

# NURSING MANAGEMENT

Placement: II year

Hours of Instruction

Theory 150 Hours

Practical 150 Hours

Total : 300 Hours

## **Course Description:**

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

## **Objectives:**

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

1. Describe the philosophy and objective 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 multisectoral approach.
7. Discuss the planning, supervision and management of nursing workforce for various health care settings.
8. Discuss various collaborative models between nursing education and nursing service to improve the quality of nursing care.
9. Identify and analyse legal and ethical issues in nursing administration.
10. Describe the process of quality assurance in nursing services.
11. Demonstrate leadership in nursing at various levels.

## **COURSE – PLAN**

UNIT	HRS	CONTENT
I	10	<ul style="list-style-type: none"> <li>❑ Philosophy, purpose, elements, principles &amp; scope of administration.</li> <li>❑ Indian Administrative system vis a vis health care delivery system: National, State and Local, Indian Constitution.</li> <li>❑ Planning Processes: Five year plans, various committee reports on Health State and National Health Policies, National Population Policy on AYUSH &amp; plans.</li> </ul>
II	10	<p><b><u>MANAGEMENT:-</u></b></p> <ul style="list-style-type: none"> <li>❑ Functions of administration.</li> <li>❑ Planning and control.</li> <li>❑ Co- ordination and delegation</li> <li>❑ Decision making – decentralization basic goals of decentralization</li> <li>❑ Concept of management.</li> </ul> <p><b><u>NURSING MANAGEMENT:-</u></b></p> <ul style="list-style-type: none"> <li>❑ Concept, types and principles.</li> <li>❑ Vision and mission statements.</li> <li>❑ Philosophy, aims and objectives</li> </ul> <p>❑ Current trends and issues in Nursing administration</p> <p>❑ Theories and models.</p> <p>Application to nursing service and education.</p>
III	15	<p><b><u>PLANNING :-</u></b></p> <ul style="list-style-type: none"> <li>❑ Planning process: concept, principles.</li> <li>❑ Mission, philosophy, objectives.</li> <li>❑ Strategic planning</li> <li>❑ Operational plans.</li> <li>❑ Management plans</li> <li>❑ Programme evaluation and review technique (PERT), Gantt chart, management by objectives (MBO).</li> <li>❑ Planning new venture.</li> <li>❑ Planning for change</li> </ul> <p>Application to nursing service and education</p>
IV	15	<p><b><u>ORGANISATION :-</u></b></p> <ul style="list-style-type: none"> <li>❑ Concept, principles, objectives, types and theories, minimum requirements for organization, developing an organizational structure, levels, organizational effectiveness and organizational climate</li> <li>❑ Organizing nursing services and patient care : methods of patient assignment – advantages and disadvantages, primary nursing care.</li> </ul>

UNIT	HRS	CONTENT
		<ul style="list-style-type: none"> <li>❑ Planning and organizing : hospital, unit and ancillary services ( specially central sterile supply department, laundry, kitchen, lab. Services, emergency etc.)</li> <li>❑ Disaster management : plan, resources, drill., etc. Application to nursing service and education</li> </ul>
V	15	<b>HUMAN RESOURCES FOR HEALTH :-</b> <ul style="list-style-type: none"> <li>❑ Staffing</li> <li>❑ Recruitment : credentialing, selection, placement, promotion</li> <li>❑ Retention .</li> <li>❑ Personnel policies</li> <li>❑ Termination</li> <li>❑ Staff development programme.</li> <li>❑ Duties and responsibilities of various category of nursing personnel.</li> </ul>
VI	15	<b>DIRECTING :-</b> <ul style="list-style-type: none"> <li>❑ Roles And Functions</li> <li>❑ Motivation : Intrinsic, extrinsic, creating motivating climate, motivational theories.</li> <li>❑ Communication : process, types, strategies, interpersonal communication, channels, barriers, problems, confidentiality, public relations</li> <li>❑ Delegation; common delegation errors</li> <li>❑ Managing conflicts: process, management, negotiation, consensus</li> <li>❑ Collective bargaining: health care labour laws, unions, professional associations, role of nurse manager</li> <li>❑ Occupational health and safety. Application to nursing service and education</li> </ul>
VII	10	<ul style="list-style-type: none"> <li>• Material Management</li> <li>• Concepts, principles and procedures : Specifications</li> <li>• ABC analysis</li> <li>• VED (very important and essential daily use) analysis</li> <li>• Planning equipments and supplies for nursing care : unit and hospital</li> <li>• Inventory control</li> <li>• Condemnation</li> </ul> <p>Application to nursing service and education</p>

UNIT	HRS	CONTENT
VIII	15	<b>Controlling</b> <ul style="list-style-type: none"> <li>• Quality assurance Standards Models Nursing audit</li> <li>• Performance appraisal : Tools, formats, Management, interviews</li> <li>• Supervision and management : concepts and principles</li> <li>• Discipline : service rules, self discipline, constructive versus destructive discipline, problem employees, disciplinary proceedings enquiry etc. Application to nursing service and education</li> </ul>
IX	15	<b>Fiscal planning</b> <ul style="list-style-type: none"> <li>• Steps</li> <li>• Plan and non-plan, zero budgeting, mid-term appraisal, capital and revenue</li> <li>• Budget estimate, revised estimate, performance budget</li> <li>• Audit</li> <li>• Cost effectiveness</li> <li>• Cost accounting</li> <li>• Critical pathways</li> <li>• Health care reforms</li> <li>• Health economics</li> <li>• Budgeting for various units and levels Application to nursing service and education</li> </ul>
X	10	<b>Nursing informatics</b> <ul style="list-style-type: none"> <li>• Trends</li> <li>• General purpose</li> <li>• Use of computers in hospital and community</li> <li>• Patient record system</li> <li>• Nursing records and reports</li> <li>• Management information and evaluation system (MIES)</li> <li>• E-nursing, Telemedicine, telenursing</li> <li>• Electronic medical records</li> </ul>
XI	10	<b>Leadership</b> <ul style="list-style-type: none"> <li>• Concepts, Types Theories</li> <li>• Styles</li> <li>• Manager behaviors</li> <li>• Leader behaviors</li> <li>• Effective leader : Characteristics, skills</li> <li>• Group dynamics</li> <li>• Power and politics</li> <li>• Lobbying</li> <li>• Critical thinking and decision making</li> <li>• Stress management Application to nursing service and education</li> </ul>

UNIT	HRS	CONTENT
XII	10	<b>Legal and ethical issues</b>  <b>Laws and ethics</b> <ul style="list-style-type: none"> <li>• Ethical committee</li> <li>• Code of ethics and professional conduct</li> <li>• Legal system : Types of law, tort law, and liabilities</li> <li>• Legal issues in nursing : negligence, malpractice, invasion of privacy, defamation of character</li> <li>• Patient care issues, management issues, employment issues</li> <li>• Medico legal issues</li> <li>• Nursing regulatory mechanisms : licensure, renewal, accreditation</li> <li>• Patients rights</li> <li>• Rights of special groups : children, women, HIV, handicap</li> <li>• Infection control</li> <li>• Standard safety measures</li> </ul>

### Practical

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

## **ESSENTIALS FOR A P. EXP.**

- 1) DEMONSTRATION
  - 2) PREPARATION/STUDY MATERIAL & PRESENTATION
  - 3) ANALYSIS STUDY-REPORT
- (GUIDE LINE TO BE PROVIDED) THAT IS  
AIMS-OBJECTIVES EVALUATION

### **AREA FOR EXPERIENCE**

- PREPARATION FOR DUTY ROSTER UNIT
- PREPARATION FOR INVENTORY
- PROCESS OF CONDEMNATION
- SUPERVISION FOR NSG/NON NSS STABB ?
- CLINICS FOR TRAINEE NURSES (BEDSIDE)
- OBSERVATIONAL STUDY OF NURSES ADM AREA.

### **VISIT- APECIFIC Department**

C S S D, kitchen

Waste disposal

Special unit

### **College Demonstration format**

- Cumulative Record
- Personal Appraisal
- Various evaluation performe
- Organizational charts
- Job description
- Recruitment Process
- Vision-Mission statement
- Standing orders/protocol
- Staff development programme
- Model budget

**Practical Experience:-Observational Study Report Preparation.**

SN	Departments/Area	Weeks	Hours
1	Hospital Administration Nursing service administration Nursing education administration	1½	60 hrs.
2	Community Health Administration	1½	60 hrs.
3	Visit to Specialised Unit /Hospital	1 (5 hrs. per day)	30 hrs.
	Total		150 hrs.

**Hospital Administration: -**

- Account Section
- CSSD
- Dietary Section
- Waste Disposal etc.

**Nursing Services Administration:-**

- Office of Nursing Superintendent
- Departmental Incharge

**Nursing Education Administration:-**

- Office of Principal of School/College of Nursing

**Community Health Administration: -**

- DHS/DHO/CHC/RH/NGO/Govt. Agencies

**Assignments: - Theory**

- Seminar
- Module Preparation (Staff development programme)
- Vision Mission Statement
- Standing orders
- Job Description
- Cumulative reword
- Evaluation Performa
- Personal Appraisal
- Recruitment process.

**Method of Teaching: -**

- Lecture Discussion
- Group Discussion
- Field Visit
- Project work
- Seminar Presentation

**INTERNAL ASSESSMENT**

**THEORY**

1. Mid Term -	50
2. Pre- term -	75
3. Seminar / Presentation	100
4. Evaluation for Performance appraisal	50

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**275**  
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## **Practical Experience Evaluation**

1. Evaluation Criteria for writing report on Duties and responsibilities of Nursing Personnel 50 Marks
2. Clinical Performance Evaluation : Nursing Service Administration 100 Marks

### **ASSIGNMENT FORMAT FOR SEMINAR**

Introduction to the topic\_\_\_  
Unit background  
Concept, definition  
History  
Subject matter  
Application in Nursing field  
Summary  
Conclusion  
References

### **EVALUATION CRITERIA FOR SEMINAR PRESENTATION**

Subject

Topic

Name of student

Date

Time

Group

Maximum Marks : 100

SN.	Criteria	Rating					Remarks
		1	2	3	4	5	
1	Introduction						
2	Organization of Content						
3	Presentation of topic						
4	Relevant examples						
5	Relevant statistical data						
6	Group participation						
7	Control of group						
8	Conclusion						
	AV Aids						
9	Appropriate to subject						
10	Proper use of A/V Aids						
11	Self explanatory						
12	Attractive						
13	Planning and preparation						
14	Use of Modern technology						
	Physical facilities						
15	Environment						
16	Classroom preparation						
17	Over lay out						
	Personal Appearance						
18	Voice & clarity						
19	Mannerisms						
20	References						

Remarks & signature of supervisor-

Date :

Signature of student

Date :



## ASSIGNMENT FORMAT FOR WRITING PERFORMANCE APPRAISAL :-

### Guidelines :-

- 1 Define the purpose of assessment
- 2 Decide as to which groups are to be assessed
- 3 Select and define the qualities to be assessed on a Five point Rating scale.
- 4 Include the following areas
  - Quality of performance      - Quantity of work
  - - Quality of work
  - Mental qualities                      - Ability to learn
  - - Adaptability
  - - Originality
  - - Reasoning powers
  - Supervisory qualities              - Leadership
  - - Organizing ability
  - - Cooperation
  - Personal qualities                      - Honesty
  - - Self control
  - - Initiative
  - - Appearance
  - - Attitude towards fellow workers
  - - Attitude towards work
  - Capacity for further development      - Intelligence
  - - Acceptance of responsibility
  - - To Lead a group

### EVALUATION CRITERIA FOR WRITING PERFORMANCE APPRAISAL

(Maximum Marks : 50)

SN.	Criteria	Marks Allotted	Marks Obtained	Total
1	Preparation of Tool	20		
2	Content	10		
3	Comprehension	10		
4	Conclusion	05		
5	References	05		
	<b>Total</b>	<b>50</b>		

Remarks & signature of supervisor-

Date :

Signature of student

Date :

## CLINICAL EVALUATION PERFORMS NURSING SERVICE ADMINISTRATION

Name of the student  
Period :

Field placement  
Name of the supervisor

**DECECTION** :- To facilitate the use of the clinical evaluation performs, typical activities behavior are described on a five point scale. The direction of all scale is from lowest (1) to highest (5). Mark your evaluation by placing a tick mark in the column, describing the student's standing in relation to other students in the general level experiences :-

1 Poor      2 Fair      3 Good      4 Very good      5 Excellent

Marks : 100

SN	SUPERVISOR TASKS	Rating					Remarks
		1	2	3	4	5	
1	Organizing ability						
2	Leadership						
3	Responsibility for equipments & supplies						
4	Maintenance of cleanliness of ward						
5	Assisting in Ward activity (Pharmacy, Dietary etc)						
6	Written & oral report						
7	Teaching						
8	Supervision of nonprofessional workers						
9	Problem solving ability						
	WORK PERFORMANCE						
1	Knowledge						
2	Skill (Accuracy & speed)						
3	Maintaining nursing & scientific principles						
	PERFSONAL QUALITIES						
1	Communication skill						
2	Attitude towards work						
3	Self confidence						
4	Inter – personal relationship						
5	Emotional stability						
6	Punctuality						
7	Cooperation						
8	Reliability						

Remarks & signature of supervisor-  
Date :

Signature of student  
Date :

**ASSIGNMENT FORMAT FOR WRITING REPORT ON DUTIES AND RESPONSIBILITIES OF NURSING PERSONNEL (NURSING SUPERINTENDENT, WARD IN CHARGES).**

Introduction

Aim of the assignment

Objectives of the study

Qualification

Total years of service

Experience in Administration

Date of appointment in the Hospital for the assignment

Write the job description of each of the categories of the above employees in the hospital under Administrative, Supervisory, Clinical, Teaching, Records, Reports & Returns and other duties such as staff welfare, committee procedures ....

Conclusion

References

**EVALUATION CRITERIA FOR WRITING REPORT ON  
DUTIES AND RESPONSIBILITIES OF NURSING PERSONNEL**

(Maximum Marks : 50)

SN.	Criteria	Marks Allotted	Marks Obtained	Total
1	Introduction	10		
2	Organization of content	20		
3	Comprehensive	10		
4	Conclusion	05		
5	References	05		
	<b>Total</b>	<b>50</b>		

Remarks & signature of supervisor-

Date :

Signature of student

Date :

## **Bibliography & Reference:**

- 1.Awasthi and Maheshwari, 'Public Administration' Lakshmi Narayan Aggrawal
- 2.Educational Publishers, Agra.
- 3.Chatterjee S.S.An introduction to Management, world press.
- 4.Daviesand Maculey, "Hosptial planning and Administration", world health
- 5.organization, Geneva.
- 6.Dale, Ernest Management, "Theory and practice, "MC Graw Hill Book company,
- 7.New yorh, sthours
- 8.Finer, H. Administration and the Nursing Services, Mac Millan Co.
- 9.Freeman Ruth B & Holmer Edward M., "Administration and Public Health
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- 11.Gallagher,A.H.'Educational "Administration in Nursing" Macmillan.
- 12.Goddard H.A. "Principles of Administration applied to Nursing" Macmillan.
- 13.Owen, Joseph, Karlton, "Modern Concepts of Hosptial Administration"
- 14.W.B.Sounders Company, Philadelphia and London.
- 15.Stoner and Freeman, management, 4th edition, 1989,Prantice Hall, India.
- 16.V.L.S. Rao and Narayan, Principles and practice of Management, Konark publishers, 1994.

- ♦B.T.Basvanthapa
- ♦Jean Barret - Ward Management
- ♦Govt.of MAH. – Hospital Administration
- ♦Koontz – Principal of Management, IVth edition, 1968.
- ♦Ann Morriene – Guide to Nursing Management.
- ♦Keith Davis – Human Relation at Work, the dynamics of organisational behaviour.
- ♦R.D. Agrawal – Organisational Management.
- ♦R.A.Sharma. – Technological Foundation Of Education.

## **Journals:**

1. Registered nurses.
2. Nursing times.
3. Nursing journal of India.
4. Nurses of India
5. Indian journal of medical ethics.
6. Indian journal of holistic nursing.
7. Journal of nursing practice and research.
8. Journal of advance nursing practice.
9. Herald of health
10. Health screen.
11. Health action

## CLINICAL SPECIALTY – II

# PAEDIATRIC (CHILD HEALTH) NURSING

Placement : II<sup>nd</sup> Year

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

### Course Description

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

### Objectives

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

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 pediatric units / hospitals
7. Identify area of research in the field of pediatric nursing.

