National Leprosy eradication programme. Revised National TB control programme. National programme for control of Blindness. National Iodine Deficiency control programme. National Mental Health Programme. National AIDS control programme. National Cancer control programme. National Cancer control programme. NRHM (45 Hrs)	Health Schemes: ESI, CGHS, Health Insurance.(5 Hrs)	
III (10 Hrs)	At the end of unit students are able to:  Knowledge: Explain the concept and objectives of school health programme.  Skill: Work as effective member of school health team, teach nursing students to work as member of school health team.	School Health:  Introduction: Definition, Concepts and objectives. Health assessment, screening, identification, referral and follow up. Safe environment. Services, programmers' and plans – first aid, treatment of minor ailments.  Adolescent health. Disaster: Preparedness and	• Intersectoral coordination. (1 Hr)	

IV (15 Hrs)	Attitude: Recognize the importance of school health services and motivate children to develop health habits. Encourage teachers and parents to cooperate and contribute in school health services.  At the end of unit students are able to:  Knowledge: Know global health priorities, health related issues and problems.  Elaborate international nursing practice standards.  Skill: Educate others and Participate as a member of disaster management team following international nursing practice standards.	management. Guidance and Counseling. School health records: maintenance and its importance. Role and responsibilities of community health nurse. (9 Hrs)  International Health:  Global health priorities and programmers.  International quarantine.  International cooperation and assistance.  Health and food legislation, laws, adulteration of food.  Disaster management.  International Health agencies: World Health	<ul> <li>Health tourism.</li> <li>International travel and trade</li> <li>Migration. (1 Hr)</li> </ul>	<ul> <li>Global burden of disease.</li> <li>Global health rules and halt disease spread.</li> <li>International health issues and problems.         <ul> <li>(2 Hrs)</li> </ul> </li> </ul>
V (12 Hrs)	Attitude: Appreciate the importance of health related rules and regulations and promote health tourism in the institution.  At the end of unit students are able to:  Knowledge: Discuss the institutional, national and international standards, policies, protocols and procedures.  Skill: Strive for improving quality of health services and does the critical evaluation of quality of rendered health services.  Attitude: Emphasize quality and standards in nursing practice.		<ul> <li>Budgeting.</li> <li>Material Management.</li> <li>Transportation. (3 Hrs)</li> </ul>	Design of sub centre, primary health centre and community health centre.     (2 Hrs)
VI (10 Hrs)	At the end of unit students are able to:  Knowledge: Discuss the concept, problems and issues related to geriatric nursing.  Skill: Provide comprehensive care to old people and educate students, colleagues and family members for caring geriatric population.  Attitude: Respect elderly; use their skills and	Geriatric:  Concepts, trends, problems and issues. Aging process and changes. Health problems and needs. Psycho- physical stressors and disorders. Health Assessment. Rehabilitation of elderly. Care of elderly. Training and supervision of care givers. Role and responsibilities of Geriatric nurse in the	<ul> <li>Myths and facts of aging. Elderly abuse.</li> <li>Government welfare measures- programmers' for elderly and role of NGOs. (3 Hrs)</li> </ul>	• Theories of aging. (1 Hr)

	knowledge wherever possible.	community. (6 Hrs)		
VII (10 Hrs)	At the end of unit students are able to:  Knowledge: Explain the concept, principles and models & methods of rehabilitation.  Skill: Rehabilitate all types of challenged individuals in all settings. Motivate and educate individuals and family members to overcome their disability and become useful member of the society.  Attitude: Shows concern towards challenged members of the society and recognize the importance of team approach and inter sectoral coordination in rehabilitation.	Rehabilitation:  Introduction: Concept, principles, trends and issues. Rehabilitation team. Community based rehabilitation. Psychological rehabilitation. Rehabilitation of client with chronic disease conditions. Restorative rehabilitation. Vocational rehabilitation. Role of voluntary organizations. Guidance and counseling. Role and responsibilities of community health nurse. (6 Hrs)	Ethical issues.     Disability and rehabilitation – Use of various prosthetic devices. Welfare measures.(2 Hrs)	<ul> <li>Modes and methods</li> <li>Rehabilitation council of India.</li> <li>(2 Hrs)</li> </ul>
VIII (10 Hrs)	At the end of unit students are able to:  Knowledge: Discuss the changing trend in mental health nursing and National mental health programme.  Skill: Utilize services of welfare agencies while providing comprehensive nursing care to mentally ill client.  Attitude: Integrate mental health services in general health services and contribute in preventing mental health problems.	Community Mental Health:  • Magnitude, trends and issues. National Mental Health Program- Community Mental Health Programme. Case management: Collaborative management. Crisis intervention. Welfare agencies. The community as a client: Primary prevention, Population at risk, Secondary prevention, Tertiary prevention. Community based rehabilitation. Human rights of mentally ill. Role of community health nurse. (9 Hrs)	<ul> <li>The changing focus of care.</li> <li>The Public Health model.(1 Hr)</li> </ul>	
IX (13 Hrs)	At the end of unit students are able to:  Knowledge: Illustrate ergonomics, ergonomics solutions and components & legal provisions for preventing occupational diseases.  Skill: Contribute as efficient team member in preventing occupational health hazards and promoting health of the employees.  Attitude: Educate and motivate employees to use safety devices.	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 of occupational diseases, disability limitation and rehabilitation. Women and occupational health. Occupational education and counseling. Child labour. Disaster preparedness and management.ILO and WHO recommendations, Factories Act, ESIS Act. Role of community health nurse. Concept of ecological Health(10 Hrs)	<ul> <li>Legal issues:         Legislation, Labour         Unions,</li> <li>Role of occupational         health team. (2 Hrs)</li> </ul>	Violence at work place. (1 Hr)

#### AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr. No.	Area of clinical Experience	No. of weeks	Total Hours
1	National Health and Family Welfare Programme (Community Health Nursing)	17	510
2	School Health	3	90
3	International Health	2	60
4	Administration (Sub Centre, Primary Health Centre & Community Health Centre)	2	60
5	Occupational Health	2	60
6	Community Mental Health	2	60
7	Geriatrics	2	60
8	Rehabilitation	2	60
	Total	32	960

**TEACHING STRATEGY:** Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

**TEACHING METHOD:** Lectures, Seminars, Case presentation & discussion, Clinical observation.

A.V. AIDS: OHP, LCD, Posters, Blackboard, Demonstration.

#### **ASSIGNMENTS: Theory:**

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Seminar	Two	1X50	100
			Total Marks	100

#### **Practical:**

Sr. No.	Assignment	No./ Quantity	Marks per Assignment	Total Marks
1	Table 1 and Mallacon (Const. 1)	,	_	25
1	Teaching learning Module preparation (Group work)	One	1X25	25
2	Family Care Plans (Two in UPH & Two in RPH)	Four	1X25	100
3	Specific Day Celebration (Group work)	One	1X25	25
4	Clinical Performance Evaluation (UPH & RPH)	Two	1X100	200
5	Report on visits (Minimum five visits)	One	1X25	25
6	Organizing Health Education Programme in community (Group work)	One	1X25	25
7	Preparation of standing orders for One subordinate (Group work)	One	1X25	25
8	Report of Occupation Health posting/Visit	One	1X25	25
9	Participating in organization of Health Camp (Group work)	One	1X50	50
			Total Marks	500

#### **RECOMMENDED BOOKS:**

- B.T.Basawanthappa, 'Community health Nursing', Jaypee Brothers Medical Publishers (P), Ltd.
- Stanhope and Lancaster, 'CommunityHealth Nursing Promoting Health of Aggregate, Families and individuals' Mosby.
- Judith Ann Allender and Barbara Walton Spradley, 'Community Health Nursing –Promoting and Protecting the Public Health' Lippincott Willams and Walkins.
- M.C.Gupta and B.K mahajan, 'Text Book of Preventive and Social Medicine', jaypee Brothers Medical Publishers (P) Ltd.
- Sunder Lal, Adarsh and Punkaj, 'Text Book of Community Medicine', CBS Oubkuishers & distributors.
- K.K. Gulani,' Community Health Nursing Principles and Practice' Kumar Publishing House.
- Nancy Burns and Susan k. Grove, 'Understanding Nursing Research' Elsevier.
- S. Kamalam, 'Essentials in community Nursing Practice', Jaypee Brothers Medical Publishers (P) Ltd.
- K.Park, 'Test book of Preventive and Social Medicine', Banarasidas Bhanot Publishers.

# Subject No.2 CLINICAL SPECIALITY- II

### MENTAL HEALTH NURSING (PSYCHIATRIC NURSING)

Total: 1110 Hours Theory: 150 Hours Practical: 950 Hours

#### AIM:

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:

- Apply the nursing process in the care of ill infants to pre adolescents in hospital and community.
- Demonstrate advanced skills/competence in nursing management of children with medical and surgical problems.
- Recognize and manage emergencies in children.
- Provide nursing care to critically ill children.
- Utilize the recent technology and various treatment modalities in the management of high risk children.
- Prepare a design for layout and describe standards for management of pediatric units/hospitals.
- Identify areas of research in the field of pediatric nursing.
- Identify and manage psychiatric emergencies.
- Demonstrate skills in carrying out crisis intervention.
- Appreciate the legal and ethical issues pertaining to psychiatric nursing.
- Prepare a design for layout and management of psychiatric units.
- Teach psychiatric nursing to undergraduate students & in-service nurses.

#### **COURSE CONTENTS:**

### **Unit I -Principles and Practice of Psychiatric Nursing:**

· Review.

#### **Unit II -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.
- Grief and grief reaction. Crisis Intervention; Phases. Post traumatic stress disorder (PTSD).
- Role of the Nurse.

#### **Unit III - Anger / Aggression Management:**

Anger and Aggression, Types, Predisposing Factors. Management. Role of the Nurse.

#### **Unit IV - The Suicidal Client:**

• Epidemiological Factors. Risk Factors. Predisposing Factors: Theories of Suicide- Psychological, Sociological, Biological. Nursing Management.

#### Unit V -Disorders of Infancy, Childhood, and Adolescence:

 Mentally Challenged. Autistic Disorders. Attention-Deficit/Hyperactivity Disorder. Conduct Disorders. Oppositional Defiant Disorder. Tourette's Disorders. Separation Anxiety Disorder. Psychopharmacological Intervention and Nursing Management.

#### Unit VI -Delirium, Dementia, and Amnesic Disorders:

• Delirium. Dementia. Amnesia. Psychopharmacological Intervention and Nursing Management.

#### **Unit VII -Substance – Related Disorders:**

- Substance-Induced Disorder. Classes of Psychoactive Substances. Predisposing Factors.
- The Dynamics of Substance-Related Disorders. The Impaired Nurse. Codependency.

• Treatment Modalities for Substance-Related Disorders and Nursing Management.

#### Unit VIII -Schizophrenia and other Psychotic Disorders: (check ICD10)

- Nature of the Disorder. Predisposing Factors.
   Schizophrenia Types Disorganized Schizophrenia. Catatonic Schizophrenia. Paranoid Schizophrenia. Undifferentiated Schizophrenia. Residual Schizophrenia.
- Other Psychotic disorders- Schizoaffective Disorder. Brief Psychotic Disorder. Schizophrenic Disorder. Psychotic Disorder Due to a General Medical Condition. Substance-Induced Psychotic Disorder. Treatment and Nursing Management.

#### **Unit IX - Mood Disorders:**

 Historical Perspective. Epidemiology. The Grief Response. Maladaptive Responses to Loss. Type s of Mood Disorders Depressive disorders. Bipolar disorders. Treatment and Nursing Management.

#### **Unit X - Anxiety Disorders:**

- Historical Aspects. Epidemiological Statistics. How much is too much?
- Types- Panic Disorder. Generalized Anxiety Disorder. Phobias. Obsessive-Compulsive Disorder. Posttraumatic Stress Disorder. Anxiety Disorder Due to a General Medical Condition Substance-Induced Anxiety Disorder.
- Treatment Modalities. Psycho pharmacology & Nursing Management.

#### **Unit XI -Somatoform and Sleep Disorders:**

- Somatoform Disorders.
- Historical Aspects- Epidemiological Statistics. Pain Disorder. Hypochondriasis. Conversion Disorder Body Dysmorphic Disorder. Sleep Disorder.
- Treatment Modalities and Nursing Management.

#### **Unit XII -Dissociative Disorders and Management:**

- Historical Aspects. Epidemiological Statistics.
- Application of the Nursing Management. Treatment Modalities and Nursing Management.

#### **Unit XIII -Sexual and Gender Identity Disorders:**

- Development of Human Sexuality. Sexual Disorders. Variation in Sexual Orientation.
- Nursing Management.

#### **Unit XIV - Eating Disorders:**

- Epidemiological Factors. Predisposing Factors: Anorexia Nervosa and Bulimia Nervosa, obesity Psychopharmacology.
- Treatment & Nursing Management.

#### **Unit XV -Adjustment and Impulse Control:**

- · Historical and Epidemiological Factors. Adjustment Disorders. Impulse Control Disorders
- Treatment & Nursing Management.

#### **Unit XVI - Medical Conditions due to Psychological Factors:**

- Asthma. Cancer. Coronary Heart Disease. Peptic Ulcer. Essential Hypertension. Migraine Headache. Rheumatoid Arthritis. Ulcerative Colitis.
- Treatment & Nursing Management. Intensive care unit and Mental Health

#### **Unit XVII -Personality Disorders:**

- Historical perspectives.
- Types of Personality Disorders- Paranoid Personality Disorder. Schizoid Personality Disorder. Antisocial Personality Disorder. Borderline Personality Disorder. Histrionic Personality Disorder. Narcissistic Personality Disorder. Avoidance Personality Disorder. Dependent Personality Disorder. Obsessive-Compulsive Personality Disorder. Passive-Aggressive Personality Disorders.
- Identification, diagnostic, symptoms. Psychopharmacology, Treatment & Nursing Management.

#### **Unit XVIII -The Aging Individual:**

- Epidemiological Statistics.
- Biological Theories.
- Biological and Psychological Aspects of Aging.
- Memory Functioning.
- Socio-cultural and Special aspects of aging.
- Special Concerns of the Elderly Population.

- Psychiatric problems among elder.ly population.
- Treatment & Nursing Management.

#### **Unit XIX - The person living with HIV Disease:**

- Psychological problems of individual HIV / AIDS.
- · Counseling.
- Treatment & Nursing Management.

#### **Unit XX - Problems Related to Abuse or Neglect:**

- Vulnerable groups, Women, Children, elderly, psychiatric patients, under privileged, challenged. Predisposing Factors.
- Treatment. Nursing management & Counseling.

#### **Unit XXI - 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- Populations at Risk. Primary prevention, Secondary prevention, Tertiary Prevention.
  - Community based rehabilitation.

### Unit XXII -Ethical and Legal Issues in Psychiatric / Mental Health Nursing:

- Ethical Considerations. Legal Consideration. Nurse Practice Acts. Types of Law. Classification within Statutory and Common Law. Legal Issues in Psychiatric/Mental Health Nursing.
- Nursing Liability.

#### **Unit XXIII -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.

#### **Unit XXIV -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.

#### **Unit XXV -Administration and Management of Psychiatric Units:**

• Design & layout. Staffing. Equipment, supplies. Norms, policies and protocols. Quality assurance.

Practice standards for psychiatric care unit. Documentation.

#### **Unit XXVI -Education and Training in Psychiatric Care:**

- Staff orientation, training and development.
- In-service education program.
- Clinical teaching programs.

#### **ESSENTIAL PSYCHIATRIC NURSING SKILLS:**

- **Procedures to be Observed:** Psychometric tests, Personality tests, Family therapy.
- **Procedures to be assisted:** CT scan, MRI, Behavioral Therapy.
- **Procedures to be performed:** Mental status Examination, Participating in various therapies Physical; ECT., Administration of oral, I.M., I.V. psychotropic drugs, Interviewing skills, Counseling skills, Communication skills, Psycho education, Interpersonal relationship skills, Community survey for identifying mental health problems, Rehabilitation therapy, Health Education and Life skills training, Supportive psychotherapeutic skill, Group therapy, Milieu therapy, Social/Recreational therapy, Occupational therapy.

### CLINICAL SPECIALITY -II

# MENTAL HEALTH NURSING (PSYCHIATRIC NURSING)

Unit No.	Objectives	Contents with distributed hours		
& Hours		Must Know	Desirable to Know	Nice to Know
I (2 Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Understands and explain the principles of psychiatric nursing. <b>Skill:</b> Practice principles of psychiatric nursing in clinical settings. <b>Attitude:</b> Appreciate importance of principles of psychiatric nursing in different clinical settings.	Principles and practice of Psychiatric nursing: • Review. (2 hrs)		
II (5 Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Understand the importance of crisis intervention. <b>Skill:</b> Indentify and recognize the crisis situations. <b>Attitude:</b> Develop interest in understanding treatment modalities and its use in practice.	Crisis Intervention:  • Crisis, Definition, Types of Crisis; Dispositional, Anticipated Life Transitions Traumatic Stress, Maturational /Developmental, Reflecting Psychopathology, Psychiatric Emergencies. Crisis Intervention; Role of the Nurse. (3 hrs)	<ul> <li>Grief and grief reaction.</li> <li>Post traumatic stress disorder (PTSD). (1 hr)</li> </ul>	• Phases in the Development of a Crisis. (1 hr)
III (4 Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Understand the concept of anger and aggression and explain its influence on an individual. <b>Skill:</b> Accept and recognize the anger/aggression clients and provide competent care. <b>Attitude:</b> Practices varied methods of managing anger and aggressive behavior of clients.	<ul> <li>Anger / Aggression Management:</li> <li>Anger and Aggression, Types, Predisposing Factors.</li> <li>Management.</li> <li>Role of the Nurse. (4 hrs)</li> </ul>		
IV (5 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Understands and explains the etiology for suicide. <b>Skill:</b> Render effective care to the suicidal client in acute and recovery stage. <b>Attitude:</b> Learns different ways of managing frustration and teaches to clients.	<ul> <li>The Suicidal Client:</li> <li>Predisposing Factors:</li> <li>Theories of Suicide-</li> <li>Psychological, Sociological &amp; Biological.</li> <li>Nursing Management. (3 hrs)</li> </ul>	<ul> <li>Epidemiological Factors.</li> <li>Risk Factors. (2 hr)</li> </ul>	
V (5 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Describe various psychiatric disorders of infancy, childhood and adolescence.	Disorders of Infancy, Childhood, and Adolescence:  • Mentally Challenged. Autistic Disorders, Attention Deficit/		

	Skill: Identify and render comprehensive care to children suffering from various childhood and adolescent disorders.  Attitude: Takes initiative in pre conceptional counseling.	Hyperactivity Disorder, Conduct Disorders. Oppositional Defiant Disorder, Tourette's Disorders  • Separation Anxiety Disorder Psychopharmacological Intervention and Nursing Management. (5 hrs)		
VI (5 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Understand stages of dementia & explains the difference between dementia and delirium. <b>Skill:</b> Identify clients with memory disturbances & render them effective care. <b>Attitude:</b> Cultivate an empathetic view about clients & strive for making them independent.	Delirium, Dementia, and Amnesic Disorders:  Delirium. Dementia. Amnesia. (4 hr) Psychopharmacological Intervention and Nursing Management. (1 hr)		
VII (10 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Understand different categories of substances abused and their effects on individual, families and society. <b>Skill:</b> Identify substance related disorders among people and practices different treatment modalities to treat and prevent them. <b>Attitude:</b> Participates in awareness campaigns of substance abuse prevention for adolescents and young adults.	<ul> <li>Substance – Related Disorders:</li> <li>Substance-Induced Disorder.</li> <li>Classes of Psychoactive Substances. (2 hrs)</li> <li>Predisposing Factors. (1 hr)</li> <li>The Dynamics of Substance-Related Disorders. (2 hrs)</li> <li>Nursing Management. (3 hrs)</li> </ul>	<ul> <li>The Impaired         Nurse         Codependency.         (1 hr)</li> <li>Treatment         Modalities for         Substance-Related         Disorders. (1hr)</li> </ul>	
VIII (10 Hrs)		Schizophrenia and other Psychotic Disorders: (check ICD10): Schizophrenia Types- o Disorganized Schizophrenia. o Catatonic Schizophrenia. o Paranoid Schizophrenia. o Undifferentiated Schizophrenia. o Residual Schizophrenia o Other Psychotic disorders. o Schizoaffective Disorder. o Brief Psychotic Disorder. o Schizophrenia Disorder.(6 hrs) o Nursing Management. (2 hrs)	<ul> <li>Nature of the Disorder.</li> <li>Predisposing Factors.</li> <li>Psychotic Disorder Due to a General Medical Condition</li> <li>Substance-Induced Psychotic Disorder.</li> <li>Treatment.(2hrs)</li> </ul>	
IX (8 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Understand & explain normal & maladaptive grief responses.	<ul> <li>Mood Disorders:</li> <li>Types of Mood Disorders. Depressive disorders. Bipolar disorders.</li> </ul>	<ul><li>Epidemiology.</li><li>The Grief Response.</li></ul>	Historical     Perspective.

	Describe various mood disorders their psychodynamics, diagnostic features & treatment modalities.  Skill: Recognize patients with mood disorders and render comprehensive care.  Attitude: Learns to correlate seasonality and grief with mood disorders.	• Nursing Management. (6 hrs)	<ul> <li>Maladaptive. Responses to Loss.</li> <li>Treatment.(2 hrs)</li> </ul>	
X (8 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Develop an understanding of constructive and destructive anxiety and different anxiety disorders. <b>Skill:</b> Identify various anxiety disorders among clients. <b>Attitude:</b> Incorporates innovative techniques to combat anxiety.	<ul> <li>Anxiety Disorders: Types</li> <li>Panic Disorder.</li> <li>Generalized Anxiety Disorder.</li> <li>Phobias. Obsessive-Compulsive Disorder. Posttraumatic Stress Disorder. Anxiety Disorder Due to a General Medical Condition.</li> <li>Substance-Induced Anxiety Disorder. Nursing Management. (5 hr)</li> </ul>	<ul> <li>Epidemiological Statistics.</li> <li>How much is too much?</li> <li>Treatment Modalities.</li> <li>Psychopharmacolo gy.(3 hr)</li> </ul>	Historical Aspects.
XI (5 Hrs)		Somatoform And sleep Disorders:  Somatoform Disorders. Pain Disorder. Hypochondriasis. Conversion Disorder. Body Dysmorphic Disorder. Sleep Disorders. Nursing Management (4 hrs)	<ul> <li>Epidemiological Statistics.</li> <li>Treatment Modalities (1 Hr)</li> </ul>	• Historical Aspects.
XII (4 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Understand; describe causes & psychodynamics of dissociative disorders. <b>Skill:</b> Renders culturally congruent care to these clients. <b>Attitude:</b> Consider early life experiences of clients to manage stress.	Dissociative Disorders and Management:  • Application of the Nursing Management.  • Nursing Management (3 hrs)	<ul> <li>Epidemiological Statistics.</li> <li>Treatment Modalities (1 hr)</li> </ul>	Historical Aspects
XIII (4 Hrs)		Sexual And Gender Identity Disorders:  Sexual Disorders. Variation in Sexual Orientation. Nursing Management. (3 hrs)	Development of Human Sexuality (1 hr)	

	between normal sexuality and morality.			
XIV (4 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Describe diagnostic criteria for eating disorders it's management. <b>Skill:</b> Identify & render care to these clients. <b>Attitude:</b> Takes interest in practicing different treatment modalities and alternative therapies while rendering care to clients with eating disorders.	<ul> <li>Eating Disorders:</li> <li>Predisposing Factors: Anorexia Nervosa And Bulimia Nervosa obesity</li> <li>Psychopharmacology.</li> <li>Nursing Management (2 hrs)</li> </ul>	• Treatment. (1 Hr)	• Epidemiological Factors. (1 hr)
XV (4 Hrs)	At the end of course students are able to – <b>Knowledge:</b> Describe, illustrate different adjustment and impulse control disorders. <b>Skill:</b> Demonstrates competence in identifying and caring for clients. <b>Attitude:</b> Participates in community awareness campaigns for mental health and mental ill health.	<ul> <li>Adjustment and Impulse Control:</li> <li>Adjustment Disorders.</li> <li>Impulse Control Disorders.</li> <li>Nursing Management. (2 hrs)</li> </ul>	• Treatment (1 hrs)	Historical and Epidemiological Factors. (1 hr)
XVI (4 Hrs)	At the end of the course students are able to <b>Knowledge:</b> Understand psychological bases of various medical conditions and their prognosis. <b>Skill:</b> Develops skills in identifying psychological stressors for medical conditions and renders care accordingly. <b>Attitude:</b> Provide psycho-education to clients with medical conditions; help them to identify psychological stressors for these conditions.	Medical Conditions due to Psychological Factors:	• Treatment. (1 Hr)	
XVII (10 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Understand the concept of normal & abnormal personality, explain various personality disorders. <b>Skill:</b> Demonstrates competence in indentifying and rendering comprehensive culture care to clients with different personality disorders. <b>Attitude:</b> Take initiative to early diagnose abnormal personality traits in order to prevent them from progressing to personality disorder by prompt intervention.	Personality Disorders: Types- O Paranoid Personality Disorder. O Schizoid Personality Disorder. O Antisocial Personality Disorder. O Borderline Personality Disorder. O Histrionic Personality Disorder. O Narcissistic Personality Disorder. O Avoidance Personality Disorder. O Dependent Personality Disorder. O Obsessive-Compulsive Personality Disorder. Passive-Aggressive Personality Disorders. (6 hrs) Identification, diagnostic symptoms.	• Treatment. Psychopharmacology. (2 hrs)	• Historical perspectives. (1 hr)

		Nursing Management. (1 hr)		
XVIII (8 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Understand normal aging process & explain bio-psycho-social Problems of aging. <b>Skill:</b> Demonstrate competence in identifying bio-psycho-social problems of aging & take appropriate action to eliminate suffering. <b>Attitude:</b> Attempt to minimize discomfort due to irreversible problems.	<ul> <li>The Aging Individual:</li> <li>Biological Aspects of Aging. (1 hr)</li> <li>Psychological Aspects of Aging</li> <li>Memory Functioning. (1 hr)</li> <li>Socio-cultural aspects of aging. (1 hr)</li> <li>Psychiatric problems among elderly population. (1 hr.)</li> <li>Nursing Management. (1 hrs)</li> </ul>	<ul> <li>Special aspects of aging.</li> <li>Special Concerns of the Elderly.</li> <li>Treatment. (1 hr)</li> </ul>	<ul> <li>Biological Theories (1 Hr)</li> <li>Epidemiological Statistics. (1 hr)</li> </ul>
XIX (5 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Illustrate the patho-physiology and psychodynamics due to HIV Disease. <b>Skill:</b> Demonstrate effective communication skills through counseling. <b>Attitude:</b> Considers social stigma of the disease, takes initiative to prevent transmission of the disease.	<ul> <li>The person living with HIV Disease:</li> <li>Psychological problems of individual HIV / AIDS. (2 hr)</li> <li>Counseling (1 hrs)</li> <li>Nursing Management. (1 hr)</li> </ul>	• Treatment. (1 Hr)	
XX (5 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Understand the vulnerability of certain groups for neglect and abuse. <b>Skill:</b> Identify the signs of neglect and abuse among the patients encountered in different clinical settings and take appropriate action. <b>Attitude:</b> Indicates awareness of legal Implications of neglect and abuse.	<ul> <li>Problems Related to Abuse or Neglect:</li> <li>Vulnerable groups, Women, Children, elderly, psychiatric patients, under privileged, challenged. (2 hrs)</li> <li>Nursing management &amp; Counseling. (1 hrs)</li> </ul>	<ul> <li>Predisposing Factors.(1 hr)</li> <li>Treatment.(1 Hr)</li> </ul>	
XXI (10 Hrs)	At the end of the course the students are able to <b>Knowledge:</b> Understand and explain the concept of community mental health nursing and levels of prevention in community mental health. <b>Skill:</b> Practice case management and applies public health model while rendering mental health care in community. <b>Attitude:</b> Participates in psycho-social and occupational rehabilitation of the chronic mentally ill clients.	<ul> <li>Community Mental Health Nursing:</li> <li>National Mental Health Program-Community mental health program.</li> <li>The Role of the Nurse. (2 hr)</li> <li>Case Management. (1 hr)</li> <li>The community as Client -Primary prevention, Secondary prevention, Tertiary Prevention. (2 hrs)</li> <li>Community based Rehabilitation. (2 Hrs)</li> </ul>	<ul> <li>The Public Health Model(1 hr)</li> <li>Populations at Risk. (1 hr)</li> </ul>	• The changing Focus of care. (1 hr)
XXII (5 hrs)	At the end of the course the students are able to <b>Knowledge:</b> Explains legal and ethical considerations in psychiatric nursing.	Ethical and Legal Issues in Psychiatric / Mental Health Nursing:  • Ethical Considerations and	<ul><li> Types of Law.</li><li> Classification within Statutory</li></ul>	• Legal Issues in Psychiatric/Mental Health Nursing.

	Skill: Renders ethically & legally competent care.  Attitude: Appreciates the rights of mentally ill clients.	<ul> <li>Legal Consideration. (1 hr)</li> <li>Nurse Practice Acts. (1 hr)</li> <li>Nursing Liability. (1 hr)</li> </ul>	and Common Law. (1 hr)	(1 Hr)
XXIII (5 Hrs)	At the end of unit students are able to:  Knowledge: Understand various aspects of psychosocial rehabilitation of clients with chronic mental illness.  Skill: Assess disability and render rehabilitative services in different therapeutic milieu.  Attitude: Practice principles of rehabilitation.	<ul> <li>Psychosocial rehabilitation:</li> <li>Principles of rehabilitation. (1 hr)</li> <li>Disability assessment. (1 hr)</li> <li>Day care centers. Half way homes.</li> <li>Reintegration into the community. (2 hr)</li> </ul>	<ul> <li>Training and support to care givers.</li> <li>Sheltered workshops. (1 hr)</li> </ul>	• Correctional Homes.
XXIV (5 Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain the importance of counseling in practice of psychiat nursing while dealing with clients having terminillness and other social problems.  Skill: Develops counseling skills for terminally clients.  Attitude: Considers social status and cultural background of the clients.		<ul> <li>Treatment, care and counseling -</li> <li>Unwed mothers.</li> <li>HIV and AIDS. (1 hr)</li> </ul>	<ul> <li>Liaison psychiatric nursing. (1 hr)</li> </ul>
XXV (5 Hrs)	At the end of unit students are able to:  Knowledge: Understand various needs of the psychiatric units.  Skill: Manage psychiatric unit effectively and efficiently.  Attitude: Develops a quality assurance measurement for the psychiatric unit.	Administration and management of psychiatric units:  • Staffing.  • Equipments and Supplies,  • Norms, Policies and Protocols.  • Documentation.  (3Hrs)	• Quality assurance. (1 hr)	<ul> <li>Design &amp; layout.</li> <li>Practice standards for psychiatric care unit. (1 hr)</li> </ul>
XXVI (5 Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain the need for staff development.  Skill: Plan staff development Programme for staff nurses.  Attitude: Volunteers to provide clinical Teaching to students.	<ul> <li>Education and training in psychiatric care:</li> <li>Staff orientation, training and development.</li> <li>In-service education program, Clinical teaching programs. (4 Hrs)</li> </ul>	Clinical teaching Programs. (1 hr)	

#### AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr. No.	Dept / Unit	No. of weeks		Sr. No.	Dept / Unit	No. of weeks	Total hours
1	OPD (Neuro and Psychiatric)	3	90	6	Child Psychiatric Unit and Child Guidance Unit	2	60
2	Psychiatric Emergency Unit	4	120	7	Community Mental Health Unit	4	120
3	De addiction Unit	4	120	8	Family Psychiatric Unit	2	60
4	Chronic Psychiatric Ward	4	120	9	Field Visits	2	60
5	Acute Psychiatric Ward	4	120	10	Rehabilitation Unit	2	60
			11	Post natal Ward	1	30	
	Total 19 570 Total		13	390			
Grand Total					32	960	

**TEACHING STRATEGY:** Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

**TEACHING METHOD:** Lectures, Seminars, Case presentation & discussion, Clinical observation.

**A.V. AIDS:** OHP, LCD, Posters, Blackboard, Demonstration

#### **ASSIGNMENTS: Theory:**

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Seminar	Two	2X50	100
Total Marks				

#### **Practical:**

ractical.						
Sr. No.	Assignment	No./Quantity	Marks perAssignment	Total Marks		
1	Teaching learning module preparation (Group work)	One	1X25	25		
2	Case study	One	1X50	50		
3	Case presentation	Two	1X50	100		
4	Nursing Care Plans	Two	1X25	50		
5	Specific Day Celebration (Group work)	One	1X25	25		
6	Clinical Performance Evaluation	One	1X100	100		
7	Behavioral Therapy Report	One	1X25	25		
8	Group Therapy report	One	1X25	25		
9	Family Therapy Report	One	1X25	25		
10	Report on management of Psychiatric Unit	One	1X25	25		
11	Mental Status Examination (Minimum Two Cases)	One	1X25	25		
12	History Taking (Minimum Two Cases)	One	1X25	25		
			Total Marks	500		

#### **RECOMMENDED BOOKS:**

- Frisch and Frich-Psychiatric Mental Health Nursing,.
- Stuart and Laria, Principles and Practice of Psychiatric Nursing.
- Mary C Townsend "Psychiatric Mental Health Nursing". Concept of care.
- The ICD 10, Classification of Mental Health and Behavioral disorders, WHO, A.I.T.B.S. Publishers, Delhi
- De Souza Alan ,De Souza A-"National Series –Child Psychiatry"
- Patricia Kennedy ,Ballard "Psychiatric Nursing Integration of Theory and Practice"
- .Shiela M. Sparks, Cynthia M. Jalor-Nursing Diagnosis reference Manual.
- Foundations Journal of Mental Health Nursing.
- Deborah Antai Otoing. "Psychiatric Nursing "Biological and Behavioral Concepts.
- Mary Ann Boyd. "Psychiatric Nursing "Contemporary Practice.
- .Kaplan and Sadocks –Synopsis of Psychiatry, 10th Edition, 2007.
- Jiv Vyas and Niraj Ahuja .Text book of Post graduate Psychiatric Volume I and II.
- Phil Barker, Psychiatric and mental health Nursing,.
- Kaplan and Sadock's, Clinical Psychiatry concise textbook.

#### **Subject No.2**

# CLINICAL SPECIALITY II OBSTETRIC AND GYNAECOLOGICAL NURSING

Total: 1110 Hours Theory: 150 Hours Practical: 960 Hours

#### AIM:

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 students 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 students will be able to:

- Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of women with obstetric and gynecological conditions
- Perform physical, psychosocial, cultural & spiritual assessment
- Demonstrate competence in caring for women with obstetrical and gynecological conditions
- Demonstrate competence in caring for high risk newborn.
- Identify and Manage obstetrical and neonatal emergencies as per protocol.
- Practice infection control measures.
- Utilize recent technology and various diagnostic, therapeutic modalities in the management of obstetrical, gynecological and neonatal care.
- Demonstrate skill in handling various equipments/gadgets used for obstetrical, gynecological and neonatal care.
- Teach and supervise nurses and allied health workers.
- Design a layout of specialty units of obstetrics and gynecology
- Develop standards for obstetrical and gynecological nursing practice.
- Counsel women and families.
- Incorporate evidence based nursing practice and identify the areas of research in the field of obstetrical and gynecological nursing
- Function as independent midwifery nurse practitioner.

#### **CONTENTS:**

#### Unit I -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 Management of Pregnancies at risk-due to obstetrical complication.
- O 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 Low Platelet 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.

#### Unit II -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 renal failure. 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, uterine anomalies, prolapse, ovarian cyst.

#### Unit III -Abnormal labour, pre-term labour & obstetrical emergencies:

• Etiology, pathophysiology and nursing management of - Uncoordinated uterine actions, Atony of uterus, precipitate labour, prolonged labour. Abnormal lie, presentation, position compound

presentation. 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, WF, RVF.

• Complications of third stage of labour: Post partum Hemorrhage. Retained placenta.

### **Unit IV -Post partum complications:**

• Nursing management of -Puerperal infections, puerperal sepsis, urinary complications, puerperal venous thrombosis and pulmonary embolism. Sub involution of uterus, Breast conditions, Thrombophlebitis. Psychological complications, post partum blues, depression, psychosis.

### **Unit V - 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 nursing services in NICU.

#### **Unit VI -HIV / AIDS:**

- HIV positive mother and her baby. Epidemiology, Screening. Parent to child transmission (PTCT). Prophylaxis for mother and baby, Standard safety measures. Breast feeding issues. National policies and guidelines.
- Issues: Legal, ethical, Psychosocial and rehabilitation.

### Unit VII -Gynecological problems and nursing management:

• Gynecological assessment. Gynecological procedures. Etiology, pathophysiology, diagnosis and nursing management of -Menstrual irregularities. Diseases of genital tract, Genital tract infections, uterine displacement. Genital prolapsed, genital injuries, uterine malformation. Uterine fibroid, ovarian tumors, Breast carcinoma, Pelvic inflammatory diseases, reproductive tract malignancies, hysterectomy- vaginal and abdominal.

### Unit VIII -Administration and management of obstetrical and gynecological 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 gynecological unit.
- Therapeutic methods for ANC,PNC,Labor and natural birthing methods

### Unit IX -Education and training in obstetrical and gynecological care:

• Staff orientation, training and development, In-service education program, Clinical teaching programs.

#### **\* PRACTICALS:**

- Clinical practice in Obstetric and Gynecological setting i.e. Antenatal Out Patient Department, Labour room, Post natal / MCH Clinic, NICU, Obstetrical and gynecological Operation Theatre, Gynecological wars, post partum/ MTP Clinic, Infertility centers, Community Health Centre/ Primary Health Centre.
- **Procedures to be Observed:** ART procedures, Ultrasonography, Specific laboratory tests, Amniocentesis, Cervical and vaginal cytology, Fetoscopy, Hysteroscopy, MRI, Surgical diathermy, Cryosurgery.

### • Procedures to be assisted:

Operative delivery, abnormal deliveries – Forceps application, Ventouse, Breech, Exchange Blood transfusion, Culdoscopy, Cytoscopy, Tuboscopy, Laparoscopy, Endometrial biopsy, Tubal patent test, Chemotherapy, Radiation therapy, Medical Termination of Pregnancy, Dilatation and Curettage.

### • Procedures to be performed:

Relevant history talking - Obstetric and Gynaec, Complete General physical examination, Antenatal Assessment -20, Assessment of risk status, Health Education, Counseling and mother craft classes, Antenatal Immunization, Assessment of intra uterine foetal well being, Universal precautions effective infection control methods, Assessment of women in abnormal pregnancy, vaginal examination and inspection (early pregnancy, labour, post partum), Utilization of Partograph, Cervicograph, medical and surgical induction, Conduction of safe delivery, Application of outlet forceps, delivery of breach - Burns Marshall, Loveset manoeuvere, Episiotomy suturing, manual removal of placenta, placenta examination, Post natal assessment - 20, Management of breast engorgement, white leg, Post natal counseling, Reposition of inversion of uterus. Breast care, breast examination, and incision and drainage of breast abscess, Post natal exercises, New born assessment - ruling our congenital anomalies, Assessment of high risk new born, Neonatal resuscitation, Apgar score, Monitoring neonates – Clinically, with monitor, capillary refill time, Assessment of jaundice, Gastric lavage, Gastric gavage, Care of child in multi channel monitor and ventilator, care of child in radiant, warmer and incubator, kangaroo care, Anthropometric measurement, Neonatal refluxes, Breast feeding, Parental nutrition and fluid balance, infusion pump, feeding techniques, Medication - oral, I.M., I.V. I.D., Capillary blood sample collection, oxygen therapy, phototherapy, Chest physiotherapy, Parental counseling – bereaved parents., Setting of operation theatre, Trolly and table set up for Obstetrical and gynecological operations, Pap smear preparation, Taking vaginal test for ovulation, Counseling infertile couple.

