**SYLLABUS AND REGULATIONS**

**MASTER OF SCIENCE IN NURSING**

**SYLLABUS &CURRICULUM**

**2019**

**Faculty of Nursing**

**SGT UNIVERSITY, BUDHERA**

**GURGAON**

# Philosophy

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

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

Indian Nursing Council believes that:

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

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

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

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

# Aim

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

# Objectives

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

1. Utilize/apply the concepts, theories and principles of nursing science
2. Demonstrate advance competence in practice of nursing
3. Practice as a nurse specialist.
4. Demonstrate leadership qualities and function effectively as nurse educator and manager.
5. Demonstrate skill in conducting nursing research, interpreting and utilizing the findings from health related research.
6. Demonstrate the ability to plan and effect change in nursing practice and in the health care delivery system.
7. Establish collaborative relationship with members of other disciplines
8. Demonstrate interest in continued learning for personal and professional advancement.

# Other Staff (Minimum requirements)

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

* + Ministerial

a) Administrative Officer 1

1. Office Superintendent 1
2. PA to Principal 1
3. Accountant/Cashier 1
   * Upper Division Clerk 2
   * Lower Division Clerk 2
   * Store Keeper 1
4. Maintenance of stores 1
5. Classroom attendants 2
6. Sanitary staff As per the physical space
7. Security Staff As per the requirement
   * Peons/Office attendants 4
   * Library
8. Librarian 2
9. Library Attendants As per the requirement
   * + Hostel
10. Wardens 2
11. Cooks, Bearers, As per the requirement Sanitary Staff
12. Ayas /Peons As per the requirement
13. Security Staff As per the requirement
14. Gardeners & Dhobi Depends on structural facilities (desirable)

# Eligibility Criteria/Admission Requirements:

1. The candidate should be a Registered Nurse and Registered midwife or equivalent with any State Nursing Registration Council.
2. The minimum education requirements shall be the passing of :

B.Sc. Nursing / B.Sc. Hons. Nursing / Post Basic B.Sc. Nursing with minimum of 55% aggregate marks.

1. 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.
2. Minimum one year of work experience after Basic B.Sc. Nursing.
3. Minimum one year of work experience prior or after Post Basic B.Sc. Nursing.
4. Candidate shall be medically fit.
5. 5% relaxation of marks for SC/ST candidates may be given.

**Entrance/Selection test**

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

# Regulations for examination:

**Eligibility for appearing for the examination:**

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

**Classification of results:**

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

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

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

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

**Practicals**

* 4 hours of practical examination per student.
* Maximum number of 10 students 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 proposal | End of 9th month of 1st year |
| 2. | Submission of dissertation – Final | End of 9th month of IInd Year |

Note: - Administrative approval and ethical clearance should be obtained

* 1. Research Guides
     1. *Qualification of Guide*

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

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

* + 1. *Guide – Students Ratio*

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

* + 1. *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)

Available 52 weeks

Vacation 4 weeks

Examination 2 weeks

Gazetted holidays 3 weeks

Total weeks available 43 weeks 40 hours per week 1720 hours **Total hours for 2 years 3440 hours**

**Course of Instruction**

**Theory (hrs)**

**Practical (hrs)**

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

|  |  |  |
| --- | --- | --- |
| **Total** | **600** | **1100** |

**II nd Year**

|  |  |  |
| --- | --- | --- |
| Nursing Management | 150 | 150 |
| Nursing Research(Dissertation) |  | 300 |
| \*Clinical Speciality-II | 150 | 950 |
| **Total** | **300** | **1400** |

Educational visit 2 weeks

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

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

**Scheme of Examination**

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

* Nursing research=50 and statistics=25

\*\*Nursing research=15 and statistics=10

1. Minimum pass marks shall be 50 % in each of the Theory and practical papers separately.
2. A candidate must have minimum of 80% attendance (irrespective of the kind of absence) in theory and practical in each subject for appearing for examination.
3. A candidate must have 100% attendance in each of the practical areas before award of degree
4. A candidate has to pass in theory and practical exam separately in each of the paper.
5. If a candidate fails in either theory or practical paper he/she has to re-appear for both the papers (Theory and practical).
6. Maximum no. of attempts permitted for each paper is 3 including first attempt.
7. The maximum period to complete the course successfully should not exceed 4 (four) years
8. A candidate failing in more then two subjects will not be promoted to the IInd year.
9. No candidate shall be admitted to the subsequent IInd year examination unless the candidate has passed the Ist year examination.
10. Maximum number of candidates for all practical examination should not exceed 10 per day.
11. Provision of Supplementary examination should be made.
12. All practical examinations must be held in the respective clinical areas.
13. One internal and One external examiners(outside the University) should jointly conduct practical examination for each student
14. An examiner should be M.Sc (N) in concerned subject and have minimum of 3 (three) years post graduate teaching experience.
15. One internal and One external examiners(outside the University) should evaluate dissertation and jointly conduct viva-voce for each student
16. For Dissertation Internal examiner should be the guide and external examiner should be Nursing faculty / nursing expert in the same clinical speciality holding Ph.D./M.Phil/M.Sc. Nursing with a minimum of 3 years experience in guiding the research projects for Post Graduate students of Nursing.

**Admission Strength**

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

**Health Services**

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

1. An annual medical examination.
2. Vaccination against Tetanus, hepatitis B or any other communicable disease as considered necessary.
3. Free medical care during illness and / provision of health insurance should be made.
4. 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.

**12. Question paper setting:-**

* Question paper shall consist of 3 part:

1. Long Essay : 3 Question ( 2 Compulsory)
2. Short Essay : 7 Question ( 5 Compulsory)
3. Short Answers: 10 Question (Student shall be required to answer every Question

**NURSING EDUCATION**

**M.Sc. Nursing 1st Year**

**Theory - 150 hours**

**Practical - 150 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 in teaching learning process.

4. Demonstrate competency in teaching, using various instructional strategies.

5. Critically analyze the existing Nursing educational programs, their problems, issues and future trends.

6. Describe the process of curriculum development, and the need and methodology of curriculum change, innovation and integration.

7. Plan and conduct continuing nursing education programs.

8. Critically analyze the existing teacher preparation programs in Nursing.

9. Demonstrate skill in guidance and counseling.

10. Describe the problems and issues related to Administration of Nursing curriculum including selection and organization of clinical experience.

11. Explain the development of standards and accreditation process in nursing education

programs.

12. Identify research priorities in nursing education.

13. Discuss various models of collaboration in Nursing education and services.

14. Explain the concept, principles, steps, tools and techniques of evaluation.

15. Construct, administer and evaluate various tools for assessment of knowledge, skill, and attitude.

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| **S.No** | **Topic** | **Learning objective** | **Teaching Guidelines** | **Methodology** | **Time** |
| 1. | 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 | Explain the  aims of  education, philosophies, trends in education and health: its  impact on nursing education. | To cover the concept of 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 inIndia | Teacher seminar on Education: Definition, aims, concepts, philosophies &their education implications  Student interactive session on Educational reforms and National Educational policy, various educational commissions reports and  Trends in  development of Nursing education in India. | 10HRS |
| 2. | **Teaching – LearningProcess**   * Concepts of teaching and learning: Definition, theories of | Describe the teaching learning process. | To cover the Concepts of teaching and learning: Definition, theories of teaching and learning, relationship between teaching andlearning. | Teacher seminar on Concepts of teaching and learning: Definition, theories of | 20HRS |

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|  | teaching and learning, relationship between teaching andlearning.   * Educational aims and Objectives; types,domains,   levels, elementsand writing of educational Objectives.   * Competency basededucation   (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, roleplay  (Socio-drama), clinical teaching methods, programmed instruction, self directed learning(SDL), micro teaching, computer assisted instruction(CAI), computer assisted 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, roleplay  (Socio-drama), clinical teaching methods, programmed instruction, self directed learning(SDL), micro teaching, computer assisted instruction(CAI), computer assistedlearning  (CAL) | teaching and learning, relationship between teaching andlearning.  Student seminar on Competency based education (CBE) and  outcome based education (OBE) Student interactive session on Instructional design: Planning and designing the lesson, writing  lesson plan: meaning, its need and importance, formats. |  |

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|  | (CAL) |  |  |  |  |
| 3 | **Instructional media and methods**   * Key concepts in the selection and use of media in education * Developing learning resource material using differentmedia * Instructionalaids   – types, uses,selection, preparation, utilization.   * Teacher’s role in procuring and managing instructional Aids   – Project and non- projected aids, multimedia, video- tele conferencing  Etc | Describe the various instructional media and  methods in teaching learning process. | **To cover the concept of Instructional media and methods its** Key concepts in the selection and use of media in education**,** Developing learning resource material using different media**,** Instructional aides – types, uses, selection, preparation, utilization.   * Teacher’s role in procuring and managing instructional Aids – Project and non-projected aids, multimedia, video-tele conferencingetc | Student interactive session on Key concepts in the selection and use of media in education.  Teacher seminar on Developing learning resource material using different media.  Hand on practice on Instructional aids – types, uses, selection, preparation, utilization. | 10  HRS |
| 4. | **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 | Demonstrate competency in teaching, using various instructional strategies. | **To cover the** Concept and  -nature of measurement and evaluation, meaning, process, purposes, problems inevaluation and measurement.   * Principles of assessment, formative and summative assessment- internal   assessment external examination, advantages anddisadvantages.   * Criterion and norm referencedevaluation. | Teacher seminar on Concept and nature of  measurement and evaluation, meaning, process, purposes, problems in  evaluation and measurement Student interactive session on  Criterionand norm referenced evaluation. | 10  HRS |

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|  | norm referenced evaluation. |  |  |  |  |
|  | **Standardized and** | Describe the | **To cover the concept of** | Teacher seminar | 12 hrs |
| 5. | **non-standardized** | various tools | **Standardized and non-** | on Meaning, |  |
|  | **tests:** | for assessment | **standardized tests: its** | characteristics, |  |
|  | * Meaning, | of knowledge, | Meaning, characteristics, | objectivity, |  |
|  | characteristics, | skill, and | objectivity, validity, | validity, |  |
|  | objectivity, | attitude | reliability, usability, norms, | reliability, |  |
|  | validity, reliability, |  | construction oftests-Essay, | usability, norms, |  |
|  | usability, norms, |  | short answers questions | construction of |  |
|  | construction of |  | and multiple choice | tests-Essay, short |  |
|  | tests- |  | questions.Rating scales, | answers questions |  |
|  | * Essay, short |  | checklist, OSCE/OSPE | and multiple |  |
|  | answersquestions |  | (Objective structured | choice questions. |  |
|  | and multiple |  | clinical/practical | -Student |  |
|  | choice questions. |  | examination)Differential | interactive |  |
|  | * Rating scales, |  | scales, and summated | session on |  |
|  | checklist, |  | scales, Socio-metry, | Question bank- |  |
|  | OSCE/OSPE |  | anecdotal record, attitude | preparation, |  |
|  | (Objective |  | scale, critical incident | validation, |  |
|  | Structured |  | technique.Question bank- | moderation by |  |
|  | clinical/practical |  | preparation, validation, | panel, utilization |  |
|  | examination) |  | moderation by panel, | * Developing a |  |
|  | * Differential |  | utilization**.** Developing a | system for |  |
|  | scales, and |  | system for maintaining | maintaining |  |
|  | summated scales, |  | confidentiality | confidentiality |  |
|  | Socio-metry, |  |  |  |  |
|  | anecdotal record, |  |  |  |  |
|  | attitude scale, |  |  |  |  |
|  | critical incident |  |  |  |  |
|  | technique. |  |  |  |  |
|  | * Questionbank- |  |  |  |  |
|  | preparation, |  |  |  |  |
|  | validation, |  |  |  |  |
|  | moderation by |  |  |  |  |
|  | panel, utilization |  |  |  |  |
|  | * Developing a |  |  |  |  |
|  | system for |  |  |  |  |
|  | Maintaining |  |  |  |  |
|  | Confidentiality |  |  |  |  |
| 6. | **Administration,** | Explain the | **To cover the concept of** | Hands on practice | 10 hrs |
|  | **Scoring and** | concept, | **Administration, Scoring** | on Administering |  |
|  | **Reporting** | principles, | **And** | a test; scoring, |  |
|  | * Administeringa | steps, tools and | **Reporting.**Administering a | grading versus |  |
|  | test; scoring, | techniques of | test; scoring, grading | marks |  |
|  | grading versus | evaluation | versus marks | * Student |  |
|  | Marks |  | * Objective tests,scoring | interactive |  |
|  | * Objectivetests, |  | essay test, methods of | session on |  |
|  | scoring essaytest, |  | scoring, Item analysis | Objective tests, |  |
|  | methods of |  |  | scoring essay test, |  |

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|  | scoring, Item analysis. |  |  | methods of  scoring, Item analysis. |  |
| 7. | **Standardized Tools**   * Tests of intelligence aptitude, interest, personality, achievement,   socio-economic status scale, tests for special mental and physical abilities and disabilities | Evaluate various tools for assessment of knowledge, skill, and attitude | **To cover the concept Standardized Tools**   * Tests of intelligence aptitude, interest,personality, achievement, socio-economic status scale, tests for special mental and physical abilities anddisabilities | Teacher seminar on Tests of intelligence aptitude, interest, personality, achievement, socio-economic status scale,tests for special mental and physical abilities and disabilities | 12hrs |
| 8. | **Nursing Educational programs**   * Perspectives of Nursing education: Global and national * Patterns of Nursing education and training programmes in India. Non- universityand   University programs: ANM, GNM, Basic B.Sc. Nursing, Post Certificate B.Sc.  Nursing, M.Sc. | Critically analyze the existing Nursing educational programs, their problems, issues and futuretrends. | **To cover the concept of Nursing Educational programs**   * Perspectives of Nursing education: Global and national * Patterns of Nursing education and training programmes in India. Non- universityand   University programs: ANM, GNM, BasicB.Sc.  Nursing, Post Certificate B.Sc. Nursing, M.Sc.  (N) programs, M. Phil. and Ph.D.) in Nursing, post basic diploma programs, Nurse practitioner | Student interactive session on  Patterns of Nursing education and training programmes in India. | 5hrs |
|  | (N) programs, M. |  | programs. |  |  |

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|  | | Phil. and Ph.D.) in Nursing, post basic diploma programs, Nurse practitioner  programs | |  | |  | |  | |  | |
| 9. | **Continuing Education inNursing**   * 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. | | Plan and conduct continuing nursing education programs. | | **To cover the** 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 continuingeducation. * Distance education inNursing. | | Teacher seminar on Concepts – Definition, importance, need scope, principles of adultlearning, assessments of learning needs, priorities, resources.  Student interactive session on  Research in continuing education.  Student seminar on Distance education in Nursing. | | 12 hrs | |

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| 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.   * Equivalencyof | Describe the  process of  curriculum development, and the need and  methodology of curriculum change, innovation and integration. | **To cover the concept of Curriculum Development its** Definition, curriculum determinants, process and steps of curriculum development, Curriculum models, Types andframework.   * Formulation of philosophy, Objectives: selection and organization of learning experiences; master plan, course plan, unitplan. * Evaluation strategies, process of curriculum change, roleof   students, faculty,administrators, statutory bodies and otherstakeholders.   * Equivalency of courses: Transcripts, creditsystem. | Teacher seminar on Definition, curriculum determinants, process and steps of curriculum development, Curriculum models, Types andframework.  Student interactive session on  Formulation of philosophy, Objectives: selection and  organization of learning experiences.  Hands on practice on master plan, course plan, unit plan | 10 hrs |

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|  | courses: Transcripts, credit  system. |  |  |  |  |
| 11. | **Teacher preparation**   * Teacher – roles & responsibilities, functions, characteristics, competencies, qualities. * Preparation of professional teacher * Organizing professional aspects of teacher preparation programs * Evaluation: self andpeer * Critical analysis of various   programs of teacher education inIndia. | Analyze the  existing teacher preparation programs in Nursing. | **To cover the concept of** • Teacher – roles & responsibilities, functions, characteristics, competencies, qualities.   * Preparation of professionalteacher * Organizing professional aspects of teacher preparation programs * Evaluation: self and peer * Critical analysis of various programs of teacher education in India. | Student seminar on teacher roles& responsibilities, functions, characteristics, competencies, qualities.   * Preparation of professional teacher   Student interactive session on Critical analysis of various programs of teacher education inIndia. | 7HRS |
| 12. | **Guidance and** | Demonstrate skill | **To cover the** Concept, | Teacher seminar | 10 hrs |
|  | **counseling** | in guidance and | principles, need, | on Concept, |  |
|  | * Concept, | counselling. | difference between | principles, need, |  |
|  | principles, need, |  | guidance and | difference |  |
|  | difference |  | counseling, trends and | between guidance |  |
|  | between guidance |  | issues. | and counseling, |  |
|  | and counseling, |  | * Guidance and | trends and issues. |  |

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|  | trends and issues.   * Guidance and counseling services: diagnostic and remedial. * Coordination and organization of services. * Techniques of counseling: Interview, casework, characteristics of counselor, problems in counseling. * Professional preparation and   training for counseling. |  | 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. | * Guidance and counseling services: diagnostic and remedial.   Student seminar on Techniques of counseling: Interview, case work, characteristics of counselor, problems in counseling. |  |

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| 13. | **Administration of NursingCurriculum**   * Role of curriculum coordinator – planning, implementation and evaluation. * Evaluationof   educational programs in | Describe the  problems and issues related to Administration of Nursing curriculum including selection  and organizationof | **Administration of Nursing Curriculum**   * Role of curriculum coordinator – planning,   implementation | Teacher seminar onRole of curriculum coordinator – planning, implementation and evaluation.   * studentinteractive   session on Evaluation of | 12 hrs |

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|  | Nursing course and | clinical experience. | and evaluation. | educational programs in Nursing course and program.  Student seminar on Factors influencing faculty staff relationship and techniques of workingtogether. |  |
| program. |  | * Evaluation of |
| * Factors influencing |  | educational |
| faculty staff relationship |  | programs in |
| and techniques of |  | Nursing course |
| working together. |  | and program. |
| * Concept of faculty |  | * Factors |
| supervisor (dual) |  | influencing faculty |
| position. |  | staff relationship |
| * Curriculum researchin |  | and techniques of |
| Nursing. |  | working together. |
| * Different modelsof |  | * Concept of |
| collaboration between |  | faculty supervisor |
| education and service. |  | (dual) position. |
|  |  | * Curriculum |
|  |  | research in |
|  |  | Nursing. |
|  |  | * Differentmodels |
|  |  | of collaboration |
|  |  | between education |
|  |  | and service. |
| 14. | **Management of Nursing** | Discuss various | **To cover the** | Integrated teaching on | 5hrs |
|  | **Educational** | models of | **concept of** | Planning, organizing, |  |
|  | **Institutions** | collaboration in | **Management of** | staffing, budgeting, |  |
|  | * Planning,organizing, | Nursing education | **Nursing** | recruitment. |  |
|  | staffing, budgeting, | and services. | **Educational** | Student interactive |  |
|  | recruitment, discipline, |  | **Institution its** | session on discipline, |  |
|  | public relation, |  | Planning, | public relation, |  |
|  | performance appraisal, |  | organizing, | performance appraisal, |  |
|  | welfare services, library |  | staffing, budgeting, | welfare services, library |  |
|  | services, hostel. |  | recruitment, | services, hostel. |  |
|  |  |  | discipline, public |  |  |
|  |  |  | relation, |  |  |
|  |  |  | performance |  |  |
|  |  |  | appraisal, welfare |  |  |
|  |  |  | services, library |  |  |
|  |  |  | services, hostel. |  |  |

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| 15. | * 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 andunions. | Explain the development of standards and accreditation process in nursing education programs. | To cover the concept of 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. | Student interactive session on Development and maintenance of standards and accreditation in Nursing education programs.  Teacher seminar on Role of Indian Nursing Council,State Registration Nursing Councils, Boards andUniversity | 5hrs |

**Reference Books**

1. Aggarwal J.C, Principles, Methods &Techniques of Teaching, Vikas Publishing HouseBasavanthappa B.T, Nursing Education, Jaypee Brothers, 2005, NewDelhi.
2. Bevis, Em Olivia, Curriculum Building in Nursing a Process, C.V Mosby Co., St. Louis.George Kurian Aleyamma, Principles of Curriculum Development and Evaluation,Vivekanandha Press,2002.
3. Bhatia B.D, Principles and Methods of Teaching, Doabra House, NewDelhi.
4. Billing, Diane M & Halstead, Judith A, Teaching in Nursing: A Guide for Faculty,W.B.Saunders.
5. Bloom, Benjamin S Ed, Taxonomy of Educational Objectives: Cognitive Domain, DavidMckay CO., Inc, 1956, NewYork.
6. Fuszard, Barbara, Innovating Teaching Strategies in Nursing, Aspen Publishers Inc,1989,Maryland.
7. Gay L.R., Educational Evaluation and Measurement Competencies for Analysis andApplication, Ion,Charles

E. Merill Publishers Co., 1985, Columbus.

1. Guilbert. J J., Educational Handbook for Health Personnel, World Health Organization,1982,Geneva.
2. Guinee. Kathleen k, Teaching and Learning in Nursing, Macmillan, 1978, NewYork.
3. Joyce.B, Models of Teaching, Prentice Hall Inc, Englewood Cliffs, 1986, NewJersey.
4. Keay F.E., A History of Education in India and Pakistan, Oxford University Press, 1964,London.12. Modley Doris M, Advancing Nursing Education World Wide, Springer Publishing Co., 1995,NewYork.
5. Neeraja K.P, Text Book of Nursing Education, Jaypee Brothers, NewDelhi.

**NURSING RESEARCH AND STATISTICS**

**Theory - 150 hours**

**Practical - 100 hours**

**Part-A: Nursing Research**

**Course Description:**

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

**General Objectives:**

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

1. Define basic research terms and concepts.

2. Review literature utilizing various sources

3. Describe research methodology

4. Develop a research proposal.

5. Conduct a research study.

6. Communicate research findings

7. Utilize research findings

8. Critically evaluate Nursing research studies.

9. Write scientific paper for publication.

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| **Sr. No** | **Contents Of The Topics** | **Learning Objectives (At The End OfThe**  **Session The Student Should Be Able To)** | **Teaching Objectives** | **Methodology** | **Time** |
| 1 | **Introduction-**   * Method of acquiring knowledge- problem solving and scientific method, Research – Definition, characteristics, purposes, kinds of research * Historical Evolution of research in nursing,Ethics in research, Basic research terms * Scope of nursing research: areas, problems in nursing,health and social research, Concept of evidence based practice, Overviewof   Research process theory, | * Explain the   Method of acquiring knowledge- problem solving and scientific method, Research Definition, characteristics, purposes and  types of  research   * Describe the Historical Evolution of   research in nursing, Ethics in research, Basic research terms   * Explain the Scope of nursing research: areas, problems in nursing, health and social research, Concept of evidence based practice, Overview of Research   process theory | To cover the definition of  research terms, steps of problem solving, scientific methods, definition of  research terms, nursing research, difference between problem solving and scientific methods.  To cover the historical Evolution of  research in  nursing in worldwide, Ethics in research, various ethical principles and benefits of ethics in nursing research.  To cover the Scope of nursing research: areas,  problems in  nursing, health  and social research, Concept of evidence based practice, Overview of Research process theory, | 1. student Interactive session with the students regarding ,   Research – Definition, characteristics, purposes, kinds ofresearch   1. Essay   writing on Historical Evolution of  research in nursing   1. Essay writing on Scope of nursing research | 10  hrs |

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| **S.**  **No** | **Contents Of The Topics** | **Learning Objectives (At The End Of The Session TheStudent**  **Should Be Able To)** | **Teaching Objectives** | **Methodology** | **Time** |
| 2 | **Review of Literature** Importance, purposes, sources, criteria for selection of resources and steps in reviewing literature. | * Discuss in detail about Importance, purposes, sources, criteria for selection of resources and   steps in  reviewing literature. | To cover meaning of literature review, importance, purposes, sources, steps, preparing the literature review and points to be considered for literature review | 1. Didactic lecture through power point projections | 5hrs |
| 3 | **Research Approaches and designs:-**Type: Quantitative and Qualitative Historical, survey and experimental   * Characteristics   , types advantages and disadvantages, Qualitative: phenomenolog y, grounded theory, ethnography | * Elaborate the various types of research approaches and designs and Characteristics, types advantages and disadvantages, Qualitative: phenomenology, grounded theory, ethnography | To cover  definition of research approaches, selection o research designs, factors affecting research design, validity of research designs, types: experimental and non experimental, their advantages and disadvantages, qualitative and quantitative  research designs. | 1. Students  seminar on Research Approaches and designs:- | 12hrs |
| 4 | **Research Problem**  -Identification of research problem , Formulation of problemstatement and research objectives  -Definition of terms Assumptions and delimitation  -Identification of variables Hypothesis  – definition, formulation and types | -Explain the  Identification of research problem , Formulation of problem statement and researchobjectives  -Enumerate the various research terms, assumptions and delimitations  -Describe the Identification of variables Hypothesis – definition, formulation and types | To cover various research terms, research problem, identification and sources of research problem, criteria of  selecting a good research problem, steps of  formulation a research problem, identification research variables To cover writing research objectives | 1.Problem based learning on identification of research problem,  Formulation of problem statementand research objectives 2.Student interactive session on Identification of variables Hypothesis – definition, | 10hrs |

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|  |  |  |  | formulation and types |  |
| 5 | **Developing theoretical/conceptu al framework.**   * Theories:   Nature, characteristics, Purpose and uses Using, testing and developing conceptual framework, models and  theories. | * Describe the Theories: Nature, characteristics, Purpose and uses Using, testing and developing conceptual framework, models and theories | To cover meaning of theory meaning of conceptual model, theoretical and conceptual framework, purposes, uses, models, Historical Evolution of  research in nursing, Ethics in research, theories, and frameworks,, nature and characteristics | Group discussion on Developing theoretical/conc eptual framework. | 5hrs |
| 6 | **Sampling**   * Population and sample, Factors influencing sampling * Sampling techniques, Sample size, Probability and sampling error * Problems of sampling | * Discuss the Population and sample, Factors influencing sampling * Explain the Sampling techniques, Sample size, Probability and samplingerror * Problems of sampling | To cover  terminology used in sampling, purposes, characteristics of good sample, sampling process, factors influencing process, types of sampling techniques, sample size, factors affecting sample size, sampling errors and problems of sampling | Didactic lecture through PowerPoint presentations  Group discussion on Sampling techniques, Sample size, Probability and sampling error | 6hrs |
| 7 | **Tools and methods of Data collection:**   * Concepts of datacollection   ,Datasources, methods/techn iques quantitative and qualitative. | * Describe the concepts of data collection ,Data sources, methods/techniq ues quantitative andqualitative. * Explain tools for data collection – types, | To cover concept of data collection, data sources, methods and tools of data collection, selection of methods of data collection  To cover criteria of evaluation of | Students Seminar on  tools and methods of data collection Problem based learning on Validity and reliability of tool | 20hrs |

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|  | * Tools for data collection – types, characteristics and their development * Validityand reliabilityof tools * Procedure for datacollection | characteristics and their  development, Validity and  reliability of tools   * Briefly describe the procedure for datacollection | data collection methods: interview method, questionnaire, likert scale, visual analogue scale, observations, rating scale, checklists, biophysical methods, projective technique, Q sorts, vignettes, validity and  reliability of  research tools, pilotstudy. | Essay writing on procedure of data collection |  |
| 8 | **Implementing research plan**   * Pilot Study, review research plan (design)., planning for data collection, administration of tool/interventi   ons, collection of data | * Explain the Pilot Study, review   research plan (design)., planning for data collection, administration  of tool/intervention s, collection of data | To cover Pilot Study, review  research plan (design)., planning for data collection, administration of tool/interventions, collection ofdata | Student interactive session on Implementing research plan | 5hrs |
| 9 | **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 | * Discuss the plan for data analysis: quantitative and qualitative Preparing data for computer analysis and presentation * Discuss the Statistical analysis Interpretation of data Conclusion and generalizations, Summary and discussion | To cover  definition of various terms,  analysis of  uantitaive data, descriptive atatistics, measures tocondense data,measures of central tendency, correlation coefficient,inferen tial statistics, t- test, Z- test, ANOVA,chi-  square test, computer | Integrated learning on Plan for data analysis: quantitativeand qualitative Preparing data for computer analysis and presentation  Group discussion onStatistical analysis Interpretation  of data Conclusion and | 10hrs |

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|  | , Summary anddiscussion |  | analyysis of quantitative data, analysis of  qualitative data. | generalizations, Summary and discussion |  |
| 10 | **Reporting and utilizing research findings:** Communication of research results; oral and written Writing research report purposes, methods and style- vancouver, American Psychological Association(APA), Campbell etc   * Writing scientific articles for publication: purposes & style | * To explain various methods of communication of research results; oral and written Writing research report purposes, methods and style- vancouver, American Psychological Association(APA)   , Campbell etc   * Briefly discuss about writing scientific articles for publication: purposes &style | To cover criteria of communicating research, methods of communicating research, writing a research report: format of research report, steps of writing report,,utilization of research findings,, | Didactic lecture through PowerPoint presentation on Reporting and utilizing research findings. | 10hrs |
| 11 | **Critical analysis of research reports and articles** | * Elaborate the purposes, steps, methods, benefits, and point to be kept on mind while doing the critical analysis of researchreport | To cover critical analysis of research report, format of a thesis or  dissertation, writing the references/Bibliogr aphy,: Vancouver style of references, writing research  article, critical review of research  work | Teachers seminar on statistical packages and Critical analysis of research reports and articles | 3hrs |
| 12 | **Developing and presenting a research proposal** | * Discuss the   methods of Developing and presenting a researchproposal | To cover  developing and  presenting a research proposal, uses of computer. | Student interactive session on Developing and presenting a research proposal | 4hrs |

**Part –B: Statistics**

**Theory - 50 hours**

**Practical - 50 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 related research.

7. Use statistical packages for data analysis

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| **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 ofnormal |
| probability curve; sampling error. |
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| **Unit** | **Hours** | | **Course Content** |
| **Theory** | **Practical** |
| V | 6 | 8 | **Measuresofrelationship:**Correlation–needand meaning, Rank order correlation; Scatter diagram method,Productmomentcorrelation,Simplelinear  regression analysis and prediction |
| VI | 5 | 2 | **Designsandmeaning:**Experimentaldesigns,Comparisonin pairs, randomized block design, Latinsquares. |
| VII | 8 | 10 | **Significance of Statistic and Significance of difference between two Statistics (Testing hypothesis)** Non parametrictest–Chi-squaretest,Sign,mediantest, MannWhitneytest.Parametrictest–‘t’test,ANOVA,  MANOVA,ANCOVA |
| VIII | 5 | 5 | **Useofstatisticalmethodsinpsychologyand education:**  Scaling – Z Score, Z Scaling Standard Score and T Score  Reliability of test Scores: test-retest method, parallel  forms, split half method. |
| IX | 4 | 2 | **Application of statistics in health:**  Ratios, Rates, Trends  Vital health statistics – Birth and death rates.  Measuresrelatedtofertility,morbidityand mortality |
| X | 4 | 8 | **Use of Computers for data analysis**  Use of statisticalpackage. |

**Reference Books:**

1. Basavanthappa, B.T, *Nursing Research*, Jaypee Brothers, 2003, New Delhi.

2. Mahajan, B.K, *Methods in Biostatistics*, Jaypee Brothers, 1999, New Delhi.

3. Rose Hott & Budin. Notter’s*, Essentials of Nursing Research*, spinger publisher, 1999,

New York.

4. Patricial Nunhall. *Nursing Research*, James & Bar, 2001, Canada.

5. Caroly M.H, *Research Methods for Clinical Therapists Applied Project Design and Analysis*,

1999, Churchill Livingstone.

6. P.K. Indrani, T.K, *Research Methods for Nurses*. Jayppe brothers, 2005.

7. Clifford et al, *Getting Research into Practice*, Churchill Livingstone, 2004, New York.

8. Freshwater D. & Bishop V, *Nursing Research in Context*, Palgrave Macmillan, 2004, New

York.