## COURSE CONTENT

Unit	Hours	Content
I	5	<b>Introduction</b> <ul style="list-style-type: none"> <li>• Current principles, practices and trends in Pediatric Nursing</li> <li>• Role of pediatric nurse in various setting-Expanded and extended</li> <li>• Legal aspects of child care</li> </ul>
II	40	<b>Medical Disorders among children :</b> <ul style="list-style-type: none"> <li>• Pathophysiology, assessment (including interpretation of various invasive and non-invasive diagnostic procedures) treatment modalities, recent advances and nursing process in selected pediatric medical disorders.</li> <li>• Child with respiratory disorders : <ul style="list-style-type: none"> <li>- Upper respiratory tract : Acute Resp Tract Infection choanal atresia, tonsillitis, epistaxis, aspiration.</li> <li>- Lower respiratory tract : Bronchiolitis, Bronchopneumonia, Bronchial Asthma, Tuberculosis, cystic fibrosis</li> </ul> </li> <li>• Child with gastro-intestinal disorders : <ul style="list-style-type: none"> <li>- Diarrhoeal diseases, gastro-esophageal reflux.</li> <li>- Hepatic disorders: Hepatitis, Indian childhood Cirrhosis, liver transplantation. Malabsorption syndrome,</li> </ul> </li> <li>• Child with renal / urinary tract disorders: Nephrotic syndrome, Nephritis, Hydronephrosis, hemolytic-uremic syndrome, kidney transplanation</li> <li>• Child with cardio-vascular disorders : <ul style="list-style-type: none"> <li>- Acquired : Rheumatic fever, Rheumatic heart disease,</li> <li>- Congenital : Cynotic and acynotic</li> </ul> </li> <li>• Child with endocrine / metabolic disorders : Diabetes insipidus, Diabetes Mellitus – IDDM, NIDDM, hyper and hypo thyroidism, phenylketonuria, galactosemia'</li> <li>• Child with Neurological disorders : Convulsions, Meningitis, encephalitis, guillian – Barre Syndrome,</li> <li>• Child with oncological disorders : Leukemias, Lymphomas, Wilm's tumor, nephroblastomas, neuroblastomas, Rhabdomyosarcoma, retinoblastoma hepatoblastoma, bone tumors</li> <li>• Child with blood disorders : Anemias, thalassemias, hemophilia, polycythemia, ITP, thrombocytopenia, and disseminated intravascular coagulation</li> <li>• Child with skin disorders</li> <li>• Communicable diseases <ul style="list-style-type: none"> <li>Diphtheria, Whooping cough</li> <li>Measles, chicken pox, mumps, rubella</li> <li>Poliomyelitis</li> </ul> </li> <li>• AIDS in children</li> <li>• Nutritional disorders <ul style="list-style-type: none"> <li>Protein Energy malnutrition</li> <li>Vitamin deficiencies</li> </ul> </li> </ul>

Unit	Hours	Content
III	40	<b>Common Surgical Disorders among children (In relation to pathophysiology and management)</b> <ul style="list-style-type: none"> <li>Gastrointestinal system : Cleft lip, cleft palate and conditions requiring plastic surgery, Tracheo esophageal fistula / atresia, Diaphragmatic Hernia, Hirschsprungs' disease / megacolon, , intestinal obstruction, duodenal atresia, gastrochisis, exomphalus, anorectal malformation, omphalocele, diaphragmatic hernia</li> <li>Anomalies of the nervous system : Spina bifida, Neningocele, Myelomeningocele, hydrocephalus</li> <li>Anomalies of the genito-urinary system : Hypospadias, Epispadias, Phimosis Torsion of testis, Undescended testes, Extrophy bladder</li> <li>Anomalies of the skeletal system</li> <li>Nursing management of with traumatic injuries</li> <li>General principles of managing Pediatric, abdominal injury, poisoning, foreign body obstruction, burns &amp; Bites, accidents</li> <li>Child with oncological disorders : Solid tumors of childhood, Nephroblastoma, Neuro blastoma, Hodgkin's / Non Hodgkin's Lymphoma, Hepatoblastoma, Rhabdomyosarcoma</li> <li>Management of stomas, catheters and tubes</li> <li>Management of wounds and drainages</li> </ul>
IV	20	<b>Intensive care/critical care for pediatric clients</b> <ul style="list-style-type: none"> <li>Principles for critical care nursing</li> <li>Planning and organization of Critical care nursing</li> <li>Assessment, Resuscitation, &amp; monitoring of pediatric patients in critical care unit</li> <li>Anatomical &amp; physiological basis of critical illness in infancy and childhood.</li> <li>Care of child requiring long-term ventilation</li> <li>Fluid and Nutritional management of critically ill child</li> <li>Total parenteral nutrition</li> <li>Legal and ethical issues in pediatric intensive care</li> <li>Intensive care procedures, equipment and techniques</li> <li>Management of pediatric emergencies <ul style="list-style-type: none"> <li>Resp conditions, Status asthmaticus</li> <li>Shock, Severe dehydration</li> <li>Status epilepticus</li> <li>CCF, Endocarditis</li> <li>Encephalopathy, Poisoning</li> <li>Trauma, Head injury</li> <li>Burns, accidents</li> </ul> </li> <li>Documentation</li> </ul>
V	5	<b>Developmental disturbances and implications for nursing</b> <ul style="list-style-type: none"> <li>Adjustment reaction to school,</li> <li>Learning disabilities</li> <li>Habit disorders, speech disorders,</li> <li>Conduct disorders,</li> <li>Early infantile autism, Attention deficit hyperactive disorders (ADHD), depression and childhood schizophrenia.</li> </ul>

Unit	Hours	Content
VI	5	<b>Challenged child and implications for nursing</b> <ul style="list-style-type: none"> <li>Physically challenged causes, features, early detection and management</li> <li>Cerebral palsied child,</li> <li>Mentally challenged child.</li> <li>Training &amp; rehabilitation of challenged children.</li> </ul>
VII	5	<b>Crisis and nursing intervention</b> <ul style="list-style-type: none"> <li>Terminally ill children and death during childhood</li> <li>Nursing intervention – counseling</li> </ul>
VIII	5	<b>Drugs used in Pediatrics</b> <ul style="list-style-type: none"> <li>Criteria for dose calculation</li> <li>Administration of drugs, oxygen and blood</li> <li>Drug interactions</li> <li>Adverse effects and their management</li> </ul>
IX	10	<b>Administration and management of pediatric care unit</b> <ul style="list-style-type: none"> <li>Design &amp; layout</li> <li>Staffing,</li> <li>Equipment, supplies,</li> <li>Norms, policies and protocols</li> <li>Practice standards for pediatric care unit</li> <li>Documentation</li> </ul>
X	10	<b>Education and training in Pediatric Care</b> <ul style="list-style-type: none"> <li>Staff orientation, training and development,</li> <li>In-service education program,</li> <li>Clinical teaching programs.</li> </ul>

## PRACTICAL

**Total = 960 Hours**

**1 Week = 30 Hours**

- Clinical practice in pediatric medical, surgical, cardio-thoracic wards, neonatal intensive care unit, labour room, pediatric OPD, immunization, well baby clinic, child guidance clinics, school health centre, community health.
- Clinical presentation of a child-per week by each student
- Field visits: Child care center, Anganwadi, play school, Special schools for challenged children, Juvenile court, UNICEF, Orphanage, Creche, SOS village.

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

## Student Activities

Clinical presentation	2 x 50 = 100
Case studies	2 x 50 = 100
NICU Report	50
Nursing care plan	2 x 25 = 50
Health education related to disease conditions	
Project work(Problem based)	50
Field Visits. Special schools for challenged children,	



<b>Evaluation</b>	<b>Theory</b>	<b>Practical</b>
Internal	25	100
External	75	100
Int assessment	Midterm & Prefinal Exam	125 (50 & 75 resp.)
	Seminar	1
	Journal presentation	5

## **Essential**

### **I. Procedures Observed :**

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

### **II. Procedures Assisted'**

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

### **III Procedures Performed :**

- Airway Management
- Application of Oro Pharyngeal Airway
- Oxygen therapy
- CPAP ((Continuous Positive Airway Pressure)
- Care of the Tracheostomy
- Endotracheal Intubation
- Neonatal Resuscitation
- Monitoring of Neonates – clinically & with monitors, CRT (Capillary Refill Time), assessment of jaundice, ECG
- Gastric Lavage
- Setting of Ventilators
- Phototherapy
- Assessment of Neonates : Identification & assessment of risk factors, APGAR Score, gestation age, Anthropometric assessment, Weighing the baby, Newborn examination, detection of life threatening congenital abnormalities,
- Admission & discharge of neonates
- Feeding – Management of breast feeding, artificial feeding, expression of breast milk, OG (Orogastric) tube insertion, gavage feeding, TPN, Breast feeding counseling.
- Thermoregulation – Axillary warmer, incubators, management of thermoregulation & control

- Administration of Drugs : I/M IV Injection, IV Cannulation and fixation infusion pump, Calculation of dosages, Neonatal formulation of drugs, use of tuberculin / insulin syringes, Monitoring fluid therapy, Blood administration.
- Procedures for prevention of infections: Hand washing, disinfections & sterilization, surveillance, fumigation
- Collection of Specimens
- Setting, Use & maintenance of basic equipment: Ventilator, O2 analyzer, monitoring equipment, Photo therapy unit, Flux meter, Infusion pump, Radiant warmer, incubator, Centrifuge machine, Bilimeter, Refractometer, laminar flow

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## CHILD HEALTH NURSING

## CHILD HEALTH NURSING

### PROFORMA & GUIDELINE FOR EXAMINATION AND ASSESSMENT OF NEW BORN

୧, ଡାକ୍ତରଙ୍କ ନାମ ଓ ଡିଜିଟାଲ ଡାକ୍ତରଙ୍କ ନାମ

୦୧ ଡିଗ୍ରୀ

Name of the baby (if any) : Age:

Birth weight : Present weight:

Mother's name : Period of gestation:

Date of delivery :

Identification band applied :

Type of delivery : Normal/ Instrumental/ Operation

Place of delivery : Hospital/ Home

Any problems during birth : Yes/ No

If Yes explain :

Antenatal history :

Mother's age : Height: Weight:

Nutritional status of mother :

Socio-economic background :

୨, ଶିଶୁର ଡାକ୍ତରଙ୍କ ନାମ ଓ ଡିଜିଟାଲ ଡାକ୍ତରଙ୍କ ନାମ

୦୧ ଡିଗ୍ରୀ

Characteristics In the Baby Comparison with the normal

1. Weight
2. Length
3. Head circumference
4. Chest circumference
5. Mid-arm circumference
6. Temperature
7. heart rate
8. Respiration

୩, ଶିଶୁର ଡାକ୍ତରଙ୍କ ନାମ ଓ ଡିଜିଟାଲ ଡାକ୍ତରଙ୍କ ନାମ

୦୧ ଡିଗ୍ରୀ

Color :

Skin/ Lanugo :

Vernix caseosa :

Jaundice :

Cyanosis :

Rashes :

Mongolian spot :

Birth marks :

Head :

- Anterior fontanel :

- Posterior fontanel :

- Any cephalhematoma/ caput succedaneum

- Forceps marks (If any) :

Eyes : Face:

Cleft lip/ palate

Ear Cartilage :

Trunk:

- Breast nodule

- Umbilical cord

- Hands :

Feet/Sole creases :

Legs :

Genitalia :

Muscle tone :



7. Crawls or creeps
8. Thumb-finger co-ordination (Prehension)
9. Stands with support
10. Stands alone
11. Walks with support
12. Walks alone
13. Climbs steps
14. Runs

८, वलपंआणउ वलपवदंआ - वंदहलंहम कमअमवलचउमदुजवक१ डंती

## Social & emotional development In Child Comparison with the normal

Responds to closeness when held

## Smiles in recognition

Recognizes mother

## Coos and gurgles

Seated before a mirror, regards  
image

Discriminates strangers

Wants more than one to play

## Says Mamma, Papa

Responds to name, no or give it to me

Increasingly demanding

Offers cheek to be kissed

Can speak single word

Use pronouns like I, Me, You

Asks for food, drinks, toilet.

Plays with doll

Gives full name

Can help put things away

Understands difference between boy & girl

Washes hands

Feeds himself/herself

Repeats with number

Understands under, behind, inside, outside

Dresses and undresses

ટ, બેંક ઈન્ડસ્ટ્રી

०३ इति

Child's favourite toy and play:

Does he play alone or with other children?

ट८, ऋषभमग्नतं पदपदह

०३ ड० अ०

Is the child trained for bowel movement & if yes, at what age:

Has the child attained bladder control & if yes, at what age:

Does the child use the toilet?

ਟਟਟ, ਛਨਛਨਪਛਪਛਦ

०३ इति

- Breast feeding (as relevant to age)

- Weaning Has weaning started for the child: Yes/No If yes, at what age & by the weaning diet. Any problems observed during weaning:

### Meal pattern at home

Sample of a day's meal: Daily requirements of chief nutrients :

Breakfast: Lunch: Dinner: Snacks:

୮୦୦, ପିତାଙ୍କ ଦୃଷ୍ଟିରେ ଶିକ୍ଷା - ଶିକ୍ଷାକଳାୟାମିତାବଳୀରୁ ଶିକ୍ଷାପ୍ରାପ୍ତିରୁ ୦୨ ଡିଗ୍ରୀ

୦୨, ଶିକ୍ଷାମୟ ଚିନ୍ତାମତ

୦୨ ଡିଗ୍ରୀ

How many hours does the child sleep during day and night?

Any sleep problems observed & how it is handled:

୨, ଶିକ୍ଷାପ୍ରାପ୍ତି

୦୨ ଡିଗ୍ରୀ

Does the child attend school?

If Yes, which grade and report of school performance:

୨୦, ଚିନ୍ତାମତ ଶିକ୍ଷାକଳାୟାମିତାବଳୀରୁ

How much time do the parents spend with the child?

Observation of parent-child interaction:

୨୦୦, ଶିକ୍ଷାପ୍ରାପ୍ତି ଚିନ୍ତାମତରୁ ଶିକ୍ଷାକଳାୟାମିତାବଳୀରୁ ଶିକ୍ଷାପ୍ରାପ୍ତିରୁ ୦୨ ଡିଗ୍ରୀ

୨୦୦, ଶିକ୍ଷାକଳାୟାମିତାବଳୀରୁ ଶିକ୍ଷାପ୍ରାପ୍ତିରୁ ୦୨ ଡିଗ୍ରୀ

୨୦୮, ଶିକ୍ଷାକଳାୟାମିତାବଳୀରୁ ଶିକ୍ଷାପ୍ରାପ୍ତିରୁ ୦୨ ଡିଗ୍ରୀ

୨୮, ଶିକ୍ଷାକଳାୟାମିତାବଳୀରୁ

## XVI] Bibliography

ଶିକ୍ଷାକଳାୟାମିତାବଳୀରୁ ଶିକ୍ଷାପ୍ରାପ୍ତିରୁ ୦୨ ଡିଗ୍ରୀ

## PROFORMA & GUIDELINE FOR CASE STUDY

୦, ଶିକ୍ଷାକଳାୟାମିତାବଳୀରୁ

**Name, Age, Sex, Religion, Marital status, Occupation, Source of health care, Date of admission, Provisional Diagnosis, Date of surgery if any.**

### II] Presenting complaints

Describe the complaints with which the child has been admitted to the ward.

୦୦୦, ଶିକ୍ଷାକଳାୟାମିତାବଳୀରୁ

- Obstetrical history of mother
- Prenatal & natal history
- Growth & Development (compare with normal)
- Immunization status
- Dietary pattern including weaning
- Nutritional status
- Play habits
- Toilet training habits
- Sleep pattern
- Schooling

୦୮, ଶିକ୍ଷାକଳାୟାମିତାବଳୀରୁ

Monthly income, expenditure on health, food, education

୮, ଶିକ୍ଷାକଳାୟାମିତାବଳୀରୁ

- i) History of present illness – onset, symptoms, duration, precipitating/ aggregating factors
- ii) History of past illness – Illnesses, hospitalizations, surgeries, allergies.
- iii) Family history – Family tree, family history of illness, risk factors, congenital problems, psychological problems.

୮୮, ଶିକ୍ଷାକଳାୟାମିତାବଳୀରୁ

২৬৬, **Description of disease:** Includes the followings

1. Definition
2. Related anatomy and physiology
3. Etiology & risk factors
4. Path physiology
5. Clinical features

ਟਰਕ, ਚੀਲੇ ਪਥਰਾਂ ਅਤੇ ਤਪਦੁੰਗਪਥਰ ਕਾਰੋਂ ਜਪਮਦੁੰਗ

Clinical features present in the book present in the patient

### IX] Investigations:-

Date	Investigation done	Result	Normal value	Inference
12/01/2023	Complete Blood Count (CBC)	Hemoglobin: 12.5 g/dL, Hematocrit: 38%, WBC: 10,000/mm <sup>3</sup> , Platelets: 150,000/mm <sup>3</sup>	Hemoglobin: 12-16 g/dL, Hematocrit: 36-46%, WBC: 4,000-11,000/mm <sup>3</sup> , Platelets: 150,000-400,000/mm <sup>3</sup>	Normal
12/01/2023	Urea Nitrogen (BUN)	10 mg/dL	7-20 mg/dL	Normal
12/01/2023	Creatinine	1.2 mg/dL	0.7-1.3 mg/dL	Normal
12/01/2023	Electrolytes (Na, K, Cl, Ca)	Na: 138 mEq/L, K: 4.0 mEq/L, Cl: 102 mEq/L, Ca: 9.5 mg/dL	Na: 135-145 mEq/L, K: 3.5-5.0 mEq/L, Cl: 98-108 mEq/L, Ca: 8.8-10.0 mg/dL	Normal
12/01/2023	Liver Function Tests (ALT, AST, ALP, Bilirubin)	ALT: 25 U/L, AST: 20 U/L, ALP: 100 U/L, Bilirubin: 1.0 mg/dL	ALT: 0-40 U/L, AST: 0-40 U/L, ALP: 40-120 U/L, Bilirubin: 0.1-1.2 mg/dL	Normal
12/01/2023	Thyroid Function Tests (TSH, Free T4)	TSH: 2.5 mIU/L, Free T4: 1.2 ng/dL	TSH: 0.1-4.0 mIU/L, Free T4: 0.8-1.8 ng/dL	Normal
12/01/2023	Prothrombin Time (PT)	12.5 seconds	11-14 seconds	Normal
12/01/2023	Partial Thromboplastin Time (PTT)	35 seconds	28-35 seconds	Normal
12/01/2023	Fibrinogen	400 mg/dL	200-500 mg/dL	Normal
12/01/2023	D-Dimer	0.5 mg/L	<0.5 mg/L	Normal
12/01/2023	Urinalysis	Specific Gravity: 1.020, pH: 6.0, Glucose: Negative, Protein: Negative, Hematuria: Negative, Leukocytes: Negative	Specific Gravity: 1.000-1.030, pH: 5.0-8.0, Glucose: Negative, Protein: Negative, Hematuria: Negative, Leukocytes: Negative	Normal

ੴ, ਤੰਦ੍ਰਹਮਤਮਦ੍ਰੁਗ . ਤਮਕਪਥੰਯੈ ਨਤਹਪਥੰਯੈ

- Aims of management
- Objectives of Nursing Care Plan

ੴ, ਤਮਕਪਥੰਥੀ ਤੰ ਫੰ ਹਮ ਤਮਫੁਜ

S.No

Drug (Pharmacologica 1 name)

Dose Frequency / Time Action Side effects & drug interaction

### Nurse's responsibility

ਸਫ਼, ਛਕਤੇ ਪਫ਼ੁਹ ਤੰ ਫੁੰ ਹਮ ਤਮਫ਼ੁਹ ;ਫ਼ੇ ਸ ਛਕਤੇ ਪਫ਼ੁਹ ਚਤਰਫ਼ਮੀ' ਫ਼(Short Term & Long Term

Plans)	Assessment	Nursing Diagnosis	Objective	Plan of care	Rationale	Implementation	Evaluation

૨૮૮૮, હવે ૩ વર્ષાપર્વ જપલદે

### Prognosis of the patient

गुट, कंल नवकंल चतवहतमी तमचवतन वनिगीम चंनपमदुन

गट, कषे ब्रीं तहम कषां दृदृषदृह

उत्तर, तममितमद्वयमेक

## EVALUATION CRITERIA FOR CASE STUDY

(Maximum Marks – 50)

SN.	Item	Marks
01.	Introduction.	03
02.	History and assessment.	05
03.	Comparative finding with patients.	10
04.	Theoretical knowledge and understanding of diagnosis.	05
05.	Nursing Process.	15
06.	Follow up care.	05
07.	Summary and conclusion.	05
08.	Bibliography.	02
	Total	50

**Note :-** One Medical and One Surgical Pediatrics Case study. 50 Marks each.



## CHILD HEALTH NURSING

### PROFORMA & GUIDELINE FOR CASE PRESENTATION

೮, ರೋಗಿಗಳಿಗೆ ಉಪಯುಕ್ತ

**Name, Age, Sex, Religion, Marital status, Occupation, Source of health care, Date of admission, Provisional Diagnosis, Date of surgery if any.**

#### II] Presenting complaints

Describe the complaints with which the child has been brought to the hospital

೯೯, ರೋಗಿಗಳಿಗೆ ರೋಗದ ವಿವರ ಕುರಿತು

- Obstetrical history of mother
- Prenatal & natal history
- Growth & Development, compare with normal (Refer Assessment Proforma).
- Immunization status
- Dietary pattern including weaning (Breast feeding relevant to age)
- Play habits
- Toilet training
- Sleep pattern
- Schooling

೧೦, ವಾರ್ಷಿಕ ಸರಾಸರಿ ಆದಾಯ ಮತ್ತು ಆರೋಗ್ಯ, ಆಹಾರ, ಶಿಕ್ಷಣ ಮೇಲಿನ ವೆಚ್ಚ. Monthly income, expenditure on health, food, education etc.