# CLINICAL SPECIALITY -II OBSTETRIC AND GYNAECOLOGICAL NURSING

77		Contents with	h distributed hours	
Unit No. & Hours	Objectives	Must Know	Desirable to Know	Nice to Know
I (27Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain high risk pregnancy.  Skill: Identify high risk pregnancy and render culturally congruent comprehensive care to the expectant mothers with high risk pregnancy.  Attitude: Appreciate factors responsible for high risk pregnancy in clients.	<ul> <li>Management of problems of women during pregnancy:         <ul> <li>Risk approach of obstetrical nursing care, concept &amp; goals.</li> <li>Nursing Management of:</li></ul></li></ul>	Screening of high-risk pregnancy, newer modalities of diagnosis. (4 hrs)	
II (18 Hrs)		Pregnancies at risk-due to pre- existing health problems:  • Anemia and nutritional deficiencies. Hepatitis Cardio-vascular disease. Thyroid diseases. Epilepsy. Essential hypertension	<ul> <li>Metabolic conditions.(1 Hr)</li> <li>Other risk factors: Age-Adolescents, elderly; unwed mothers, sexual abuse, substance use.</li> </ul>	

	<b>Attitude:</b> Identify factors responsible for making the pregnancy risky in general medical conditions.	Chronic renal failure. Tropical diseases. Psychiatric disorders  Infections Toxoplasmosis Rubella Cytomegalo virus Herpes (TORCH); Reproductive Tract Infection (RTI); STD; HIV /AIDS, Vaginal infections; Leprosy, Tuberculosis.(13 hrs)	(2 Hrs) • Pregnancies complicating with tumors, uterine anomalies, prolapse, ovarian cyst. (2 hrs)
III (17 Hrs)	At the end of unit students are able to:  Knowledge: Understand and describe abnormal uterine action and obstetrical emergencies.  Skill: Performs skillfully antenatal and postnatal assessment and renders care efficiently to high risk clients.  Attitude: Identify various factors responsible for high risk pregnancy and learns to manage them.	Abnormal labour, pre-term labour & obstetrical emergencies:  • Etiology, pathopyhsiology and nursing management of - Uncoordinated uterine actions, Atony of uterus, precipitate labour, prolonged labour. Abnormal lie, presentation, position compound presentation. 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. Complications of third stage of labour: Post partum Hemorrhage. Retained placenta. (13 hrs)	<ul> <li>Obstetrical operation:         <ul> <li>Forceps delivery,</li> <li>Ventouse, Caesarian</li> <li>section, Destructive</li> <li>operations. (2 Hrs)</li> </ul> </li> <li>Genital tract injuries-         <ul> <li>Third degree perineal</li> <li>tear, WF, RVFVII</li> <li>(2 hrs)</li> </ul> </li> </ul>
IV (11Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain post partum complications.  Skill: Demonstrate competence in identifying and rendering prompt care to the clients with post partum complications.  Attitude: Takes initiative to prevent post partum complications.	Post partum complications:  • Nursing management of- Puerperal infections, puerperal sepsis, urinary complications, puerperal venous thrombosis and pulmonary embolism. Sub involution of uterus, Breast conditions, Thrombophlebitis.  Psychological complications, post partum blues, depression, psychosis.(10hrs)	
V (25Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain various	High Risk Newborn:  • Concept, goals, assessment, principles.	Organization of neonatal care, services (Levels), transport,

	conditions that jeopardize the life of new born.  Skill: Identify life threatening conditions in new born and renders life saving care.  Attitude: Develops skills in identifying congenital abnormalities in new born.  Takes initiative to organize progressive patient care in NICU.	<ul> <li>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 (5 hrs) Icterus neonatorum. (1 hr) Birth injuries. (1 hr) Hypoxic ischaemic encephalopathy. Congenital anomalies. Neonatal seizures. Neonatal hypocalcaemia, hypoglycemia, hypomagnesaemia. Neonatal heart diseases. Neonatal hemolytic diseases. Neonatal infections, neonatal sepsis, opthalmia neonatorum, cogenital syphilis, HIV / AIDS (15 hrs)</li> <li>Advanced neonatal procedures.</li> <li>Calculation of fluid requirements. (1 hr) Hematological conditions - erythroblastosis fetalis, hemorrhagic disorder in the newborn. (1 hr)</li> </ul>	neonatal intensive care unit, organization and management of nursing services in NICU. (2 hr)	
VI (15Hrs)	At the end of unit students are able to:  Knowledge: Explain course of HIV infection and the treatment modalities.  Skill: Provide comprehensive care to the client with HIV positive, protect self and prevent spread of disease.  Attitude: Maintain confidentiality, educate people and motivate client to continue prescribed treatment.	<ul> <li>HIV / AIDS:</li> <li>HIV positive mother and her baby.</li> <li>Epidemiology. Screening.</li> <li>Parent to child transmission. (PTCT)</li> <li>Prophylaxis for mother and baby.</li> <li>Standard safety measures. Counseling.</li> <li>Breast feeding issues. (11 hrs)</li> </ul>	• Issues: Legal, ethical, Psychosocial and rehabilitation. (3 hrs)	<ul> <li>National policies and guidelines.</li> <li>(1 hr)</li> </ul>
VII (25Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain various gynecological conditions.  Skill: Renders care to the clients with gynecological conditions	Gynecological problems and nursing management:  • Gynecological assessment. Gynecological procedures. (4 hrs)  • Etiology, pathophysiology, diagnosis and nursing management	• Uterine fibroid, ovarian tumors, Breast carcinoma, Pelvic inflammatory diseases, reproductive tract malignancies, hysterectomy- vaginal	

	Attitude: Considers the gender identity aspects of gynecological conditions while rendering care to the clients with gynecological conditions.	of: Menstrual irregularities. Diseases of genital tract. Genital tract infections. Uterine displacement. Genital prolapsed. Genital injuries. Uterine malformation. (16 hrs)	and abdominal. (5 hrs)	
VIII (5Hrs)	At the end of unit students are able to:  Knowledge: Describe the organization of obstetrical and gynecological units. Explain the needs for various protocols, policies and regulations required to manage these units.  Skill: Drafts policies and practices established regulations while managing obstetrical and gynecological units.  Attitude: Enforces standards of care in obstetrical and gynecological units to render quality care.	Administration and management of obstetrical and gynecological unit:  • Equipment, supplies. • Infection control; Standard safety measures. • Quality Assurance:-Obstetric auditing - records / reports, Norms, policies and protocols. • Therapeutic methods for ANC,PNC,Labor, Natural Birth (3 hrs)	<ul> <li>Design &amp; layout</li> <li>Staffing. (1 hr)</li> </ul>	Practice standards for obstetrical gynecological unit. (1 hr)
IX (7Hrs)	At the end of unit students are able to:  Knowledge: Understands the needs for staff development in obstetrical and gynecological care.  Skill: Organizes staff training programmes in Obstetrical and gynecological care.  Attitude: Formulates a policy for staff development in the unit.	Education and training in obstetrical and gynecological care:  • Staff orientation, training and development.(3 hrs)  • In-service education program. (3 hrs)  • Clinical teaching programs. (1 hr)		

### AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr. No.	Dept / Unit	No. of weeks	Total hours
1	Antenatal OPD including Infertility clinic/ Reproductive medicine, Family welfare and post partum clinic and PTCT.	6	180
2	Antenatal and post natal ward	6	180
3	Labour Room	4	120
4	Neonatal Intensive Care Unit	3	90
5	Obstetric and Gynaec Operation Theatre	3	90
6	Gynaec Ward	4	120
7	CHC, PHC, SC	6	180
	Total	32 weeks	960 hours

**TEACHING STRATEGY:** Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

**TEACHING METHOD:** Lectures, Seminars, Case presentation & discussion, Clinical observation.

A.V. AIDS: OHP, LCD, Posters, Blackboard, Demonstration

**ASSIGNMENTS: Theory:** 

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks	
1	Seminar	Two	1X50	100	
Total Marks 100					

### **Practical:**

Sr. No.	Assignment	No./	Marks per	Total
		Quantity	Assignment	Marks
1	Teaching learning module Preparation (Group work)	One	1X25	25
2	Case study	One	1X50	50
3	Case presentation	Two	1X50	100
4	Nursing Care Plans	Two	1X25	50
5	Clinical Performance Evaluation	Two	1X100	200
6	Specific Day Celebration (Group work)	One	1X25	25
7	Visit Report (Minimum two visits)	One	1X25	25
8	Organizing Mass Health Education Programme (Group Work)	One	1X25	25
			Total Marks	500

### **RECOMMENDED BOOKS:**

- Dutta, 'Text Book of Obstetrics', Latest Edition.
- Dutta, 'Text Book of Gynecology', Latest Edition.
- C.S. Dawn, 'Test Book of Gynecology Contraception and Demography', Latest Edition.
- Bobak Jensen, 'Essential of Maternal Nursing', Latest Edition.
- Longman, 'Clinical Obstetrics'. Latest Edition.
- Campbell, 'Gynecology by ten teachers', Latest Edition.
- Myles, 'Text Book of Midwifes', Latest Edition.
- Hawkins and Bourne, 'Shaw's Test Book of Gynecology', Latest Edition.
- Dr. Doshi, 'Clinical cases in OBG', Latest Edition.
- Inderbir Singh and G.P Pal, 'Human Embryology', Latest Edition.
- A.M. Virkund, 'Manual of Practical OBG', Laatest Edition.

### Subject No. 2

### CLINICAL SPECIALITY -II

### CHILD HEALTH NURSING (PEDIATRIC NURSING)

Total: 1110 Hours Theory: 150 Hours Practical: 960 Hours

### AIM:

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 Pediatric nursing.

### **OBJECTIVES:**

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

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

### **COURSE CONTENTS:**

### **Unit I -Introduction:**

- Current principles, practices and trends in Pediatric Nursing.
- Role of pediatric nurse in various settings Expanded and extended.

### **Unit II -Disease Conditions in Children:**

Path physiology, assessment (including interpretation of various invasive and non-invasive diagnostic procedures) treatment modalities and nursing intervention in selected pediatric medical disorders-

- o Child with respiratory disorders:
- Upper respiratory tract: choanal atresia, tonsillitis, epistaxis, aspiration.
- Lower respiratory tract: Broncheolitis, Bronchopneumonia, Asthma, cystic fibrosis.
- o Child with gastro-intestinal disorders: Diarrheal diseases, gastro ·esophageal reflux.
- Hepatic disorders: Hepatitis, Indian childhood cirrhosis, liver transplantation.
- Malabsorption syndrome, Malnutrition
- o Child with renal/ urinary tract disorders: Nephrotic syndrome, Nephritis, Hydronephrosis, hemolytic-uremic syndrome, kidney transplantation.
- Child with cardio-vascular disorders:
- Acquired: Rheumatic fever, Rheumatic heart disease,
- Congnital: Cynotic and acynotic
- o Child with endocrine/metabolic disorders: Diabetes insipidus, Diabetes Mellitus IDDM, NIDDM, hyper and hypo thyroidism, phenylketonuria, galactosemia.
- o Child with Neurological disorders: Convulsions, Meningitis, encephalitis, guillian- Barre syndrome.
- O 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.

#### **Unit III -Assessment:**

(Including interpretation of various invasive and non-invasive diagnostic procedures), treatment modalities including cosmetic surgery and nursing interventions in selected pediatric surgical problems/ Disorders.

o Gastrointestinal system: Cleft lip, cleft palate and conditions requiring plastic surgery, Tracheo esophageal fistula/ atresia, Hirschsprungs' disease / megacolon, malrotation, intestinal obstruction,

- duodenal atresia, 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.
- Nursing management of the child with traumatic injuries: General principles of managing Pediatric trauma.
- Head injury, abdominal injury, poisoning, foreign body obstruction, burns & Bites.
- O 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.

### **Unit IV -Intensive care for pediatric clients:**

- o Resuscitation, stabilization & monitoring of pediatric patients
- o Anatomical & physiological basis of critical illness in infancy and childhood, Care of child requiring long-term ventilation, Nutritional needs of critically ill child, Legal and ethical issues in pediatric intensive care, Intensive care procedures, equipment and techniques, Documentation.
- Neonatal Sepsis and neonatal hyperbilirubinia

### **Unit V -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.

### **Unit VI - Challenged child and implications for nursing:**

• Physically challenged, causes, features, early detection & management. Cerebral palsied child, mentally challenged child. Training & rehabilitation of challenged children.

### **Unit VII - Crisis and nursing intervention:**

• The hospitalized child, Terminal illness & death during childhood. Nursing intervention-counseling.

### **Unit VIII -Drugs used in Pediatrics:**

- Criteria for dose calculation, Administration of drugs, oxygen and blood.
- Drug interactions, adverse effects and their management.

### Unit IX -Administration and management of pediatric care unit:

• Design & layout, Staffing, Equipment, supplies, Norms, policies and protocols, Practice standards for pediatric care unit Documentation.

### **Unit X - Education and training in Pediatric care:**

• Staff orientation, training and development, In-service education, program, Clinical teaching programs.

#### PRACTICAL:

- Clinical practice in pediatric medical, surgical, cardio thoracic wards, neonatal intensive care unit, labor room, pediatric OPD, immunization, well baby clinic, child guidance clinics, school health centers, community health.
- Clinical participation of a child- per week by each student.
- Field visits: Child care centre, Anganwadi, play school, special schools for challenged children, Juvenile court, UNICEF, Orphanage, Crèche, SOS Village.
- **Procedures to be observed**: Echocardiogram, Ultrasound head, ROP Screening (Retinopathy of prematurity).
- **Procedures to be assisted**: Advanced neonatal life support, Lumbar puncture, Arterial blood gases, ECG recording, Umbilical Catheterization Arterial and venous, Arterial B.P monitoring, Blood transfusion Exchange transfusion full and partial, I.V. cannulation and therapy, arterial catheterization, chest tube insertion, endo tracheal intubation, ventilation, insertion of long line,

### • Procedures to be performed:

**Airway management**- application of oro pharyngeal airway, oxygen therapy, CPAP, care of treacheostomy, endotracheal intubation, Neonatal resuscitation.

**Monitoring of neonate** –Clinically and with monitor, CRT (Capillary refill time), assessment of jaundice, ECG, Gastric Lavage, Setting of Ventilator, Phototherapy.

**Assessment of neonate** – Identification and assessment of risk factors, APGAR score, gestational age, anthropometric assessment, Weighing the baby.

**New born examination**: Detection of life threatening congenital abnormalities, Admission and discharge of neonate in hospital.

**Feeding** – management of breast feeding, artificial feeding, expression of breast milk, Oro gastric tube insertion, Gavage feeding, TPN – total parental nutrition, breast feeding counseling.

**Thermoregulation** – Axillary temperature, kangaroo mother care, use of radium warmer, incubators, management of Thermo regulation and control

Administration of drugs – I.M., I.V. injection, I.V. Cannulation and fixation of infusion pump, calculation of dosages, neonatal formulation of drugs, use of tuberculin/insulin syringe, monitoring fluid therapy, blood administration,

Prevention of infection- hand washing, disinfection and sterilization, surveillance, fumigation.

Collection of Specimen: Collection & sending to laboratory.

**Instruments and Equipments:** Setting, use and maintenance of basic equipments – Ventilators, O<sub>2</sub> analyzer, monitoring equipment, phototherapy unit, pulse meter, infusion pump, radiant warmer, incubators, centrifuge machine, etc..

### CLINICAL SPECIALITY- II

# CHILD HEALTH NURSING (PEDIATRIC NURSING)

Unit		Contents with di	stributed hours	
No. & Hours	<b>Objectives</b>	Must Know	Desirable to Know	Nice to Know
I (5Hrs)	At the end unit the students are able to:  Knowledge: Understand the principles and role of nurse in pediatric care.  Skill: Practice principles of pediatric nursing in clinical setting.  Attitude: Adapts to various roles of pediatric nurse in different settings.	<ul> <li>Introduction:</li> <li>Current principles, practices and trends in Pediatric Nursing.</li> <li>Role of pediatric nurse in various settings – Expanded and extended (5 hrs)</li> </ul>		
II (40Hrs)	At the end unit the students are able to:  Knowledge: Understands and explains the pathopyhsiology and treatment modalities for various systemic diseases in children.  Skill: Renders Competent, comprehensive and culturally congruent care to the children suffering from various systemic diseases.  Attitude: Develops competence in rendering care to children with different levels of dependency and serious nature of disease condition.	Pathophysiology, assessment (including interpretation of various invasive and non-invasive diagnostic procedures) treatment modalities and nursing intervention in selected pediatric medical disorders:  O Child with respiratory disorders: Upper respiratory tract: choanal atresia, tonsillitis, epistaxis, aspiration. Lower respiratory tract: Broncheolitis, Bronchopneumonia, Asthma, cystic fibrosis. (5 hrs)  O Child with gastro-intestinal disorders: Diarrheal diseases, gastro esophageal reflux. Hepatic disorders: Hepatitis, Indian childhood cirrhosis, liver transplantation. Malabsorption syndrome, Malnutrition (5 hrs)  O Child with renal/ urinary tract disorders: Nephrotic syndrome, Nephritis, Hydronephrosis, hemolytic-uremic syndrome, kidney transplantation. (4 hrs)  Child with cardio-vascular disorders: Acquired: Rheumatic fever, Rheumatic heart disease, Congnital: Cynotic and acynotic (5		

III (40Hrs)  At the end unit the students are able to Knowledge: Understand and describe various treatment modalities and nursing care requirements in children requiring surgery on different systems.  Skill: Perform pre-operative assessment and renders pre-operative, intra operative a post operative efficient care to the pediatric clients.  Attitude: Adapts to the needs of children undergoing surgery.	various invasive and non-invasive diagnostic procedures), treatment modalities including cosmetic surgery and nursing interventions in selected pediatric surgical problems/ Disorders:	<ul> <li>Child with oncological disorders: Solid tumors of childhood, Nephroblastoma, Neuro blastoma, Hodgkin's/Non Hodgkin's Lymphoma, Hepatoblastoma, Rhabdomyosarcoma. (5 hrs)</li> </ul>	
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		traumatic injuries: General principles of managing Pediatric trauma. (5 hrs)  Head injury, abdominal injury, poisoning, foreign body obstruction, burns & Bites. (3 Hrs)  Management of stomas, catheters and tubes. (2 Hrs)  Management of wounds and drainages(3hrs)	-		
IV (15Hrs)	At the end unit the students are able to:  Knowledge: Understand and explain the needs of the pediatric clients requiring intensive care.  Skill: Render efficient pediatric intensive care.  Attitude: Identify needs for intensive care among pediatric clients and act promptly.	<ul> <li>Intensive care for pediatric clients:</li> <li>Resuscitation, stabilization &amp; monitoring of pediatric patients (2 hrs)</li> <li>Anatomical &amp; physiological basis of critical illness in infancy and childhood. (3 hrs)</li> <li>Care of child requiring long-term ventilation. (2 hrs)</li> <li>Neonatal Sepsis, Hyperbilirubinia</li> <li>Nutritional needs of critically ill child. (3hrs)</li> </ul>	•	Legal and ethical issues in pediatric intensive care Intensive care procedures, equipment and techniques Documentation (5 hrs)	
V (10Hrs)	At the end unit the students are able to:  Knowledge: Understand developmental disturbances and their implications for pediatric nursing.  Skill: Develop skills in identifying developmental disturbances at the earliest.  Attitude: Guide the parents for corrective therapeutic modalities for developmental disturbances	Developmental disturbances and implications for nursing:  • Learning disabilities (2 hrs)	•	Adjustment reaction to school, (2 hrs) Habit disorders, speech disorders, (2 hrs) Conduct disorders, (2 hrs) Early infantile autism, Attention deficit hyperactive disorders (ADHD),	Depression and childhood schizophrenia     (2 hrs)
	At the end unit the students are able to:  Knowledge: Understand the special needs of the challenged children.  Skill: Cater to the special needs of the challenged children suffering from various diseases.  Attitude: Develop an understanding for the peculiar behavior of the challenged behavior in health &illness.	<ul> <li>Challenged child and implications for nursing:</li> <li>physically challenged, causes, features, early detection &amp; management (4 Hrs)</li> <li>Mentally challenged child. (3 hrs)</li> </ul>	•	Cerebral palsied child, (2 hrs) Training & rehabilitation of challenged children (1 hrs)	
VII	At the end unit the students are able to:	Crisis and nursing intervention:			

(5Hrs)	Knowledge: Understand the nature of crises situations for pediatric clients.  Skill: Recognize the various crises situations and perform promptly and efficiently.  Attitude: Identify means to prevent crises among pediatric population and provide health education to this effect.	<ul> <li>The hospitalized child, (1 hr)</li> <li>Terminal illness &amp; death during childhood. (2 hrs)</li> <li>Nursing intervention-counseling (2 hrs)</li> </ul>				
(5Hrs)	At the end unit the students are able to:  Knowledge: Explain the drugs used in pediatric.  Skill: Administer various medications to pediatric clients correctly and observe for their effects.  Attitude: Educate parents about administration of medication to children of various age groups.	<ul> <li>Drugs used in Pediatrics:</li> <li>Criteria for dose calculation</li> <li>Administration of drugs, oxygen and blood.(2 Hrs)</li> </ul>	ar m	dverse effects nd their nanagement. Hrs)	•	Drug interactions. (1 Hr)
(10Hrs)	At the end unit the students are able to:  Knowledge: Understand different policies, protocols and uses of various equipments in the pediatric wards.  Skill: Practice standards for pediatric care.  Attitude: Plan and design pediatric care unit.	Administration and management of pediatric care unit:  • Staffing.  • Equipment, supplies,  • Practice standards for pediatric care unit  • Documentation.(7 Hrs)	ar	forms, policies and protocols. 2 Hrs)	•	Design & layout. (1 Hr)
(10Hrs)	At the end unit the students are able to:  Knowledge: Understand need for staff orientation and development in pediatric nursing care.  Skill: Plan and implement in-service education programme for staff.  Attitude: Participates in clinical teaching activities.	<ul> <li>Education and training in Pediatric care:</li> <li>Staff orientation, training and development,</li> <li>In-service education program, Clinical teaching programs.(10 Hrs)</li> </ul>				

### AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr. No.	Dept / Unit	No. of weeks	Total hours
4.	Pediatric Medicine ICU	4	120
5.	Pediatric Surgical ICU	4	120
6.	NICU	4	120
7.	Pediatric OT	2	60
8.	Pediatric Medicine Ward	6	180
9.	Pediatric Surgery Ward	6	180
10.	Emergency Casualty	4	120
11.	Field Visits	2	60
	Total	32 weeks	960 hours

**TEACHING STRATEGY:** 

Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

**TEACHING METHOD:** 

Lectures, Seminars, Case presentation & discussion. Clinical observation.

A.V. AIDS:

OHP, LCD, Posters, Blackboard, Demonstration.

### **ASSIGNMENTS:**

### Theory:

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Seminar	Two	1X50	100
Total Marks				

### **Practical:**

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Sr. No.	Assignment	No./Quantity	Marks per	Total
			Assignment	Marks
1	Teaching learning module preparation (Group work)	One	1X25	25
2	Case study	One	1X50	50
3	Case Presentation	Two	1X50	100
4	Nursing Care Plans	Two	1X25	50
5	Speciality Procedure Evaluation (Minimum 2)	Two	1X25	50
6	Specific Day Celebration (Group work)	One	1X25	25
7	Clinical Performance Evaluation	Two	1X100	200
			Total Marks	500

#### **RECOMMENDED BOOKS:**

- Achar ST and Viswanathan -"Text book of Paediatrics; A Clinical Approach"
- Alexander NM, Brown MS; "Paediatric Physical Diagnosis for Nurses"
- Ball- "Paediatric Nursing caring for children"
- Behrman, Richard K & Vaughan-"Nelson,s Textbook of Paediatrics"
- Blake G, Florence & Wright- "Essentials of Paediatric Nursing"
- Barbara EW- "Guidelines in the care of the low birth weight"
- Bowden Greenberg- "Pediatric Nursing Procedure"
- Browder J J- "Nursing care of children" FADavis
- Cameron, Jelinek et al;-"Text Book of Emergency Paediatric Medicine"
- Cloherty, John P & Stark, Ann R-"Manual Neonatal care"
- David Hull & Johnstan D- "Essentials Of Paediatrics"
- Elizabeth Hurlock-"Child Development"
- Ghai O P-"Essential Text Book Of Paediatrics"
- Ghosh Shanti- "Nutrition and child care"

- Ghosh Shanti- "Know your child"
- Gupte Suraj;-"Neonatal Emergencies"
- Gupte Suraj-"A Short Text book of Paediatrics"
- Guha DK-"Neonatology"
- Guha DK- "Manual of Practical newborn Care"
- Hathfield N- "Introductory Paediatric Nursing"
- Helens CL & Roberts- "Paediatric Nursing"
- Khilnany- "Practical approach to Paediatric Intensive Care"
- Kulkarni MC- "Manual of Neonatology"
- Klosner & Nancy Hathfield-"Introductory Maternity and Paediatric Nursing"
- Merenstein & Gardner-"Handbook of neonatal intensive care"
- Mcmillan, Fergin et al;-" Oski's Paediatrics-Principle & practice"
- Marlow Dorothy -"Textbook of Paediatric Nursing"
- Parthasarthy et al- "IAP Textbook of Paediatrics"
- Park's "Text book of Preventive and Social medicine"
- Roberts KD Edwards JM- "Paediatric Intensive Care"
- Richard Polin-"Pediatric Secrets"
- Selekman- "Pediatric Nursing"
- Singh Meherban; "Care of Newborn"
- Singh Meherban; "Drugs Used in Children"
- Slota; "Core curriculum for Paediatric Critical Care Nursing"
- Speer; "Pediatric Care planning"
- Vidhyasagar & Sarnaik; "Neonatal & Paediatric Intensive Care"
- Wagle CS; "Short Text Book of Paediatrics" Vohra Book Centre,
- Whaley & Wong; "Nursing care of Infants and Children"
- Whaley, Lucilla F Donna L; "Essentials of Pediatric Nursing"
- Udani RH; "Neonatal Resuscitation"

## Subject No.2 CLINICAL SPECIALITY- II

### MEDICAL SURGICAL NURSING

### SUB SPECIALITY- CARDIO VASCULAR AND THORACIC NURSING

Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

### AIM:

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 students 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 are able to:

- Appreciate trends and issues related to cardio vascular and thoracic nursing.
- Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of cardio vascular and thoracic conditions.
- Participate in national health programs for health promotion, prevention and rehabilitation of patients with cardio vascular and thoracic conditions.
- Perform physical, psychosocial and spiritual assessment.
- Assist in various diagnostic, therapeutic and surgical procedures.
- Apply nursing process in providing compressive care to patients with cardio vascular conditions.
- Demonstrate advance skills /competence in managing patients with cardio vascular condition and thoracic conditions including advanced thoracic life support.
- · Describe the various drugs used in cardio vascular and thoracic conditions and nurses responsibility.
- Demonstrate skill in handling various equipments/ gadgets used for critical care of cardiovascular and thoracic patients.
- Appreciate team work and coordinate activities related to patient care.
- Practice infection control measures.
- Identify emergencies and complications and take appropriate measures.
- Discuss the legal and ethical issues in cardiovascular and thoracic nursing.
- Assist patients and their families to cope with emotional stress, grief, anxiety and spiritual needs.
- Appreciate the role of alternative system of medicine in care of patients.
- Incorporate evidence based nursing practice and identify the areas of research in the field of cardiovascular and thoracic nursing.
- Identify the source of stress and manage burnout syndrome among health care providers.
- Teach and supervise nurses and allied health workers.
- Design a layout of ICCU and ICTU and develop; standards for cardiovascular and thoracic nursing practice.

### **CONTENTS:**

### **Unit I -Introduction**:

- Historical development, trends and issues in the field of cardiology. Cardiovascular and thoracic conditions major health problem. Concepts, principles and nursing perspectives. Ethical and legal issues.
- Evidence based nursing and its application in cardio vascular and thoracic nursing.

### Unit II -Epidemiology:

- Risk factors: Heredity, psychosocial factors, hypertension, smoking, obesity, D.M., etc.
- Health promotion, disease prevention, life style modification. National health programme related to cardio vascular and thoracic conditions. Alternate system of medicine. Complementary therapies.

### Unit III -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. Hemodynamic and electro physiology of the heart. Biochemistry of blood in relation to cardio pulmonary function.

• History taking. Physical assessment: Heart rate variability: Mechanism, measurements, pattern, factors, impact of interventions on HRV.

### • Diagnostic Tests:

- o Hemodynamic monitoring: technical aspects, monitoring, functional hemodynamic indices, and ventricular function indices, output measurements (Arterial and Swan Ganz monitoring). Blood gases and its significance, oxygen supply and demand.
- o Radiologic examination of the chest: interpretation, chest film findings.
- o Electrocardiography (ECG): Electrical conduction to the heart, basic electro cardio graph, 12 lead electrocardiogram, axis determination.
- o ECG Changes in: Intra ventricular conduction abnormalities- Arrhythmias, ischemias, injury and infarction, atrial and ventricular enlargement, electrolyte imbalance.
- o Electrocardiography: Technical aspects, special techniques, echocardiography of cardiac structures in health and disease, newer techniques.
- o Nuclear and other imaging studies of the heart; magnetic resonance imaging.
- o Cardio electro physiology procedures: Diagnostic studies, interventional and catheter ablation nursing care.
- o Exercise testing; indication and objectives, safety and personnel, pre test considerations, selection, interpretation, tests termination, recovery period.
- o Cardiac catheterization: indications, contraindications, patient preparation, procedure, interpretation of data.
- o Pulmonary function test: Broncho scopy and graphies.
- o Interpretation of diagnostic measures.
- o Nurses 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 chemistry, cardiac enzymes studies, serum concentration of selected drugs. Interpretation and role of nurse.

### Unit V -Cardiac disorders and nursing management:

• Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology and nursing management of: 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, myocardirtis, pericarditis, Cardio myopathy, dilated, restrictive, hypertrophic, Arrhythmias, heart block. Associated illnesses.

### **Unit VI -Altered pulmonary conditions:**

- Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology and nursing management of:
- o Bronchiela asthma, Bronchiectiasis, Pneumonias, Lung Abscess, lung tumour, pulmonary tuberculosis, fibrosis, pneumo coniosisi, etc., Pleuritis, effusion.
  - Pneumo, haemo and pyothorax, Intestial lung disease, Acute and chronic obstructive pulmonary disease (conditions leading to), Corpulmonale, Acute respiratory failure, Adult respiratory distress syndrome, pulmonary embolism, pulmonary hypertension.

### **Unit VII -Vascular disorders and nursing management:**

- Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology and nursing management of
- o Disorders of arteries, Disorders of aorta, Aortic annurisms, Aortic distruction, Raynaud's phenomenon, Periferial arterial disease of the lower extremities.

Venous thrambosisi, Vericose veins, chronic venous insufficiency and venous leg ulcers, pulmonary embolism.

### **Unit VIII - Cardiothoracic emergency interventions:**

• CPR- BLS and ALS. Use of ventilators, de febrilators, pacemaker. Post resuscitating care. Care of the critically ill patients. Psycho social and spiritual aspects of care. Stress management; ICU psychosis.

### **Unit IX -Nursing care of patient with obstructive air way:**

- Assessment. Use of artificial air way. Endo tracheal intubation, treacheostomy and its care. Complications, minimum cuff leak, securing tubes. Oxygen delivery systems: Nasal cannula, Oxygen mask, Venturi mask, Partial re breathing bag. Bi –PAP and C- PAP masks. Uses, advantages, disadvantages, nursing implication of each.
- Mechanical Ventilation: Principles of mechanical ventilation, Types of mechanical ventilation and ventilators, Modes of ventilation, advantage, disadvantage, complication, PEEP therapy, indications, physiology and complication, Weaning off the ventilators, Nursing assessment and interventions of ventilated patients.

### **Unit X - Congenital Heart Diseases:**

• Etiology, clinical manifestations, diagnosis, prognosis, related patho physiology and nursing management of: Embrylogical development of heart. Classification – Cyniotic and acynotic heart disease.

Tetralogyof fallots, Atrial Septal defects, Ventricular septal defect, Eisenmenger's comples, Patent Ductus
arteriosis, AP window, truncus arteriosis, 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.

### Unit XI -Review: Pharmacology:

- o Pharmacokinetics, Analgesics/anti inflammatory agents, Antibiotics, antiseptics, Drug reaction and toxicity, Drug used in cardiac emergencies. Blood and Blood components Anti thrombolytic agents, Inotropic agents, beta blocking agents, calcium channel blockers, vasoconstrictors, vasodilators, ACE inhibitors, Anti coagulants, anti arrhythmic drugs, antihypertensive, Diuretics, Sedatives and tranquilizers, digitalis, antilipemics.
- Principles of drug administration, role and responsibilities of nurses and care of drugs.

### Unit XII -Nursing Care of Patient undergoing thoracic surgery:

- Indications, selection of patients. Preoperative assessment and preparation, counseling. Intra operative care: Principles of open heart surgery, equipments and anaesthesia, cardiopulmonary bypass. 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, tumor excision, etc. Immediate post operative care; Assessment, post operative problems and interventions: bleeding, cardiac tamponade low cardiac output, infarction, pericardia effusion, pleural effucion, Pneumothorax, haemothorax, Coagulopathy, Thermal imbalance, Inadequate ventilation/perfusion, neurological problems,renal problems, psychological problems. Chest physiotherapy. Nursing interventions, complimentary therapies/alternative systems of medicine.
- Intermediate and late post operative care after CABG, valve surgery, others. Follow up care.

#### **Unit XIII - Cardiac Rehabilitation:**

• Process, Physical evaluation, Physical conditioning for cardio vascular efficiency through exercise, Counseling, Follow up care.

### Unit XIV -Intensive Coronary Care Unit/Intensive cardio thoracic Unit:

- Quality Assurance:
- Standard, protocols, policies, procedures, Infusion control: standard safety measures.
   Nursing audit, Design of ICCU/OCTU, Staffing, Cardiac team, Burnout syndrome. Nurses role in the management of ICCU and ICTU. Mobile coronary care unit,
- Planning in service educational programmes and teaching.

### **PRACTICAL:**

- Clinical practice in medical surgical nursing cardio thoracic ward, intensive care units, cardio thoracic OPD, community preventive cardiology and operation theatre.
- Essential Nursing Skills:
- **Procedures to be observed:** Echo cardiogram, Ultrasound, Monitoring JVP, CVP, CT Scan, MRI, Per Scan, Angiography, Cardiac Catheterization, Angioplasty, Various surgeries.
- **Procedures to be Assisted:** Arterial blood gas analysis, Thoracentesis, Lung biopsy, CT scan, MRI, Pulmonary angiography, Bronchoscopy, Pulmonary function test, ET tube insertion, Trachesostomy tube insertion, Cardiac catheterization, angiogram, Defribillation, Treadmill test, Eco Cardiography, Doppler ultrasound, Cardiac surgery, Insertion of chest tube, CUP monitory, measuring pulmonary artery pressure by Swan-Ganz catheter, Cardiac pacing.
- **Procedures to be performed:** Preparation of assessment toll for cardiac, thoracic and vascular client. ECG Recording, Reading, Identification of abnormalities. Oxygen therapy- Cylinder, Central supply, catheter, nasal canula, mask, tend, Through ET and tracheostomy tube, manual resuscitation bag. Mechanical Ventilators, spirometer, Tuberculin skin test, Aerosal therapy, Neubilization, water seal drainage, chest physiotherapy including breathing exercises, coughing exercises., percution and vibration, Suctioning Oropharyngeal, nasotracheal, endotracheal, through tracheostomy tube. Artificial airway cuff maintenance. CPR. Care of client on ventilators. Identification of different arrhythmias, abnormal pulse, respiration, B.P. variations, heart sounds, breath sounds. Pulse oxymetery. Introduction of intracath. Bolus I.v. injection, life line. Maintenance of 'Heplock'. Subcutaneous Heparin injection. Obtaining leg measurements to detect early swelling in thrombophlebitis. Identification of Homans signs. Buergen Allen exercises.