9. Macnee C. L, *Understanding Nursing Research: Reading & Using Research in Practice*,

Lippincott Williams, Wilinks, 2004, London.

10. Polit, D.F. & Bleck C.T, *Nursing Research Principles & Methods*, Lippincott Williams

Wilkins, 2004, New York.

11. Polit, Bleck & P. Hungler, Nursing *Research Methods, Appraisal & Utilization*, 2001,

Lippincott.

12. Specials & Carpenter, *Qualitative Research in Nursing Advancing the Humanistic Imperative*,

Lippincott Williams. 2007

\* Latest editions of all the suggested books are recommended

**Journals:**

*1. Journal of nursing practice and research.*

***2.*** *Indian journal of medical ethics*

**ADVANCED NURSING PRACTICE**

**M.Sc. Nursing 1st Year Theory - 150 hours**

**Practical - 200 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 health care delivery and Nursing practice.

3. Explain bio- psycho- social dynamics of health, life style and health care delivery system.

4. Discuss concepts, principles, theories, models, approaches relevant 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.

###### Curriculum

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| **S.**  **No** | **Contents Of The Topics** | **Learning Objectives (At The End Of The Session The Student Should Be Able To )** | **Teaching Objectives** | **Methodology** | **Time** |
| 1 | **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 andaccountability, | 1. Describe the History of development of Nursing profession, characteristicsand criteria of the profession, 2. Enumeratethe Code of ethics (INC), code of professional | To cover the various history History of development of Nursing profession, characteristics, criteria of the profession, perspective ofNursing profession-national, global, Code of ethics (INC), code of professional conduct (INC), autonomy and  accountability, assertiveness, visibility | 1. Interactive session with the students regarding history of nursing profession 2. Essay writing on code ofethics | 10 |

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|  | assertiveness, visibility of Nurses, legal considerations,  Role of regulatory bodies   * Professional organizations and unions- self defence, individual and collectivebargaining. * Educational preparations, continuing education, career opportunities, professional Advancement & role and scope of Nursing Education. * Role ofresearch, leadership and management. * Quality assurancein Nursing (INC). * FuturisticNursing | conduct (INC), autonomy and accountability, Assertiveness, visibility of Nurses, legal considerations.   1. Explain the role of regulatory bodies 2. Discuss theRole of research, leadership and management | of Nurses, legal considerations, Role of regulatory bodies, Professional organizations and unions-self defence, 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)and FuturisticNursing | 1. Students seminar on collective bargaining 2. Integrated vertical teaching on futuristic nursing |  |
| 2 | **Health care delivery**   * Health care environment, economics, constraints, planning process, policies, political process Vis a Nursing profession. * Health care delivery system- national,state, district and locallevel. * Major stakeholders in the health care system- Government,non-govt., Industry and other professionals. * Patterns of Nursing care delivery inIndia. * Health care delivery concerns, nationalhealth and family welfare programs, inter sectoral coordination, role of nongovernmental agencies.   + Information, | 1. Discuss indetail health care delivery system- national, state, district and local level. 2. Enumerate the various patternsof nursing care delivery inIndia 3. Decribe the importance of information, education and communication | To cover the various health care delivery system which includes Health care environment, economics, constraints, planning process, policies, political process vis a 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, | 1 Didactic lecture through power point projections   1. Group discussion on patterns of nursing care delivery in India 2. Group discussion on telemedicine | 5 |

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|  | education and communication (IEC).   * Tele-medicine. |  | role of nongovernmental agencies, Information, education and communication (IEC). And Tele-medicine. |  |  |
| 3 | **Genetics**   * Review of cellular division, mutation andlaw of inheritance, human genome project, The Genomicera. * Basic concepts ofGenes, Chromosomes &DNA. * Approaches to common geneticdisorders. * Genetic testing – basis of genetic diagnosis, Pre symptomatic and predisposition testing,Prenatal diagnosis & screening, Ethical, legal & psychosocial issues in genetictesting. * Geneticcounselling. * Practical application of genetics inNursing | 1. Elaborate the process ofcellular division, mutation and law of inheritance 2. Enumeratethe basis of genetic diagnosis 3. Explain the process ofgenetic counselling | To cover the various topics in genetics which include 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 counselling and Practical application of  genetics in Nursing | 1. Teachers seminar on cellular division, mutation and law of inheritance 2. Students Seminar on prenatal diagnosisand screening in pregnancy 3. Visit to the genetic counselling centre | 10 |
| 4 | **Epidemiology**   * Scope,epidemiological approach and methods, Morbidity, mortality, Concepts of causation of diseases and their screening, * Application of epidemiology inhealth care delivery, Health surveillance andhealth informatics * Role ofNurse | 1. Describethe scope of epidemiology 2. Discuss The application of epidemiologyin health care deliverysystem | To cover the various topics In epidemiology which includes 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 and Role of Nurse | 1. Essaywriting on scope of epidemiology 2. Problem based learning on concepts of causation of diseases and theirscreening | 10 |
| 5 | **Bio-Psycho social pathology**   * Path physiologyand | 1.Explain the path physiology and | To cover the various bio psycho social pathology which | 1.Students seminar on path | 20 |

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|  | Psychodynamics of disease causation.   * Life processes, homeostaticmechanism, biological and psycho- social dynamics in causation of disease, life style. * Common problems: Oxygen insufficiency, fluid and electrolyte imbalance, nutritional problems, hemorrhageand shock, altered body temperature, unconsciousness, sleep pattern and its disturbances, pain, sensorydeprivation. * Treatment aspects: pharmacological andpre- post operative care aspects, * Cardio pulmonary resuscitation. * End of lifeCare * Infection prevention (including HIV) and standard safetymeasures, bio-medical waste Management. * Role of Nurse- Evidence based Nursing practice; Bestpractices * Innovations inNursing. | psychodynamics of disease causation   1. Discuss the various sleep pattern andits disturbances 2. Enlist thesteps of cardio pulmonary resuscitation 3. Enlist the roleof nurse in evidence based nursing practice. | includes  Path physiology 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, haemorrhage and shock, altered body temperature, unconsciousness, sleep pattern and its disturbances, pain, sensory deprivation, Treatment aspects: pharmacological and pre- post operative care aspects, Cardio pulmonary resuscitation, End of life Care ,Infection prevention (including HIV) and standard safety measures, bio- medical waste, Management, Role of Nurse- Evidence based Nursing practice; Best practices and Innovations in Nursing. | physiology and psychodynami cs of disease causation   1. Group Discussion on common problems: Oxygen insufficiency, fluid and electrolyte imbalance, nutritional problems, haemorrhage and shock, altered body temperature, unconsciousne ss, sleep pattern and its disturbances, pain, sensory deprivation. 2. Simulation learning on innovations in nursing |  |
| 6 | **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 beliefmodels, | 1. Enumeratethe various nursing theories 2. Differentiate health belief models and evidence based practicemodels | To cover the various philosophy and theories of nursing which includes 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, | 1. Didactic lecture through power point projections 2.Students seminar on Nursing theories: Nightingale’s, Hendersons’s, Roger’s,  Peplau’s, Abdella’s, | 20 |

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|  | communication and management, etc   * Concept of Selfhealth. * Evidence based practice model. |  | Health belief models, communication and management, etc, Concept of Self health. And Evidence based practice model | Lewine’s,Ore m’s, Johnson’s, King’s, Neuman’s, Roy’s, Watson Parsce, etc and  their applications, |  |
| 7 | **Nursing process approach**   * Health Assessment- illness status of patients/clients (Individuals, family, community), Identification of health illness problems, health behaviors, signs and symptoms ofclients. * Methods of collection, analysis and utilizationof data relevant to Nursing Process.   Formulation of nursing care plans, health goals, implementation, modification and evaluation of care. | 1. Describe the healthassessment indetail 2. Enlist the various methods of collection, analysis and utilization of data relevant to nursing process 3.Describe the process of formulation of nursing careplans | To cover the nursing process approach which includes Health Assessment- illness status of patients/clients (Individuals, family, community),Identificati on of health illness problems, health behaviours, signs and symptoms of clients, Methods of collection, analysis and utilization of data relevant to Nursing Process, Formulation of nursing care plans, healthgoals, implementation, modification and evaluation ofcare. | 1. . Didactic lecturethrough power point projections 2. Teachers seminar on methods of collection , analysis and utilization of data relevantto nursing process 3. Students seminar on formulationof nursing care plans | 10 |
| 8 | **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 organizationalbehavior, * Basic human needs, Growth anddevelopment, (Conceptionthrough | 1. Explain the variousdefence mechanism 2. Discuss the process of communication and interpersonal relationship 3.Enumerate the process ofgrowth and development from conception tilldeath | To cover the psychological aspects and human relations which comprises of Human behaviour, Life processes & growth and development, personality development, defence mechanisms, Communication, interpersonal relationships, individual and group, group dynamics, and  organizational behaviour, Basic | 1. Students interactive session on personality development 2. Group discussion on communication 3. Integrated teaching on basichuman needs | 30 |

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|  | preschool, School age through adolescence, Young & middle adult, and Older adult)   * Sexuality andsexual health. * Stress and adaptation, crisis and itsintervention, Coping with loss, death andgrieving, * Principles and techniques ofCounselling. | 4.Describe the principles and techniques of counselling | 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 Counselling. | 4.Visit to guidance and counselling centre |  |
| 9 | **Nursing practice**   * Framework, scopeand trends. * Alternative modalitiesof care, alternative systems of health and complimentarytherapies. * Extended and expanded role of the Nurse, in promotive, preventive, curative and restorative health care delivery system in communityand institutions. * Health promotion and primary healthcare. * Independentpractice issues: - Independent Nurse-midwifery practitioner. * Collaboration issues and models-within and outside Nursing. * Models ofPrevention, * Family Nursing,Home Nursing, * Gender sensitive issues and women empowerment. * DisasterNursing. | 1. Discuss the framework,Scope and trends of nursingpractice 2. Explain the extended and expanded roleof thenurse 3. Describedisaster nursing indetail | To cover the Framework, scope and trends, Alternative modalities of care, alternative systems of health and complimentary therapies.  Extended and expanded role of the Nurse, in promotive, preventive, curative and restorative health care delivery system in community and institutions, Health promotion and primary health care, Independent practice issues: - Independent Nurse-midwifery practitioner, Collaboration issues and models-within and outside Nursing, Models of Prevention, Family Nursing, Home Nursing, Gender sensitive issues and women empowerment., DisasterNursing,  Geriatric considerations in Nursing, Evidence | 1. Didactic lecturethrough power point projections 2. Group discussion on alternative modalities of care 3. Students seminar on models of prevention 4. Visit to old agehome | 10 |

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|  | * Geriatricconsiderations inNursing. * Evidence based Nursing practice- bestpractices * Trans-culturalNursing. |  | based Nursing practice- best practices  And Trans-cultural Nursing. |  |  |
| 10 | **Computer applications for patient caredelivery system and Nursing Practice**   * Use of computers in teaching, learning, research and Nursing practice. * Windows, MS office: Word, Excel, PowerPoint, * Internet,literature search, * Statisticalpackages, * Hospitalmanagement information system: software. | 1. Explain the use of computers in teaching, learning, research and nursingpractice 2. Decribehospital management information system | To cover the 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. | 1. Didactic lecturethrough power point projections 2. Teachers seminar on statistical packages | 25 |

**Reference Books:**

1. Potter A. P. & Perry A. G, *Fundamental of Nursing*, C. V. Mosby Co., 2005, St. Louis.

2. Kozier B. et al, *Fundamentals of Nursing Concepts, Process and Practice, Pearson Education*,

Inc, 2004.

3. Brunner and Suddarth, *Text Book of Medical Surgical Nursing*, 2002.

4. Zwemer A, *Professional Adjustments and Ethics for Nurse in India*, BI publications, 1995,

Bangalore.

5. Rosdhal, *Fundamentals of Nursing*, Lippincott Co., 2003.

6. Taylor Carol, et al, *Fundamentals of Nursing*, Lippincott Co., 2005.

7. Basavanthappa B. T, *Nursing Theories*, Jaypee Brothers, 2007, New Delhi.

8. Alligood M. R. & Tomey A. M, *Nursing Theory Utilization and Application,* Mosby, St.

Louis.

9. Park J.E., *Text Book of Preventive and Social Medicine,* Bnarshidas Bhanot, Jabalpur.

\* Latest editions of all the suggested books are recommended.

**CLINICAL SPECIALITY – I**

**MEDICAL SURGICAL NURSING-I**

**M.Sc. Nursing 1st Year Theory - 150 hours**

**Practical - 650 hours**

**Course Description:**

This course is common for the students who are undergoing clinical speciality-II in Neuro- science Nursing/cardiovascular & thoracic Nursing / critical care Nursing /

Oncology Nursing / Orthopedic and rehabilitation Nursing / Nephro & Urology Nursing,

Gastroenterology Nursing/ Geriatric Nursing.

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

**Objectives:**

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

1. Appreciate the trends & issues in the field of Medical – Surgical Nursing as a specialty.

2. Apply concepts & theories related to health promotion.

3. Appreciate the client as a holistic individual.

4. Perform physical, psychosocial assessment of Medical – Surgical patients.

5. Apply Nursing process in providing care to patients.

6. Integrate the concept of family centered Nursing care with associated disorder such as genetic, congenital and long-term illness.

7. Recognize and manage emergencies with Medical- Surgical patients.

8. Describe various recent technologies & treatment modalities in the management of critically ill patients.

9. Appreciate the legal & ethical issues relevant to Medical – Surgical Nursing.

10. Prepare a design for layout and management of Medical – Surgical Units.

11. Appreciate the role of alternative systems of Medicine in care of patients.

12. Incorporate evidence based Nursing practice and identifies the areas of research in the field of Medical – Surgical Nursing.

13. Recognize the role of Nurse practitioner as a member of the Medical – Surgical health team.

14. Teach Medical – Surgical Nursing to undergraduate Nursing students & in-service Nurses.

###### CURRICULUM

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| S.  No | Content Of Topics | Learning Objectives (At The End Of The  Session The Student Should Be Able To) | Teaching Objectives | Methodology | Time |
| **1** | Introduction:   * Historical development of Medical- Surgical Nursing inIndia. * Current status of health and disease burden in India. * Current concept of health. | Discuss the historical development, concept, trends and issues in medical surgical nursing. | To teach and discuss about historical development, concept, trends and issues in medical surgical nursing. | Interactive session with the students regarding historical development, concept, trends and issues in medical surgical nursing. | 5 hrs |

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|  | Trends & issues in Medical – Surgical Nursing.   * Ethical & cultural issues in Medical – Surgical Nursing. * Rights ofpatients. * National health policy, special laws & ordinances relating to older people. * Nationalgoals. * Five yearplans. * National health   programs relatedto adult health. |  |  |  |  |
| **2** | Health Assessment of patients   * Historytaking. * Physical examination of varioussystems. * Nutritional assessment. * Related investigations and   diagnostic assessment. | Discuss the  investigations andphysical and nutritional assessment | To teach and discuss about investigations and physical and nutritional assessment | Simulation on investigations and physical and nutritional assessment | 20 hrs |
| **3** | Care in hospital settings: ‰   * Ambulatory care.‰ * Acute and Critical care.‰ * Long term care.‰ * Home HealthCare. * Characteristics, care models, practice settings, interdisciplinary team. * Hospitalization- effects of   hospitalization on the patient & family.   * Stressors & reactions related to diseaseprocess. * Nursing care using Nursing process approach. | Elaborate the nursing process in providing care to the patient | To teach and discuss about nursing process in providing care to thepatient | Student seminar on nursing process in providing care to thepatient | 5 hrs |

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| **4** | Management of patients with disorders of Gastro intestinal tract   * Review of anatomy andphysiology. * 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 nursingpractice. * Rehabilitation and follow-up. | Describe the  Management of patients with disorders of Gastro intestinal tract | To teach and discuss about Management of patients with disorders of Gastro intestinaltract | Seminar on Management of patientswith  disorders of Gastro intestinal tract | 10 hrs |
| **5** | Management of patients with disorders of nervous system   * Review of anatomy andphysiology. * Common Disorders- etiology, Patho physiology,Clinical manifestations, complications, prognosis. * Health assessment- History taking, physical examination, investigation and diagnostic assessment. * Treatment modalities and trends. * Nursing | Discuss the  Management of patients with disorders of nervous system | To teach and discuss about Management of patients with disorders of nervous system | Seminar on Management of patientswith  disorders of nervoussystem | 10 hrs |

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|  | management.   * Related research studies. * Evidence based nursingpractice. * Rehabilitation and follow-up. |  |  |  |  |
| **6** | Management of patients with disordersof respiratory system   * Review of anatomy andphysiology. * 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 nursingpractice. * Rehabilitation and follow-up. | Elaborate the Management of patients with disorders of respiratorysystem | To teach and discuss about Management of patients with disorders of respiratory system | Student seminar on Management of patients with disorders of respiratory system | 10 hrs |

**Reference Books:**

1. Black M.J. & Hawks H.J, *Medical Surgical Nursing, Clinical Management for Positive*

*Outcome*, Sauders, Elsevier.

2. Urban, A.N. & Greenlac K.K, *Guidelines for Critical Care Nursing,* Mosby.

3. Wood L.S. & Freelicher S.E, *Fetal Cardiac Nursing*, Lippincott Williams & Wilkings.

4. Baughman Diane C, *Hand Book for Surgical Nursing,* Lipincott, NewYork.

5. Philip & Wilma J, *Medical- Surgical Nursing,* B.T Pubn Bangalore.

6. Richardved Lee, *Medical Case of the Pregnant Patient,* American College, Philadelphia.

**CLINICAL SPECIALITY – I**

**OBSTETRIC AND GYNECOLOGIAL NURSING-I**

**Theory - 150 hours**

**Practical - 650 hours**

**Course Description:**

This course is designed to assist students in developing expertise and in-depth understanding in the field of Obstetric and Gynecological 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 Gynecology as a speciality.

2. Describe the population dynamics and indicators of maternal and child health

3. Describe the concepts of biophysical, psychological and spiritual aspects of normal pregnancy, labor and puerperium.

4. Provide comprehensive Nursing care to women during reproductive period and newborns.

5. Integrate the concepts of family centered Nursing care and Nursing process approach in

obstetric and gynecological 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 gynecological Nursing.

10. Incorporate evidence based Nursing practice and identifies the areas of research in the field of obstetric and gynecological Nursing.

11. Describe the recent advancement in contraceptive technology and birth control measures

12. Appreciate the legal and ethical issues pertaining to obstetric and gynecological Nursing

**Curriculum**

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| **Sr.**  **No.** | **Topic** | **Learning**  **objectives** | **Teaching guidelines** | **Methodology** | **Time** |
| **I** | **Introduction** Historical and contemporary perspectives  Epidemiological aspects of maternalandchildhealth Magnitude of maternal andchildhealthproblems Issues of maternal and childhealth:Age,Gender, Sexuality,  psycho Socio culturalfactors  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 | 1. Describe the History Historical andcontemporary perspectives Epidemiological aspects of maternal andchild health   Magnitude of maternal andchild health problems Issuesofmaternal and child health : Age, Gender, Sexuality,  psycho Socio culturalfactors Preventive obstetrics   1. Enumeratethe National health and family welfare programmes related to maternal and childhealth | To cover the various Historical and contemporary perspectives Epidemiological aspects of maternal and child health Magnitude of maternal and child health problems Issuesofmaternaland 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- NationalRuralhealth mission, Role ofNGO’s Theories, models and approachesappliedto midwifery practice Role and scope of midwiferypractice:  IndependentNurse | 1. Interactive session with the students regarding history of maternaland childhealth 2. Essay writing on National health and family welfare programmes 3. Students seminaron Role and scope of midwifery practice: | 20 |

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|  | standards of midwifery practice, standing orders  Evidence based midwifery practice  Research priorities in obstetric and gynecological nursing. | 1. Explain theRole and scope of midwifery practice: Independent Nurse   midwifery practitioner Legal and Ethical issues: Code of ethics and standards of midwifery  practice, standing orders   1. Discuss the Evidence based midwiferypractice Research priorities in obstetric and gynecological   nursing | 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 gynecological nursing. | Independent Nurse midwifery practitioner Legal and Ethical issues: Code of ethics and standards of  midwifery practice, standing orders  4. Integrated vertical teaching on Evidence based midwifery practice |  |
| **II** | **Human reproduction** Review of anatomy and physiology of human reproductive  system:maleandfemale Hormonal cycles Embryology  Genetics, teratology and counseling  Clinical implications | 1. Discuss indetail Review of anatomy and physiology of human reproductive system: male and female 2. Enumeratethe Hormonalcycles Embryology 3. Decribe the Genetics, teratologyand counseling Clinical implications | To cover the Review of anatomy and physiology of human reproductive system: male and female  Hormonal cycles Embryology Genetics, teratology and counseling Clinical implications | 1 Didactic lecture through power point projections   1. Group discussionon Hormonal cycles Embryology 2. Group discussionon Genetics, teratology and counseling Clinical implications | 15 |
| **III** | **Pregnancy**  Maternal adaptation :Physiological, psychosocial | 1.Elaborate the  Maternal adaptation : | TocovertheMaternal  adaptation :Physiological, | 1.Teachers  seminar on Maternal | 25 |

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|  | Assessment –Maternal and foetal measures Maternal measures History taking , exmanination- General,physical and obstetrical measure, identificationofhighrisk, Foetal measure- clinical parameters, biochemical- human  estriol, Maternal Serum AlfaFetoProtein,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 andmobilizing of transportation, prenatal counseling, role of nurse and crisis intervention, identification of high risk  pregnancy and refer | Physiological, psychosocial Assessment – Maternal and foetal measures Maternal measures History taking , exmanination- General,physical and obstetrical measure, identification of high risk,   1. Enumeratethe list of feotal measures 2. Explain the 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,choiceof birth setting, importance and mobilizing of transportation, prenatal counseling, roleof nurse and crisis intervention, identificationof   high risk pregnancy and | psychosocial   * Assessment – Maternal and foetal measures Maternal measures:History taking , exmanination- General,physical * and obstetrical measure, identificationofhigh risk,   Foetal measure- clinical parameters, biochemical- human estriol, Maternal Serum Alfa Feto Protein, Acetyl Choline esterase (AchE),  Triple Test Aminocentesis, Cordocentesis,   * chorionic villus sampling (CVS)), Biophysical- (US IMAGING,Foetal movementcount, 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 forchild | adaptation :Physiological, psychosocial Assessment – Maternal and foetal measures Maternal measures History  taking ,exmanination  -  General,physical and obstetrical measure, identification of highrisk,   1. Students Seminar on feotal measures 2. Visit to antenatal clinics |  |

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|  | | Alternative/complementar y therapies | | refer Alternative/compl ementary therapies | birthandparenthood, importance of institutionaldelivery, choiceofbirthsetting, importance and mobilizing of transportation, prenatal counseling, roleofnurseandcrisis intervention, identification of high risk pregnancy and refer Alternative/compleme  ntary therapies | | |  | |  | |
| **4** | **Normal Labour and nursing management Secondstage**  Physiology , intrapartum monitoring and nursing management.  Resuscitation,immediate newborncareandinitiate breast feeding (Guidelines of National neonatalogy forum ofIndia)  **Third stage**   * Physiologyandnursing   management  **Fourth stage** – Observation, critical analysis and Nursing management.  **Variouschildbirthpractice:** water birth, positionchange etc   * Evidence based practice in relation to labour intervention   **Role of nurse midwifery practitioner•** Alternative/complementary therapies | | Describe the role hormones in causation of labour Explainthephysiology oflabour  Critically analysisthe plotted partograpgh for early detection of abnormal progress of labour.  Discusses the importance analgesia and anesthesia in obstetric  Monitors maternal and fetal well being during the child birth process  Keeps the  resuscitation equipment ready for emergency  Explain the Physiology changes during third stage of labour Explain the various child birth practices Describe the role of nursepractioner. | | | To cover **Second stage**  Physiology , intrapartum monitoring and 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. **Variouschildbirth practice:** water birth, position changeetc * Evidence based practice inrelation to labour intervention   **Role of nurse** | SIS  SIS  PBL  Demonstrati on  FGD  SIS SIS  SIS  SIS | | 15  hrs | |
| **IV** | | **Normal Labour and nursing management:** Essential factors of labour Stages and onset  First stage: Physiology of normal labour  Use of partograph: Principles,useandcritical analysis,evidencebasedstudies   * Analgesiaand   anaesthesia in labour | | 1. Describe the Essentialfactorsof labourStagesand onset 2. Discussabout first stage of labour 3. Discuss about use ofpartograph andVariouschild birth practice: water birth, positionchange   Etc | TocovertheEssential factors of labour Stagesandonset  First stage:Physiology of normallabour  Use of partograph: Principles, use and critical analysis, evidence based studies   * Analgesiaand   anaesthesia in labour | | | 1.Essay writing on Essential factors of labou Stages and onset  2. Problem based learning on firststageof labour | | 10 | |

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|  |  |  | **midwifery**  **practitioner•** Alternative/compl ementary  therapies |  |  |
| **V** | **Normal puerperium and nursing management** Physiology of puerperium Physiology of lactation, lactation management, exclusive breast  feeding ,Baby friendly hospital intitative(BFHI) Assessment of postnatal women .  Minordiscomfortsand complications of puerperium Management of mothers during puerperium: Postnatal exercises Rooming in, bonding, warm chain Evidence based studies Roleofnursemidwifery practitioner  Alternative/complementa rytherapies | 1. ExplaintheNormal puerperium 2. Discuss the Assessment of postnatal women. 3. Enlistthestepsof Postnatal   exercises Rooming in, bonding, warm chain   1. Enlisttheroleof nurseinevidence based nursing practice. | To cover Physiology of puerperium Physiology of lactation, lactation management, exclusive breast feeding ,Babyfriendly 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/com plementary therapies | 1. Students seminar on Physiology of puerperium Physiology of lactation, lactation management   , exclusive breast feeding ,Babyfriendly hospital intitative(BF HI)   1. Group Discussionon Assessment of postnatal women . Minor discomforts and complication s of puerperium Management of mothers during puerperium: Postnatal exercises Rooming in, bonding, warmchain | 20 |
|  |  |  |  | 3.Simulation learning on evidence based nursing practice. |  |

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| **VI** | **Normal Newborn** Physiology and characteristicsofnormal newborn  Physical andBehavioural assessment of newborn Needs of newborn Essentialnewborncare: Exclusive breast feeding, Immunization, Hygiene measures, Newborn nutrition  Organization of neonatal care, services(Levels), transport,  neonatal intensive care unit, organization and management of  nursing services inNICU Observationandcareof newborn  Parenting process | 1.Enumerate the 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 | To cover 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 nursingservices in NICU Observationand careofnewborn Parenting process | 1. Didactic lecture through powerpoint projections 2. Students seminaron Parenting process 3. visittoN ICU | 20 |
| **VII** | **Pharmoco dynamics in obstetrics**  Drugs used in pregnancy, labour, post partum and newborn  Calculationofdrugdose and administration Effects of drugs used Anaesthesia and analgesiainobstetrics  Roles and responsibilities | 1. Describe theDrugs used in pregnancy, labour,postpartum andnewborn 2. Enlistthevarious methods of Calculationofdrug | To cover Drugs used in pregnancy, labour, post partum and newborn Calculation of drug dose and administration Effects of drugs  used | 1. .Didactic lecture through powerpoint projections 2. Teachers seminaron | 10 |

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|  | of midwifery nurse practitioner Standing orders and protocols and use of selected life saving  drugsandinterventions of obstetric emergencies approvedbytheMOHFW | dose and administration Effectsofdrugsused Anaesthesiaand  analgesia in obstetrics  3.Describe the Roles and responsibilities of midwifery nurse practitioner  Standing orders and protocols and use of selected life saving drugs and interventions of obstetric emergencies approved by the MOHFW | Anaesthesia and analgesia in obstetrics  Roles and responsibilities of midwifery nurse practitioner Standing orders and protocols and use of selected life saving  drugs and interventions of obstetric emergencies approved by the MOHFW | methods of Calculation of drug dose and administratio n  Effects of drugs used Anaesthesia and analgesia in obstetrics  3.Students seminar on Roles and responsibiliti es of midwifery nurse practitioner Standing orders and protocols and use of selected life saving  drugs and interventions of obstetric emergencies approvedby  theMOHFW |  |
| **VIII** | **Family welfare services** Population dynamics Demography trends:  vital statistics, calculation of indicators  especiallymaternaland neonatalmortalityrates andproblems  and other health problems  Recent advancement in contraceptive technology Role of nurses in family welfare programmes in all settings  Role of independent | 1. Explain the Roles andresponsibilitiesof midwifery nurse practitioner   Standing orders and protocols and use of selected life saving drugs and interventions of obstetric emergencies approved by the MOHFW   1. DiscusstheRoleof nurses infamily | To cover Population dynamics Demography trends: vital statistics, calculation of indicators especially maternal and neonatal mortality rates and problems and other health problems  Recent | 1.Group discussionon Population dynamics  Demography trends: vital statistics, calculationof indicators especially maternaland neonatal mortality  ratesand | 10 |

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|  | 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 | welfare programmes in all settings  Role of independent nurse midwifery practitioner 3.Enumerate the Family life education Evidence based studies  Information, Education and Communication(IEC) Management information and evaluation system(MIES) Teaching and supervision ofhealth team members | advancement in contraceptive technology Role of nurses  infamilywelfare programmes in allsettings  Role of independent nurse midwifery practitioner Family life education Evidence based studies Information, Education and Communication(I EC)  Management information and evaluation system(MIES) Teaching and supervision of health team members | problems and other health problems   1. Teacher seminar on Role of nurses in family welfare programmes in allsettings Role of independent nurse midwifery practitioner 2. Integrated teaching on Family life education Evidence based studies Information, Education and Communicati on(IEC)   Management information and evaluation system(MIES) |  |
| **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 | 1. Discuss the Primary and secondarycauses of infertility Diagnostic procedures Counseling: ethical andlegalaspectsof assistedreproductive technology(ART) 2. Explainthe | To cover the Primary and secondary causes Diagnostic procedures Counseling: ethical and legal aspects of assisted  reproductive | 1. Didactic lecture through powerpoint projections 2. Group discussion on Recent advancement | 5 |

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|  | Role of nurses in infertility management. | Recent advancement in infertility management.  Adoptionprocedures Role of nurses in infertility management. | technology(ART) Recent advancement in infertility management.  Adoption procedures Role of nurses in infertility management. best practices And Trans-  cultural Nursing. | in infertility management  .  Adoption procedures Role of nurses in infertility management  .  4.Visitto infertility clinic |  |
| **X** | **Menopause** Physiological, psychological and social aspects  Hormone Replacement Therapy  Surgical menopause Counseling and guidance Role of midwifery nurse practitioner | 1. Explain the Physiological, psychological and socialaspects 2. Decribe Hormone Replacement Therapy Surgical menopauseCounseling and guidance   Role of midwifery nurse practitioner | To cover Physiological, psychological and social aspects Hormone Replacement Therapy Surgical menopauseCounseling and guidance  Role of midwifery nurse practitioner | 1. Didactic lecture through power point projections 2.Teachers seminar on Hormone Replacement Therapy Surgical menopause Counseling and guidance Role of midwifery nurse  practitioner | 5 |
| **XI** | **Abortion**  Types, causes Legislations, Clinical rightsandprofessional responsibility Abortion procedures Complications  Nursing management Role of midwifery nurse practitioner | 1. ExplaintheTypes, causes Legislations, Clinical rights and professional responsibility 2. DecribeAbortion procedures Complications Nursing management   Role of midwifery nurse practitioner | To cover Abortion Types, causes Legislations,  Clinical rights and professional responsibility Abortion procedures Complications Nursing management Role of  midwifery nurse | 1. Teachers seminar on Types, causes Legislations, Clinicalrights and professional responsibility Abortion procedures   Complication s   1. group | 5 |

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|  |  |  | practitioner | discussion on Complication s  Nursing management Role of midwifery nurse practitioner |  |

**Reference Books:**

1. Buckley Kathleen and Kulb Nancy W, *High Risk Maternity Nursing Manual*, Williams &

Wilkin, 1993, Philadelphia.