#### V] History of Illness

- i) History of present illness – onset, symptoms, duration, precipitating/aggravating factors
- ii) History of past illness – Illnesses, surgeries, allergies, medications
- iii) Family history – Family tree, history of illness in the family members, risk factors, congenital problems, psychological problems.

೧೧, ರೋಗದ ವಿವರ (Provisional & confirmed).

**Description of disease:** Includes the followings

2. Definition.
3. Related anatomy and physiology
4. Etiology & risk factors
5. Path physiology
6. Clinical features.

೧೨, ರೋಗಿಗಳಿಗೆ ಸಂಬಂಧಿಸಿದಂತೆ ದೃಢೀಕರಣ ಮತ್ತು ವಿವರ - ಉಪಯುಕ್ತ

Physical examination: with date and time.

Clinical features present in the book

Present in the patient

#### VIII] Investigations

Date Investigation done Results Normal value Inference

೧೩, ರೋಗದ ವಿವರ ಮತ್ತು ; ರೋಗಿಗಳಿಗೆ ಉಪಯುಕ್ತ

- Aims of management
- Objectives of Nursing Care Plan

૨, ઠતમંગ તમ દુનકુ

SNo

Drug(Pharmacological name)

Dose Frequency/ Time

Action Side effects & drug interaction

Nurse's responsibility

• Surgical management

• Nursing management

૨૬, હનતે પદુહ હં તમ ઘાંદુક Short Term & Long Term plan.

Assessment Nursing Diagnosis Objective Plan of care Rationale Implementation Evaluation

૨૭, કપે ભીં તહમ ઘાંદુદુપદુહકુ

It should include health education and discharge planning given to the patient.

૨૮૮, હતલહદુવે પે વિગીમ વંનપમદુનકુ

૨૮૯, નીં ન તં તલ વિગીમ ભૈ મકુ

૨૯, તમિતમદુભમેકુ

## EVALUATION CRITERIA FOR CASE PRESENTATION

(Maximum Marks – 50)

હતપનમતપં	ઠવનંગાં હં તી
૧૭ હવ દુનમદુનૈ ન ફવમભનપમ – વફવમભનપમકંનં	૦૮
૨૭ હતલફમતે – દમમક પ્કમદુનપમિક – હે હૈ હં તમ ઘાંદુક	૧૫
૩૭ મીમિભનપમદુમૈ વિવતમે મદુનંપલદુ	૦૫
૪૭ હવ . તમિંનપલદુ પગી વંનપમદુન – ફલવાળ	૧૦
૫૭ હે મ વિગીમ ટૈ પકે	૦૫
૬૭ હીલૈ પલંગાં તતં દુહમ તમ દુનક	૦૨
૭૭ હતલનલ વંનપલપવંનપલદુ	૦૩
૮૭ ઠપફપલહતંવીલ – તમિતમદુભમેક	૦૨
	ઠવનંગાં ૫૦

## CLINICAL EVALUATION: CHILD HEALTH NURSING

**Area :- Paed. Medical & Surgical Nursing. Maximum Marks –100**

Name of the Student

Year: Nursing Duration of Experience

S.No

Criteria

1 2 3 4

### KNOWLEDGE, SKILL & APPLICATION

1. Possess sound knowledge of principles of Paed Nsg
2. Has an understanding of the modern trends and current issues in paed nsg practice
3. Has knowledge of normal growth and development of children
4. Has adequate knowledge of paed nutrition and applies principles of normal therapeutic diet
5. Able to elicit health history of child and family accurately
6. Identifies need/problems of Children with **Medical & Surgical** problems
7. Able to plan, implement and evaluate care both preoperatively and post operatively
8. Able to calculate and administer medications to children accurately
9. Recognizes the role of play in children & facilitates play therapy for hospitalized children
10. Acts promptly in paediatric emergencies
11. Makes relevant observations, maintain records & reports promptly & effectively.
12. Skilful in carrying out physical examination, developmental screening and detecting deviations from normal
13. Able to carry out therapeutic regime related to children in accordance with principles of paediatric Nsg
14. Identifies opportunities for health education & rehabilitation and encourages parent participation in the care of the child
15. Demonstrates evidence of self learning by reading of current literature/seeking help from experts.

### Personality aspects

16. Professional grooming & turn-out
17. Able to think logically, alert, attentive and well informed
18. Communicates effectively
19. Enthusiastic & takes interest in clinical setting
20. Trust worthy and reliable
21. Courteous, tactful & considerate in all her dealings with colleagues, seniors, patients & family
22. Displays emotional maturity and leadership qualities.
23. Follows instructions & exhibits positive behavioral changes as and when required
24. Practices economy in relation to time, effort & material in all aspects of care
25. Complete assignments in time with self motivation and efforts.

Positive & Negative aspects. Signature of Student Signature of Clinical supervisor

### PROFORMA & GUIDELINE FOR HEALTH TEACHING.

Topic Selected :-

1. Name of the Student Teacher.
2. Name of the Supervisor.
3. Venue.
4. Date.
5. Time
6. Group.
7. Previous knowledge group.
8. General objectives.
9. Specific objectives.
10. A. V. Aids. used.

આંદ્ર વિત મંગલગી નમંભીવદુહ

Sr. No. Time Specific objectives Content T/L A. V. Aids Evaluation.  
activities  
References.

### EVALUATION CRITERIA FOR HEALTH TEACHING.

(Maximum Marks – 25)

SN	Criteria	Marks Allotted.	Marks Obtained
01.	Lesson plan.	6	
02.	Presentation.	5	
03.	Communication skill	3	
04.	A. V. Aids.	4	
05.	Relevance to the topic.	3	
06.	Group participation.	2	
07.	Bibliography /References.	2	
	Total	25	

Signature of Student

Signature of Clinical supervisor

# CLINICAL EVALUATION: CHILD HEALTH NURSING

## Area :- NICU (Maximum Marks – 100)

Name of the Student

Year:

**No**

Criteria 1 2 3 4

### KNOWLEDGE SKILL & APPLICATION.

1. Possess sound knowledge of principles of Paed Nsg and the modern trends and current issues in Paed Nsg practice
2. Is familiar with the NICU protocol for maintenance of asepsis and prevention of cross infection in NICU
3. Has knowledge and skill in assessment & care of New born
4. Possess knowledge and demonstrates skill in neonatal resuscitation
5. Has adequate knowledge, identifies needs and exhibit skill and efficiency in caring for the LBW infants
6. Makes relevant observations, maintains records & reports promptly & effectively
7. Has adequate knowledge regarding feeding and follows safe feeding practices
8. Able to calculate and administer medications to neonates accurately
9. Demonstrates ability to care for neonates in incubator and on ventilator.
10. Acts promptly in paediatric emergencies
11. Able to apply principles of paed nsg in the management of neonates under phototherapy.
12. Has knowledge of exchange transfusion
13. Able to identify early manifestations of common neonatal problems and manage accordingly
14. Identifies opportunities for health education and encourages parent participation in the care of the child
15. Demonstrates evidence of self learning by reading of current literature/seeking help from experts.

### PERSONALITY ASPECTS.

16. Professional grooming & turn-out
17. Able to think logically, alert, attentive and well informed
18. Communicates effectively
19. Enthusiastic & takes interest in clinical setting
20. Trust worthy and reliable
21. Courteous, tactful & considerate in all her dealings with colleagues, seniors, patients & family
22. Displays emotional maturity and leadership qualities.
23. Follows instructions & exhibits positive behavioral changes as and when required
24. Practices economy in relation to time, effort & material in all aspects of care
25. Complete assignments in time with self motivation and effort

### Positive & Negative aspects.

Signature of Student Signature of Clinical supervisor

### CHILD HEALTH NURSING

### PROFORMA & GUIDELINE FOR HEALTH TEACHING

Topic Selected :-

10. Name of the student teacher:
11. Name of the supervisor
12. Venue:
13. Date:
14. Time:
15. Group:
16. Previous knowledge of the group
17. AV aids used
18. General objectives
19. Specific objectives

જેમો વધુ સ્કોર્સ લેવા માટે જોઈએ  
 S. No. Time Specific  
 objectives  
 Content Teaching  
 Learning  
 Activities  
 A V Aids Evaluation

તમામ માર્ક્સો

## EVALUATION CRITERIA FOR HEALTH TEACHING

(Maximum Marks – 25)

S.No. Criteria Total Marks 12345

Lesson Plan.

Presentation.

Communication skill.

Preparation & effective use of A V

Aids.

Group participation.

08

05

05

04

03

Total 25

આંશિક સ્કોર્સ લેવા માટે જોઈએ - જેમો સમય લેવા માટે

(Maximum Marks : 50)

S.N.	Item	Marks
1	Adherence to format	02
2	Skill in Physical examination & assessment	10
3	Relevance and accuracy of data recorded	05
4	Interpretation of Priority Needs Identification of baby & mother	06
5	Bibliography	02
Total		25

- આંશિક સ્કોર્સ લેવા માટે જોઈએ - જેમો સમય લેવા માટે

(Maximum Marks : 50)

SN	Item	Marks
૧૭	આંશિક સ્કોર્સ લેવા માટે જોઈએ	૦૨
૧૮	આંશિક સ્કોર્સ લેવા માટે જોઈએ - જેમો સમય લેવા માટે	૧૦
૧૯	આંશિક સ્કોર્સ લેવા માટે જોઈએ - જેમો સમય લેવા માટે	૦૫
૨૦	આંશિક સ્કોર્સ લેવા માટે જોઈએ - જેમો સમય લેવા માટે	૦૫
૨૧	આંશિક સ્કોર્સ લેવા માટે જોઈએ - જેમો સમય લેવા માટે	૦૩
Total		૨૫

**CLINICAL SPECIALITY – II**  
**MEDICAL SURGICAL NURSING**  
**SUB SPECIALITY – CARDIO VASCULAR AND THORACIC NURSING**

Placement: II year

Hours of Instruction

Theory : 150 hours

Practical: 950 hours

Total : 1100 hours

**1. 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 research in the field of cardio vascular and thoracic nursing.

**Objective:**

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 and 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 & co-ordinate activities related to patient care.
11. Practice infection control measures
12. Identify emergencies and complications and take appropriate measures
13. Discuss the legal and ethical issues in cardio vascular and thoracic nursing
14. Assist patient 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.

Unit	Hrs	Content
I	5	<b>2. Introduction</b> <ul style="list-style-type: none"> <li>❑ Trends and recent development in the field of cardiology and CVT Nursing</li> <li>❑ Health problems related to CVT field</li> <li>❑ Concepts, principles and Nursing perspectives</li> <li>❑ Ethical and legal implications</li> <li>❑ Recent Research studies in the field of CVT Nursing and Evidence based nursing and its application in cardio vascular and thoracic nursing (to be incorporated in all the units)</li> </ul>
II	5	<b>3. Epidemiology</b> <ul style="list-style-type: none"> <li>❑ Hereditary psycho social factors, hypertension, smoking, obesity, diabetes mellitus etc</li> <li>❑ Health promotion, disease prevention, Life style modification conditions.</li> <li>❑ National health programs related to cardio vascular and thoracic conditions</li> <li>❑ Alternate system of medicine</li> <li>❑ Complementary therapies</li> </ul>
III	5	<b>Review of anatomy and physiology of cardio vascular and respiratory system</b> <ul style="list-style-type: none"> <li>❑ Review of anatomy and physiology of heart, lung, thoracic cavity and blood vessels. Embryology of heart and lung.</li> <li>❑ Coronary circulation, Pulmonary circulation, Systemic circulation</li> <li>❑ Hemodynamics and electro physiology of heart.</li> <li>❑ Bio-chemistry of blood in relation to cardio pulmonary function.</li> </ul>
IV	20	<b><u>Assessment and Diagnostic Measures</u></b> <ul style="list-style-type: none"> <li>• Radiologic examination of the chest: <ul style="list-style-type: none"> <li>• interpretation, chest film findings</li> </ul> </li> <li>• Electro cardiography (ECG): electrical conduction through the heart, basic electrocardiography, 12 lead electrocardiography determination <ul style="list-style-type: none"> <li>-EGC changes in: intraventricular conduction abnormalities Arrhythmias, ischemia and Infarction, atrial and ventricular enlargement, electrolyte imbalance.</li> </ul> </li> <li>• Echocardiography: echocardiography of cardiac structures in health and disease, newer techniques – indication, procedure, normal and deviation</li> </ul>
		<ul style="list-style-type: none"> <li>• Nuclear and other imaging studies of the heart: Magnetic Resonance Imaging</li> <li>• Stress test (TMT): indications and objectives, safety and pre intra and post care</li> <li>• Cardio electrophysiology procedures : diagnostic studies, interventional and catheter ablation, nursing care</li> <li>• Cardiac catheterization: indications, contraindications, preparation, procedure, interpretation of data, After care spirometry, Blood gases analysis, X-Ray chest electrophysiology procedures : diagnostic studies, interventional and catheter ablation, nursing care</li> <li>• Pulmonary function test : Bronchoscope and graphies.</li> <li>• Interpretation of diagnostic measures</li> <li>• Nurse's role in diagnostic test</li> <li>❑ Blood test: Blood specimen collection, Cardiac markers, Blood lipids, Hematologic studies, Blood cultures, Coagulation studies, Arterial blood gases, Blood Chemistries, cardiac enzyme studies, Serum Concentration of Selected drugs.</li> <li>❑ Interpretation and role of nurse</li> </ul> <p>Heart rate variability Mechanisms, measurements, pattern, factors, impact of intervention HRV.</p>
V	10	<b>Congenital Heart Diseases,</b> <ul style="list-style-type: none"> <li>❑ Etiology, clinical manifestations, diagnosis, prognosis related pathophysiology and nursing management of : <ul style="list-style-type: none"> <li>• Embryological development of heart.</li> <li>• Classification – cyanotic and acyanotic heart disease.</li> <li>• Tetralogy of Fallots.</li> <li>• Atrial Septal Defect, Ventricular Septal Defect., Eisenmenger's complex.</li> <li>• Patent ductus arteriosus, AP window</li> <li>• Truncus Arteriosus</li> </ul> </li> </ul>

		<ul style="list-style-type: none"> <li>• Transposition of great arteries.</li> <li>• Total Anomaly of Pulmonary Venous Connection.</li> <li>• Pulmonary stenosis, atresia.</li> <li>• Coarctation of aorta</li> <li>• Ebstein's anomaly</li> </ul> <p>Double outlet right ventricle, Single ventricle, Hypoplastic left heart syndrome.</p>
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Unit	Hrs	Content
VI	25	<p><b>Cardiac disorders and nursing management:</b></p> <ul style="list-style-type: none"> <li>□ Etiology, clinical manifestations, diagnosis, prognosis related pathophysiology, complications Rehabilitation drugs specific Diet specific and nursing management of: <ul style="list-style-type: none"> <li>• Ischaemic – heart disease Angina pectoris, Coronary artery disease myocardial Infarction</li> <li>• Inflammatory Heart diseases Endocarditis, Myocarditis, Pericarditis</li> <li>• Heart failure Acute, chronic, CCF</li> <li>• Rheumatic heart disease and other Valvular Diseases</li> <li>• Cardiomyopathy, dilated, restrictive hypertrophic, Cardiomegaly</li> <li>• Arrhythmias</li> <li>• Heart block</li> <li>• Cardiac emergencies</li> <li>• Angina of various types</li> </ul> </li> </ul> <p>Associated illnesses</p>
VII	10	<p><b>Altered pulmonary conditions:</b></p> <ul style="list-style-type: none"> <li>□ Etiology, clinical manifestations, diagnosis, prognosis related pathophysiology, Complications, Preventive measures, Rehabilitation, Patient education, Drugs specific, Diet specific and nursing management of: <ul style="list-style-type: none"> <li>• Bronchitis</li> <li>• Bronchial asthma</li> <li>• Bronchiectasis</li> <li>• Pneumonias</li> <li>• Lung abscess, lung tumour</li> <li>• Pulmonary tuberculosis, fibrosis, pneumoconiosis etc</li> <li>• Pleuritis, effusion</li> <li>• Pneumo, haemo and pyothorax</li> <li>• Interstitial Lung Disease</li> <li>• Acute and Chronic obstructive pulmonary disease (conditions leading to)</li> <li>• Cor pulmonale Acute respiratory distress syndrome Pulmonary embolism</li> </ul> </li> </ul> <p>Pulmonary Hypertension</p>