### CLINICAL SPECIALITY II

### MEDICAL SURGICAL NURSING

### SUB SPECIALITY - CARDIO VASCULAR AND THORACIC NURSING

Unit No.	Objectives	Co	ontents	
& Hours		Must Know	Desirable to know	Nice to know
I (5Hrs)	At the end of unit students are able to:  Knowledge: Know the historical development, trends and issues related to CVTS nursing.  Skill: Identify major and render care to client.  Attitude: Provide evidence based nursing care to clients.	<ul> <li>Introduction:</li> <li>Cardiovascular and thoracic conditions – major health problem. Concepts, principles and nursing perspectives. Evidence based nursing and its application in cardio vascular and thoracic nursing. (3 Hrs)</li> </ul>	• Ethical and legal issues. (1 Hr)	Historical development, trends and issues in the field of cardiology.     (1 Hr)
II (5Hrs)	At the end of unit students are able to:  Knowledge: Understand and Identify risk factors associated with cardiovascular problems.  Skill: Educate & motivate people in modifying their life style & promoting their health.  Attitude: Contribute in National Health programme.	<ul> <li>Epidemiology:         <ul> <li>Risk factors: Heredity, psychosocial factors, hypertension, smoking, obesity, D.M., etc.</li> <li>Health promotion, disease prevention, life style modification.</li> </ul> </li> <li>National health programme related to cardio vascular and thoracic conditions.(4 Hrs)</li> </ul>		<ul> <li>Alternate system of medicine.</li> <li>Complementary therapies. (1 Hr)</li> </ul>
III (5Hrs)	At the end of unit students are able to:  Knowledge: Explain anatomy and physiology of cardiovascular and respiratory system.  Skill: Assess the cardiopulmonary function based on the blood biochemistry.  Attitude: Appreciate other conditions altering cardiopulmonary functions.	Review of Anatomy and Physiology of cardio vascular and respiratory system:  Coronary circulation.  Hemodynamic and electro physiology of the heart. Biochemistry of blood in relation to cardio pulmonary function.(3 Hrs)	• Review of anatomy and physiology of heart, lung, thoracic cavity and blood vessels.  (1 Hr)	• Embryology of heart and lung. (1 Hr)
IV (20Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain importance of history taking and other diagnostic tests in confirming diagnosis of cardiovascular conditions.  Skill: Collect samples for various tests correctly and assist in conducting diagnostic tests.  Attitude: Recognize the apprehension of client	Assessment and Diagnostic measures:     History taking and Physical assessment:     Heart rate variability: Mechanism,     measurements, pattern, factors, impact of     interventions on HRV.     Diagnostic Tests: Hemodynamic     monitoring: monitoring, functional     hemodynamic indices, and ventricular     function indices, Blood gases and its     significance, oxygen supply and demand.     Electrocardiography (ECG): Electrical     conduction to the heart, basic electro cardio	Assessment and Diagnostic measures:  Output measurements (Arterial and Swan Ganz monitoring). Radiologic examination of the chest: interpretation, chest film findings.	Assessment and Diagnostic measures:  • Hemodynamic monitoring: technical aspects.  • Nuclear and other imaging studies of the heart; magnetic resonance imaging(3Hrs)

	and relatives undergoing various tests and educate and prepare both for the tests and results of the tests.	graph, 12 lead electrocardiogram, axis determination. ECG Changes in: Intra ventricular conduction abnormalities-Arrhythmias, ischemias, injury and infarction, atrial and ventricular enlargement, electrolyte imbalance. Electrocardiography: Technical aspects, special techniques, echocardiography of cardiac structures in health and disease, newer techniques. Cardio electro physiology procedures: Diagnostic studies, interventional and catheter ablation nursing care. Exercise testing; indication and objectives, safety and personnel, pre test considerations, selection, interpretation, tests termination, recovery period. Cardiac catheterization: indications, contraindications, patient preparation, And procedure. (12 Hrs) Pulmonary function test: Broncho scopy and graphies. Nurses 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 chemistry, cardiac enzymes studies, Interpretation and role of nurse.	<ul> <li>Cardiac catheterization: interpretation of data.</li> <li>Interpretation of diagnostic measures.</li> <li>Serum concentration of selected drugs. (5 Hrs)</li> </ul>	
V (25Hrs)	At the end of unit students are able to:  Knowledge: Discuss the etiology, clinical manifestation, pathophysiology and management of cardiovascular conditions.  Skill: Demonstrate competence in interpret ting test results and management of client. Attitude: Appreciate client's problems with various cardiovascular conditions and provide nursing care accordingly.	Cardiac disorders and nursing management: Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology and nursing management of: Coronary artery disease. Angina of various types. Cardiomegaly. CCF. Myocardial infarction, Heart failure, pulmonary edema, shock. Rheumatic heart disease and other valvular diseases. Arrhythmias, heart block. Associated illnesses. (20 Hrs)	Cardiac disorders and nursing management: Inflammatory heart diseases, infective endocarditis, myocardirtis, pericarditis. Cardio myopathy, dilated, restrictive, hypertrophic. (5 Hrs)	

VI (10Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain the etiology, clinical manifestation, pathophysiology and management of pulmonary conditions and its association & impact on cardiovascular conditions.  Skill: Recognize association of pulmonary problem with cardiovascular condition and demonstrate confidence and competence while caring such clients.  Attitude: Know the health need of the client having cardiovascular problem in association of pulmonary problems and provide need based quality care.	Altered pulmonary conditions:  • Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology and nursing management of: Bronchitis.  Bronchieal asthma. Bronchiectiasis. Pneumonias. Lung Abscess. Pulmonary tuberculosis, fibrosis, pneumoconiosis, etc. Pleuritis, effusion. Pneumo, haemo and pyothorax. Intestial lung disease. Acute and chronic obstructive pulmonary disease (conditions leading to) Corpulmonale.  Acute respiratory failure. Adult respiratory distress syndrome. Pulmonary embolism. Pulmonary hypertension. (9 Hrs)		Altered pulmonary conditions:  o Lung tumor.  (1 Hr)
VII (10Hrs)	At the end of unit students are able to:  Knowledge: Differentiate various vascular conditions from cardiac problems, its association with each other and impact on patient's prognosis and health needs.  Skill: Identify vascular conditions and recognizing health needs of the client and render nursing services based on the needs of the client.  Attitude: Educate the client about disease condition, limitations in life and motivate them for minimizing complications.	Vascular disorders and nursing management:  • Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology and nursing management of: Disorders of arteries. Disorders of aorta. Aortic aneurisms. Aortic destruction. Peripheral arterial disease of the lower extremities. Venous thrombosis. Varicose veins. Chronic venous insufficiency and venous leg ulcers. Pulmonary embolism. (9 Hrs)	Vascular disorders and nursing management: • Reynaud's phenomenon. (1 Hr)	
VIII (10Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain treatment modalities in cardiovascular emergencies.  Skill: Handle cardiac emergencies promptly and confidently, contribute in reducing disease specific mortality rate.  Attitude: Be accountable for decisions taken while handling cardiac emergencies.	<ul> <li>Cardiothoracic emergency interventions:</li> <li>CPR- BLS and ALS, Use of ventilators, defibrillations, pace maker.</li> <li>Post resuscitating care, Care of the critically ill patients, Psycho social and spiritual aspects of care, Stress management. (9 Hrs)</li> </ul>	Cardiothoracic emergency interventions:  o ICU psychosis. (1 Hr)	

IX (10Hrs)	At the end of unit students are able to:  Knowledge: Discuss various obstructive air way conditions, its clinical manifestations and nursing management.  Skill: Handle various mechanical devises used for client with obstructive air way disease and make the client comfortable without or minimize complications.  Attitude: Appreciate the apprehension of client and family members while putting on support system for client with obstructive air way conditions.	Nursing care of patient with obstructive air way: Assessment. Use of artificial air way. Endo tracheal intubation, treacheostomy and its care. Complications, minimum cuff leak, securing tubes. Oxygen delivery systems: Nasal cannula, Oxygen mask, Venturi mask, Partial re breathing bag. Bi –PAP and C- PAP masks, Uses, advantages, disadvantages, nursing implication of each. Mechanical Ventilation: Principles of mechanical ventilation. Modes of ventilation, advantage, disadvantage, complication. Weaning off the ventilators. Nursing assessment and interventions of ventilated patients. (8 Hrs)	Nursing care of patient with obstructive air way:  • Types of mechanical ventilation and ventilators.  • PEEP therapy, indications, physiology and complication. (2 Hrs)	
X (10Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain the etiology, pathophysiology, diagnosis, treatment modalities and prognosis of client with congenital heart diseases.  Skill: Incorporate knowledge of pediatric nursing while providing quality care.  Attitude: Involve parents and family members in nursing care of children having congenital heart diseases.	Congenital Heart Diseases:  • Etiology, clinical manifestations, diagnosis, prognosis, related patho physiology and nursing management of: Classification – Cyniotic and acynotic heart disease. Atrial Septal defects, Ventricular septal defect, Eisenmenger's comples.  Patent Ductus arteriosis, AP window, and truncus arteriosis. Pulmonary stenosis, atresia. Coarctation of aorta. (5 Hrs)	Congenital Heart Diseases: Tetra logy of fallots. Transposition of great arteries. Total anomaly of pulmonary venous connection. Ebstein's anomaly. (3 Hrs)	Congenital Heart Diseases:  • Embrylogical development of heart.  • Double outlet right ventricle, Single ventricle, hypoplastic left heart syndrome. (2 Hrs)
XI (10Hrs)	At the end of unit students are able to:  Knowledge: Illustrate various drugs used in cardiovascular condition along with its effects, side effects and adverse effects.  Skill: Evaluate the condition of patient for the desired effects, side effects and adverse effects of prescribed drugs and calculate the dosages & administer drugs accurately.  Attitude: Follow the principles of drug administration and educate client & family members about importance of following prescribed regime and observing and reporting probable side effects of drugs.	Review: Pharmacology. Pharmacokinetics. Analgesics/anti inflammatory agents. Antibiotics, antiseptics. Drug used in cardiac emergencies. Blood and Blood components, , beta blocking agents, calcium channel blockers, vasoconstrictors, vasodilators, ACE inhibitors, Anti coagulants, anti arrhythmic drugs, antihypertensive, Diuretics, Sedatives and tranquilizers, digitalis, anti Principles of drug administration, role and responsibilities of nurses and care of drugs. (7 Hrs)	Review:  • Pharmacology:  • Drug reaction and toxicity.  • Lipemics.  • Anti thrombolytic agents, Inotropic agents. (3 Hrs)	

XII (20Hrs)	At the end of unit students are able to:  Knowledge: Understand and discuss various surgical modalities of management.  Skill: Render quality care to the client during preoperative, intra operative and post operative period.  Attitude: Recognize the importance of team work in dealing with cardiovascular and thoracic conditions.	Nursing Care of Patient undergoing thoracic surgery: ndications, selection of patients. Preoperative assessment and preparation, counseling. Intra operative care: Principles of open heart surgery, equipments and anesthesia, cardiopulmonary bypass. pneumonectomy, tumor excision, etc. Immediate post operative care, Assessment, post operative problems and interventions: bleeding, cardiac tamponade low cardiac output, infarction, pericardia effusion, pleural effucion, Pneumothorax, haemothorax, Coagulopathy, Thermal imbalance, inadequate ventilation/perfusion, neurological problems, renal problems, psychological problems. Chest physiotherapy. Nursing interventions, complimentary therapies/alternative systems of medicine. Intermediate and late post operative care after CABG, valve surgery, others. Follow up care. (14 Hrs)	Nursing Care of Patient undergoing thoracic surgery: 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. (6 Hrs)	
XIII (5Hrs)	At the end of unit students are able to:  Knowledge: Discuss the life style modifications and rehabilitation process of client.  Skill: Participate effectively and efficiently in rehabilitation of client.  Attitude: Educate and motivate client and family members to understand the process of rehabilitation & to cooperate.	<ul> <li>Cardiac Rehabilitation:</li> <li>Process.</li> <li>Counseling.</li> <li>Follow up care. (3 Hrs)</li> </ul>	<ul> <li>Cardiac Rehabilitation: Physical evaluation.</li> <li>Physical conditioning for cardio vascular efficiency through exercise. (2 Hrs)</li> </ul>	
XIV (5Hrs)	At the end of unit students are able to:  Knowledge: Know the ideal design of cardiovascular & thoracic unit and its importance in rendering quality services.  Skill: Identify learning needs of staff working in the unit, plan and implement in service educational programmers. Conduct nursing audit & strive for improving quality of care.  Attitude: Identify the problems of staff, help them to overcome the burn out syndrome and maintains cordial interpersonal relationship in the unit.	<ul> <li>Intensive Coronary Care Unit/Intensive cardio thoracic Unit:</li> <li>Quality Assurance – Standard, protocols, policies, procedures. Infusion control: standard safety measures. Nursing audit. Staffing, Cardiac team. Burnout syndrome.</li> <li>Nurses role in the management of ICCU and ICTU. Mobile coronary care unit,</li> <li>Planning in service educational programmes and teaching. (4 Hrs)</li> </ul>		Intensive Coronary Care Unit/Intensive cardio thoracic Unit:  O Design of ICCU/OCTU. (1 Hr)

#### AREA ANDDISTRIBUTION OF CLINICAL HOURS:

Sr. No.	Dept / Unit	No. of weeks	Total hours
1	Medical Cardiothoracic unit	4	120
2	Surgical cardiothoracic unit	4	120
3	Cardiothoracic Operation theatre	4	120
4	Casualty	2	60
5	Diagnostic lab. Including cath lab.	2	60
6	ICCU	4	120
7	ICU	4	120
8	CCU	4	120
9	Pediatric Intensive Care Unit	2	60
10	OPD	2	60
	Total	32 weeks	960

**TEACHING STRATEGY:** Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

**TEACHING METHOD:** Lectures, Seminars, Case presentation & discussion, Clinical observation.

A.V. AIDS: OHP, LCD, Posters, Blackboard, Demonstration.

### **ASSIGNMENTS: Theory:**

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Seminar	Two	1X50	100
			Total Marks	100

### **Practical:**

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Teaching learning module preparation (Group work)	One	1X25	25
2	Case study	One	1X50	50
3	Case Presentation	Two	1X50	100
4	Nursing Care Plans	Two	1X25	50
5	Speciality Drugs Study (Minimum 20 drugs)	One	1X25	25
6	Speciality Procedure Evaluation	Two	1X25	50
7	Clinical Performance Evaluation	Two	1X100	200
		•	Total Marks	500

### **RECOMMENDED BOOKS:**

- Text Book of Medical Surgical Nursing Brunner and Suddarth.
- Medical Surgical Nursing Clinical Positive Out Joyce and Black.
- Medical Surgical Assessment and Management of clinical problems Lewis, Colliner.
- Medical Surgical Nursing A psychopathologic approach- Luckmann and Sorenson.
- Medical Surgical Nursing A Nursing Process Approach.
- Medical Surgical Nursing B.T. Basvanthappa.
- Medical Surgical Nursing an integrated approach Write L. and Delmar.
- Moroneys Surgery for Nurses Colmer.
- API Text Book Medicine- Shah N.S.
- Pharmacology and Pharmacotherapeutics Satoskat and Bhandarkar.
- Fundamentals of Operation Theatre Services Datta T.K.
- Fundamentals of orthopedics Maheshwari.
- Illustrated Textbook of Dermatology Parischa J.S., Gupta.
- Davidson principles and practice of Medicine.
- The Lippincott Manual of Nursing Practice Nettina, Sandra.

### Subject No.2

### CLINICAL SPECIALITY II

### MEDICAL SURGICAL NURSING

SUB SPECIALITY - NEUROSCIENCES NURSING
Total: 1100 Hours Theory: 150 Hours Practical: 950 Hours

AIM:

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 students 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:

- Appreciate trends and issues related to neurology and neurosurgical Nursing.
- Review the anatomy and physiology of nervous system.
- Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of patients with neurological and neurosurgical disorders.
- Perform neurological assessment and assist in diagnostic procedures.
- Describe the concepts and principles of neuroscience nursing.
- Describe the various drugs\_ used in neurosciences and nurses responsibility.
- Assist in various therapeutic and surgical procedures in neuroscience nursing.
- Demonstrate advance skills/competence in managing patients with neurological and neurosurgical disorder following nursing process approach.
- Identify psychosocial problems of patients with disabilities and assist patients and their family to cope with emotional distress, spiritual, grief and anxiety.
- Participate in preventive, promotive and rehabilitative services for neurological and neurosurgical patients.
- Explain the legal and ethical issues related to brain death, organ transplantation and practice of neuroscience nursing.
- Incorporate evidence based nursing practice and identify the areas of research in the field of neuroscience nursing.
- Organize and conduct in service education program for nursing personnel.
- Develop standards of care for quality assurance in neuroscience nursing practice.
- Identify the sources of stress and manage burnout syndrome among health care providers.
- Teach and supervise nurses and allied health workers.
- Plan and develop physical layout of neuro intensive care unit.

### **CONTENTS:**

#### **Unit I -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 -
- o Concepts, principles and nursing perspectives.
- Ethical and legal issues.
- Evidence based nursing and its application in neurological and neurosurgical nursing.

### **Unit II -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.

### Unit III -Review of Anatomy and physiology:

• Embryology. Structure and functions of Nervous system - CNS, ANS, cerebral circulation cranial and spinal nerves and reflexes, motor and sensory functions. Sensory organs.

### **Unit IV -Assessment and diagnostic measures:**

- Assessment. History taking .Physical assessment, psychosocial assessment. Neurological assessments, Glasgow coma scale interpretations, & 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 role in diagnostic tests.

### Unit V -Meeting Nutritional needs of neurological patients:

Basic nutritional requirements. Metabolic changes following injury and starvation. Nutritional assessment.
 Common neurological problems that interfere with nutrition and strategies for meeting their nutritional needs. Special metabolic and electrolyte imbalances. Chronic fatigue syndrome.

### Unit VI -Drugs and in neurological and neurosurgical disorders:

Classification. Indications, contraindications, actions and effects, toxic effects. Role of nurse.

#### **Unit VII - Traumatic conditions:**

 Causes, pathophysiology, Clinical types, Clinical features, and diagnosis, Prognosis, Management: medical, surgical and Nursing management of: Cranio cerebral injuries, Spinal & Spinal cord injuries, Peripheral nerve injuries. Unconsciousness

### **Unit VIII - Cerebro vascular disorders:**

Causes, pathophysiology, Clinical types, Clinical features diagnosis, Prognosis, Management: medical, surgical and Nursing management of: Stroke & arteria 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

### **Unit IX -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. Alzheimer's.

### **Unit X -Neuro infections:**

 Causes, pathophysiology, Clinical types, Clinical features, and diagnostic, Prognosis Management: medical, surgical and Nursing management of Neuro infections: Meningitis-types, Encephalitis, Poliomyelitis, Parasitic infections, Bacterial infections, Neurosyphilis. HIV & AIDS.

### Unit XI -Paroxysmal disorders:

• Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of: Epilepsy and seizures, Status epileptics, Syncope, Menier's syndrome. Cephalgia.

### **Unit XII -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

### **Unit XIII -Neuro muscular disorders:**

• Causes, pathophysiology, Clinical types, Clinical features,: diagnostic, Prognosis Management: medical, surgical and Nursing management of:

Polymorphis C. P. Syndrome, Muscular dustrophy, Muschania gravia, Tricominal neurolaia, Polymorphy, Prognosis, Prognosis,

Polyneuritis - G B Syndrome., Muscular dystrophy, Myasthenia gravis, Trigeminal neuralgia, Bell's palsy, Menier's disease, Carpal tunnel syndrome. Peripheral neuropathies

### **Unit XIV -Neoplasms – surgical conditions:**

• Causes, pathophysiology, Clinical types, Clinical features, and diagnostic, Prognosis Management: medical, surgical and Nursing management of: Space occupying lesions –types, Cornmon rumors of CNS.

### **Unit XV -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 XVI -Neuro emergencies:**

• Causes, pathophysiology, Clinical types, Clinical feature diagnostic, Prognosis Management: medical, surgical and Nursing management Of: Increased intracranial pressure, Unconscious, Herniation syndrome, Seizures, Severe head injuries, Spinal injuries. Cerebro vascular accidents

### **Unit XVII -Rehabilitation:**

Concept and Principles of Rehabilitation. Rehabilitation in acute care setting, and following stroke, head
injury and degenerative disorders of brain. Physiotherapy. Counseling. Speech & Language: Neurogenic
communication disorders.

### **Unit XVIII -Ethical and legal issues in neuroscience nursing:**

• Brain death and organ transplantation. Euthanasia Negligence and malpractice Nosocomial infections.

### **Unit XIX -Quality assurance in neurolgical nursing practice:**

- Role of advance practitioner in neurological nursing. Professional practice standards. Quality control in neurologic nursing. Nursing audit.
- Neuro ICU: Philosophy, aims and objectives, Policies, staffing pattern, design and physical plan of Neuro ICU, Team approach, functions, Psychosocial aspects in relation to staff and clients of Neuro ICU,
- In-service education.

### PRACTICALS: ESSENTIAL NEURO NURSING SKILLS

- **Procedures to be observed:** CT scan, USG, MRI, PET, EEG, EMG, Sleep pattern studies/Therapy, Radiographical studies, Neuro surgeries, Nerve conduction studies.
- Procedures to be assisted: Advanced Cardiac Life Support, Lumbar Puncture, Biopsies –
  Muscle, Nerve and Brain, Arterial Blood Gases, ECG Recording, Blood Transfusion, I.V.
  Cannulation open method, Endotracheal intubation, Ventilation, Tracheostomy, ICP monitoring, Gama Knife, Cerebral angiography, Myelography, Neuro surgeries.
- Procedures to be management and care of monitors performed: Airway management, Application of Oro Pharyngeal Airway, Care of Tracheostomy, Conduct Endotracheal Intubation, Use of AMBU bag, artificial respirators, Setting of Ventilators and Care of patients on ventilators, Cardio Pulmonary Resuscitation –Defibrillation, Neurological assessment -Glasgow coma scale, Gastric Lavage, IV Cannulation, Administration of emergency IV Drugs & fluids, Care of patients 'with incontinence, bladder training, Catheterization, Care of patients on traction related to the neurological conditions, Blood Administration, Muscle strengthening exercises, Guidance and counseling, Monitoring-

### CLINICAL SPECIALITY II

### MEDICAL SURGICAL NURSING

### SUB SPECIALITY – NEUROSCIENCES NURSING

Unit No.	<b>Objectives</b>	c	ontents	
& Hrs.		Must know	Desirable to Know	Nice to Know
I (5 Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain the principles, and concepts of neurosurgical problems and their nursing care.  Skill: Practice the principles of nursing for neurosurgical clients.  Attitude: Appreciate emerging trends and issues in neurology and neurosurgery and their application to nursing.	<ul> <li>Introduction:         <ul> <li>Introduction to neuroscience (neurological and neurosurgical) nursing.</li> <li>Neurological and neurosurgical problems -</li> <li>Concepts, principles and nursing perspectives.</li> </ul> </li> <li>Evidence based nursing and its application in neurological and neurosurgical nursing. (3 hr)</li> </ul>	<ul> <li>History-Development in neurological and neurosurgical nursing, Service &amp; education.</li> <li>Ethical and legal issues. (1 hr)</li> </ul>	Emerging trends     and issues in     neurology and     neurosurgery and its     implication to     nursing. (1 hr)
II (5 Hrs)	At the end of unit students are able to:  Knowledge: Describe major health problems related to neurology and risk factors associated with them.  Skill: Practice the principles of nursing for neurosurgical clients.  Attitude: Appreciate emerging trends and issues in neurology and neurosurgery and their application to nursing.	<ul> <li>Epidemiology:</li> <li>Major health problems.</li> <li>Risk factors associated with neurological conditions - Hereditary, Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic considerations, occupational and infections.</li> <li>Health promotion, disease prevention, life style modification and its implications to nursing. (4 hrs)</li> </ul>	Alternate system of medicine and complementary therapies. (1 hr)	
III (10 Hrs)	At the end of unit students are able to:  Knowledge: Understand anatomy and physiology of nervous system and sensory organs.  Skill: Identify the organs included in nervous system and sensory organs and appreciate their functional roles.  Attitude: Illustrate the embryonic development of nervous system.	<ul> <li>Review of Anatomy and physiology:</li> <li>Structure and functions of Nervous system - CNS, ANS, cerebral circulation cranial and spinal nerves and reflexes, motor and sensory functions.</li> <li>Sensory organs.(8 hrs)</li> </ul>	• Embryology (2 hrs)	
IV (15 Hrs)	At the end of unit students are able to:  Knowledge: Understand various diagnostic measures for neurological problems.  Skill: Prepare clients for neurological assessment and performs general neurological assessment.	Assessment and diagnostic measures:  • Physical assessment, psychosocial assessment.  • Neurological assessments, Glasgow coma	<ul><li>Assessment.</li><li>History taking. (1 hr)</li></ul>	• Interpretation of diagnostic measures. (1 hr)

	Attitude: Interpret results of diagnostic tests in neurological conditions.	scale interpretations, & its relevance to nursing.  Common assessment abnormalities. (3 hrs)  Diagnostic measures:  Cerebrospinal 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.  Electrographic studies-Electroencephalography, MEG, EMG, and 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.  Nurse's role in diagnostic tests.(10hrs)		
V		<ul> <li>Meeting Nutritional needs of neurological patients:</li> <li>Metabolic changes following injury and starvation.</li> <li>Common neurological problems that interfere with nutrition and strategies for meeting their nutritional needs.</li> <li>Special metabolic and electrolyte imbalances.</li> <li>Chronic fatigue syndrome. (3 hrs)</li> </ul>	<ul> <li>Basic nutritional requirements.</li> <li>Nutritional assessment. (2 hrs)</li> </ul>	
VI (5 Hrs)	At the end of unit students are able to:  Knowledge: Describe various drugs used in neurological conditions.  Skill: Administer correctly all prescribed medications in all clinical settings.	Drugs and in neurological and neurosurgical disorders:  Classification.  Indications, contraindications, actions and effects, toxic effects.		

	<b>Attitude:</b> Monitor clients for adverse effects of medications and report promptly.	• Role of nurse. (5 hrs)			
VII (10 Hrs)	At the end of unit students are able to:  Knowledge: Understand neurological implications of trauma.  Skill: Identify neurological problems of patients who encountered trauma & intervene on priority basis for needs of neurological clients.  Attitude: Renders culturally congruent care to the clients suffering from nervous system trauma.	<ul> <li>Traumatic conditions:</li> <li>Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of</li> <li>Cranio-cerebral injuries.</li> <li>Spinal &amp; Spinal cord injuries.</li> <li>Unconsciousness. (9 hrs)</li> </ul>	•	Peripheral nerve injuries. (1 hr)	
VIII (10 Hrs)	At the end of unit students are able to:  Knowledge: Understand etiology, pathopyhsiology and management modalities for clients suffering from cerebro-vascular disorders.  Skill: Renders comprehensive care to the clients suffering from cerebrovascular disorders.  Attitude: Appreciate the individualized needs of clients suffering from various cerebrovascular disorders.	<ul> <li>Cerebro-vascular disorders:</li> <li>Causes, pathophysiology, Clinical types, Clinical features diagnosis, Prognosis, Management: medical, surgical and Nursing management of</li> <li>Stroke &amp; arterial venous thrombosis.</li> <li>Hemorrhagic embolus.</li> <li>Cerebro vascular accidents.</li> <li>Intracranial aneurysm.</li> <li>Sub-archnoid Hemorrhage.</li> <li>Arterio venous fistula.</li> <li>Brain tumours (8 hrs)</li> </ul>	•	Diseases of cranial nerves; Trigeminal neuralgia, Facial palsy, bulbar palsy. (2 hrs)	
IX (10 Hrs)	Knowledge: Describe degenerating and demyelinating disorders and their nursing management.  Skill: Identify the special needs of clients with degenerating and demyelinating disorders and render them comprehensive care.  Attitude: Prepares the family members of clients with degenerating and demyelinating disorders for home care for long duration.	<ul> <li>Degenerating and demyelinating disorders:</li> <li>Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and Nursing management of</li> <li>Motor neuron diseases.</li> <li>Movement disorders- Tics, dystonia, chorea, Wilson's disease, essential tremors</li> <li>Multiple sclerosis. (7 hrs)</li> </ul>	•	Dementia. Parkinson's disease. Alzheimer's. (3 hrs)	
X (10 Hrs)	At the end of unit students are able to:  Knowledge: Explain the nature and expanse of infections to nervous system and their specific nursing management.  Skill: Indentify the specific needs of and render competent care to the clients.  Attitude: Appreciate the individualized needs of	<ul> <li>Neuro infections:</li> <li>Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis.</li> <li>Management: medical, surgical and nursing management of Neuro infections: Meningitistypes .Encephalitis. Poliomyelitis. Parasitic infections. Bacterial infections (8 hrs)</li> </ul>	•	Neurosyphilis. HIV & AIDS. (2 hrs)	

	clients suffering from various cerebrovascular disorders.		
XI ( 10 Hrs)	At the end of unit students are able to:  Knowledge: Understand the causes, pathopyhsiology and management of paroxysmal disorders of nervous system.  Skill: Identify symptoms of and renders comprehensive care to the clients suffering from paroxysmal disorders of nervous system.  Attitude: Manages clients of nervous system disorders without letting them deteriorate to complications and irreversible damage.	<ul> <li>Paroxysmal disorders:</li> <li>Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of <ul> <li>Epilepsy and seizures.</li> <li>Status epilepticus.</li> <li>Syncope.</li> </ul> </li> <li>Cephalgia.(9 hrs)</li> </ul>	Menier's syndrome.     (1 hr)
XII (10 Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain the developmental disorders of nervous system and sensory organs.  Skill: Identify and provide care to the clients suffering from developmental disorders.  Attitude: Equipped with knowledge and skill in preconception counseling.	<ul> <li>Developmental disorders:</li> <li>Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis</li> <li>Management: medical, surgical and Nursing management of: Hydrocephalus.         Craniosynostosis. spina bifida- Meningocele, Meningomyelocele encephalocele.         Syringomyelia. Cerebral palsies.     </li> <li>Down's syndrome (9 hrs)</li> </ul>	Cerebro vascular system anomalies     (1 hr)
XIII (10 Hrs)	At the end of unit students are able to:  Knowledge: Describe the management modalities for neuromuscular disorders.  Skill: Identify the clients with neuromuscular disorders and render need-based effective care.  Attitude: Contribute towards preventions of neuromuscular disorders.	Neuromuscular 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. (9 hrs)	Peripheral neuropathies     (1 hr)
XIV (5 Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain the neoplasms of nervous system and the management modalities available.  Skill: Identify the surgical needs of the clients with nervous system neoplasms and renders efficient care.  Attitude: Prepares the family members of clients with degenerating and demyelinating disorders for home care for long duration.	Neoplasm – 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 (5 Hrs)	

XV (5 Hrs)	At the end of unit students are able to:  Knowledge: Understand the implications of other metabolic disorders and autoimmune disorders of nervous system.  Skill: Assess the clients with other metabolic disorders for their effect on nervous system.  Attitude: Educate the client to make necessary changes in life style.	• Causes, pathophysiology, Clinical· types, Clinical features, diagnostic, Prognosis Management: medical, surgical and nursing management of: Metabolic disorders- diabetes, insipidus, and metabolic encephalopathy. Sleep disorders. Auto immune disorders-multiple sclerosis, inflammatory myopathies. (5 hrs)	
XVI (10 Hrs)	At the end of unit students are able to:  Knowledge: Describe neuroemergencies and render quality care in neuroemergencies.  Skill: Identify emergency situations in clients with neurology conditions and works independently to manage the case.  Attitude: Aspires to prevent neuro emergencies effectively by intervening promptly.	<ul> <li>Neuro emergencies:</li> <li>Causes, pathophysiology, Clinical types, Clinical feature diagnostic, Prognosis Management: medical, surgical and Nursing management Of: Increased intracranial pressure. Unconscious. Herniation syndrome. Seizures .Severe head injuries. Spinal injuries.</li> <li>Cerebro vascular accidents (10 hrs)</li> </ul>	
XVII (5 Hrs)	At the end of unit students are able to:  Knowledge: Understand the need for and explain the principles and process of rehabilitation in chronic neurological conditions.  Skill: Participate in the rehabilitation of client  Attitude: Learn counseling, physiotherapy and speech therapy required for rehabilitation.	<ul> <li>Rehabilitation:</li> <li>Concept and Principles of Rehabilitation.</li> <li>Rehabilitation in acute care setting, and following stroke, head injury and degenerative disorders of brain. (3 hrs)</li> </ul>	<ul> <li>Physiotherapy.</li> <li>Counseling</li> <li>Speech &amp; Language: Neurogenic communication disorders.(2 hrs)</li> </ul>
XVIII (5 Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain ethical issues Skill: Protect self and client from malpractice and negligence. Attitude: Maintain safety of the client.	Ethical and legal issues in neuroscience nursing:  Brain death and organ transplantation  Euthanasia  Negligence and malpractice (4 hrs)	Nosocomial infections     (1 hr)
XIX (5 Hrs)	At the end of unit students are able to:  Knowledge: Understand the role of advance practitioner in neurological nursing and manage the Neuro ICU efficiently.  Skill: Participate in and arrange for In-service education in Neuro Nursing.  Attitude: Ensure quality nursing care in neuro nursing units.	<ul> <li>Quality assurance in neurological nursing practice.</li> <li>Role of advance practitioner in neurological nursing.</li> <li>Professional practice standards.</li> <li>Quality control in neurologic nursing.</li> <li>Nursing audit.</li> <li>In-service education.( 3 Hrs)</li> </ul>	<ul> <li>Neuro ICU: Philosophy, aims and objectives.     Policies, staffing pattern, design and physical plan of/neuro ICU. Team approach, functions</li> <li>Psychosocial aspects in relation to staff and clients of ICU.(2 Hrs)</li> </ul>

### AREA AND DISTRIBUTION OF CLINCAL HOURS:

Sr. No.	Dept / Unit	No. of weeks	Total hours	Sr. No.	Dept / Unit	No. of weeks	Total hours
1	OPD	2	60	7	Neuro Surgical Ward	4	120
2	Casualty	2	60	8	Head Injury Ward	4	120
3	Diagnostics	2	60	9	ICU- Neuro Medicine	4	120
4	Neuro psychiatry	1	30	10	ICU- Neuro Surgical	4	120
5	Neuro Medical Ward	4	120	11	Rehabilitation	2	60
6	Neuro Pediatric Ward	2	60	12	Operation Theatre	1	30
	Total	13	390		Total	19	570
	Grand Total 32 960						

**TEACHING STRATEGY:** Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

**TEACHING METHOD:** Lectures, Seminars, Case presentation & discussion, Clinical observation.

A.V. AIDS: OHP, LCD, Posters, Blackboard, Demonstration.

### **ASSIGNMENTS: Theory:**

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Seminar	Two	1X50	100
Total Marks				

### **Practical:**

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Teaching learning module preparation (Group work)	One	1X25	25
2	Case study	One	1X50	50
3	Case Presentation	Two	1X50	100
4	Nursing Care Plans	Two	1X25	50
5	Speciality Drugs Study (Minimum 20 drugs)	One	1X25	25
6	Speciality Procedure Evaluation	Two	1X25	50
7	Clinical Performance Evaluation	Two	1X100	200
			Total Marks	500

### LIST OF RECOMMENDED BOOKS:-

- Text Book of Medical Surgical Nursing Brunner and Suddarth.
- Medical Surgical Nursing Clinical Positive Out Joyce and Black.
- Medical Surgical Assessment and Management of clinical problems Lewis, Colliner.
- Medical Surgical Nursing A psychopathologic approach- Luckmann and Sorenson.
- Medical Surgical Nursing A Nursing Process Approach.
- Medical Surgical Nursing B.T. Basvanthappa.
- Medical Surgical Nursing an integrated approach Write L. and Delmar.
- Moroneys Surgery for Nurses Colmer.
- API Text Book Medicine- Shah N.S.
- Pharmacology and Pharmacotherapeutics Satoskat and Bhandarkar.
- Fundamentals of Operation Theatre Services Datta T.K.
- Fundamentals of orthopedics Maheshwari.
- Illustrated Textbook of Dermatology Parischa J.S., Gupta.
- Davidson principles and practice of Medicine.
- The Lippincott Manual of Nursing Practice Nettina, Sandra.
- Ellen Barker, 'Neuro Science Nursing- A Spectrum of Care', Mosby.
- Ellen Barker, 'Neuro Science Nurisng' Mosby.
- Brunner and Suddarth's,' Text Book of Medical Surgical Nursing', Lippincott.

## Subject No.2 CLINICAL SPECIALITY II

# MEDICAL SURGICAL NURSING SUBSPECIALITY-ONCOLOGY NURSING

Total: 1110 Hours Theory: 150 Hours Practical: 960 Hours

### AIM:

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:**

At the end of course students are able to:

- Explain the prevention, screening and early detection of cancer.
- Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of oncological disorders of various body systems.
- Describe the psychosocial effects of cancer on patients and families.
- Demonstrate skill, in administering/assisting in various treatment modalities used for patients with cancer.
- Apply nursing process in providing holistic, care to patients with cancer.
- Apply specific concepts of pain management.
- Appreciate the care of death and dying patients and value of bereavement support.
- Describe the philosophy, concept and various dimensions of palliative care.
- Appreciate the role of alternative systems of medicine in care of cancer patients.
- Appreciate the legal & ethical issues relevant to oncology nursing.
- Recognize and manage Oncological emergencies.
- Counsel the patients with cancer and their families.
- Incorporate evidence based nursing practice and identify the areas of research in the field of oncology nursing.
- Recognize the role of oncology nurse practitioner as a member of oncology team.
- Collaborate with other agencies and utilize resources in caring for cancer patients.
- Teach and supervise nurses and allied health workers.
- Design a layout and develop standards for management of oncology units/hospitals and nursing care.

### **CONTENTS:**

### **Unit I -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.

#### **Unit II -The nature of Cancer:**

• Normal cell biology. The Immune system. Pathological and patho-physiological changes in tissues. Biology of the cancer cell. Clone formation Transformation Tumors stem lines. Structure of a solid tumor. Products produced by the tumor. Systemic effects of tumor growth.

### **Unit III - 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.

### **Unit IV - Diagnostic Evaluation:**

• Health assessment: History taking, physical examination; Staging and grading of tumors, TNM Classification. Common diagnostic tests: Blood investigation: Hematological, Bio-chemical, Tumor markers. Hormonal assay. Cyrology: Fine needle aspiration cytology (FNAC).

• Histopathology: Biopsy. Radiological assessment: MRI, Ultrasound, Computed tomography, Mammography, Positron emission tomography (PET), Radio nuclide imaging, Functional metabolism imaging. Endoscopies. Nurses responsibilities in diagnostic measures.

### **Unit V -Levels of prevention and care:**

• Primary prevention - Guidelines for cancer detection, general measures, Warning signs of callcer. 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.

### Unit VI -Cancer Treatment Modalities and Nurse's Role

- **Surgery:** Principles of surgical oncology, Current surgical strategy,
  Determining surgical risk, 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 and 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, scaled sources. Effectiveness of radiotherapy- Radio sensitivity, treatment effects Complications of radiotherapy. Radiation safety: Standards of Bhabha Atomic Research Centre(BARC)
- Bone Marrow 'Transplantation /Stem Cell Transplantation:
- Types, indications, transplantation procedure and complications, Types and donor sources, Preparation and care of donor and recipient, 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
- Pain management: Theories, types, 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 Recent developments in Cancer pain.
- Non Pharmacological pain relief technique: Complementary therapies (Music, massage, meditation, relaxation techniques, biofeed back etc), Psychological intervention in pain control. Alternative system of medicines. Role of nurse.

### Unit VII -Pain management: Theories, types and Management modalities:

- Nature of cancer pain, Pathophysiology of pain, Assessment of pain
   Principles of cancer pain control, Pharmacological: Opioid and non-opioid analgesic therapy,
  - Patient controlled analgesia (PCA) Non Pharmacological pain relief technique: Psychological intervention in pain control, Role of nurse, Pain threshold
  - Recent developments in Cancer pain relief, Alternative system of medicines, other invasive techniques of pain control.
  - Non Pharmacological pain relief technique: Complementary therapies (Music, massage, meditation, relaxation techniques, biofeedback, etc.)

### **Unit VIII -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 IX -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.

# **Unit X - 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, Leukemia. Malignancies of musculoskeletal system. Endocrine malignancies. Skin. Head and Neck-brain tumors. Other malignancies - Breast cancer.

# **Unit XI -Pediatric malignancies:**

- Leukemia, Lymphoma, Neuro-blastoma. Wilm's tumor, Soft tissue sarcoma, Retinoblastoma.
- Nursing Management of children with Paediatric Malignancies.

# Unit XII -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, diarrhea, electrolyte imbalance, taste alterations.
- Impaired mobility: Decubitus ulcer, pathologic fractul thrombophlebitis, pulmonary embolism, contiactures, footdrop.
- Other symptoms: Dyspepsia & hiccup, dyspnoea. Intestinal obstruction, Fungating wounds. Anxiety & depression, insomnia .Lymph edema.
- Impact of cancer on sexuality: Effects of radiotherapy / chemotherapy/surgery on sexuality of the cancer patient. Nursing management of cancer patients experiencing sexual dysfunction. Sexual counseling.

# **Unit XIII -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.

# **Unit XIV -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:** Care of dying patient, Grief and grieving process, Bereavement support. Care of Nurses who care for the dying.