2. Bennet V Ruth & Brown K Linda, *Myles Text Book for Midwives*, ELBS, Churchill

Livingstone.

3. Calander, R & Miller A, *Obstetrics Illustrated,* Churchill & Livingstone, 1993, New York.

4. Dawn C.S, *Text Book of Obstetrics and Neonatology*, Dawn Books, Calcutta.

5. Dawn C.S, *Text Book of Gynecology and Contraception*, Dawn Books, Calcutta.

6. Dutta D.C, *Text Book of Obstetrics*, New Central Agency 2001, Calcutta.

7. Dutta D.C, *Text Book of Gynecology*, New Central Agency, 2001, Calcutta.

8. Daftary Shrish, *Holland and Brews Manual of Obstetrics*, B Churchill Livingstone, New

Delhi.

9. Dickason Elizabeth jean et al, *Maternal Infant Nursing Care*, Mosby, St.Louis.

10. GoodnerBrenda, *Concepts of Obsterics Nursing,* Skidmore, Roth Publishing, INC, Texas.

11. Gorie Trula Myers et al, *Foundations of Maternal Newborn Nursing*, WB Saunders, Co., 1998,

Philadelphia.

12. Ladewing Patricia Wieland et al, *Essentials of Maternal Newborn Nursing*, Addisol Wesley

Nursing, 1990, New York.

13. Rashmi Patil, *Instruments, Operatuions, Drugs in Obstetrics and Gynaecology*, Vors Medical

Publications, Mumbai.

14. Philips Celeste R, *Family Centered Maternity Newborn Care*, Mosby New year Book, 1996, St

Louis.

**List of Journals Recommended:**

1. *American Journal of Nursing*

2. *Health and Population*

**CLINICAL SPECIALITY – I**

**CHILD HEALTH (PAEDIATRIC) NURSING- I**

**M.Sc. Nursing 1st Year Theory - 150 hours**

**Practical - 650 hours**

**Course Description:**

This course is designed to assist students in developing expertise and in depth understanding in the field of Paediatric Nursing. It will help students to appreciate the child as a holistic individual and develop skill to function as neonatal and Paediatric 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 Paediatrics and Paediatric Nursing as a specialty

2. Apply the concepts of growth and development in providing care to the Paediatric clients and their families.

3. Appreciate the child as a holistic individual

4. Perform physical, developmental, and nutritional assessment of Paediatric clients

5. Apply Nursing process in providing Nursing care to neonates & children

6. Integrate the concept of family centered Paediatric 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 Paediatric and neonatal Nursing

10. Prepare a design for layout and management of neonatal units

11. Incorporate evidence based Nursing practice and identifies the areas of research in the field of Paediatric/neonatal Nursing

12. Recognize the role of Paediatric Nurse Practitioner and as a member of the Paediatric and neonatal health team

13. Teach Paediatric nursing to undergraduate students & in-service Nurses

curricullum

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| **S.No** | **Topic** | **Learning objective** | **Teaching Guidelines** | **Methodology** | **Time** |
| I. | **Introduction**   * Historical development of Pediatrics and Pediatric Nursing inIndia. * Current status of child health in India; * Trends in Pediatrics and PediatricNursing, * Ethical and cultural issues in pediatriccare * Rights ofchildren * National health policy for children, special laws and ordinances relating to children. * Nationalgoals * Five yearplans * National health programs related to childhealth. | Explain the historical development of pediatric, modem concept of child care and current status of child in India.  Understand the concept  of the child health care, trends & emerging challenges for pediatric nurses  Describe national policy programmes and ethical and cultural issues in relation to child health  and welfare. | To Cover 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 pediatriccare  ,Rights of children National health policy for children, special laws and ordinances relating to children.  National goals,Five year plans , National health programs related to childhealth. | Teaching seminar Students seminar Project on collection of vital statistics related to child health. Teaching seminar Interactive seminar | 10  Hrs |
| II. | **History taking**  Developmental assessment Physical assessment Nutritional assessment  Family assessment | Discuss physical, developmental, and nutritional assessment of pediatric clients. | To cover Developmental assessment Physical assessment Nutritional assessment , Family assessment. | Conventional method Demonstration | 10  Hrs |
| III. | **Pre-natal Pediatrics**   * Embryological and fetal development, Prenatal factors influencing growth and development of fetus, Genetic patterns of common pediatric disorders,   chromosomal aberrations, | Describe prenatal pediatrics. | To cover 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 | Unconventional method  Horizontal teaching  Teaching seminar | 15  Hrs |

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|  | 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 ofpediatric   nurse. |  | genetic, screening and |  |  |
| counseling role of |
| nurse in genetic |
| counseling, |
| Importance of prenatal |
| care and role of |
| pediatric nurse. |
| IV. | **Growth andDevelopment of children**   * Principles of growth anddevelopment,   + Concepts and theories of growth and development,   + Developmental tasks and special needs from infancy to adolescence, developmental milestones,   + Assessment of growth and development of pediatricclients,   + Factors affecting growth and development. | Describe the normal growth &development of children | To cover Principles of growth and development, Concepts and theories of growth and development, Developmental tasks and special needs from infancy to adolescence, developmental milestones, Assessment of growth and development of pediatric clients and Factors affecting growth and development. | Role play Videos Plotting of growth chart  Conventional method  Teaching seminar Demonstration | 15  Hrs |
| V. | **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 of the new born and family. * High risk newborn- pre term and term neonate and growth retarded babies,    | Provide care to normal &high risk neonates  Perform neonatal resuscitation. | To cover nursing care of the new born at birth, care of the new born and family.  High risk newborn- pre term and term neonate and growth retarded babies, | Demonstration Conventional method  Student  seminar  Teaching  seminar | 10  Hrs |
|  | Recognize and manage Common neonatal problems |  |  |  |

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| **I** | **Neonatal Nursing**  -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. | **Describe** identification and classification of neonates with infections Describe HIV & AIDS, Ophthalmia neonatorum, congenital syphilis Describe High risk new born- Identification, classificationand  nursing management Organization of neonatal care, services(Levels), transport, neonatal intensive care unit, organization and management of nursing services in  NICU. | To Cover  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. | **SIS PBL**  **Teacher Seminar**  **FGD SIS** | **20hrs** |
| II | **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 hospitalizedchild. * Nursing care of hospitalized child and family -principlesand | Describe the major functions and role of the paediatric nurse in caring fora hospitalizedchild.  Describe the principles of child health nursing. | To cover 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 | Conventional method  Teaching seminar  Problem based learning | 10 |

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|  | practices |  | hospitalized child. Nursing care of hospitalized child and family - principles and  practices |  |  |
| III | **Behavioral Pediatrics andPediatric Nursing**   * Parent childrelationship, * Basic behavioral pediatric principles and specific behavioral problems * pediatric concepts/disorders- maternal deprivation, failure to thrive, child abuse, the batteredchild, * Common behavioralproblems and theirmanagement, * Child guidanceclinic. | Describe the management of behavioral disorders and common health problems of children,  Demonstrate skills in the prevention & implementation of medical & nursing management of  behavioral disorders& common health problems. | To cover 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 problems and their management, Child  guidance clinic | Student seminar Teaching seminar  Interactive seminar Unconventio nal method | 15 |
| IV | **Preventive Pediatrics andPediatric Nursing**   * Concept, aims and scope of preventivepediatrics, * Maternal health and its influence on child health antenatal aspects of preventive pediatrics, Immunization, expanded program on immunization/ universalimmunization   program and  cold chain,   * Nutrition and nutritional requirements of children, changing patterns of feeding, baby- friendly hospital initiative and exclusive breast feeding, * Health education,nutritional education forchildren * Nutritional programs * National and international organizations related to child health, * Role of pediatric nurse in the hospital andcommunity. | Discuss concept of preventive pediatrics.  Appreciate the preventive measures and strategies for children  Identify the nutritional needs of children at different ages and ways of meeting the needs | To cover maternal health and its influence on child health antenatal aspects of preventive pediatrics, Immunization, baby- friendly hospital initiative, breast feeding  Health education, nutritional education for children Nutritional programs | Demonstration Simulation.  Visit to anganwadi schools, remand homes & adoption centers  Teachingseminar  Student seminar | 15  Hours |
|  |  | National and international organizations related to childhealth, |  |  |
|  |  | Role of pediatric nurse in the hospital and community. |  |  |
| V | **IMNCI**  (Integrated management of neonatal and childhood illnesses) | Discuss the management of neonatal illness, | To cover Integrated management of neonatal and  childhood illnesses | Student seminar Interactive seminar | 30Hrs |

**Reference Books**

1. Alexander NM, Brown MS, Paediatric *Physical Diagnosis for Nurses*, McGrew Hill Book Co., New York.

2. Ball, *Paediatric Nursing Caring for Children*, 1999, Prenticehall.

3. Behrman, Richard K & Vaughan, Nelson,s, *TextBook of Paediatrics*, WB Saunders Co.,

4. Blake G, Florence & Wright, *Essentials of Paediatric Nursing*,

5. Barbara EW, *Guidelines in the Care of the Low Birth Weight*, Orient Longman

6. Bowden Greenberg, *Paediatric Nursing Procedure*, Lippincott, Williams& Wilkins

7. Cameron, Jelinek et al, *Text Book of Emergency Paediatric Medicine*,

8. Ghai O P, *Essential Text Book Of Paediatrics*” Jaypee Brothers

9. Ghosh Shanti, *Nutrition and Child Care*, Jaypee Brothers, New Delhi.

10. Ghosh Shanti, *Know Your Child*, Jaypee Brothers, New Delhi.

11. Gupte Suraj, *Neonatal Emergencies* Jaypee Brothers, New Delhi.

12. Gupte Suraj, *A Short Text Book of Paediatrics*, Jaypee Brothers, New Delhi.

13. Guha DK, *Manual of Practical Newborn Care*, Jaypee Brothers, New Delhi.

14. Hathfield N, *Introductory Paediatric Nursing*, Lippincott, 2003.

15. Helens CL & Roberts, *Paediatric Nursing*, CV Mosby & Co.

**CLINICAL SPECIALITY – I**

**MENTAL HEALTH (PSYCHIATRIC ) NURSING- I**

**M.Sc. Nursing 1st Year Theory - 150 hours**

**Practical - 650 hours**

**Course Description**

This course is designed to assist students in developing expertise and indepth understanding in thefield 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 identifies the areas of research in the field of Psychiatric Nursing.

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| 1. | **Introduction**  -Mental Health and Mental Illness,Historical perspectives , Trends, issues and magnitude Contemporary practices , Mental healthlaws/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  -Challenges and Scope of psychiatric nursing | Apply Mental Health and Mental Illness,Historical perspectives , Trends, issues and magnitude Contemporary practices , Mental healthlaws/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  -Challenges and Scope of psychiatric nursing  -Standards of | To cover Mental Health and Mental Illness,Historical perspectives , Trends, issues and magnitude Contemporary practices , Mental healthlaws/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  -Challenges and Scope of psychiatric nursing  -Standards of Psychiatricnursing  -Multi-disciplinary | -Teacher seminar  -SIS  -PBL  -SIS  SIS | 15HRS |

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|  | -Standards of Psychiatricnursing  -Multi-disciplinary team and role of nurse  Role of psychiatric nurse- extended and expanded | Psychiatric nursing  -Multi-disciplinary team and role of nurse  Role of psychiatric nurse- extendedand expanded  y | team and role of nurse  Role of psychiatric nurse- extended and expanded | SIS  . |  |
| 2. | **Concepts of Psychobiology**  The Nervous System:   * An Anatomical Review * TheBrainand limbicsystem * NerveTissue * Autonomic Nervoussystem   •  Neurotransmitters  Neuroendocrinolo  gy   * Pituitary, Thyroid Gland * Circadian   Rhythms  Genetics  Neuro psychiatric disorders  Psychoimmunolog  y   * NormalImmune response * Implicationsfor   psychiatric Illness  Implications for Nursing | To identify and manage Concepts of Psychobiology  The Nervous System:   * An Anatomical Review * TheBrainand   limbicsystem   * NerveTissue * Autonomic Nervoussystem   •  Neurotransmitters  Neuroendocrinolo  gy   * Pituitary, Thyroid Gland * Circadian   Rhythms  Genetics  Neuro psychiatric disorders  Psychoimmunolog  y   * NormalImmune response * Implications for psychiatricIllness   Implications for  Nursing. | To cover Concepts of Psychobiology  The Nervous System:   * An Anatomical Review * TheBrainand   limbicsystem   * NerveTissue * Autonomic Nervoussystem * Neurotransmitters   Neuroendocrinolog  y   * Pituitary, Thyroid Gland * CircadianRhythms   Genetics  Neuro psychiatric disorders  Psychoimmunology   * NormalImmune response * Implicationsfor   psychiatric Illness  Implications for Nursing | Teacher seminar  Student seminar  student interactive session  Teacher seminar  Student seminar | 10  HRS |
| 3 | **Theories of Personality** | DescribeTheories of Personality Development and relevance to  nursing | **To cover** Theories of Personality Development and relevance to nursing  Practice | Student interactive session on Anger and Aggression, | 10HRS |
|  | **Development and** |  |
|  | **relevance to** |  |
|  | **nursing** |  |

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|  | **practice** | practice  Psychoanalytic  Theory-Freud’s  Interpersonal  Theory-Sullivan’s  Theory of Psychosocial Development- Erikson’s  Theory ofobject relations  Cognitive  Development Theory  Theory of Moral Development  A NursingModel-  HildegardE.Peplau | Psychoanalytic  Theory-Freud’s  Interpersonal  Theory-Sullivan’s  Theory of Psychosocial Development- Erikson’s  Theory ofobject relations  Cognitive  Development Theory  Theory of Moral Development  A Nursing Model- Hildegard E.Peplau | Teacher seminar on Types, Predisposing Factors, Management   * Role of the Nurse |  |
| 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 |
| 4. | **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 the Environment.  Stress  management. | Describe 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 the Environment.  Stress  management. | **To cover the Stress and its management**  An introduction to the concepts of stress  Psychological  Adaptationtostress  Stress as a BiologicalResponse.  Stress as an Environmental Event.  Stress as Transaction between the Individual and the  Environment.  Stress  management. | Teacher seminar  Problem Based Learning  SIS SIS SIS  SIS | 5 HRS |
| 5. | **Therapeutic communication** | Describe Therapeutic communication and interpersonal relationship  Review  communication | **To cover** Therapeutic communication and |  | 10 hrs |
|  | **and interpersonal** | interpersonal |  |  |
|  | **relationship** | relationship |  |  |
|  | Review | Review | Teacher seminar |  |
|  | communication | communication |  |  |

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|  | process, factors affecting communication  Communication  with individuals and ingroups  Techniques of therapeutic communication- touchtherapy  Barrier of communication with specific reference to psychopathology  Therapeutic  attitudes  Dynamics of a therapeutic Nurse- client relationship; Therapeutic use of self Gaining self- awareness  Therapeutic  nurse-patient relationship its phases ; Conditions essential to development of a therapeutic relationship  Therapeutic  impasse and its management | process, factors affecting communication  Communication  with individuals and ingroups  Techniques of therapeutic communication- touchtherapy  Barrier of communication with specific reference to psychopathology  Therapeutic  attitudes  Dynamics of a therapeutic Nurse- client relationship; Therapeutic use of self Gaining self- awareness  Therapeutic  nurse-patient relationship its phases ; Conditions essential to development of a therapeutic relationship  Therapeutic  impasse and its management | 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 useof self Gaining self- awareness  Therapeutic nurse- patient relationship its phases;  Conditions essential to development of a therapeutic relationship  Therapeutic  impasse and its management | Student interactive session  Student seminar  Teacher seminar  PBL |  |
| 6. | **Assertive Training**  Assertive  Communication  Basic Human Rights  Response Patterns   * (Nonassertive Behavior * Assertive   Behavior   * Aggressive Behavior * Passive- | Explain Assertive Training  Assertive  Communication  Basic Human Rights  Response Patterns   * (Nonassertive Behavior * Assertive   Behavior   * Aggressive   Behavior | To cover Assertive Training  Assertive  Communication  BasicHumanRights  Response Patterns   * (Nonassertive Behavior * AssertiveBehavior * Aggressive Behavior * Passive-Aggressive   Behavior) | Teacher seminar  PBL PBL SIS SIS | 10hrs |

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|  | | Aggressive Behavior)  Behavioral  Components of Assertive Behavior  Techniques that Promote Assertive Behavior  Thought-Stopping  TechniquesMethod  RoleofTheNurse | * Passive- Aggressive Behavior)   Behavioral  Components of Assertive Behavior  Techniques that Promote Assertive Behavior  Thought-Stopping  Techniques Method Role of The Nurse | Behavioral  Components of Assertive Behavior  Techniques that Promote Assertive Behavior  Thought-Stopping  Techniques Method Role of The Nurse | | Panel Discussion | |  |
| **S.No** | **Topic** | | **Learning objective** | | **Teaching Guidelines** | **Methodology** | **Time** | | |
| I | **Promoting Self-Esteem**   * Components of Self-Concept * The Development ofSelf-Esteem * The Manifestations of Low-Self-Esteem Boundaries * Role of TheNurse | | Explain the concept of self esteem and its importance for promoting mental health.  Explain the symptoms of low self esteem and role of nurse | | To cover Meaning of self esteem,  components of self esteem, development of self esteem, barriers in developing self esteem. Sign and symptoms of low self esteem, boundaries of self esteem and role of  nurse | Conventional method Teaching seminar Problem based learning Interactive seminar | 11 | | |
| II | **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 | | Describe the normal reaction to pregnancy and puerperium with various problems related to pregnancy and puerperium.  Explain the – Premarital, marital and genetic Counselling | | To cover normal and abnormal psychological reaction of women during pregnancy and in puerperium, various problems related to conception and puerperium like post partum depression etc and pre marital marital and geneticcounseling. | Student  seminar  Interactive  seminar  Unconventio nal method | 05Ho  urs | | |
| III | **The nursing process in psychiatric/mental health nursing**   * Mental health assessment- History taking,   mental status examination Physical and neurological examination | | Discuss concept of nursing process in psychiatric/mental health nursing.  Explain the various health assessment techniques and role of nurse in assessment and recording | | To cover Mental health assessment- History taking, mental status examination Physical and neurological examination , mini mental status examination, their need and importance in psychiatry.  To cover Psychometric | Demonstration  Visit to foster home and orphanage home | 10  Hours | | |

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|  | * Psychometric assessment Investigations, Diagnosis and Differential diagnosis Interpretation of investigations * Nurse’s role   Nursing case management   * + Critical pathways of care Document ation   + Problem- oriented recording   + Focus charting * The PIEmethod |  | assessment | Interactive seminar |  |
| Investigations, |
| Diagnosis and |
| Differential diagnosis |
| Interpretation of |
| investigations, Nurse’s |
| role Nursingcase |
| management |
| IV | **Psycho social and physicaltherapies**   * Individual therapy * Behavioural Therapy- Relaxation therapy, cognitive therapy, positive- negative reinforcement,   bio-feedback, guided imagery, ab-reactive therapy   * GroupTherapy * FamilyTherapy * MilieuTherapy * The Therapeutic Community * Occupational therapy * Recreational therapy * Playtherapy * Musictherapy * Lighttherapy * Colortherapy * Aroma therapy | Discuss the various kinds of psychotherapies with role of nurse | To cover various kinds of psychotherapies: Individual therapy Behavioural Therapy Group Therapy, Family Therapy , Milieu Therapy, The Therapeutic Community  ,Occupational therapy Recreational therapy  ,Play therapy Music therapy, Light therapy Color therapy , Aroma therapy and role of  nurse | Teacher seminar Teacher seminar  Teacher seminar Teacher semi nar | 35Hrs |
|  |  |  | Student  seminar |  |
|  |  |  | Student  seminar |  |
|  |  |  | Student seminar Student seminar |  |
| V | **Electroconvulsive Therapy**   * Historical Perspectives | Explain the concept of ECT, its importance , indications , side effects  and role of nurse | To cover Historical Perspectives  Indications Contraindications | Demonstratio n | 05  Hours |

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|  | Indications Contraindications   * Mechanisms of Action * Side Effects * Risks Associated with Electroconvulsive Therapy * The Role of The Nurse in   Electroconvulsive  Therapy |  | Mechanisms of Action, | Visit to ECT |  |
| Side Effects , Risks | room |
| Associated with |  |
| Electroconvulsive |  |
| Therapy, The Role of |  |
| nurse in ECT |  |
| I | **Alternative systems of medicine in mental health**   * Types of Therapies * HerbalMedicine * Unani * Siddha * Homeopathic * Acupressure and Acupuncture * Diet andNutrition   + Chiropractic Medicine * Therapeutic Touch andMassage * Yoga * Explain Pet Therapy | Explain the various therapies used in Alternative systems of medicine in mental health | To cover various therapies under alternative systems of medicine in mental health like Herbal Medicine  Unani, Siddha, Homeopathic Acupressure and Acupuncture, Diet and Nutrition , Chiropractic Medicine, Therapeutic Touch and Massage,  Yoga, Pet Therapy | Visit to  auyurveda hospital for demonstratio n  Student seminar  Student seminar | 10  Hours |
|  |  |  | Student seminar |  |
|  |  |  | Student seminar |  |
| I I | **Psychopharmacology** Historical Perspectives Role of a Nurse in Psychopharmacological Therapy   * AntianxietyAgents * AntidepressantsAgents * Moodstabilizers * Antipsychotics * Sedative-Hypnotics * Central Nervous System Stimulants   Future developments | Discuss the historical perspective of Psychopharmacology, various drugs and role of nurse | To cover the historical perspective of Psychopharmacology, various drugs,  indications, dosage, pharmacokinetics, mechanism of action, side effects, route of administration and  responsibilities of nurse.  To cover future  development of psychopharmacologyin  India as well as in abroad | Student seminar  Teacher seminar  Visit to  psychiatric wards and showing psycho therapeutic drugs | 15  Hours |

**Reference Books:**

1. Brown R. T. Feldman G. R., *Epilepsy -Diagnosis and Management*, Little Brown And Co.,

1983, Toronto.

2. Beck M. C. Rawtins P. R. and et al, *Mental Health – Psychiatric Nursing*. The C.V. Mosby

Co., Ltd. 1984, Toronto.

3. Coleman C. J, *Abnormal Psychology and Modern Life*. P. B. Tara and Sons Co. Pvt Ltd. 1982.

4. Kaplan H. Saddock B, *Synopsis of Psychiatry*, William sand Wilkins, 1991, Bathmov.

5. Stuart W. G. Sundeen J. S, *Principles and Practice of Psychiatric Nursing*, Mosby Year book,

1991, London.

6. Taylor C.M., *Essentials of Psychiatric Nursing,* CV Mosby Co., 1982, London.

7. Bimlakapoor CV, *A Text book of Psychiatric Nursing,* Mosby Co., 1982, Delhi.

8. Shivas, “*Basic Concept of Psychiatric Mental Health Nursing*, B.I Publications, 1994.

\*Latest editions of all the suggested books are recommended.

**CLINICAL SPECIALITY – I**

**COMMUNITY HEALTH NURSING - I**

**M.Sc. Nursing 1st Year Theory - 150 hours**

**Practical - 650 hours**

**Course Description:**

The course is designed to assist students in developing expertise and in depth

understanding in the field of Community Health Nursing. It would help students to appreciate holistic life style of individuals, families & groups and develop skills to function as Community Health Nurse specialist/practitioner. It would further enable student to function as an educator, manager and researcher in the field of Community Health Nursing.

**Objectives:**

**At the end of the course, the student will be 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 while providing care to the

community.

7. Recognize and participate in the management of emergencies, epidemics and disasters.

8. Apply recent technologies and care modalities while delivering community health nursing care.

9. Appreciate legal and ethical issues pertaining to community health Nursing care.

10. Conduct community health Nursing care projects.

11. Participate in planning, implementation and evaluation of various national health and family welfare programmes at local, state and the national level.

12. Incorporate evidence based Nursing practice and identify the areas of research in the

community settings.

13. Participate effectively as a member of Community Health team.

14. Coordinate and collaborate with various agencies operating in the community by using intersectoral 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

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| **S.**  **No** | **Topic** | **LearningObjectives ( At the end of the session, thestudents**  **should be able to :)** | **Teaching Guidelines** | **Methodology** | **Time** |
| 1 | **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-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 healthpolicy * National Populationpolicy * National Health andwelfare | Discuss the historical development of Community Health and Community health Nursing- World and India, various health and family welfare committees  Discuss the current status, trends and challenges of Community Health Nursing  Describe the health status of the Community- community diagnosis Elaborate the scope of Community health Nursing practice  Explain the ethical , | To cover historical development of Community Health and Community health Nursing, various health and family welfare committees**, c**urrent status, trends and challenges of community health nursing**,** health status of the community- community diagnosis**;** scopeof community health nursing practice**,** ethical and legal issues**,**socio-  cultural issues in | Lecture cum discussion onhistorical development of Community Health and Community health Nursing  Interactive session on ethical, legal issues and socio-cultural issues in  Didactic lecture on  National | 10  hours |

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| 2 | Programmes   * National Healthgoals/ indicators/ Millennium developmental goals(MDG)/Strategies * Planning process: Fiveyear plans * National RuralHealth Mission * Panchayat rajinstitutions   **Health**  Concepts, issues  Determinants  Measurements  Alternate systems for health promotion and management of health problems  Health economics  Health technology  Genetics and health  Waste disposal | legal issues  and socio-cultural issues in Community health Nursing discuss National Policies, plans and programmes  Discuss Concepts, issues, determinants and measurements Explain alternate systems for health promotion and management of health problems.  Describe health economics and health technology | 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 and Panchayat raj institutions  To coverthe concepts, issues, determinants, measurements, Alternate systems for health promotion and management of health problems, Health economics, Health technology, | policies, plans and programmes  Teaching seminar  Interactive session  Didactic lecture  Field visits to water supply, sewage disposal,  Clinical Postings in | 10 hrs |

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| 3 | Eco system  **Community health Nursing**  Philosophy, Aims, Objectives, Concepts, Scope, Principles, Functions  Community health Nursing theories and models  Quality assurance: Community health Nursing standards, competencies, Monitoring community health nursing, nursing audits  Family nursing and Family centered nursing approach  Family health nursing process   * Family healthassessment * Diagnosis * Planning * Intervention * Evaluation   Nursing care for special groups: children, adolescents, adults,women, elderly, physically and mentally challenged- Urban and rural population at large | Discuss genetics and health  Discuss waste disposal  Discuss eco system  Discuss philosophy, aims, objectives, concepts, scope, principles and functions.  Explain community health nursing theories and models. Elaborate quality assurance, standards, competencies, monitoring community health nursing and nursing audits  Discuss family nursing and family centered nursing approach  Explain family health nursing process Discuss nursing care for special groups Discuss community nutrition  Explain the concept, role and  responsibilities of | Genetics and health, Waste disposal and Eco system  To cover philosophy, aims, objectives, concepts, scope, principles, functions, community health nursing theories and models, Quality assurance, Community health Nursing standards, competencies, Monitoring community health nursing, nursing audits, family nursing and family centered nursing approach, family health nursing process, nursing care for special groups, community nutrition; concept, roleand  responsibilities of | AYUSH  Department in CHC  Lecture cum discussion  Didactic lecture  visit to family planning camp  Clinical Postings in CHC, PHC  Didactic lecture  Demonstratio n on family health assessment | 30 hrs |

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| 4 | Community nutrition  Concept, role and responsibilities of community health Nurse practitioners/nurse midwifery practitioners-decision making skills, professionalism, legal issues  **Information, education and communication**  IEC/BCC: Principles and strategies  Communication Skills  Management information and evaluation system: Records and reports  Information technology  Tele-medicine and tele- nursing  Journalism  Mass media  Folk media | community health nurse practitioners/nurse midwifery practitioners-decision making skills, professionalism, legal issues  Explain  Explain the Principles and strategies of IEC Discuss communication skills Describe the management information and evaluation system: Describe information technology, tele- medicine and tele- nursing  Discuss journalism, mass media and folk media | community health Nurse practitioners/nurse midwifery practitioners- decision making skills, professionalism and legal issues  strategies of IEC, communication Skills, management information and evaluation system, information technology, tele- medicine and tele- nursing, journalism, mass media and folk media | Family visits  Clinical Postings in CHC, PHC  Teaching seminar  Interactive session  Field visits  Clinical postings  postings  Group projects  Role plays | 10 hrs |

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| **S.**  **No** | **Topic** | **LearningObjectives ( At the end of the session, thestudents**  **should be able to :)** | **Teaching Guidelines** | **Methodology** | **Time** |
| 1  2 | **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  **Maternal and neonatal care**  IMNCI(Integrated Management of Neonatal And Childhood Illnesses) module | Explain demography, the transition and theories of population  Elaborate National population policy, National population programmes, Population control and related programmes Explain the methods  of family limiting and spacing  Discuss research, census and National Family Health Survey  Explain IMNCI(Integrated  Management of | To cover 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 and National family health Survey.  To cover IMNCI module  and Skilled Birth | Lecture cum discussion  Didactic lecture  visit to family planning camp  Clinical Postings in CHC, PHC  Teaching seminar  Interactive session | 15  hours  45hrs |

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| 3  4 | Skilled Birth Attendant (SBA) module  **Disaster nursing**  INC module on Reaching out: (Nursing Care in emergencies)  **Health care delivery system: Urban, rural, tribal and difficult**  **areas**  Health organization: National, State, District, CHC, PHC, Sub Centre, Village - Functions, Staffing, pattern of assistance, layout, drugs, equipments and supplies, roles and Responsibilities of DPHNO  Critical review of functioning of various levels, evaluation studies, recommendations and nursing perspectives  Alternative systems of medicine  Training and supervision of health workers Health  agencies: NGO’s, Roles and | Neonatal And ChildhoodIllnesses) module  Discuss Skilled Birth Attendant (SBA) module  Discuss INC module on Reaching out: Nursing Care in emergencies  Describe the health organization of India Describe the functioning of various levels, evaluation studies, recommendationsand nursing perspectives Explain the alternative systems of medicine  Discuss the training and supervision of health workers, health agencies  Explain inter-sectoral coordination  and public private partnership Discuss the  challenges of health | Attendant (SBA) module  To cover INC module on Reaching out: Nursing Care in emergencies  To cover the health organization,  the functioning of various levels, recommendations and nursing perspectives, the alternative systems of medicine, the training and supervision of health workers,health agencies, inter- sectoral coordination, public private partnership and the challenges of health care  delivery system | Interactive session  Disaster drill  Teaching seminar  Interactive session  Field visits  Clinical postings | 15hrs  15hrs |

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|  | functions  Inter-sectoral coordination  Public private partnership  Challenges of health care delivery system | care delivery system |  |  |  |

**Reference Books:**

1. Clark, June & Jill Handerson, *Community Health*, Churchill Livingstone, 1993, New York.

2. Freeman B. Ruth, *Public Health Practices*, W. W. Saunders CO., 1990, Philadelphia.

3. Fromer Joan Margot, *Community Health Care and the Nursing Process*, C.VMosby CO.,

Toronto.

4. Park J. E, *Text Book of Preventive and Social Medicine*, Ms Banarsidas Bhanot CO., 1996,

Jabalpur.

5. Rao S. Kasthi, *An Introduction to Community Health Nursing*, B. I. Publishers, Madras.

**NURSING MANAGEMENT**

**M.Sc. Nursing 2nd Year Theory - 150 hours**

**Practical - 150 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 provideopportunity to students to understand, appreciate and acquire skills in planning, supervision and management of nursing services at different levels to provide quality Nursing services.