Unit	Hrs	Content
VIII	10	<b>Vascular disorders and nursing management</b> <ul style="list-style-type: none"> <li>❑ Etiology, clinical manifestations, diagnosis, prognosis related pathophysiology and nursing management of : <ul style="list-style-type: none"> <li>• Disorders of arteries</li> <li>• Disorders of the aorta</li> <li>• Aortic Aneurysms,</li> <li>• Aortic dissection</li> <li>• Raynaud's phenomenon</li> <li>• Peripheral arterial disease of the lower extremities</li> <li>• Venous thrombosis</li> <li>• Peripheral arterial disease of the lower extremities</li> <li>• Venous thrombosis</li> <li>• Varicose veins</li> <li>• Chronic venous insufficiency and venous leg ulcers</li> <li>• Pulmonary embolism</li> </ul> </li> </ul>
IX	10	<b>Cardio thoracic emergency interventions</b> <ul style="list-style-type: none"> <li>❑ CPR- BLS and ALS</li> <li>❑ Use of ventilator, defibrillator, pacemaker</li> <li>❑ Post resuscitation care</li> <li>❑ Care of the critically ill patients</li> <li>❑ Psychosocial and spiritual of critically ill</li> <li>❑ Stress management; ICU psychosis</li> </ul>
X	10	<b>Nursing Care of a patient with obstructive airway</b> <ul style="list-style-type: none"> <li>❑ Assessment</li> <li>❑ Use of artificial airway</li> <li>❑ Endotracheal intubation, tracheostomy and its care</li> <li>❑ Complication, minimum cuff leak, securing tubes</li> </ul> <b>Oxygen delivery systems.</b> <ul style="list-style-type: none"> <li>❑ Nasal Cannula</li> <li>❑ Oxygen mask, Venturi mask</li> <li>❑ Partial rebreathing bag</li> <li>❑ Bi-PAP and C-PAP masks</li> <li>❑ Uses, advantages, disadvantages, nursing implications of each.</li> </ul> <b>Mechanical Ventilation</b> <ul style="list-style-type: none"> <li>❑ Principles of mechanical ventilation</li> <li>❑ Types of mechanical ventilation and ventilators.</li> <li>❑ Modes of ventilation, advantages, disadvantages, complications.</li> <li>❑ PEEP therapy, indications, physiology and complications. Weaning off the ventilator.</li> </ul> <p>Nursing assessment and interventions of on ventilator patient.</p>
XI	10	<b>Pharmacology therapeutic to CVT condition</b> <ul style="list-style-type: none"> <li>❑ Pharmacokinetics</li> <li>❑ Analgesics / Anti inflammatory agents</li> <li>❑ Antibiotics, antiseptics</li> <li>❑ Drug reaction &amp; toxicity</li> <li>❑ Drug used in cardiac emergencies</li> <li>❑ Blood and blood components <ul style="list-style-type: none"> <li>• Antithrombolytic agents</li> <li>• Inotropic agents</li> <li>• Beta-blocking agents</li> <li>• Calcium channel blockers.</li> <li>• Vaso constrictors</li> <li>• Vaso dilators</li> <li>• ACE inhibitors.</li> <li>• Anticoagulents</li> <li>• Antiarrhythmic drugs.</li> <li>• Anti hypertensives</li> </ul> </li> </ul>

		<ul style="list-style-type: none"> <li>• Diuretics</li> <li>• Sedatives and tranquilizers.</li> <li>• Digitalis</li> <li>• Antilipemics</li> </ul> <input type="checkbox"/> Principles of drug administration, role and responsibilities of nurses and care of drugs
<b>XII</b>	<b>20</b>	<b>Nursing Care of patient undergoing cardio thoracic surgery</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Indications, selection of patient</li> <li><input type="checkbox"/> Preoperative assessment and preparation; counselling</li> <li><input type="checkbox"/> Intraoperative care: Principles of open heart surgery, equipment, anaesthesia, cardiopulmonary by pass.</li> <li><input type="checkbox"/> Surgical procedures for Coronary Artery Bypass Grafting, recent advances and types of grafts, angioplasty, Valve replacement or reconstruction, cardiac transplant, Palliative surgery and different Stents, vascular surgery, other recent advances.</li> <li><input type="checkbox"/> Thoracic surgery: lobectomy, pneumonectomy, tumour excision etc</li> <li><input type="checkbox"/> Immediate postoperative care: assessment, post operative problems and interventions: Bleeding, Cardiac tamponade, Low cardiac output, Infraction, Pericardial effusion, Pleural effusion, Pneumothorax, Haemothorax, Coagulopathy, Thermal imbalance, Inadequate., ventilation/ perfusion, Neurological problems, renal problems, Psychological problems.</li> </ul>
		<ul style="list-style-type: none"> <li><input type="checkbox"/> Chest physiotherapy</li> <li><input type="checkbox"/> Nursing interventions, complimentary therapy/ alternative systems of medicine.</li> <li><input type="checkbox"/> Intermediate and late post operative care after CABG, valve surgery, others.</li> </ul> Follow up care
<b>XIII</b>	<b>5</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Cardiac rehabilitation and preventive measures</li> <li><input type="checkbox"/> Process</li> <li><input type="checkbox"/> Physical evaluation</li> <li><input type="checkbox"/> Physical conditioning for cardiovascular efficiency through exercise</li> <li><input type="checkbox"/> Counseling</li> <li><input type="checkbox"/> Follow up care</li> <li><input type="checkbox"/> Preventive Measures</li> </ul>
	<b>5</b>	<b>Intensive Coronary Care Unit/intensive cardio thoracic unit:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Quality assurance <ul style="list-style-type: none"> <li>• Standards, Policies, Procedure protocol</li> <li>• Infection control; Standard safety measures</li> <li>• Nursing audit</li> <li>• Design of ICCU/ IRCU</li> <li>• Staffing; cardiac team (Respiratory team)</li> <li>• Burn out syndrome</li> </ul> </li> <li><input type="checkbox"/> Nurse's role in the management of I.C.C.U. and IRCU</li> <li><input type="checkbox"/> Mobile coronary care unity</li> <li><input type="checkbox"/> Planning inservice educational programme and teaching</li> </ul>

#### 4. PRACTICAL

Clinical practice in medical surgical cardio thoracic wards, intensive care units, cardio thoracic OPD, community preventive cardiology and operation theatres.

##### I. Practicals

**Total – 960 Hours**  
**1. 1 Weeks = 30 Hours**  
6 hrs per day x 5 days

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

5.

##### 6. Essential Nursing Skills

##### 7. Procedures Observed

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

##### I. Procedures Assisted

1. Arterial blood gas analysis
2. Thoracentesis
3. Lung biopsy
4. Computer assisted tomography (CAT Scan)
5. M.R.I.
6. Pulmonary angiography
7. Bronchoscopy
8. Pulmonary function test
9. ET tube insertion
10. Tracheostomy tube insertion
11. Cardiac catheterization
12. Angiogram
13. Defibrillation
14. Treadmill test
15. Echo cardiography
16. Doppler ultrasound
17. Cardiac Surgery
18. Insertion of chest tube
19. CVP Monitoring

20. Measuring pulmonary artery pressure by Swan-Ganz Catheter
21. Cardiac Pacing

## **II. Procedures Performed**

1. Preparation of assessment tool for CT client (Cardiac, thoracic and vascular).
2. ECG – Recording, Reading, Identification of abnormalities
3. Oxygen therapy –
  - Cylinder, central supply
  - Catheter, nasal canula, mask, tent
  - Through ET and Tracheostomy tube
  - Manual resuscitation bag
4. Mechanical ventilation
5. Spirometry
6. Tuberculin skin test
7. Aerosol therapy
8. Nebulizer therapy
9. Water seal drainage
10. Chest physiotherapy including – Breathing Exercise  
Coughing Exercises
11. Suctioning – Oropharyngeal, nasotracheal, Endotracheal  
Through tracheostomy tube
12. Artificial airway cuff maintenance
13. CPR
14. Care of client on ventilator
15. Identification of different – Arrhythmias  
Abnormal pulses, respirations  
B.P. Variation  
Heart sounds  
Breath sounds
16. Pulse oxymetry
17. Insertion
18. Bolus I.V. Injection
19. Life line
20. Maintenance of “Heplock”
21. Subcutaneous of Heparin
22. Obtaining leg measurements to detect early swelling in thrombophlebitis
23. Identification of Homans signs
24. Buerger – Allen exercises
25. Hemodynamic monitoring
26. Recording Flow sheet in ICCU, ICTU

## 8. Teaching Learning Activities

Teaching Methods	Clinical Experience
<ul style="list-style-type: none"> <li>• Lecture</li> <li>• Group Discussion</li> <li>• Interpersonal relationship studies</li> <li>• Demonstration of nursing procedures</li> <li>• Case presentation/ case studies</li> <li>• Seminars</li> <li>• Case conferences</li> <li>• Field trip (specialty Hospitals)</li> </ul>	<ul style="list-style-type: none"> <li>• Case Assignment</li> <li>• Establishing interpersonal relationship</li> <li>• Communication technique</li> <li>• History taking physical examination participation in case conference</li> <li>• Case presentations</li> <li>• Involvement in health education</li> <li>• Recreational and occupational therapy</li> <li>• Assisting in diagnostic procedures</li> <li>• Learns to take decisions according to priority needs</li> <li>• Write specific nursing care plan</li> <li>• Field trip to specialty hospitals.</li> </ul>

<b>9. Evaluation Criteria:</b>	<b>Internal</b>	<b>Theory</b>
	Unit Tests (2)	75
	Mid Term	50
	Pre Term	75
	<b>Total :</b>	<b>200</b>

### Practical Experience Assignments

Case study	:	02	(50 marks each)	50 x 2 =	100
Case Presentation	:	02	(50 marks each)	50 x 2 =	100
Care Plan	:	03	(50 marks each)	50 x 3 =	150
Clinical Performance Evaluation:		03	(100 marks each)	100 x 3 =	300
Practical Examination			Mid Term		50
			Pre Term		100
					<hr/> 800

Internal Assessment Total marks out of 100

External Assessment Total marks out of 100

### **Final Examinations :**

#### Theory

Internal	:	25
External	:	75
<b>Total</b>	:	<b>100</b>

#### Practical

Internal	:	100
External	:	100
<b>Total</b>	:	<b>200</b>

## **M.Sc. NURSING : CLINICAL SPECIALITY – II**

### **PROFORMA & GUIDELINE FOR CASE STUDY**

#### **Area :- (Maximum Marks – 50)**

01. Selection of patient.
02. Demographic data of the patient.
03. Medical history past and present illness.
04. Comparison of the patient's disease with book picture.
  - a) Anatomy and physiology.
  - b) Etiology.
  - c) Patho physiology.
  - d) Signs and symptoms.
  - e) Diagnosis - provisional & final
  - f) Investigations
  - g) Complications & prognosis.
05. Management:- Medical or Surgical
  - a) Aims and objectives.
  - b) Drugs and Medications.
  - c) Diet.
06. Nursing Management (Nursing Process approach)
  - a) Aims and objectives.
  - b) Assessment and specific observations.
  - c) Nursing diagnosis.
  - d) Nursing care plan (Short term & long term with rationale.)
  - e) Implementation of nursing care with priority.
  - f) Health teaching.
  - g) Day to day progress report & evaluation.
  - h) Discharge planning.
07. Drug Study.
08. Research evidence.
09. Summary and conclusion.
10. Bibliography.

## EVALUATION CRITERIA FOR CASE STUDY.

(Maximum Marks – 50)				
SN	Criteria	Marks allotted.	Marks obtained	Total
01.	Assessment	5		
02.	theoretical knowledge about disease	5		
03.	Comparative study of the patient's disease & book picture.	10		
04.	Management: Medical or Surgical.	5		
05.	Nursing Process.	15		
06.	Drug study.	3		
07.	Summary & conclusion including research evidence.	5		
08.	Bibliography.	2		
Total		50		

Signature of Student

Signature of Clinical supervisor

# M Sc NURSING: CLINICAL SPECIALITY – II

## PROFORMA & GUIDELINE FOR CASE PRESENTATION

### 1. I] Patient Biodata

**Name, Age, Sex, Religion, Marital status, Occupation, Source of health care, Date of admission, Provisional Diagnosis, Date of surgery if any.**

### II] Presenting complaints

Describe the complaints with which the child has been brought to the hospital

८८, वलपव मलवदवउपलै नंगले वलनलम िउपमलक Monthly income, expenditure on health, food, education etc.

### IV] History of Illness (Medical & Surgical)

i) History of present illness – onset, symptoms, duration, precipitating/aggravating factors

ii) History of past illness surgery, allergies, medications etc.

iii) Family history – Family tree, history of illness in the family members, risk factors, congenital problems, psychological problems etc.

८, वपहदवे पेक (Provisional & confirmed).

**Description of disease:** Includes the followings

1. Definition.

2. Related anatomy and physiology

2. Etiology & risk factors

3. Path physiology

5. Clinical features.

८८, लीले पलंका मंग उपदंगपवद वललंगपमदल ;कंगम – उपउमलद

Physical examination: with date and time.

Clinical features present in the book Present in the patient

### 2. VII] Investigations

Date Investigation done Results Normal value Inferences

८८८, डंदं हंम उमदल . ;उमकपलंका ऐलतहपलंकाद

a) Aims of management

b) Objectives of Nursing Care Plan

८८, लतमंग उमदलक

S.No	Drug (Pharmacological name)	Dose	Frequency/ Time	Action	Side effects & drug reaction
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Nurse's

responsibility

• Medical or Surgical Management.

• Nursing management

८, ललते पदह लंम लंंदक Short Term & Long Term plan.

Assessment Nursing

Diagnosis

Objective Plan of

care

Rationale Implementation Evaluation

८८, कपे लीं तहम लंंदददपदहक

**It should include health education and discharge planning given to the patient.**

८८८, लतवहदवे पे वलनलम वंगपमदलक

८८८, लउउं ल वलनलम लैमक

८८८, लमलतमदलक



**2. EVALUATION CRITERIA FOR CASE PRESENTATION**  
Maximum Marks – 50)

SN	Criteria	Marks Allotted	Marks Obtained	Total
1	Content Subjective & objective data.	08		
2	Problems & need Identified & Nsg. Care Plan	15		
3	Effectiveness of presentation	5		
4	Co-relation with patient & Book i. e. research evidence.	10		
5	Use of A. V. Aids	5		
6	Physical arrangement	2		
7	Group participation	3		
8	Bibliography & references	2		
	Total	50		

### 3. CLINICAL EVALUATION: COMPREHENSIVE NURSING CARE (Maximum Marks – 100 each)

Name of the Student

Year: II Year M.Sc Nursing

Duration of Experience:

S N	Criteria	1	2	3	4	5
I	<b>UNDERSTANDING OF PATIENT AS PERSON</b> 1. Rapport with patient/ family members. 2. Collects significant information 3. Knowledge about disease condition. 4. Knowledge about investigations. 5. Knowledge about treatment. 6. Knowledge about progress of the patient.					
II	<b>NURSING CARE PLAN</b> <b>A. Assessment of the condition of the patient.</b> 1. History taking – past & present health and illness. 2. Specific observation of the patient. 3. Nursing diagnosis. <b>B. Development of the short – term &amp; long term Nursing care plans.</b> 1. Identification of all problems in the patient/ family. 2. Prioritization & implementation of the plans. 3. Evaluation of the care given & replanning					
III	<b>TECHNICAL SKILL</b> 1. Economical & safe adaptation to the situation & available facilities. 2. Implements the procedure with skill speed & completeness.					
IV	<b>RECORDING &amp; REPORTING</b> 1. Prompt, precise, accurate & relevant. 2. Maintenance of clinical experience file.					
V	<b>HEALTH TEACHING</b> 1. Incidental/ planned teaching with principles of teaching & learning. 2. Uses visual aids appropriately					
VI	<b>PERSONALITY</b> 1. Professional appearance (uniform, dignity, tact fullness interpersonal relationship, punctuality etc. 2. Sincerely, honesty & Sense of responsibility.					
	<b>TOTAL MARKS</b>					

Positive & Negative aspects.

**10. Signature of Student**

**Signature of Clinical supervisor**

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Name of College

### EVALUATION OF SEMINARS

Date : \_\_\_\_\_

Name of the Student Nurse:

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Subject:

Topic:

Grade Given: \_\_\_\_\_ Name of evaluator : \_\_\_\_\_

S.N.	BASIC OF EVALUATION	5	4	3	2	1	REMARK
I	<b>Knowledge of subject matter</b> a. Organisation of subject matter b. Classification of ideas with appropriate and interesting examples c. Depth and mastery of subject matter d. Anticipated question and has prepared for answer e. Selection and organisation of A. V. aids f. Integration and co-relation with other subjects. g. Submitted in time for correction						
II	<b>Oragnisation and management of class</b> a. Budgeting of time b. Asked questions for classification c. Class room participation						
III	<b>Effectiveness of Seminar</b> a. Introduction of topic b. Ability to hold students attention c. Stimulate student participation						
IV	<b>Effectiveness of Seminar</b> a. Questioning clear and stimulating b. Maintaining learning atmosphere c. Use of black board						
V	<b>Personal appearance</b> a. Neatness and Professional appearance b. Degree of self confidence c. Language (Appropriate correct, clear, tone mannerism) d. Punctuality (Starting lesson, completing lesson)						
	<b>Total Hours out of 100</b>						

Evaluator's Comments:

Signature of the Student

Name of the College

## NURSING CARE PLAN EVALUATION

### i. B Sc Nursing Course

Name of the Student:

Year & Batch:

Name of the Patient:

Age:

Sex:

M.R.D. No. :

Ward No.

Bed No.

Area of Study : Medical/ Surgical/ Psychiatric

Diagnosis

Name of the Surgery

Date of Surgery

Date of Nursing Care given: From To

SN.	Details	Total Marks	Marks Obtained
1	Assessment	12	
2	Nursing Diagnosis	3	
3	Goal	2	
4	Outcome Criteria / Objectives	2	
5	Nursing Intervention	15	
6	Rationale	3	
7	Evaluation	3	
8	Nurses notes/ Progress report of the patient	10	
<b>Total</b>		<b>50</b>	

Remarks:

Teacher's Sign:

Student's Sign

Teacher's Name:

Date:

## **Clinical Speciality – II**

# **COMMUNITY HEALTH NURSING**

Placement : II Year

Hrs of Instruction: 150 hrs

### **Course Description:**

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

### **Objective:**

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 and multi-disciplinary 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 centre/Primary health centre/Community health centre and develop standards for community health nursing practice.