# Unit XV - 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.
- **PRACTICALS:** Clinical practice in the care of patients with various malignant disorders, Assessment of client suffering with various malignant disorders, Applying nursing theories and process in the management of patients suffering from various malignancies, Provide care to patients with ostomies and other appliances, Assisting for implantation of radioisotopes, Clinical case presentation, Projects, Clinical and classroom teaching, Health education on related diseases conditions.
  - Field visits Regional cancer centers/cancer speciality hospital/units, Hospice, mobile palliative care, community oncology centers, home care units, cancer registry, cancer detection centers, etc.
  - **Procedures to be observed**:CT Scan, MRI, Ultra sound, Mammography, Radio Nuclear Imaging, Bone Scan, Thyroid function Test, Functional and metabolic Imaging, Transportation of radioactive material, others.
  - **Procedures to be assisted:** I. V cannulation open method, Chemotherapy, Radiotherapy Brachytherapy Low density radiation, High density radiation, interstitial implantation, Tele therapy treatment planning, bone marrow aspiration and biopsy, Tissue Biopsy, FNAC and biopsy, Advance cardiac life support, Endotrachieal intubation, De fibrillation, Ventilation,

- Trachesostomy, Thoracentesis, Lumbar Puncture, Arterial Blood Gasses, Nerve Block, l Chest tube insertion, Inter costal drainage, CVP monitoring,
- Procedures to be performed: Screening for cancer, Assessment of pain, Assessment of Nutritional status, Care of Tracheostomy, Endotracheal intibation, Gastric gavage, Pap Smear, I. V cannulation, Care of surgical flaps, care of ostomies, Blood transfusion and component therapy, counseling, Practice Standard Safety measures, Care of dead body and mortuary formalities.
- Other procedures: As per the institutional protocol; Alternative therapies.

# CLINICAL SPECIALITY II

# MEDICAL SURGICAL NURSING

# SUB SPECIALITY - ONCOLOGY NURSING

Unit No.	Objectives	Content	ts with Distributed Hours	
& Hours	Objectives	Must Know	Desirable to Know	Nice to Know
I (4 Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Understand and explain the concept of cancer, related risk factors & principles of cancer management. <b>Skill:</b> Practice principles of cancer management. <b>Attitude:</b> Adapt to the roles and take appropriate responsibilities while caring.	• Disease burden, concept of cancer,	<ul> <li>Epidemiology- Incidence, Prevalence         <ul> <li>Global, National, State and Local.</li> </ul> </li> <li>Trends and issues.         <ul> <li>(1 hr)</li> </ul> </li> </ul>	<ul> <li>Historical perspectives.</li> <li>(1 hr)</li> </ul>
II (5 Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Understand the pathological and pathophysiological changes in tissues due to cancer. <b>Skill:</b> Recognize the structural and functional processes of tumours. <b>Attitude:</b> Appreciate systemic effects of tumour growth.	<ul> <li>The nature of Cancer:</li> <li>Pathological and pathophysiological changes in tissues:</li> <li>Biology of the cancer cell</li> <li>Clone formation Transformation</li> <li>Tumors stem lines. Products produced by the tumor. Systemic effects of tumor growth. (3 hrs)</li> </ul>	<ul> <li>Normal cell biology.</li> <li>The Immune system. (1 hr)</li> </ul>	<ul> <li>Structure of a solid tumor.</li> <li>(1 hr)</li> </ul>
III (4 Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Describe the etiology of cancers. <b>Skill:</b> Identify the risk factors in patients with cancer. <b>Attitude:</b> Determine hormonal, dietetic and emotional factors in the etiology of tumors.	<ul> <li>Etiology of Cancer:</li> <li>Risk factors.</li> <li>Carcinogens - genetic factors, chemical carcinogens, radiation, viruses, Immune system failure, rapid tissue proliferation.</li> <li>Hormone changes, diet, emotional factors. (3 hrs)</li> </ul>	<ul> <li>Carcinogenesis.</li> <li>Theories of cancer causation.</li> <li>(1 hr)</li> </ul>	
IV (10 Hrs)	At the end of the unit the students are able to — <b>Knowledge:</b> Understand and explain the diagnostic procedures for various cancer conditions. <b>Skill:</b> Prepare the clients with cancer for different diagnostic procedures. Read the results of diagnostic procedures. Classify various stages of cancer. <b>Attitude:</b> Adapt to the roles and take appropriate responsibilities while caring for patients with	<ul> <li>Diagnostic Evaluation:</li> <li>Common diagnostic tests.</li> <li>Blood investigation: Hematological, Biochemical, Tumor markers, Hormonal assay</li> <li>Cytology: Fine needle aspiration cytology (FNAC)</li> <li>Histopathology: Biopsy</li> <li>Radiological assessment: MRI,</li> </ul>	<ul> <li>Health assessment:         History taking, physical examination; Staging and grading of tumors,</li> <li>TNM Classification.         (3 hrs)</li> </ul>	<ul> <li>Positron emission tomography, Radio nuclide imaging, Functional metabolism imaging.(1hr)</li> </ul>

V (10 Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Explain the preventive aspects of cancer. <b>Skill:</b> Aid in early diagnosis and treatment of the cancer patients. <b>Attitude:</b> Participate in the rehabilitation of the patients with cancer.	Ultrasound, Computed tomography, Mammography, Endoscopies.  Nurses responsibilities in diagnostic measures.(6 Hrs)  Levels of prevention and care:  Primary prevention - Guidelines for cancer detection, general measures, Warning signs of callcer,  Self examination-Oral, Breast, Testicular  Secondary prevention - early diagnosis.  Screening. (6 Hrs)	<ul> <li>Rehabilitation: Mobility, Speech, Bowel and bladder, Ostomies, etc</li> <li>Patient and family education.</li> <li>Discharge instruction, follow-up care and use of community resources. (3 Hrs)</li> </ul>	disability limitation. (1 Hr)
VI (25 Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Understand and explain various modalities of treatment for cancer clients. <b>Skill:</b> Prepare clients with cancer for various therapies.  Participate in the therapeutic procedures.  Observe the response of different therapies in cancer clients.  Discuss the ethical and legal issues in various therapies for cancer clients. <b>Attitude:</b> Develop mind set to use different alternative and complimentary therapies.	<ul> <li>Cancer Treatment Modalities and Nurse's Role: Surgery-</li> <li>Principles of surgical oncology. Current surgical strategy. Pre-intrapostoperative nursing. Acute &amp; chronic surgical complications. Future directions and advances (5 hrs)</li> <li>Chemotherapy:</li> <li>Principles and classification of chemotherapeutics. Pharmacology of anti neoplastic drugs- Mechanism of action, Absorption, protein binding, Bio-transformation, excretion, common side effects, drug toxicity. Calculating drug doses, Safety precautions (4 hrs)</li> <li>Radiation Therapy:</li> <li>Physics of radiotherapy. Types of ionizing rays.</li> <li>Radiation equipments: Linear accelerator, cobalt, Implants, Isotopes. Types of therapies: Oral, Brachytherapy, teletherapy, selectron therapy. Effects of radiation on the body tissue, Scaled sources.</li> </ul>	Gene Therapy: Current Concepts and practices.  Alternative & Complementary Therapies: Current practices Immunotherapy (Biotherapy): Concepts and principles. Classification of agents. Treatment and applications (3 hrs) Cancer Treatment Modalities and Nurse's Role: Surgery- Determining surgical risk Special surgical techniques (3 Hrs)	<ul> <li>Radiation safety:         Standards of Bhabha         Atomic Research         Centre (BARC)         (1 hr)</li> <li>Bone Marrow Transplantation /Stem Cell Transplantation</li> <li>Types, indications,         transplantation         procedure and         complications</li> <li>Types and donor         sources.</li> <li>Preparation and care of         donor and recipient.         Legal and ethical         issues.(3 hrs)</li> <li>Chemotherapy</li> <li>Therapeutic response to         chemotherapy-Tumor         variables, drug         resistance.</li> <li>Radiation</li> <li>Radiation biology - cell</li> </ul>

		Effectiveness of radiotherapy- Radiosensitivity, treatment effects. Complications of radiotherapy.(4 hrs)		damage hypoxic cells, alteration of tumor kinetics. <b>Approaches to radiation</b> -External &I nternal.(2 Hrs)
VII (10 Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Describe theories of pain, types of cancer pain and management modalities for cancer patients. <b>Skill:</b> Practice principles of cancer pain control. Administer pain medications as prescribed.  Provide psychological support to the clients with cancer pain <b>Attitude:</b> Demonstrate competence in management of pain by using various complementary therapies.	Pain management: Theories, types and Management modalities: Nature of cancer pain.  O Pathophysiology of pain.Assessment of pain. Principles of cancer pain control. Pharmacological: Opioid and non- opioid analgesic therapy.Patient controlled analgesia (PCA) (3 hrs) Non Pharmacological pain relief technique: Psychological intervention in pain control. Role of nurse. (3 Hr)	<ul> <li>Pain threshold</li> <li>Recent developments in Cancer pain relief</li> <li>Alternative system of medicines.         <ul> <li>(2 hrs)</li> </ul> </li> <li>Other invasive techniques of pain control.(1 Hr)</li> </ul>	Non Pharmacological pain relief technique:  Complementary therapies (Music, massage, meditation, relaxation techniques, biofeedback, etc.)  (1 Hr)
VIII (5 Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Explain concepts and elements of palliative care and nurses' role in it. <b>Skill:</b> Identify quality of life issues. <b>Attitude:</b> Render palliative care in home and hospice setting.	<ul> <li>Palliative care:</li> <li>Definition and scope, philosophy</li> <li>Concept and elements of palliative care. Quality of life issues. Communication skill. Nursing perspective of palliative care and its elements. Role of nurse in palliative care. (4 hrs)</li> </ul>	<ul> <li>Global and Indian perspective of palliative care</li> <li>Home care</li> <li>Hospice care. (1 hr)</li> </ul>	
IX (2 Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Explain the importance of infection control in cancer care. <b>Skill:</b> Practice standard safety measures while caring for cancer patients. <b>Attitude:</b> Illustrate the risk of infections in hospitalized clients.	<ul> <li>Infection control:</li> <li>Nosocomial infections- prevention and control of infection in acute, long term care facility and community based care</li> <li>Standard safety measures (1 hr)</li> </ul>	• Process of infection, risk of hospitalization (1 hr)	
X (27 Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Explain the nursing care of clients with specific malignant disorders. <b>Skill:</b> Render culturally congruent and competent comprehensive care to the cancer patients <b>Attitude:</b> Educate clients and families about	Nursing Care of Patients With specific Malignant Disorders:  • Malignancies of G.I. system-oral, oesophagus, stomach, rectal, liver & pancreas, care of ostomies / stoma (3 hrs)		

	nutrition, exercises and other health promotion activities in cancer.	<ul> <li>Respiratory malignancies (3 hrs)</li> <li>Genitourinary system malignancies-prostate Bladder, renal, testicular malignancies, (4 hrs)</li> <li>Gynecological malignancies-cervix, uterus, ovary (3 hrs)</li> <li>Hematological malignancies Lymphomas, Leukemias (2 hrs)</li> <li>Malignancies of musculoskeletal system (3 hrs)</li> <li>Endocrine malignancies (3 hrs)</li> <li>Skin (2 hrs)</li> <li>Head and Neck-brain tumors. (3 hr)</li> <li>Other malignancies, Breast cancer (1 hr)</li> </ul>		
XI (10 Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Describe common malignancies in pediatric clients. <b>Skill:</b> Identify need of children with various malignancies and render them effective care. <b>Attitude:</b> Provide relevant health education to the parents.	<ul> <li>Pediatric malignancies:</li> <li>Leukemia, Lymphoma, Neuroblastoma. (4 hrs)</li> <li>Nursing Management of children with Pediatric Malignancies. (3 hrs)</li> </ul>	<ul> <li>Pediatric malignancies:</li> <li>Wilm's tumor, Soft tissue sarcoma, Retinoblastoma.</li> <li>(3 hrs)</li> </ul>	
XII (13 Hrs)	At the end of the unit the students are able to — <b>Knowledge:</b> Understand the symptomatic treatment modalities for the cancer clients. <b>Skill:</b> Plan and arrange for appropriate diet for cancer clients.  Render effective an efficient care for bed ridden cancer clients.  Manage physiological symptoms in cancer clients. <b>Attitude:</b> Understand the impact of cancer on sexuality and provide sexual counseling to the cancer clients.	<ul> <li>Nursing Management of Physiological conditions and Symptoms of Cancer Patient:         <ul> <li>Nutrition: - effects of cancer on nutritional Status and its consequences:-Anemia, Cachexia, Xerostomia, mucositis, Dysphagia, nausea and vomiting, constipation, diarrhea, electrolyte imbalance, taste alterations.</li> <li>Impaired mobility: Decubitus ulcer, pathologic fractures, thrombophlebitis, pulmonary embolism, contractures, foot drop. (5 Hrs)</li> </ul> </li> <li>Other symptoms: Dyspepsia &amp; hiccup, dyspnoea, Intestinal obstruction, Fumigating wounds. Anxiety, depression, insomnia (2 hr)</li> </ul>	<ul> <li>Effects of radiotherapy / chemotherapy/surgery on sexuality of the cancer patient. (2 hrs)</li> <li>Sexual counseling (1 hrs)</li> <li>Lymph edema. (1 hr)</li> </ul>	

		Impact of cancer on sexuality:		
		Nursing management of cancer patients experiencing sexual dysfunction. (2 hrs)		
XIII (10Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Describe the emergency conditions in cancer clients. <b>Skill:</b> Demonstrate competence in identifying emergency situations in cancer clients.  Report and intervene promptly an effectively to manage the cancer emergencies. <b>Attitude:</b> Recognizes the signs of brain metastasis and vital organ involvement in cancer and render efficient care to relieve discomfort.	<ul> <li>Cancer Emergencies:         <ul> <li>Disseminated intravascular coagulation (DIC)</li> </ul> </li> <li>Malignant pleural effusion.</li> <li>Neoplastic cardiac tamponade, septic shock, spinal cord Compression.</li> <li>Superior venacava syndrome.</li> <li>Metabolic emergency: hyper and hypo calcemia. Surgical emergency.</li> <li>Hemorrhage, Organ obstruction.</li> <li>Nurses role in managing oncologic emergencies. (8 hrs)</li> </ul>	<ul> <li>Urological emergency.</li> <li>Brain metastasis.</li> <li>(2 hrs)</li> </ul>	
XIV (10Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Understand the need for and explain the techniques involved in crisis intervention and stress management for the clients with cancer. <b>Skill:</b> Practices various spiritual and alternative treatment modalities for management of stress in cancer case. Participates in crisis interventions for cancer clients. <b>Attitude:</b> Provide culturally congruent care to the dying cancer client.	Psycho-Social Aspects of Nursing Care: Psychosocial assessment. Crisis intervention, coping. Stress management, spiritual/cultural care and needs. Maximizing quality of life of patient and family. (3 hrs) Ethical, moral and legal issues: (3 Hrs) Care of dying patient. Bereavement support. Care of Nurses who care for the dying. (2 hrs)	<ul> <li>Counseling: individual and family.</li> <li>Psychological responses of patients with cancer.</li> <li>(2 hrs)</li> </ul>	
XV (5Hrs)	At the end of the unit the students are able to – <b>Knowledge:</b> Understand the significance of practice standards, policies and protocols. <b>Skill:</b> Frame policies and protocols for the oncology nursing unit. <b>Attitude:</b> Provide suggestions for the improvement of functioning of oncology unit.	Practice Standards of oncology nursing.     Policies and Procedures     Quality Assurance Programme in oncology units     (3 Hrs)	Establishing Standing orders and Protocols.     (1 Hr)	• Layout & Design of an oncology institution / ward, OPD, chemotherapy unit, Bone marrow, transplantation unit, Pain clinic etc (1Hr)

# AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr. No.	Dept / Unit	No. of weeks	Total hours		Dept / Unit	No. of weeks	Total hours
1	Medical Oncology ward	6	180	7	Out Patient department and pain clinic	2	60
2	Surgical Oncology ward	6	180	8	Palliative Care ward	2	60
3	Bone marrow transplantation Unit	2	60	9	Pediatric Oncology ward	2	60
4	Operation Theatre	2	60	10	Community Oncology	2	60
5	Radiotherapy Unit	2	60	11	Hospice	1	30
6	Chemotherapy Unit	4	120	12	Other field visits	1	30
	Total	22	660			10	300
					Grand Total	32	960

# **TEACHING STRATEGY:**

Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

# **TEACHING METHOD:**

Lectures, Seminars, Case presentation & discussion, Clinical observation.

#### A.V. AIDS:

OHP, LCD, Posters, Blackboard, Demonstration.

# **ASSIGNMENTS:**

#### Theory:

O <b>-</b> J •				
Sr.	Assignment	No./Quantity	Marks per Assignment	Total Marks
No.				
1	Seminar	Two	1X50	100
		_	Total Marks	100

# **Practical:**

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Teaching learning module preparation (Group work)	One	1X25	25
2	Case study	One	1X50	50
3	Case Presentation	Two	1X50	100
4	Nursing Care Plans	Two	1X25	50
5	Speciality Drugs Study (Minimum 20 drugs)	One	1X25	25
6	Speciality Procedure Evaluation	Two	1X25	50
7	Clinical Performance Evaluation	Two	1X100	200
			Total Marks	500

# **RECOMMENDED BOOKS:**

- Text Book of Medical Surgical Nursing Brunner and Suddarth.
- Medical Surgical Nursing Clinical Positive Out Joyce and Black.
- Medical Surgical Assessment and Management of clinical problems Lewis, Colliner.
- Medical Surgical Nursing A psychopathologic approach- Luckmann and Sorenson.
- Medical Surgical Nursing A Nursing Process Approach.
- Medical Surgical Nursing B.T. Basvanthappa.
- Medical Surgical Nursing an integrated approach Write L. and Delmar.
- Moroneys Surgery for Nurses Colmer.
- API Text Book Medicine- Shah N.S.
- Pharmacology and Pharmacotherapeutics Satoskat and Bhandarkar.
- Fundamentals of Operation Theatre Services Datta T.K.
- Fundamentals of orthopedics Maheshwari.
- Illustrated Textbook of Dermatology Parischa J.S., Gupta.

- Davidson principles and practice of Medicine.
- The Lippincott Manual of Nursing Practice Nettina, Sandra.
- Joyce Griffin Sable (2007) Site Specific Cancer Series: Gastrointestinal cancer.
- L.K. Clarke and M.S. Drophin (2006) Site specific cancer series, Head Neck cancer.
- R.M. Carrolt Johnson L. and N.S. Bush (2006) Psychological Nursing Care and Cancer Continuum. 2<sup>nd</sup> Edition.
- Brunner and suddarth, Text Book of Medical Surgical Cancer
- Marcelle Kaplan (2006) Understanding and managining Oncological Emergencies; A resource for Nurses.

# Subject No.2

# CLINICAL SPECIALITY- II

# MEDICAL SURGICAL NURSING SUB SPECIALITY - CRITICAL CARE NURSING

Total: 1110 Hours Theory: 150 Hours Practical: 960 Hours

# AIM:

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 are able to:

- Appreciate trends and issues related to Critical Care Nursing.
- Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of critically ill patients.
- Describe the various drugs used in critical care and nurse's responsibility.
- Perform physical, psychosocial & spiritual assessment.
- Demonstrate advance skills/competence in managing critically ill patients including Advance Cardiac Life Support.
- Demonstrate skill in handling various equipments/gadgets used for critical care.
- Provide comprehensive care to critically ill patients.
- Appreciate team work & coordinate activities related to patient care.
- Practice infection control measures.
- Asses and manage pain.
- Identify complications & take appropriate measures.
- Discuss the legal and ethical issues in critical care nursing.
- Assist patients and their family to cope with emotional distress, spiritual, grief and anxiety.
- Assist in various diagnostic, therapeutic and surgical procedures.
- Incorporate evidence based nursing practice and identify the areas of research in the field of critical care nursing.
- Identify the sources of stress and manage burnout syndrome among health care providers.
- Teach and supervise nurses and allied health workers.
- Design a layout of ICU and develop standards for critical care nursing practice.

#### **CONTENTS:**

#### **Unit I -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 types of monitors & ventilators.
- Flow sheets.

# Unit II -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 psycho physiological & 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 team members.

#### **Unit III -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.

# **Unit IV -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 V -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.
- Nursing care of patients with sepsis: sepsis care bundle

#### **Unit VI -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.

# **Unit VII -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: Hemo dialysis, Peritoneal Dialysis, Continuous Ambulatory Peritoneal Dialysis, Continuous arterio venus hemodialysis, Renal Transplant.

# **Unit VIII -Nervous System:**

- Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: Medical, Surgical and Nursing management of:- Common Neurological Disorders:- Cerebro vascular disease, Cerebro vascular accident, Seizure disorders, Guillein Barre- Syndrome, Myasthenia Gravis, Coma, Persistent vegetative state, Encephalopathy, Head injury, Spinal Cord injury.
- Management Modalities: Assessment of Intracranial pressure, Management of intracranial hypertension, Craniotomy.
- Problems associated with neurological disorders. Thermo regulation, Unconsciousness, Herniation syndrome.

#### **Unit IX -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).

# **Unit X - Management of other Emergency Conditions:**

- Mechanism of injury, Thoracic injuries, abdominal injuries, pelvic fractures, complications of trauma, Head injuries.
- Shock: Shock syndrome, Hypo volemic, Cardiogenic, Anaphylactic, Neurogenic and Septic shock.
- Systemic inflammatory Response: The inflammatory response, multiple organ dysfunction syndromes.
- Disseminated Intravascular Coagulation.

- Drug Overdose and Poisoning,
- Acquired Immunodeficiency Syndrome (AIDS).

# Unit XI -Cardiovascular emergencies:

- Principles of Nursing in caring for patients with Cardio vascular disorders.
- Assessment: Cardiovascular system: Heart sounds, Diagnostic studies: Cardiac enzymes studies, Electrocardiographic monitoring, Holter monitoring, Stress test. Echo cardiography, Coronary angiography, Nuclear medicine studies.
- Causes, Pathophysiology, Clinical types, Clinical features, Diagnostic Prognosis, Management: Medical, Surgical & Nursing 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.

# **Unit XII -Respiratory System:**

- Acid-base balance & imbalance.
- Assessment: 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: Invasive, non-invasive, long term mechanical ventilations.
- Bronchial Hygiene: Nebulization, deep breathing exercise, chest physiotherapy, postural drainage, Inter Costal Drainage, Thoracic Surgeries.

#### **Unit XIII -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.

# **Unit XIV -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, Obstetrical shock.

#### **Unit XV - Neonatal Pediatric emergencies:**

- Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and Nursing management of
- o 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:-
- O Cyanotic heart disease, trachea-oesophageal fistula, congenital hypertropic pyloric stenosis, imperforate anus.

- o Pediatric emergencies.
- Dehydration, Acute broncho pneumonia, Acute respiratory distress syndrome, Poisoning, Foreign bodies, seizures, traumas, Status asthmatics.

# **Unit XVI -Other Emergencies:**

- Ophthalmic: Eye injuries, Glaucoma, retinal detachment.
- Ear Nose Throat: Foreign bodies, stridor, bleeding, quincy, acute allergic conditions.
- Psychiatric emergencies; suicide,
- Crisis intervention.

#### Unit XVII -Legal and ethical issues in critical care-Nurse's role:

- Brain death.
- Organ donation & Counseling.
- Do Not Resuscitate (DNR)
- Euthanasia
- Living will

#### **Unit XVIII - Quality assurance:**

- Standards, Protocols, Policies, Procedures.
- Infection control: Standard safety measures.
- Nursing audit.
- Staffing.
- Design of ICU/CCU

# **PRACTICAL:**

- Clinical practice in critical care units like coronary care unit, cardio thoracic intensive care units, Medical, Surgical and Neuro / neurosurgical ICUs, Emergency Department, Operating Room, Dialysis unit, Transplant room, Trauma care units.
- ESSENTIAL CRITICAL CARE NURSING SKILLS:
- **Procedures to be observed:** CT scan, MRI, EEG, Hemodialysis, Endoscopic Retrograde cholangio Pancreaticogram (ERCP), Heart / Neuro / GI. / Renal Surgeries.
- **Procedures to be Assisted:** Advanced life support system, Basic cardiac life support, Arterial line / arterial pressure monitoring/blood taking, Arterial blood gas, ECG recording, Blood transfusion, IV cannulation therapy, Arterial Catheterization, Chest tube insertion, Endotracheal intubations, Ventilation, Insertion of central line / CVP line, Connecting lines for dialysis.
- Procedures Performed: Airway management, Application of oropharyngeal airway, Oxygen therapy, CPAP (Continuous Positive Airway pressure), Care of tracheostomy, Endotracheal extubation, Cardiopulmonary resuscitation, Basic cardiac life support, ECG, Monitoring of critically ill patients clinically with monitors, capillary refill time (CRT) assessment of jaundice, ECG, Gastric lavage, 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 ,Admission & discharge of critically ill patients, Nutritional needs gastrostomy feeds, pharyngeal feeds, jejunostomy feeds, TPN, formula preparation & patient education, Assessment of patient for alteration in blood sugar levels monitorLT1g blood sugar levels periodically & administering insulin, periodical administration of drugs: 1M, IV injection, IV cannulation & fixation of infusion pump, calculation of dosages, use of insulin syringes/ tuberculin, monitoring fluid therapy, blood administration, Setting up dialysis machine and starting, monitoring and closing dialysis, Procedures for prevention of infections:

Hand washing, Disinfection & sterilization surveillance, and fumigation universal precautions, Collection of specimen, Setting, use &. Maintenance of basic equipments- ventilator, 02 analyzer, monitoring equipment, transducers, defibrillator, infusion & syringe pumps, centrifuge machine.

# CLINICAL SPECIALITY- II

# MEDICAL SURGICAL NURSING

# SUB SPECIALITY- CRITICAL CARE NURSING

Unit No.	Objectives	Contents with	Distributed Hours	
& Hours	<b>Objectives</b>	Must Know	Desirable to Know	Nice to Know
I (5 Hrs)	At the end of the unit the students are able to — <b>Knowledge:</b> Understand concept of critical care and explain principles of critical care. <b>Skill:</b> Identify scope of critical care. <b>Attitude:</b> Participate in setting critical care unit.	<ul> <li>Introduction to Critical Care</li> <li>Nursing:</li> <li>Concepts of critical care nursing.</li> <li>Principles of critical care nursing.</li> <li>Scope of critical care nursing.</li> <li>Critical care unit set up including equipments supplies, use and care of various types of monitors &amp; ventilators.</li> <li>Flow sheets. (4 hrs)</li> </ul>	<ul> <li>Review of anatomy and physiology of vital organs, fluid and electrolyte balance.</li> <li>(1 hr)</li> </ul>	Historical review- Progressive patient care (PPC)
II (10 Hrs)	At the end of the unit the students are able to  Knowledge: Understand the impact of critical care environment on patients and his family and explain the dynamics of healing in critical care.  Skill: Practice critical care with holistic approach.  Attitude: Protect self and other health care professionals from stress and burnout syndrome.	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 psycho physiological & psychosocial problems of critical care unit, caring for the patient's family, family teaching. (5 hrs)  • The dynamics of healing in critical care unit:-therapeutic touch, Relaxation, Music therapy, Guided Imagery, acupressure. (4 hrs)	• Stress and burnout syndrome among health team members. (1 hr)	
III (14 Hrs)	At the end of the unit the students are able to — <b>Knowledge:</b> Describe the pharmacokinetics of various groups of drugs used for critical care. <b>Skill:</b> Administer various groups of drugs while rendering critical care to the clients	Review: Pharmacokinetics-  • Analgesics/Anti inflammatory agents.  • Antibiotics, antiseptics.	<ul> <li>Principles of drug administration, role of nurses and care of drugs. (4 hrs)</li> </ul>	

	safely and therapeutically. <b>Attitude:</b> Identify the adverse effects of the emergency drugs and intervene promptly.	<ul> <li>Drugs used in various body systems.</li> <li>IV fluids and electrolytes.</li> <li>Blood and blood components. (10 hrs)</li> </ul>		
IV (5 Hrs)	At the end of the unit the students are able to — <b>Knowledge:</b> Explain the pain management modalities in critically ill patients. <b>Skill:</b> Manage pain effectively in critically ill patients. <b>Attitude:</b> Take initiative in developing and implementing new pain management strategies for critically ill patients.	<ul> <li>Pain Management:</li> <li>Pain &amp; Sedation in Critically ill patients.</li> <li>Pain management-pharmacological and non-pharmacological measures.</li> <li>Placebo effect. (4 hrs)</li> </ul>	• Theories of pain, Types of pain, Pain assessment, Systemic responses to pain. (1 hr)	
V (5 Hrs)	At the end of the unit the students are able to <b>Knowledge:</b> Understand the need for and strategies for infection control in intensive care units. <b>Skill:</b> Develop policies related to disinfection, sterilization, standard safety measures and safety of staff in intensive care unit. <b>Attitude:</b> Become member of infection control committee.	<ul> <li>Infection control in intensive care unit:</li> <li>Nosocomial infection in intensive care unit; methyl resistant staphylococcus aureus (MRSA), Disinfection, Sterilization, Standard safety measures, Prophylaxis for staff.</li> <li>Nursing care of patient with sepsis and sepsis care bundle (5 hrs)</li> </ul>		
VI (10 Hrs)	At the end of the unit the students are able to —  Knowledge: Explain the pain management modalities in critically ill patients.  Skill: Manage pain effectively in critically ill patients.  Attitude: Take initiative in developing and implementing new pain management strategies for critically ill patients.	Gastrointestinal System: Causes, Pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: Medical, Surgical and Nursing management of: • Acute Gastrointestinal Bleeding, Abdominal injury. (5 Hrs) • Hepatic Disorders:-Fulminent hepatic failure, Hepatic encephalopathy, Acute Pancreatitis, Acute intestinal obstruction, perforative peritonitis. (5 Hrs)		

VII (10 Hrs)	At the end of the unit the students are able to  Knowledge: Understand and describe the renal conditions requiring critical care.  Skill: Identify the clients with and render effective critical care to clients with conditions of renal system.  Attitude: Provide health education to clients and their families regarding dietary restriction in renal disorders requiring critical care.	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. (5 Hrs)  • Management Modalities: Hemo dialysis, Peritoneal Dialysis, Continuous Ambulatory Peritoneal Dialysis, Continuous arterio venus hemodialysis, Renal Transplant.(5 Hrs)		
VIII (10 Hrs)	At the end of the unit the students are able to <b>Knowledge:</b> Understand and explain the neurological conditions requiring critical care. <b>Skill:</b> Identify and manage conditions of nervous system demanding critical care. <b>Attitude:</b> Practice critical care for neurological clients in all clinical settings.	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, Guillein Barre- Syndrome, Myasthenia Gravis, Coma, Persistent vegetative state, Encephalopathy, Head injury, Spinal Cord injury. (5 hrs)  • Problems associated with neurological disorders. Thermo-regulation, Unconsciousness, Herniation syndrome. (4 hrs)	• Management Modalities: Assessment of Intracranial pressure, Management of intracranial hypertension, Craniotomy. (1 hr)	
IX (5 Hrs)	At the end of the unit the students are able to  Knowledge: Understand and explain the endocrine system conditions requiring critical care.  Skill: Identify and manage conditions of endocrine system demanding critical care.  Attitude: Practice critical care for clients with endocrine disorders in all clinical	Endocrine System: Causes Pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: Medical, Surgical and Nursing Management of:  • Hypoglycemia, Diabetic Ketoacidosis, Thyroid crisis, Myxoedema,	• Syndrome of Inappropriate / hypersecretion of Antidiuretic Hormone (SIADH) (1 hr)	

	settings.	• Adrenal crisis (4 hrs)	
X (10 Hrs)	At the end of the unit the students are able to — <b>Knowledge:</b> Understand and describe other emergency conditions such as head injury, shock. Thoracic injuries, drug overdose and DIC. <b>Skill:</b> Identify and manage clients with shock, head and chest injuries, DIC and drug overdoses. <b>Attitude:</b> Render first aid and advanced critical care in times of need in all settings.	<ul> <li>Management of other Emergency</li> <li>Conditions:</li> <li>Mechanism of injury, Thoracic injuries, abdominal injuries, pelvic fractures, complications of trauma, Head injuries.</li> <li>Shock: Shock syndrome, Hypovolemic, Cardiogenic, Anaphylactic, Neurogenic and Septic shock.</li> <li>Disseminated Intravascular Coagulation, Drug Overdose and Poisoning. (8 hrs)</li> </ul>	<ul> <li>Systemic inflammatory Response: The inflammatory response, multiple organ dysfunction syndromes.</li> <li>Acquired Immunodeficiency Syndrome (AIDS) (2 hrs)</li> </ul>
XI (20 Hrs)	At the end of the unit the students are able to  Knowledge: Understand and explain Cardiovascular emergencies requiring intensive critical care.  Skill: Identify and manage clients suffering from cardiovascular emergencies conditions.  Attitude: Provide health education to prevent relapses of cardiovascular emergencies.	<ul> <li>Cardiovascular Emergencies:</li> <li>Principles of Nursing in caring for patients with cardiovascular disorders.</li> <li>Assessment: Cardiovascular system: Heart sounds, Diagnostic studies:</li> </ul>	• Percutaneous transluminal coronary angioplasty, Cardioversion, Intra Aortic Balloon pump monitoring, Defibrillations, Cardiac surgeries. Coronary Artery Bypass Grafts (CABGj MICAS), Valvular surgeries, Heart Transplantation, Autologous blood transfusion, Radiofrequency Catheter Ablation. (4 hrs)

XII (15 Hrs)	Attitude: Demonstrate competence in caring for patients on artificial ventilator.	<ul> <li>Poiagnostic 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.</li> <li>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.</li> <li>Management Modalities: Invasive, noninvasive, long term mechanical ventilations.</li> <li>Bronchial Hygiene: Nebulization, deep breathing exercise, chest physiotherapy, postural drainage, Inter Costal Drainage, Thoracic Surgeries. (13 hrs)</li> </ul>	<ul> <li>Acid-base balance &amp; imbalance.</li> <li>Assessment: History &amp; Physical Examination. (2 hrs)</li> </ul>	
XIII (7 Hrs)	At the end of the unit the students are able to —  Knowledge — Describe classification and degrees of burns and the management of clients with burns.  Skill: Assess the fluid and electrolyte replacement needs of the patients, Actively participates in the wound care and pain management of the clients. Strive for infection control in clients with burns.  Attitude: Prepare the client for	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,		

	reconstructive surgery and aid in rehabilitation of the client.	Rehabilitation. (7 hrs)		
XIV (5 Hrs)	At the end of the unit the students are able to <b>Knowledge:</b> Describe obstetrical conditions requiring critical care. <b>Skill:</b> Identify obstetric patients requiring critical care and render prompt effective care to these clients in all settings. <b>Attitude:</b> Demonstrate vigil in caring for clients with obstetrical emergencies.	Obstetrical Emergencies: Causes, Pathophysiology, Clinical types, clinical features, diagnostic Prognosis, Management: Medical, Surgical and Nursing management of: Ante partum hemorrhage, Preeclampsia, eclampsia, obstructed labour and ruptured uterus, Post partum hemorrhage, Puerperal-sepsis, Obstetrical shock. (5 hrs)		
XV (10 Hrs)	At the end of the unit the students are able to  Knowledge: Understand and explain various neonatal and pediatric conditions requiring critical care.  Skill: Identify neonatal and pediatric critical care needs and render efficient competent care to such clients.  Attitude: Support the families of clients suffering from neonatal and pediatric emergencies.	Neonatal Pediatric emergencies: Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and Nursing management of: Neonatal emergencies: Asphyxia Neonatal emergencies: Asphyxia Neonatal emergencies: Asphyxia Neonatal seizures, Metabolic disorders, Intra cranial Hemorrhage, Neonatal Sepsis, RDS/HMD (Respiratory Distress Syndrome/Hyaline Membrane Disease), Congenital disorders: Cyanotic heart disease, trachea-esophageal fistula, congenital hypertrophic pyloric stenosis, imperforate anus. Pediatric emergencies. Dehydration, Acute broncho pneumonia, Acute respiratory distress syndrome, Poisoning, Foreign bodies, seizures, traumas, Status asthmaticus. (10 hrs)		
XVI (5 Hrs)	At the end of the unit the students are able to <b>Knowledge:</b> Explain emergencies related to eye, ear, nose throat and psychiatric problems that require critical care. <b>Skill:</b> Render effective and efficient critical care to clients suffering from emergencies	<ul> <li>Other emergencies:</li> <li>Ophthalmic: Eye injuries, Glaucoma, retinal detachment.</li> <li>Ear Nose Throat: Foreign bodies, strider, bleeding, Quincy, acute allergic conditions. (3 Hrs)</li> </ul>	<ul> <li>Crisis intervention. (1 Hr)</li> <li>Psychiatric emergencies, suicide. (1 Hr)</li> </ul>	

	of eye, ear, nose, throat and psychological problems. <b>Attitude:</b> Prepare self for crisis intervention.			
XVII (2 Hrs)	At the end of the unit the students are able to  Knowledge: Describe nurses' role in ethical and legal issues encountered in critical care.  Skill: Assume appropriate responsibility for the ethical and legal issues in critical care.  Attitude: Protects self and patients rights in critical care unit.	Legal and ethical issues in critical care-Nurse's role:  • Brain death.  • Organ donation & Counseling.  • Do Not Resuscitate (DNR)  • Euthanasia. (2 hrs)	• Living will.	
XVIII (2 Hrs)	At the end of the unit the students are able to  Knowledge: Explain the standards, protocols and policies in the Critical care units and understand need for practicing standard safety measures.  Skill: Practice standard safety measures.  Attitude: Establish standards & conduct nursing audit.	<ul> <li>Quality assurance:</li> <li>Standards, Protocols, Policies, Procedures.</li> <li>Infection control: Standard safety measures.</li> <li>Nursing audit.</li> <li>Staffing. (2 hrs)</li> </ul>		Design of ICU/CCU

# AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr.	Area of Experience	No. of	Total	Sr.	Area of Experience	No. of	Total
No.		Weeks	Hours	No.		Weeks	Hours
1	Medical Ward	1	30	8	Cardio Thoracic ICU	4	120
2	Surgical Ward	1	30	9	CCU	2	60
3	Burns Unit	2	60	10	Emergency Department	1	30
4	Cardio Thoracic Ward	2	60	11	Operating Room	2	60
5	Medical ICU	4	120	12	Dialysis Unit	2	60
6	Surgical ICU	4	120	13	Transplant Room	1	30
7	Neuro/Neurosurgical ICU	4	120	14	Pediatric/NICU	2	60
				15	Labour Room	2	60
	Total	16	480		Total	16	480
					Grand Total	32	960

# **TEACHING STRATEGY:**

• Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

# **TEACHING METHOD:**

• Lectures, Seminars, Case presentation & discussion, Clinical observation.

# A.V. AIDS:

• OHP, LCD, Posters, Blackboard, Demonstration.