**Objectives:**

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

1. Describe the philosophy and Objectives: of the health care institutions at various levels.

2. Identify trends and issues in Nursing

3. Discuss the public Administration, health care Administration vis a vis Nursing Administration

4. Describe the principles of Administration applied to Nursing

5. Explain the organization of health and Nursing services at the various levels / institutions.

6. Collaborate and co-ordinate with various agencies by using multi-sectoral approach

7. Discuss the planning, supervision and management of nursing workforce for various health care settings.

8. Discuss various collaborative models between Nursing education and Nursing service to

improve the quality of nursing care

9. Identify and analyze 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**

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| **S.NO** | **CONTENTS OF THE TOPICS** | **LEARNING OBJECTIVES**  **(at the end of the session thestudent**  **should be able to)** | **TEACHING OBJECTIVES** | **METHODOLO GY** | **TIME** |
| 1 | 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  andfunctionsof nursingservices | -Explain the 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  andfunctionsof nursingservices | To cover Philosophy, purpose, elements, principles and scope of administration  Indian Constitution, Indian Administrative system vis a vis health  care delivery system: National, State  and Local | student Interactive session  student Interactive session  student Interactive session | 10 hrs |

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|  | 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, | 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, | Organisation andfunctionsof 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, | student Interactive session  student Interactive session |  |
| 2 | **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, aimsandobjective  Current trends | -Discuss  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, aimsandobjective  Current trends and issues in | To cover  **Management**  Functions of administration  Planning and control  Co- ordination and delegation  Decision making – decentralizatio n basic goals of decentralizatio n.  Concept of management **Nursing management**  Concept, types, principles and techniques  Vision and Mission | Didactic lecture through power point projections  FGD  SIS  Teacher Seminer | 10hrs |

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|  | and issues in Nursing Administration  Theories and models Application to nursing service and education | Nursing Administration  Theories and models  Application to nursing serviceand education | Statements  Philosophy, aims and objective  Current trends and issues in Nursing Administration  Theoriesand models Application to nursingservice  and education |  |  |
| 3 | **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 serviceand education | -Elaborate 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 nursingservice  and education | To cover  **Planning**  Planning process: Concept, Principles, Institutional policies  Mission, philosophy, objectives,  Strategic planning  Operational plans  Management plans  Programme evaluation and review technique(PER T), Gantt chart, Management by objectives(MBO  )  Planning new venture  Planning for change  Innovations in nursing Application to nursingservice  and education | Students seminar  FGD  Pannel Dicsussion | 15hrs |

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| 4 | **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(specificall y central sterile supply department, laundry,   * kitchen, laboratory services, emergency etc)s   Disaster management: plan, resources, drill, etc   * Application to nursing serviceand education | Explain 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(specificall y central sterile supply department, laundry,   * kitchen, laboratory services, emergency etc)s   Disaster management: plan, resources, drill, etc   * Application to nursing serviceand education | To cover 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(specifi cally central sterile supply department, laundry,  -kitchen, laboratory services, emergency etc)s  Disaster management: plan, resources, drill, etc  -Application to  nursing service | 1. Problem basedlearning 2. Student interactive session | 15hrs |

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|  |  |  | and education |  |  |
| 5 | **Human Resource forhealth**  Staffing   * Philosophy * Norms: Staff inspection unit(SIU), Bajaj Committee, High power committee, Indian nursing council (INC) * Estimation of nursing staff requirement- activityanalysis * Various research studies   Recruitment: credentialing, selection, placement, promotion  Retention  Personnel policies  Termination  Staff development programme  Duties and responsibilities of various category of nursing personnel   * + Application   s tonursing service and education | Describe **HumanResource for health**  Staffing   * Philosophy * Norms: Staff inspection unit(SIU), Bajaj Committee, High power committee, Indian nursing council (INC) * Estimation of nursing staff requirement- activityanalysis * 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 serviceand education | To cover **Human Resource for health**  Staffing   * Philosophy * Norms: Staff inspection unit(SIU), Bajaj Committee, High power committee, Indiannursing council(INC) * Estimation of nursing staff requirement- activityanalysis * 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 | Group discussion  Pannel Descussion  SIS  SIS  SS  SIS  SS  SIS | 15hrs |
| 6 | **Directing**  Roles and | Decribe Directing  Roles and | To cover  **Directing** |  | 15hrs |

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|  | 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 nurse manager  Occupational health and safety Application to nursing service and education | 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 nurse manager  Occupational health and safety Application to nursing serviceand education | Roles and functions  Motivation: Intrinsic, extrinsic, Creating motivating climate, Motivational theories  Communication  :process,types, strategies, Interpersonal communication, channels, barriers, problems, Confidentiality, Publicrelations  Delegation; common delegation errors  Managing conflict: process, management, negotiation, consensus  Collective bargaining: health care labour laws, unions, professional associations, role of nurse manager  Occupational health and safety Application to nursingservice  and education | Didactic lecture through PowerPoint presentations  Group discussion  SIS  SIS  SIS SIS  SIS |  |
| 7 | **Material management**  Concepts,  principles and | Describe Material management  Concepts,  principles and | To cover Material management  Concepts, | Students Seminar | 10hrs |

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|  | 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 | 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 | 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 methods, projective technique, Q sorts, vignettes, validity and  reliability of research tools, pilot study. | Problem based learning  Essay writing |  |
| 8 | **Controlling** | Explain Quality | To cover | Student interactive session | 15hrs |
|  | Quality | assurance – | Quality |  |
|  | assurance – | Continuous Quality | assurance – |  |
|  | Continuous Quality | Improvement | Continuous |  |
|  | Improvement   * Standards * Models   Performance | * Standards * Models   Performance appraisal: Tools, | Quality Improvement   * Standards * Models |  |
|  | appraisal: Tools, | confidential | Performance |  |
|  | confidential | reports, formats, | appraisal: |  |
|  | reports, formats, | Management, | Tools, |  |
|  | Management, | interviews | confidential |  |
|  | interviews | Supervision and | reports, |  |
|  | Supervision | management: | formats, |  |
|  | and management: | concepts and | Management, |  |
|  | concepts and | principles | interviews |  |
|  | principles | Discipline: | Supervision |  |
|  | Discipline: | service rules, self | and |  |
|  | service rules, self | discipline, | management: |  |
|  | discipline, | constructive versus | concepts and |  |

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|  | constructive versus destructive  discipline, problem employees, disciplinary proceedingsenquir y  etc  Self evaluation orpeerevaluation, patient satisfaction, utilization  review  -Applicationto nursingservice andeducation | destructive discipline, problem employees, disciplinary proceedingsenquir y  etc  Self evaluation or peer evaluation, patient satisfaction, utilization  review  -Application to nursingserviceand | principles  Discipline: service rules, self discipline, constructive versus destructive discipline, problem employees, disciplinary proceedingsenq uiry  etc  Self evaluation or peer evaluation, patient satisfaction, utilization review  -Application to nursing service and |  |  |
| 9 | **Fiscal planning**  Steps  Plan and non- plan, zero budgeting, mid- term appraisal, capital and revenue  Budget estimate, revised estimate, performance budget  Audit  Cost effectiveness  Cost accounting  Critical pathways  Health care reforms  Health economics  Health  insurance | Discuss Fiscal planning | To cover Fiscal planning | Integrated learning  Group discussion | 15hrs |

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|  | Budgeting for variousunitsand levels  -Application to  nursing service and education |  |  |  |  |
| 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 | To explain 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 | To cover **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 medicalrecords | Didactic lecture through PowerPoint presentation | 10hrs |
| 11 | **Leadership**  Concepts, Types, Theories  Styles  Manager behaviour  Leader behaviour  Effective leader: Characteristics, skills  Group dynamics  Power and  politics | Elaborate  **Leadership**  Concepts, Types, Theories  Styles  Manager behaviour  Leader behaviour  Effective leader: Characteristics, skills  Group dynamics  Power and politics  lobbying | To cover  **Leadership**  Concepts, Types, Theories  Styles  Manager behaviour  Leader behaviour  Effective leader: Characteristics, skills  Group dynamics  Power and | Teachers seminar | 10hrs |

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|  | lobbying | Critical thinking | politics |  |  |
| Critical thinking | and decision | lobbying |
| and decision | making | Critical |
| making | Stress | thinking and |
| Stress | management | decision |
| management | Applications to | making |
| Applications to | nursing service and | Stress |
| nursing service | education | management |
| and education |  | Applications to |
|  |  | nursing service |
|  |  | and education |
| 12 | **Legal and ethical** | Discuss Legal and | To cover Legal |  | 10hrs |
|  | **issues** | ethical issues | and ethical |  |  |
|  | **Laws and ethics** | Laws and ethics | issues |  |  |
|  | Ethical | Ethical | Laws and ethics |  |  |
|  | committee | committee | Ethical |  |  |
|  | Code of ethics | Code of ethics | committee |  |  |
|  | and professional | and professional | Code of |  |  |
|  | conduct | conduct | ethics and |  |  |
|  | Legal system: | Legal system: | professional |  |  |
|  | Types of law, tort | Types of law, tort | conduct |  |  |
|  | law, and liabilities | law, and liabilities | Legal |  |  |
|  | Legal issues in | Legal issues in | system: Types |  |  |
|  | nursing: | nursing: | of law, tort law, |  |  |
|  | negligence, | negligence, | and liabilities |  |  |
|  | malpractice, | malpractice, | Legal issues |  |  |
|  | invasion of | invasion of privacy, | in nursing: |  |  |
|  | privacy, | defamation of | negligence, | Student |  |
|  | defamation of | character | malpractice, | interactive |  |
|  | character | Patient care | invasion of | session |  |
|  | Patient care | issues, | privacy, |  |  |
|  | issues, | management | defamation of |  |  |
|  | management | issues, employment | character |  |  |
|  | issues, | issues | Patient care |  |  |
|  | employment | Medico legal | issues, |  |  |
|  | issues | issues | management |  |  |
|  | Medico legal | Nursing | issues, |  |  |
|  | issues | regulatory | employment |  |  |
|  | Nursing | mechanisms: | issues |  |  |
|  | regulatory | licensure, renewal, | Medico legal |  |  |
|  | mechanisms: | accreditation | issues |  |  |
|  | licensure, renewal, | Patients rights, | Nursing |  |  |
|  | accreditation | Consumer | regulatory |  |  |
|  | Patients rights, | protection act(CPA) | mechanisms: |  |  |
|  | Consumer | Rights of special | licensure, |  |  |
|  | protection | groups: children, | renewal, |  |  |

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|  | act(CPA)  Rights of special groups: children, women, HIV, handicap, ageing  Professional responsibility and accountability  Infection control  Standard safety measures | women, HIV, handicap, ageing  Professional responsibility and accountability  Infection control  Standard safety measures | 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 |  |  |

**Reference Books:**

1. Goel S.L., *Health Care Administration*, Seterling, New Delhi.

2. Jean Barrett, *Ward Management and Teaching*, Himalayan Books, New Delhi.

3. Goyal R.C., *Hospital Personal Management*, Prentice Hall India, New Delhi.

4. Awasthi, *Public Administration*, Makeshwar, Pub. Laxmi Narayan Agarwal. 1987, Agra.

**CLINICAL SPECIALITY – II**

**MEDICAL SURGICAL NURSING II**

**SUPER SPECIALISATION- CARDIOVASCULAR AND THORACIC NURSING**

**M.Sc. Nursing 2nd Year Theory - 150 hours**

**Practical - 950 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 and thoracic Nursing.

2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of cardio vascular and thoracic conditions

3. Participate in national health programs for health promotion, prevention and rehabilitation of patients with cardio vascular and thoracic conditions

4. Perform physical, psychosocial & spiritual assessment

5. Assist in various diagnostic, therapeutic and surgical procedures

6. Apply Nursing process in providing comprehensive care to patients with cardio vascular and thoracic conditions

7. Demonstrate advance skills/competence in managing patients with cardio vascular and

thoracic conditions including Advance Cardiac Life Support.

8. Describe the various drugs used in cardio vascular and thoracic conditions and Nurses

responsibility

9. Demonstrate skill in handling various equipments/gadgets used for critical care of cardio vascular and thoracic patients

10. Appreciate team work & coordinate activities related to patient care.

11. Practice infection control measures.

12. Identify emergencies and complications & take appropriate measures

13. Discuss the legal and ethical issues in cardio vascular and thoracic Nursing

14. Assist patients and their family to cope with emotional distress, grief, anxiety and spiritual needs.

15. Appreciate the role of alternative system of medicine in care of patient

16. Incorporate evidence based Nursing practice and identify the areas of research in the field of cardio vascular and thoracic Nursing

17. Identify the sources of stress and manage burnout syndrome among health care providers.

18. Teach and supervise Nurses and allied health workers.

19. Design a layout of ICCU and ICTU and develop standards for cardio vascular and thoracic Nursing practice.

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| Sr. No. | Topic | Learning  objectives | Teaching guidelines | Methodology | Time |
| **I** | **Management of problemsof women during pregnancy** Riskapproachofobstetrical nursingcare,concept&goals.  Screening of high-risk pregnancy, newer modalities of diagnosis.  NursingManagementof Pregnanciesatrisk-dueto obstetricalcomplication   * PerniciousVomiting. * Bleedinginearlypregnancy, abortion, ectopic pregnancy, and gestational trophoblostic diseases. * Hemorrhage during late pregnancy, ante partum hemorrhage, Placenta praevia, abruptioplacenta. * Hypertensive disorders in pregnancy, pre-eclampsia, eclampsia, HeomolysisElevated liverenzymeLowPlateletcount (HELLP) * Iso–immune diseases. Rhand ABOincompatibility * Hematologicalproblemsin   pregnancy.   * Hydramnios-oligohydramnios * Prolonged pregnancy- post term, postmaturity. * Multiplepregnancies. * Intrauterineinfection&pain   during pregnancy.   * Intra Uterine Growth Retardation(IUGR), Premature Rupture of Membrane(PROM), intra uterinedeath | 1. Describe the,   Risk approach of obstetrical nursing care, concept &goals   1. Enumerate theScreening of high-risk pregnancy, newer modalities of diagnosis. 2. Explain the Screening of high-risk pregnancy, newer modalities of diagnosis. | To cover Risk approach of obstetrical nursing care, concept &goals.  Screening of high- risk pregnancy, newer modalities ofdiagnosis.  Nursing Management of Pregnancies atrisk- due to obstetrical complication   * Pernicious   Vomiting.   * Bleedinginearly pregnancy, abortion, ectopic pregnancy, and gestational trophoblostic diseases. * Hemorrhage during late pregnancy, ante partum hemorrhage, Placenta praevia, abruptioplacenta. * Hypertensive disorders in pregnancy, pre- eclampsia, eclampsia, Heomolysis Elevated liver enzyme Low Plateletcount   (HELLP) | 1. Interactive session with the students regarding Risk approach of obstetrical nursing care, concept&goals. Screening of high-risk pregnancy, newer modalities of diagnosis. 2. Essay writing on Managementof pregnancy at highrisk | 25 |

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|  |  |  | * Iso–immune diseases.Rhand ABO incompatibility * Hematological problems in pregnancy. * Hydramnios- oligohydramnios * Prolonged pregnancy- post term, post maturity. * Multiple   pregnancies.   * Intra uterine infection & pain duringpregnancy. * Intra Uterine Growth Retardation(IUGR), PrematureRupture of Membrane(PROM),   intra uterine death |  |  |
| **II** | **Pregnanciesatrisk-duetopre- existing health problems** Metabolicconditions.  Anemia andnutritional deficienciesHepatitis  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 | 1. Discuss about Pregnancies at risk-due to pre- existing health problems | To cover 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 | 1 Didactic lecture through power point projections  2.Group discussion on Pregnancies at risk-due to pre- existing health problems | 15 |

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|  |  |  | 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** | **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 Obstetricalshock,vasapraevia, inversion of uterus, amniotic fluidembolism,ruptureuterus, presentationandprolapsecord. * Augmentation oflabour.   Medical and surgical induction.   * Version * Manualremovalofplacenta. * Obstetrical operation: Forceps delivery, Ventouse, Caesarian section, Destructive operations * Genital tract injuries-Third degreeperinealtear,VVF,RVF Complicationsofthirdstageof labour: * PostpartumHemorrhage. * Retainedplacenta. | 1. Elaborate the Abnormallabou r, pre-term labour& obstetrical emergencies 2. Enumerate the list of genital injurises 3. Explain the Complications ofthirdstageof labour | To cover Etiology, pathopyhsiology and nursing management of   * Uncoordinated uterine actions, Atony of uterus, precipitate labour, prolongedlabour. * Abnormal lie, presentation, positioncompound presentation * Contracted pelvis-CPD; dystocia. * Obstetrical emergencies Obstetrical shock, vasa praevia, inversion ofuterus, amniotic fluid embolism, rupture uterus, presentation and prolapsecord. * Augmentationof labour. Medical and surgical induction. * Version * Manualremoval   ofplacenta.   * Obstetrical operation:Forceps delivery, Ventouse, Caesarian section, Destructive   operations | 1. Teachers seminar on Obstetrical emergencies 2. Students Seminar on diagnosis and screeningtest | 15 |

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|  |  |  | * Genital tract injuries-Third degree perineal tear, VVF, RVF Complications of third stage of labour: * Postpartum   Hemorrhage.   * Retained   placenta |  |  |
| **VI** | **Post partum complications**  Nursing management of   * Puerperal infections, puerperal sepsis, urinary complications,puerperalvenous thrombosis and pulmonary embolism * Subinvolutionofuterus, Breast conditions, Thrombophlebitis * Psychological complications, postpartumblues,depression, psychosis | 1. Describe the Post partum complications 2. Discuss Nursing managementof post partum complication | To cover 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 | 1. Essaywriting on post partum complications 2. Problem based learning on psychiatric complications relatedtopost partumperiod | 10 |
| **V** | **High Risk Newborn** Concept, goals, assessment, principles.  Nursing management of   * Pre-term,smallforgestational age, post-mature infant, and baby of diabetic and substance usemothers. * Respiratory conditions, Asphyxianeonatorum,neonatal apnoea meconium aspiration syndrome, pneumo thorax, pneumomediastinum * Icterusneonatorum. * Birthinjuries. * Hypoxic   ischaemicencephelopathy   * Congenitalanomalies. * Neonatalseizures. * Neonatalhypocalcaemia,   hypoglycemia, hypomagnesaemia. | 1. Explainthe High Risk Newborn Concept,goals, assessment, principles. 2. Discussthe high risk newborn complications management 3.Enlist high risknewborn complications | TocoverHighRisk NewbornConcept, goals, assessment, principles.  Nursing management of   * Pre-term, small forgestationalage, post-mature infant, and baby of diabetic and substance use mothers. * Respiratory conditions, Asphyxia neonatorum, neonatal apnoea meconium aspiration syndrome,pneumo   thorax, pneumo | 1. Group Discussionon high risk newborn 2. Simulation learning on phototherapy 3. visit toICU | 25 |

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|  | * Neonatalheartdiseases. * Neonatalhemolyticdiseases * Neonatalinfections,neonatal sepsis,opthalmianeonatorum, cogenitalsyphilis,HIV/AIDS * Advancedneonatal   procedures.   * Calculation offluid requirements. * Hematologicalconditions– erythroblastosis fetalis, hemorrhagicdisorderinthe newborn * Organizationofneonatalcare, services(Levels), transport, neonatal intensive care unit, organization and management ofnursingservicesinNICU | 4. Enlist the Advanced neonatal procedures. Calculation of fluid requirements. | mediastinum   * Icterus   neonatorum.   * Birthinjuries. * Hypoxic ischaemicencephel opathy * Congenital   anomalies.   * Neonatal   seizures.   * Neonatal hypocalcaemia, hypoglycemia, hypomagnesaemia. * Neonatalheart   diseases.   * Neonatal   hemolytic diseases   * Neonatal infections, neonatal sepsis, opthalmia neonatorum, cogenital syphilis, HIV/AIDS * Advanced neonatal procedures. * Calculationof   fluid requirements.   * Hematological conditions – erythroblastosis fetalis, hemorrhagic disorder in the newborn * Organization of neonatal care, services(Levels), transport,neonatal intensive careunit, organization and management of nursingservicesin   NICU |  |  |

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| **S.N**  **o** | **Topic** | **Learning Objectives ( At the end of the session, thestudents**  **should be able to :)** | **Teaching Guidelines** | **Methodology** | **Time** |
| **I** | **HIV/AIDS**  HIV positive mother and her baby  Epidemiology Screening Parent to child  transmission(PTCT) Prophylaxis for mother and baby  Standard safety measures | 1. Discussabout HIV/AIDS 2. Describe the Nationalpoliciesand guidelines   Issues: Legal,ethical, Psychosocial and rehabilitation  Roleofnurse | To cover  HIV positive mother and her baby Epidemiology Screening  Parent to child transmission(PTCT) Prophylaxis for mother and baby  Standard safety | 1. Didactic lecture through power point projections 2.Studentsseminar on Issues: Legal, ethical, | 15 |
| **II** | **Gynecological problems and nursing management** Gynecological assessment Gynecological procedures Etiology, pathophysiology, diagnosis and nursing management of   * Menstrualirregularities * Diseasesofgenitaltract * Genital tractinfections * Uterinedisplacement * Genitalprolapse * Genitalinjuries * Uterinemalformation * Uterine fibroid, ovarian tumors, Breast carcinoma, Pelvic inflammatory diseases, reproductivetractmalignancies, hysterectomy – vaginal and abdominal. * Sexualabuse,rape,trauma,   assault | 1. Discussthe Gynecological assessment Gynecological procedures 2. Explain the Etiology, pathophysiology, diagnosis and nursing management of gynecological problems | To cover Gynecological assessment Gynecological procedures Etiology, pathophysiology, diagnosis and nursing management of   * Menstrual   irregularities   * Diseasesofgenital   tract   * Genitaltract   infections   * Uterine displacement * Genitalprolapse * Genitalinjuries * Uterine   malformation   * Uterine fibroid, ovarian tumors, Breast carcinoma, Pelvicinflammatory diseases, reproductive tract malignancies, hysterectomy – vaginal and abdominal. * Sexualabuse,   rape, trauma ,assault | 1. Didactic lecture through powerpoint projections 2. Teachers seminar on Gynecological assessment Gynecological procedures 3. Students seminar on gynecological disorders | 25 |
|  | Counseling  Breast feeding issues  Nationalpoliciesandguidelines Issues: Legal, ethical, Psychosocialandrehabilitation Role ofnurse |  | measures Counseling Breast feeding issues  National policies and guidelines Issues: Legal, ethical, Psychosocial and rehabilitation  Role of nurse | Psychosocial and rehabilitation Role of nurse |  |
| **III** | **Administration and management of obstetrical andgynecological unit** Design &layout  Staffing,  Equipment, supplies, Infection control; Standard safety measures | 1. Explain about Administrationand management of obstetrical and gynecologicalunit 2. Discuss about Norms,policiesand | To cover Administration and management of obstetrical and gynecological unit Design & layout Staffing, Equipment, | 1.Students interactive session on Design & layout Staffing,Equip ment, supplies,  Infection | 5 |

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|  | QualityAssurance:-Obstetric auditing –records /reports, Norms,policiesandprotocols Practice standards for obstetricalandgynecological unit | protocols  Practice standards for obstetrical and gynecological unit | supplies, Infection control; Standard safety measures  Quality Assurance:-Obstetric auditing– records /reports, Norms,policiesand protocols  Practice standards for obstetricaland gynecologicalunit | control; Standard safety measures 2.Groupdiscussion on Quality Assurance:- Obstetric auditing – records  /reports, Norms, policies and protocols |  |
|  |  |  | 3.Integrated teaching on Practice standards for obstetrical and gynecological unit |
| **IV** | **Education and training in** | 1. Elaborate | To cover Education | Visit to | 5 |
|  | **obstetrical and** | Education and | and training in | obstetrics and |  |
|  | **gynaecologicalcare** | training in | obstetrical and | gynecological |  |
|  | Staff orientation, training and | obstetrical and | gynaecological | unit |  |
|  | development, | gynaecological | care |  |  |
|  | In-service education program, | care |  |  |  |
|  | Clinical teaching programs. |  |  |  |  |

**Reference Books:**

1. Black M.J., Hawks H.J, *Medical Surgical Nursing, Clinical Management for Positive*

*Outcome*, Sauders, Elsevier.

2. Urban, A.N., Greenlac K.K, *Guidelines for Critical Care Nursing,* Mosby.

3. Wood L.S., Freelicher S.E, *Fetal Cardiac Nursing*, Lippincott Williams & Wilkings.

4. Gulanic, Klopp, Galnes, *Fetal Nursing Care Plans Nursing Diagnosis and intervention*.

5. Philip &Wilma J, *Medical- Surgical Nursing,* B.T Publication Bangalore.

\* Latest editions of all the suggested books are recommended

**CLINICAL SPECIALITY – II**

**CRITICAL CARE NURSING**

**M.Sc. Nursing 2nd Year Theory - 150 hours**

**Practical - 950 hours**

**Course Description:**

This course is designed to assist students in developing expertise and indepth

knowledge in the field of Critical care nursing. It will help students to develop advanced

skills for nursing intervention in caring for critically ill patients. It will enable the student to function as critical care Nurse practitioner/ specialist. It will further enable the student to function as educator, manager and researcher in the field of Critical Care Nursing.

**Objectives:**

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

1. Appreciate trends and issues related to Critical Care Nursing.

2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of critically ill patients

3. Describe the various drugs used in critical care and Nurses responsibility

4. Perform physical, psychosocial & spiritual assessment

5. Demonstrate advance skills/competence in managing critically ill patients including Advance Cardiac Life Support.

6. Demonstrate skill in handling various equipments/gadgets used for critical care

7. Provide comprehensive care to critically ill patients.

8. Appreciate team work & coordinate activities related to patient care.

9. Practice infection control measures.

10. Assess and manage pain.

11. Identify complications & take appropriate measures.

12. Discuss the legal and ethical issues in critical care Nursing

13. Assist patients and their family to cope with emotional distress, spiritual, grief and anxiety

14. Assist in various diagnostic, therapeutic and surgical procedures

15. Incorporate evidence based Nursing practice and identify the areas of research in the field of critical care Nursing

16. Identify the sources of stress and manage burnout syndrome among health care providers.

17. Teach and supervise Nurses and allied health workers.

18. Design a layout of ICU and develop standards for critical care Nursing Practice.

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| **S. NO** | **CONTENT OF TOPICS** | **LEARNING OBJECTIVES** | **TEACHING OBJECTIVES** | **METHODOLO GY** | **TIME** |
| **1** | Introduction to Critical | Discuss the | To teach and | Interactive | 5 hrs |
|  | Care Nursing Historical | concept, | discuss about | session with the |  |
|  | review- Progressive patient | principles and | concept, | students |  |
|  | care(PPC) | scope of critical | principles and | regarding |  |
|  | Review of anatomy and | care nursing | scope of critical | concept, |  |
|  | physiology of vital organs, |  | care nursing | principles and |  |
|  | fluid and electrolyte |  |  | scope of critical |  |
|  | balance |  |  | care nursing |  |
|  | Concepts of critical care |  |  |  |  |
|  | nursing |  |  |  |  |
|  | Principles of critical care |  |  |  |  |
|  | nursing |  |  |  |  |
|  | Scope of critical care |  |  |  |  |
|  | nursing |  |  |  |  |
|  | Critical care unit setup |  |  |  |  |
|  | including equipments |  |  |  |  |
|  | supplies, use and care of |  |  |  |  |
|  | various type of monitors & |  |  |  |  |
|  | ventilators |  |  |  |  |
|  | Flow sheets |  |  |  |  |
| **2** | Concept of Holistic care | Explain the | To teach and | Student seminar | 10 hrs |
|  | applied to critical care | Concept of | discuss about | on Concept of |  |
|  | nursing practice | Holistic care | Concept of | Holistic care |  |
|  | Impact of critical care | applied to critical | Holistic care | applied to critical |  |
|  | environment on patients:- | care nursing | applied to | care nursing |  |
|  | Risk factors, Assessment | practice | critical care | practice |  |
|  | of patients, Criticalcare |  | nursing practice |  |  |
|  | 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 |  |  |  |  |
| **3** | Review | Describe the drugs | To teach and | Student seminar | 14 hrs |
|  | Pharmacokinetics | used in critical | discuss about | on drugs used in |  |
|  | Analgesics/Anti | care unit | drugs used in | critical care unit |  |
|  | inflammatory agents Antibiotics, antiseptics |  | critical care unit |  |  |
|  |  |  |  |  |  |
|  | 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 |  |  |  |  |
| **4** | 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 Placeboeffect | Explain the pain management and theories of pain | To teach and discuss about pain management and theories of pain | Seminar on pain management and theories of pain | 5 hrs |
| **5** | Infection control in intensive care unit Nosocomial infection in intensive care unit; methyl resistant staphylococcus aureus (MRSA), Disinfection, Sterilization, Standard safetymeasures,  Prophylaxis for staff | Elaborate the Infection control in intensive careunit | To teach and discuss about Infection control in  intensive care unit | Students seminar on Infection control in  intensive careunit | 5 hrs |
| **6** | 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, perforativeperitonitis | Discuss the gastrointestinal disorders and its management | To teach and discuss about gastrointestinal disorders and its management | Pannel discussion on gastrointestinal disorders and its management | 10 hrs |
| **7** | Renal System  Causes, pathophysiology, | Elaborate therenal  disorders and its | To teach and  discuss about | Student  interactive | 10 hrs |

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|  | Clinical types,Clinical | management | | renal disorders | session on renal |  |
| features, diagnosis, |  | | and its | disorders andits |
| Prognosis, Management: |  | | management | management |
| Medical, Surgical and |  | |  |  |
| Nursing management of:- |  | |  |  |
| Acute Renal Failure, |  | |  |  |
| Chronic Renal Failure, |  | |  |  |
| Acute tubular necrosis, |  | |  |  |
| Bladder trauma ‰ |  | |  |  |
| Management Modalities: |  | |  |  |
| Hemodialysis, Peritoneal |  | |  |  |
| Dialysis, Continuous |  | |  |  |
| Ambulatory Peritoneal |  | |  |  |
| Dialysis, Continuous |  | |  |  |
| arterio venus hemodialysis, |  | |  |  |
| Renal Transplant, |  | |  |  |
| **8** | Nervous System | Explain | the | To teach and | Interactive | 10 hrs |
|  | Causes, pathophysiology, | neurovascular |  | discuss about | session on |  |
|  | Clinical types,Clinical | disorders and | its | neurovascular | neurovascular |  |
|  | features, diagnosis, | management |  | disorders and | disorders andits |  |
|  | Prognosis, Management: |  |  | its management | management |  |
|  | Medical, Surgical and |  |  |  |  |  |
|  | Nursing management of:- |  |  |  |  |  |
|  | Common Neurological |  |  |  |  |  |
|  | Disorders:-Cerebrovascular |  |  |  |  |  |
|  | disease, Cerebrovascular |  |  |  |  |  |
|  | accident, Seizure disorders, |  |  |  |  |  |
|  | GuilleinBarre-Syndrome, |  |  |  |  |  |
|  | Myasthenia Gravis, Coma, |  |  |  |  |  |
|  | Persistent vegetative state, |  |  |  |  |  |
|  | Encephalopathy, Head |  |  |  |  |  |
|  | injury, Spinal Cord injury |  |  |  |  |  |
|  | Management Modalities: |  |  |  |  |  |
|  | Assessment of Intracranial |  |  |  |  |  |
|  | pressure, Management of |  |  |  |  |  |
|  | intracranial hypertension, |  |  |  |  |  |
|  | Craniotomy Problems |  |  |  |  |  |
|  | associated with |  |  |  |  |  |
|  | neurological disorders: |  |  |  |  |  |
|  | Thermo regulation, |  |  |  |  |  |
|  | Unconsciousness, |  |  |  |  |  |
|  | Herniation syndrome |  |  |  |  |  |
| **9** | Endocrine System | Enumerate | the | To teach and | Simulated | 5 hrs |
|  | Causes, Pathophysiology, | endocrine |  | discuss about | learning on |  |
|  | Clinical types, Clinical | disorders and | its | endocrine | endocrine |  |
|  | features, diagnosis, | management |  | disorders and its | disorders and its |  |
|  | Prognosis, Management: |  |  | management | management |  |
|  | Medical, Surgical and |  |  |  |  |  |
|  | Nursing Management of :- |  |  |  |  |  |
|  | Hypoglycemia, Diabetic |  |  |  |  |  |
|  | Ketoacidosis, Thyroid |  |  |  |  |  |