## **Course Outline**

<b>Unit</b>	<b>INC Requirement</b>	<b>Content</b>
<b>I</b>	<b>20</b>	<b><u>Epidemiology</u></b> <ul style="list-style-type: none"><li>• Concepts, scope, definition, trends , History and development of modern Epidemiology.</li><li>• Contribution of epidemiology &amp; its implication in nursing</li><li>• Epidemiological methods Measurement of health and Disease</li><li>• Health policies</li><li>• Epidemiological approaches &amp; study of disease causatives</li><li>• Health promotion</li><li>• Levels of prevention</li><li>• Epidemiology of Communicable diseases</li><li>• Epidemiology of Non-communicable diseases</li><li>• Emerging and re-emerging diseases Epidemics</li><li>• National Integrated disease surveillance programme</li><li>• Health information system</li><li>• Epidemiology study and reports</li><li>• Role of Community Health Nurse</li></ul>
<b>II</b>	<b>40</b>	<b><u>National Health and Family Welfare Programmes</u></b> <ul style="list-style-type: none"><li>• Objectives, organization/man- power /resources, activities and goals.</li><li>• Inter-sectoral approach Implementation, item/purpose, role and responsibilities of community health nurse.</li><li>• National Vector Borne Disease Control Programme (NVBDGP)</li><li>• National Filaria Control Programme</li><li>• National Leprosy Eradication Programme</li><li>• National programme for Control of Blindness</li><li>• National Iodine Deficiency disorders Control Programme.</li><li>• National Mental Health Programme</li><li>• National AIDS Control Programme</li><li>• National Cancer Control Programme</li></ul>



		<ul style="list-style-type: none"> <li>• NRHM</li> <li>• National FW programme</li> <li>• Reproductive and Child Health Programme</li> </ul> <p><b><u>Health Schemes:</u></b></p> <ul style="list-style-type: none"> <li>• ESI</li> <li>• CGHS</li> <li>• Health Insurance</li> </ul> <p><b><u>Visits</u></b> (ESIS hospital, CGHS, RCH Bureau, National AIDS Control Centre etc.,)_____</p>
<b>III</b>	<b>15</b>	<p><b><u>School Health</u></b></p> <ul style="list-style-type: none"> <li>• Introduction, definition, concepts, objectives, history of school health nursing.</li> <li>• Health assessment, Screening, identification, referral and follow up.</li> <li>• Safe school environment</li> <li>• Services, programme and plans -first aid, treatment of minor ailments</li> <li>• Inter-Sectoral Coordination</li> <li>• Adolescent health</li> <li>• Disaster, disaster preparedness, and management</li> <li>• Guidance and counseling</li> <li>• School health records- maintenance and its importance</li> <li>• Roles and responsibilities of community health nurse.</li> <li>• Visit to a School</li> </ul>
<b>IV</b>	<b>15</b>	<p><b><u>International Health</u></b></p> <ul style="list-style-type: none"> <li>• Global burden of disease and Global health rules to halt disease spread</li> <li>• Global health priorities and programmes</li> <li>• International quarantine and Health tourism.</li> <li>• International cooperation and assistance, International trade and travel.</li> <li>• Health and food legislation, laws, adulteration of food</li> <li>• Disaster management</li> <li>• Migration</li> <li>• International health agencies-World health assembly</li> <li>• International health issue and problems</li> <li>• International nursing practice standards</li> <li>• International health vis-a- vis national health</li> </ul>

		<ul style="list-style-type: none"> <li>• International health celebration days and their significance</li> <li>• Visit to UNICEF Office etc.,</li> </ul>
<b>V</b>	<b>15</b>	<p><b><u>Education and administration</u></b></p> <ul style="list-style-type: none"> <li>• Quality assurance</li> <li>• Standards, protocols, Policies, Procedures</li> <li>• Infection control, standard safety measures</li> <li>• Nursing audit</li> <li>• Design of Sub-Centre/Primary Health Centre/Community health Centre</li> <li>• Staffing, Supervision and monitoring – Performance appraisal</li> <li>• Budgeting</li> <li>• Material management</li> <li>• Role and responsibilities of different categories of personnel in community health</li> <li>• Referral chain-community outreach services</li> <li>• Transportation</li> <li>• Public relations</li> <li>• Planning in-service educational programme and teaching</li> <li>• Training of various categories of health workers and preparation of manuals</li> <li>• Visit to subcentre, PHC, CHC, hospital Infection Control Centre, Quality Control Centre if any, &amp; Inservice Education Department</li> </ul>
<b>VI</b>	<b>10</b>	<p><b><u>Geriatric</u></b></p> <ul style="list-style-type: none"> <li>• Concept ,trends, problems and issues</li> <li>• Aging process and changes</li> <li>• Theories of aging</li> <li>• Health problems and needs</li> <li>• Psycho-social stressors and disorders</li> <li>• Myths and facts of aging</li> <li>• Health assessment</li> <li>• Home for aged- various agencies</li> <li>• Care of elderly and rehabili-tation of elderly</li> <li>• Elderly abuse</li> <li>• Training and supervision of care givers</li> </ul>

Unit	Hours by INC	Content
		<ul style="list-style-type: none"> <li>• Government welfare measures-programmes for elderly and role of NGOs</li> <li>• Roles and responsibilities of Geriatric nurse in the community</li> <li>• Visit to Old age home</li> </ul>
<b>VII</b>	<b>10</b>	<p><b><u>Rehabilitation</u></b></p> <ul style="list-style-type: none"> <li>• Introduction: Concept, principles, trends, issues and Rehabilitation team</li> <li>• Models, Methods</li> <li>• Community based rehabilitation</li> <li>• Ethical issues and Rehabilitation Council of India</li> <li>• Disability and Rehabilitation- Use of various prosthetic devices</li> <li>• Rehabilitation of chronic diseases, Restorative rehabilitation and Vocational rehabilitation</li> <li>• Role of voluntary organizations</li> <li>• Psychosocial Rehabilitation</li> <li>• Restorative rehabilitation</li> <li>• Guidance and counseling</li> <li>• Welfare measures by Govt/Private sector</li> <li>• Roles and responsibilities of Community health nurse</li> <li>• <b>Visit</b> to Guidance and Counseling Centre</li> </ul>
<b>VIII</b>	<b>10</b>	<p><b><u>Community Psychiatry</u></b></p> <ul style="list-style-type: none"> <li>• Magnitude, trends and issues</li> <li>• National Mental Health Program-Community mental health program</li> <li>• The Changing Focus of care, the Public Health Model, Case management, Collaborative care and Crisis intervention</li> <li>• Welfare agencies</li> <li>• The community as Client <ul style="list-style-type: none"> <li>- Primary Prevention</li> <li>- Populations at Risk</li> <li>- Secondary prevention</li> <li>- Tertiary Prevention</li> </ul> </li> <li>• Community based rehabilitation</li> <li>• Human rights of mentally ill</li> <li>• Role of Community health nurse</li> </ul> <p>Visit to Human Rights Office</p>

Unit	Hours by INC	Content
<b>IX</b>	<b>15</b>	<p><b><u>Occupational health</u></b></p> <ul style="list-style-type: none"> <li>• Introduction: History of Occupational health nursing, trends, issues, definition, aims and objectives.</li> <li>• Workplace safety, Salient features of work environment.</li> <li>• Ergonomics and Ergonomic solutions</li> <li>• Occupational environment-Physical and social. Decision making, Critical thinking.</li> <li>• Occupational hazards of different categories-physical, chemical, biological, mechanical, Accidents, Foreign bodies</li> <li>• Occupational diseases and disorders</li> <li>• Measures for Health promotion of workers, Prevention and control of occupational diseases, disability, limitation and rehabilitation</li> <li>• Women and occupational health</li> <li>• Occupational Educational and Counseling</li> <li>• Violence at Workplace</li> <li>• Child labour</li> <li>• Disaster preparedness and management</li> <li>• Legal issues, Legislation, labour unions, ILO and WHO recommendations, Factories act ESI act.</li> </ul> <p>Role of Community health nurse, Occupational health team</p> <p>Visit to an industry/factory</p>

**Practical hrs****Total =960**

		1	week=30hours
SN	Deptt./Unit	No. of Week	Total hours
1	National Health and Family Welfare programmes(communitary health nursing)	17	510 hrs
2.	School health	3	90 hrs
3.	International health (Celebration of Days)	2	60hrs
4.	Administrative (SC/PHC/CHC)	2	60hrs
5.	Occupational health	2	60hrs
6.	Community Mental Health	2	60 hrs
7.	Geriatric	2	60 hrs
8.	Rehabilitation	2	60 hrs
	Total	32 weeks	960 hrs

**Categorization of practical activities****Observed**

MCH Office and DPHNO  
 CHC/First referral Unit/FRU  
 Child Guidance Clinic  
 Institute/Unit for mentally challenged  
 District TB Centre  
 AIDS control society  
 Filariasis clinic  
 RCH clinic  
 STD Clinic  
 Leprosy clinic  
 Community based rehabilitation unit  
 Cancer Centres  
 Palliative care  
 Home for Old age  
 Mental health units  
 De-addiction centres  
 School Health services/Clinics  
 Industry  
 Selected industrial health centres  
 ESI Unit  
 Municipality/Corporation Office  
 Zilla Parishad  
 Urban Health Centres  
 Laparoscopic sterilization  
 Vasectomy  
 All Clinics related to RCH  
 Monitoring of national health and family welfare programmes

**Assisted**

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

## **Performed**

- Conduct various clinics
- Participate in baseline and specific surveys in urban and rural community
- School health assessment
- Health survey and Statistical analysis of data of surveys conducted.
- Home visiting and family health care
- Health assessment
- Imparting incidental and planned health teachings.
- Drug administration as per the protocols
- Treatment of minor ailments
- Investigating outbreak of epidemic
- Screening for leprosy. TB and non communicable disease
- Presumptive and radical treatment for Malaria
- Counselling
- Report writing
- Referrals
- Writing a project proposal
- Material management-requisition for indent, condemnation, inventory, maintenance.
- Training and Supervision of various categories of personnel at urban and rural setting.
- Evaluation of health programme
- Visits: Industry, NGO, rural hospital, DHO and BDO.

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# **COMMUNITY HEALTH NURSING**

**Placement: Second year**

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## **EVALUATION**

### **Internal assessment (theory):**

### **Max Marks**

Periodical Exams-2

(Mid-term-50 & Pre-final-75 marks)

Marks: 125

Seminar-2

Marks: 50

**For Internal assessment marks 175 be converted out of 25**

### **Internal assessment (practical):**

<b>SN</b>	<b>Assignments</b>	<b>Marks</b>
1	Family Care Study Urban-1	50
2	Family Care Study Rural-1	50
3	Family Health Care Plan - 2	50
4	Home Procedure Evaluation-2	100
6	Training of different categories of health personnel	100
7	School health Programme	100
8	Health Talk-2	200
9	Clinical evaluation in different areas of placement	100

**For Practical Experience Internal assessment marks 750 to be converted out of 100**

#### **1.EVALUATION CRITERIA FOR SCHOOL HEALTH PROGRAMME (50 Marks)**

<b>SN</b>	<b>Assignments</b>	<b>Marks</b>
1	Organization for school / checkup programme	08
2	Assessment to find out any deviation	10
3	Knowledge and application of scientific practice (Head to foot examination of child)	08
4	Communication skill with child, parent & teacher	04
6	Action taken including Health Teaching & referrals	08
7	Reporting to supervisor, parents and teacher	06
8	Recording on assessment proforma	06
	<b>Total</b>	<b>50</b>

## **I GUIDELINE FOR FAMILY HEALTH SURVEY**

The students will acquire the knowledge in relation to -

- a) To conduct simple family health survey in the community.
- b) To be able to use survey card as a tool to collect survey data.
- c) To prepare various tables for the tabulation of collected data.
- d) To be able to interpret and present the data with the help of graphs and charts and compare with the national norms.
- e) To evaluate the continuity of family oriented health care based on survey.
- f) To maintain records and reports allowed by survey.

## **II GUIDELINE FOR COMMUNITY DIAGNOSIS**

The students will acquire the knowledge in relation to -

- a) To select the significant public health problem to carry out community diagnosis.
- b) To be able to follow the steps of community diagnosis.
- c) To carryout assessment of selected group to identify deviation from normal in the community.
- d) To be able to summarize and interpret the data followed by presentation.
- e) To apply principles of epidemiology, levels of preventions will preparing future plans.
- f) To complete report and records.

## **III GUIDELINE FOR SCHOOL HEALTH PROGRAMME :**

The students will acquire the knowledge in relation to -

- a) To be able to plan, organize and implement school medical checkup of the school children.
- b) To be able to identify deviation from normal while doing complete medical checkup of the school children.
- c) To complete the records on the school child assessment proforma and in the register.
- d) To be able to give health information to the school children and their parents.
- e) To use appropriate referral services.

## **IV GUIDELINE FOR EDUCATIONAL VISIT TO COMMUNITY HEALTH AGENCIES:**

Objectives: Student should able to

- i) Prepare a list of community health agencies in her field.
- ii) Explain how to organize educational visit.
- iii) To get acquainted with agency historical background, physical setup, broad policies & objectives and financial support.
- iv) To be able to - describe detailed organization structure of agency List the broad areas of activity



- Identify role of organization dealing with health problem promoting primary care, education and training.

## **V GUIDELINES FOR PUBLIC HEALTH ADMINISTRATION (MAY NOT BE FOR EVALUATION)**

The students will acquire the knowledge in relation to

- a) To review the knowledge about public health administration at district level and selected Urban Public Health Centres.
- b) To acquire knowledge related to principles of management applied to public health and public health nursing practice field.
- c) To study system of procedures, work routines recordings and reporting being practiced in these practice field.
- d) To get an opportunity to act as a team leader.
- e) To identify needs for re-planning and understand evaluation as an essential component of re-planning in C.H. Nsg. services.
- f) Able to prepare an organizational chart of (i) District Health Office, (ii) Urban Public Health Center (iii) Child Welfare Center, (iv) Rural Hospital, (v) Community Health Center, (vi) P.H.C.

## **VI GUIDELINE FOR COMMUNITY IDENTIFICATION**

This particular exercise helps the students in community identification and develops a community profile. Learns the systematic way of gathering data in the community aspects and liabilities in term of community health and illness.

**Objectives:** At the end of experience should able to -

- 1) Explain the importance of community identification
- 2) Systematically gather health related data about selected community.
- 3) Develop community profile
- 4) Identify health and health related resources in the community.
- 5) Examine relationship between data gathered to health and well being of the community.
- 6) Identify biological, physical and social factors that have bearing on the health of the community.
- 7) Use the information collected for community identification for necessary action.

**Community Identification includes**

### **1. Geographic Characteristics**

Name of the locality or area  
 Boundaries  
 Important roads, street, buildings  
 Important landmarks  
 Seasons and months  
 Prepare a map of the area  
 Total area

## **2. Demographic Characteristics**

### **a) Total population**

Total Families

Average size of family

Population distribution according to Age & Sex

Education

Occupation

Income

Caste, religion, language

### **b) Vital health events**

Birth rate

Death rate

Infant mortality rate

Morbidity rate

Specific morbidity

### **c) Special Health risk groups**

(Infant, Toddlers, Antenatal Mothers, Lactating mothers, Antenatal multi problem family)

## **3. Environmental Characteristics**

### **a) Houses - Number**

Type

Living space per head

Other facilities (Bath, Kitchen, Toilet, Electricity, Water supply - Safe/unsafe)

### **b) Waste disposal and waste water disposal**

- Collection and removal of soil waste

- Collection and removal of water waste

- Vector control measures

- Environmental sanitarium

### **c) Structural organization for environmental sanitation services**

### **d) Educational opportunities**

Schools

Private institution

College

Vocational institutions

#### **4. Social Environment**

- Local administration - municipality / gram panchayat
- Community organization
- Youth welfare organization
- Mahila Mandals
- Trade Union Organizations
- Labour units
- Business organizations
- Statutory bodies
- Panchayat
- Counsellors
- Executive committees
- Leadership Pattern

#### **5. Channels of communications : Official, Non-official**

- Common meeting places used
- Chaupal, community centre, hall
- Important communicators
- Traditional like barber, teachers, retired people
- Mechanism of communications
- Fairs and festivals, religious meetings and official meetings
- Media of communications
- Radio, T.V. and Cinema

#### **6. Resources**

- a) Economic resources of community
- b) Institutional resources
- c) Human resources
- d) Natural resources

#### **7. Health knowledge, Beliefs and practices**

- About health and disease
- Outlook on cause of disease, spread and presentation of disease
- Existing health practices related to prevention, care of some specific illness
- Superstitions related food and health practices
- Promotional health practices, food, rest, relaxation, recreation, games etc
- Attitude towards health agencies - positive or negative, Health programmes and community organization.

## **8. Health problems as felt by the community**

- Major health problem and needs
- Priority problems as felt by the people or community leaders

## **9. Factors that can help or hinder community health actions**

Success of these information

- Health and health allied resources
- Community people
- Community leaders - formal or informal
- Census records

## ***V. GUIDE LINE FOR FAMILY CARE STUDY:***

- 1) Introduction & objectives
- 2) Assessment of data – subjective & objective
  - i) Data related to
    - Environment & Sanitation
    - Immunization status of <5 children
    - Family planning practices
    - Nutritional status
    - Chronic health problems in the family
  - ii) Assessment of family members and writing health summary specifically vulnerable groups and high risk individuals (including physical, mental and social health aspects.)
- 3) Health needs identification on priority basis considering family as unit of service
- 4) Planning for Family Oriented Care (FOC)
  - i) Objective of FOC
  - ii) Short term Home nursing care plan
  - iii) Long term Home nursing care plan
- 5) Implementation of FOC, with scientific rationale; adaptation in home situation.
- 6) Technique & skill in home nursing procedures with rationale
- 7) Planning & implementing health teaching
  - i) Individual or group
  - ii) Use of simple AV aids
- 8) Specific dietary plan & nutrition rehabilitation
- 9) Drug study and home care if necessary
- 10) Evaluation of home nursing care
  - i) Review short & long term plan
  - ii) Re-planning and future plans
- 11) Use of table and groups where ever necessary.

## **VII. PROFORMA & GUIDELINE FOR HEALTH TEACHING**

### **Topic Selected: -**

1. Name of the student teacher:
2. Name of the supervisor
3. Venue:
4. Date:
5. Time:
6. Group:
7. Previous knowledge of the group
8. AV aids used
9. General objectives
10. Specific objectives

### **Lesson plan for health talk**

S. No. Time Specific  
objectives  
Content Teaching  
Learning  
Activities  
A V Aids Evaluation

**M. Sc. Nursing**  
**CLINICAL SPECIALITY – II**  
**MEDICAL SURGICAL NURSING –**  
**CRITICAL CARE NURSING**

**Placement: II Year**

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

**Course Description:**

This course is designed to assist students in developing expertise and in- depth knowledge in the field of Critical Care Nursing. Students are able to develop advanced skills in caring for critically ill patients using nursing process. It enables them to function as critical care nurse practitioner/ specialist. It further enables them 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. Elicit trends and issues related to Critical Care Nursing.
2. Describe the epidemiology, etiology, patho physiology and diagnostic assessment of critically ill patients.
3. Describe the various drugs used in critical care and the nurse's responsibility.
4. Perform physical, psychosocial and spiritual assessment.
5. Demonstrate advance skills/ competence in managing critically ill patients including Advance Cardiac Life Support.
6. Demonstrate skills in handling various equipments/ gadgets used for critical care.
7. Apply nursing process in the care of critically ill patients.
8. Enhance team work and coordinate activities related to patient care.
9. Practice infection control measures.
10. Assess and manage pain.
11. Discuss the legal and ethical issues in critical care nursing.
12. Assist patients and their family to cope with emotional and spiritual distress and grief.
13. Assist in various diagnostic, therapeutic and surgical procedures
14. Incorporate evidence based nursing practice and identify the areas of research in the field of critical care nursing.
15. Identify the sources of stress and manage burnout syndrome among health care providers.
16. Teach and supervise nurses and allied health workers.
17. Design a layout of ICU and develop standards for critical care nursing practice.
18. Identify complications and take appropriate measures.