# **ASSIGNMENTS:**

# Theory:

<u>- J - </u>				
Sr.	Assignment	No./Quantity	Marks per Assignment	Total Marks
No.				
1	Seminar	Two	1X50	100
			Total Marks	100

# **Practical:**

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Sr.	Assignment	No./	Marks per	Total
No.		Quantity	Assignment	Marks
1	Teaching learning module preparation (Group work)	One	1X25	25
2	Case study	One	1X50	50
3	Case Presentation	Two	1X50	100
4	Nursing Care Plans	Two	1X25	50
5	Speciality Drugs Study (Minimum 20 drugs)	One	1X25	25
6	Speciality Procedure Evaluation	Two	1X25	50
7	Clinical Performance Evaluation	Two	1X100	200
			Total Marks	500

# **RECOMMENDED BOOKS:**

- Text Book of Medical Surgical Nursing Brunner and Suddarth.
- Medical Surgical Nursing Clinical Positive Out Joyce and Black.
- Medical Surgical Assessment and Management of clinical problems Lewis, Colliner.
- Medical Surgical Nursing A psychopathologic approach- Luckmann and Sorenson.
- Medical Surgical Nursing A Nursing Process Approach.
- Medical Surgical Nursing B.T. Basvanthappa.
- Medical Surgical Nursing an integrated approach Write L. and Delmar.
- Moroneys Surgery for Nurses Colmer.
- API Text Book Medicine- Shah N.S.
- Pharmacology and Pharmacotherapeutics Satoskat and Bhandarkar.
- Fundamentals of Operation Theatre Services Datta T.K.

- Fundamentals of orthopedics Maheshwari.
- Illustrated Textbook of Dermatology Parischa J.S., Gupta.
- Davidson principles and practice of Medicine.
- The Lippincott Manual of Nursing Practice Nettina, Sandra.
- Gerard J. Tortora, 'Principles of Anatomy and Physiology', Published by John Wiley and Sons, USA.
- Ross and Wilson, 'Anatomy and Physiology in health and illness', Elseviesr.
- Guyton and Hall, 'Text Book of Medical Physiology', A Prisms Indian Edition Pvt. Ltd.
- John Luckmann, 'Medical Surgical Nursing' Saunders Company, Philadelphia, London.
- Joyce M. Black and Jane Hokanson Hawks, 'Medical Surgical Nursing Clinical Management for Positive Outcome', Elsevier India.
- Janet Kicks Keen,' Critical Care Nursing Consultant', Mosby.
- Kuruvilla Jaya, 'Essentials of Critical Care Nursing', Jaypee Brothers, Mumbai.

# Subject No.2

# **CLINICAL SPECIALITY -II**

# MEDICAL SURGICAL NURSING SUB SPECIALITY – NEPHRO-UROLOGY NURSING

Total: 1110 Hours Theory: 150 Hours Practical: 960 Hours

#### AIM:

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 are able to:

- Appreciate trends and issues related to nephro and urological nursing.
- Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of nephro and urological conditions.
- Perform physical, psychosocial & spiritual assessment.
- Assist in various diagnostic, therapeutic and surgical interventions.
- Provide comprehensive nursing care to patients with nephro and urological conditions.
- Describe the various drugs used in nephro and urological conditions and nurses responsibility.
- Demonstrate skill in handling various equipments & gadgets used for patients with nephro and urological conditions.
- Appreciate team work & coordinate activities related to patient care.
- Practice infection control measures.
- Identify emergencies and complications & take appropriate measures.
- 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.
- Identify the sources of stress and manage burnout syndrome among health care providers.
- Appreciate the role of alternative system of medicine in the care of patient.
- Incorporate evidence based nursing practice and identify the areas of research in the field of nephro and urological nursing.
- Teach and supervise nurses and allied health workers.
- Design a layout of kidney transplant unit and dialysis unit.
- Develop standards of nephro-urological nursing practice.

# **CONTENTS:**

#### **Unit I -Introduction:**

- Historical development: trends and issues in the field of 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.

# **Unit II -Epidemiology:**

Major health problems- urinary dysfunction, urinary tract infections, Glomuerular disorders, obstructive disorders and other urinary disorders. Risk factors associated with nephro and urological conditions- Hereditary, Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic considerations. Health promotion, disease prevention, life style modification and its implications to nursing.

# Unit III -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.

#### **Unit IV -Assessment of diagnostic measures:**

· History taking. Physical assessment, psychosocial assessment. Common assessment abnormalities-

dysurea, frequency, enuresis, urgency, hesitancy, hematuria, pain, retention, burning on urination, pneumaturia, incontinence, nocturia, polyurea, anuria, oliguria. Diagnostic tests-urine studies, blood chemistry, radiological procedures -KUB, IVP, nephrotomogram, retrograde pyelogram, renal arteriogram, renal ultrasound, CT scan, MRI, cystogram, renal 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.

# Unit V -Renal immunopathy / Immunopathology:

- General Concept of immunopathology. Immune mechanism of glomerular vascular disease.
- Role of mediator systems in glomerular vascular disease.

# **Unit VI - 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 urethra Urinary tract infections. Urinary dysfunctions- urinary retention, urinary incontinence, urinary reflux, Bladder disorders- neoplasms, calculi, neurogenic bladder, trauma, congenital abnormalities. Benign prostrate hypertrophy (BPH.) Ureteral disorders: ureteritis, ureteral trauma, congenital: anomalies of ureters. Urethral disorders- tumours, trauma, and congenital anomalies of ureters.

#### **Unit VII -Glomueral disorders and nursing management:**

• Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of: Glomueralo-nephritis- chronic, acute nephrotic syndrome. Acute Renal failure and chronic renal failure. Renal calculi. Renal tumours-benign and malignant. Renal trauma. Renal abscess. Diabetic nephropathy. Vascular disorders. Renal tuberculosis. Polycystic. Congenital disorders. Hereditary renal disorders.

#### **Unit VIII - Management of Renal emergencies:**

- Anuria. Acute Renal failure, Poisoning. Trauma, Haemturia. Urine retention. Acute graft rejection.
- Nurse's role.

# Unit IX -Drugs used in urinary disorders:

• Classification. Indications, contraindications, actions and effects, toxic effects. Role of nurse.

#### **Unit X -Dialysis:**

• Dialysis- Historical, types, Principles, goals. Hemodialysis- vascular access sites- temporary and permanent. Peritoneal dialysis. Dialysis Procedures- steps, equipments, maintenance. Role of nurse-pre dialysis, intra and post dialysis. Complications. Counseling and Patient education, Records and reports.

# **Unit XI - 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 renal transplantations. Chronic renal transplant rejection. Complication after KTP: Vascular and lymphatic, Uroloical, cardiovascular, liver and neurological, infectious complication. KTP in children and management of pediatric patient with KTP. KTP 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.

# Unit XII - 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..

# **Unit XIII -Pediatric urinary disorders:**

- Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology.
- Medical, surgical and nursing management of children with Renal Diseases -UTI, ureteral reflux, glomerulc nephritis, nephrotic syndrome infantile nephrosis, cystic kidneys, familial factors in renal diseases in childhood, Haemolytic uraemic syndrome. Benign recurrent haemturia, nephropathy, wilms' tumour.

#### **Unit XIV - 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.

# Unit XV -Quality assurance in nephrological nursing practice:

• Role of advance practitioner in nephrological nursing. Professional practice standards. Quality control in nephrological nursing and Nursing audit.

#### PRACTICAL:

- Procedures to be observed: CT scan, MRI, Radiographic studies, Urodynamics, Hemo dialysis, Renal Surgeries.
- **Procedures to be assisted:** Blood transfusion, I.V. cannulation & therapy, Arterial Catheterization, Insertion of central line / CVP line, Connecting lines for dialysis, peritoneal dialysis, renal biopsy, Endoscopies- Bladder, urethra.
- **Procedures to be Performed :**Health assessment, Insertion of urethral and supra pubic catheters, Urine analysis, Catheterization, Peritoneal dialysis, Bladder irrigation, Care of ostomies, Care of urinary drainage, Bladder training, Care of vascular access, Setting up dialysis machine and starting, monitoring & closing dialysis, Procedures for prevention of infections: Hand washing, disinfection & sterilization surveillance, and fumigation universal precaution, Collection of specimen. Administration of drugs: 1M, IV injection, IV cannulation & fixation of infusion pump, calculation of dosages, blood administration, monitoring fluid therapy, electrolyte imbalance. Nutritional need, diet therapy, patient education and Counseling.

# CLINICAL SPECIALITY- II

# MEDICAL SURGICAL NURSING SUB SPECIALITY-NEPHRO-UROLOGY NURSING

Unit No.	Objectives	Contents with distributed Hours				
& Hours	J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Must Know	Desirable to Know	Nice to know		
I (5 Hrs)	At the end of unit students are able to:  Knowledge: Understand the concepts and principles of nursing client with nephrouro conditions.  Skill: Practice principles of nursing while caring for these clients.  Attitude: Provide evidence based nursing care.	<ul> <li>Introduction:         <ul> <li>Nephro and urological problems</li> <li>Concepts, principles and nursing perspectives</li> </ul> </li> <li>Evidence based nursing and its application in nephro and urological nursing (to be incorporated in all the units) (3 hrs)</li> </ul>	<ul> <li>Historical development: trends and issues in the field of nephro and urological nursing.</li> <li>Ethical and legal issues. (2 hrs)</li> </ul>			
II	At the end of unit students are able to:  Knowledge: Describe major nephro-uro problems among populations.  Skill: Identify the risk factors contributing to renal conditions.  Attitude: Provide health education related to lifestyle modification and promotion of health to the clients& family.	<ul> <li>Epidemiology:</li> <li>Major health problems- urinary dysfunction, urinary tract infections, Glomuerular disorders, obstructive disorders and other urinary disorders.</li> <li>Risk factors associated with nephro and urological conditions- Hereditary, Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic considerations.(4 hrs)</li> </ul>	<ul> <li>Health promotion, disease prevention, life style modification and its implications to nursing.</li> <li>(1 hr)</li> </ul>			
III (5 Hrs)	At the end of unit students are able to:  Knowledge: Recall anatomy and physiology of urinary system.  Skill: Identify fluid & electrolyte balance needs & provide care accordingly.  Attitude: Appreciate anatomical and/or physiological deviations & its effects on quality of life.	Review of anatomy and physiology of urinary system:  • Structure and functions  • Renal circulation  • Physiology of urine formation  • Fluid and electrolyte balance  • Acid base balance (3 hrs)	Immunology specific to kidney.     (1 Hr)	• Embryology (1 hr)		
IV (20 Hrs)	At the end of unit students are able to:  Knowledge: Explain the assessment of clients with urinary conditions.  Skill: Prepare the clients for various investigations.	<ul> <li>Assessment of diagnostic measures:</li> <li>History taking.</li> <li>Physical assessment.</li> <li>Common assessment abnormalities-</li> </ul>	<ul> <li>Psychosocial assessment</li> <li>Renal ultra sound, CT scan, MRI,</li> </ul>			

	Collect specimen for different investigations. Interpret the reports of diagnostic tests. Assit &/or carry various daignosite procedures correctly. Attitude: provide adequate explanation and relieve anxiety of clients undergoing invasive diagnostic procedures.	<ul> <li>Diagnostic tests-urine studies, blood chemistry, radiological procedures - KUB, IVP, nephrotomogram, retrograde pylogram, renal arteriogram, cystogram, renal scan, biopsy, endoscopy-cystoscopy, urodynamics studies- cystometrogram, urinary flow study, sphincter electromyography, voiding pressure flow study, videourodynamics, Whitaker study. (10 hrs)</li> <li>Nurse's role in diagnostic tests.(2 hrs)</li> </ul>	diagnostic measures. (3 hrs)	
V (5 Hrs)	At the end of unit students are able to: <b>Knowledge:</b> Explain the immune mechanism of glomerular vascular diseases. <b>Skill:</b> Identify the role of mediator systems in glomerular vascular diseases and the symptomatology related to it. <b>Attitude:</b> Educate the clients about normal immune response and the precautions in autoimmune diseases.	<ul> <li>Renal immunopathy/</li> <li>Immunopathology:</li> <li>Immune mechanism of glomerular vascular disease</li> <li>Role of mediator systems in glomerular vascular disease. (4 hrs)</li> </ul>		General Concept of immunopathology (1 hr)
VI (15 Hrs)	At the end of unit students are able to:  Knowledge: Describe different disorders of ureters, bladder, and urethra and their medical, surgical and nursing management.  Skill: Identify the clients with disorders of ureters, bladder and urethra and render efficient care to them.  Attitude: Provide relevant health education related to diet, life style modifications and prevention of recurrence to the clients suffering from urological disorders.		Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of:  • Congenital anomalies of ureters.  • Congenital abnormalities. (2 Hrs)	

		<ul> <li>Urinary tract infections-</li> <li>Urinary dysfunctions- urinary retention, urinary incontinence, urinary reflux,</li> <li>Bladder disorders- neoplasms, calculi, neurogenic bladder, trauma,</li> <li>Benign prostrate hypertrophy (BPH)</li> <li>Ureteral disorders: ureteritis, ureteral trauma, congenital: anomalies of ureters</li> <li>Urethral disorders- tumours, trauma, (13 hrs)</li> </ul>		
VII (25 Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain glomerular disorders & its medical, surgical & nursing management.  Skill: Identify the signs and symptoms of different glomerular disorders and render specific care to these clients.  Attitude: Help client modify their diet, life style, to prevent recurrence and promote renal health.	Glomerular disorders- Etiology, c1inical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of:  • Glomerulo-nephritis- chronic, acute, nephritic syndrome (3 hrs)  • Acute Renal failure and chronic renal failure. (2 hrs)  • Renal calculi (3 hrs)  • Diabetic nephropathy (2 hrs)  • Vascular disorders (3 hrs)  • Renal tuberculosis (2 hrs)  • Polycystic (2 hrs)	<ul> <li>Renal tumors-benign and malignant. (2 hrs)</li> <li>Renal trauma. (1 hr)</li> <li>Renal abscess. (1 hr)</li> <li>Congenital disorder.s (2 hrs)</li> <li>Hereditary renal disorders. (2 hrs)</li> </ul>	
VIII (10 Hrs)	At the end of unit students are able to:  Knowledge: Discuss renal emergencies & its management.  Skill: Recognize renal emergencies & provide competent care.  Attitude: Equip self with modern therapies used in the treatment of renal emergencies.	<ul> <li>Renal Emergencies-Management of Renal emergencies:</li> <li>Anuria</li> <li>Acute renal failure, Poisoning</li> <li>Trauma, Urine retention</li> <li>Acute graft rejection</li> <li>Hematuria</li> <li>Nurse's role (10 hrs)</li> </ul>		

IX (10 Hrs)	At the end of unit students are able to:  Knowledge: Understand different groups of drugs used in the urinary disorders.  Skill: Interpret the effects of various drugs administered.  Attitude: Recognize record & report the effects of drugs.	<ul> <li>Drugs used in urinary disorders:</li> <li>Classification</li> <li>Indications, contraindications, actions and effects, toxic effects</li> <li>Role of nurse. (10 hrs)</li> </ul>				
X (10 Hrs)	At the end of unit students are able to:  Knowledge: Discuss dialysis, preparation & care of patients undergoing dialysis.  Skill: Identify the needs of the clients treated with dialysis and render effective pre, intra and post dialysis care & maintain accurate adequate records of clients undergoing dialysis.  Attitude: Provide necessary health education on life style modification & care of vascular access sites.	<ul> <li>Dialysis:</li> <li>Dialysis- types, Principles, goals</li> <li>Hemodialysis- vascular access sitestemporary and permanent.</li> <li>Peritoneal dialysis. Dialysis Proceduressteps, equipments, maintenance</li> <li>Role of nurse- pre dialysis, intra and post dialysis. Complications. Counseling.</li> <li>Patient education. Records and reports. (9 hrs)</li> </ul>	•	Historical aspects of dialysis. (1 Hr)		
XI (13 Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain the procedure of kidney transplant and preparation for and post operative care of the clients with kidney transplant.  Skill: Identify the bio psychosocial needs of client undergoing kidney transplant.  Render competent care to the clients with kidney transplant.  Recognize early signs of transplant rejection, report & intervene promptly.  Attitude: Educate the client, family members with kidney transplant.	<ul> <li>Kidney transplantation</li> <li>Nursing management of a patient with</li> <li>Kidney transplant:         <ul> <li>Immunology of graft rejections</li> <li>The recipient of a renal transplant</li> </ul> </li> <li>Renal preservations</li> <li>Human –Leucocytic Antigen (HLA) typing matching and cross matching in renal transplantation.</li> <li>Chronic renal transplant rejection.</li> <li>Complication after KTP: Vascular and lymphatic, Urological, cardiovascular, liver and neurological, infectious complication.</li> <li>Work up of donor and recipient for renal transplant. (8 hrs)</li> </ul>	•	Kidney transplantations- a historical review KTP in children and management of pediatric patient with KTP. Ethics in transplants Cadaveric transplantation. (2 hrs) Surgical techniques of renal transplantations. (1 Hr)	•	KTP in developing countries. Results of KTP. Psychological aspect of KTP and organ donations. (2 hr)
XII (6 Hrs)	At the end of unit students are able to:  Knowledge: Understand and explain the need of rehabilitation.  Skill: Initiate& Participate in rehabilitation of client undergoing dialysis & kidney transplant.	<ul> <li>Rehabilitation:</li> <li>Rehabilitation of patient with nephrological problems. Risk factors and prevention. Rehabilitation of patients on dialysis and after kidney transplant.</li> </ul>				

	Attitude: Educate clients and their families on care & modification in lifestyle.	• Rehabilitation of patients after urinary diversions. Family and patient teaching. (6 hrs)		
XIII (10 Hrs)	At the end of unit students are able to:  Knowledge: Describe the management modalities for the children with renal diseases.  Skill: Identify renal diseases in children and render effective care. Prepare children for different diagnostic & treatment procedures.  Attitude: Educate care giver about lifestyle modification required by children with renal disorders.	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, Haemolytic uremic syndrome. Benign recurrent haemturia, nephropathy, wilms' tumour. (9 hrs)	Familial factors in renal diseases in childhood (1 hr)	
XIV (6 Hrs)	At the end of unit students are able to: <b>Knowledge:</b> Describe the equipment and requirements of the dialysis and KTP units. <b>Skill:</b> Participate in establishing policies, procedures in dialysis and KTP units. <b>Attitude:</b> Provide fruitful suggestions for improvement in the functioning and the dialysis and KTP units.	• Philosophy, aims and objectives.	<ul> <li>Ethical and legal issues.</li> <li>Staffing pattern, design and physical plan of Dialysis and KTP units. (1 hr)</li> </ul>	
XV (5 Hrs)	At the end of unit students are able to:  Knowledge: Explain the quality assurance and role of advance nurse practitioner in nephrological nursing.  Skill: Establish and practice professional practice standards in nephrological nursing.  Attitude: Perform nursing audit in nephrology unit.	<ul> <li>Quality assurance in nephrological nursing practice.</li> <li>Role of advance practitioner in nephrological nursing.</li> <li>Professional practice standards.</li> <li>Nursing audit.(4 hrs)</li> </ul>	Quality control in nephrological nursing. (1 hr)	

# AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr.	Area of Experience	No. of	Total	Sr.	Area of Experience	No. of	Total
No.		Weeks	Hours	No.		Weeks	Hours
1	Nephrology Ward	6	180	6	Kidney Transplant unit	2	60
2	Pediatrics	2	60	7	URO OT	2	60
3	Critical Care unit	2	60	8	Emergency Ward	2	60
4	Urology Ward	6	180	9	Uro- Neohro OPDs	4	120
5	Dialysis Unit	4	120	10	Diagnostic Labs	2	60
	Total	20	600		Total	12	360
	Grand Total 32 960						

# **EACHING STRATEGY:**

Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

# **TEACHING METHOD:**

• Lectures, Seminars, Case presentation & discussion, Clinical observation.

#### A.V. AIDS:

• OHP, LCD, Posters, Blackboard, Demonstration.

# **ASSIGNMENTS:** Theory:

Sr.	Assignment	No./Quantity	Marks per Assignment	Total Marks
No.			477.50	100
1	Seminar	Two	1X50	100
			Total Marks	100

#### **Practical:**

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Sr.	Assignment	No./	Marks per	Total
No.		Quantity	Assignment	Marks
1	Teaching learning module preparation (Group work)	One	1X25	25
2	Case study	One	1X50	50
3	Case Presentation	Two	1X50	100
4	Nursing Care Plans	Two	1X25	50
5	Speciality Drugs Study (Minimum 20 drugs)	One	1X25	25
6	Speciality Procedure Evaluation	Two	1X25	50
7	Clinical Performance Evaluation	Two	1X100	200
			Total Marks	500

#### **RECOMMENDED BOOKS:**

- Text Book of Medical Surgical Nursing Brunner and Suddarth.
- Medical Surgical Nursing Clinical Positive Out Joyce and Black.
- Medical Surgical Assessment and Management of clinical problems Lewis, Colliner.
- Medical Surgical Nursing A psychopathologic approach- Luckmann and Sorenson.
- Medical Surgical Nursing A Nursing Process Approach.
- Medical Surgical Nursing B.T. Basvanthappa.
- Medical Surgical Nursing an integrated approach Write L. and Delmar.
- Moroneys Surgery for Nurses Colmer.
- API Text Book Medicine- Shah N.S.
- Pharmacology and Pharmacotherapeutics Satoskat and Bhandarkar.
- Fundamentals of Operation Theatre Services Datta T.K.
- Fundamentals of orthopedics Maheshwari.
- Illustrated Textbook of Dermatology Parischa J.S., Gupta.
- Davidson principles and practice of Medicine.
- The Lippincott Manual of Nursing Practice Nettina, Sandra.

# Subject No.2 CLINICAL SPECIALITY -II

# MEDICAL SURGICAL NURSING SUB SPECIALITY- ORTHOPEDIC NURSING

Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

#### AIM:

This course is designed to assist students in developing expertise and in depth understanding in the field of orthopedic nursing. It will help the students to develop advanced skills for nursing intervention in various orthopedic conditions. It will enable the student to function as orthopedic nurse practioner /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 are able to:

- Appreciate the history and development in the field of orthopedic nursing.
- Identify the psycho social needs of the patient while providing holistic care.
- · Perform physical and psychological assessment of patients with orthopedic conditions and disabilities.
- Describe various disease conditions and their management.
- Discuss various diagnostic tests required in orthopedic conditions.
- Apply nursing process in providing nursing care to patients with orthopedic conditions and those requiring rehabilitation.
- Recognize and manage orthopedic emergencies.
- Describe recent technologies and treatment modalities in the management of patient with orthopedic conditions and those requiring rehabilitation.
- Integrate the concept of family centered, long term care and community based rehabilitation to patients with orthopedic conditions.
- Counsel the patient and their family members.
- Describe various orthopedic and prosthetic appliances.
- Appreciate the legal and ethical issues pertaining to patient with orthopedic conditions and those requiring rehabilitation.
- Appreciate the role of alternative system of medicine in care of patients with orthopedic conditions.
- Incorporate evidence based nursing practice and identify the areas of research in the field of orthopedic nursing.
- Recognize the role of orthopedic nurse practioner and as a member of orthopedic and rehabilitation team.
- Teach orthopedic nursing to undergraduate students and in service nurses.
- Prepare a design and layout of orthopedic and rehabilitation units.

# **CONTENTS:**

#### **Unit I -Introduction:**

Historical perspectives – History and trends in orthopedic nursing. Definition and scope of orthopedic nursing.
 Anatomy and physiology of musculo skeletal system. Posture, body land marks, skeletal system, muscular system, nervous system and main nerves. Healing of injury, bone injury, Repair of ligaments. Systemic response to injury. Ergonomics, body mechanics, biomechanical measures. Orthopedic team.

# **Unit II -Assessment of orthopedic patient:**

• Health Assessment: history, physical examination, inspection, palpation, physical movements, Measurements, Muscle strength testing. Diagnostic studies: Radiological studies, Muscle enzymes, serological studies.

#### **Unit III -Care of patient with devices:**

• Splints, Braces. Various types of plaster casts, various types of tractions, various types of orthopedic beds and mattresses, Comfort devices, Implants in orthopedic, Prosthetics and Orthotics.

#### **Unit IV -Injuries:**

• Trauma and Injuries: Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, Medical, surgical and nursing management of -Trauma, fractures and injuries of: Shoulder and arm, elbow, fore arm, wrist and hand, Hip, thigh, knee ankle and foot, Spine, Multiple traumas, Nerve injury, Vascular injuries, Soft tissue injury, Sports injuries, Amputation.

#### **Unit V -Infection of Bones and Joints:**

• Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, Medical, surgical and nursing management of: Tuberculosis, Osteomyelitis, Arthritis, Leprosy.

#### Unit VI -Rone Traumas

Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis.
 Medical, surgical and nursing management of: Bone tumors- benign, malignant and metastatic. Different types of therapies for tumors.

#### **Unit VII -Deformities:**

• Causes, pathophysiology, clinical types, clinical features, diagnosis. Prognosis. Medical, surgical and nursing management of: Scoliosis, Kyphosis, Lardosis, Congenital disorders; congenital dislocation of hip, patella and knee. Varus and Valgus deformities, Deformities of digits, congenital torticollis. Meningocele, meningomyelocele, spina bifida, Chromosomal disorders. Computer related deformities.

# **Unit VIII -Disorders of the spine:**

• Inter vertebral disc prolapsed Fracture of the spine. Low back disorders- Low back pain, PND, spinal stenosis, spondylosis.

#### **Unit IX - Nutrition/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,
 Osteoporosis, Paget's disease, Gout, Gigantism, Dwarfism, Acromegaly, Therapeutic diet for various orthopedic disorders.

# **Unit X - Neuromuscular 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 and quadriplegia. Muscular dystrophy.

# **Unit XI - Chronic/ Degenerative Diseases of Joints and Autoimmune disorders:**

Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis,
 Medical, surgical and nursing management of: Osteoarthritis. Rheumatoid arthritis. Ankylosing spondylitis.
 Spinal disorders. Systemic Lupus Erythematosus.

# **Unit XII -Orthopedic disorders in children:**

• General and specific consideration on pediatric orthopedics. Genetic disorders. Congenital anomalies. Growth disorders. Genetic counseling. Nurses role in genetic counseling.

#### **Unit XIII -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.

#### **Unit XIV -Pharmacokinetics:**

• Principles of drug administration. Analgesics and anti-inflammatory agents. Antibiotics and antiseptics. Drugs used in orthopedics and neuromuscular disorders. Care of drugs and nurses role.

# **Unit XV - Nurses role in orthopedic conditions:**

• Gait analysis, Urodynamic studies, Prevention of physical deformities. Alteration of body temperature, regulatory system and immune system. Immobilization – cast, splint, braces and tractions. Prevention and care of problems related to immobility. Altered sleep patterns. 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.

*Orthopedic Reconstructive surgeries*: Replacement surgeries Hip, Knee, shoulder, Spine surgeries, Grafts and flaps surgery Deformity correction.

**Physiotherapy:** Concepts, Principles and 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, radiant heat. Chest physiotherapy.

#### **Unit XVI - Rehabilitation:**

• 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 in rehabilitation, Role of nurse in rehabilitation, Legal and ethical issues in rehabilitation nursing, Occupational therapy.

# **Unit XVII -National Policies and programme:**

- National Programme for rehabilitation of persons with disability. National Institutes, artificial limbs manufacturing corporation, District rehabilitation centre and their schemes.
- Regional rehabilitation centre, 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.

# **Unit XVIII -Quality Assurance:**

- Standards, protocols, Policies and Procedures, Nursing Audit, Staffing.
- Design of orthopedic, Physiotherapy and rehabilitation Unit.

# **PRACTICAL:**

- Clinical practice in Orthopedic, Physiotherapy and Rehabilitation Units.
- Application of tractions and plaster casts and removal of traction and plaster casts and other appliances.
- Apply Theories and Nursing Process in the management of patients with orthopedic conditions.
- Provide various types of physical and rehabilitative therapies.
- Provide health education on related disease conditions.
- Unit management plan and design.
- **Procedures to be observed:** X Ray, Ultrasound, MRI, CT Scan/Bone Scan, Arthroscopy, Electro thermally Assisted Capsule shift or ETAC (Thermal Capsulorrhaphy), Fluroscopy, Ekectromyography, Myelography, Discography, Others.
- **Procedures to be assisted:** Blood Transfusion, IV Cannulation and therapy, Ventilation, Various types; of tractions, Orthopedic Surgeries Arthrocentesis, Arthroscopy, Bone lengthening. Arthodesis, Grafting, Fracture fixation, Reconstructive surgeries, Reimplantatin, replantation, spinal decompression, transplantation of bone, muscles or articular cartilage, autografting, allografting, Intra articular and intra Osseous injection, Advance Life Support.
- **Procedures to be performed:** Interpretation of X ray film, Application and removal of splints, casts, braces, Care of traction skin and skeletal traction, pin site care, Cold therapy, Heat therapy, Hydrotherapy, Therapeutic exercises, Use of TENS (Trans cutaneous electrical nerve stimulation), Techniques of transportation, Crutch walking, walkers, wheel chair, Use of devices for activities of daily living and prevention of deformities, Administration of drugs: IV injections, IV cannulation and blood transfusion, procedure for prevention of infection –disinfection and sterilization, surveillance, fumigation, Special skin/part preparation for orthopedic surgeries, surgical dressings, debridement, Bladder and bowel training.

# CLINICAL SPECIALITY -II

# MEDICAL SURGICAL NURSING

# SUBSPECIALITY - ORTHOPEDIC NURSING

Unit				
No. & Hours	Objectives	Must Know		
I (5Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Discuss the history & trends in orthopedic nursing. <b>Skill:</b> Apply ergonomics and knowledge of body mechanics in nursing practice. <b>Attitude:</b> Contribute effectively as a team member in orthopedic health team.	<ul> <li>Introduction:</li> <li>Definition and scope of orthopedic nursing.</li> <li>Posture, body land marks, skeletal system, muscular system, nervous system and main nerves.(2Hrs)</li> <li>Healing of injury, bone injury.</li> <li>Repair of ligaments, Systemic response to injury. Ergonomics, body mechanics, biomechanical measures, Orthopedic team.(1Hr)</li> </ul>	Anatomy and physiology of musculo skeletal system. (1Hr)	Historical perspectives – History and trends in orthopedic nursing. (1Hr)
II (8Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Recall assessment of orthopedic client. <b>Skill:</b> Perform assessment correctly. <b>Attitude:</b> Interpret results and correlate with differential diagnosis.	Assessment of orthopedic patient:  • Health Assessment: history, physical examination, inspection, palpation, physical movements, Measurements, Muscle strength testing.(5Hrs)	Diagnostic studies:     Radiological studies,     Muscle enzymes,     serological studies.(3Hrs)	
III (10Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Describe various devices used for orthopedic patients. <b>Skill:</b> Use orthopedic appliances correctly for patients. <b>Attitude:</b> Appreciate use of devices for comfort & as treatment.	Care of patient with devices:  Splints, Braces. Various types of plaster casts. Various types of tractions. Various types of orthopedic beds &mattresses. Comfort devices.(7 Hrs)	<ul> <li>Implants in orthopedics</li> <li>Prosthetics and Orthotics.(3 Hrs)</li> </ul>	
IV (15Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Describe causes, pathophysiology, diagnosis & management of various injuries. <b>Skill:</b> Render appropriate & effective nursing care to clients with injury. <b>Attitude:</b> Recognize importance of nursing care in recovery and disability limitation.	<ul> <li>Injuries:</li> <li>Trauma and Injuries: Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis.</li> <li>Medical, surgical and nursing management of: Trauma, fractures and injuries of: Shoulder and arm, elbow, fore arm, wrist and hand, Hip, thigh, knee ankle and foot.Spine, Head injury, Chest injury.Multiple traumas, Nerve injury.</li> </ul>		

V (8Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Discuss causes, pathophysiology, diagnosis & management of various infections of bones & joints. <b>Skill:</b> Follow aseptic technique while caring. <b>Attitude:</b> Contribute in prevention of infection	Vascular injuries, Soft tissue injury. Sports injuries, Amputation. (15 Hrs)  Infection of Bones and Joints:  • Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, Medical, surgical and nursing management of:  • Tuberculosis.  • Leprosy (5 Hrs)	Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, Medical, surgical and nursing management of: Arthritis	
VI (5Hrs)	✗ infection.  At the end of the course the students are able to –  Knowledge: Explain causes, pathophysiology, diagnosis & management of various types of bone tumors.  Skill: Provide quality care to clients suffering from bone tumors.  Attitude: Demonstrate positive attitude towards clients suffering from bone tumor.	Bone Traumas:  • Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis.  Medical, surgical and nursing management of:  • Bone tumors- benign, malignant and metastatic. (3 Hrs)	Osteomyelitis.(3 Hrs)  • Different types of therapies for tumors. (2 Hrs)	
VII (10Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Understand causes, pathophysiology, diagnosis & management of various types of deformities. <b>Skill:</b> Acquire skill in providing quality care to client with orthopedic deformities. <b>Attitude:</b> Maintain individual respect of client with deformities.	Deformities:  • Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, Medical, surgical and nursing management of:  ○ Scoliosis, Kyphosis, Lardosis.  ○ Congenital disorders; congenital dislocation of hip, patella and knee. Varus and Valgus deformities. Deformities of digits Meningocele, meningomyelocele, spina bifida(7Hrs)	Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis,     Medical, surgical and nursing management of Computer related deformities.     (2 Hrs)	<ul> <li>Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis,</li> <li>Medical, surgical and nursing management of: Chromosomal disorders</li> <li>&amp; Congenital torticollis.</li> <li>(1 Hr)</li> </ul>
VIII (5Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Explain various disorders of spine. <b>Skill:</b> Render quality services to client <b>Attitude:</b> Consider limitation of client.	<ul> <li>Disorders of the spine:</li> <li>Inter vertebral disc prolapsed</li> <li>Fracture of the spine.</li> <li>Low back disorders- Low back pain, PND, spinal stenosis, spondylosis. (5 Hrs)</li> </ul>		
IX (5Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Discuss relationship of nutritional, metabolic &endocrine disorders with orthopedic nursing. <b>Skill:</b> Educate client and relatives for corrective nutritional habits. <b>Attitude:</b> Recognize importance of habits, culture & religion, likes & dislikes while preparing and advising therapeutic diet.	Nutrition/Metabolic and Endocrine Disorders:  Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, Medical, surgical and nursing management of: Rickets, Scurvy, Osteomalacia. Osteoporosis, Paget's disease, Gout. Gigantism & Dwarfism, Acromegaly. (3Hrs)	Therapeutic diet for various orthopedic disorders. (1 Hr)	Hyper vitaminosis A and D.     (1 Hr)

X (8Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Understand & discuss neuromuscular disorders. <b>Skill:</b> Provide quality care to client with neuromuscular disorders. <b>Attitude:</b> Consider limitations of client and motivate & educate to adopt devices to improve quality of life.	Neuromuscular Disorders:  Causes, pathophysiology,clinical types, clinical features, diagnosis, prognosis, Medical, surgical and nursing management of: Poliomyelitis. Cerebral Palsy. Paraplegia, hemiplegia and quadriplegia. Muscular dystrophy.(5 Hrs)	<ul> <li>Myasthenia gravis.</li> <li>Peripheral nerve lesion.</li> <li>(2 Hrs)</li> </ul>	O Spina bifida. (1 Hr)
XI (8Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Explain degenerative & autoimmune diseases of skeletal system. <b>Skill:</b> Provide quality care. <b>Attitude:</b> Consider limitation & feelings of client.	Chronic/ Degenerative Diseases of Joints and Autoimmune disorders:  Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, Medical, surgical and nursing management of:  Osteoarthritis, Rheumatoid arthritis.  Spinal disorders. (6 Hrs)	<ul> <li>○ Systemic Lupus         Erythematosus         ○ Ankylosing spondylitis (2         Hrs)     </li> </ul>	
XII (5Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Discuss orthopedic problems in children. <b>Skill:</b> Demonstrate the skill of child and orthopedic nursing <b>Attitude:</b> Appreciate parent's role and participation in care.	<ul> <li>Orthopedic disorders in children:</li> <li>General and specific consideration on pediatric orthopedics. Congenital anomalies. Growth disorders. Nurses role in genetic counseling.         <ul> <li>(3 Hrs)</li> </ul> </li> </ul>	• Genetic disorders. (1 Hr)	• Genetic counseling. (1 Hr)
XIII (5Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Understand orthopedic problems in old age.  Skill: Provide appropriate care to aged. <b>Attitude:</b> Maintain dignity & respect.	Geriatric Problems: Geriatric population, types of disabilities, causes, treatment and management, hospitalization, rest, physiotherapy, involvement of family members, social opportunities. (4 Hrs)	• Care at home: involvement of family and community, follow up care & rehabilitation.(1 Hr)	
XIV (6Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Know the drugs used in orthopedics. <b>Skill:</b> Administer drugs correctly. <b>Attitude:</b> Evaluate effects of drugs.	<ul> <li>Pharmacokinetics:</li> <li>Principles of drug administration.</li> <li>Analgesics and anti-inflammatory agents.</li> <li>Antibiotics and antiseptics.</li> <li>Care of drugs and nurses role.(5 Hrs)</li> </ul>	Drugs used in orthopedics and neuromuscular disorders.     (1 Hr)	
XV (30Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Understand and discuss the role of nurse in orthopedic team. <b>Skill:</b> Demonstrate skill in providing care to client with orthopedic disorders. <b>Attitude:</b> Recognize and appreciate physical, physiological, psychosocial and spiritual needs of the client.	<ul> <li>Nurses role in orthopedic conditions:</li> <li>Gait analysis. Urodynamic studies.</li> <li>Prevention of physical deformities. Alteration of body temperature, regulatory system and immune system.</li> <li>Immobilization – cast, splint, braces and tractions. Prevention and care of problems related to immobility. Altered sleep patterns.</li> </ul>	<ul> <li>Orthopedic Reconstructive surgeries:</li> <li>Replacement surgeries Hip, Knee, shoulder.</li> <li>Spine surgeries.</li> <li>Grafts and flaps surgery.</li> <li>Deformity correction.</li> <li>Mobilization Exercises:</li> </ul>	<ul> <li>Physiotherapy:</li> <li>Concepts, Principles and purpose.</li> <li>Types of gaits: Non weight bearing, partial weight bearing, four point crutch, tripoid, walking with sticks, calipers.</li> </ul>

		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.  (20 Hrs)	Types, Re education in walking, Crutch walking, wheel chair, transfer techniques.  (6 Hrs)	<ul> <li>Forms of therapies: Hydrotherapy, electrotherapy, wax bath, heat therapy, radiant heat.</li> <li>Chest physiotherapy. (4 Hrs)</li> </ul>
XVI (8Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Explain importance of & measures of rehabilitation. <b>Skill:</b> Contribute effectively as a team member. <b>Attitude:</b> Appreciate importance of alternative therapies.	<ul> <li>Rehabilitation:</li> <li>Principles of rehabilitation, definition, philosophy, process. Various types of therapies. Rehabilitation counseling. Preventive and restorative measures. Challenges in rehabilitation. Role of nurse in rehabilitation. (5 Hrs)</li> </ul>	<ul> <li>Community based rehabilitation (CBR).</li> <li>Occupational therapy. <ul> <li>(1 Hr)</li> </ul> </li> </ul>	<ul> <li>Special therapies and alternative therapies.</li> <li>Legal and ethical issues in rehabilitation nursing. (2 Hrs)</li> </ul>
XVII (5Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Discuss National Policies & Programmers for rehabilitation. <b>Skill:</b> Contribute in rehabilitation of client. <b>Attitude:</b> Recognize importance of team efforts & becomes useful team member.	National Policies and programme:  • National Programme for rehabilitation of persons with disability. National Institutes, artificial limbs manufacturing corporation, District rehabilitation centre and their schemes. Rehabilitation health team and different categories of team members. (3Hrs)	<ul> <li>Regional rehabilitation centre.</li> <li>Public policy in rehabilitation nursing.</li> <li>Rehabilitation council of India (1Hr)</li> </ul>	Legal and ethical aspects in orthopedic nursing.     (1 Hr)
XVIII (4Hrs)	At the end of the course the students are able to – <b>Knowledge:</b> Understand importance of quality care & participate in improving quality of care. <b>Skill:</b> Evaluate quality of care. <b>Attitude:</b> Contribute in research & organize in service education for colleagues 7 subordinates.	<ul> <li>Quality Assurance:</li> <li>Standards, protocols, Policies and Procedures. Nursing Audit. Staffing. (3 Hrs)</li> </ul>		Design of orthopedic,     Physiotherapy and     rehabilitation Unit.     (1Hr)

#### AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr.	Area of Experience	No. of	Total	Sr.	Area of Experience	No. of	Total
No.		Weeks	Hours	No.		Weeks	Hours
1	Orthopedic Ward	8	240	5	Casualty/Emergency and Trauma	4	120
2	Orthopedic Operation Theatre	4	120	6	Rehabilitation unit	2	60
3	Neurosurgical Ward	2	60	7	Physiotherapy Unit	4	120
4	Orthopedic OPD	4	120	8	Pediatric/Pediatric Surgery Unit	2	60
				9	Field visit	2	60
	Total 18 540 Toal 14 420					420	
Grand Total 32						960	

**TEACHING STRATEGY:** Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960 **TEACHING METHOD:** Lectures, Seminars, Case presentation & discussion, Clinical observation.