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|  | crisis, Myxoedema, Adrenal crisis, Syndrome of Inappropriate/ hypersecretion of  Antidiuretic Hormone (SIADH) |  |  |  |  |
| **10** | **Management of other Emergency Conditions**  Mechanism of injury, Thoracic injuries, Abdominal injuries, pelvic  fractures, complications | Explain the management of other Emergency Conditions | To teach and discuss about the management of other  emergency Conditions | Interactive session on the management of otheremergency Conditions | 15hrs |
|  | 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) |  |  |  |  |

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| **S. NO** | **CONTENT OF TOPICS** | **LEARNING OBJECTIVES**  **(at the end of the session the student should be ableto)** | **TEACHING OBJECTIVES** | **METHODOLO GY** | **TIME** |
| **11** | Cardiovascular emergencies   * Principles of Nursing in caring for patient’swith   Cardiovascular disorders | Elaborate the cardiovascular emergencies and itsmanagement | To teach and discuss aboutcardiovasc ular emergencies and its  management | Panel discussion on cardiovascular emergencies and its management | 20 hrs |

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|  | Assessment: Cardiovascular system: Heart sounds, Diagnostic studies:- Cardiacenzymes studies, Electrocardiographi c 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, |  |  |  |  |

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|  | 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 |  |  |  |  |
| **12** | Respiratory System   * Acid-base balance &imbalance * Assesment : History & Physical Examination * Diagnostic Tests:Pulse Oximetry, End – Tidal Carbon Dioxide Monitoring, Arterial blood gas studies, chest radiography, pulmonary Angiography, Bronchoscopy, Pulmonary function Test, Ventilation perfusion scan, Lung ventilation scan * Causes Pathophysiology, Clinical types, Clinical features, Prognosis, Management: Medical, Surgical   and Nursing management of | Enumerate therespiratory disorders and its management | To teach and discuss about respiratory disorders and its management | Seminar on respiratory disorders and its management | 15 hrs |

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|  | Common pulmonary disorders:- Pneumonia, Status asthmaticus, interstitial drug disease, Pleural effusion, Chronic obstructive pulmonary disease, Pulmonary tuberculosis, Pulmonary edema, Atelectasis, Pulmonary embolism, Acute respiratory failure, Acute respiratory distress syndrome (ARDS), Chest Trauma Haemothorax, Pneumothorax   * Management Modalities:-Airway Management * Ventilatory Management:- Invasive, non- invasive, long term mechanical ventilations * Bronchial Hygiene:-   Nebulization, deep breathing exercise, chest physiotherapy, postural drainage, Inter Costal Drainage,Thoracic  surgeries |  |  |  |  |
| **13** | Burns   * Clinical types, classification, pathophysiology, clinical features, assessment, diagnosis,   prognosis, Management: | Describe the nursing care of patients with burns and its  management | To teach and discussabout nursing care of patients with burns and its management | Simulated learning based onnursing care of patients with burns and its management | 7 hrs |

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|  | Medical, Surgical & Nursing  management of burns   * Fluid and electrolyte therapy   – calculation of fluids and its administration   * Painmanagement * Woundcare * Infectioncontrol * Prevention and   management of burncomplications   * Grafts and flaps * Reconstructive surgery * Rehabilitation |  |  |  |  |
| **14** | Obstetrical Emergencies   * Causes, Pathophysiology, Clinical types, clinical features, diagnostic Prognosis, Management: Medical,Surgical and Nursing managementof   :Antepartum haemorrhage, Preeclampsia, eclampsia, Obstructed labour and ruptured uterus, Post partum haemorrhage, Peurperal sepsis,  Obstetrical shock | Explain the Nurse’s role in the managementof  I.C.C.U and ICTU | To teach and discussabout Nurse’s role in the management of I.C.C.U and ICTU | Seminar on Nurse’s role in the management of I.C.C.U and ICTU | 5 hrs |
| **15** | Neonatal Paediatric emergencies   * Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical andNursing | Elaborate the neonatal paediatric emergencies and itsmanagement | To teach and discuss about neonatal paediatric emergencies and its  management | Students interactive session on neonatal paediatric emergencies and itsmanagement | 10 hrs |

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|  | 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 oesophagealfistula, congenital hypertropic pyloric stenosis, imperforateanus * Pediatric emergencies * Dehydration,Acute broncho pneumonia, Acute respiratory distress syndrome, Poisoning, Foreign bodies, seizures, traumas, Status asthmaticus |  |  |  |  |
| **16** | Legal and ethical issues in critical care-Nurse’s role   * Braindeath * Organ donation & Counselling * Do Not Resuscitate(DNR) * Euthanasia * Livingwill | Explain the Legal and ethical issues in critical care | To teach and discussabout  Legal and ethical issues in criticalcare | Seminar on Legal and ethical issues in critical care | 2 hrs |
| **17** | Quality assurance   * Standards, Protocols,Policies, | Describe the Quality assurance  ‰ and nursing | To teach and discuss about Quality | Student interactive session on | 2 hrs |

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|  | Procedures   * Infectioncontrol; Standard safety measures * Nursingaudit * Staffing * Design of ICU/CCU | audit | assurance ‰ And nursing audit | Qualityassurance  ‰  And nursingaudit |  |

**Reference Books:**

*1.* Black M.J., Hawks H.J, *Medical Surgical Nursing, Clinical Management for Positive*

*Outcome*, Sauders, Elsevier.

2. Urban, A.N., Greenlac K.K, *Guidelines for Critical Care Nursing,* Mosby.

3. Wood L.S., Freelicher S.E, *Fetal Cardiac Nursing*, Lippincott Williams & Wilkings.

4. Gulanic, Klopp, Galnes, *Fetal Nursing Care Plans Nursing Diagnosis and intervention*.

5. Baughman Diane C, *Hand Book for Surgical Nursing,* Lipincott, NewYork.

6. Philip &Wilma J, *Medical- Surgical Nursing*, B.T Publication Bangalore.

7. Richardved Lee, *Medical Case of the Pregnant Patient,* American College, Philadelphia.

**CLINICAL SPECIALITY-II**

**ONCOLOGY NURSING**

**M.Sc. Nursing 2nd Year Theory - 150 hours**

**Practical - 950 hours**

**Course Description:**

This course is designed to assist students in developing expertise and indepth

understanding in the field of oncology Nursing. It will help students to develop advanced

skills for nursing intervention in various oncological conditions. It will enable the student to function as oncology Nurse practitioner/specialist and provide quality care. It will further enable the student to function as educator, manager, and researcher in the field of oncology Nursing

**Objectives:**

1. Explain the prevention, screening and early detection of cancer

2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of

oncological disorders of various body systems

3. Describe the psychosocial effects of cancer on patients and families.

4. Demonstrate skill in administering/assisting in various treatment modalities used for patients with cancer

5. Apply Nursing process in providing holistic care to patients with cancer.

6. Apply specific concepts of pain management

7. Appreciate the care of death and dying patients and value of bereavement support.

8. Describe the philosophy, concept and various dimensions of palliative care

9. Appreciate the role of alternative systems of medicine in care of cancer patients

10. Appreciate the legal & ethical issues relevant to oncology Nursing

11. Recognize and manage Oncological emergencies

12. Counsel the patients with cancer and their families

13. Incorporate evidence based Nursing practice and identify the areas of research in the field of oncology Nursing

14. Recognize the role of oncology Nurse practitioner as a member of oncology team

15. Collaborate with other agencies and utilize resources in caring for cancer patients.

16. Teach and supervise Nurses and allied health workers.

17. Design a layout and develop standards for management of oncology Units / hospitals and Nursing care.

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| **S.**  **No** | **Content Of Topics** | **Learning Objectives**  **(At The End Of The Session The** | **Teaching Objectives** | **Methodology** | **Time** |
| **1** | Introduction   * Epidemiology-Incidence, Prevalence – Global, National, State andLocal * Disease burden, concept of cancer, riskfactors * Historicalperspectives * Trends andissues * Principles of cancer management * Roles and responsibilities of oncologynurse | Discuss the  concept, and  principles of cancer management | To teach and discuss about concept, and principles of cancer management | Interactive session with the students regarding concept, and  principles of cancer management | 4 hrs |
| **2** | The Nature of Cancer   * Normal cellbiology * The Immunesystem * Pathological and pathophysiological changes intissues * Biology of the cancercell * Clone formation Transformation * Tumor stemlines * Structure of a solidtumor * Products produced by the tumor * Systemic effects of tumor growth | Explain the Pathological and pathophysiologi cal changes in tissues | To teach and discuss about Pathological and pathophysiol ogical changes in tissues | Studentseminar on Pathological and pathophysiologic al changes in tissues | 5 hrs |
| **3** | Etiology of Cancer   * Carcinogenesis, * Theories of cancer causation * Riskfactors * Carcinogens – genetic factors, chemical carcinogens, radiation, viruses, Immune system failure, rapid tissue proliferation * Hormone changes, diet, emotionalfactors. | Describe the  etiology of  cancer and  theories of cancer causation | To teach and discuss about etiology of  cancer and  theories of cancer causation | Teachers seminar on  etiology of  cancer and  theories of cancercausation | 4 hrs |
| **4** | Diagnostic Evaluation   * Health assessment: History taking, physical examination, * Staging and grading of tumors, * TNM Classification | Explain the health assessment and diagnostic tests of patients with cancer | To teach and discuss about health assessment and diagnostic tests of | Focused group discussion on health assessment and diagnostic tests of patients with cancer | 10 hrs |

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|  | 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 diagnosticmeasures |  | patients with cancer |  |  |
| **5** | Levels of prevention and care   * Primary prevention – Guidelines for cancer detection, general measures, Warning signs ofcancer, * Self examination-Oral, Breast,Testicular * Secondary prevention – earlydiagnosis. * Screening * Tertiary prevention – disabilitylimitation, * Rehabilitation :Mobility , Speech, Bowel and bladder, Ostomiesetc * Patient and family education, * Discharge instruction, follow-up care and use of communityresources. | Elaborate the Infection control in  intensive care unit | To teach and discuss about Infection control in intensive careunit | Students seminar on Infection control in  intensive care unit | 10 hrs |
| **6** | 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• | Discuss the gastrointestinal disorders and its management | To teach and discuss about gastrointestin al disorders and its  management | Pannel discussion on gastrointestinal disorders and its management | 25 hrs |

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|  | 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 drugdoses, * Therapeutic response to chemotherapy-Tumor variables, drug resistance, • Safety precaution   + 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 tumorkinetics. * Approaches to radiationtherapy   – • 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) 83 Unit Hours. Content‰   + Bone Marrow Transplantation /Stem CellTransplantation * 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• |  |  |  |  |

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|  | Classification of agents • Treatment and applications   * GeneTherapy * Current Concepts andpractices   + Alternative and ComplementaryTherapies * Currentpractices |  |  |  |  |
| **7** | Pain management:- Theories, typesand   * Nature of cancerpain * Pathophysiology ofpain * Painthreshold | Elaborate the renal disorders and its  management | To teach and discuss about renal disorders and its management | Student interactive session on renal disorders and its management | 10 hrs |
|  | Assessment of pain   * Principles of cancer paincontrol * Pharmacological: Opioid and non-opioid analgesictherapy * Patient controlled analgesia(PCA) * Other invasive techniques of paincontrol * Recent developments in Cancer pain   Non- Pharmacological pain relief technique-   * Complementary   therapies(Music, massage, meditation, relaxation techniques, biofeed backetc)   * Psychological intervention in paincontrol * Alternative system of medicines Role ofnurse |  |  |  |  |
| **8** | Palliative care   * Definition and scope, philosophy * Concept and elements of palliativecare * Global and Indian perspective of palliative care * Quality of lifeissues * Communicationskill * Nursing perspective of palliative care and its elements * Homecare * Hospicecare * Role of nurse in palliative care | Explain the | To teach and | Interactive | 5 hrs |
|  | neurovascular | discuss about | session on |  |
|  | disorders and | neurovascula | neurovascular |  |
|  | its management | r disorders | disorders and its |  |
|  |  | and its | management |  |
|  |  | management |  |  |

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| **9.** | Nutrition: - effects of cancer on nutritional Status and its consequences:-Anemia, Cachexia, Xerostomia, mucositis,  Dysphagia,nauseaand 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  **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 | Explain the Nursing Management of Physiological Conditions and Symptoms  Of Cancer Patient | To teach and discuss about Nursing Managemen t of Cancer Patient | Interactive session on Physiological Conditions and Symptoms  Of Cancer Patient | 15 hrs |

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| **9** | Infection control:   * Process of infection, risk of hospitalization, nosocomial infections- prevention and control of infection in acute, long term care facility and community basedcare * Standard safetymeasures | Enumerate the endocrine disorders and its management | To teach and discuss about endocrine disorders and its management | Simulated learning on endocrine disorders and its management | 2 hrs |
| **10** | Nursing Care of Patients With Specific Malignant Disorders   * Malignancies of G.I. system-oral, oesophagus, | Describe the Management of emergency conditions | To teach and discuss about Management of emergency | Simulated learning regarding Management of | 30 hrs |

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|  | stomach, rectal, liver & pancreas, care of ostomies/stoma   * Respiratorymalignancies * Genito urinary system malignancies- prostate Bladder, renal testicular malignancies, * Gynecological malignancies-cervix, uterus, ovary * Hematological malignancies- Lymphomas,Leukemias. * Malignancies of musculoskeletalsystem * Endocrinemalignancies * Skin * Head and Neck -brain tumors * Other malignancies – Breast cancer, AIDS related Malignancies (Kaposi'sSarcoma) |  | conditions | emergency conditions |  |
| **11** | Paediatric malignancies   * Leukemia, Lymphoma, Neuro-blastoma * Wilm’s tumor, Soft tissue sarcoma,Retinoblastoma * Nursing Management of children with Paediatric Malignancies | Elaborate the cardiovascular emergencies and its  management | To teach and discuss aboutcardiov ascular emergencies and its  management | Panel discussion on cardiovascular emergencies and itsmanagement | 10 hrs |
| **12** | 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 | Describe the nursing care of patients with burns and its management | To teach and discuss about nursing care of patients with burns  and its  management | Simulated learning based onnursing care of patients with burns and its management | 10 hrs |
| **13** | Psycho-Social Aspects of Nursing  Care | Explain the  Nurse’s rolein | To teachand  discussabout | Seminar on  Nurse’s role in | 8 hrs |

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|  | * Psychologicalresponses of patients withcancer * Psychosocial assessment * Crisis intervention,coping mechanisms * Stress management, spiritual/cultural careand needs * Counseling:individual andfamily * Maximizing quality oflife of patient andfamily * Ethical, moral andlegal issues- End of lifecare * Grief and grievingprocess * Bereavementsupport * Care of Nurses who care for thedying. | the management of I.C.C.U and ICTU | Nurse’s role in the  management of I.C.C.U  and ICTU | the management of I.C.C.U and ICTU |  |
| **14** | Layout and Design of an oncology institution/ ward, OPD, chemotherapy unit, Bone marrow transplantation unit, Pain clinic etc   * Practice Standardsof oncologynursing * Policies andProcedures * Establishing Standing orders andProtocol * Quality Assurance Programme in oncology units * Nursingaudit | Elaborate the neonatal paediatric emergencies and its  management | To teach and discuss about neonatal paediatric emergencies and its  management | Students interactive session on neonatal paediatric emergencies and itsmanagement | 2 hrs |

**REFERENCES:**

*1.* Black M.J., Hawks H.J, *Medical Surgical Nursing, Clinical Management for Positive*

*Outcome*, 7th edition, Sauders, Elsevier.

2. Urban, A.N., Greenlac K.K,“*Guidelines for Critical Care Nursing,* Mosby.

3. Wood L.S., Freelicher S.E, *Fetal Cardiac Nursing*, Lippincott Williams & Wilkings.

4. Gulanic, Klopp, Galnes, *Fetal Nursing Care Plans Nursing Diagnosis and intervention*.

*5.* Lewis, Collier & Heitkemper, *Medical Surgical Nursing Assessment and Management of*

*Clinical Problems.*

6. Baughman Diane C, *Hand Book for Surgical Nursing,* 2nd edition, published by Lipincott,

NewYork.

7. Philip &Wilma J, *Medical- Surgical Nursing,* 3rd edition, published by B.T Pubn Bangalore.

8. Richardved Lee, *Medical Case of the Pregnant Patient,* 2nd edition, American College,Philadelphia.

**CLINICAL SPECIALITY – II**

**NEUROSCIENCES NURSING**

**M.Sc. Nursing 2nd Year Theory - 150 hours**

**Practical - 950 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 urological 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 the areas of research in the field of neuroscience Nursing

13. Organise and conduct inservice education program for Nursing personnel.

14. Develope standards of care for quality assurance in neuroscience Nursing practice

15. Identify the sources of stress and manage burnout syndrome among health care providers.

16. Teach and supervise Nurses and allied health workers.

17. Plan and develop physical layout of neuro intensive care unit

**Course Content**

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| **S.no** | **CONTENT OF TOPIC** | **LEARNING OBJECTIVES(**  **at the end of the session the student should be able to)** | **TEACHING OBJECTIVES** | **METHODOL OGY** | **TIME** |
| **1** | **Introduction**  Introduction to neuroscience(neurologic al and neurosurgical) nursing   * History-Development in neurological and neurosurgical   nursing, Service & education   * Emerging trends and issuesinneurologyand neurosurgery   anditsimplicationto nursing.   * neurological and neurosurgicalproblems   –   * Concepts, principles andnursingperspectives * Ethicalandlegalissues * Evidence based nursing and its application in neurological and neurosurgicalnursing• | Enumerate the History- Development in neurological and neurosurgical. | To teach and discuss about History- Developmentinneurological and neurosurgical. | Simulated learning on History- Development in neurological and neurosurgical. | **5** |
| **2** | **Epidemiology**  Major health problems-  Risk factors associated with neurological conditions- Hereditary, Psychosocial factors, smoking, alcoholism, dietary habits, cultural andethnic  considerations, | Elaborate the  epidemiology. | To teach and discuss about epidemiology. | Panel discussion on epidemiology. | **5** |

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|  | occupational and infections.  Health promotion, disease prevention, life style modification and its implications to nursing  Alternate system of  medicine/complementar y therapies |  |  |  |  |
| **3** | **Review of Anatomy and physiology**  Embryology  Structure and | Explain the  Anatomy and physiology. | To teach and discuss about  Anatomy and physiology. | Seminar on Anatomy and physiology . | **10** |
|  | functions of Nervous |  |  |  |  |
|  | system- CNS, ANS, |  |  |  |  |
|  | cereberal |  |  |  |  |
|  | circulation , cranial and |  |  |  |  |
|  | spinal nerves and |  |  |  |  |
|  | reflexes, motor and |  |  |  |  |
|  | sensory functions |  |  |  |  |
|  | Sensory organs |  |  |  |  |
| **4** | **Assessment and diagnostic measures**  Assessment   * Historytaking * Physicalassessment, | Enumerate the Assessment and diagnostic measures. | To teach and discuss about Assessment and diagnostic measures. | Simulated learning on Assessment and diagnostic measures. | **15** |
|  | psychosocial assessment |  |  |  |  |
|  | * Neurological |  |  |  |  |
|  | assessments, Glasgow |  |  |  |  |
|  | coma scale interpretation |  |  |  |  |
|  | & its relevance to |  |  |  |  |
|  | nursing. |  |  |  |  |
|  | * Commonassessment |  |  |  |  |
|  | abnormalities |  |  |  |  |
|  | Diagnostic measures |  |  |  |  |
|  | * Cerebro spinalfluid |  |  |  |  |
|  | analysis |  |  |  |  |
|  | * Radiologicalstudies- |  |  |  |  |
|  | 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 |  |  |  |  |

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|  | (Positron Emission Test),  Interventional radiology.   * Electorgraphic studies- Electro encephalo graphy, MEG, EMG, videoEEG, * Nerve conduction studies-Evoked potentials,visualevoked potentials, brain stem auditory evoked potentials, somatosensory evoked potentials * Ultrasound studies- Carotid duplex, transcranialDoppler sonography, * Immunologicalstudies * Biopsies–muscle, nerve and Brain. Interpretation of diagnosticmeasures   Nurse’s role in diagnostic  tests |  |  |  |  |
| **5** | **Meeting Nutritional needs of neurological patients**  Basic nutritional requirements  Metabolic changes following injury and starvation  Nutritional assessment  Commonneurological problems that interfere with nutrition and strategies for meeting their nutritionalneeds  Special metabolicand electrolyteimbalances  Chronic fatigue  syndrome | Elaborate the Meeting Nutritional needs of neurological patients. | To teach and discuss about Meeting Nutritional needs of neurological patients. | Panel discussion on Meeting Nutritional needs of neurological patients. | **5** |
| **6** | **Drugs used in neurological and neurosurgical disorders** | Explain the Drugs used in neurological and neurosurgical | To teach and discuss about drugs used in neurological | Seminar on drugs used in neurological and | **5** |

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|  | Classification  Indications, contraindications, actionsandeffects,toxic effects  Role of nurse | disorders. | and neurosurgical disorders. | neurosurgical disorders. |  |
| **7** | **Traumatic conditions.**  Causes, pathophysiology, Clinical types, Clinical features, | Explain the Traumatic conditions | To teach and discussabout Traumatic  conditions | Seminar on Traumatic conditions | **10** |
|  | diagnosis, Prognosis, |  |  |  |  |
|  | Management: medical, |  |  |  |  |
|  | surgical and Nursing |  |  |  |  |
|  | management of |  |  |  |  |
|  | * Craniocerebral |  |  |  |  |
|  | injuries. |  |  |  |  |
|  | * Spinal & Spinalcord |  |  |  |  |
|  | injuries. |  |  |  |  |
|  | * Peripheralnerve |  |  |  |  |
|  | injuries. |  |  |  |  |
|  | * Unconsciousness |  |  |  |  |
| **8** | **Cerebro vascular disorders.**  Causes, pathophysiology, Clinical  types, Clinical features, | Elaborate the Cerebro vascular disorders. | To teach and discuss about Cerebro vascular  disorders. | Panel discussion on Cerebro vascular  disorders. | **10** |
|  | diagnosis, Prognosis , |  |  |  |  |
|  | Management: medical, |  |  |  |  |
|  | surgical and Nursing |  |  |  |  |
|  | management of |  |  |  |  |
|  | * Stroke&arteriovenous |  |  |  |  |
|  | thrombosis. |  |  |  |  |
|  | * Haemorrhagic embolus. |  |  |  |  |
|  | * Cerebrovascular |  |  |  |  |
|  | accidents. |  |  |  |  |
|  | * Intracranialaneurysm. |  |  |  |  |
|  | * Subarchnoid |  |  |  |  |
|  | Haemorrhage. |  |  |  |  |
|  | * Arterio venousfistula. |  |  |  |  |
|  | * Braintumours |  |  |  |  |
|  | Diseases of cranial |  |  |  |  |
|  | nerves;Trigiminal |  |  |  |  |
|  | neuralgia, Facial palsy, |  |  |  |  |
|  | Bulbar palsy. |  |  |  |  |
| **9** | **Degenerating and** | Elaborate the degenerating and demyelinating disorders. | To teach and discuss about degenerating and  demyelinating | Panel discussion on degenerating and  demyelinating | **10** |
|  | **demyelinating** |  |
|  | **disorders** |  |
|  | Causes, |  |
|  | pathophysiology, Clinical |  |

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|  | types, Clinical features, diagnostic, Prognosis ,Management: medical, surgical and  Nursing management of   * Motor neurondiseases. * Movement disorders- Tics, dystonia, chorea, wilson’s disease, essentialtremors * Dementia. * Parkinson’sdisease. * Multiplesclerosis. * Alzemier’s |  | disorders. | disorders. |  |
| **10** | **Neuro infections**  Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and  Nursing management of Neuro infections   * Meningitis-types * Encephalitis. * Poliomyelitis. * Parasiticinfections. * Bacterialinfections * Neurosyphilis. * HIV &AIDS. * Brainabscess. | Explain the neuro infections | To teach and discuss about neuro infections | Seminar on neuro infections | **10** |
| **11** | **Paroxysmal disorders.**  Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis , Management: medical, surgical and Nursing management of   * Epilepsy andseizures. * Statusepilepticus. * Syncope. * Menier’ssyndrome. * Cephalgia. | Explain the Traumatic conditions | To teach and discuss about Traumatic conditions | Seminar on Traumatic conditions | **10** |
| **12** | **Neoplasms – surgical conditions.**  Causes,  pathophysiology, Clinical types, Clinical features, | Explain the Neoplasms – surgical conditions. | To teach and discuss about Neoplasms– surgical  conditions. | Seminar on Neoplasms – surgical conditions. | **5** |

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|  | diagnostic, Prognosis , Management:medical, surgicaland  Nursing management of   * Space occupying lesions-types * Common tumorsof   CNS, |  |  |  |  |

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| **13** | **Developmental disorders.**  Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis,  Management:medical, | Enumerate the developmental disorders | To teach and discuss about developmental disorders | Simulated learning on developmenta ldisorders | **10** |
|  | surgical and  Nursing management of   * Hydrocephalus. * Craniosynostosis. * spina bifida- Meningocele, Meningomyelocele encephalocele * syringomyelia. * Cerebro vascular systemanomalies. * Cerebralpalsies.   + Down’ssyndrome |  |  |  |  |
| **14** | **Neuro muscular disorders.**  Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and  Nursing management of   * Polyneuritis–GB Syndrome. * Musculardystrophy. * Myastheniagravis. * Trigeminalneuralgia. * Bell’spalsy. * Menier’sdisease * Carpal tunnel syndrome * Peripheral   neuropathies | Elaborate the Neuro muscular disorders. | To teach and discuss about Neuro muscular disorders. | Panel discussion on Neuro muscular disorders. | **10** |

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| **15** | **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 | Explain the Other disorders | To teach and discuss about Other disorders | Seminar on Other disorders | **5** |
| **16** | **Neuro emergencies**  Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and  Nursing management of   * Increased intracranial pressure * Unconscious * Herniationsyndrome * Seizures * Severe headinjuries * Spinalinjuries * Cerebro vascular accidents | Enumerate the Neuro emergencies | To teach and discuss about Neuro emergencies | Simulated learning on Neuro emergencies | **10** |
| **17** | **Rehabilitation**.  Concept and Principles of Rehabilitation.  Factors affecting qualityoflifeandcoping  Rehabilitation in acute care setting, and following stroke, head injuryanddegenerative disorders ofbrain  Physiotherapy.  Counselling  Care giver’s role **Speech &Language.-**Neurogenic communication disorders, Speech  therapy | Elaborate the  Rehabilitation. | To teach and discuss about Rehabilitation. | Panel discussion on Rehabilitation | **5** |

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| **18** | **Ethical and legal issues in neuroscience nursing**  Brain death and organ transplantation  Euthanasia  Negligence and malpractice  Nosocomial infections | Explain the ethical and legal issues in neuroscience nursing. | To teach and discuss about ethical and legal issues in neuroscience nursing. | Seminar on ethical and legal issues in neuroscience nursing. | **5** |
| **19** | Quality assurance in neurolgical nursing practice  Role of advance  practitioner in | Explain the Quality assurance in neurolgical nursing practice. | To teach and discuss about Quality assurance in  neurolgical | Seminar on Quality assurance in neurolgical nursing | **5** |
|  | neurological nursing  Professional practice standards  Quality control in neurologic nursing  Nursing audit  Neuro ICU   * Philosophy, aims and objectives * Policies, staffing pattern, design and physicalplanofneuro ICU * Team approach, functions * Psychosocialaspectsin relation to staff and clients ofneuro   ICU,   * In-serviceeducation |  | nursing practice. | practice. |  |

**Reference Books:**

*1.* Black M.J. & Hawks H.J, *Medical Surgical Nursing, Clinical Management for Positive*

*Outcome*, Sauders, Elsevier.