**Course content:**

Unit	Hours	Content
<b>I</b>	<b>5</b>	<b>Introduction to Critical Care Nursing</b> <ul style="list-style-type: none"> <li>• Historical review – Progressive patient care (PPC)</li> <li>• Review of anatomy and physiology of vital organs, fluid and electrolyte balance.</li> <li>• Concepts of Critical Care Nursing</li> <li>• Principles of Critical Care Nursing</li> <li>• Scope of Critical Care Nursing</li> <li>• Critical Care unit set up including equipments supplies, use and care of various type of monitors and ventilators</li> </ul> Flow sheets.
<b>II</b>	<b>10</b>	<b>Concept of Holistic care applied to critical care nursing practice</b> <ul style="list-style-type: none"> <li>• Impact of critical care environment on patients:- <ul style="list-style-type: none"> <li>○ Risk factors, Assessment of patients, Critical care psychosis, pretension and nursing care for patients affected with psycho physiological and psychosocial problems of critical care unit, caring for the patients, family, family teaching.</li> </ul> </li> <li>• The dynamics of healing in critical care unit – therapeutic touch, Relaxation, Music therapy, Guided Imagery, acupressure.</li> <li>• Stress and burnout syndrome among health team members.</li> </ul>
<b>III</b>	<b>14</b>	<b>Review:</b> <ul style="list-style-type: none"> <li>• Pharmacokinetics.</li> <li>• Analgesics / Anti inflammatory agents</li> <li>• Antibiotics, antiseptics</li> <li>• Drug reaction and toxicity</li> <li>• Drugs used in critical care unit (inclusive of inotropic, life saving drugs)</li> <li>• Drugs used in various body systems</li> <li>• IV fluids and electrolytes</li> <li>• Blood and blood components</li> <li>• Principles of drug administration, role of nurses and care of drugs</li> </ul>
<b>IV</b>	<b>5</b>	<b>Pain management</b> <ul style="list-style-type: none"> <li>• Pain and Sedation in Critically ill patients</li> <li>• Theories of pain, types of pain, pain assessment, systemic responses to pain.</li> <li>• Pain management- pharmacological and non- pharmacological measures</li> <li>• Placebo effect</li> </ul>
<b>V</b>	<b>5</b>	<b>Infection control in intensive care unit</b> <ul style="list-style-type: none"> <li>• Nosocomial infection in intensive care unit, methicillin resistant staphylococcus aureus (MRSA), Disinfection, Sterilization, Standard safety measures, Prophylaxis for staff.</li> </ul>
<b>VI</b>	<b>10</b>	<b>Gastrointestinal System:</b> <ul style="list-style-type: none"> <li>• Causes, Pathophysiology clinical types, Clinical features, diagnosis, prognosis, Management: Medical, surgical and Nursing management of:- Acute Gastrointestinal Bleeding, Abdominal injury, Hepatic Disorders:- Fulminant hepatic failure, Hepatic encephalopathy, acute Pancreatitis, Acute intestinal obstruction, perforative peritonitis.</li> </ul>
<b>VII</b>	<b>10</b>	<b>Renal System:</b> <ul style="list-style-type: none"> <li>• Causes, pathophysiology, Clinical types, Clinical features, diagnosis, prognosis, Management: Medical, Surgical and Nursing management of:- Acute Renal Failure, Chronic Renal Failure, Acute tubular necrosis, Bladder trauma</li> <li>• Management Modalities: Hemodialysis, Peritoneal Dialysis, Continuous Ambulatory Peritoneal Dialysis, Continuous arterio venous hemodialysis, Renal Transplant.</li> </ul>

Unit	Hours	Content
VIII	10	<b>Nervous System</b> <ul style="list-style-type: none"> <li>Causes, Pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: Medical, Surgical and Nursing management of:- Common Neurological Disorders:- Cerebrovascular disease, Cerebrovascular accident, Seizure disorders, GuilleinBarre- Syndrome, Myasthenia Gravis, Coma, Persistent vegetative state, Encephalopathy, Head injury, Spinal cord injury.</li> <li>Management modalities: Assessment of Intracranial pressure, management of intracranial hypertension, Craniotomy</li> <li>Problems associated with neurological disorders: thermo regulation, Unconsciousness, Herniation syndrome.</li> </ul>
IX	5	<b>Endocrine System</b> <ul style="list-style-type: none"> <li>Causes, Pathophysiology, Clinical types, Clinical features, diagnosis, prognosis, Management: Medical, Surgical and Nursing Management of: Hypoglycemia, Diabetic Ketoacidosis. Thyroid crisis, Myxoedema, Adrenal crisis, Syndrome of Inappropriate secretion Antidiuretic Hormone (SIADH)</li> </ul>
X	10	<b>Management of other Emergency Conditions:</b> <ul style="list-style-type: none"> <li>Mechanism of injury, Thoracic injuries, abdominal injuries, pelvic fractures, complications of trauma, Head injuries.</li> <li>Shock: Shock syndrome, Hypovolemic, cardiogenic, Anaphylactic, Neurogenic and Septic shock.</li> <li>Systemic inflammatory Response: The inflammatory response, multiple organ dysfunction syndromes.</li> <li>Disseminated Intravascular Coagulation</li> <li>Drug Overdose and poisoning,</li> <li>Acquired Immunodeficiency Syndrome (AIDS)</li> </ul>
XI	20	<b>Cardiovascular emergencies:</b> <ul style="list-style-type: none"> <li>Principles of Nursing in caring of patient's with Cardiovascular disorders</li> <li>Assessment: cardiovascular system: Heart sounds, Diagnostic studies:- Cardiac enzymes studies, electrocardiographic monitoring, Holter monitoring, Stress test. Echo cardiography, Coronary angiography, Nuclear medicine studies.</li> <li>Causes, Pathophysiology, clinical types, Clinical features, prognosis, Management: Medical, Surgical and Nursing management of:- Hypertensive crisis, Coronary artery disease, acute Myocardial infarction, Cardiomyopathy, Deep vein thrombosis, Valvular diseases, Heart block, Cardiac arrhythmias &amp; conduction disturbances, Aneurysms, Endocarditis, Heart failure cardio pulmonary resuscitation BCLS/ ACLS.</li> <li>Management Modalities: Thrombolytic therapy, pacemaker – temporary and permanent, percutaneous transluminal coronary angioplasty, Cardioversion, Intra Aortic balloon pump monitoring, Defibrillation, Cardiac surgery Coronary Artery Bypass Grafts (CABG / MICAS), Valvular surgeries, Heart Transplantation, Autologous blood transfusion, Radiofrequency Catheter Ablation.</li> </ul>
XII	15	<b>Respiratory System</b> <ul style="list-style-type: none"> <li>Acid – base balance and imbalance</li> <li>Assessment: History and Physical Examination</li> <li>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</li> <li>Causes pathophysiology, Clinical types, clinical features, prognosis, Management: Medical, Surgical and Nursing management of common pulmonary disorders:- Pneumonia, status asthmaticus, interstitial lung disease, Pleural effusion, Chronic obstructive pulmonary disease, Pulmonary Tuberculosis, Pulmonary edema, Atelectasis, pulmonary embolism. Acute respiratory failure, Acute Respiratory distress syndrome (ARDS), chest trauma, Haemothorax, Pneumothorax.</li> <li>Management modalities:- Airway Management.</li> <li>Ventilatory Management:- Invasive, non-invasive, long term mechanical ventilations</li> <li>Bronchial Hygiene:- Nebulization, deep breathing exercise, chest physiotherapy, postural drainage, Inter Costal Drainage, Thoracic surgery.</li> </ul>
Unit	Hours	Content



<b>XIII</b>	<b>7</b>	<b>Burns</b> <ul style="list-style-type: none"> <li>• Clinical types, classification, pathophysiology, clinical features, assessment, diagnosis, prognosis, Management: Medical, Surgical and Nursing management of burns.</li> <li>• Fluid and electrolyte therapy – calculation of fluids and its administration</li> <li>• Pain management</li> <li>• Wound care</li> <li>• Infection control</li> <li>• Prevention and management of burn complications</li> <li>• Grafts and flaps</li> <li>• Reconstructive surgery</li> <li>• Rehabilitation</li> </ul>
<b>XIV</b>	<b>5</b>	<b>Obstetrical Emergencies</b> <ul style="list-style-type: none"> <li>• Causes, pathophysiology, clinical types, clinical features, prognosis, Management: Medical, Surgical and Nursing management of: Ante partum hemorrhage, Pre eclampsia, eclampsia, Obstructed labor and ruptured uterus, Post partum hemorrhage, puerperal sepsis, Obstetrical shock.</li> </ul>
<b>XV</b>	<b>10</b>	<b>Neonatal Pediatric emergencies</b> <ul style="list-style-type: none"> <li>• Causes, pathophysiology, Clinical types, Clinical features, Prognosis, Management: Medical, surgical and Nursing management of <ul style="list-style-type: none"> <li>- Neonatal emergencies</li> </ul> </li> <li>• Asphyxia Neonatorum, Pathological Jaundice in Neonates, Neonatal seizures, Metabolic disorders, Intra cranial Hemorrhage, Neonatal Sepsis, RDS/ HMD (Respiratory Distress Syndrome/ Hyaline Membrane Disease), Congenital disorders:- <ul style="list-style-type: none"> <li>- Cyanotic heart disease, tracheo esophageal fistula, congenital hyper tropic pyloric stenosis, imperforate anus</li> <li>- Pediatric emergencies</li> </ul> </li> </ul> <p>Dehydration, Acute broncho pneumonia, acute respiratory distress syndrome, poisoning, foreign bodies, seizures, traumas, status asthmaticus.</p>
<b>XVI</b>	<b>5</b>	<b>Other emergencies</b> <ul style="list-style-type: none"> <li>• Ophthalmic: eye injuries, Glaucoma, retinal detachment</li> <li>• Ear, Nose, Throat: Foreign bodies, Stridor, bleeding, peri tonsillar abscess, acute allergic conditions.</li> <li>• Psychiatric emergencies, suicide</li> <li>• Crisis intervention</li> </ul>
<b>XVII</b>	<b>2</b>	<b>Legal and ethical issues in critical care – Nurse’s role</b> <ul style="list-style-type: none"> <li>• Brain death</li> <li>• Organ donation and Counseling</li> <li>• Do not Resuscitate (DNR)</li> <li>• Euthanasia</li> <li>• Living will</li> </ul>
<b>XVIII</b>	<b>2</b>	<b>Quality assurance</b> <ul style="list-style-type: none"> <li>• Standards, protocols, policies, procedures</li> <li>• Infection control; Standard safety measures</li> <li>• Nursing audit</li> <li>• Staffing</li> <li>• Design of ICU/ CCU</li> <li>• Areas of research in ICU</li> </ul>

## PRACTICAL

Clinical practice in critical care units like coronary care unit, cardio thoracic intensive care units, Medical, Surgical and Neuro/ neurosurgical ICUs, Emergency Department, Operating Room, Dialysis unit, Transplant room. Trauma care units.

## PRACTICAL

**Total = 960 Hours**

**1 Week = 30 Hours**

SN.	Dept./ unit	No. of Week	Total Hours
1	Medical Ward	1	30 Hours
2	Surgical Ward	1	30 Hours
3	Burns Unit	2	60 Hours
4	Cardio Thoracic Ward	2	60 Hours
5	Medical ICU	4	120 Hours
6	Surgical ICU	4	120 Hours
7	Neuro/ neurosurgical ICU	4	120 Hours
8	Cardio Thoracic ICU	2	60 Hours
9	CCU	2	60 Hours
10	Emergency Department	1	30 Hours
11	Operating Room	2	60 Hours
12	Dialysis Unit	2	60 Hours
13	Transplant Room	1	30 Hours
14	Pediatric / NICU	2	60 Hours
15	Labor Room	2	60 Hours
	<b>Total</b>	<b>32 Weeks</b>	<b>960 Hours</b>

## ESSENTIAL CRITICAL CARE NURSING SKILLS

Health assessment

Nursing care plan

ECG recording

CPR

Ventilator set up

### I. Procedures Observed

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

### I. Procedures Assisted

1. Advanced life support system
2. Basic cardiac life support
3. Arterial line/ arterial pressure monitoring / blood taking
4. Arterial blood gas estimation
5. ECG recording
6. Blood transfusion
7. IV cannulation therapy
8. Arterial Catheterization
9. Chest tube insertion
10. Endotracheal intubation
11. Ventilation
12. Insertion of central line/ CVP line
13. Connection of dialysis machine

## **I. Procedure performed:**

1. Airway management
  - a. Application of oropharyngeal airway
  - b. Oxygen therapy
  - c. CPAP ( Continuous Positive Airway pressure)
  - d. Care of tracheostomy
  - e. Endo tracheal extubation
  - f. Suctioning - Oral - Naso tracheal
2. Cardiopulmonary resuscitation, Basic cardiac life support ,ECG
3. Monitoring of critically ill patients – clinically with monitors, capillary refill time (CRT) assessment of jaundice, ECG
4. Gastric lavage
5. Assessment of critically ill patients  
Identification and assessment of risk factors, Glasgow coma scale, and dolls eye movement, arterial pressure monitoring, cardiac output/ pulmonary artery pressure monitoring, and detection of life threatening abnormalities.
6. Admission and discharge of critically ill patients
7. Nutritional needs- gastrostomy feeds, jejunostomy feeds, TPN, formula preparation and patient education.
8. Assessment of patient for alteration in blood sugar levels monitoring blood sugar levels periodically and administering insulin periodically.
9. Administration of drugs: IM, IV injection, IV cannulation and fixation of infusion pump, calculation of dosages, use of insulin syringes/ tuberculin, monitoring fluid therapy, blood administration.
10. Setting up dialysis machine and starting, monitoring and closing dialysis.
11. Procedures for prevention of infection – hand washing, disinfection and Sterilization surveillance, fumigation and universal precautions.
12. Collection of specimen.
13. Setting, use and maintenance of basic equipment, ventilator, O2 analyzer, monitoring equipment, transducers, defibrillator, infusion and syringe pumps, centrifuge machine.

## **IV other Procedures:**

Teaching learning activities:

Teaching methods	Clinical experience
<ul style="list-style-type: none"><li>- Lecture</li><li>- Group discussion</li><li>- Seminar</li><li>- Case presentation</li><li>- Case conferences</li><li>- Field trip (Specialty hospital)</li><li>- Project work</li></ul>	<ul style="list-style-type: none"><li>- Case assignment<ul style="list-style-type: none"><li>• Physical assessment</li><li>• NCP and implementation</li><li>• Participation in care conference</li><li>• Participation in diagnostic tests, infection control procedures, etc.</li></ul></li></ul>

### Evaluation criteria

Internal – Mid Term - 50	125
Prefinal - 75	
Seminar	25
Assignment on Planning of a critical care Unit	25
Total =	175
(Out of 25)	

### Practical Experience Assignments

Case study	:	02	(50 marks each)	50 x 2 =	100
Case Presentation	:	02	(50 marks each)	50 x 2 =	100
Care Plan	:	03	(50 marks each)	50 x 3 =	150
Clinical Performance Evaluation:		03	(100 marks each)	100 x 3 =	300
Practical Examination			Mid Term		50
			Pre Term		100
					<hr/>
					800
Internal Assessment Total marks out of 100					
External Assessment Total marks out of 100					

Final Examinations :

<u>Theory</u>		
Internal	:	25
External	:	75
<b>Total</b>		<hr/> 100 <hr/>
<u>Practical</u>		
Internal	:	100
External	:	100
<b>Total</b>		<hr/> 200 <hr/>

## **M.Sc. NURSING : CLINICAL SPECIALITY – II**

### **PROFORMA & GUIDELINE FOR CASE STUDY**

**Area :- (Maximum Marks – 50)**

01. Selection of patient.
02. Demographic data of the patient.
03. Medical history past and present illness.
04. Comparison of the patient's disease with book picture.
  - a) Anatomy and physiology.
  - b) Etiology.
  - c) Patho physiology.
  - d) Signs and symptoms.
  - e) Diagnosis - provisional & final
  - f) Investigations
  - g) Complications & prognosis.
05. Management:- Medical or Surgical
  - a) Aims and objectives.
  - b) Drugs and Medications.
  - c) Diet.
06. Nursing Management (Nursing Process approach)
  - a) Aims and objectives.
  - b) Assessment and specific observations.
  - c) Nursing diagnosis.
  - d) Nursing care plan (Short term & long term with rationale.)
  - e) Implementation of nursing care with priority.
  - f) Health teaching.
  - g) Day to day progress report & evaluation.
  - h) Discharge planning.
07. Drug Study.
08. Research evidence.
09. Summary and conclusion.
10. Bibliography.

## EVALUATION CRITERIA FOR CASE STUDY.

(Maximum Marks – 50)

SN	Criteria	Marks allotted.	Marks obtained	Total
01.	Assessment	5		
02.	theoretical knowledge about disease	5		
03.	Comparative study of the patient's disease & book picture.	10		
04.	Management: Medical or Surgical.	5		
05.	Nursing Process.	15		
06.	Drug study.	3		
07.	Summary & conclusion including research evidence.	5		
08.	Bibliography.	2		
Total		50		

Signature of Student

Signature of Clinical supervisor

# **M Sc NURSING: CLINICAL SPECIALITY – II**

## **PROFORMA & GUIDELINE FOR CASE PRESENTATION**

### ***b. I] Patient Biodata***

**Name, Age, Sex, Religion, Marital status, Occupation, Source of health care, Date of admission, Provisional Diagnosis, Date of surgery if any.**

#### **II] Presenting complaints**

Describe the complaints with which the child has been brought to the hospital

**III] Socio-economic status of the family:** Monthly income, expenditure on health, food, education etc.

#### **IV] History of Illness (Medical & Surgical)**

- i) History of present illness – onset, symptoms, duration, precipitating/aggravating factors
- ii) History of past illness surgery, allergies, medications etc.
- iii) Family history – Family tree, history of illness in the family members, risk factors, congenital problems, psychological problems etc.