A.V. AIDS: OHP, LCD, Posters, Blackboard, Demonstration

**ASSIGNMENTS: Theory:** 

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Seminar	Two	1X50	100
			Total Marks	100

#### **Practical:**

	2.			
Sr. No.	Assignment	No./Quantity	Marks per	Total Marks
			Assignment	
1	Teaching learning module preparation (Group work)	One	1X25	25
2	Case study	One	1X50	50
3	Case Presentation	Two	1X50	100
4	Nursing Care Plans	Two	1X25	50
5	Speciality Drugs Study (Minimum 20 drugs)	One	1X25	25
6	Speciality Procedure Evaluation	Two	1X25	50
7	Clinical Performance Evaluation	Two	1X100	200
		_	Total Marks	500

#### **RECOMMENDED BOOKS:**

- Text Book of Medical Surgical Nursing Brunner and Suddarth.
- Medical Surgical Nursing Clinical Positive Out Joyce and Black.
- Medical Surgical Assessment and Management of clinical problems Lewis, Colliner.
- Medical Surgical Nursing A psychopathologic approach- Luckmann and Sorenson.
- Medical Surgical Nursing A Nursing Process Approach.
- Medical Surgical Nursing B.T. Basvanthappa.
- Medical Surgical Nursing an integrated approach Write L. and Delmar.
- Moroneys Surgery for Nurses Colmer.
- API Text Book Medicine- Shah N.S.
- Pharmacology and Pharmacotherapeutics Satoskat and Bhandarkar.
- Fundamentals of Operation Theatre Services Datta T.K.
- Fundamentals of orthopedics Maheshwari.
- Illustrated Textbook of Dermatology Parischa J.S., Gupta.
- Davidson principles and practice of Medicine.
- The Lippincott Manual of Nursing Practice Nettina, Sandra.
- B.T. Basawanthappa, 'Orthopedics for Nurses', Jaypee Brothers, New Delhi.
- David Dandy and Dennis Edwards,' Essential Orthopedic and Trauma', Langman, Singapore.
- Ebenezar's John,' Text Book of Orthopedics', Jaypee Brothers, New Delhi.
- Ronald MaRae, 'Clinical Orthopedic Examination', Churchill Livingstone.

# Subject No. 2 CLINICAL SPECIALITY- II

# MEDICAL SURGICAL NURSING

SUB SPECIALITY-GASTRO ENTEROLOGY NURSING

Total: 1110 Hours Theory: 150 Hours Practical: 960 Hours

#### AIM:

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

#### **OBJECTIVES:**

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

- Appreciate trends and issues related to gastroenterology and gastroenterological Nursing.
- Review the anatomy and physiology of gastrointestinal system.
- Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of patients with gastroenterological disorders.
- Perform gastroenterological assessment and assist in diagnostic procedures.
- Describe the concepts and principles of gastroenterology nursing.
- Describe the various drugs used in gastroenterology and nurses responsibility.
- Assist in various therapeutic and surgical procedures in gastroenterology nursing.
- Demonstrate advance skills/competence in managing patients with gastroenterological disorders following nursing process approach.
- Identify psychosocial problems of patients with disabilities and assist patients and their family to cope with emotional distress, spiritual, grief and anxiety.
- Participate in preventive, promotive and rehabilitative services for the patients with gastroenterological disorders.
- Explain the legal and ethical issues related to brain death, organ transplantation and practice of gastroenterology nursing.
- Incorporate evidence based nursing practice and identify the areas of research in the field of gastroenterological disorders nursing.
- Organize and conduct in service education program for nursing personnel.
- Develop standards of care for quality assurance in gastroenterological nursing practice.
- Identify the sources of stress and manage burnout syndrome among health care providers.
- Teach and supervise nurses and allied health workers.
- Plan and develop physical layout of gastroenterological intensive care unit.

#### **CONTENTS:**

#### **Unit I -Introduction:**

• Historical development: trends and Issues In the field of gastro enterology. Gastro enterological problems. Concepts, principles and nursing perspectives. Ethical and legal issues. Evidence based nursing and its application in gastrointestinal nursing (to be incorporated in all the units)

#### **Unit II -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 gastro enterology.
- Alternate system of medicine/complementary therapies.

#### Unit III -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.

#### **Unit IV -Assessment and diagnostic measures:**

History taking, Physical assessment, psychosocial assessment, Diagnostic tests, and Radiological

- studies: Upper GIT- barium swallows lower GIT- Barium enema, Ultra sound, Computed tomography, MRI.
- Cholangiography: Percutaneous transheptatic, Cholangiogram (PTC), Magnetic Resonance Cholangio pancreotography (MRCP), Nuclear imaging scans (scintigraphy), Endoscopy, Colonoscopy, Proctosigmoidoscopy, Endoscopic Retrogrde Cholongio pancreotography (ERCP), Endoscopic ultrasound, Peritonoscopy (Laproscopy), Gastric emptying studies.
- Blood chemistries: Serum amylase, serum lipase. 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 role in diagnostic tests.

#### Unit V -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 diarrhea.

• Anorectal Conditions: Hemorrhoide, Anal fissure, anal fistula, Abscess, Strictures, Rectal prolapse, Pruritis ani, Pelonidal disease, anal condylom & warts.

#### Unit VI -Disorder of liver, pancreas gall bladder and nursing management:

- Disorders of liver biliary tract, Viral. Hepatitis A, B, C, D & E, Toxic hepatitis, Cirrhosis of liver, liver failure, Liver transplantation, Non cirrhotic portal fibrosis, Liver abscess, Parasitic and other cysts of the liver.
- O Disorders of the Gall Bladder and Bile Duct:
- Cholecystitis, Cholelitheasis, Choledocholilethiasis
- Disorders of the pancreas: Pancreatitis, Benign tumors of islet cells
- Disorders of the Peritoneum, Infections of the peritoneum, surgical peritonitis, Spontaneous bacterial peritonitis, Tuberculosis peritonitis.
- Disorders of the Diaphragm, Diaphragmatic hernia, Congenital hernias,
- o Paralysis of diaphragm, Tumors of the diaphragm, Hiccups.

#### **Unit VII -Gastro intestinal emergencies and nursing interventions:**

- Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, Medical, surgical and nursing management of:
- o Esophageal varices, Ulcer perforation, Acute cholecystitis Diverticulitis
- Fulminant hepatic failure, Biliary obstruction, Bowel obstruction, Gastroenteritis, Intussusceptio, Acute intestinal obstruction, perforation, Acute pancreatitis, Cirrhosis of liver complications, Liver, spleen, stomach pancreatic, mesenteric, bowel and greater vessel injuries, Acute appendicitis / peritonitis, Acute abdomen, Food poisoning.

#### **Unit VIII - Congenital Anomalies of Esophagus:**

Esophageal atresia, Tracheo esophageal fistula, Esophageal stenosis, Esophageal duplications.
 Dysphagia - Lusoria - aberrent right subclavian artery compressing esophagus.
 Esophageal rings - schalzkiring, esophageal webs.

#### **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

#### **Congenital Anomalies of Duodenal**

• Abdominal wall defects (omphalocele and Gastroschisis), Meckel's diverticulum, Intestinal atresia, Hirschsprung's disease.

#### **Unit IX -Pharmo Kinetics:**

• Drugs used in GIT, Principles of administration, Roles responsibilities of nurses. Drugs in Peptic ulcer disease, Proton Pump inhibitors, H<sub>2</sub> Receptor Antagonists, 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 X -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 and management, Eating disorders- anorexia nervosa, bulimia nervosa, Recent advances in nutrition.

#### **Unit XI -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.

#### **Unit XII -Administration and management of GE unit:**

- Design & layout, Staffing, Equipment, supplies. Infection control. Standard safety measures.
- Quality Assurance:-Nursing audit -records /reports, Norms, policies, protocols and Practice standards.

#### Unit XIII -Education and training in GE care:

• Staff orientation, training and development, In-service education program, Clinical teaching programs.

#### **PRACTICALS:**

- **Procedures to be Assisted:** Endoscopy room Upper G.I Endoscopy (Diagnostic & Therapeutic), Sigmoid copy, Colonoscopy, Polipectomy, Endoscopic retrograde cholangio pancreatiography (ERCP), Liver Biopsy, Percutaneous catheter drainage (PCD) of Pseudocyst pancreas, Abdominal paracentesis, Percutaneous aspiration of liver abscess, GE Lab: PT, HbsAg, Markers A,B,C virus, CBP, ESR, Stool Test.
- **Procedures to be performed:** History collection and physical Assessment, RT intubation/extubation/aspiration/suction, Gastric lavage and gavages, Bowel wash, Therapeutic diets, Ostomy feeding, Stoma care, Monitoring vital parameters, Plan of in service education programme for nursing staff and class IV employees, Counseling and health education.

#### CLINICAL SPECIALITY- II

# MEDICAL SURGICAL NURSING SUB SPECIALITY-GASTRO ENTEROLOGY NURSING

Unit No.		Contents wit	h Distributed Hours	
& Hours	<b>Objectives</b>	Must know	Desirable to Know	Nice to Know
I (5 Hrs)	At the end of the unit the students are able to:  Knowledge: Understand and explain various problems of GIT.  Skill: Practice principles of nursing care while caring for clients.  Attitude: Incorporate legal and ethical aspects of nursing in practice and strive to render evidence based nursing care.	<ul> <li>Introduction:</li> <li>Gastroenterological problems. Concepts, principles and nursing perspectives. Ethical and legal issues. Evidence based nursing and its application in gastrointestinal nursing (to be incorporated in all the units) (4 hrs)</li> </ul>	Trends and Issues In the field of gastroenterology.     (1Hr)	Historical development
II (5 Hrs)	At the end of the unit the students are able to  Knowledge: Illustrate risk factors associated with GE conditions.  Skill: Identify the risk factors for GE conditions among clients and educate them about prevention of these factors.  Attitude: Help clients with GE conditions to adapt to changed lifestyles to prevent recurrence of GE conditions.	<ul> <li>Epidemiology:</li> <li>Risk factors associated with GE conditions-Hereditary Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic considerations. (2 hrs)</li> <li>Health promotion, disease prevention, life style modification and its implications to nursing. (2 hrs)</li> </ul>	National health programmes related to gastroenterology.     Alternate system of medicine/complementary therapies. (1 hr)	
III (5 Hrs)	At the end of the unit the students are able to <b>Knowledge:</b> Understand and explain the structure and functions of GIT. <b>Skill:</b> Practice communication of knowledge about healthy GIT. <b>Attitude:</b> Educate clients regarding functioning of GIT.	Review of anatomy and physiology of gastrointestinal system:  • Gastrointestinal system  • Liver, billiary and pancreas.  • Immunology specific to GI system.  (3 hrs)	Gerontologic considerations.     (1 hr)	• Embryology of GI system (1 hr)
IV (15 Hrs)	At the end of the unit the students are able to: <b>Knowledge:</b> Describe the importance of relevant history and assessment in GI conditions.	<ul> <li>Assessment and diagnostic measures:</li> <li>History taking (1 hr)</li> <li>Diagnostic tests:</li> <li>Radiological studies: Upper GIT- barium swallow, lower GIT- Barium enema, Ultra sound, CT scan, MRI. Endoscopy,</li> </ul>	<ul> <li>Physical assessment, psychosocial assessment.</li> <li>Interpretation of diagnostic measures. (2 hrs)</li> </ul>	<ul> <li>Nuclear imaging scans (scintigraphy)</li> <li>Cholangiography: Percutaneous transheptatic Cholangiogram (PTC)</li> </ul>

Skill: Prepare the client and assist the physician in various diagnostic procedures.  Attitude: Interpret the reports of the diagnostic tests.	Colonoscopy, Proctosigmoidoscopy Endoscopic Retrograd Cholongiopancreotography (ERCP), Endoscopic ultrasound. Peritonoscopy (Laproscopy). Gastric emptying studies  Blood chemistries: Serum amylase, serum lipase. 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. (8 hrs)  Nurse's role in diagnostic tests. (2 hrs)	Magnetic Resonance Cholangiopancreotogr aphy (MRCP) (2 Hrs)
V (25 Hrs)  At the end of the unit the students are able to Knowledge: Understand and explain the etiology, pathopyhsiology, clinical manifestations and medical and surgical management of clients with gastro intestinal disorders.  Skill: Renders competent comprehensive medical and surgical care to the clients with GE disorders.  Attitude: Provide education related to dietary restrictions and healthy habits to the clients with disorders of GIT.	<ul> <li>Gastro intestinal disorders and nursing management: Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, Medical, surgical and nursing management of:</li> <li>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. (5 hrs)</li> <li>Disorders of the oesophagus: Reflux oesophagitis, Oesophageal achalasia, Oesophageal varices, Hiatus hernia, Diverticulum (5 hrs)</li> <li>Disorders of the stomach and duodenum: Gastritis, Peptic. ulcer, Dumping of the stomach, Food poisoning, idiopathic gastroparesis, Aerophagia and belching syndrome, Idiopathic cyclic nausea and vomiting, Rumination syndrome, Functional dyspepsia, Chronic Non specific (functional) abdominal pain. (5 hrs)</li> <li>Disorders of the small intestine: Malabsorption syndrome - tropical sprue, Gluten - sensitive enteropathy (Coeliac</li> </ul>	

		disease), Inflammatory diseases of intestines and abdomen: appendicitis, Peritonitis, Intestinal obstruction, Abdominal TB, Gastrointestinal polyposis syndrome, Chronic inflammatory bowel disease, Ulcerative colitis, 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	
VI (15 Hrs)		<ul> <li>Anorectal Conditions: Hemorrhoide, Anal fissure, anal fistula, Abscess, Strictures, Rectal prolapse, Pruritis ani, Pelonidal disease, anal condylomas, Warts. (2 hrs)</li> <li>Disorder of liver, pancreas gall bladder and nursing management: Disorders of</li> </ul>	
	Attitude: Educate clients regarding functioning of gall bladder, liver and pancreas in simple language.	liver biliary tract. Viral Hepatitis - A, B, C, D & E. Toxic hepatitis. Cirrhosis of liver, liver failure, Liver transplantation. Non cirrhotic portal fibrosis. Liver abscess, Parasitic and other cysts of the liver. (10 hrs)  Disorders of the Gall Bladder and Bile Duct:  Cholecystitis, Cholelithiasis, Cholelithiasis.  Disorders of the pancreas: Pancreatitis.  Benign tumors of islet cells. 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. (5 hrs)	
(15 Hrs)	At the end of the unit the students are able to <b>Knowledge:</b> Describe gastrointestinal emergencies and their management. <b>Skill:</b> Identify need for and render	Gastro intestinal emergencies and nursing interventions: Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, Medical, surgical and nursing management of: Esophageal varices,	

	emergency care to clients suffering from gastrointestinal emergencies in all clinical and community settings.  Attitude: Create awareness to prevent GI emergencies and first aid in GI emergencies among masses.	Ulcer perforation, Acute cholecystitis, Diverticulitis, Fulminant hepatic failure. Biliary obstruction, Bowel obstruction, Gastroenteritis, Intussusceptions, Acute intestinal obstruction, perforation, Acute pancreatitis, Cirrhosis of liver complications, Liver, spleen, stomach pancreatic, mesenteric, bowel and greater vessel injuries, Acute appendicitis / peritonitis, Acute abdomen. Food poisoning. (15 hrs)	
VIII (15 Hrs)	At the end of the unit the students are able to  Knowledge: Understand and explain congenital anomalies of GIT and their management.  Skill: Identify congenital anomalies and provide comprehensive care to clients suffering them.  Attitude: Strive to create awareness about causes of congenital malformations among women.	Congenital Anomalies of Esophagus:     Esophageal atresia, Tracheoesophageal fistula, Esophageal stenosis, Esophageal duplications. Dysphagia - Lusoria - aberrent right subclavian artery compressing esophagus. Esophageal rings - schalzkiring Esophageal webs (4 hrs)  Congenital Anomalies of Stomach:     Gastric atresia, Micro gastria, Gastric diverticulum, Gastric duplication, Gastric teratoma, Gastric volvulus, Infantile hypertrophic pyloric stenosis, Adult hypertrophic pyloric stenosis (4 hrs)  Congenital Anomalies of Duodenal     Duodenal Atresia or stenosis, Annular pancreas, Duodenal duplication cysts, Malrotation and mid gut volvolus (3hrs)  Congenital Anomalies of Intestine     Abdominal wall defects (omphalocele and Gastroschisis),Meckel's diverticulu, Intestinal atresia, Hirschsprung's disease. (4 hrs)	
IX (15 Hrs)	At the end of the unit the students are able to:  Knowledge: Describe the pharmacodynamics & pharmacokinetics of various groups of drugs used for the treatment of GIT disorders.  Skill: Practice the principles of	<ul> <li>Pharmo kinetics</li> <li>Drugs used in GIT, Principles of administration, Roles responsibilities of nurses, Drugs in Peptic ulcer disease Proton Pump inhibitors, H<sub>2</sub> Receptor Antagonists, Cytoprotective Agents, Drugs used in Diarrhea, Drugs used in constipation, Drugs used in Inflammatory</li> </ul>	

	administration of medications accurately for the clients. <b>Attitude:</b> Incorporate the knowledge of food –drug interactions while administering drugs for the clients with GIT disorders.	Bowel Disease, Aminosalicylates, Corticosteroids, Immunomodulators, Chemotherapy, Antibiotics, Anti emetics, Anticholinergics, Antihistaminics Antihelminthics, Vitamin Supplements. (15 hrs)		
	At the end of the unit the students are able to <b>Knowledge:</b> Understand the importance of nutrition and disturbances in nutritional status due to disorders of GIT. <b>Skill:</b> Maintain nutritional balance in different conditions of GI disorders. <b>Attitude:</b> Communicate the nutrition education in different GIT conditions.	Nutrition and nutritional problems related to GI system: Nutritional assessment and nursing interventions. Therapeutic diets. Malnutrition- etiology, clinical manifestations and management. Tube feeding, parenteral nutrition, total parenteral nutrition. Obesity- etiology, clinical manifestations and management. Eating disorders- anorexia nervosa, bulimia nervosa. (13 hrs)	Recent advances in nutrition. (2hrs)	Adverse reactions between drugs and various foods. (1 hr)
XI (14 Hrs)	At the end of the unit the students are able to <b>Knowledge:</b> Understand and explain the structure and functions of GIT. <b>Skill:</b> Practice communication of knowledge about healthy GIT. <b>Attitude:</b> Educate clients regarding functioning of GIT in simple language.	Malignant disorders of gastro intestinal system: Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, Medical, surgical, other modalities and nursing management of: Esophageal, Gastric, Carcinoma of bowel - Small bowel, Colorectal and Anal carcinoma, Liver, biliary tract and pancreatic carcinoma. (11 hrs)	Malignancy of oral cavity, Lip, Tongue, buccal mucosa, oropharynx, Salivary gland.(3 hrs)	
XII (3 Hrs)	At the end of the unit the students are able to <b>Knowledge:</b> Rationalize the equipment and supplies needs in a GE unit. <b>Skill:</b> Indent and utilize the equipment and supplies in GE unit effectively and efficiently for the patients. <b>Attitude:</b> Manage the GE unit costeffectively & prevents nosocomial infection.	Administration and management of GE unit: Equipment, supplies. Infection control; Standard safety measures. Quality Assurance:-Nursing audit -records /reports, Norms, policies and protocols. Practice standards. (2 hrs)	Staffing	• Design & layout. (1 Hr)
XIII (3 Hrs)	At the end of the unit the students are able to <b>Knowledge:</b> Understand the need for staff development in GE care. <b>Skill:</b> Participate & organize in-service education programme, <b>Attitude:</b> Participate in policy making.	Education and training in GE care: Staff orientation, training and development. In-service education program. Clinical teaching programs. (3 Hrs)		

#### AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr. No.	Area of Experience	No. of Weeks	Total Hours	Sr. No.	Area of Experience	No. of Weeks	Total Hours
1	Diagnostic Labs	2	60	6	OT	2	60
2	Emergency and Casualty	3	90	7	ICU	4	120
3	Liver transplant Unit	1	30	8	Pediatric Gastroenterology	2	60
4	GE Medical Ward	6	180	9	Oncology	2	60
5	GE Surgical Ward	8	240	10	GE OPD	2	60
	Total	20	600		Total	12	360
			•	•	Grand Total	32	960

#### **TEACHING STRATEGY:**

• Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

#### **TEACHING METHOD:**

• Lectures, Seminars, Case presentation & discussion, Clinical observation.

#### A.V. AIDS:

OHP, LCD, Posters, Blackboard, Demonstration

#### **ASSIGNMENTS:**

#### Theory:

Sr. No.	Assignment	No./Quantity	Marks per Assignment	Total Marks
1	Seminar	Two	1X50	100
	100			

#### **Practical:**

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Sr. No.	Assignment	No./	Marks per	Total
		Quantity	Assignment	Marks
1	Teaching learning module preparation (Group work)	One	1X25	25
2	Case study	One	1X50	50
3	Case Presentation	Two	1X50	100
4	Nursing Care Plans	Two	1X25	50
5	Speciality Drugs Study (Minimum 20 drugs)	One	1X25	25
6	Speciality Procedure Evaluation	Two	1X25	50
7	Clinical Performance Evaluation	Two	1X100	200
			Total Marks	500

#### **RECOMMENDED BOOKS:**

- Text Book of Medical Surgical Nursing Brunner and Suddarth.
- Medical Surgical Nursing Clinical Positive Out Joyce and Black.
- Medical Surgical Assessment and Management of clinical problems Lewis, Colliner.
- Medical Surgical Nursing A psychopathologic approach- Luckmann and Sorenson.
- Medical Surgical Nursing A Nursing Process Approach.
- Medical Surgical Nursing B.T. Basvanthappa.
- Medical Surgical Nursing an integrated approach Write L. and Delmar.
- Moroneys Surgery for Nurses Colmer.
- API Text Book Medicine- Shah N.S.
- Pharmacology and Pharmacotherapeutics Satoskat and Bhandarkar.
- Fundamentals of Operation Theatre Services Datta T.K.
- Fundamentals of orthopedics Maheshwari.

- Illustrated Textbook of Dermatology Parischa J.S., Gupta.
- Davidson principles and practice of Medicine.

- The Lippincott Manual of Nursing Practice Nettina, Sandra.

  P.G. Morton, 'Critical Care Nursing' 8<sup>th</sup> Edition (2005), Lippincott Williams and Welkins.

  Dennis L.K., 'Harrion's Principles of Internal Medicine' volume 1 & 2,6<sup>th</sup> Edition, McGraw-Hill Medical Publishing house.
- Potter & Perry, 'Fundamentals of Nursing', 6<sup>th</sup> Edition, Mosby & Co.
- Smelters',' Brunner & Suddarths Text Book of Medical surgical Nursing' 10<sup>th</sup> Edition, Lippincott Williams.
- Rang H.P., 'Pharmacology' 5<sup>th</sup> Edition, Churchill, Livingstone.

# Annexure I Evaluation Formats for Practical Examination

# Datta Meghe Institute of Medical Sciences (Deemed) University S.R.M.M. College of Nursing, Sawangi (Meghe), Wardha M.Sc. Nursing First Year Winter/Summer, 20 Examination

**Subject: Nursing Education – Practical Examination** 

Examination Seat No.					
Subject for Practice Teaching:					
Topic:					
Participant Group:					
Date and Time of Examination:	Maximum Marks: 25				

# Internal Examiner/External Examiner

Sr. No.	Evaluation Criteria	Sub Criteria	Allotted Marks	Marks Obtained
I	Developing Objectives	Relevance		
	of Lesson Plan	Language	3	
II	Contents	Adequacy and Relevance		
		Organization of Contents – Sequence & Continuity	4	
III	Presentation	Introduction – Interesting, Captive, Related to topic.	9	
		Depth of knowledge, Clarification of ideas with examples and illustrations.		
		Anticipation of doubts and its clarification		
		Questions and questioning techniques		
		Integration and correlation of related topics		
		Teaching learning atmosphere – Live, Motivates students to participate, interesting & language.		
IV	Personal Qualities	Appearance and dress, mannerism, Gestures, Confidence Level, Voice Quality and Modulations, time management, etc.	2	
V	A.V. Aids	Appropriateness and Attractiveness	3	
		Economical Use of available resources		
		Use of A.V. Aids		
VI	Assignment	Relevant, Interesting, Wording or Framing of Assignment	2	
VII	Summarization and	Follows steps of summarization and	1	
	Conclusion	conclusion		
VIII	Bibliography	Relevance, Adequacy and Pattern	1	
		Total Marks obtained	25	

Marks obtained in words:

Remarks:

Signature of the Examiner with Date

# **Dept. of Nursing Research and Statistics**Evaluation Format for **Evaluation of Dissertation by Internal/External Examiner**for M.Sc. Nursing

Title of Dissertation:	
Name of the Student: Mr. /Ms	
Speciality:	
Dissertation Code No. No.:	Maximum Marks: 100

Sr.	Evaluation Criteria	Sub Criteria	Marks	Marks
No.			Allotted	Obtained
I	Problem of the Study	Need Based Selection of Problem	20	
		Accuracy in Statement of Problem		
		Understanding of Need of study		
		Relevancy and Accuracy in		
		Objectives and Operational Definitions		
		Formulation of Hypothesis		
		Consideration of Ethical Aspects of		
		study		
		Understanding and Identification of		
		Variables		
		Understanding of Used Nursing		
		Theory and Conceptual Framework		
II	Review of Literature	Adequacy and Relevancy	20	
		Inclusion of latest Literature		
		Organization of contents		
III	Research Methodology	Understanding of Research Designs	25	
		and Selection of appropriate Design		
		Understanding and Selection of		
		appropriate sampling technique		
		sufficiency of sample size and		
		Selection Criteria		
		Toll preparation and its Validation-		
		Understanding and appropriateness		
		Understanding of Reliability and Pilot		
		Study		
		Accuracy in Data Collection		
			Continued	on next page
IV	Analysis and	Appropriateness in Organization of	20	
		Data		

	Interpretation of	Accuracy in Data Analysis and		
	Data	Selection and Use of appropriate		
		statistical Tests		
		Appropriateness in Data Presentation		
		Accuracy in Interpretation of Data and		
		Understanding of Implications and		
		Recommendation for Implementations		
		of findings		
V	Summary and	Over all organization of contents of	15	
	Bibliography	Dissertation		
	C 1 7	Bibliography writing Method		
		100		
Mark	s Obtained (In words):		1	

Marks Ob	tameu (m v	vorus).	

_	vaiuator ation an	ess (Wit	th Pho	ne No.) c	of Evalu	ator:
	 			-		
				<u>-</u>		

#### **Remarks:**

- Accepted
- Accepted Subject to suggested Modifications/ Corrections.
- Rejected.: (Please specify the Reasons for Rejection)

- 1.
- 2.
- 3.
- 4.
- 5.

Signature of the Evaluator:

# **Suggested Correction Sheet**

Name of the Student:						
Title of the dissertation:						
Speciality:						

Spec	ianty.		
Sr.	Page No.	Paragraph/	Suggested Correction
No.		Line No.	

Please Use Xerox Copy of the Sheet, if one is not sufficient.

Name and signature of Evaluator:

# Format for Practical Examination – M.Sc. Nursing

#### **Internal Examiner**

## Mid Term/Pre Final/Final Examination- Winter/Summer -20

Subject: Clinical Speciality I/II – Medical Surgical Nursing

Exam Seat.	Plan	ning &Organi			ution of Proc	edure		oletion of Pro	ocedure		
No.	Preparation of Articles	of	Preparation of Client	Application of Scientific Principles		Sequential Order	Client's comfort	Records And Reports	After Care of Articles	Viva Voce	Total Marks Obtained Out of 50
Allotted											Out of 50
Marks —		9			13			8		20	

Date of Examination:

Name and signature of the Examiner:

# Format for Practical Examination - M.Sc. Nursing

#### **External Examiner**

# Mid Term/Pre Final/Final Examination- Winter/Summer -20

Subject: Clinical Specialty I/II – Medical Surgical Nursing

Exam.				ng Process				
Seat No.	Assessment of client	Nursing Diagnosis	Nursing Goals/ Outcome Criteria	Nursing Intervention	Rationale	Evaluation	Viva voce	Total Marks Obtained out of 50
Allotted Marks	6	6	5	5	4	4	20	

Date of Examination:

Name and Signature of the Examiner:

# Format for Practical Examination – M.Sc. Nursing

#### **Internal Examiner**

# Mid Term/Pre Final/Final Examination- Winter/Summer -20

Subject: Clinical Speciality I/II – Obstetrical and Gynecological Nursing

Exam Seat.	Plan	ning &Organi	zation	Execu	ition of Proc	edure	Comp	letion of Pro	cedure		
No.	Preparation of Articles	of	Preparation of Client	Application of Scientific Principles	Proficiency in skills	Sequential Order	Client's comfort	Records And Reports	After Care of Articles	Viva Voce	Total Marks Obtained Out of 50
Allotted Marks		9			13			8		20	Out of 30

Date of Examination

Name and signature of the Examiner:

# Format for Practical Examination - M.Sc. Nursing

#### **External Examiner**

## Mid Term/Pre Final/Final Examination- Winter/Summer -20

Subject: Clinical Specialty I/II – Obstetrical and Gynecological Nursing

Exam.		J		ng Process	· ·			
Seat No.	Assessment	Nursing	Nursing					Total Marks
<b>↓</b>	of client	Diagnosis	Goals/ Outcome Criteria	Nursing Intervention	Rationale	Evaluation	Viva voce	Obtained out of 50
Allotted Marks	6	6	5	5	4	4	20	

Date of Examination

Name and Signature of the Examiner:

# Format for Practical Examination - M.Sc. Nursing

#### **Internal Examiner**

# Mid Term/Pre Final/Final Examination- Winter/Summer -20

Subject: Clinical Specialty I/II – Mental Health Nursing

Exam. Seat		Selection of	Procedure	•		Ment	al Status Exa	mination				
No.	Preparation of Patient & Environment	Application of Scientific Principles	Proficiency of Skills	Recording & Reporting	Gen. Appearance, Behavior, Speech & Affect	Perception & Thinking	Orientation, Memory & Intelligence	Abstract	Judgment	Insight	Viva Voce	Total Marks Obtained out of 50
Allotted  Marks		13	3				17				20	

Date of Examination:

Name and Signature of the Examiner:

# Format for Practical Examination - M.Sc. Nursing

#### **External Examiner**

# Mid Term/Pre Final/Final Examination- Winter/Summer -20

Subject: Clinical Specialty I/II – Mental Health Nursing

Exam.		Hi	story and Nursir	ng Process				
Seat No.	Assessment Including History Taking Taking	Nursing Diagnosis	Nursing Goals/ Out Come Criteria	Nursing Intervention	Rationale	Evaluation	Viva Voce	Total Marks Obtained Out of
Allotted Marks	8	5	4	5	4	4	20	50

Date of Examination
Name and Signature of the Examiner:

# College of Nursing, Sangli:416414

# Format for Practical Examination – M.Sc. Nursing

# **Internal Examiner**

# Mid Term/Pre Final/Final Examination- Winter/Summer -20

Subject: Clinical Speciality I/II - Child Health Nursing

Exam Seat.	Planr	ning &Organi	zation	Execu	tion of Proc		Comp	letion of Pro	ocedure		
No.		Preparation of Environmen t		Application of Scientific Principles	Proficiency in skills	Sequential Order	Client's comfort	Records And Reports	After Care of Articles	Viva Voce	Total Marks Obtained Out of 50
Allotted Marks		9			13			8		20	Out of 30

Date of Examination
Name and Signature of the Examiner:

# Format for Practical Examination - M.Sc. Nursing

#### **External Examiner**

## Mid Term/Pre Final/Final Examination- Winter/Summer -20

Subject: Clinical Specialty I/II - Child Health Nursing

Exam.				ng Process				T . 1
Seat No.	Assessment of client	Nursing Diagnosis	Nursing Goals/ Outcome Criteria	Nursing Intervention	Rationale	Evaluation	Viva voce	Total Marks Obtained out of 50
Allotted Marks	6	6	5	5	4	4	20	

Date of Examination

Name and Signature of the Examiner:

# Format for Practical Examination – M.Sc. Nursing

#### **Internal Examiner**

# Mid Term/Pre Final/Final Examination- Winter/Summer -20

Subject: Clinical Speciality I/II - Community Health Nursing

Exam Seat.		ing &Organ			xecution of				Comple	etion of P	rocedure			
No.	Preparation	Preparation	Preparation	Appropriate	Application	Proficiency		Client &		After Care	Diet plan	Health		
1	of Articles		of	Utilization	of	in skill	Order	Family's	And	of	for patient	Education	Viva Voce	Total Marks
▼		Environment	Client & Family	of Available Resources				comfort	Reports	Articles	& family			Obtained
Allotted			ганшу	Resources	Filliciples								20	Out of 50
Marks		7			10	)				13			20	
		,			10	,				13				

Date of Examination Name and Signature of the Examiner:

# College of Nursing, Sangli:416414

# Format for Practical Examination - M.Sc. Nursing

## **External Examiner**

# Mid Term/Pre Final/Final Examination- Winter/Summer -20

Subject: Clinical Speciality I/II - Community Health Nursing

Exam.			]	Nursing Proces	S				Total
Seat No.	Assessment of client & Family	Nursing Diagnosis & Family diagnosis	Nursing Goals/ Outcome Criteria	Nursing Intervention	Rationale	Evaluation	Health Education	Viva voce	Marks Obtained out of 50
Allotted Marks	5	4	4	5	3	3	6	20	

Date of Examination

Name and Signature of the Examiner:

# College of Nursing, Sangli:416414

# Format for Viva Voce – Nursing Research and Dissertation – M.Sc. Nursing Second Year Internal /External Examiner

# Final Examination Winter/Summer 20

	Th	e Prob	olem o	f the	Stud	У		eview iteratu		Res	earch	n Meth	odolo	gy	Inte	Analy erpreta	ysis an tion of			nmary and ography	
Examination Seat No.	Need Based Selection of Problem	Need of Study	Objectives & Operational Definitions	Hypothesis	Ethical Aspects	Variables Conceptual Framework	Adequacy & Relevancy	Inclusion of Latest Literature	Contents Organization	Selection of appropriate Research Design	Sampling Technique	Tool Preparation and Validation	Reliability and pilot Study	Data collection	Organization of Data	Data analysis - Use of appropriate Statistical	Interpretation of findings	Implications and Recommendations	ing	Overall Organization of contents & Presentation	Total Marks
Marks Out of		·	10					08				12					14			06	50

Date of Examination

Name & Signature of Examiner



# BHARATI VIDYAPEETH (DEEMED TO BE UNIVERSITY), PUNE

Faculty of Medical Sciences M.Sc. Nursing Old Syllabus



# SHARATI VIDYAPEETH DEEMED UNIVERSITY

**COLLEGE OF NURSING** 

Old Syllabus M.Sc. Nursing

Dr. (Mrs.) Nilima Rajan Bhore Dean, Faculty of Nsg. / Principal BVDU, College of Nsg. Sangli.



# BHARATI VIDYAPEETH (DEEMED TO BE UNIVERSITY)

#### INTRODUCTION

Bharati Vidyapeeth which is the parent body of Bharati Vidyapeeth DeemedUniversity was established on 10 May 1964, by Dr. Patangrao Kadam with a widerobjective of contributing to intellectual awakening and social culturaltransformation through dynamic education. Under the imaginative, dynamic, andsocially committed leadership of the founder Dr. Patangrao Kadam, BharatiVidyapeeth Deemed University has made astonishing stride in the field ofeducation. The Vidyapeeth has so far established 156 educational institutionimparting education to the student's right from pre-primary stage to post graduatestage and Ph. D.

The ministry of human resources development (Department of Education, Government of INDIA) on the recommendation of University Grant Commission, New Delhi through their notification No.F. - 9-15/95 U.3 dated 26 April 1996 has declared the following institution of

Bharati Vidyapeeth at Pune as to be Deemed University.

- 1) Bharati Vidyapeeth Medical College, Pune
- 2) Bharati Vidyapeeth Dental and Hospital, Pune.
- 3) Bharati Vidyapeeth College of Ayurved, Pune
- 4) Bharati Vidyapeeth Homeopathic Medical College, Pune
- 5) Bharati Vidyapeeth College of Nursing, Pune.
- Bharati Vidyapeeth Institute Yashwantrao Mohite College of Arts , Science and Commerce, Pune
- 7) Bharati Vidyapeeth Institute New Law College, Pune.
- 8) Bharati Vidyapeeth Institute Social Science Center (M.S.W.), Pune
- 9) Bharati Vidyapeeth Institute Poona College of Pharmacy, Pune.
- 10) Bharati Vidyapeeth College of Engineering, Pune
- 11) Bharati Vidyapeeth Institute of Management & Entrepreneurship Development, Pune.
- 12) Bharati Vidyapeeth Institute Yashwantrao Chavan Institute of social sciencecentre, Pune
- 13) Bharati Vidyapeeth Institute Research and Development Centre in AppliedChemistry, Pune.
- 14) Bharati Vidyapeeth Institute College of Physical Education, Pune.
- 15) Bharati Vidyapeeth Institute of Environment Education and Research, Pune.
- 16) Bharati Vidyapeeth Rajiv Gandhi Institute of Information Technology, Pune.
- 17) Interactive Research School in Health Affairs (IRSHA).
- 18) Bharati Vidyapeeth Medical College & Hospital, Sangli
- 19) Bharati Vidyapeeth Medical College & Hospital, Mumbai.
- 20) Bharati Vidyapeeth Institute of Management & Research, New Delhi.
- 21) Bharati Vidyapeeth College of Architecture, Pune.
- 22) Bharati Vidyapeeth Institute of Hotel Management & Catering Technology, Pune.
- 23) Bharati Vidyapeeth Yashwantrao Mohite Institute of Management, Karad.
- 24) Bharati Vidyapeeth Institute of Management, Kolhapur

- 25) Bharati Vidyapeeth Institute of Management & Rural DevelopmentAdministration, Sangli.
- 26) Bharati Vidyapeeth Abhijit Kadam Institute of Management & Social Sciences, Solapur.
- 27) Bharati Vidyapeeth College of Engineering, New Delhi.
- Bharati Vidyapeeth Deemed University Institute of Computer Application & Management, New Delhi.
- 29) Bharati Vidyapeeth Dental College & Hospital, Sangli.
- 30) Bharati Vidyapeeth Deemed University College of Nursing, Sangli.
- 31) Bharati Vidyapeeth Deemed University College of Nursing, Navi Mumbai

The association of Indian universities has also accepted this university as itsmember. This is probably the first only university having under its umbrelladiversified disciplines of professional and non-professional categories such as Medicine, Dentistry, Nursing, Ayurvedic, Homeopathic Medicine, Science, Commerce, Law and Humanities.