2. Urban, A.N., Greenlac K.K, *Guidelines for Critical Care Nursing,* Mosby.

3. Wood L.S., Freelicher S.E, *Fetal Cardiac Nursing*, Lippincott Williams & Wilkings.

4. Gulanic, Klopp, Galnes, *Fetal Nursing Care Plans Nursing Diagnosis and Intervention*.

*5.* Lewis, Collier & Heitkemper, *Medical Surgical Nursing Assessment and Management of*

*Clinical Problems.*

6. Baughman Diane C, *Hand Book for Surgical Nursing,* Lipincott, NewYork.

7. Philip &Wilma J, *Medical- Surgical Nursing,* B.T Publication Bangalore.

8. Richardved Lee, *Medical Case of the Pregnant Patient,* American College, Philadelphia.

**CLINICAL SPECIALITY – II**

**NEPHRO-UROLOGY NURSING**

**M.Sc. Nursing 2nd Year Theory - 150 hours**

**Practical - 950 hours**

**Course Description:**

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

understanding in the field of Nephro and urological Nursing. It will help students to develop advanced skills for nursing intervention in various nephro and urological conditions. It will enable the student to function as nephro and urology Nurse practitioner/specialist and provide quality care. It will further enable the student to function as educator, manager, and researcher in the field of nephro and urology Nursing

**Objectives:**

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

1. Appreciate trends and issues related to **nephro and urological** Nursing

2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of **nephro and urological** conditions

3. Perform physical, psychosocial & spiritual assessment

4. Assist in various diagnostic, therapeutic and surgical interventions

**5.** Provide comprehensive Nursing care to patients with **nephro and urological conditions**

6. Describe the various drugs used in **nephro and urological** conditions and Nurses

responsibility

7. Demonstrate skill in handling various equipments/gadgets used for patients with **nephro and urological** conditions

8. Appreciate team work & coordinate activities related to patient care.

9. Practice infection control measures.

10. Identify emergencies and complications & take appropriate measures

11. Assist patients and their family to cope with emotional distress, grief, anxiety and spiritual needs

12. Discuss the legal and ethical issues in **nephro and urological** Nursing

13. Identify the sources of stress and manage burnout syndrome among health care providers

14. Appreciate the role of alternative system of medicine in the care of patient

15. Incorporate evidence based Nursing practice and identify the areas of research in the field of **nephro and urological** Nursing

16. Teach and supervise Nurses and allied health workers.

17. Design a layout of kidney transplant unit and dialysis unit

18. Develop standards of nephro urological Nursing practice

**Course Content**

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| **S. NO** | **CONTENT OF TOPICS** | **LEARNING OBJECTIVES**  **(at the end of the session the**  **student should be able to)** | **TEACHING OBJECTIVES** | **METHODO LOGY** | **TIM E** |
| **1** | Introduction   * Historical development: trends and issues in the field of nephro and urologicalnursing. * nephro and urological problems * Concepts, principles | Describe the historical development, trenads and issues in the field of nephro urology nursing | To teach and  discuss about historical development, trenads and issues in the field of nephro urology nursing | Students seminar on historical development, trenads and issues in the field of  nephro urology | 5 hrs |

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|  | and nursing  perspectives   * Ethical and legalissues * Evidence based nursing and its application in nephro and urological nursing(to be incorporated in all the units) |  |  | nursing |  |
| **2** | Epidemiology   * Major health problems- urinary dysfunction, urinary tract infections, Glomuerular disorders, obstructive disorders ad other urinarydisorders * 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/complementa rytherapies | Explain the major health problems regarding nephrological conditions and alternate system of medicine/ complementary therapies | To teach and discuss about major health problems regarding nephrological conditions and alternate system of medicine/ complementary therapies | Group discussion on major health problems regarding nephrological conditions and alternate system of medicine/ complementar ytherapies | 5 hrs |
| **3** | Review of anatomy and physiology of urinarysystem   * Embryology * Structure andfunctions * Renalcirculation * Physiology of urine formation * Fluid and electrolyte balance * Acid basebalance * Immunology specific to kidney | Review the anatomy and physiology of urinary system | To teach and  discuss about  anatomy and  physiology of urinarysystem | Teachers seminar on anatomy and physiology of urinary system | 5 hrs |
| **4** | Assessment and diagnostic measures   * Historytaking * Physical assessment, psychosocial | Explain the health assessment and diagnostic tests of patients with renal disorders | To teach and discuss about health assessment and diagnostic tests of patients with renal disorders | Focused group discussion on health assessment anddiagnostic | 20 hrs |

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|  | 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, ren scan, biopsy, endoscopy-cystoscopy, urodynamics studiescystometrogram, urinary flow study, sphincter electromyography, voiding pressure flow study, videourodynamics, Whitaker study * Interpretation of diagnosticmeasures * Nurse’s role in diagnostictests |  |  | tests of  patients with renal disorders |  |
| **5** | Renal immunopathy/Immunopatholo gy   * General Concept of immunopathology * Immune mechanism of glomerual vascular disease * Role of mediater   systems in glomerula vascular disease | Elaborate the Renal immunopathy/Immu nopathology | To teach and discuss about Renal immunopathy/Imm unopathology | Students interactive session on Renal immunopathy/ Immunopatho logy | 5 hrs |
| **6** | Urological Disorders and NursingManagement   * Etiology, clinical manifestations, diagnosis, prognosis, | Summarize the Urological Disorders and Nursing Management | To teach and  discuss about Urological Disorders and Nursing | Focused group discussion on Cancer Urological | 15 hrs |

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|  | related pathophysiology, medical , surgical and nursing managementof   * Urinary tract infections- pyelonephritis, lower urinary tractinfections, * Disorders for ureters, bladder andurether * Urinary tract infections- * Urinary dysfunctions- urinary retention, urinary incontinence, urinaryreflux, * Bladder disorders- neoplasms, calculi, neurogenic bladder, trama, congenital abnormalities * Benign prostrate hypertrophy(BPH) * Ureteral disorders:   ureteritis, ureteral  trauma, congenital anomalies ofureters   * Uretheral disorders- tumours, trauma,congenial anomalies of ureters, |  | Management | Disorders and Nursing Management |  |
| **7** | Glomueral disorders and nursingmanagement   * Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical , surgical and nursing managementof * Glomueralo nephritis- chronic, acute, nephriticsyndrome * Acute Renal failure and chronic renalfailure. * Renalcalculi * Renal tumours-benign andmalignant * Renaltrauma * Renalabscess | Elaborate the Glomueral disorders and nursing management | To teach and  discuss about Glomueral disorders and nursing management | Student interactive session on Glomueral disorders and nursing management | 25 hrs |

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|  | * Diabeticnephropathy * Vasculardisorders * Renaltuberculosis * Polycystic * Congenitaldisorders * Hereditary renal disorders |  |  |  |  |
| **8** | Management of Renal emergencies   * Anuria * Acute Renalfailure * Poisoning * Trauma * Urineretention * Acute graftrejection * Hematuria * Nurse’srole | Explain the  Management of Renalemergencies | To teach and  discuss about Management of Renalemergencies | Interactive session on Management of Renal emergencies | 10 hrs |

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| **9** | Drugs used in urinary disorders   * Classification * Indications, contraindications, actions and effects, toxiceffects * Role ofnurse | Enumerate the  Drugs used in urinarydisorders | To teach and discuss about Drugs used in urinary disorders | Group discussion on Drugs used in urinary disorders | 10 hrs |
| **10** | Dialysis   * Dialysis- Historical, types, Principles,goals   + Hemodialysis- vascular access sites- temporary and permanent • Peritoneal dialysis * Dialsyis Procedures- steps, equipments, maintenance, * Role of nurse- pre dialysis, intra and post dialysis * Complications- * Counseling * patienteducation * Records andreports | Review the dialysis, its types and role of nurse | To teach and  discuss about dialysis, its types and role ofnurse | Simulated learning regarding dialysis, its types and role ofnurse | 10 hrs |
| **11** | * Kidneytransplantation * Nursing management of a patient with Kidneytransplantation * Kidney   transplantations- a historical review Immunology of graft rejections   * The recipient of a renal transplant * Renalpreservations * Human Leucocytic Antigen(HLA) typing matching and cross matching in renal transplantation * Surgical techniques of renaltransplantations * Chronic renal | Elaborate the kidney transplantation and its nursing  management | To teach and  discuss about kidney transplantation and its nursing  management | Panel discussion on kidney transplantatio n and its nursing management | 10 hrs |

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|  | transplant rejection   * Complication after KTP: Vascular and lymphatic, Uroloical, cardiovascular, liver and neurological, infectiouscomplication * KTP in children and management of pediatric patient with KTP * KTP indeveloping countries * Results ofKTP * Work up of donor and recipient for renal transplant * Psychological aspect of KTP and organ donations * Ethics intransplants * Cadaveric transplantation |  |  |  |  |
| **12** | * Rehabilitation of patient with   nephrologicalproblems   * Risk factors and prevention * Rehabilitation of patients on dialysis and after kidneytransplant * Rehabilitation of patients after urinary diversions * Family and patient teaching | Enumerate the  rehabilitation of patints with nephrological problems | To teach and  discuss about rehabilitation of patints with nephrological problems | Seminar on rehabilitation of patints with nephrological problems | 5 hrs |
| **13** | Pediatric urinary disorders   * Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical , surgical and nursing management of children with Renal Diseases -UTI, ureteral reflux, glomerulo   nephritis, nephrotic  syndrome infantile  nephrosis, cystic  kidneys, familial | Describe the  Pediatric urinary disorders and its managemenet | To teach and  discuss about  Pediatric urinary disorders and its managemenet | Simulated learning based on Pediatric urinary disorders and its managemenet | 10 hrs |

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|  | factors in renal diseases in childhood, Haemolytic uraemic syndrome. Benign recurrent haemturia, nephropathy,wilms’  tumour |  |  |  |  |
| **14** | Critical care units- dialysis , KTP unit   * Philosophy, aimsand objectives * Policies, staffing pattern, design and physical plan of Dialysis and KTPunits * Teamapproach, functions * Psychosocial aspectsin relation to staff and clients of ICU, dialysis unit * In-serviceeducation * Ethical and legalissues | Explain the Critical care units- dialysis , KTP unit | To teach and discuss about Critical care units- dialysis , KTP unit | Seminar on Critical care units- dialysis  , KTP unit | 5 hrs |
| **15** | * Quality assurance in nephrological nursing practice * Role of advance practioner in nephrologicalnursing * Professionalpractice standards * Quality control in nephrologicalnursing * Nursingaudit | Elaborate the Quality assurance and role of advance practioner in nephrological nursing | To teach and  discuss about Quality assurance and role of advance practioner in nephrological nursing | Panel discussion on Quality assurance and role of  advance practioner in nephrological nursing | 5 hrs |

**REFERENCES:**

*1.* Black M.J., Hawks H.J, *Medical Surgical Nursing, Clinical Management for Positive*

*Outcome*, 7th edition, Sauders, Elsevier.

2. Urban, A.N., Greenlac K.K,“*Guidelines for Critical Care Nursing,* Mosby.

3. Wood L.S., Freelicher S.E, *Fetal Cardiac Nursing*, Lippincott Williams & Wilkings.

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*5.* Lewis, Collier & Heitkemper, *Medical Surgical Nursing Assessment and Management of*

*Clinical Problems.*

6. Baughman Diane C, *Hand Book for Surgical Nursing,* 2nd edition, published by Lipincott,

NewYork.7. Philip &Wilma J, *Medical- Surgical Nursing,* 3rd edition, published by B.T Pubn Bangalore8. Richardved Lee, *Medical Case of the Pregnant Patient,* 2nd edition, American College,Philadelphia.

**CLINICAL SPECIALITY – II**

**ORTHOPEDIC NURSING**

**M.Sc. Nursing 2nd Year Theory - 150 hours**

**Practical - 950 hours**

**Course Description:**

This course is designed to assist students in developing expertise and in

depth understanding in the field of orthopedic Nursing. It will help students to develop advanced skills for nursing intervention in various orthopedic conditions. It will enable the student to function as orthopedic Nurse practitioner/specialist providing quality care. It will further enable the student to function as educator, manager, and researcher in the field of orthopedic Nursing.

**Objectives:**

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

1. Appreciate the history and developments in the field of orthopedic Nursing

2. Identify the psycho-social needs of the patient while providing holistic care.

3. Perform physical and psychological assessment of patients with orthopedic conditions and disabilities.

4. Describe various disease conditions and their management

5. Discuss various diagnostic tests required in orthopedic conditions

6. Apply Nursing process in providing care to patients with orthopedic conditions and those requiring rehabilitation.

7. Recognize and manage orthopedic emergencies.

8. Describe recent technologies and treatment modalities in the management of patients with orthopedic conditions and those requiring rehabilitation.

9. Integrate the concept of family centered, long term care and community based rehabilitation to patients with orthopedic conditions.

10. Counsel the patients and their families with orthopedic conditions

11. Describe various orthotic and prosthetic appliances

12. Appreciate the legal and ethical issues pertaining to patients with orthopedic conditions and those requiring rehabilitation.

13. Appreciate the role of alternative system of medicine in care of patients with orthopedic conditions

14. Incorporate evidence based Nursing practice and identify the areas of research in the field of orthopedic Nursing.

15. Recognize the role of orthopedic Nurse practitioner and as a member 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**

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| **S. NO** | **CONTENT OF TOPICS** | **LEARNING OBJECTIVES**  **(at the end of the session the student should be ableto)** | **TEACHING OBJECTIVE S** | **METHOD OLOGY** | **TIME** |
| **1** | Introduction   * Historical perspectives – History and trends in orthopedicnursing * Definition and scope of orthopedicnursing * Anatomy and physiology of Musculo-skeletal system * Posture, Body landmarks Skeletal system Muscular system. Nervous system- | Describe the Historical perspective, history and trends in orthopedicnursing | To teach and discussabout Historical perspective, history and  trends in orthopedic nursing | Students seminar on Historical perspective  , history and trends in orthopedic nursing | 5 hrs |
|  | Main nerves   * Healing of - Injury, bone injury, * Repair ofligaments * Systemic response to injury * Ergonomics, Body mechanics, biomechanical measures * Orthopedicteam |  |  |  |  |
| **2** | Assessment of Orthopedic Patient   * Health Assessment:   History, physical examination- Inspection, palpation, movement, Measurement, muscle strengthTesting.   * Diagnostic studies – Radiological studies,   Muscle enzymes, serologicstudies | Review the  assessment and diagnostic tests used for orthopedic patients | To teach and discussabout assessment and diagnostic tests used for orthopedic patients | Group discussion on assessment and diagnostic tests used for orthopedic patients | 8 hrs |
| **3** | Care of patients with devices   * Splints, braces, various types of plastercast * Various types oftractions, * Various types of orthopedic beds and mattresses * Comfortdevices * Implants inorthopedic * Prosthetics andOrthotics | Explain the care of patients with devices used in orthopedic unit | To teach and discussabout care of  patients with devices used in orthopedic unit | Teachers seminar on care of patients with devices used in orthopedic unit | 10 hrs | |

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| **4** | Injuries   * Trauma & Injuries * Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, management, medical surgical and nursing management of : • Early management of Trauma • Fractures • Injuries ofthe * Shoulder andarm * Elbow, fore arm, wrist, hand * Hip, thigh, knee, leg, ankle,foot * Spine * Head injury * Chest injury | Explain the trauma and injuries and its early management | To teach and discussabout trauma and  injuries and  its early management | Focused group discussion on trauma and injuries and its early manageme nt | 15 hrs |
|  | * Polytrauma • Nerveinjuries * Vascular injuries • Soft tissueinjuries * Sports injuries • Amputation |  |  |  |  |
| **5** | Infections of Bones and Joints   * Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, management, medical surgical and nursing management of: * Tuberculosis * Osteomyelitis * Arthritis * Leprosy | Elaborate the Infections of Bones and Joints | To teach and discussabout Infections of Bones and Joints | Students interactive session Infections of Bonesand Joints | 8 hrs |
| **6** | Bone Tumours   * Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, management, medical surgical and nursing managementof: * Bone tumors – Benign, Malignant andmetastatic * Different types of therapies fortumors | Summarize the bone tumours and its management | To teach and discussabout bone tumours and its  management | Focused group discussion on bone tumours and its manageme nt | 5 hrs |

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| **7** | 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 ofdigits, * Congenitaltorticollis. * Meningocele, meningomyelocele, spina bifida, * Chromosomaldisorders. * Computer related deformities | Elaborate the chromosomal disorders, deformities and itsmanagement | | To teach and discussabout chromosomal disorders, deformities and its  management | | Focused group discussion on chromosom al disorders, deformities and its manageme nt | | 10 hrs | |
| **8** | Disorders of the spine   * Intervertebral disc prolapse, Fracture of the spine Low backdisorder * Low back pain, PND, spinal stenosis, spondylosis | Explain the Disorders of the spine and its management | | To teach and discussabout Disorders of the spine and its management | | Interactive session on Disorders of the spine and its manageme nt | | 5 hrs | |
| **9** | Nutritional/Metabolic andEndocrineDisorders   * Causes, pathophysiology, clinical types, clinical features, diagnosis,   prognosis, medical surgical and nursing managementof:   * Rickets, * Scurvy, * Hyper vitaminosis A and D, * Osteomalacia, 106 Unit HoursContent * Osteoporosis * Paget’sdisease, * gout, * Gigantism, * Dwarfism, * Acromegaly. * Therapeutic diets for   various orthopedic disorders | | Enumerate the Nutritional/Metabolic and Endocrine Disorders and its management | | To teach and discussabout Nutritional/M etabolic and Endocrine Disorders and its management | | Group discussion on Nutritional/ Metabolic and Endocrine Disorders and its manageme nt | | 5 hrs | |

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| **10** | **Neuro-Muscular Disorders:**  Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, medical surgical and nursing management  of:   * Poliomyelitis, CerebralPalsy * Myastheniagravis * Spinabifida. * Peripheral nervelesion, * Paraplegia,Hemiplegia, Quadriplegia. * Musculardystrophy | Explain the Neuro- Muscular Disorders. | To teach and discussabout Neuro- Muscular Disorders. | Interactive session on Neuro- Muscular Disorders  . | 8hrs |
| **11** | **Chronic/Degenerative Diseases of Joints and**  **Autoimmune** | Enumerate the  Chronic/Degenerati veDiseasesofJoints | To teach and discussabout  Chronic/Deg | Group discussion on | 8hrs |
|  | **Disorders:**  Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis – medical surgical and nursing management  of:   * OsteoArthritis * RheumatoidArthritis * Ankylosingspondylitis. * Spinaldisorders. * Systemic Lupus Erythematosus | and Autoimmune Disorders. | enerative Diseases of Joints and Autoimmune Disorders. | Chronic/D egenerativ e Diseases of Joints and Autoimmu ne Disorders. |  |

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| **12** | Orthopedic Disorders in Children:   * General and special consideration on pediatric orthopedics * Geneticdisorders * Congenitalanomalies * Growthdisorders * Geneticcounseling * Nurses role in genetic counseling | Enumerate the Orthopedic Disorders in Children and its management | To teach and discussabout Orthopedic Disorders in Children and its management | Seminar on Orthopedic Disorders in Children and its manageme nt | 5 hrs |

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| **13** | 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, followup   care and rehabilitation | Describe the Geriatric Problems, types of disabilities ‰and its management | To teach and discussabout Geriatric Problems, types of disabilities  ‰and its management | Simulated learning based on Geriatric Problems, types of disabilities  ‰and its manageme nt | 5 hrs |
| **14** | Pharmacokinetics   * Principles of drug administration * Analgesics and anti inflammatoryagents * Antibiotics,Antiseptics, * Drugs used in orthopedics and neuromuscular disorders * Blood andblood components * Care of drugs andnurses role | Explain the drugs used in orthopedics and neuromuscular disorders | To teach and discuss about drugs used in orthopedics and neuromuscula r disorders | Seminar on drugs used in orthopedics and neuromusc ular disorders | 6 hrs |
| **15** | Nurses Role in Orthopedic Conditions   * Gaitanalysis * Urodynamicstudies * Prevention ofphysical deformities * Alteration of body temperature regulatory system andimmune | Elaborate the Nurses Role in Orthopedic Conditions ‰ | To teach and discuss about Nurses Role in Orthopedic Conditions ‰ | Panel discussion on Nurses Role in Orthopedic Conditions  ‰ | 30 hrs |

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|  | systems   * Immobilization – cast, splints, braces and tractions * Prevention and careof problems related to immobility * Altered sleeppatterns * Impairedcommunication * Self care and activitiesof dailyliving * Bladder andbowel rehabilitation * Sensoryfunction rehabilitation * Psychological reaction related to disabilitiesand disorders. * Coping of individualand family with disabilities anddisorders * Maintainingsexuality * Spirituality – A rehabilitativeprospective * Orthopedic ReconstructiveSurgeries * Replacement surgeries– Hip, Knee,Shoulder * Spinesurgeries * Grafts and flaps surgery * Deformitycorrection. * Physiotherapy * Concepts, Principles, purpose, • Mobilization – Exercises: types, re- education in walking: Crutch walking, wheel chair, Transfertechniques,   + Types of gaits: Non- weight bearing, partial weight bearing, fourpoint crutch, tripoid, walking with sticks, calipers • Forms of therapies: Hydrotherapy, electrotherapy, wax bath, heat therapy, ice, helio therapy, radiant heat, • Chestphysiotherapy |  |  |  |  |

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| **16** | Rehabilitation | Review the | To teach and | Focused | 8 hrs |
|  | * Principles of rehabilitation, definition, philosophy,process, * Various types oftherapies * Special therapiesand alternativetherapies * Rehabilitationcounseling * Preventive andrestorative measures. * Community based rehabilitation(CBR) * Challenges in rehabilitation. Role of the nurse inrehabilitation, * Legal and ethical issuesin rehabilitationnursing * Occupationaltherapy | principles, legal and ethical issues in rehabilitation | discussabout principles, legal and ethical issues in rehabilitation | group discussion on principles, legal and ethical issues in rehabilitati on |  |
| **17** | National Policies and Programmes   * National programmesfor rehabilitation of persons with disability - National Institutes, artificial limbs manufacturing Corporation, District Rehabilitation Centers and theirschemes * Regionalrehabilitation centersetc. * Public policy in rehabilitationnursing * The persons with disabilities act1995, * Mental rehabilitationand Multiple disabilities act 1992, * The National TrustRules 1999 and2000 * Rehabilitation Council of India * Legal and ethicalaspects in orthopedicnursing * Rehabilitation healthteam   and different categories of team members. | Enumerate the National Policies and Programmes ‰ | To teach and discuss about National Policies and Programmes  ‰ | Students interactive session on National Policies and Programme s‰ | 5 hrs |
| **18** | Quality assurance   * Standards,Protocols, Policies,Procedures * Nursingaudit * Staffing | Explain the Quality assurance, Design of orthopedic, physiotherapy and rehabilitation unit | To teach and discussabout Design of orthopedic, physiotherapy | Seminar on Design of orthopedic, physiothera py and | 4 hrs |

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|  | * Design oforthopedic, physiotherapy and rehabilitationunit |  | and rehabilitation unit | rehabilitati on unit |  |

**REFERENCES:**

*1.* Black M.J., Hawks H.J, *Medical Surgical Nursing, Clinical Management for Positive*

*Outcome*, 7th edition, Sauders, Elsevier.

2. Urban, A.N., Greenlac K.K,“*Guidelines for Critical Care Nursing,* Mosby.

3. Wood L.S., Freelicher S.E, *Fetal Cardiac Nursing*, Lippincott Williams & Wilkings.

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*5.* Lewis, Collier & Heitkemper, *Medical Surgical Nursing Assessment and Management of*

*Clinical Problems.*

6. Baughman Diane C, *Hand Book for Surgical Nursing,* 2nd edition, published by Lipincott,

NewYork.

7. Philip &Wilma J, *Medical- Surgical Nursing,* 3rd edition, published by B.T Pubn Bangalore.

8. Richardved Lee, *Medical Case of the Pregnant Patient,* 2nd edition, American College,

Philadelphia.

**CLINICAL SPECIALITY – II**

**GASTRO ENTEROLOGY NURSING**

**M.Sc. Nursing 2nd Year Theory - 150 hours**

**Practical - 950 hours**

**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 advancedskills 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 used for patients with

gastrointestinal conditions

9. Appreciate team work & coordinate activities related to patient care.

10. Practice infection control measures.

11. Identify emergencies and complications & take appropriate measures

12. Assist patients and their family to cope with emotional distress, grief, anxiety and spiritual needs

13. Discuss the legal and ethical issues in GE Nursing

14. Identify the sources of stress and manage burnout syndrome among health care providers

15. Appreciate the role of alternative system of medicine in care of patient

16. Incorporate evidence based Nursing practice and identify the areas of research in the field of gastrointestinal Nursing

17. Teach and supervise Nurses and allied health workers.

18. Design a layout of Gastro entrology intensive care unit (GEICU), liver Care / transplant unit

**Course Content**

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| **S.**  **No** | **Content Of Topics** | **Learning Objectives**  **(At The End Of The Session The StudentShould**  **Be Able To)** | **Teaching Objectives** | **Methodology** | **Tim e** |
| **1** | Introduction   * Historical development: trends and issues inthe field of gastro enterology. * Gastro enterological problems * Concepts, principles and nursingperspectives * Ethical and legalissues * Evidence based nursing and its application in gastrointestinal nursing(to be   incorporated in all the units) | Describe the Historical development: trends and issues in the field of gastro enterology | To teach and discuss about Historical development: trends and issues in the field of gastro enterology | Students seminar on Historical development: trends and issues in the field of gastro enterology | 5 hrs |
| **2** | Epidemiology   * Risk factors associated with GE conditions- Hereditary, Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnicconsiderations * Health promotion, disease prevention, life style modification and its implications tonursing * National health programmes related to gastroenterology * Alternate system of medicine/complementary therapies | Review the  epidemiology of gastro enterology nursing | To teach and discuss about epidemiology of gastro enterology nursing | Group discussion on epidemiology of gastro enterology nursing | 5 hrs |
| **3** | Review of anatomy and physiologyof   * gastrointestinal system Gastrointestinalsystem * Liver, biliary and pancreas | Review of anatomy and physiology of gastrointestinal system | To teach and discuss about anatomy and physiology of gastrointestin alsystem | Student interactive session on anatomy and physiology of gastrointestin | 5 hrs |

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|  | * Gerontologic considerations * Embryology of GI system * Immunology specific to GIsystem |  |  | al system |  |
| **4** | Assessment and diagnostic measures   * Historytaking * Physical assessment, psychosocialassessment * Diagnostictests * Radiological studies:Upper GIT- barium swallow, lower GITBarriumenema, * Ultrasound: * Computedtomography * MRI * Cholangiography: Percutaneous transheptatic Cholangiogram(PTC) * Magnetic Resonance Cholangio pancreotography (MRCP) * Nuclear imaging scans(scintigraphy) * Endoscopy * Colonoscopy * Proctosigmoidoscopy * Endoscopic Retrogrde Cholongio pancreotography(ERCP) * Endoscopicultrasound * Peritonoscopy(Laprosco py) * Gastric emptyingstudies * Blood chemistries: Serum amylase, serum lipase * Liver biopsy * Miscellaneous tests:Gastric analysis, fecalanalysis * Liver function tests: Bile formation andexcretion,   dye excretion test, Protein metabolism, | Explain the  Assessment and diagnostic measures used in GIsystem | To teach and discuss about Assessment and diagnostic measures used in GI system | Focused group discussion on Assessment and diagnostic measures used in GIsystem | 15  hrs |

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|  | haemostatic functions- prothrombin vitamin K production, serum enzyme tests,Lipid metabolismserum cholesterol   * Interpretation of diagnosticmeasures * Nurse’s role in diagnostictests | |  | |  | |  | |  | |
| **5** | | Gastro intestinal disorders and nursing management   * Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical , surgicaland nursing managementof * 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) | | Elaborate the Gastro intestinal disorders  and nursing  management | | To teach and discuss about Gastro intestinal disorders and nursing management | | Case studies on the Gastro intestinal disorders and nursing management | | 25  hrs | |

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|  | abdominal pain   * Disorders of the small intestine −   Malabsorptionsyndrome   * + tropical sprue −Gluten   + sensitive enteropathy (Coeliac disease) − Inflammatory diseases of intestines and abdomen,: appendicitis, Peritonities, Intestinal obstruction, Abdominal TB, Gastrointestinal polyposis syndrome − Chronic inflammatory bowel disease, Ulcerative colites, crohn’s disease − Infestations and infections – Worm infestations, Typhoid, Leptospirosis − Solitary rectal ulcer syndrome − Alteration in bowel elimination (diarrhoea, constipation, fecal   impaction, fecal incontinence, Irritable bowel syndrome,  Chronic idiopathic constipation, Functional diarrhoea   * Anorectal Conditions: Hemorrhoide, Anal fissure, Anal fistula, Abscess, Strictures, Rectal prolapse,Pruritis   ani, Pelonidal disease, Anal condylomas,Warts |  |  |  |  |
| **6** | Disorder of liver, pancreas gall bladder and nursing management   * Disorders of liver biliary tract: * Viral Hepatitis – A, B, C, D &E * Toxichepatitis * Cirrhosis of liver, liver failure, Liver   transplantation   * Non cirrhotic portal fibrosis | Summarize the Disorder of liver, pancreas gall bladder and nursing  management | To teach and discuss about Disorder of liver, pancreas gall bladder and nursing management | Focused group discussion on Disorder of liver, pancreas gall bladder and nursing management | 15  hrs |

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|  | * Liverabscess,; * Parasitic and other cysts of theliver * Disorders of the Gall Bladder and BileDuct: * Cholecystitis * Cholelitheasis * Choledocholilethiasis * Disorders of the pancreas:Pancreatitis, * Benign tumors of islet cells * Disorders of the Peritoneum * Infections of the peritoneum * Surgicalperitonitis * Spontaneous bacterial peritonitis * Tuberculosis peritonitis Disorders of the Diaphragm * Diaphragmatichernia * Congenitalhernias * Paralysis ofdiaphragm * Tumors of thediaphragm * Hiccups |  |  |  |  |

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| **7** | Gastro intestinal emergencies and nursinginterventions   * Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical , surgicaland nursing managementof: * Esophagealvarices, * Ulcerperforation, * Acutecholecystitis * Diverticulitis * Fulminant hepaticfailure * Biliaryobstruction * Bowelobstruction * Gastroenteritis * Intussusception * Acute intestinal obstruction,perforation * Acutepancreatitis * Cirrhosis of liver complications * Liver , spleen, stomach pancreatic, mesenteric, bowel and greater vessel injuries * Acute appendicitis   /peritonitis   * Acuteabdomen * Foodpoisoning | Elaborate the Gastro intestinal emergencies and nursing  interventions | To teach and discuss about Gastro intestinal emergencies and nursing interventions | Focused group discussion on Gastro intestinal emergencies and nursing interventions | 15  hrs |

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| **8.** | **Administration and management of GE unit**  Design & layout  Staffing,  Equipment, supplies,  Infection control; Standard safety measures  Quality Assurance:-Nursing audit –records /reports, Norms,  policiesandprotocols  Practicestandards | Explain the Administration and management of GE unit. | To teach and discuss about Administrati on and management of GE unit. | Focused group discussion on Administrati on and management of GE unit | 5 hrs |

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| **8** | Congenital Anomalies of Esophagus   * Esophagealatresia * Tracheo esophageal fistula * Esophagealstenosis | Enumerate the Congenital Anomalies ofEsophagus  and its management | To teach and discussabout Congenital Anomalies of Esophagus and its | Presentation cum panel discussion (by students) on Congenital Anomaliesof | 15 hrs |
|  | * Esophagealduplications * Dysphagia – Lusoria – aberrent right subclavian artery compressing esophagus * Esophageal rings – schalzkiring * Esophageal webs Congenital Anomalies of Stomach * Gastricatresia * Microgastria * Gastricdiverticulum * Gastricduplication * Gastricteratoma * Gastricvolvulus * Infantile hypertrophic pyloricstenosis * Adult hypertrophic   pyloric stenosis Congenital Anomalies of Duodenal   * Duodenal Atresia or stenosis * Annularpancreas * Duodenal duplication cysts * Malrotation and mid gut volvolus Developmental anomalies of the intestine: * Abdominal wall defects (omphalocele and Gastroschisis) * Meckel’sdiverticulum * Intestinalatresia * Hirschsprung’sdisease |  | management | Esophagus and its  management |  |

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| **9** | Pharmo Kinetics   * Drugs used inGIT * Principles of administration * Roles responsibilities of nurses * Drugs in Peptic ulcer disease * Proton Pumpinhibitors * H2 ReceptorAntagonists * CytoprotectiveAgents: * Drugs used inDiarrhea * Drugs used in | Enumerate the drugs used in GI system | To teach and discussabout drugs used in GI system | Group discussion on drugs used in GI system | 15 hrs |
|  | constipation   * Drugs used in Inflammatory Bowel Disease * Aminosalicylates * Corticosteroids * Immunomodulators * chemotherapy * Antibiotics * Antiemetics * Anticholinergics * Antihistaminics * Antihelminthics * Vitamin Supplements |  |  |  |  |

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| **10** | Nutrition and nutritional problems related to GIsystem   * Nutritional assessment and nursinginterventions * Therapeuticdiets * Adverse reactions between drugs and variousfoods * Malnutrition- etiology , clinical manifestations andmanagement * Tube feeding, parenteral nutrition, total parenteral nutrition * Obesity- etiology, clinical manifestations andmanagement * Eating disorders-   anorexia nervosa, bulimianervosa   * Recent advances in nutrition | Review the Nutrition and nutritional problems related to GI system | To teach and discuss about Nutritionand nutritional problems related to GI system | Problem based learning Nutritionand nutritional problems related to GI system | 10 hrs |
| **11** | Malignant disorders of gastro intestinal system   * Etiology, clinical manifestations, diagnosis, prognosis, relatedpathophysiology,   medical , surgical, other modalities and nursing management of:   * Malignancy of oral cavity   ,Lip,Tongue,buccal mucosa, oropharynx, | Elaborate the Malignant disorders of gastro intestinal system | To teach and discussabout Malignant disorders of gastro intestinal system | Panel discussion on Malignant disorders of gastro intestinal system | 15 hrs |
|  | Salivary gland   * Esophageal , Gastric , Carcinoma of bowel - Small bowel, Colorectal and Analcarcinoma, * Liver, biliary tract and Pancreatic carcinoma |  |  |  |  |
| **12** | Education and training in GE care   * Staff orientation, training anddevelopment, * In-service education program, * Clinical teaching programs | Describe the Education and training in GEcare | To teach and discussabout Education and training in GE care | Student seminar on Education and training in GE care | 5 hrs |

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*1.* Black M.J., Hawks H.J, *Medical Surgical Nursing, Clinical Management for Positive*

*Outcome*, 7th edition, Sauders, Elsevier.

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4. Gulanic, Klopp, Galnes, *Fetal Nursing Care Plans Nursing Diagnosis and intervention*.

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*Clinical Problems.*

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NewYork.

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**CLINICAL SPECIALITY – II**

**OBSTETRIC AND GYNECOLOGICAL NURSING II**

**M.Sc. Nursing 2nd Year Theory - 150 hours**

**Practical - 950 hours**

**Course Description:**

This course is designed to assist the student in developing expertise and in

depth understanding in the field of Obstetric and gynecological Nursing .It will help the student to develop advanced Nursing skills for nursing interventions in various obstetrical and gynecological conditions. It will further enable the students to function as midwifery Nurse practitioner/ specialist, educator, manager and researcher in the field of obstetric and gynecological Nursing

**Objectives:**

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

1. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of women with obstetric and gynaecological conditions

2. Perform physical, psychosocial, cultural & spiritual assessment

3. Demonstrate competence in caring for women with obstetrical and gynaecological conditions

4. Demonstrate competence in caring for high risk newborn.

5. Identify and Manage obstetrical and neonatal emergencies as per protocol.

6. Practice infection control measures

7. Utilize recent technology and various diagnostic, therapeutic modalities in the management of obstetrical, gynecological and neonatal care.