#### **V] Diagnosis:** (Provisional & confirmed).

**Description of disease:** Includes the followings

1. Definition.
2. Related anatomy and physiology
2. Etiology & risk factors
3. Path physiology
5. Clinical features.

#### **VI] Physical Examination of Patient (Date & Time)**

Physical examination: with date and time.

Clinical features present in the book Present in the patient

### ***c. VII] Investigations***

Date Investigation done Results Normal value Inferences

#### **VIII] Management - (Medical /Surgical)**

- a) Aims of management
- b) Objectives of Nursing Care Plan

#### **IX] Treatment:**

S.No

Drug (Pharmacological name)

Dose Frequency/ Time

Action Side effects & drug reaction

Nurse's responsibility

- Medical or Surgical Management.
- Nursing management

#### **X] Nursing Care Plan:** Short Term & Long Term plan.

Assessment Nursing

Diagnosis

Objective Plan of care

Rationale Implementation Evaluation

#### **XI] Discharge planning:**

**It should include health education and discharge planning given to the patient.**

#### **XII] Prognosis of the patient:**

#### **XIII] Summary of the case:**

#### **IVX] References:**

## **EVALUATION CRITERIA FOR CASE PRESENTATION**

Maximum Marks – 50)

SN	Criteria	Marks Allotted	Marks Obtained	Total
1	Content Subjective & objective data.	08		
2	Problems & need Identified & Nsg. Care Plan	15		
3	Effectiveness of presentation	5		
4	Co-relation with patient & Book i. e. research evidence.	10		
5	Use of A. V. Aids	5		
6	Physical arrangement	2		
7	Group participation	3		
8	Bibliography & references	2		
	Total	50		



# CLINICAL EVALUATION: COMPREHENSIVE NURSING CARE

(Maximum Marks – 100 each)

Name of the Student

Year: II Year M.Sc Nursing

Duration of Experience:

SN	Criteria	1	2	3	4	5
I	<b>UNDERSTANDING OF PATIENT AS PERSON</b> <b>A. Approach.</b> 1. Rapport with patient/ family members. 2. Collects significant information <b>B. Understanding of patient's health problems.</b> 1. Knowledge about disease condition. 2. Knowledge about investigations. 3. Knowledge about treatment. 4. Knowledge about progress of the patient.					
II	<b>NURSING CARE PLAN</b> <b>A. Assessment of the condition of the patient.</b> 1. History taking – past & present health and illness. 2. Specific observation of the patient. 3. Nursing diagnosis. <b>B. Development of the short – term &amp; long term Nursing care plans.</b> 1. Identification of all problems in the patient/ family. 2. Prioritization & implementation of the plans. 3. Evaluation of the care given & replanning					
III	<b>TECHNICAL SKILL</b> 1. Economical & safe adaptation to the situation & available facilities. 2. Implements the procedure with skill speed & completeness.					
IV	<b>RECORDING &amp; REPORTING</b> 1. Prompt, precise, accurate & relevant. 2. Maintenance of clinical experience file.					
V	<b>HEALTH TEACHING</b> 1. Incidental/ planned teaching with principles of teaching & learning. 2. Uses visual aids appropriately					
VI	<b>PERSONALITY</b> 1. Professional appearance (uniform, dignity, tact fullness interpersonal relationship, punctuality etc. 2. Sincerely, honesty & Sense of responsibility.					
	<b>TOTAL MARKS</b>					

Positive & Negative aspects.

Signature of Student

Signature of Clinical supervisor

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### III. Medical Surgical

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Name of College

### EVALUATION OF SEMINARS

Date : \_\_\_\_\_

Name of the Student Nurse:

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Subject:

Topic:

Grade Given:

Name of evaluator :

SN.	BASIC OF EVALUATION	5	4	3	2	1	REMARK
I	<b>Knowledge of subject matter</b> a. Organisation of subject matter b. Classification of ideas with appropriate and interesting examples c. Depth and mastery of subject matter d. Anticipated question and has prepared for answer e. Selection and organisation of A. V. aids f. Integration and co-relation with other subjects. g. Submitted in time for correction						
II	<b>Oragnisation and management of class</b> a. Budgeting of time b. Asked questions for classification c. Class room participation						
III	<b>Effectiveness of Seminar</b> a. Introduction of topic b. Ability to hold students attention c. Stimulate student participation						
IV	<b>Effectiveness of Seminar</b> a. Questioning clear and stimulating b. Maintaining learning atmosphere c. Use of black board						
V	<b>Personal appearance</b> a. Neatness and Professional appearance b. Degree of self confidence c. Language (Appropriate correct, clear, tone mannerism) d. Punctuality (Starting lesson, completing lesson)						
	<b>Total Hours out of 100</b>						

Evaluator's Comments:

Signature of the Student

Name of the College

### NURSING CARE PLAN EVALUATION

#### I. B Sc Nursing Course

Name of the Student:

Year & Batch:

Name of the Patient:

Age:

Sex:

M.R.D. No. :

Ward No.

Bed No.

Area of Study : Medical/ Surgical/ Psychiatric

Diagnosis

Name of the Surgery

Date of Surgery

Date of Nursing Care given: From To

S N.	Details	Total Marks	Marks Obtained
1	Assessment	12	
2	Nursing Diagnosis	3	
3	Goal	2	
4	Outcome Criteria / Objectives	2	
5	Nursing Intervention	15	
6	Rationale	3	
7	Evaluation	3	
8	Nurses notes/ Progress report of the patient	10	
<b>Total</b>		<b>50</b>	

Remarks:

Teacher's Sign:

Student's Sign

Teacher's Name:

Date:

## References:

1. Janet Hicks Keen : Critical Care Nursing Consultant; Mosby, 1997
2. Kuruvilla Jaya: Essentials of Critical Care Nursing: Jaypee Brothers, Mumbai, 2007
3. Mervyn Singer: Oxford handbook of Critical care; 2<sup>nd</sup> ed., Oxford University Press, 2005.
4. M. S. Baird, Manual of Critical Care Nursing; 5<sup>th</sup> ed., Elsevier, 2005
5. P. G. Morton: Critical Care Nursing; 8<sup>th</sup> ed., Lippincott Williams and Wilkins, 2005
6. Sheree Comer: Delmar's Critical Care- Nursing Care plans; 2<sup>nd</sup> ed., Thomson, 2005

## Journals:-

- 1.Critical Care Nursing : AACN
- 2.Critical Care Nursing Clinic

Clinical Speciality – II  
**MEDICAL SURGICAL NURSING –  
GASTRO ENTEROLOGY NURSING**

Placement : II Year

Hours of instruction

Theory : 150 hrs.

Practical : 950 hrs.

Total : 1100 hrs.

**Course Description**

This course is designed to assist students in developing expertise and in depth understanding in the field of gastro enterology Nursing .It will help students to develop advanced skills for nursing intervention in various gastro enterology conditions. It will enable the student to function as gastro 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 student will be able to

1. Appreciate trends and issues related to gastro enterology nursing .
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 patients 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 issue 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 patients.
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 enterology intensive care unit (GEICU), liver care / transplant unit.

## Course Content

Unit	Hours	Content
I	5	<b>Introduction.</b> <ul style="list-style-type: none"> <li>• Historical development: trends and issues in the field of gastro enterology .</li> <li>• Gastro enterological problems.</li> <li>• Concepts, principles and nursing perspective.</li> <li>• Ethical and legal issues.</li> <li>• Evidence based nursing and its application in gastrointestinal nursing (to be incorporated in all the units)</li> </ul>
II	5	<b>Epidemiology.</b> <ul style="list-style-type: none"> <li>• Risk factors associated with GE conditions Hereditary , Psychosocial factors ,smoking ,alcoholism ,dietary habits ,cultural and ethnic considerations.</li> <li>• Health promotion ,disease prevention ,life style modification and its implications to nursing.</li> <li>• National health programmes related to gastro enterology.</li> <li>• Alternate system of medicine / complementary therapies.</li> </ul>
III	5	<b>Review of anatomy and physiology of gastrointestinal system.</b> <ul style="list-style-type: none"> <li>• Gastrointestinal system.</li> <li>• Liver, biliary and pancreas.</li> <li>• Gerontologic considerations.</li> <li>• Embryology of GI system.</li> <li>• Immunology specific to GI system.</li> </ul>
IV	15	<b>Assessment and diagnostic measures.</b> <ul style="list-style-type: none"> <li>• History taking.</li> <li>• Physical assessment, psychosocial assessment.</li> <li>• Diagnostic tests <ul style="list-style-type: none"> <li>➤ Radiological studies : Upper GIT – barium swallow ,lower GIT – Barrium enema.</li> <li>➤ Ultra sound.</li> <li>➤ Computed tomography .</li> <li>➤ MRI.</li> <li>➤ Cholangiography : Percutaneous transheptatic Cholangiogram(PTC).</li> <li>➤ Magnetic Resonance Cholangio pancreotography (MRCP)</li> <li>➤ Nuclear imaging scans (scintigraphy)</li> <li>➤ Endoscopy.</li> <li>➤ Colonoscopy.</li> <li>➤ Proctosigmoidoscopy.</li> <li>➤ Endoscopic Retrograde Cholongio pancreotography (ERCP)</li> <li>➤ Endoscopic ultrasound.</li> <li>➤ Peritonoscopy (Laproscopy).</li> <li>➤ Gastric emptying studies.</li> </ul> </li> </ul>



Unit	Hours	Content
		<ul style="list-style-type: none"> <li>➤ Blood chemistries : Serum amylase, serum lipase .</li> <li>➤ Liver biopsy.</li> <li>➤ Miscellaneous tests : Gastric analysis ,fecal analysis.</li> <li>➤ Liver function tests : Bile formation and excretion ,dye excretion test ,Protein metabolism ,haemstatic function – prothrombin vitamin K production ,serum enzyme ,Lipid metabolism – serum cholesterol.</li> </ul> <p>Interpretation of diagnostic measures. Nurse's role in diagnostic tests.</p>
V	25	<p><b>Gastro intestinal disorders and nursing management</b></p> <ul style="list-style-type: none"> <li>• Etiology ,clinical manifestations ,diagnosis ,pronosis ,related pathophysiology ,medical surgical and nursing mamagement of : <ul style="list-style-type: none"> <li>➤ Disorder 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 .</li> <li>➤ Disorders of the oesophagus : Reflux oesophagitis ,Oesophageal achalasia ,Oesoophageal varices , Hiatus hernia , Diverticulum.</li> <li>➤ Disorders of the stomach and duodenum : Gastritis ,Peptic ulcer ,Dumping of the stomach ,Food poisoning ,Ideopathic gastroparesis , Aerophagia and belching syndrome ,Ideopathic cyclic nausea and vomiting ,Rumination syndrome ,Functional dyspepsia ,Chronic Non specific (functional) abdominal pain.</li> <li>➤ Disorder of the small intestine: <ul style="list-style-type: none"> <li>❖ Malabsorption syndrome – tropical sprue.</li> <li>❖ Gluten – sensitive enterpathy (Coeliac Disease)</li> <li>❖ Inflammatory disease of intestines and abdomen, appendicitis ,Peritonities ,Intestinal obstruction, Abdominal TB ,Gastrointestinal polysosis syndrome</li> <li>❖ Chronic inflammatory bowel disease ,Ulcerative colites crohn's disease.</li> <li>❖ Infestations and infection – Worm infestations ,Typhoid, Leptospirosis.</li> <li>❖ Solitary rectal ulcer syndrome.</li> <li>❖ Alternation in bowel elimination (diarrhoea , constipation , fecal impaction fecal incontinence , Irritable bowel syndrome ,Chronic idiopathic constipation ,Functional diarrhea)</li> </ul> </li> </ul> </li> </ul> <p><b>Anorectal Conditionas</b> : Hemorrhoids ,Anal fissure ,Anal fistula, Abscess ,Strctures ,Rectal prolapse ,Pruritis ani ,Pelonidal disease , Anal condylomas ,Warts.</p>

Unit	Hours	Content
VI	15	<b>Disorder of liver , pancreases gall bladder and nursing management.</b> <ul style="list-style-type: none"> <li>• Disorders of liver biliary tract.</li> <li>• Viral Hepatitis – A ,B ,C ,D &amp; E</li> <li>• Toxic hepatitis. <ul style="list-style-type: none"> <li>➤ Cirrhosis of liver ,liver failure ,Liver transplantation.</li> <li>➤ Non cirrhotic portal fibrosis.</li> <li>➤ Liver abscess.</li> <li>➤ Parasitic and other cysts of the liver.</li> <li>➤ Disorders of the Gall Bladder and Bile Duct :</li> </ul> </li> <li>• Cholecystitis.</li> <li>• Choletitheasis.</li> <li>• Choledocholilethiasis.</li> <li>• Disorders of the pancreas : Pancreatitis.</li> <li>• Benign tumors of islet cells.</li> <li>• Disorders of the Peritoneum. <ul style="list-style-type: none"> <li>➤ Infections of the peritoneum.</li> </ul> </li> <li>• Surgical peritonitis.</li> <li>• Spontaneous bacterial peritoneum.</li> <li>• Tuberculosis peritonitis.</li> <li>• Disorders of the Diaphragm. <ul style="list-style-type: none"> <li>➤ Diaphragmatic Hernia.</li> <li>➤ Congenital hernia.</li> <li>➤ Paralysis of diaphragm.</li> <li>➤ Tumors of the diaphragm.</li> </ul> </li> <li>• Hiccups.</li> </ul>
VII	15	<b>Gastro intestinal emergencies and nursing interventions.</b> <ul style="list-style-type: none"> <li>• Etiology ,clinical manifestations , diagnosis ,prognosis ,related pathophysiology ,medical ,surgical and nursing management of: <ul style="list-style-type: none"> <li>➤ Esophageal varices.</li> <li>➤ Ulcer perforation.</li> <li>➤ Acute Cholecystitis.</li> <li>➤ Diverticulitis.</li> <li>➤ Fulminant hepatic failure.</li> <li>➤ Biliary obstruction.</li> <li>➤ Bowel obstruction.</li> <li>➤ Gastroenteritis.</li> <li>➤ Intussusception.</li> <li>➤ Acute intestinal obstruction , perforation.</li> <li>➤ Acute pancreatitis.</li> <li>➤ Cirrhosis of liver complications.</li> <li>➤ Liver ,spleen , stomach pancreation ,mesenteric ,bowel and greater vessel injuries.</li> <li>➤ Acute appendicitis / peritonitis.</li> <li>➤ Acute abdomen.</li> </ul> </li> <li>➤ Food poisoning. <ul style="list-style-type: none"> <li>➤ Substance ingestion : Undesriable effect on G.I.Track.</li> </ul> </li> </ul>

Unit	Hours	Content
VIII	15	<ul style="list-style-type: none"> <li>• <b>Congenital Anomalies of Esophagus.</b> <ul style="list-style-type: none"> <li>➤ Esophageal atresia.</li> <li>➤ Tracheo esophageal fistula.</li> <li>➤ Esophageal stenosis</li> <li>➤ Dysphagia – Lusoria – aberrant right subclavian artery compressing esophagus.</li> <li>➤ Esophageal rings – schalzkiring.</li> <li>➤ Esophageal webs.</li> </ul> </li> <li>• <b>Congenital Anomalies of Stomach.</b> <ul style="list-style-type: none"> <li>➤ Gastric atresia.</li> <li>➤ Micro gastria.</li> <li>➤ Gastric diverticulum.</li> <li>➤ Gastric duplication.</li> <li>➤ Gastric teratoma.</li> <li>➤ Gastric volvulus.</li> <li>➤ Infantile hypertrophic pyloric stenosis.</li> <li>➤ Adult hypertrophic pyloric stenosis.</li> </ul> </li> <li>• <b>Congenital Anomalies of Duodenal.</b> <ul style="list-style-type: none"> <li>➤ Duodenal Atresia or stenosis.</li> <li>➤ Annular pancreas.</li> <li>➤ Duodenal duplication cysts.</li> <li>➤ Malrotation and mid gut volvulus.</li> </ul> </li> <li>• <b>Developmental anomalies of the intestine.</b> <ul style="list-style-type: none"> <li>➤ Abdominal wall defects (Omphalocele and Gastroschisis)</li> <li>➤ Meckel's diverticulum.</li> <li>➤ Intestinal atresia.</li> </ul> </li> </ul>
		<ul style="list-style-type: none"> <li>• <b>Hirschsprung's disease</b></li> </ul>
IX	15	<b>Pharmo Kinetics</b> <ul style="list-style-type: none"> <li>➤ Drugs used in GIT</li> <li>➤ Principles of administration</li> <li>➤ Roles responsibilities of nurses</li> <li>➤ Drugs in Peptic ulcer disease</li> <li>➤ Proton Pump inhibitors</li> <li>➤ H<sub>2</sub> Receptor Antagonists</li> <li>➤ Cytoprotective Agents :</li> <li>➤ Drugs used in Diarrhea</li> <li>➤ Drugs used in constipation</li> <li>➤ Drugs used in Inflammatory Bowel Disease</li> <li>➤ Aminosalicylates</li> <li>➤ Corticosteroids</li> <li>➤ Immunomodulators</li> <li>➤ Chemotherapy</li> <li>➤ Antibiotics</li> <li>➤ Antiemetics :</li> <li>➤ Anticholinergics</li> <li>➤ Antihistaminics</li> <li>➤ Anthelminthics</li> <li>➤ Vitamin Supplements</li> </ul>

<b>X</b>	<b>10</b>	<b>Nutrition and nutritional problems related to GI system</b> <ul style="list-style-type: none"> <li>• Nutritional assessment and nursing interventions</li> <li>• Therapeutic diets</li> <li>• Adverse reactions between drugs and various foods</li> <li>• Malnutrition – etiology, clinical manifestations and management</li> <li>• Tube feeding, parenteral nutrition, total parenteral nutrition</li> <li>• Obesity- etiology, clinical manifestations and management</li> <li>• Eating disorders- anorexia nervosa, bulimia nervosa</li> <li>• Recent advances in nutrition</li> </ul>
<b>XI</b>	<b>15</b>	<b>Malignant disorders of gastro intestinal system</b> <ul style="list-style-type: none"> <li>• Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical, other modalities and nursing management of : <ul style="list-style-type: none"> <li>▪ Malignancy of oral cavity, Lip, Tongue, buccal mucosa oropharynx, Salivary gland</li> <li>▪ Esophageal, Gastric, Carcinoma of bowel – Small bowel, Colorectal and Anal carcinoma,</li> <li>▪ Liver, biliary tract and Pancreatic carcinoma</li> </ul> </li> </ul>
<b>XII</b>	<b>5</b>	<b>Administration and management of GE unit</b> <ul style="list-style-type: none"> <li>• Design &amp; layout</li> <li>• Staffing,</li> <li>• Equipment, supplies,</li> <li>• Infection control ; Standard safety measures</li> <li>• Quality Assurance :- Nursing audit – records / reports, Norms, policies and protocols</li> <li>• Practice standards</li> </ul>
<b>XIII</b>	<b>5</b>	<b>Education and training in GE care</b> <ul style="list-style-type: none"> <li>• Staff orientation, training and development,</li> <li>• In- service education program, <ul style="list-style-type: none"> <li>▪ Clinical teaching programs</li> </ul> </li> </ul>

## PRACTICALS

**Total = 960 Hours**

**1 Week = 30 Hours**

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

## Procedures Assisted

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

## Procedures performed

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

## Visit

1. Ostomy clinic.
2. National Nutrition Institute.
3. Institute Manufacturing Commercial food products.
4. Wholesale market for grain and food storage.