The degrees and diplomas awarded by this university have the same statusand recognition as those awarded by any Indian University recognized by the University Grant Commission, New Delhi. The University operates itseducational programme in accordance with the rules, regulations and guidelines of various statutory Central Government Bodies like Medical Council of India, Dental council of India, Bar Council of India, Indian nursing Council, Central Council of Indian Medicine etc.

#### COLLEGE OF NURSING, PUNE

Bharati Vidyapeeth's College of Nursing was established in the year 1992 withprior permission of University of Pune to which it was having affiliation. It isnow a constituent unit of Bharati Vidyapeeth University. This is the firstcollege of nursing in the Non-Government sector in Pune. Adequate facilities for clinical studies have been provided and the college is Dhankawadi, Pune.

The college has been approved by the Government of India, UGC and Maharashtra nursing council. The college has been approved by the Government of India, UGC and Maharashtra nursing council. The college hasseparate Hostel facilities for Boys and Girls. The Curriculum and Syllabus ismade and updated as per the present need in the Maharashtra nursing council, Indian nursing council and the need of society.

#### COLLEGE OF NURSING, SANGLI.

Bharati Vidyapeeth Deemed University's College of Nursing, Sangli is startedin 2007 at Bharati Vidyapeeth Deemed University campus, Wanlesswadi, Sangli. The college is constituent unit of Bharati Vidyapeeth DeemedUniversity; The College has been started with permission from Government of Maharashtra, Maharashtra nursing council and Indian nursing Council. The college has 100 - intake capacity for B.Sc. (N), 30 - intake capacity for P.B.B.Sc. (N) & 25 - intake capacity for M.Sc. (N).

#### COLLEGE OF NURSING, MUMBAI

Bharati Vidyapeeth College of Nursing, Navi Mumbai was established in the year 2009. The college has excellent infrastructure such as well-structured spacious class rooms, continuously updated laboratories, national and international books, journal and e-journals and hostels with all necessary amenities and facilities. The clinical teaching and training of students are conducted in the 392 bedded Navi Mumbai Municipal Corporation Hospital at Vashi. The students are also deputed for training to other reputed local hospitals in Mumbai such as Thane Regional Mental Hospital, TATA Cancer Hospital, and Wadia Hospital for specialized experience. The community Health experience is given in PHC at Wavanje village (Rural) and Juhugaon (Urban).

# **CONTENT**

S. No.	Content	Page No.
1.	Philosophy	
2.	Aim	
3	Objectives	
4.	Guidelines & Minimum Requirements for Setting up ofa	
	College of Nursing	
5.	Staffing Pattern Relaxed Till 2012	
6.	Other Staff (Maximum Requirement)	
7.	Eligibility Criteria/Admission Requirements	
8.	Regulations for Examination	
9.	Guidelines for Dissertation	
10.	Duration	
11.	Scheme of Examination	
		1
	First Year	
13.	Nursing Education	
14.	Advance Nursing Practice	
	Clinical Speciality	
	Medical Surgical Nursing	
	Obstetric & Gynaecological Nursing	
	Child Health (Paediatric) Nursing	
	Mental Health (Psychiatric) Nursing	
	Community Health Nursing	
15.	Nursing Research & Statistics	
	Second Year	
16.	Nursing Management	
17.	Clinical Speciality -II	
	Medical Surgical Nursing	
	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 1
	Community Health Nursing
18.	Annexure – I (Staffing Pattern Relaxed till 2012)

### **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 inunder 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 in to 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 nursingscience
- 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 nursingpractice and in the health care delivery system.
- 7. Establish collaborative relationship with members of other disciplines
- 8. Demonstrate interest in continued learning for personal and professional advancement.

# Guidelines and Minimum Requirements for setting up of aCollege of Nursing

- 1.Any organization under the Central Government, State Government, Local body or a Private or Public Trust, Mission, Voluntary registered under Society Registration Act or a Companyregistered under company"s act wishes to open a M.Sc. Nursing programme, should obtain the No Objection/Essentiality certificate from the State Government.
- 2. The Indian Nursing council on receipt of the proposal from the Institution to start nursing program, will undertake the **first inspection** to assess suitability with regard to physical infrastructure, clinical facility and teaching faculty in order togive permission to start the programme.
- 3. After the receipt of the permission to start the nursing. programme from Indian Nursing Council, the institution shallobtain the approval from the State Nursing Council and University
- 4. Institution will admit the students only after taking approval of StateNursing Council and University.
- 5. The Indian Nursing Council will conduct inspection every yeartill. the first batch completes the programme. Permission will begiven year by year till the first batch completes

- 6. If the institution is recognized for B.Sc. (N) programme and if one batch has passed out after found suitable by INC, then the institution will be exempted from NOC/Essentiality certificate for M.Sc. (N) programe from the State Government.
- 7. **Super Speciality Hospital\*** can start M.Sc.(N) programme, however they have to get NOC/Essentiality certificate from

respective State Government to start the M.Sc. (N) programme.

\*Super Speciality Hospital are eligible to start M.Sc.(N) provided they have respective speciality beds

#### Cardio thoracic beds

□ 50-100 bedded Cardiac Hospital, which has CCU, ICCU and ICUunits with own thoracic unit or affiliated thoracic unit.

#### **Critical Care beds**

 $\ \square$  250-500 bedded Hospital, which has a 8-10 beds critical carebeds & ICUs

### **OBG** speciality beds

- 50 bedded parent hospital having:
- i. Mother and neonatal units
- ii. Case load of minimum 500 deliveries per year
- iii. 8-10 level II neonatal beds.
- iv. Affiliation with level III neonatal beds

#### Neuro speciality beds

☐ Minimum of 50 bedded Neuro care institution with advanced diagnostic, therapeutic and state of the art clinical facilities

### Oncology speciality beds

□ Regional Cancer centers/Cancer Hospitals having minimum 100beds,with medical and surgical oncology units with chemotherapy, radiotherapy, palliative care, other diagnostic and supportive facilities.

# Orthopaedic Speciality beds

□ 250-500 bedded Hospital, which has a 50 orthopaedic beds & rehabilitation units.

### Psychiatric beds

☐ Minimum of 50 bedded institutes of psychiatry and mental healthhaving all types of patients (acute, chronic, adult psychiatric beds, child psychiatric beds and de-addiction facilities), with advanced diagnostic, therapeutic and state of the art clinical facilities.

### **Paediatrics beds**

50-100 bedded paediatric Hospital/ unit with paediatric surgeryand level II or
 III neonatal units

# Gastroentrology beds

□ 50-100 bedded gastroentrology beds

# Nephro-Urology speciality beds

□ 50-100 bedded nephro urology hospital with dialysis and kidney transplants, urosurgery

#### **STAFFING PATTERN:**

#### **M.Sc.** (N)

If parent hospital is super-speciality hospital like cardio-thoracic

Professor cum coordinator 1 Reader

/ Associate Professor 1Lecturer 2

The above faculty shall perform dual role

# **B.Sc.(N)** and **M.Sc.(N)**

Annual intake of 60 students	in	B.Sc.(N)	and	25	students	for
M.Sc.(N)programme						
Professor-cum-Principal		1				
Professor-cum-Vice Principal		1				
Reader / Associate Professor		5				
Lecturer		8				
Tutor / Clinical Instructor		19				
Total		34				

One in each specialty and all the M.Sc(N) qualified teaching facultywill participate in all collegiate programmes.

**Teacher Student Ratio = 1 : 10 for M.Sc.(N) programme.** 

# QUALIFICATIONS & EXPERIENCE OF TEACHERS OF COLLEGEOF NURSING

Sr. No.	Post	Qualification & Experience
1 Profe	ssor-cum-Principal	- Masters Degree in Nursing
		- 14 years experience after

M.Sc.(N)in College of Nursing

- 3 years experience in administration (Years of experience is relaxable if suitable candidate is not available) (If a candidate is not available, minimum 5 years of experience in collegeof nursing, with an aggregate

of 14 years teaching perience)

Desirable: Independent published work of high standard /doctorate degree / M.Phil.

2 Professor-cum-Vice

- Masters Degree in Nursing

**Principal** 

- 14 years experience after M.Sc.N. in College of Nursing

- 3 years experience in administration
(Years of experience is relaxable if
suitable candidate is notavailable) (If a
candidate is not available, minimum 5
years of experience incollege of

nursing, with an aggregate of 14 years

teaching experience)

Desirable: Independent published work of high standard /doctorate degree / M.Phil.

3 Reader / Associate

**Professor** 

- Master Degree in Nursing.

10 years experience after M.Sc.(N)in a
 College of Nursing. (If a can didate is not available, 5 years of experience in
 College of Nursing with an aggregatesof

10 years . teaching experience

Desirable : Independent published work of high standard /doctorate degree / M.Phil.

4 Lecturer

- Master Degree in Nursing.

- 3 years teaching experience after

M.Sc. (N)

Note: Qualifications & Experience of Nursing Teaching facultyrelaxed

## till 2012 & placed under Annexure - I

External /Guest faculty may be arranged for the selected unitsin different subjects as required

#### **NOTE:**

- 1. No part time nursing faculty will be counted for calculating total no. of faculty required for a college.
- 2. Irrespective of number of admissions, all faculty positions (Professor to Lecturer) must be filled.
- 3. For M.Sc.(N) programme appropriate number of M.Sc. faculty ineach speciality be appointed subject to the condition that total number of teaching faculty ceiling is maintained.
- 4. All nursing teachers must possess a basic university or equivalent qualification as laid down in the schedules of the Indian Nursing Council Act, 1947. They shall be registered under the State Nursing Registration Act.
- 5. Nursing faculty in nursing college except tutor/clinical instructors must possess the requisite recognized postgraduate qualification in nursing subjects.
- 6. Holders of equivalent postgraduate qualifications, which may be approved by the Indian Nursing Council from time to time, may be considered to have the requisite recognized postgraduatequalification in the subject concerned.
- 7. All teachers of nursing other than Principal and Vice-Principalshould spend at least 4 hours in the clinical area for clinical teaching and/or supervision of care every day.

# Other Staff (Minimum requirements)

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

<ul> <li>Ministerial</li> </ul>	
a) Administrative Officer	1
c) Office Superintendent	1
d) PA to Principal	1
e) Accountant/Cashier	1
• Upper Division Clerk	2
• Lower Division Clerk	2
• Store Keeper	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	
Eloluly	
a) Librarian	2
•	2 As per the requirement
a) Librarian	
a) Librarian	
<ul><li>a) Librarian</li><li>b) Library Attendants</li></ul>	
<ul><li>a) Librarian</li><li>b) Library Attendants</li><li>• Hostel</li></ul>	As per the requirement
<ul><li>a) Librarian</li><li>b) Library Attendants</li><li>• Hostel</li><li>a) Wardens</li></ul>	As per the requirement
<ul> <li>a) Librarian</li> <li>b) Library Attendants</li> <li>• Hostel</li> <li>a) Wardens</li> <li>b) Cooks, Bearers,</li> </ul>	As per the requirement
<ul> <li>a) Librarian</li> <li>b) Library Attendants</li> <li>• Hostel</li> <li>a) Wardens</li> <li>b) Cooks, Bearers,</li> <li>Sanitary Staff</li> </ul>	As per the requirement  2 As per the requirement
<ul> <li>a) Librarian</li> <li>b) Library Attendants</li> <li>• Hostel</li> <li>a) Wardens</li> <li>b) Cooks, Bearers,</li> <li>Sanitary Staff</li> <li>c) Ayas /Peons</li> </ul>	As per the requirement  2 As per the requirement  As per the requirement

## Eligibility Criteria/Admission Requirements:

- 1. The candidate should be a Registered Nurse and Registeredmidwife 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. Nursingwith 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 after Basic 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 reappear 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 exceed4 years

Candidate who fails in any subject, shall be permitted to continue the studies into the second year. However the candidate shall notbe 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 per day 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: Viva-voce -minimum 30 minutes per student

#### **Guidelines for Dissertation**

Tentative Schedule for dissertation

S. No.	Activities	Scheduled Time
1.	Submission of the research	End of 9 <sup>th</sup> month of 1 <sup>st</sup>
	proposal	year
2.	Submission of dissertation - final	End of 9 <sup>th</sup> month of 2 <sup>nd</sup>
		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 inNursing.

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)

hours per week

Available 52 weeks
Vacation 4 weeks
Examination 2 weeks
Gazetted holidays 3 weeks Total
weeks available 43 weeks 40

1720 hours

# Total hours for 2 years 3440 hours

## **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	150	650
Total	600	1100
II nd Year		•
Nursing Management	150	150
Nursing Research(Dissertation		300
*Clinical Speciality	150	950
Total	300	1400

Educational visit 2 weeks

\*Clinical Speciality – Medical Surgical Nursing (Cardio Vascular & Thoracic Nursing, Critical care Nursing, Oncology Nursing, Neurosciences Nursing, Nephro-Urology Nursing, Orthopedic Nursing, Gastro Enterology Nursing,)Obstetric & Gynaecological 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	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	

<sup>\*</sup> 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 separatelyin each of the paper.
- 5. If a candidate fails in either theory or practical paper he/she hasto reappear for both the papers (Theory and practical).
- 6. Maximum no. of attempts permitted for each paper is 3 including first attempt.
- 7. The maximum period to complete the course successfully shouldnot exceed 4 (four) years

<sup>\*\*</sup>Nursing research=15 and statistics=10

- 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: 300 Hours

### **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 inteaching 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 needand methodology of curriculum change, innovation and integration.
- 7. Plan and conduct continuing nursing education programs.
- 8. Critically analyze the existing teacher preparation programs innursing.
- 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 processin 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	He	ours	Course Content					
	Theory	Practical						
Ι	10		Introduction:					
			☐ Education :Definition, aims, concepts,					
			philosophies & their education implications,					
			☐ Impact of Social, economical, political					
			&technological changes on education:					
			Professional education					
			• Current trends and issues in education					
			• Educational reforms and National					
			Educational policy, various educational					
			commissions-reports					
			• Trends in development of nursing education in					
			India					

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
			(sociodrama), clinical teaching methods,
			programmed instruction, self directed
			learning(SDL), micro teaching, computer assisted
			instruction(CAI),computer assisted

	learning (CAL)

Units	Hours		Course Content			
	Theory Practical					
III	10	10	Instructional media and methods			
			☐ Key concepts in the selection and use ofmedia 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-projectedaids,			
			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 referenced evaluation,			

V	12	10	Sta	ndardized a	nd non	-standardized (	tests:	
				Meaning	g, C	characteristics,	objectivity,	
			vali	dity,reliabili	ty,	usability,	norms,	
			con	struction of	tests-			
			• E	ssay, short a	answer o	questions and m	nultiplechoice	
			questions.					
			•Ra	nting	SC	cales,	checklist,	
			os	CE/OSPE(O	bjective	2	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, methodsof					
			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.					
VIII	5	6	Nursing Educational programs					
			☐ Perspectives of nursing education: Globaland					
			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,					
			1 1 /					
			principles of adult learning, assessments of learning					
			principles of adult learning, assessments of learning					
			principles of adult learning, assessments of learning needs, priorities, resources.					
			principles of adult learning, assessments of learning needs, priorities, resources.  □ Program planning, implementation and					

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 ofteacher					
			education in India.					
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 forcounseling.					
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 relationshipand					
			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, org	anizing,	staffing, bud	geting,		

			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, field trips, seminars, project, role play, panel discussion, clinical methods etc)
- Preparation and utilization of instructional Aids using different media.
- Develop course plans, unit plans, rotation plans.
- Conduct a continuing education workshop.
- Annotated bibliography.
- Critical evaluation of any nursing education program offered by aselected 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 typetest, 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**

Construction of tests/rotation plan.

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

25

#### ADVANCE NURSING PRACTICE

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 andhealth care delivery system.
- 4. Discuss concepts, principles, theories, models, approaches relevant to nursing and their application.
- 5. Describe scope of nursing practice.
- 6. Provide holistic and competent nursing care following nursingprocess approach.
- 7. Identify latest trends in nursing and the basis of advancenursing 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, legalconsiderations,				
		□ Role of regulatory bodies				
		□ Professional organizations and unions-self defense,				
		individual and collective bargaining				
		<ul> <li>Educational preparations, continuing education,</li> </ul>				
		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 nongovernmental agencies.					
		☐ Information, education and communication (IEC).					
		□ Tele-medicine.					
III	10	Genetics					

		Review of cellular division, mutation and law of				
		inheritance,human genome project ,The Genomic era.				
		☐ 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 surveillance and health informatics				
		□ Role of nurse				
V	20	Bio-Psycho social pathology				
V	20					
V	20	Bio-Psycho social pathology				
V	20	Bio-Psycho social pathology  □ Pathophysiology and Psychodynamics of disease				
V	20	Bio-Psycho social pathology  □ Pathophysiology and Psychodynamics of disease causation				
V	20	Bio-Psycho social pathology  □ Pathophysiology and Psychodynamics of disease causation □ Life processes, homeostatic mechanism, biological				
V	20	Bio-Psycho social pathology  Dathophysiology and Psychodynamics of disease causation  Life processes, homeostatic mechanism, biological and psycho-social dynamics in causation of disease,				
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				
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				
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				
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 land shock, altered body temperature, unconsciousness,				
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 land shock, altered body temperature, unconsciousness, sleep pattern and its disturbances, pain, sensory				
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 land shock, altered body temperature, unconsciousness, sleep pattern and its disturbances, pain, sensory deprivation.				
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 land shock, altered body temperature, unconsciousness, sleep pattern and its disturbances, pain, sensory deprivation.  Treatment aspects: pharmacological and pre- post				
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 land shock, altered body temperature, unconsciousness, sleep pattern and its disturbances, pain, sensory deprivation.  Treatment aspects: pharmacological and pre- post operative care aspects,				

		safety measures, bio-medical wastemanagement.
		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 healthillness 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	implementation, modification and evaluation of care.  Psychological aspects and Human relations				
IX	30	-				
IX	30	Psychological aspects and Human relations				
IX	30	Psychological aspects and Human relations  Human behavior, Life processes & growth and				
IX	30	Psychological aspects and Human relations <ul> <li>Human behavior, Life processes &amp; growth and development, personality development, defense</li> </ul>				
IX	30	Psychological aspects and Human relations  Human behavior, Life processes & growth and development, personality development, defense mechanisms,				
IX	30	Psychological aspects and Human relations <ul> <li>Human behavior, Life processes &amp; growth and development, personality development, defense mechanisms,</li> <li>Communication, interpersonal relationships,</li> </ul>				
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				
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,				
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,				
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				
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)				
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.				
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,				

XI	25	Computer	applications	for	patient	care
		delivery sys	tem and nursing	g practice	e	
		□ Use of	computers	in teac	hing,	learning,
		research and	I nursing practice	e.		
		□ Windows	, MS office: Wor	d, Excel,	Power P	oint,
		□ Internet, l	iterature search,			
		□ Statistical	packages,			
		□ Hospital	management	inforr	nation	system:
		softwares.				

#### .Practical

Clinical posting in the following areas:

• Specialty area- in-patient unit - 2 weeks

• Community health center/PHC - 2 weeks

• Emergency/ICU - 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 SurgicalNursing 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 ofpatients.
- 12. Incorporate evidence based Nursing practice and identify theareas 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:**

Unit	Hours	Content	
I	5	Introduction:	
		☐ Historical development of Medical- SurgicalNursing	
		in India.	
		☐ Current status of health and disease burdenin	
		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 year plans.	
		□ National health programs related to adult	
		health	

II	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 onthe	
		patient & family.	
		□ Stressors & reactions related to disease	
		process.	
		□ Nursing care using Nursing process approach.	
Unit	Hours	Content	
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.	
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.	
	40		
VI	10	Management of patients with diso	rders of respiratory
		system	
		<ul> <li>Review of anatomy and physiolog</li> </ul>	y.
		□ Common Disorders-	etiology, Patho
		physiology,Clinical	manifestations,
		complications, prognosis.	
		☐ Health assessment-History	taking, physical
		examination, investigation and diag	gnostic

		assessment.	
		☐ Treatment modalities and trends.	
		□ Nursing management.	
		□ Related research studies.	
		☐ Evidence based nursing practice.	
VII	10	☐ Rehabilitation and follow-up.	
		Management of patients with disorders of	
		cardio vascular system	
		<ul> <li>Review of anatomy and physiology.</li> </ul>	
		□ 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
		<ul> <li>Review of anatomy and physiology.</li> </ul>
		☐ 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.	☐ Evidence based nursing practice.	
☐ Rehabilitation and follow-up.		
X 10 Management of patients with d	lisorders of	
endocrine system		
☐ Review of anatomy and physiology.		
□ Common Disorders- etiolo	ogy, Patho	
physiology, Clinical	8,7	
manifestations, complications, prognosis.		
☐ Health assessment-History taking, phy	rsical	
examination,		
investigation and diagnostic assessment.		
☐ Treatment modalities and trends.		
□ Nursing management.		
☐ Related research studies.		
☐ Evidence based nursing practice.		
☐ Rehabilitation and follow-up.		
XI 10 Management of patients with d	lisorders of	
musculo-skeletal		
system		
☐ Review of anatomy and physiology.		
□ Common Disorders- etiolo	gy, Patho	
physiology, Clinical manifestations,		
complications, prognosis.		
☐ Health assessment-History taking	ng, physical	
examination, investigation and diagnosti	ic assessment.	
☐ Treatment modalities and trends.		
□ Nursing management.		
□ Related research studies.		
Trefated research studies.		
☐ Evidence based nursing practice.		

XII	8	Management o	of patients	with	disorders	of
		integumentory sy	rstem			
		☐ Review of anato	omy and physic	ology.		
		□ Common	Disorders-	etio	ology, F	Patho
		physiology,Clinic	al	n	nanifestation	ıs,
		complications, pr	ognosis.			
		□ Health asso	essment-Histor	y tak	ing, phy	sical
		examination, invo	estigation and	diagnos	stic assessm	ent.
		☐ Treatment mod	alities and tren	ds.		

		□ Nursing management.	
		□ Related research studies.	
		☐ Evidence based nursing practice.	
		☐ Rehabilitation and follow-up.	
XIII	5	Management of patients with disorders of Eye and	
		ENT	
		<ul> <li>Review of anatomy and physiology.</li> </ul>	
		☐ 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.	
XIV	8	8 Management of patients with disorders of	
		reproductive system	
		<ul> <li>Review of anatomy and physiology.</li> </ul>	
		☐ Common Disorders- etiology, Patho physiology,	
		Clinical manifestations, complications,	
		prognosis.	
		☐ Health assessment-History taking, physical	
		examination, investigation and diagnostic assessment.	
		<ul> <li>Treatment modalities and trends.</li> </ul>	
		<ul> <li>Nursing management.</li> </ul>	
		□ Related research studies.	
		☐ Evidence based nursing practice.	
		☐ Rehabilitation and follow-up.	

XV	8	Geriatric nursing
		□ Nursing Assessment-History and Physical
		assessment.
		□ Ageing;
		☐ Demography; Myths and realities.
		☐ 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.

		□ Common Health Problems & Nursing		
		Management;		
		<ul> <li>Psychosocial and Sexual.</li> </ul>		
		□ 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.		
		☐ Issues, problems and trends.		
XVI	8	Management of patients with communicableand		
		sexually		
		transmitted diseases:		
		□ Review of immune system.		
		☐ Review of immune system. ☐ Common Disorders of immune system —		
		·		
		□ Common Disorders of immune system –		
		<ul> <li>□ Common Disorders of immune system – HIV/AIDS.</li> <li>□ Review of infectious disease process.</li> <li>□ Communicable Diseases- etiology, Patho</li> </ul>		
		<ul> <li>□ Common Disorders of immune system – HIV/AIDS.</li> <li>□ Review of infectious disease process.</li> <li>□ Communicable Diseases- etiology, Patho physiology, Clinical manifestations,</li> </ul>		
		<ul> <li>□ Common Disorders of immune system – HIV/AIDS.</li> <li>□ Review of infectious disease process.</li> <li>□ Communicable Diseases- etiology, Patho physiology, Clinical manifestations, complications, prognosis.</li> </ul>		
		<ul> <li>□ Common Disorders of immune system – HIV/AIDS.</li> <li>□ Review of infectious disease process.</li> <li>□ Communicable Diseases- etiology, Patho physiology, Clinical manifestations, complications, prognosis.</li> <li>□ Health assessment-History taking, physical</li> </ul>		
		<ul> <li>□ Common Disorders of immune system – HIV/AIDS.</li> <li>□ Review of infectious disease process.</li> <li>□ Communicable Diseases- etiology, Patho physiology, Clinical manifestations, complications, prognosis.</li> <li>□ Health assessment-History taking, physical examination, investigation and diagnostic assessment.</li> </ul>		
		<ul> <li>□ Common Disorders of immune system − HIV/AIDS.</li> <li>□ Review of infectious disease process.</li> <li>□ Communicable Diseases- etiology, Patho physiology, Clinical manifestations, complications, prognosis.</li> <li>□ Health assessment-History taking, physical examination, investigation and diagnostic assessment.</li> <li>□ Treatment modalities and trends.</li> </ul>		
		<ul> <li>□ Common Disorders of immune system − HIV/AIDS.</li> <li>□ Review of infectious disease process.</li> <li>□ Communicable Diseases- etiology, Patho physiology, Clinical manifestations, complications, prognosis.</li> <li>□ Health assessment-History taking, physical examination, investigation and diagnostic assessment.</li> <li>□ Treatment modalities and trends.</li> <li>Nursing management.</li> </ul>		
		<ul> <li>□ Common Disorders of immune system − HIV/AIDS.</li> <li>□ Review of infectious disease process.</li> <li>□ Communicable Diseases- etiology, Patho physiology, Clinical manifestations, complications, prognosis.</li> <li>□ Health assessment-History taking, physical examination, investigation and diagnostic assessment.</li> <li>□ Treatment modalities and trends.</li> </ul>		

	☐ Rehabilitation and follow-up.

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#### **Practical**

Total = 660 Hours 1 Week = 30 Hours

S.No.	Dept/Unit	No. of	<b>Total Hours</b>	
		Week		
1.	General Medical Ward	4	120 Hours	
2.	General Surgical Ward	4	120 Hours	
3.	ICUs	4	120 Hours	
4	Oncology	2	60 Hours	
5.	Ortho	2	60 Hours	
6.	Cardio	2	60 Hours	
7.	Emergency Department	2	60 Hours	
8.	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 GYNAECOLOGICAL NURSING

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 Gynecological 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 andnursing process

- approach in obstetric and gynaecological nursing.
- 6. Identify and analyze the deviations from normal birth processand 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 technologyand birth control measures
- 12. Appreciate the legal and ethical issues pertaining to obstetricand gynaecological nursing

### **Course Content**

Unit	Hours	Content
Ι	10	Introduction:
		☐ Historical and contemporary perspectives
		☐ Epidemiological aspects of maternal and childhealth
		□ Magnitude of maternal and child health
		problems
		☐ Issues of maternal and child health : Age, Gender,
		Sexuality, psycho Socio cultural factors
		☐ 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	
		<ul> <li>Review of anatomy and physiology of human</li> </ul>	
		reproductive	
		system: male and female	
		□ Hormonal cycles	
		<ul><li>Embryology</li></ul>	
		☐ 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, identification of high risk,
- Foetal measure- clinical parameters, biochemicalhuman 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
- □ 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
- □ Alternative/complementary therapies

IV	25	Normal Labour and nursing management:
		☐ Essential factors of labour
		□ Stages and onset
		First stage: Physiology of normal labour
		• Use of partograph: Principles, use and critical
		analysis, evidence based studies
		Analgesia and anaesthesia in labour
		Nursing management
		Second stage
		Physiology , intrapartum monitoring
		Nursing management.
		• Resuscitation , immediate newborn care and initiate
		breast feeding (Guidelines of National neonatalogy
		forum of India)
		Third stage
		Physiology and nursing 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		
•	20	Normal puerperium and nursing management	
		□ Physiology of puerperium	
		Description Physiology of lactation, lactation management,	
		exclusive breast feeding, Baby friendly hospital	
		intitative (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.	
		Role of nurse midwifery practitioner	
		Alternative/complementary therapies	
VI	20	Normal Newborn	
		<ul> <li>Physiology and characteristics of normal newborn</li> </ul>	
		<ul> <li>Physical and Behavioural assessment of newborn</li> </ul>	
		□ Needs of newborn	
		<ul> <li>Essential newborn care: Exclusive breast feeding,</li> </ul>	
		Immunization, Hygiene measures, Newborn nutrition	
		□ 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	
VII	10	Pharmoco dynamics in obstetrics	
		☐ Drugs used in pregnancy, labour, post partumand	
		newborn	
1			
		☐ Calculation of drug dose and administration	
		<ul><li>Calculation of drug dose and administration</li><li>Effects of drugs used</li></ul>	

		☐ Roles and responsibilities of midwifery nurse
		practitioner
		☐ Standing orders and protocols and use ofselected life
		saving
		drugs and interventions of obstetric emergenciesapproved
		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 midwifery practitioner
		□ Family life education
		<ul> <li>Evidence based studies</li> </ul>
		☐ 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
		<ul> <li>Counseling and guidance</li> </ul>
		Role of midwifery nurse practitioner
XI	5	Abortion
		☐ Types, causes
		<ul> <li>Legislations, Clinical rights and professional</li> </ul>
		responsibility

	□ Abortion procedures
	<ul><li>Complications</li></ul>
	□ Nursing management
	Role of midwifery nurse practitioner

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#### **Practical**

Total = 660 Hours 1 Week = 30 Hours

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

#### **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 careto 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 pediatric and 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/neonatal nursing

- 12. Recognize the role of pediatric nurse practitioner and as amember of the pediatric and neonatal health team
- 13. Teach pediatric nursing to undergraduate students & in-servicenurses

#### **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, speciallaws and		
		ordinances relating to children.		
		□ National goals,		
		□ Five year plans,		
		□ National health programs related to child		
		health.		
II	10	Assessment of pediatric clients		
		□ History taking		
		<ul> <li>Developmental assessment</li> </ul>		
		<ul> <li>Physical assessment</li> </ul>		
		□ 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	
IV	15	Pre-natal Pediatrics	
		☐ Embryological and fetal development, Prenatal factors	
		influencing growth and development of fetus,	
		☐ 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 anddevelopment,			
		☐ Developmental tasks and special needs from infancy to			
		adolescence, developmentalmilestones,			
		☐ Assessment of growth and development of pediatric			
		clients,			
		☐ Factors affecting growth and development.			
VI	15	Behavioral Pediatrics and Pediatric Nursing			
		<ul> <li>Parent child relationship,</li> </ul>			
		Basic behavioral pediatric principles and specification			
		behavioral pediatric concepts/disorders- maternal			
		deprivation, failure 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 programand cold			
		chain,			
		□ Nutrition and nutritional requirements of children,			
		changing patterns of feeding, baby- friendly hospital			
		initiative and exclusive breast feeding,			
		☐ Health education, nutritional education forchildren			
		□ 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 new born,			
		□ Assessment of the new born,			
		□ Nursing care of the new born at birth, care ofthe			
		new born and family,			
		☐ High risk newborn- pre term and term neonateand			
		growth 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			

## **Practical**

Total = 660 Hours 1 Week = 30 Hours

S.No.	Dept/Unit	No. of	Total Hours
		Week	
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	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 sickchildren
- 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: 800 hours

## **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 behaviour.
- 3. Describe the concepts of psychobiology in mental disorders andits 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 individualand 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 withmental disorders
- 10. Describe the psychopharmacological agents, their effects andnurses role
- 11. Recognize the role of psychiatric nurse practitioner and as amember of the psychiatric and mental health team
- 12. Describe various types of alternative system of medicines usedin psychiatric settings

13. Incorporate evidence based nursing practice and identify theareas of research in the field of psychiatric nursing

## **Course Content**

Unit	Hours	Content	
Ι	15	Introduction	
		<ul> <li>Mental Health and Mental Illness</li> </ul>	
		<ul> <li>Historical perspectives</li> </ul>	
		□ Trends, issues and magnitude	
		<ul> <li>Contemporary practices</li> </ul>	
		□ Mental health laws/Acts	
		National mental health program -National mental	
		health authority, state mental healthauthority	
		□ 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	
		Role of psychiatric nurse- extended and expanded	

II	10	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		
		<ul><li>Psychoimmunology</li></ul>		
		Normal Immune response		
		• Implications for psychiatric Illness		
		□ Implications for Nursing		
III	10	Theories of Personality Development and		
		relevance to nursing		
		practice		

		Development Theory Fronds	
		□ 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.	
		□ Stress as Transaction between the Individualand	
		the Environment.	
		□ Stress management	
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 ;	
		☐ Therapeutic nurse-patient relationship its phases ;  Conditions essential to development of a therapeutic	
		Conditions essential to development of a therapeutic	

VI	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	
	5	of The Nurse	
		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	
VIII	10	The nursing process in psychiatric/mental	
		health nursing	
		☐ Mental health assessment- History taking,	
		mental status examination	
		<ul> <li>Physical and neurological examination</li> </ul>	
		□ Psychometric assessment	
		□ Investigations, Diagnosis and Differential	
		diagnosis	
		☐ Interpretation of investigations	
		□ 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	
		☐ 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 Therapeutic Community	
		□ Occupational therapy	
		□ Recreational therapy	
		□ Play therapy	
		□ Music therapy	
		□ Light therapy	
		□ Color therapy	
		□ Aroma therapy	
X	5	Electroconvulsive Therapy	
		☐ Historical Perspectives	
		□ Indications	
		□ Contraindications	
		☐ Mechanisms of Action	
		□ Side Effects	
		□ Risks Associated with Electroconvulsive	
		Therapy	
		☐ The Role of The Nurse in ElectroconvulsiveTherapy	
XI	10	Psychopharmacology	
		☐ Historical Perspectives	
		□ Role of a Nurse in PsychopharmacologicalTherapy	
		Antianxiety Agents	
		Antidepressants Agents	
		Mood stabilizers	
		Antipsychotics	
		Sedative-Hypnotics	
		Central Nervous System Stimulants	

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

1		

## **Practical**

Total = 660 Hours 1 Week = 30 Hours

S.No.	Dept/Unit	No. of	Total Hours
		Week	
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 Unit/Half way home/ Daycare centre	4	120 Hours
	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 650 hours

Total 800 hours

## **Course Description**

The course is designed to assist students in developing expertise and indepth 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 able to:

- 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 whileproviding 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 communityhealth 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 Health team.
- 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 healthand family
		welfare committees
		□ Current status, trends and challenges of
		Community Health 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/ Millennium
		developmental 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			

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 nursingapproach	
		□ Family health nursing processo	
		Family health assessment	
		o Diagnosis	
		o Planning	
		o Intervention	
		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
		practitione	ers-decision	making	
		skills, professionalism, legal issues			
V	45	Maternal	Maternal and neonatal care		
			I(Integrated	Management of Neona	atal And
		Childhood	l		
		Illnesses)	module		
		□Skilled	Birth Atte	ndant (SBA) module	
VI	15	□ Disaste	□ Disaster nursing (INC module on Reaching out:		
		Nursing C	Care in		
		emergenci	es)		
VII	10	Information, education and communication			
		□ IEC/BC	CC: Princip	oles and strategies	
		□ Communication Skills			
		□ Manag	ement info	rmation and evaluation	system:
		Records andreports			
		□ Information technology			
		□ Tele-m	edicine and	l tele-nursing	
		□ Journa	lism		
		□ Mass n	nedia		
		□ Folk m	edia		

VIII	15	Health care delivery system: Urban, rural, tribaland	
		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 workers50	
		☐ Health agencies: NGO"s, Roles and functions	
		□ Inter-sectoral coordination	
		□ Public private partnership	
		□ Challenges of health care delivery system	

## **Practical**

Total = 660 Hours 1 Week = 30 Hours

S.No.	Dept/Unit	No. of	Total Hours
		Week	
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 atSC/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.

101

## **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, problemsin
			nursing, health and social research
			□ Concept of evidence based practice
			□ Ethics in research
			☐ Overview of Research process
II	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 andtypes.
V	5	5	Developing theoretical/conceptualframework.
			☐ Theories: Nature, characteristics, Purposeand
			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
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
			stylevancouver, American Psychological
			Association(APA),
			Campbell etc
			☐ Writing scientific articles for publication:
			purposes & style
XI	3	8	Critical analysis of research reports andarticles
XII	4	7	Developing and presenting a research
			proposal

## **Activities:**

- Annotated Bibliography of research reports and articles.
- 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 presenting research 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: 100 Hours

## **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 predict results.
- 5. Draw conclusions of the study and predict statistical significance of the results.
- 6. Describe vital health statistics and their use in health relatedresearch.
- 7. Use statistical packages for data analysis

## **Content Outline**

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.
V	6	8	Measures of relationship:
			☐ Correlation – need and meaning
			□ 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 psychologyand
			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 deathrates.
			☐ Measures related to fertility, morbidity andmortality
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 healthstatistics 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 visa 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 multisectoral 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 nursing care
- 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 plans

II	10	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 and
		organizational 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)
		□ 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
		□ Duties and responsibilities of various category of nursing
		personnel Applications to nursing service and education

VI	15	Directing
		□ 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 delegation errors
		☐ Managing conflict: process, management,
		negotiation, consensus
		□ Collective bargaining: health care labour laws, unions,
		professional associations, role of nursemanager
		□ 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 nursingcare: unit
		and hospital
		□ Inventory control
		□ Condemnation
		Application to nursing service and education

VIII	15	Controlling
		□ Quality assurance – Continuous Quality
		Improvement
		• Standards
		• Models
		Nursing audit
		□ 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
		proceedingsenquiry
		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-termappraisal,
		capital and revenue
		□ Budget estimate, revised estimate, performancebudget
		□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
		□ 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
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,
	employment issues
	□ Medico legal issues
	□ 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 Revised estimate budget 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 nursingpersonnel
- 8. Prepare a list of equipments and supplies for speciality units
- 9. Assess and staffing requirement for hospitals, prepare 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 ofaction 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: 1100 hours.

#### **Course Description**

This course is designed to assist students in developing expertise and indepth 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 andthoracic 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 andthoracic 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 usedfor 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.