8. Demonstrate skill in handling various equipments/gadgets used for obstetrical, gynaecological and neonatal care

9. Teach and supervise Nurses and allied health workers.

10. Design a layout of speciality units of obstetrics and gynecology

11. Develop standards for obstetrical and gynaecological Nursing practice.

12. Counsel women and families

13. Incorporate evidence based Nursing practice and identify the areas of research in the field of obstetrical and gynaecological Nursing

14. Function as independent midwifery Nurse practitioner

**Contents Outline**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Sr. No. | Topic | Learning  objectives | Teaching guidelines | Methodology | Time |
| **I** | **Management of problemsof women during pregnancy** Riskapproachofobstetrical nursingcare,concept&goals.  Screening of high-risk pregnancy, newer modalities of diagnosis.  NursingManagementof Pregnanciesatrisk-dueto obstetricalcomplication   * PerniciousVomiting. * Bleedinginearlypregnancy, abortion, ectopic pregnancy, and gestational trophoblostic diseases. * Hemorrhage during late pregnancy, ante partum hemorrhage, Placenta praevia, abruptioplacenta. * Hypertensive disorders in pregnancy, pre-eclampsia, eclampsia, HeomolysisElevated liverenzymeLowPlateletcount (HELLP) * Iso–immune diseases. Rhand ABOincompatibility * Hematologicalproblemsin   pregnancy.   * Hydramnios-oligohydramnios * Prolonged pregnancy- post term, postmaturity. * Multiplepregnancies. * Intrauterineinfection&pain   during pregnancy.   * Intra Uterine Growth Retardation(IUGR), Premature Rupture of Membrane(PROM), intra uterinedeath | 1. Describe the,   Risk approach of obstetrical nursing care, concept &goals   1. Enumerate theScreening of high-risk pregnancy, newer modalities of diagnosis. 2. Explain the Screening of high-risk pregnancy, newer modalities of diagnosis. | To cover Risk approach of obstetrical nursing care, concept &goals.  Screening of high- risk pregnancy, newer modalities ofdiagnosis.  Nursing Management of Pregnancies atrisk- due to obstetrical complication   * Pernicious   Vomiting.   * Bleedinginearly pregnancy, abortion, ectopic pregnancy, and gestational trophoblostic diseases. * Hemorrhage during late pregnancy, ante partum hemorrhage, Placenta praevia, abruptioplacenta. * Hypertensive disorders in pregnancy, pre- eclampsia, eclampsia, Heomolysis Elevated liver enzyme Low Plateletcount   (HELLP) | 1. Interactive session with the students regarding Risk approach of obstetrical nursing care, concept&goals. Screening of high-risk pregnancy, newer modalities of diagnosis. 2. Essay writing on Managementof pregnancy at highrisk | 25 |

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|  |  |  | * Iso–immune diseases.Rhand ABO incompatibility * Hematological problems in pregnancy. * Hydramnios- oligohydramnios * Prolonged pregnancy- post term, post maturity. * Multiple   pregnancies.   * Intra uterine infection & pain duringpregnancy. * Intra Uterine Growth Retardation(IUGR), PrematureRupture of Membrane(PROM),   intra uterine death |  |  |
| **II** | **Pregnanciesatrisk-duetopre- existing health problems** Metabolicconditions.  Anemia andnutritional deficienciesHepatitis  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 | 1. Discuss about Pregnancies at risk-due to pre- existing health problems | To cover 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 | 1 Didactic lecture through power point projections  2.Group discussion on Pregnancies at risk-due to pre- existing health problems | 15 |

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|  |  |  | 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** | **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 Obstetricalshock,vasapraevia, inversion of uterus, amniotic fluidembolism,ruptureuterus, presentationandprolapsecord. * Augmentation oflabour.   Medical and surgical induction.   * Version * Manualremovalofplacenta. * Obstetrical operation: Forceps delivery, Ventouse, Caesarian section, Destructive operations * Genital tract injuries-Third degreeperinealtear,VVF,RVF Complicationsofthirdstageof labour: * PostpartumHemorrhage. * Retainedplacenta. | 1. Elaborate the Abnormallabou r, pre-term labour& obstetrical emergencies 2. Enumerate the list of genital injurises 3. Explain the Complications ofthirdstageof labour | To cover Etiology, pathopyhsiology and nursing management of   * Uncoordinated uterine actions, Atony of uterus, precipitate labour, prolongedlabour. * Abnormal lie, presentation, positioncompound presentation * Contracted pelvis-CPD; dystocia. * Obstetrical emergencies Obstetrical shock, vasa praevia, inversion ofuterus, amniotic fluid embolism, rupture uterus, presentation and prolapsecord. * Augmentationof labour. Medical and surgical induction. * Version * Manualremoval   ofplacenta.   * Obstetrical operation:Forceps delivery, Ventouse, Caesarian section, Destructive   operations | 1. Teachers seminar on Obstetrical emergencies 2. Students Seminar on diagnosis and screeningtest | 15 |

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|  |  |  | * Genital tract injuries-Third degree perineal tear, VVF, RVF Complications of third stage of labour: * Postpartum   Hemorrhage.   * Retained   placenta |  |  |
| **VI** | **Post partum complications**  Nursing management of   * Puerperal infections, puerperal sepsis, urinary complications,puerperalvenous thrombosis and pulmonary embolism * Subinvolutionofuterus, Breast conditions, Thrombophlebitis * Psychological complications, postpartumblues,depression, psychosis | 1. Describe the Post partum complications 2. Discuss Nursing managementof post partum complication | To cover 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 | 1. Essaywriting on post partum complications 2. Problem based learning on psychiatric complications relatedtopost partumperiod | 10 |
| **V** | **High Risk Newborn** Concept, goals, assessment, principles.  Nursing management of   * Pre-term,smallforgestational age, post-mature infant, and baby of diabetic and substance usemothers. * Respiratory conditions, Asphyxianeonatorum,neonatal apnoea meconium aspiration syndrome, pneumo thorax, pneumomediastinum * Icterusneonatorum. * Birthinjuries. * Hypoxic   ischaemicencephelopathy   * Congenitalanomalies. * Neonatalseizures. * Neonatalhypocalcaemia,   hypoglycemia, hypomagnesaemia. | 1. Explainthe High Risk Newborn Concept,goals, assessment, principles. 2. Discussthe high risk newborn complications management 3.Enlist high risknewborn complications | TocoverHighRisk NewbornConcept, goals, assessment, principles.  Nursing management of   * Pre-term, small forgestationalage, post-mature infant, and baby of diabetic and substance use mothers. * Respiratory conditions, Asphyxia neonatorum, neonatal apnoea meconium aspiration syndrome,pneumo   thorax, pneumo | 1. Group Discussionon high risk newborn 2. Simulation learning on phototherapy 3. visit toICU | 25 |

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|  | * Neonatalheartdiseases. * Neonatalhemolyticdiseases * Neonatalinfections,neonatal sepsis,opthalmianeonatorum, cogenitalsyphilis,HIV/AIDS * Advancedneonatal   procedures.   * Calculation offluid requirements. * Hematologicalconditions– erythroblastosis fetalis, hemorrhagicdisorderinthe newborn * Organizationofneonatalcare, services(Levels), transport, neonatal intensive care unit, organization and management ofnursingservicesinNICU | 4. Enlist the Advanced neonatal procedures. Calculation of fluid requirements. | mediastinum   * Icterus   neonatorum.   * Birthinjuries. * Hypoxic ischaemicencephel opathy * Congenital   anomalies.   * Neonatal   seizures.   * Neonatal hypocalcaemia, hypoglycemia, hypomagnesaemia. * Neonatalheart   diseases.   * Neonatal   hemolytic diseases   * Neonatal infections, neonatal sepsis, opthalmia neonatorum, cogenital syphilis, HIV/AIDS * Advanced neonatal procedures. * Calculationof   fluid requirements.   * Hematological conditions – erythroblastosis fetalis, hemorrhagic disorder in the newborn * Organization of neonatal care, services(Levels), transport,neonatal intensive careunit, organization and management of nursingservicesin   NICU |  |  |

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| **S.N**  **o** | **Topic** | **Learning Objectives ( At the end of the session, thestudents**  **should be able to :)** | **Teaching Guidelines** | **Methodology** | **Time** |
| **I** | **HIV/AIDS**  HIV positive mother and her baby  Epidemiology Screening Parent to child  transmission(PTCT) Prophylaxis for mother and baby  Standard safety measures | 1. Discussabout HIV/AIDS 2. Describe the Nationalpoliciesand guidelines   Issues: Legal,ethical, Psychosocial and rehabilitation  Roleofnurse | To cover  HIV positive mother and her baby Epidemiology Screening  Parent to child transmission(PTCT) Prophylaxis for mother and baby  Standard safety | 1. Didactic lecture through power point projections 2.Studentsseminar on Issues: Legal, ethical, | 15 |
|  | Counseling  Breast feeding issues  Nationalpoliciesandguidelines Issues: Legal, ethical, Psychosocialandrehabilitation Role ofnurse |  | measures Counseling Breast feeding issues  National policies and guidelines Issues: Legal, ethical, Psychosocial and rehabilitation  Role of nurse | Psychosocial and rehabilitation Role of nurse |  |
| **II** | **Gynecological problems and nursing management** Gynecological assessment Gynecological procedures Etiology, pathophysiology, diagnosis and nursing management of   * Menstrualirregularities * Diseasesofgenitaltract * Genital tractinfections * Uterinedisplacement * Genitalprolapse * Genitalinjuries * Uterinemalformation * Uterine fibroid, ovarian tumors, Breast carcinoma, Pelvic inflammatory diseases, reproductivetractmalignancies, hysterectomy – vaginal and abdominal. * Sexualabuse,rape,trauma,   assault | 1. Discussthe Gynecological assessment Gynecological procedures 2. Explain the Etiology, pathophysiology, diagnosis and nursing management of gynecological problems | To cover Gynecological assessment Gynecological procedures Etiology, pathophysiology, diagnosis and nursing management of   * Menstrual   irregularities   * Diseasesofgenital   tract   * Genitaltract   infections   * Uterine displacement * Genitalprolapse * Genitalinjuries * Uterine   malformation   * Uterine fibroid, ovarian tumors, Breast carcinoma, Pelvicinflammatory diseases, reproductive tract malignancies, hysterectomy – vaginal and abdominal. * Sexualabuse,   rape, trauma ,assault | 1. Didactic lecture through powerpoint projections 2. Teachers seminar on Gynecological assessment Gynecological procedures 3. Students seminar on gynecological disorders | 25 |
| **III** | **Administration and management of obstetrical andgynecological unit** Design &layout  Staffing,  Equipment, supplies, Infection control; Standard safety measures | 1. Explain about Administrationand management of obstetrical and gynecologicalunit 2. Discuss about Norms,policiesand | To cover Administration and management of obstetrical and gynecological unit Design & layout Staffing, Equipment, | 1.Students interactive session on Design & layout Staffing,Equip ment, supplies,  Infection | 5 |

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|  | QualityAssurance:-Obstetric auditing –records /reports, Norms,policiesandprotocols Practice standards for obstetricalandgynecological unit | protocols  Practice standards for obstetrical and gynecological unit | supplies, Infection control; Standard safety measures  Quality Assurance:-Obstetric auditing– records /reports, Norms,policiesand protocols  Practice standards for obstetricaland gynecologicalunit | control; Standard safety measures 2.Groupdiscussion on Quality Assurance:- Obstetric auditing – records  /reports, Norms, policies and protocols |  |
|  |  |  | 3.Integrated teaching on Practice standards for obstetrical and gynecological unit |
| **IV** | **Education and training in** | 1. Elaborate | To cover Education | Visit to | 5 |
|  | **obstetrical and** | Education and | and training in | obstetrics and |  |
|  | **gynaecologicalcare** | training in | obstetrical and | gynecological |  |
|  | Staff orientation, training and | obstetrical and | gynaecological | unit |  |
|  | development, | gynaecological | care |  |  |
|  | In-service education program, | care |  |  |  |
|  | Clinical teaching programs. |  |  |  |  |

**Reference Books:**

1. Buckley Kathleen and Kulb Nancy W, *High Risk Maternity Nursing Manual*, Williams &

Wilkin, 1993, Philadelphia.

2. Bennet V Ruth & Brown K Linda, *Myles Text Book for Midwives*, ELBS, Churchill

Livingstone.

3. Calander, R & Miller A, *Obstetrics Illustrated,* 4th edition, Churchill & Livingstone, 1993,

New York.

4. Dawn C.S, *Text Book of Obstetrics and Neonatology*, Dawn Books, Calcutta.

5. Dawn C.S, *Text Book of Gynecology and Contraception*, Dawn Books, Calcutta.

6. Dutta D.C, *Text Book of Obstetrics*, 4th edition, New Central Agency (p), 2001, Calcutta.

7. Dutta D.C, *Text Book of Gynaecology*, 4th edition, New Central Agency (p), 2001, Calcutta.

8. Daftary Shrish, *Holland and Brews Manual of Obstetrics*,16th edition, B Churchill Livingstone

(P) Ltd, New Delhi.

9. Dickason Elizabeth jean et al, *Maternal Infant Nursing Care*, 2nd edition, Mosby, 1998, St.

Louis.

10. GoodnerBrenda, *Concepts of Obsterics Nursing,* 1st edition, Skidmore, Roth Publishing, INC,

1994, Texas.

11. Gorie Trula Myers et al, *Foundations of Maternal Newborn Nursing*, 2nd edition, WB Saunders

Co., 1998, Philadelphia.

12. Ladewing Patricia Wieland et al, *Essentials of Maternal Newborn Nursing*, 2nd edition,

Addisol Wesley Nursing, 1990, New York.

13. Rashmi Patil, *Instruments, Operatuions, Drugs in Obstetrics and Gynaecology*, Vors Medical

Publications, Mumbai.

14. Philips Celeste R, *Family Centered Maternity Newborn Care*, 3rd edition, Mosby New year

Book, 1996, St Louis.

**LIST OF JOURNALS RECOMMENNDED**

1. American Journal of Nursing

2. Health and population

3. Indian Journal of Nursing and Midwifery

4. Journal of Obstetrics and Gynaecology

5. Journal of Pardiatrics

6. Journal of Family Welfare

7. Nursing Journal of India

8. Nursing Times

9. Paediatrics today

10. Paediatric clinics of India

11. Obstetric and Gynecology Today.

**CLINICAL SPECIALITY – II**

**PAEDIATRIC NURSING II**

**M.Sc. Nursing 2nd Year Theory - 150 hours**

**Practical - 950 hours**

**Course Description:**

This course is designed to assist students in developing expertise and in

depth understanding in the field of Paediatric Nursing. It will help students to develop advanced skills for nursing intervention in various Paediatric medical and surgical conditions. It will enable the student to function as Paediatric Nurse Practitioner/ specialist. It will further enable the student to function as educator, manager, and researcher in the field of Paediatric Nursing

**Objectives:**

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

1. Apply the Nursing process in the care of ill infants to pre adolescents in hospital and

community

2. Demonstrate advanced skills/competence in nursing management of children with medical and surgical problems

3. Recognize and manage emergencies in children

4. Provide Nursing care to critically ill children

5. Utilize the recent technology and various treatment modalities in the management of high risk children

6. Prepare a design for layout and describe standards for management of Paediatric units /

hospitals

7. Identify areas of research in the field of Paediatric Nursing

**Course Content**

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| **S.No** | **Topic** | **Learning objective** | **Teaching Guidelines** | **Methodology** | **Time** |
| I | Explain the modem concept of child care and principles ofchild healthnursing.  List major causes of death during infancy, early and late childhood Describe the major functions and role of the paediatric nurse in caring fora hospitalizedchild.  . | **Introduction**  Current principles, practices and trends in Pediatric Nursing  Role of pediatric nurse in various settings -Expanded and extended | To cover Current principles, practices and trends in Pediatric Nursing, Role of pediatric nurse in various settings - Expanded and extended | Teaching seminar Students seminar Project on collection of vital statistics related to child health.  Teaching seminar Interactive seminar | **5** |
| II | Provide nursing care in common childhood diseases-Identify measures to prevent common childhood diseasesincluding immunization. | Pathophysiology, assessment(including interpretation of  variousinvasiveandnon- invasive diagnostic procedures),  treatment modalities and nursing intervention in selected  pediatric medical disorders   * Childwithrespiratory disorders: * Upper respiratorytract:   choanal atresia, tonsillitis, epistaxis, aspiration.   * Lowerrespiratorytract: Broncheolitis, Bronchopneumonia, Asthma, cysticfibrosis * Childwithgastro- intestinaldisorders: * Diarrhealdiseases,gastro-   esophageal reflux.   * Hepatic disorders: Hepatitis, Indianchildhood cirrhosis,liver   transplantation. | To cover Pathophysiolo gy, assessment(inc luding interpretation of  various invasive and non-invasive diagnostic procedures | Teaching seminar Interactive seminar  Conventional method Demonstration | 35 |

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|  |  | -Malabsorption syndrome, Malnutrition   * 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,   * Congenital: Cynotic and acynotic * Child with endocrine/metabolic disorders: Diabetes insipidus, DiabetesMellitus   –IDDM,NIDDM,hyperand hypo thyroidism, phenylketonuria, galactosemia   * Child with Neurological disorders: Convulsions, Meningitis, encephalitis, guillian-Barresyndrome * 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 |  |  |  |

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|  |  | * Child with skindisorders * Common Eye andENT disorders * CommonCommunicable   diseases |  |  |  |
| II I. | Provide nursing care in selected pediatric surgical problems/ Disorders | Assessment(including interpretation of various invasive and  non-invasive diagnostic procedures),treatment modalities  including cosmetic surgery  and nursing interventions in | To cover Assessment(in cluding interpretation of various invasive and non-invasive  diagnostic | Conventional method  Teaching seminar  Problem based learning | **35** |
|  |  | selected pediatric surgical | procedures), |  |  |
|  |  | problems/ Disorders | treatment |  |  |
|  |  | * Gastrointestinalsystem: | modalities |  |  |
|  |  | Cleft lip, cleft palate and | including |  |  |
|  |  | conditions requiring plastic | cosmetic |  |  |
|  |  | surgery, Tracheo | surgery and |  |  |
|  |  | esophageal | nursing |  |  |
|  |  | fistula/atresia, | interventions |  |  |
|  |  | Hirschsprungs’ | in |  |  |
|  |  | disease/megacolon, | selected |  |  |
|  |  | malrotation, intestinal | pediatric |  |  |
|  |  | obstruction, duodenal | surgical |  |  |
|  |  | atresia, | problems/ |  |  |
|  |  | 127 | Disorders |  |  |
|  |  | gastrochisis, exomphalus, |  |  |  |
|  |  | anorectal malformation, |  |  |  |
|  |  | omphalocele, diaphragmatic |  |  |  |
|  |  | hernia |  |  |  |
|  |  | * Anomaliesofthenervous |  |  |  |
|  |  | system: Spina bifida, |  |  |  |
|  |  | Meningocele, |  |  |  |
|  |  | Myelomeningocele, |  |  |  |
|  |  | hydrocephalus |  |  |  |
|  |  | * Anomaliesofthegenito- |  |  |  |
|  |  | urinary system: |  |  |  |
|  |  | Hypospadias, |  |  |  |
|  |  | Epispadias, Undescended |  |  |  |
|  |  | testes, Exstrophy bladder |  |  |  |
|  |  | * Anomalies of theskeletal |  |  |  |
|  |  | system |  |  |  |

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|  |  | * Eye and ENTdisorders * 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, Hepatoblastoma, Rhabdomyosarcoma * Management of stomas, catheters andtubes * Management ofwounds   and drainages |  |  |  |
| IV. | Manage the child | **Intensive care for** | To cover | Unconventional method  Horizontal teaching  Teaching seminar | **10** |
|  | in intensive care  for pediatric clients. | **pediatric clients**  Resuscitation, stabilization & monitoring | Resuscitation,  stabilization &monitoringof |  |
|  |  | of pediatric | pediatric |  |
|  |  | patients | Patients, |  |
|  |  | Anatomical & | Anatomical & |  |
|  |  | physiological basis of | physiological |  |
|  |  | critical illness in infancy | basis of critical |  |
|  |  | and childhood | illness in |  |
|  |  | Care of child requiring | infancy |  |
|  |  | long-term ventilation | and childhood, |  |
|  |  | Nutritional needs of | Care of child |  |
|  |  | critically ill child | requiring long- |  |
|  |  | Legal and ethical issues | term |  |
|  |  | in pediatric intensive care | ventilation, |  |
|  |  | Intensive care | Nutritional |  |
|  |  | procedures, equipment and | needs of |  |
|  |  | techniques | critically ill |  |
|  |  | Documentation | child, Legal |  |
|  |  |  | and ethical |  |

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|  |  |  | issues in pediatric intensive care, Intensive care procedures, equipment and techniques, Documentation |  |  |  |
|  | Manage the child | **Crisis and nursing** |  | Conventional method  Student seminar  Teaching  seminar | **5** | |
| in crisis | **intervention** |  | |
|  | The hospitalized child, |  | |
|  | Terminal illness & death |  | |
|  | during childhood |  | |
|  | Nursing intervention- |  | |
|  | counseling |  | |
| V | Provide care to normal | **High Risk Newborn**  Concept, goals, assessment, principles. | To cover High  Risk Newborn Concept, goals, | Role play  Videos Plotting of growth chart | **20** | | |

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|  | &high risk neonates   * Perform neonatal resuscitati on. * Recogni ze and manage Common neonatal problems | 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   * Icterusneonatorum. * Birthinjuries. * Hypoxic ischaemic encephelopathy * Congenitalanomalies. * Neonatalseizures. * Neonatal hypocalcaemia, hypoglycemia, hypomagnesaemia. * Neonatal heartdiseases. * Neonatal hemolytic diseases * Neonatalinfections,   neonatal sepsis, opthalmia neonatorum, cogenital syphilis, HIV/AIDS   * Advanced neonatal procedures. * Calculation offluid   requirements. Hematological conditions – erythroblastosis fetalis, hemorrhagicdisorderinthe newborn   * Organization of neonatal care, services(Levels), transport,   neonatalintensivecareunit, organization and management ofnursing  services in NICU | 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 encephalopath y, Congenital anomalies, Neonatal seizures., Neonatal hypocalcaemia, hypoglycemia, hypomagnesae mia., Neonatal heart diseases. | Conventional method  Teaching seminar Demonstration |  |

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| VI | * Manage the child with behavioral and social problems. * Identify the social and welfare services for challenged children. | **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 | To cover Adjustment reaction to school,Learning disabilities Habit disorders, speech disorders,  Conduct disorders, Early infantile autism, Attention deficit hyperactive  disorders (ADHD),  depression and childhood  schizophrenia | Studentseminar Teaching seminar  Interactive seminar Unconventional method | **10** |
| V II | Discuss implication for nursing of challenged child | **Challenged child and implications for nursing**  Physically challenged, causes, features, early detection & management  Cerebral palsied child,  Mentally challenged child.  Training & rehabilitation of challenged children | To cover Physically challenged, causes, features, early detection &management Cerebral palsied child, Mentally challenged child.  Training &rehabilitation of challenged children | Demonstration Simulation.  Visit to anganwadi schools, remand homes & adoption centers  Teaching seminar  Student seminar | **10** |

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| IX. | Discuss the drugs used in paediatrics | **Drugs used in Pediatrics**  Criteria for dose calculation  Administration of drugs, oxygen and blood  Drug interactions  Adverse effects and their management |  | Student seminar Interactive seminar | **5** |
| X | * Describe the administrat ion and manageme nt of pediatric careunit. * Discussthe standards for pediatric careunit | **Administration and management of pediatric care unit**  Design & layout  Staffing,  Equipment, supplies,  Norms, policies and protocols  Practice standards for pediatric careunit  Documentation |  | Demonstration Conventional method  Student seminar  Teaching  seminar | **10** |
| X I | Provide education and training in pediatric care | **Education and training in Pediatric care**  Staff orientation, training and development,  In-service education program,  Clinical teaching  programs |  | Student seminar | **5** |

**Reference Books:**

1. Anchor T. Vishwanth, *Text Book of Paediatric in Developing Tropical Contries*, 5th edition,

Orient Longman, 1985, India.

2. Gupta Suraj, *The Short Text Book of Paediatrics*, 8th edition, Jaypee Brothers, 1998, New

Delhi.

3. Ghai. O.P., *The Short Text Book of Paediatrics*, Interprint, 1995, New Delhi.

4. Marlow & Redding BA, *The Short Text Book of Paediatrics*, 6th edition, W.B. Sounders &

Co., 1998, Philadelphia.

5. Singh Maharban, *Paediatric Clinical Method,* 1st edition, Sagar Publication, 1992, New

Delhi.

6. Wholey F.L & Wong L. D., *Essentials of Paediatric Nursing*, 5th edition, C.V. Mosby & Co.,

1985, St. Louis.

**CLINICAL SPECIALITY – II**

**PSYCHIATRIC NURSING II**

**M.Sc. Nursing 2nd Year Theory - 150 hours**

**Practical - 950 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 develop advanced skills for nursing intervention in various Psychiatric conditions. It will enable the student to function as Psychiatric Nurse practitioner/specialist. It will further enable the student to function as educator, manager, and researcher in the field of Psychiatric Nursing

**Objectives:**

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

1. Apply the Nursing process in the care of patients with mental disorders in hospital and

community

2. Demonstrate advanced skills/competence in nursing management of patients with mental disorders

3. Identify and care for special groups like children, adolescents, women, elderly, abused and neglected, people living with HIV/AIDS.

4. Identify and manage Psychiatric emergencies.

5. Provide Nursing care to critically ill patients with mental disorders

6. Utilize the recent technology and various treatment modalities in the management of patients with mental disorders

7. Demonstrate skills in carrying out crisis intervention.

8. Appreciate the legal and ethical issues pertaining to Psychiatric Nursing.

9. Identify areas of research in the field of Psychiatric Nursing.

10. Prepare a design for layout and describe standards for management of Psychiatric

units/emergency units/hospitals

11. Teach Psychiatric nursing to undergraduate students & in-service Nurses.

**Course Content**

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| S.No | Topic | Learning objective | Teaching Guidelines | Methodology | Time |
| 1. | Review of Principles and practice of Psychiatric Nursing | Apply theNursing process in the care of patients with mental disorders in hospital and community | To cover the concept of Principles and practice of Psychiatric Nursing | Teacher seminar on concept of Principles and practice of PsychiatricNursing  . | 2HRS |
| 2. | Crisis, Definition   * Phases in the Development of aCrisis | To identify and manage psychiatric emergencies. | To cover the Concepts of  Crisis, Definition   * Phases in the DevelopmentofaCrisis * Types ofCrisis; | * Teacher seminar on Crisis, Definition,Pha   ses in the | 10  HRS |

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|  | * Typesof |  | Dispositional, Anticipated Life Transitions Traumatic Stress,   * Maturational / Development , Reflecting * Psychopathology * Psychiatric Emergenciesandtheir management * Griefandgrief reaction * Crisis Intervention; Phases * Posttraumaticstress disorder(PTSD) * RoleoftheNurse | Development of a Crisis,Types of Crisis; Dispositional, Anticipated Life Transitions Traumatic Stress,Maturat ional / Development , ReflectingPsyc hopathology   * Student seminar on Psychiatric Emergencies and their management * student interactive session on Griefandgrief reaction * Teacher seminar on Crisis Intervention; Phases * Student seminar on Post traumatic stress disorder (PTSD),Roleof theNurse |  |
| Crisis; |
| Dispositional, |
| Anticipated Life |
| Transitions |
| Traumatic |
| Stress, |
| * Maturational/ |
| Development , |
| Reflecting |
| • |
| Psychopatholog |
| y |
| * Psychiatric |
| Emergencies |
| and their |
| management |
| * Grief andgrief |
| reaction |
| * Crisis |
| Intervention; |
| Phases |
| * Posttraumatic |
| stress disorder |
| (PTSD) |
| * Role ofthe |
| Nurse |
| 3 | **Anger /**  **Aggression Management** | Describe the Anger  /Aggression Management | **Tocovertheconceptof** Anger and Aggression, Types, PredisposingFactors   * Management * Role of theNurse | Student interactive session on Anger and Aggression, Teacher seminar on Types, Predisposing Factors, Management   * Role of theNurse | 4  HRS |
|  | * Angerand |  |  |
|  | Aggression, |  |  |
|  | Types, |  |  |
|  | Predisposing |  |  |
|  | Factors |  |  |
|  | * Management |  |  |
|  | * Role ofthe |  |  |

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|  | Nurse |  |  |  |  |
| 4. | **The Suicidal** | Describe the epidemiological, risk factors, and  techniques of  managing suicidal techniques. | **To cover the** Concept of **The Suicidal Client ,its**Epidemiological Factors**,** Risk Factors**, Predisposing Factors**  ,Theories of Suicide Psychological, Sociological, Biological and Nursing Management | Teacher seminar on ConceptofTheSuicidal Client ,its Epidemiological Factors,RiskFactors, PredisposingFactors  ,Theories of Suicide Psychological, Sociological, Biological and Nursing Management | 5  HRS |
|  | **Client** |  |
|  | * Epidemiological |  |
|  | Factors |  |
|  | * RiskFactors |  |
|  | **Predisposing** |  |
|  | **Factors** |  |
|  | * Theoriesof |  |
|  | Suicide- |  |
|  | Psychological, |  |
|  | Sociological, |  |
|  | Biological |  |
|  | * Nursing |  |
|  | Management |  |
| 5. | **Disorders of Infancy, Childhood, and**  **Adolescence** | Describe the various Disorders of Infancy, Childhood,  and Adolescence | **Tocovertheconceptof DisordersofInfancy, Childhood, and Adolescence**   * Mentally Challenged, Autistic Disorders, Attention- Deficit/Hyperactivity Disorder, Conduct Disorders behaviouraldisorders,Oppositional Defiant Disorder,Tourette’s Disorders,Separation Anxiety Disorder,Psychopharm acological Intervention and Nursing Management | Teacher seminar on concept of Disorders of Infancy, Childhood, and Adolescence.  Student interactive session on Mentally Challenged,AutisticDisorders,Attention- Deficit/Hyperactivity Disorder  Student seminar on Conduct Disorders, behavioural disorders Teacher seminar on Oppositional Defiant Disorder, Tourette’s Disorders, Separation Anxiety Disorder  • Psychopharmacologic al Intervention and Nursing Management | 5 hrs |
|  | * Mentally |  |  |
|  | Challenged |  |  |
|  | * Autistic |  |  |
|  | Disorders |  |  |
|  | * Attention- |  |  |
|  | Deficit/Hyperacti |  |  |
|  | vity Disorder |  |  |
|  | * Conduct |  |  |
|  | Disorders, |  |  |
|  | behavioural |  |  |
|  | disorders |  |  |
|  | * Oppositional |  |  |
|  | Defiant Disorder |  |  |
|  | * Tourette’s |  |  |
|  | Disorders |  |  |
|  | * Separation |  |  |
|  | Anxiety Disorder |  |  |
|  | • |  |  |
|  | Psychopharmaco |  |  |
|  | logical |  |  |
|  | Intervention and |  |  |
|  | Nursing |  |  |
|  | Management |  |  |

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| 6. | **Delirium, Dementia, and Amnestic Disorders**   * Delirium * Dementia * Amnesia   • Psychopharmac ological Intervention and Nursing Management | Explaintheconceptof Delirium, Dementia, and Amnestic Disorders. | To cover the concept of Delirium, Dementia, and Amnestic Disorders and its Psychopharmacological Intervention and Nursing Management | Teacher seminar on Delirium, Dementia, and Amnestic Disorders. | 5 hrs |
| 7. | **Substance- Related Disorders**   * Substance-Use Disorders * Substance- Induced Disorders * Classes OfPsychoactive Substances * Predisposing Factors * The Dynamics of Substance- Related Disorders * The Impaired Nurse * Codependency * Treatment Modalities ForSubstance- Related Disordersand Nursing Management | Describe the  substance related disorders | **Tocovertheconceptof substance related disorders. i.e** Substance-Use Disorders, Substance- InducedDisorders,  Classes Of Psychoactive Substances, Predisposing Factors, The Dynamics of Substance-Related Disorders,The Impaired Nurse,Codependency,T reatment Modalities For Substance-Related Disorders and Nursing Management | Teacher seminar on substance related disorders. | 10hrs |

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| 8. | **Schizophrenia and Other Psychotic Disorders (Check ICD10)**   * Natureofthe Disorder * Predisposing Factors * Schizophrenia - Types * Disorganized   Schizophrenia   * Catatonic   Schizophrenia   * Paranoid   Schizophrenia  • Undifferentiated Schizophrenia   * Residual   Schizophrenia   * Other Psychotic disorders * Schizoaffective   Disorder   * BriefPsychotic   Disorder  • Schizophrenicfor m Disorder   * Psychotic DisorderDuetoa General Medical Condition * Substance- Induced Psychotic Disorder * Treatment and Nursing Management | Critically analyze the existing Nursing educational programs, their problems, issues and futuretrends. | **To cover the conceptof Nursing Educational programs**   * Perspectives ofNursing education: Global and national * Patterns of Nursing education and training programmes in India. Non-university and University programs: ANM, GNM, Basic B.Sc. Nursing, Post Certificate B.Sc. Nursing,M.Sc.   (N) programs, M. Phil. and Ph.D.) in Nursing, post basic diploma programs, Nurse practitioner programs. | Student interactive session on Patterns of Nursing education and training programmes in India. | 5hrs |

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| 9. | **Mood Disorders**   * Historical Perspective * Epidemiology * TheGrief Response * Maladaptive ResponsestoLoss * TypesOfMood Disorders * Depressive disorders * Bipolardisorders * Treatment and Nursing Management | To explain the concept of mood disorder. | **To cover the** Concepts of Mood Disorders Historical Perspective, Epidemiology, The Grief Response, Maladaptive Responses to Loss, Types Of Mood Disorders, Depressive disorders, Bipolar disorders, Treatment and Nursing Management  . | Teacher seminar on Concepts of Mood Disorders-its Historical Perspective, Epidemiology,  Student seminar on The Grief Response, Maladaptive Responses to Loss, Student interactive session on Types Of Mood Disorders, Depressive disorders, Bipolar disorders, Student seminar on Treatment and Nursing Management | 8 hrs |
| 10. | **Anxiety Disorders**   * HistoricalAspects * Epidemiological Statistics * Types * PanicDisorder * Generalized   Anxiety Disorder   * Phobias * Obsessive- CompulsiveDisorder * Posttraumatic   Stress Disorder   * Anxiety Disorder Due to a General MedicalCondition * Substance-Induced AnxietyDisorder * Treatment Modalities   • Psychopharmacology & Nursing Management | Describe the Anxiety disorders. | To cover the concept of Anxiety Disorders  ,its Historical Aspects, Epidemiological Statistics, Types, Panic Disorder, Generalized Anxiety Disorder, Phobias, Obsessive- Compulsive Disorder, Posttraumatic Stress Disorder  ,Anxiety Disorder Due to a General Medical | Teacher seminar on the concept of Anxiety Disorders.  Student seminar on Panic Disorder, Generalized Anxiety Disorder, Phobias Teacher seminar on Obsessive-Compulsive Disorder, Posttraumatic Stress Disorder,  Student interaction on Anxiety Disorder Due to a General Medical Condition   * Substance-Induced AnxietyDisorder | 8 hrs |
| 11. | **Somatoform and Sleep Disorders**   * Somatoform Disorders * HistoricalAspects * Epidemiological | Analyze the existing teacher preparation programs in Nursing. | **Tocovertheconceptof Somatoform and Sleep Disorders,** Historical Aspects**,** Epidemiological Statistics | Teacher seminar on concept of Somatoform and Sleep Disorders. | 5HRS |

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|  | Statistics |  | ,Pain Disorder, |  |  |
| * PainDisorder | Hypochondriasis |
| * Hypochondriasis | ,Conversion Disorder, |
| * Conversion | Body Dysmorphic |
| Disorder | Disorder, Sleep |
| * BodyDysmorphic | Disorder, Treatment |
| Disorder | Modalities and |
| * SleepDisorder | Nursing Management |
| * Treatment |  |
| Modalities and |  |
| Nursing |  |
| Management |  |
| 12. | **Dissociative** | Describe the dissociative disorders and management. | **To cover the** Concept of dissociative disorders,  it’s Historical Aspects, Epidemiological Statistics, Application of the Nursing Management, Treatment Modalities and Nursing Management and their management. | Teacher seminar on Concept of dissociative disorders Historical Aspects and Epidemiological Statistics  Student interactive session on Application of the Nursing Management  And Treatment Modalities . | 4 hrs |
|  | **Disorders and** |  |
|  | **Management** |  |
|  | * HistoricalAspects |  |
|  | * Epidemiological |  |
|  | Statistics |  |
|  | * Application ofthe |  |
|  | Nursing |  |
|  | Management |  |
|  | * Treatment |  |
|  | Modalities and |  |
|  | Nursing |  |
|  | Management |  |

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| 13. | **Sexual and Gender Identity Disorders**   * Development of HumanSexuality * SexualDisorders * Variation in Sexual Orientation * NursingManagement | Describe the Sexual and Gender Identity Disorders | **To cover the concept of Sexual and Gender Identity Disorders**  ,Development of Human Sexuality, Sexual Disorders, Variation in Sexual Orientation, Nursing Management | Teacher seminar on Sexual and Gender Identity Disorders   * student interactive session on Development of Human Sexuality, Sexual Disorders Student seminar on Variation in Sexual Orientation * Nursing Management | 4 hrs |

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| 14. | **Eating Disorders**   * Epidemiological Factors * Predisposing Factors: Anorexia Nervosa and Bulimia Nervosaobesity   •  Psychopharmacology   * Treatment &Nursing Management | Describe the eating disorders. | **To cover the concept of Eating Disorders,** Epidemiological Factors**,** Predisposing Factors: Anorexia Nervosa and Bulimia Nervosa obesity**,** Psychopharmacol ogy**,** Treatment & Nursing Management | **Teacher seminar on Eating Disorders, its** Epidemiological Factors**,** Predisposing Factors: Anorexia Nervosa and Bulimia Nervosa obesity**,** Psychopharmacol ogy**,** Treatment Student Nursing Management | 5 hrs |

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| 15. | **Adjustment and Impulse Control Disorders**   * Historicaland Epidemiological Factors * Adjustment Disorders * Impulse Control Disorders * Treatment &Nursing Management | Describe the Adjustment and Impulse Control Disorders | Adjustment and Impulse Control Disorders, its Historical and Epidemiological Factors, Adjustment Disorders, Impulse Control Disorders, Treatment & Nursing Management | Student interactive session on Adjustment and Impulse Control Disorders.  Teacher seminar on Adjustment and Impulse Control Disorders, its Historical and Epidemiological Factors, Adjustment Disorders, Impulse Control Disorders, Treatment & Nursing Management | 5hrs |

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| **S.No** | **Topic** | **Learning objective** | **Teaching Guidelines** | **Methodology** | **Time** |
| **1.** | **Medical Conditions due to Psychological Factors**   * Asthma * Cancer * Coronary Heart Disease * PepticUlcer * Essential Hypertension * MigraineHeadache * Rheumatoid Arthritis * UlcerativeColitis * Treatment &NursingManagement | **Explain the medical conditions due to psychological factors** | **To cover the concept of Medical Conditions due to Psychological Factors**   * Asthma * Cancer * Coronary Heart Disease * PepticUlcer * Essential Hypertension * MigraineHeadache * RheumatoidArthritis * UlcerativeColitis * Treatment & Nursing Management | **Student interaction on Medical Conditions due to Psychological Factors.**  **Teacher Seminar on** Asthma   * Cancer * Coronary Heart Disease * PepticUlcer * Essential Hypertension * Migraine Headache * Rheumatoid Arthritis * Ulcerative Colitis * Treatment &Nursing Management | **4 hrs** |

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| 2. | **Personality Disorders**   * Historical perspectives * Types OfPersonality Disorders * Paranoid   Personality Disorder   * Schizoid   Personality Disorder   * Antisocial   Personality Disorder   * Borderline   Personality Disorder   * Histrionic   Personality Disorder   * Narcissitic   Personality Disorder   * Avoidance   Personality Disorder   * Dependent   PersonalityDisorder   * Obsessive- Compulsive PersonalityDisorder * Passive-Aggressive Personality Disorders * Identification, diagnostic, symptoms   •  Psychopharmacology   * Treatment& Nursing Management | Describe the personality disorders. | To cover the concept of **Personality Disorders its** Historical perspectives**,** Types Of Personality Disorders   * ParanoidPersonality   Disorder   * SchizoidPersonality   Disorder   * AntisocialPersonality   Disorder   * Borderline   Personality Disorder   * Histrionic Personality Disorder * Narcissitic   Personality Disorder   * Avoidance   Personality Disorder   * Dependent   PersonalityDisorder   * Obsessive- Compulsive PersonalityDisorder * Passive-Aggressive PersonalityDisorders * Identification, diagnostic,symptoms * Psychopharmacology * Treatment & Nursing Management | Student interaction on Personality Disorders its Historical perspectives, Types Of Personality Disorders.  Teacher seminar on various types of personalitydisorders and Psychopharmacology  ,Treatment&NursingManagement | 7 hrs |

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| 3. | **The Aging Individual**   * Epidemiological Statistics * BiologicalTheories * Biological Aspects ofAging * Psychological AspectsofAging * Memory Functioning * Socio-cultural aspectsofaging * Sexualaspectsof aging * Special Concernsof   the Elderly | To discuss about the aging individual. | **Tocovertheconcept of the Aging Individual, its** Epidemiological Statistics**,** Biological Theories**,** Biological Aspects of Aging**,** Psychological Aspects of Aging**,** Memory Functioning**,** Socio- cultural aspects of aging**,**Sexualaspectsof aging   * Special Concerns of the ElderlyPopulation * Psychiatricproblems   among elderly | Teacher seminar on concept of the Aging Individual. Its Epidemiological Statistics  ,Biological Theories, BiologicalAspectsof Aging   * Psychological Aspects of Aging Student interaction on Memory Functioning, Socio- cultural aspects of aging, Sexual aspects of aging, Special Concerns ofthe | 7hrs |

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|  | Population   * Psychiatric problems among elderlypopulation * Treatment& Nursing Management |  | population   * Treatment & Nursing Management | Elderly Population Teacher seminar on Psychiatric problems among elderly population   * Treatment &NursingManagement |  |
| 4. | **The personliving with HIVDisease**   * Psychological | To describe the person living with HIV Disease. | To cover the concept of the person living with HIV Disease  , its Psychological problems of individual HIV/AIDS, Counseling   * Treatment & Nursing Management | Teacher seminar on the concept of the person living with HIV Disease  , its Psychological problems of individual HIV/AIDS, Counseling  Student interactive session on Treatment & Nursing Management | 5 hrs |
|  | problems of |  |  |
|  | individual |  |  |
|  | HIV/AIDS |  |  |
|  | * Counseling |  |  |
|  | * Treatment& |  |  |
|  | Nursing |  |  |
|  | Management |  |  |
| 5. | **Problems Related to Abuse or Neglect** | To describe the Problems Related to Abuse or Neglect | To cover the concept of Problems Related to Abuse or Neglect  i.e. Vulnerable groups, Women, Children, elderly, Psychiatric patients, under privileged, challenged   * Predisposing Factors * Treatment &Nursing management- Counseling | Teacher seminar on the concept of Problems Related toAbuseorNeglect  i.e. Vulnerable groups, Women, Children, elderly, Psychiatric patients, under privileged, challenged  Student seminar on Predisposing Factors  And Treatment & Nursing management- Counseling | 8 hrs |
|  | * Vulnerable |  |  |
|  | groups, Women, |  |  |
|  | Children, elderly, |  |  |
|  | Psychiatric |  |  |
|  | patients, under |  |  |
|  | privileged, |  |  |
|  | challenged |  |  |
|  | * Predisposing |  |  |
|  | Factors |  |  |
|  | * Treatment& |  |  |
|  | Nursing |  |  |
|  | management- |  |  |
|  | Counseling |  |  |
| 6. | **Community Mental** | To describe the concept of  community mental healthnursing | **Community Mental** | **Student interactive** | 7 hrs |
|  | **Health Nursing** | **Health Nursing** | **session** on |  |
|  | * NationalMental | * NationalMental | Community Mental |  |
|  | Health Program- | Health Program- | Health Nursing |  |
|  | Community mental | Community mental | **Teacher seminar** on |  |
|  | health program | health program | National Mental |  |
|  | * TheChanging | * The ChangingFocus | Health Program- |  |
|  | Focus of care | of care | Community mental |  |
|  | * The PublicHealth | * The PublicHealth | health program, The |  |
|  | Model | Model | Changing Focus of |  |
|  | * The Role ofthe | * TheRoleoftheNurse | care, The Public |  |
|  | Nurse | * CaseManagement | Health Model |  |
|  | * CaseManagement | * The communityas | **Student seminar** on |  |
|  | * The communityas | Client | the Role of the Nurse, |  |

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| --- | --- | --- | --- | --- | --- |
|  | Client |  | * PrimaryPrevention | Case Management, |  |
| * PrimaryPrevention | * Populations atRisk | The community as |
| * Populations atRisk | * Secondary | Client |
| * Secondary | prevention | **student interactive** |
| prevention | * TertiaryPrevention | **session** on Primary |
| * TertiaryPrevention | * Communitybased | Prevention, |
| * Communitybased | rehabilitation | Populations at Risk, |
| rehabilitation |  | Secondary |
|  |  | prevention, Tertiary |
|  |  | Prevention, |
|  |  | Community based |
|  |  | rehabilitation |
| 7. | **Ethical and Legal** | To describe the ethical and legal issues in mental health nursing. | **Tocovertheconcept** | Teacher seminar on | 5 hrs |
|  | **Issues in** | **of Ethical and Legal** | Ethical and Legal |  |
|  | **Psychiatric/Mental** | **Issues in** | Issues in |  |
|  | **Health Nursing** | **Psychiatric/Mental** | Psychiatric/Mental |  |
|  | * Ethical | **Health Nursing its** | Health Nursing |  |
|  | Considerations | Ethical Considerations**,** |  |  |
|  | * Legal | Legal Consideration**,** |  |  |
|  | Consideration | Nurse Practice Acts**,** |  |  |
|  | * Nurse PracticeActs | Types of Law**,** |  |  |
|  | * Types ofLaw | Classification within |  |  |
|  | * Classification | Statutory and Common |  |  |
|  | within Statutory and | Law**,** Legal Issues in |  |  |
|  | Common Law | Psychiatric/Mental |  |  |
|  | * Legal Issuesin | Health Nursing**,** |  |  |
|  | Psychiatric/Mental | Nursing Liability |  |  |
|  | Health Nursing |  |  |  |
|  | * NursingLiability |  |  |  |
| 8. | **Psychosocial rehabilitation**   * Principlesof   rehabilitation | Describe the concept, principles of psychosocial rehabilitation. | **To cover the concept of Psychosocial**  **rehabilitation its** | **Psychosocial rehabilitation**   * Principlesof   rehabilitation | 5 hrs |
|  | * Disability |  | Principles of | * Disability |  |
|  | assessment |  | rehabilitation, | assessment |  |
|  | * Day carecenters |  | Disability | * Day carecenters |  |
|  | * Half wayhomes |  | assessment**,** Day care | * Half wayhomes |  |
|  | * Reintegration |  | centers**,** Half way | * Reintegrationinto |  |
|  | into the |  | homes**,** Reintegration | the community |  |
|  | community |  | into the community**,** | * Trainingand |  |
|  | * Trainingand |  | Training and support | support to care |  |
|  | support to care |  | to care givers**,** | givers |  |
|  | givers |  | Sheltered | * Sheltered |  |
|  | * Sheltered |  | workshops**,** | workshops |  |
|  | workshops |  | Correctional homes | * Correctional |  |
|  | * Correctional |  |  | homes |  |
|  | homes |  |  |  |  |
| 9. | **Counseling**   * Liaison Psychiatric Nursing * Terminalillnesses- | Describe the  concept of  counseling in variousareas. | **To cover the concept of Counseling,** Liaison Psychiatric  Nursing**,**Terminal | **Teacher seminar on Counseling,** Liaison Psychiatric Nursing**,**  Terminal illnesses- | 5 hrs |

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|  | Counseling |  | illnesses-Counseling, | Counseling |  |
| * Postpartum | Post partum psychosis- | Student interactive |
| psychosis-treatment, | treatment, care and | session on Post |
| care and counseling | counseling**,**Death | partum psychosis- |
| * Deathdying- | dying- | treatment, care and |
| Counseling | Counseling**,**Treatment, | counseling |
| * Treatment,care | care and counseling – | Student seminar on |
| and counseling – | Unwed mothers | Death dying- |
| * Unwedmothers | And HIV and AIDS | Counseling, |
| * HIV andAIDS |  | Treatment, care and |
|  |  | counseling – |
|  |  | * Unwedmothers |
|  |  | * HIV andAIDS |
| 10. | **Administration** | Describe the Administration and management of Psychiatric units including emergency units | **To cover the** | **Teacher seminar** | 5 hrs |
|  | **and management** | **concept of** | **on Administration** |  |
|  | **of Psychiatric** | **Administration and** | **and management** |  |
|  | **units including** | **management of** | **of Psychiatric** |  |
|  | **emergency units** | **Psychiatric units** | **units including** |  |
|  | * Design &layout | **including** | **emergency units** |  |
|  | * Staffing, | **emergencyunits,its** | **its** Design & layout**,** |  |
|  | * Equipment, | Design & layout**,** | Staffing, |  |
|  | supplies, | Staffing, Equipment, | Student interactive |  |
|  | * Norms,policies | supplies, | session on |  |
|  | and protocols | * Norms,policiesand | Equipment, |  |
|  | * Qualityassurance | protocols | supplies, Norms, |  |
|  | * Practice | * Qualityassurance, | policies and |  |
|  | standards for | Practice standards | protocols |  |
|  | Psychiatric Nursing | for Psychiatric | Teacher seminar |  |
|  | * Documentation | Nursing, | on Quality |  |
|  |  | Documentation | assurance, Practice |  |
|  |  |  | standards for |  |
|  |  |  | Psychiatric Nursing |  |
|  |  |  | And |  |
|  |  |  | Documentation |  |
| 11. | **Education and** | Describe the concept of education and training in psychiatriccare | **Education and** | **Education and** | 5 hrs |
|  | **training in** | **training in** | **training in** |  |
|  | **Psychiatric care** | **Psychiatric care** | **Psychiatric care** |  |
|  | * Stafforientation, | * Stafforientation, | * Stafforientation, |  |
|  | training and | training and | training and |  |
|  | development, | development, | development, |  |
|  | * In-service | * In-serviceeducation | * In-service |  |
|  | education program, | program, | education program, |  |
|  | * Clinicalteaching | * Clinicalteaching | * Clinicalteaching |  |
|  | programs. | programs. | programs. |  |

**Reference Books:**

1. Brown R. T. Feldman G. R., *Epilepsy -Diagnosis and Management*, Little Brown And Co.,

1983, Toronto.

2. Beck M. C. Rawtins P. R. and et al, *Mental Health – Psychiatric Nursing*. The C.V.Mosby

Co., Ltd. 1984, Toronto.

3. Coleman C. J, *Abnormal Psychology and Modern Life*. P. B. Tara and Sons Co. Pvt Ltd .1982.

4. Kaplan H. Saddock B, *Synopsis of Psychiatry*, William sand Wilkins, 1991, Bathmov.

5. Stuart W. G. Sundeen J. S, *Principles and Practice of Psychiatric Nursing*, Mosby Year book,

1991, London.

6. Taylor C.M., *Essentials of Psychiatric Nursing,* 14th edition CV Mosby Co., 1982, London.

7. Bimlakapoor CV, *A Text book of Psychiatric Nursing, 4th* edition Mosby Co., 1982, Delhi.

8. Shivas, “*Basic Cocept of Psychiatric Mental Health Nursing*, 3rd edition, B.I Publications,

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**CLINICAL SPECIALITY – II**

**COMMUNITY HEALTH NURSING II**

**M.Sc. Nursing 2nd Year Theory - 150 hours**

**Practical - 950 hours**

**Course Description:**

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

understanding in the field of community health Nursing. It will help students to develop advanced skills for nursing intervention in various aspects of community health care settings. It will enable the student to function as community health Nurse practitioner/specialist. It will further enable the student to function as educator, manager and researcher in the field of community health Nursing

**Objectives:**

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

1. Appreciate trends and issues related to community health Nursing reproductive and child health, school health, Occupational health, international health, rehabilitation, geriatric and mental health.

2. Apply epidemiological concepts and principles in community health Nursing practice

3. Perform community health assessment and plan health programmes

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 centre and develop standards for community health nursing practice.

**Content Outlines**

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| **S.**  **No** | **Topic** | **Learning Objectives**  **( At the end of the session, the students should be able**  **to :)** | **Teaching Guidelines** | **Methodology** | **Time** |
| 1 | **Epidemiology**  Concept, scope, definition, trends, History and development of modern epidemiology , contribution and its implications  Epidemiological methods  Measurement of health and disease  Health policies  Epidemiological approaches  Epidemiology of Communicable diseases and non-communicable diseases  Emerging and re- emerging diseases Epidemics  National Integrated disease Surveillance Programme  Healthinformation system  Epidemiology studyand reports  Role of Community health nurse | Apply epidemiological concepts and principles in community health nursing practice  Describe the epidemiological methods  Discuss the measurement of health and disease  Discuss the Health policies  Enumerate the epidemiological approaches  Discuss the epidemiology of Communicable diseases and non-communicable diseases and emerging and re- emerging diseases Epidemics  Explain National Integrated disease Surveillance Programme  Discuss the Health information system  Discuss the role of Community health nurse | To cover 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, epidemiology of communicable diseases and  non-communicable diseases, and emerging and re- emerging diseases Epidemics, National Integrated disease Surveillance Programme, health information system, and Role of Community health | Project on collection of vital statistics  Teaching seminar on Communicabl e diseases and non- communicable diseases  Interactive session  Didactic lecture on **N**ational Integrated disease Surveillance Programme | 20  hours |

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| 2  3 | **National Health and Family Welfare Programmes**   * National Vector Borne Disease ControlProgramm * NationalFilaria Control Programme * National Leprosy EradicationProgramme * Revised national TB ControlProgramme * 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 andII * Non- communicable diseaseprogrammes * NRHM * HealthSchemes:   ESI, CGHS, Health Insurance  **SCHOOL HEALTH**  Introduction: definition, concepts, objectives  Health assessment, | Discuss the various national health programmes and Family WelfareProgrammes  Describe the various components ofReproductive and child healthprogramme.  Describe the role and responsibilities of community health nurse in various national health and family welfare programmes  Participate in the implementation of various national health and family welfare programme  Define school health Discuss the health | nurse  To cover the objectives, organisation  /manpower/resource s,  activities, goals, inter-sectoral approach,implement ation, item/purpose, role and responsibilities of community health nurse in National Health and Family Welfare Programmes  and NRHM and Health Schemes:  To cover the definition, concepts, objectives, health | Teaching seminar on National Health and Family Welfare Programmes  Interactive session  Didactic lecture on NRHM,  Health Schemes, ESI, CGHS, Health Insurance  Fieldvisits  Clinical Postings in CHC,PHC  Teaching seminar | 40  hours  15  hours |

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| 4 | Screening, identification, referral and follow up,  Safe environment  Services, programmes and plans- first aid, treatment of minor ailments  Inter-sectoral coordination  Adolescent health  Disaster, disaster preparedness, and management  Guidance and counseling  School health records - maintenance and its importance  Roles and responsibilities of community health nurse  **INTERNATIONALHEALTH**  Global burden of disease  Global health rules to halt disease spread  Global health priorities and programmes  International quarantine  Health tourism  International cooperation and assistance  International travel and trade | assessment, Screening, identification, referral and follow up,Safe environment  Describe the services, programmes and plans- first aid, treatment of minor ailments  Explain inter-sectoral coordination  Discuss adolescent health  Elaborate disaster preparedness and management  Discuss guidance and counseling  Describe the importance of school health records.  Discuss roles and responsibilities of community health nurse.  Discuss global burden of disease  ,global health rules to halt disease spread and global health priorities and programmes  Explain International quarantine, health tourism, International cooperation and assistance and | assessment, screening, identification, referral and follow up, safe environment  , services, programmes and plans- first aid, treatment of minor ailments, inter- sectoral coordination, Adolescent health, Disaster, disaster preparedness, and management, guidance and counseling, school health records - maintenance and its importance  , roles and responsibilities of community health nurse  To cover the Global burden of disease, global health rules to halt disease spread, global health priorities and programmes,  ,International quarantine  ,Health | Interactive session  Didactic lecture Demonstration on Health assessment, Screening, identification, referral and follow up,  Teaching seminar  Interactive session  Didactic lecture  Field visits  International day | 15  hours |

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|  | Health and food legislation, laws, adulteration of food  Disaster management  Migration  International health agencies –World Health organizations, World health assembly, UNICEF, UNFPA,SIDA, US AID, DANIDA, DFID. USAID  etc  International health issues and problems  Internationalnursing practicestandards  International healthvis-a vis national health  International health days and their significance | International travel and trade. | tourism,Internationalcooperation and assistance, International travel and trade, Health and food legislation, laws, adulteration of food, Disaster management, Migration, International health agencies –World Health Organizations, international health issues and problems, international nursing practice standards, International health vis-a vis national health and International health days. | celebration |  |

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| 1 | **EDUCATION ANDADMINISTRATION**  Qualityassurance  Standards,Protocols, Policies,Procedures  Infection control; Standard safety measures  Nursing audit  Design of Sub- Centre/Primary Health Centre,  Community health center | Describe quality assurance, Standards, Protocols, Policies, Procedures  Discuss Infection control; Standard safety measures, Nursing audit  Discuss the design of Sub- Centre/Primary Health Centre, CHC, Staffing; | To cover quality assurance, standards, protocols, Policies, Procedures, infection control; Standard safety measures, nursing audit, design of Sub- Centre/Primary HealthCentre, | Didactic lecture through Power point projections.  Teaching seminar  Interactive session  Didactic lecture | 15 |

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| 2 | 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  **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 | Supervision and monitoring- Performance appraisal  Elaborate budgeting, material management , role and responsibilities of different categories of personnel in community health  discuss Referral chain- community outreach services, Transportation, Public relations, Planning in- service educational programme and  Teaching and training of various categories of health workers ,preparation of manuals  Describe the Concept, trends, problems andissues  Explain Aging process, and changes,Theories ofageing  , Health problems and needs,Psycho-physiological stressors and Myths and facts ofaging.  Explain health assessment Discuss rehabilitation of elderly, care of elderly,  elderly abuse | 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  And training of various categories of health workers  ,preparation of manuals  To cover the 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 | Report writing.  Didactic lecture through Power point projections.  Teaching seminar  Interactive session  Didactic lecture | 10 |

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| 3 | agencies  Rehabilitation of elderly  Care of elderly  Elderly abuse  Training and supervision of care givers  Government welfare measures Programmes for elderly-Role of NGOs  Roles and responsibilities of Geriatric nurse in the Community  **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  Restorativerehabilitation  Vocationalrehabilitation | Discuss the Training and supervision of care givers , Government welfare measures Programmes for elderly-Role of NGOs  Elaborate the Roles and responsibilities of Geriatric nurse in the community  Discuss : Concepts, principles, trends, issues, Rehabilitation team  Explain Models, Methods and Community based rehabilitation  Discuss the Ethical issues  Discuss the Rehabilitation Council of India  Explain disability and rehabilitation and use of various prosthetic devices Explain Psychosocial rehabilitation, ehabilitation of chronic diseases, restorative rehabilitation,  vocational rehabilitation and | assessment, home for aged-various agencies, rehabilitation of elderly, care of elderly, elderly abuse, training and supervision of care givers, government welfare measures Programmes for elderly-Role of NGOs, roles and responsibilities of Geriatric nurse in the Community  To cover: Introduction: Concepts, principles, trends, issues,  Rehabilitation team  Models, Methods  Community based rehabilitation  Ethicalissues  Rehabilitation Council ofIndia  Disability and rehabilitation- Use of various prosthetic devices  Psychosocial rehabilitation  Rehabilitation of | Field visits  Report writing.  Didactic lecture through Power point projections.  Teaching seminar  Interactive session  Didactic lecture  Disaster drill Field visits | 10 |

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| 4 | Role of voluntary organizations  Guidance and counseling  Welfare measures  Role and responsibilities of community health nurse  **COMMUNITY**  **MENTAL HEALTH**  Magnitude, trends and issues  National Mental Health Program- Community mental  health program  The Changing Focus of care  The Public Health Model  Case Management- Collaborative care  Crisis intervention  Welfare agencies  Population at Risk  The community as Client   * Primary Prevention Secondaryprevention * TertiaryPrevention   Community based rehabilitation | role of voluntary organizations Describe guidance and counseling, welfare measures, role and responsibilitiesof  community health nurse  Discuss Magnitude, trends and issues  Discuss National Mental Health Program- Community mental health program  explain the Changing Focus of care  and the Public HealthModel  explain Case Management- Collaborative care, Crisis intervention, Welfare agencies, Population atRisk  Elaborate community based rehabilitation  Discuss Human rights of mentally ill, Substance use and mentally challenged groups and role of | chronic diseases  Restorative rehabilitation  Vocational rehabilitation  Role ofvoluntary organizations  Guidance and counseling  Welfare measures  Role and responsibilities of community health nurse  To cover magnitude, trends and issues, National Mental Health Program- Community mental health program, the changing focus of care, the Public Health Model, case management- Collaborative care, crisis intervention, welfare agencies, population at risk, community based rehabilitation, human rights of mentally ill, substance use, mentally challenged groups | Didactic lecture through Power point projections.  Teaching seminar  Interactive session  Disaster drill Field visits Report writing | 10 |

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| 5 | Human rights of mentally ill  Substance use  Mentally challenged groups  Role of community health nurse  **OCCUPATIONALHEALTH**  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,  Occupationaldiseases anddisorders  Measures for Health promotion of workers; Prevention and control of occupational diseases, disability limitations and rehabilitation  Women and occupational health  Occupational education and counseling | community health nurse  Describe the trends, issues, definition, aims, objectives, workplace safety  Explain ergonomics and  ergonomic solutions  Describe occupational environment- Physical, social, Decision making, Critical thinking  Discuss Occupational hazards for different categories of people  and occupational diseases and various preventive and control measures  discuss the measures for health promotion of workers, prevention and control of occupational diseases, disability limitations and rehabilitation  Discuss violence at workplace and child labour Explain disaster preparedness and management  Elaborate Legal issues | and role of community health nurse  To cover trends, issues, definition, aims, objectives, workplace safety, ergonomics and ergonomic solutions, occupational environment, decision making, Critical thinking, occupational hazards, 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 | Didactic lecture through Power point projections.  Teaching seminar  Interactive session  Disaster drill Field visits | 15 |

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|  | Violence at workplace  Child labour  Disaster preparedness and management  Legal issues  Role of Community health nurse, Occupational health team | Explain the role of Community health nurse and occupational health team | labour, disaster preparedness and management, legal issue and role of Community health nurse, Occupational health team |  |  |

**Reference Books:**

1. Clark, June & Jill Handerson, *Community Health*, Churchill Livingstone, 1993, New York.

2. Freeman B. Ruth, *Public Health Practices*, W. W. Saunders CO., 1990, Philadelphia.

3. Fromer Joan Margot, *Community Health Care and the Nursing Process*, C.VMosby CO.,

Toronto.

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5. Rao S. Kasthi, *An Introduction to Community Health Nursing*, B. I. Publishers, Madras.

*6.* Stan hope & Lancaster Janette, *Community Health Process and Practice for Promoting*

*Health*, C.V Mosby & CO. London.

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