#### **Course Content**

Unit	Hours	Content
Ι	5	Introduction
		☐ Historical development, trends and issues in the field of
		cardiology.
		□ Cardio vascular and thoracic conditions – major health
		problem.
		□ 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 mellitus

		etc
		☐ 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 cardiovascular 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 physiology of 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 ofinterventions on HRV	
		□ Diagnostic tests	
		• Hemodynamic monitoring: Technical aspects,	
		monitoring, functional hemodynamic indices, ventricular	
		function indices, 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 Description Luncing			
		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, SScardiac enzyme studies, Serum			
		Concentration of Selected drugs.			
		☐ Interpretation and role of nurse			
$\mathbf{V}$	25	Cardiac disorders and nursing management:			
		□ 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			
		- Initalilitatory relate Diseases, infective			

		Endocarditis, Myocarditis, Pericarditis.		
		Cardiomyopathy, dilated, restrictive, hypertrophic.		
		Arrhythmias, heart block		
		Associated illnesses		
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, pneumoconiosisetc			
		Pleuritis, effusion     Prayma hama and pyotheray			
		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			
VII	10	Vascular disorders and nursing management			
		☐ Etiology, clinical manifestations, diagnosis, prognosis,			
		related pathophysiology, treatment modalities and nursing			
		management of:			
		Disorders of arteries			
		• Disorders of the aorta			
		Aortic Aneurysms,			
		• Aortic dissection			
		• Raynaud's phenomenon			
		<ul> <li>Peripheral arterial disease of the lower extremities</li> </ul>			
		<ul> <li>Venous thrombosis</li> </ul>			
		Varicose veins			
		Chronic venous insufficiency and venous leg			
		ulcers			
		• Pulmonary embolism			
1	I	1 dillional y Olifolishi			

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; ICU psychosis			
		□ Role of nurse			
IX	10	Nursing care of a patient with obstructive airway			
		□ Assessment			

		☐ Use of artificial airway			
		☐ Endotracheal intubation, tracheostomy and itscare			
		□ Complication, minimum cuff leak, securing tubes			
		Oxygen delivery systems.			
		□ Nasal Cannula			
		□ 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			
		management of:			
		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.			
		• Truncus Arteriosus.			
		<ul><li>Truncus Arteriosus.</li><li>Transposition of great arteries.</li></ul>			

		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.
	Anticoagulents
	Antiarrhythmic drugs.
	• Anti hypertensives
	• Diuretics
	Sedatives and tranquilizers.
	• Digitalis.
	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			
		<ul> <li>□ Preoperative assessment and preparation; counselling.</li> <li>□ Intraoperative care: Principles of open heart surgery,</li> </ul>			
		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			
		excision etc  □ Immediate postoperative care : assessment, postoperative			
		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			
XIII	5	Cardiac rehabilitation			
		□ Process			
		□ Physical evaluation			
		☐ Life style modification			
		☐ Physical conditioning for cardiovascular efficiency			
		through exercise			
		□Counseling			
		□ Follow up care			
XIV	5	Intensive Coronary Care Unit/intensive cardiothoracic			
XIV	5	Intensive Coronary Care Unit/intensive cardiothoracic unit:			
XIV	5	, and the second			
XIV	5	unit:			
XIV	5	unit:  □ Quality assurance			
XIV	5	<ul> <li>unit:</li> <li>□ Quality assurance</li> <li>• Standards, Protocols, Policies, Procedures</li> <li>• Infection control; Standard safety measures</li> </ul>			
XIV	5	<ul> <li>unit:</li> <li>□ Quality assurance</li> <li>• Standards, Protocols, Policies, Procedures</li> <li>• Infection control; Standard safety measures</li> <li>• Nursing audit</li> </ul>			
XIV	5	<ul> <li>unit:</li> <li>Quality assurance</li> <li>Standards, Protocols, Policies, Procedures</li> <li>Infection control; Standard safety measures</li> <li>Nursing audit</li> <li>Design of ICCU/ICTU</li> </ul>			
XIV	5	<ul> <li>unit:</li> <li>Quality assurance</li> <li>Standards, Protocols, Policies, Procedures</li> <li>Infection control; Standard safety measures</li> <li>Nursing audit</li> <li>Design of ICCU/ICTU</li> <li>Staffing; cardiac team</li> </ul>			
XIV	5	<ul> <li>unit:</li> <li>Quality assurance</li> <li>Standards, Protocols, Policies, Procedures</li> <li>Infection control; Standard safety measures</li> <li>Nursing audit</li> <li>Design of ICCU/ICTU</li> <li>Staffing; cardiac team</li> <li>Burn out syndrome</li> </ul>			
XIV	5	<ul> <li>unit:</li> <li>□ Quality assurance</li> <li>• Standards, Protocols, Policies, Procedures</li> <li>• Infection control; Standard safety measures</li> <li>• Nursing audit</li> <li>• Design of ICCU/ICTU</li> <li>• Staffing; cardiac team</li> <li>• Burn out syndrome</li> <li>□ Nurse"s role in the management of I.C.C.U andICTU.</li> </ul>			
XIV	5	<ul> <li>unit:</li> <li>□ Quality assurance</li> <li>• Standards, Protocols, Policies, Procedures</li> <li>• Infection control; Standard safety measures</li> <li>• Nursing audit</li> <li>• Design of ICCU/ICTU</li> <li>• Staffing; cardiac team</li> <li>• Burn out syndrome</li> <li>□ Nurse"s role in the management of I.C.C.U andICTU.</li> <li>□ Mobile coronary care unit.</li> </ul>			
XIV	5	<ul> <li>unit:</li> <li>□ Quality assurance</li> <li>• Standards, Protocols, Policies, Procedures</li> <li>• Infection control; Standard safety measures</li> <li>• Nursing audit</li> <li>• Design of ICCU/ICTU</li> <li>• Staffing; cardiac team</li> <li>• Burn out syndrome</li> <li>□ Nurse"s role in the management of I.C.C.U andICTU.</li> </ul>			

# **Practical**

Total = 960 Hours1

Week = 30 Hours

S.No.	Dept/Unit	No. of	<b>Total Hours</b>

		Week	
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
	ICCU	4	120 Hours

Total	32 Weeks	960 Hours
OPD	2	60 Hours
Paediatric Intensive	2	60 Hours
CCU	4	120 Hours
ICU	4	120 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, thoracicand 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, EndotrachiealThrough 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 swelling in thrombophlebetes
- 23. Identification of Homans signs
- $24. \ Buergen-Allen\ exercises$

## **CLINICAL SPECIALITY – II**

#### MEDICAL SURGICAL NURSING - CRITICAL CARE 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 indepth knowledge in the field of Critical care Nursing. It willhelp 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 illpatients including Advance Cardiac Life Support.
- 6. Demonstrate skill in handling various equipments/gadgets usedfor critical care
- 7. Provide comprehensive care to critically ill patients.
- 8. Appreciate team work & coordinate activities related to patientcare.
- 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 theareas of research in the field of critical care nursing
- 16. Identify the sources of stress and manage burnout syndromeamong health care providers.
- 17. Teach and supervise nurses and allied health workers.
- 18. Design a layout of ICU and develop standards for critical carenursing 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

II	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 team
		members
III	14	Review
	17	□ Pharmacokinetics

		- Analogica/Antiinflommatamyaganta
		☐ Analgesics/Anti inflammatory agents
		☐ Antibiotics, antiseptics
		□ Drug reaction & toxicity
		☐ Drugs used in critical care unit (inclusive ofionotropic,
		life saving drugs)
		□ Drugs used in various body systems
		□ IV fluids and electrolytes
		☐ Blood and blood components
		☐ Principles of drug administration, role of nursesand 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
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, Clinicalfeatures,
		diagnosis, Prognosis, Management:
		Medical, Surgical and Nursing
		management of:-Acute Gastrointestinal Bleeding,
		Abdominal injury, Hepatic Disorders: - Fulminent hepatic
		failure, Hepaticencephalopathy, 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, PeritonealDialysis,
		Continuous Ambulatory Peritoneal Dialysis, Continuous
		arterio venus hemodialysis, Renal Transplant

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, Seizuredisorders,	
	GuilleinBarre-Syndrome, Myasthenia	
	Gravis, Coma, Persistent vegetative state,	
	Encephalopathy, Head injury, Spinal Cord injury	
	☐ Management Modalities: Assessment of Intracranial	
	pressure, Management of intracranial hypertension,	
	Craniotomy	
	□ Problems associated with neurological disorders: Thermo	
	regulation, Unconsciousness, Herniation syndrome	
5	Endocrine System	
	☐ Causes, Pathophysiology, Clinical types, Clinicalfeatures,	
	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 Septic shock
		□ Systemic inflammatory Response:The
		inflammatory response, Multiple organ dysfunction
		syndrome
		□ Disseminated Intravascular Coagulation
		□ Drug Overdose and Poisoning,
		☐ Acquired Immunodeficiency Syndrome (AIDS)
		☐ Ophthalmic: Eye injuries, Glaucoma, retinal
		detachment
		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 medicine studies
		□ 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, Surgicaland
		Nursing management of Common pulmonarydisorders:-
		Pneumonia, Status asthmaticus, interstitial drug
		disease, Pleural effusion, Chronic obstructive pulmonary
		disease, Pulmonarytuberculosis,
		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	ıg
term mechanical ventilations	
☐ Bronchial Hygiene:-Nebulization, deep breathing	
exercise, chest physiotherapy, postural drainage,	
Inter Costal Drainage, Thoracic	
surgeries	
XIII 7 Burns	
☐ Clinical types, classification, pathophysiology, clin	nical
features, assessment, diagnosis, prognosis, Managen	ent:
Medical, Surgical & Nursingmanagement of burns	
☐ Fluid and electrolyte therapy — calculation of fluids	and
its administration	
□ Pain management	
□ Wound care	
□ Infection control	
☐ Prevention and management of burncomplications	
☐ Grafts and flaps	
□ Reconstructive surgery	
□ Rehabilitation	
XIV 5 Obstetrical Emergencies	
☐ Causes, Pathophysiology, Clinical types, clinical feat	ıres,
diagnostic Prognosis, Management: Medical, Surgical	and
Nursing management of	
:Antepartum haemorrhage, Preeclampsi	a,
eclampsia, Obstructed labour and ruptured uterus,	Post
partum haemorrhage, Peurperal sepsis, Obstetrical shoc	k

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, imperforate anus
		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'srole
		□ 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

# **Practical**

Total = 960 Hours1 Week = 30 Hours

S.No.	Dept/Unit	No. of	<b>Total Hours</b>
		Week	
1.	Burns ICU	2	60 Hours
2.	Medical ICU	8	240 Hours
3.	Surgical ICU	12	360 Hours
4.	CCU	2	60 Hours
5	Emergency Department	3	90 Hours
6.	Dialysis Unit	1	30 Hours
7.	Transplant Room	2	60 Hours
8.	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/blood taking
- 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 for dialysis

#### 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 insulin periodically.
- 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 indepth understanding in the field of oncology Nursing. It willhelp 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 withcancer.
- 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 theareas 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 caringfor 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.

## **Course Content**

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
II	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
	_	
III	4	Etiology of Cancer
111	4	□ Carcinogenesis,
111	4	
111	4	□ Carcinogenesis,
111	4	□ Carcinogenesis, □ Theories of cancer causation
111	4	□ Carcinogenesis, □ Theories of cancer causation □ Risk factors
111	4	<ul> <li>□ Carcinogenesis,</li> <li>□ Theories of cancer causation</li> <li>□ Risk factors</li> <li>□ Carcinogens – genetic factors, chemicalcarcinogens,</li> </ul>

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 aspiration cytology(FNAC)
	Histopathology: Biopsy
	Radiological assessment: MRI, Ultrasound, Computed
	tomography, Mammography, Positron emission
	tomography(PET), Radio nuclide imaging, Functional
	metabolism imaging
	• Endoscopies
	Nurses responsibilities in diagnostic measures
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 surgical risk
		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, teletherapy, 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)
- □ Bone Marrow Transplantation /Stem Cell
  Transplantation
- Types, indications, transplantation procedure, complications and nursing management
- 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, types and		
		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		
		Recent developments in Cancer pain		
		□ Non- Pharmacological pain relief technique-		
		• Complementary therapies(Music, massage,		
		meditation, relaxation techniques, biofeed back etc)		
		Psychological intervention in pain control		
		Alternative system of medicinesRole		
		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 itselements		
		□ Home care		
		□ Hospice care		
		Role of nurse in palliative care		
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 children with Paediatric
		Malignancies
XII	15	Nursing Management of Physiological
		Conditions and Symptoms Of Cancer Patient
		Conditions and Symptoms Of Cancer Patient  ☐ Nutrition: - effects of cancer on nutritional Status and its
		□ Nutrition: - effects of cancer on nutritional Status and its
		□ Nutrition: - effects of cancer on nutritional Status and its consequences:-Anemia, Cachexia, Xerostomia, mucositis,
		□ Nutrition: - effects of cancer on nutritional Status and its consequences:-Anemia, Cachexia, Xerostomia, mucositis, Dysphagia, nausea and vomiting, constipation, diarrhoea,
		□ Nutrition: - effects of cancer on nutritional Status and its consequences:-Anemia, Cachexia, Xerostomia, mucositis, Dysphagia, nausea and vomiting, constipation, diarrhoea, electrolyte imbalances, taste alterations
		<ul> <li>□ Nutrition: - effects of cancer on nutritional Status and its consequences:-Anemia, Cachexia, Xerostomia, mucositis,</li> <li>Dysphagia , nausea and vomiting, constipation, diarrhoea, electrolyte imbalances, taste alterations</li> <li>□ Impaired mobility: Decubitus ulcer, pathologic</li> </ul>
		<ul> <li>□ Nutrition: - effects of cancer on nutritional Status and its consequences:-Anemia, Cachexia, Xerostomia, mucositis,</li> <li>Dysphagia , nausea and vomiting, constipation, diarrhoea, electrolyte imbalances, taste alterations</li> <li>□ Impaired mobility: Decubitus ulcer, pathologic fractures, thrombophlebitis, pulmonary embolism,</li> </ul>
		□ 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
		□ 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
		□ 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 □ Dyspepsia & hiccup, dyspnoea
		□ 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 □ Dyspepsia & hiccup, dyspnoea □ intestinal obstruction,
		□ 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 □ Dyspepsia & hiccup, dyspnoea □ intestinal obstruction, □ Fungating wounds
		□ 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 □ Dyspepsia & hiccup, dyspnoea □ intestinal obstruction, □ Fungating wounds □ Anxiety & depression, insomnia
		□ 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 □ Dyspepsia & hiccup, dyspnoea □ intestinal obstruction, □ Fungating wounds □ Anxiety & depression, insomnia □ Lymph edema

		□ Nursing	g	management	of	cancer	patients
		experiencing	g sex	tual dysfunction			
		□ Sexual co	ouns	eling			
XIII	10	Cancer Em	erge	encies			
		□ Dissemin	nated	intravascular co	agulati	ion(DIC),	
		□ Malignan	nt ple	eural effusion			
		□ Neoplast	tic c	ardiac tampona	de and	septic sh	ockspinal
		cord compre	essic	on			
		□ Superior	vena	cava 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 andneeds
		□ 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.No.	Dept/Unit	No. of	Total Hours
		Week	
1.	Medical Oncology ward	6	180Hours
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 painclinic	2	60 Hours
8.	Pediatric Oncology ward	2	60 Hours
	Palliative Care ward	2	60 Hours
	Community oncology	2	60 Hours
	Hospice	1	30 Hours
	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, HighDensity 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 and biopsy
- 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 for cancer
- 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 indepth 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 neuroscience nursing
- 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 theareas 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 neurosciencenursing practice
- 15. Identify the sources of stress and manage burnout syndromeamong 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	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 andneuro
		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
IV	15	Assessment and diagnostic measures
		□ 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 role in diagnostic tests
V	5	Meeting Nutritional needs of neurological patients
		☐ Basic nutritional requirements
		☐ Metabolic changes following injury and starvation
		□ Nutritional assessment
		□ Common neurological problems that interfere with
		nutrition and 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
VII	10	Traumatic conditions.
		□ Causes, pathophysiology, Clinical types, Clinicalfeatures,
		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, Clinicalfeatures,
		diagnostic, Prognosis , Management: medical,
		surgical and
		Nursing management of Neuro infections
		Meningitis-types
		• Encephalitis.
		Poliomyelitis.
		Parasitic infections.
		Bacterial infections
		Neurosyphilis.
		• HIV & AIDS.
		Brain abscess.
XI	10	Paroxysmal disorders.
		□ Causes, pathophysiology, Clinical types, Clinicalfeatures,
		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
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 followingstroke,
		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	☐ Quality assurance in neurolgical nursing practice	
		□ Role of advance practitioner in neurological	
		nursing	
		□ Professional practice standards	
		□ Quality control in neurological nursing	
		□ Nursing audit	
		□ Neuro ICU	
		Philosophy, aims and objectives	
		Policies, staffing pattern, design and physical planof	
		neuro ICU	
		• Team approach, functions	
		Psychosocial aspects in relation to staff and	
		clients of neuro	
		ICU,	
		In-service education	

**Practical** 

Total = 960 Hours 1

week = 30 Hours

S.No.	Area of Posting	No. of	Total Hours
		Week	
1.	O.P.D.	2	60Hours
2.	Casualty	2	60Hours
3.	Diagnostics	2	60 Hours
4.	Neuro psychiatry	1	30 Hours
5	Neuro Medical wards	4	120 Hours
6.	Paediatric Neuro ward	2	60 Hours
7.	Neuro surgical wards	4	120 Hours

8.	Head Injury ward	3	90 Hours
9	ICU- neuro medicine	4	120 Hours
10	ICU- neuro surgical	4	120 Hours
11	Rehabilitation	2	60 Hours
12	Operation Theatre	2	60 Hours
	Total	32 Weeks	960 Hours

### ESSENTIAL NEURO NURSING 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
- ${\bf 3.\ Biopsies-muscle,\ nerve\ and\ Brain}$
- 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 patients on 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 expertiseand indepth understanding in the field of Nephro and urologicalNursing. It will help students to develop advanced skills for nursing intervention in various nephro and urological conditions. It willenable 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 andurological** 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 patientcare.
- 9. Practice infection control measures.
- 10. Identify emergencies and complications & take appropriatemeasures
- 11. Assist patients and their family to cope with emotional distress, grief, anxiety and spiritual needs
- **12.** Discuss the legal and ethical issues in **nephro and urological** nursing
- 13. Identify the sources of stress and manage burnout syndromeamong health care providers
- 14. Appreciate the role of alternative system of medicine in the careof patient
- 15. Incorporate evidence based nursing practice and identify theareas 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
Ι	5	Introduction
		☐ Historical development: trends and issues in the field of
		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 inall the units)

II	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 urinarysystem		
		□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 scan,		
		biopsy, endoscopy-cystoscopy, urodynamics		
		studiescystometrogram, urinary flow study,		
		sphincter electromyography, voiding pressure flowstudy,		
		videourodynamics, Whitaker study		
		Interpretation of diagnostic measures Nurse's rolein		
V	5	diagnostic tests  Panal immunanthy/Immunanthalagy		
V	5	Renal immunopathy/Immunopathology		
		☐ General Concept of immunopathology  ☐ Immuno machanism of glomorual vascular		
		☐ Immune mechanism of glomerual vascular disease		
		□ Role of mediater systems in glomerula vasculardisease		

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, congenitalabnormalities
		☐ 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
		management of
		□ Glomueralo nephritis- chronic, acute , nephritic
		syndrome
		☐ Acute Renal failure and chronic renal failure.
		□ Renal calculi
		□ Renal tumours-benign and malignant
		□ Renal trauma
		□ Renal abscess
		□ Diabetic nephropathy
		□ Vascular disorders
		□ Renal tuberculosis
		□ Polycystic
		□ Congenital disorders
		- Congenital disorders

VIII	10	☐ Management of Renal emergencies		
		□ Anuria		
		□ Acute Renal failure		
		□ Poisoning		
		□Trauma		
		□ Urine retention		
		☐ Acute graft rejection		
		□ Hematuria		
		□ Nurse"s role		
IX	10	Drugs used in urinary disorders		
		□Classification		
		☐ Indications, contraindications, actions and		
		effects, toxic effects		

		□ Role of nurse
X	10	Dialysis
		□ Dialysis- Historical, types, Principles, goals
		Hemodialysis- vascular access sites- temporaryand
		permanent
		Peritoneal dialysis
		□ Dialsyis Procedures- steps, equipments,
		maintenance,
		□ Role of nurse- pre dialysis, intra and post dialysis
		□ Complications-
		□ Counseling
		□ patient education
		□ Records and reports
XI	10	□ 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 matchingand
		cross
		matching in renal transplantation
		☐ Surgical techniques of renal transplantations
		□ Chronic renal transplant rejection
		□ Complication after KTP: Vascular and lymphatic,
		Uroloical,
		cardiovascular, liver and neurological, infectious
		complication
		☐ KTP in children and management of pediatric patient
		with KTP
		☐ KTP in developing countries
		□ Results of KTP

		□ Work	up o	f donor	and	recipient	for	renal
		transplant						
		□ Psycholo	ogical as	pect of K	TP and	organ do	nations	
		□ Ethics in	n transp	lants				
		□ Cadaver	ic transp	olantation	l			
XII	5	□ Rehabi	litation	of p	atient	with 1	nephrolo	gical
		problems						
		□ Risk fac	tors and	prevention	on			
		□ Rehabil	itation c	f patient	s on d	ialysis ar	d 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 withRenal				
		Diseases -UTI, ureteral reflux, glomerulo nephritis,				
		nephrotic syndrome infantile nephrosis, cystic kidneys,				
		familial factors in renal diseases inchildhood, Haemolytic				
		uraemic syndrome. Benignrecurrent haemturia,				
		nephropathy, wilms"				
		tumour				
XIV	5	Critical care units- dialysis , KTP unit				
		□ Philosophy, aims and objectives				
		□ Policies, staffing pattern, design and physicalplan 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				

# **Practical**

Total = 960 Hours 1 week = 30 Hours

S.No.	Deptt. /Unit	No. of	<b>Total Hours</b>
		Week	
1.	Nephrology Ward	6	180Hours
2.	Pediatrics	2	60Hours
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

# 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 for dialysis
- 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 indepth 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 needs of the patient while providingholistic 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 theareas 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 inorthopedic
		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, Muscleenzymes,
		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
		□ 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
		□ Head injury
		□ Chest injury
		• Polytrauma
		Nerve injuries
		Vascular injuries
		• Soft tissue injuries
		• Sports injuries
		Amputation
		1

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
		Different types 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,
		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 andnursing		
		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, clinicalfeatures,		
		diagnosis, prognosis – medical surgical and nursing		
		management of:		
		Osteo Arthritis		
		Rheumatoid Arthritis		
		Ankylosing spondylitis.		
		• Spinal disorders.		
		Systemic Lupus Erythematosus		
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 neuromusculardisorders

		□ Blood and blood components
		□ Care of drugs and nurses role
XV	30	Nurses Role in Orthopedic Conditions
		□ Gait analysis
		□ Urodynamic studies
		□ Prevention of physical deformities
		□ Alteration of body temperature regulatory systemand
		immune systems
		☐ Immobilization – cast, splints, braces and
		tractions
		□ Prevention and care of problems related to
		immobility
		□ Altered sleep patterns
		□ 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
		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 inwalking:
		Crutch walking, wheel chair, Transfer techniques,
		• Types of gaits: Non-weight bearing, partial weight bearing,
		four point crutch, tripoid, walking with sticks, calipers

22 1 2	3	□ Principles of rehabilitation, definition, philosophy, process,
XVI	8	Rehabilitation
		• Chest physiotherapy
		bath, heat therapy, ice, helio therapy, radiant heat,
		• Forms of therapies: Hydrotherapy, electrotherapy, wax

	□ Various types of therapies
	☐ Special therapies and alternative therapies
	□ Rehabilitation counseling
	□ Preventive and restorative measures.
	□ Community based rehabilitation (CBR)
	□ Challenges in rehabilitation.
	□ Role of the nurse in rehabilitation,
	☐ Legal and ethical issues in rehabilitation nursing
	□ Occupational therapy
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.
	☐ Public policy in rehabilitation nursing
	☐ The persons with disabilities act 1995,
	☐ Mental rehabilitation and Multiple disabilities act1992,
	☐ 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.
4	Quality assurance
	☐ Standards, Protocols, Policies, Procedures
	□ Nursing audit
	□Staffing
	Design of authomodic physictherens and
	☐ Design of orthopedic, physiotherapy and

# **Practicals**

- 1. Clinical practice in Orthopedic, physiotherapy and RehabilitationUnits.
- 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

# **Clinical Experience**

Total = 960 Hours 1 week = 30 Hours

S.No.	Deptt. /Unit	No. of	Total Hours
		Week	
1.	Orthopedic Ward	8	240Hours
2.	Orthopedic Operation theatre	4	120Hours
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

	2	60 Hours
	32 Weeks	960 Hours
it	it	

## **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**

#### **CLINICAL SPECIALITY - II**

## MEDICAL SURGICAL NURSING - GASTRO ENTEROLOGY NURSING

Placement : II Year Hours of Instruction

Theory: 150 hrs.

Practical: 950 hrs.

Total: 1100 hrs.

## **Course Description**

This course is designed to assist students in developing expertise and indepth 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 enterology nusing
- 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 usedfor patients with gastrointestinal conditions
- 9. Appreciate team work & coordinate activities related to patientcare.
- 10. Practice infection control measures.
- 11. Identify emergencies and complications & take appropriatemeasures
- 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 syndromeamong health care providers
- 15. Appreciate the role of alternative system of medicine in care of patient
- 16. Incorporate evidence based nursing practice and identify theareas 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 nursing perspectives		
		□ 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
		GITBarrium enema,
		• Ultra sound:
		Computed tomography
		• MRI
		Cholangiography: Percutaneous transheptatic
		Cholangiogram(PTC)
		Magnetic Resonance Cholangio pancreotography(MRCP)
		• Nuclear imaging scans(scintigraphy)
		• Endoscopy
		• Colonoscopy
		Proctosigmoidoscopy
		Endoscopic Retrogrde Cholongio pancreotography(ERCP)
		Endoscopic ultrasound
		• Peritonoscopy(Laproscopy)
		Gastric emptying studies
		• Blood chemistries: Serum amylase, serum lipase
		• Liver biopsy
		• Miscellaneous tests:Gastric analysis, fecal
		analysis

	• Liver	function 1	tests: Bile	formation	and excretion,dye
	excretio	n test, Pro	tein metab	oolism, haei	mostaticfunctions-
	proth	ombin vita	min	K	production, serum
	enzyme	tests,Lipid	l metaboli	smserum C	Cholesterol
	Interpre	tation of d	iagnostic	measures N	urse"s role in
	diagnos	tic tests			

## 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, Gastrointestinalpolyposis 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
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	
	• Cirrhosis of liver, liver failure,	Liver
	transplantation	
	• Non cirrhotic portal fibrosis	
	• Liver abscess,;	
	• Parasitic and other cysts of the liver	
	• Disorders of the Gall Bladder and Bile Duct:	
	□ Cholecystitis	
	□Cholelitheasis	
	□Choledocholilethiasis	
	☐ Disorders of the pancreas: Pancreatitis,	
	□ Benign tumors of islet cells	
	□ 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
		management of:
		• 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, bowel
		and greater vessel injuries
		Acute appendicitis /peritonitis
		Acute abdomen

		Food poisoning
VIII	15	□ Congenital Anomalies of Esophagus
		• Esophageal atresia
		Tracheo esophageal fistula
		• Esophageal stenosis
		Esophageal duplications
		Dysphagia – Lusoria – aberrent right subclavianartery
		compressing esophagus
		• Esophageal rings – schalzkiring
		• Esophageal webs
		□ 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 Receptor Antagonists
		□ 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
X	10	Nutrition and nutritional problems related to GIsystem
		□ 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 and
		management
		□ Eating disorders- anorexia nervosa, bulimia
		nervosa
		□ 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, Norm	s, policies and protocols		
		☐ Practice star	ndards		
XIII	5	Education an	d training in GE care		
		□ Staff orienta	ation, training and develo	pment,	
		□ In-service e	ducation program,		
		Clinical teac	ching programs		

# **Clinical Experience**

Total = 960 Hours 1 week = 30 Hours

S.No.	Deptt. /Unit	No. of	<b>Total Hours</b>
		Week	
1.	Diagnostic labs		240Hours
2.	Emergency and casualty		120Hours
3.	Liver transplant unit		60 Hours
4.	GE Medical Ward		120 Hours
5	GE Surgical Ward		120 Hours
6.	OT		60 Hours
7.	ICU		120 Hours
8.	Pediatric gastroenterology		60 Hours

9	Oncology		60 Hours
10	GE OPD		
	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 Pseudocyst pancreas

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 indepth 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 risk newborn.
- 5. Identify and Manage obstetrical and neonatal emergencies as perprotocol.
- 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 gynaecologicalnursing
- 14. Function as independent midwifery nurse practitioner

## **Course Content**

Unit	Hours	Content
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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 Management of Pregnancies at risk-dueto
		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 Low Platelet
		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 healthproblems
		☐ Metabolic conditions.
		☐ Anemia and nutritional deficiencies
		□ Hepatitis
		□ Cardio-vascular disease.
		☐ Thyroid diseases.
		□ Epilepsy.
		□ Essential hypertension
		□ Chronic renal failure.
		□ 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, uterine
		anomalies, prolapse, ovarian cyst

III	15	Abnormal labour, pre-term labour & obstetrical
		emergencies
		□ Etiology, pathopyhsiology and nursing
		management of
		Uncoordinated uterine actions, Atony of uterus,
		precipitate labour, prolonged labour.
		Abnormal lie, presentation, position compound
		presentation.
		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
		complications, puerperal venous thrombosis and
		pulmonary embolism
		• Sub involution of uterus, Breast conditions,
		Thrombophlebitis
		Psychological complications, post partum blues,
		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 nursing services in NICU

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 and nursing
		management of
		Menstrual 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 andabdominal.
		• Sexual abuse, rape, trauma, assault

VIII	5	Administration and management of obstetricaland
		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	Essential Obstetrical And Gynecological SkillsProcedure
		Observed
		Assisted Reproductive Technology procedures
		Ultra sonography
		Specific laboratory tests.
		Amniocentesis.
		Cervical & vaginal cytology.
		• Fetoscopy.
		Hysteroscopy.
		• MRI.
		Surgical diathermy.
		• Cryosurgery.

# **Clinical Experience**

Total = 960 Hours 1 week = 30 Hours

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

## **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 breast engorgement
- 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**

This course is designed to assist students in developing expertise and indepth 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 preadolescents 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 risk children
- 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**

d trends in s-Expanded and nt(including d non-invasive ies and nursing
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ies and nursing
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nal atresia,
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ders: Nephrotic
emolytic-uremic
eart disease,

- 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/ Disorders
		Gastrointestinal system: Cleft lip, cleft palate and
		conditions requiring plastic surgery, Tracheo
		esophageal
		fistula/atresia, Hirschsprungs' disease/megacolon,
		malrotation, intestinal obstruction, duodenal
		atresia, 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 traumatic injuries:
		General principles of 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,
		Hougkin 5/11011 Hougkin 5 Lympholia,

		Hepatoblastoma, Rhabdomyosarcoma
		Management of stomas, catheters and tubes
		Management of wounds and drainages
IV	10	Intensive care for pediatric clients
		☐ Resuscitation, stabilization & monitoring of
		pediatric patients
		☐ Anatomical & physiological basis of critical illnessin
		infancy and childhood
		□ Care of child requiring long-term ventilation
		□ Nutritional needs of critically ill child
		☐ Legal and ethical issues in pediatric intensivecare
		☐ Intensive care procedures, equipment and
		techniques
		□ Documentation
V	20	High Risk Newborn
		□ Concept, goals, assessment, principles.
		□ Nursing 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
		• 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 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 challenged child.
		☐ Training & rehabilitation of challenged children
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 education program,
☐ Clinical teaching programs.

**Practical** 

Field visits: Total = 960 Hours 1

week = 30 Hours

S.No.	Deptt. /Unit	No. of Week	Total Hours
1.	Pediatric medicine ICU	4	120Hours
2.	Pediatric surgical ICU	4	120Hours
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 Weeks	960 Hours

.

## **Essential**

## I. Procedures Observed:

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

<sup>\*</sup>Child care center, Anganwadi, play school, Special schools for challenged children, Juvenile court, UNICEF, Orphanage, Creche, SOS village

• 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(CapillaryRefill 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, gavagefeeding, 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,

onitoring 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: 1100 Hours

**Course Description** 

This course is designed to assist students in developing expertise and indepth

268

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 mentaldisorders 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. tilize the recent technology and various treatment modalities in the 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 their management
		☐ 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, Predisposing
		Factors
		□ Management
		□ 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

		☐ Psychopharmacological Intervention and Nursing
		Management
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
		☐ 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
		(Check ICD10)
		□ Nature of the Disorder
		□ Predisposing Factors
		□ Schizophrenia -Types
		Disorganized Schizophrenia
		Catatonic Schizophrenia
		Paranoid Schizophrenia

		Undifferentiated Schizophrenia
		Residual Schizophrenia
		□ Other Psychotic disorders
		Schizoaffective Disorder
		Brief Psychotic Disorder
		Schizophrenicform Disorder
		Psychotic Disorder Due to a General Medical
		Condition
		Substance-Induced Psychotic Disorder
		□ Treatment and Nursing Management
IX	8	Mood Disorders
	O	
		☐ Historical Perspective
		□ Epidemiology
		☐ The Grief Response
		☐ Maladaptive 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 Anxiety Disorder
		• Phobias
		Obsessive-Compulsive Disorder
		Posttraumatic Stress Disorder
		• Anxiety Disorder Due to a General Medical
		Condition
		Substance-Induced Anxiety Disorder
		☐ Treatment Modalities
		□ Psychopharmacology & Nursing Management
XI	5	Somatoform And Sleep Disorders
XI	5	Somatoform And Sleep Disorders  □ Somatoform Disorders
XI	5	_
XI	5	□ Somatoform Disorders
XI	5	☐ Somatoform Disorders ☐ Historical Aspects
XI	5	☐ Somatoform Disorders ☐ Historical Aspects • Epidemiological Statistics
XI	5	□ Somatoform Disorders □ Historical Aspects • Epidemiological Statistics • Pain Disorder
XI	5	□ Somatoform Disorders □ Historical Aspects • Epidemiological Statistics • Pain Disorder • Hypochondriasis
XI	5	□ Somatoform Disorders □ Historical Aspects • Epidemiological Statistics • Pain Disorder • Hypochondriasis • Conversion Disorder
XI	5	□ Somatoform Disorders □ Historical Aspects • Epidemiological Statistics • Pain Disorder • Hypochondriasis • Conversion Disorder • Body Dysmorphic Disorder
XII	4	<ul> <li>□ Somatoform Disorders</li> <li>□ Historical Aspects</li> <li>• Epidemiological Statistics</li> <li>• Pain Disorder</li> <li>• Hypochondriasis</li> <li>• Conversion Disorder</li> <li>• Body Dysmorphic Disorder</li> <li>□ Sleep Disorder</li> </ul>
		□ Somatoform Disorders □ Historical Aspects • Epidemiological Statistics • Pain Disorder • Hypochondriasis • Conversion Disorder • Body Dysmorphic Disorder □ Sleep Disorder □ Treatment Modalities and Nursing Management
		□ Somatoform Disorders □ Historical Aspects • Epidemiological Statistics • Pain Disorder • Hypochondriasis • Conversion Disorder • Body Dysmorphic Disorder □ Sleep Disorder □ Treatment Modalities and Nursing Management  Dissociative Disorders and Management
		□ Somatoform Disorders □ Historical Aspects • Epidemiological Statistics • Pain Disorder • Hypochondriasis • Conversion Disorder • Body Dysmorphic Disorder □ Sleep Disorder □ Treatment Modalities and Nursing Management  Dissociative Disorders and Management □ Historical Aspects

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 AndBulimia
		Nervosa obesity
		□ Psychopharmacology
		☐ Treatment & Nursing Management
XV	4	Adjustment and Impulse Control Disorders
		☐ Historical and Epidemiological Factors
		Adjustment Disorders
		• Impulse Control Disorders
		☐ Treatment & Nursing Management
XVI	4	Medical Conditions due to Psychological Factors
		□ Asthma
		□Cancer
		□ 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
		• Dependent Personality Disorder
		Obsessive-Compulsive Personality Disorder
		Passive-Aggressive Personality Disorders
		☐ 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 Elderly Population
		□ Psychiatric problems among elderly population
		☐ 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- Communitymental
		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
XXII	5	Ethical and Legal Issues in Psychiatric/MentalHealth

		Nursing	
		□ Ethical Considerations	
		□ Legal Consideration	
		Nurse Practice Acts	
		• Types of Law	
		Classification within Statutory and Common Law	
		Legal Issues in Psychiatric/Mental Health Nursing	
		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 psychiatricunits
		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.

# **Practical**

Field visits: Total = 960 Hours 1 week = 30 Hours

S.No.	Area of Posting	No. of Week	Total Hours
1.	Acute Psychiatric Ward	4	120Hours
2.	Chronic Psychiatric Ward	4	120Hours
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	2	60 Hours
	guidance clinic		
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

# **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 identifying mental 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 indepth understanding in the field of community healthnursing. 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 health programmes

281

- 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 center and develop standards for community health nursing practice.

### **Content Outlines**

Unit Hours	Content
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Ι	20	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
		□ Emerging and re-emerging diseases Epidemics
		□ National Integrated disease Surveillance
		Programme
		☐ Health information system
		□ Epidemiology study and reports
		□ Role of Community health nurse

II	40	National Health and Family Welfare Programmes
		□ Objectives, Organisation/manpower/resources, Activities,
		Goals, inter-sectoral approach, implementation,
		item/purpose, role and
		responsibilities
		of community health nurse:
		• National Vector Borne Disease Control Programm
		(NVBDCP)
		• NationalFilaria Control Programme
		National Leprosy Eradication Programme
		• Revised national TB Control Programme
		National Programme for Control of Blindness
		National Iodine Deficiency disorders Control
		Progeramme
		National Mental Health Programme
		National AIDS Control Programme
		National Cancer Control Programme
		• RCH I and II
		Non- communicable disease programmes
		• NRHM
		- Health Schemes:
		□ESI
		□CGHS
		☐ Health Insurance

III	15	School Health
		☐ 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 healthnurse
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 offood
		□ 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
		I

		□ International health days and their significance		
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 outreach services		
		□ Transportation		
		□ Public relations		
		☐ Planning in-service educational programme and		
		teaching		
		☐ 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 forelderly-
		Role of NGOs
		□ Roles and responsibilities of Geriatric nurse inthe
		community
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
		□ Vocational rehabilitation
		□ Role of voluntary organizations
		☐ Guidance and counseling
		□ Welfare measures
		□ Role and responsibilities of community healthnurse

VIII	10	Community mental health	
		☐ Magnitude, trends and issues	
		□ National Mental Health Program- Communitymental	
		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	
		Secondary prevention	
		Tertiary Prevention	
		□ Community based rehabilitation	
		☐ Human rights of mentally ill	
		□ Substance use	
	□ Mentally challenged groups		
		□ 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			
		peoplephysical, 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 and WHO		
		recommendations, Factories act, ESI act		
	□ Role of Community health nurse, Occupationa			
		Team		

**Total = 960 Hours 1 week = 30 Hours** 

S.No.	Deptt./Unit	No. of Week	Total Hours
1.	Urban and Rural community	17	510Hours
2.	School Health	3	90Hours
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 health centers
- 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