## Internal Assessment:-

Test- (2 tests)

Mid term Examination	- 50 marks theory + 50 practical
Pre final examination	- 75 marks theory + 100 practical

Total	-----	
	125 marks	+ 150 marks

## **Practical Experience Assignments**

Case study	:	02	(50 marks each)	$50 \times 2 =$	100
Case Presentation	:	02	(50 marks each)	$50 \times 2 =$	100
Care Plan	:	03	(50 marks each)	$50 \times 3 =$	150
Clinical Performance Evaluation:		03	(100 marks each)	$100 \times 3 =$	300
Practical Examination			Mid Term		50
			Pre Term		100
					<hr/>
					800

Internal Assessment Total marks out of 100

External Assessment Total marks out of 100

Final Examinations :

### Theory

Internal	:	25
External	:	75

**Total : 100**

### Practical

Internal	:	100
External	:	100

**Total : 200**

## M.Sc. NURSING : CLINICAL SPECIALITY – II

### PROFORMA & GUIDELINE FOR CASE STUDY

#### Area :- (Maximum Marks – 50)

01. Selection of patient.
02. Demographic data of the patient.
03. Medical history past and present illness.
04. Comparison of the patient's disease with book picture.
  - a) Anatomy and physiology.
  - b) Etiology.
  - c) Patho physiology.
  - d) Signs and symptoms.
  - e) Diagnosis - provisional & final
  - f) Investigations
  - g) Complications & prognosis.
05. Management:- Medical or Surgical
  - a) Aims and objectives.
  - b) Drugs and Medications.
  - c) Diet.
06. Nursing Management (Nursing Process approach)
  - a) Aims and objectives.
  - b) Assessment and specific observations.
  - c) Nursing diagnosis.
  - d) Nursing care plan (Short term & long term with rationale.)
  - e) Implementation of nursing care with priority.
  - f) Health teaching.
  - g) Day to day progress report & evaluation.
  - h) Discharge planning.
07. Drug Study.
08. Research evidence.
09. Summary and conclusion.
10. Bibliography.

## EVALUATION CRITERIA FOR CASE STUDY.

(Maximum Marks – 50)

SN.	Criteria	Marks allotted.	Marks obtained
01.	Assessment	5	
02.	theoretical knowledge about disease	5	
03.	Comparative study of the patient's disease & book picture.	10	
04.	Management: Medical or Surgical.	5	
05.	Nursing Process.	15	
06.	Drug study.	3	
07.	Summary & conclusion including research evidence.	5	
08.	Bibliography.	2	
Total		50	

Signature of Student

Signature of Clinical supervisor



# **M Sc NURSING: CLINICAL SPECIALITY – II**

## **PROFORMA & GUIDELINE FOR CASE PRESENTATION**

### **I] Patient Biodata**

**Name, Age, Sex, Religion, Marital status, Occupation, Source of health care, Date of admission, Provisional Diagnosis, Date of surgery if any.**

### **II] Presenting complaints**

Describe the complaints with which the child has been brought to the hospital

**III] Socio-economic status of the family:** Monthly income, expenditure on health, food, education etc.

### **IV] History of Illness (Medical & Surgical)**

- i) History of present illness – onset, symptoms, duration, precipitating/aggravating factors
- ii) History of past illness surgery, allergies, medications etc.
- iii) Family history – Family tree, history of illness in the family members, risk factors, congenital problems, psychological problems etc.

**V] Diagnosis:** (Provisional & confirmed).

**Description of disease:** Includes the followings

1. Definition.
2. Related anatomy and physiology
2. Etiology & risk factors
3. Path physiology
5. Clinical features.

### **VI] Physical Examination of Patient (Date & Time)**

Physical examination: with date and time.

Clinical features present in the book Present in the patient

### **VII] Investigations**

Date Investigation done Results Normal value Inferences

### **VIII] Management - (Medical /Surgical)**

- a) Aims of management
- b) Objectives of Nursing Care Plan

### **IX] Treatment:**

S.No

Drug (Pharmacological name)

Dose Frequency/ Time

Action Side effects & drug reaction

Nurse's responsibility

- Medical or Surgical Management.
- Nursing management

### **X] Nursing Care Plan:** Short Term & Long Term plan.

Assessment Nursing

Diagnosis

Objective Plan of

care

Rationale Implementation Evaluation

**XI] Discharge planning:**

**It should include health education and discharge planning given to the patient.**

**XII] Prognosis of the patient:**

**XIII] Summary of the case:**

**IVX] References:**

**EVALUATION CRITERIA FOR CASE PRESENTATION**

Maximum Marks – 50)

SN	Criteria	Marks Allotted	Marks Obtained	Total
1	Content Subjective & objective data.	08		
2	Problems & need Identified & Nsg. Care Plan	15		
3	Effectiveness of presentation	5		
4	Co-relation with patient & Book i. e. research evidence.	10		
5	Use of A. V. Aids	5		
6	Physical arrangement	2		
7	Group participation	3		
8	Bibliography & references	2		
	Total	50		

**CLINICAL EVALUATION: COMPREHENSIVE NURSING CARE****(Maximum Marks – 100 each area.)**

Name of the Student

Year: II Year M.Sc Nursing

Duration of Experience:

S N	Criteria	1	2	3	4	5
I	<b>UNDERSTANDING OF PATIENT AS PERSON</b> <b>A. Approach.</b> 1. Rapport with patient/ family members. 2. Collects significant information. <b>B. Understanding of patient's health problems.</b> 1. Knowledge about disease condition. 2. Knowledge about investigations. 3. Knowledge about treatment. 4. Knowledge about progress of the patient.					
II	<b>NURSING CARE PLAN</b> <b>A. Assessment of the condition of the patient.</b> 1. History taking – past & present health and illness. 2. Specific observation of the patient. 3. Nursing diagnosis. <b>B. Development of the short – term &amp; long term Nursing care plans.</b> 1. Identification of all problems in the patient/ family. 2. Prioritization & implementation of the plans. 3. Evaluation of the care given & replanning					
III	<b>TECHNICAL SKILL</b> 1. Economical & safe adaptation to the situation & available facilities. 2. Implements the procedure with skill speed & completeness.					
IV	<b>RECORDING &amp; REPORTING</b> 1. Prompt, precise, accurate & relevant. 2. Maintenance of clinical experience file.					
V	<b>HEALTH TEACHING</b> 1. Incidental/ planned teaching with principles of teaching & learning. 2. Uses visual aids appropriately					
VI	<b>PERSONALITY</b> 1. Professional appearance (uniform, dignity, tact fullness interpersonal relationship, punctuality etc. 2. Sincerely, honesty & Sense of responsibility.					
	<b>TOTAL MARKS</b>					

Positive &amp; Negative aspects.

Signature of Student

Signature of Clinical supervisor

Name of College  
**EVALUATION OF SEMINARS**

Date : \_\_\_\_\_

Name of the Student Nurse:

Date: Time:

Subject:

Topic:

Grade Given:

Name of evaluator :

SN.	BASIC OF EVALUATION	5	4	3	2	1	REMARK
I	<b>Knowledge of subject matter</b> a. Organisation of subject matter b. Classification of ideas with appropriate and interesting examples c. Depth and mastery of subject matter d. Anticipated question and has prepared for answer e. Selection and organisation of A. V. aids f. Integration and co-relation with other subjects. g. Submitted in time for correction						
II	<b>Oragnisation and management of class</b> a. Budgeting of time b. Asked questions for classification c. Class room participation						
III	<b>Effectiveness of Seminar</b> a. Introduction of topic b. Ability to hold students attention c. Stimulate student participation						
IV	<b>Effectiveness of Seminar</b> a. Questioning clear and stimulating b. Maintaining learning atmosphere c. Use of black board						
V	<b>Personal appearance</b> a. Neatness and Professional appearance b. Degree of self confidence c. Language (Appropriate correct, clear, tone mannerism) d. Punctuality (Starting lesson, completing lesson)						
	<b>Total Hours out of 100</b>						

Evaluator's Comments:

Signature of the Student

Name of the College

### NURSING CARE PLAN EVALUATION

B Sc Nursing Course

Name of the Student:

Year & Batch:

Name of the Patient:

Age:

Sex:

M.R.D. No. :

Ward No.

Bed No.

Area of Study : Medical/ Surgical/ Psychiatric

Diagnosis

Name of the Surgery

Date of Surgery

Date of Nursing Care given: From

To

S N	Details	Total Marks	Marks Obtained
1	Assessment	12	
2	Nursing Diagnosis	3	
3	Goal	2	
4	Outcome Criteria / Objectives	2	
5	Nursing Intervention	15	
6	Rationale	3	
7	Evaluation	3	
8	Nurses notes/ Progress report of the patient	10	
<b>Total</b>		<b>50</b>	

Remarks:

Teacher's Sign:

Student's Sign

Teacher's Name:

Date:

**References:**

1. Janet Hicks Keen : Critical Care Nursing Consultant; Mosby, 1997
2. Kuruvilla Jaya: Essentials of Critical Care Nursing: Jaypee Brothers, Mumbai, 2007
3. Mervyn Singer: Oxford handbook of Critical care; 2<sup>nd</sup> ed., Oxford University Press, 2005.
4. M. S. Baird, Manual of Critical Care Nursing; 5<sup>th</sup> ed., Elsevier, 2005
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6. Sheree Comer: Delmar's Critical Care- Nursing Care plans; 2<sup>nd</sup> ed., Thomson, 2005

**Journals:-**

1. Critical Care Nursing : AACN
2. Critical Care Nursing Clinics

## Bibliography

1. P.G.Mortan "Critical care NSG" 8<sup>th</sup> edition, 2005 Lippincott Williams and Wilkins.
2. Sheree Comer Delumar's "Critical care NSG care plan" 2<sup>nd</sup> edition, 2005 Thomson .  
R.J.Vakil "Gastroenterology Dennis Kason".
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## CLINICAL SPECIALITY -II

# MENTAL(PSYCHIATRIC) HEALTH NURSING

Placement :IIInd year

Hours of Instruction

Theory :150 hours

Practical : 950 hours

Total :1100 hours

### Course Description

The course is designed to assist students in developing expertise and in depth understanding in the field of Psychiatric nursing. It will help students to appreciate the clients 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. Apply the nursing process in the care of mentally ill patients in hospital and community.
2. Demonstrate advanced skills/competence in nursing management of patients with mental illness.
3. Recognize and manage emergencies in children
4. Providing nursing care to critically ill children
5. Utilize the recent technology and various treatment modalities in the management of high risk children
6. Identify and manage psychiatric emergencies.
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 layout and describe standards for management of psychiatric units/hospitals.
11. Teach psychiatric nursing to undergraduate students & in-service nurses.

Unit	Hours	Content
I	2	<b>Principles and practice of Psychiatric nursing</b> Review
II	5	<b>Crisis Intervention</b> <ul style="list-style-type: none"><li>• Crisis, Definition</li><li>• Phases in the Development of a Crisis</li><li>• Types of Crisis, Dispositional, Anticipated Life Transitions Traumatic stress, Maturation/Development, Reflecting Psychopathology, Psychiatric Emergencies</li><li>• Grief and grief reaction</li><li>• Crisis Intervention, Phases</li><li>• Post traumatic stress disorder (PTSD)</li><li>• Role of the Nurse</li></ul>
III	4	<b>Anger/Aggression Management</b> <ul style="list-style-type: none"><li>• Anger and aggression, Types, Predisposing Factors</li><li>• Management</li><li>• Role of the Nurse</li></ul>



Unit	Hours	Content
IV	5	<b>The Suicidal Client</b> <ul style="list-style-type: none"> <li>• Epidemiological Factors</li> <li>• Risk Factors</li> <li>• <b>Predisposing Factors</b> : Theories of Suicide-Psychological, Sociological, Biological</li> <li>• Nursing Management</li> </ul>
V	5	<b>Disorders of Infancy, Childhood and Adolescence</b> <ul style="list-style-type: none"> <li>• Mentally Challenged</li> <li>• Autistic Disorders</li> <li>• Attention-Deficit/Hyperactivity Disorder</li> <li>• Conduct Disorders</li> <li>• Oppositional Defiant Disorder</li> <li>• Tourette's Disorders</li> <li>• Separation Anxiety Disorder</li> <li>• Psychopharmacological Intervention and Nursing Management</li> </ul>
VI	5	<b>Delirium, Dementia and Amnestic Disorders</b> <ul style="list-style-type: none"> <li>• Delirium</li> <li>• Dementia</li> <li>• Amnesia</li> <li>• Psychopharmacological Intervention and Nursing Management</li> </ul>
VII	10	<b>Substances-Related Disorders</b> <ul style="list-style-type: none"> <li>• Substance-Use Disorders</li> <li>• Substances- Induced Disorders</li> <li>• Classes of Psychoactive Substances</li> <li>• Predisposing Factors</li> <li>• The dynamic of Substance-Related Disorder</li> <li>• The Impaired Nurse</li> <li>• Codependency</li> <li>• Treatment Modalities for Substances-Related Disorders and Nursing Management</li> </ul>
VIII	10	<b>Schizophrenia and other Psychotic Disorders (Check ICD 10)</b> <ul style="list-style-type: none"> <li>• Nature of the Disorder</li> <li>• Predisposing Factors</li> <li>• Schizophrenia-types <ul style="list-style-type: none"> <li>• Disorganized Schizophrenia</li> <li>• Catatonic Schizophrenia</li> <li>• Paranoid Schizophrenia</li> <li>• Undifferentiated Schizophrenia</li> <li>• Residual Schizophrenia</li> </ul> </li> <li>• Other Psychotic disorders <ul style="list-style-type: none"> <li>• Schizoaffective disorders</li> <li>• Brief Psychotic disorders</li> <li>• Psychotic disorder due to a General Medical Condition</li> <li>• Substance-Induced Psychotic disorder</li> </ul> </li> <li>• Treatment and Nursing Management</li> </ul>

Unit	Hours	Content
<b>IX</b>	<b>8</b>	<b>Mood Disorders</b> <ul style="list-style-type: none"> <li>• Historical Perspective</li> <li>• Epidemiology</li> <li>• The Grief Response</li> <li>• Maladaptive Responses to Loss</li> <li>• Types of Mood disorders</li> <li>• Bipolar disorders</li> <li>• Treatment and Nursing Management</li> </ul>
<b>X</b>	<b>8</b>	<b>Anxiety Disorders</b> <ul style="list-style-type: none"> <li>• Historical Aspects</li> <li>• Epidemiological Statistics</li> <li>• How much is too Much?</li> <li>• Types <ul style="list-style-type: none"> <li>. Panic Disorder</li> <li>. Generalized Anxiety Disorder</li> <li>. Phobias</li> <li>. Obsessive –Compulsive Disorders</li> <li>. Posttraumatic Stress Disorder</li> <li>. Anxiety Disorder Due to a General Medical Condition</li> <li>. Substances-Induced Anxiety Disorder</li> </ul> </li> <li>• Treatment Modalities</li> <li>• Psychopharmacology &amp; Nursing Management</li> </ul>
<b>XI</b>	<b>5</b>	<b>Somatoform and Sleep Disorders</b> <ul style="list-style-type: none"> <li>• Somatoform Disorders</li> <li>• Historical Aspects <ul style="list-style-type: none"> <li>. Epidemiological Statistics</li> <li>. Pain Disorder</li> <li>. Hypochondriasis</li> <li>. Conversion Disorder</li> <li>. Body Dysmorphic Disorder</li> </ul> </li> <li>• Sleep Disorder</li> <li>• Treatment Modalities and Nursing Management</li> </ul>
<b>XII</b>	<b>4</b>	<b>Dissociative Disorders and Management</b> <ul style="list-style-type: none"> <li>• Historical Aspects</li> <li>• Epidemiological Statistics</li> <li>• Application of the Nursing Management</li> <li>• Treatment Modalities and Nursing Management</li> </ul>
<b>XIII</b>	<b>4</b>	<b>Sexual and Gender Identity Disorders</b> <ul style="list-style-type: none"> <li>• Development of Human Sexuality</li> <li>• Sexual Disorders</li> <li>• Variation in Sexual Orientation</li> <li>• Nursing Management</li> </ul>
<b>XIV</b>	<b>4</b>	<b>Eating Disorders</b> <ul style="list-style-type: none"> <li>• Epidemiological Factors</li> <li>• Predisposing Factors : Anorexia Nervosa and Bulimia Nervosa obesity</li> <li>• Psychopharmacology</li> <li>• Treatment and Nursing Management</li> </ul>

<b>XV</b>	<b>4</b>	<b>Adjustment and Impulse Control Disorders</b> <ul style="list-style-type: none"> <li>• Historical and Epidemiological Factors <ul style="list-style-type: none"> <li>. Adjustment disorders</li> <li>. Impulse Control Disorders</li> </ul> </li> <li>• Treatment &amp; Nursing Management</li> </ul>
<b>XVI</b>	<b>4</b>	<b>Medical Conditions due to Psychological Factors</b> <ul style="list-style-type: none"> <li>• Asthma</li> <li>• Cancer</li> <li>• Coronary Heart Disease</li> <li>• Peptic Ulcer</li> <li>• Essential Hypertension</li> <li>• Migraine Headache</li> <li>• Rheumatoid Arthritis</li> <li>• Ulcerative Colitis</li> <li>• Treatment &amp; Nursing Management</li> </ul>
<b>XVII</b>	<b>10</b>	<b>Personality Disorders</b> <ul style="list-style-type: none"> <li>• Historical perspectives</li> <li>• Types of personality disorder <ul style="list-style-type: none"> <li>. Paranoid Personality disorder</li> <li>. Schizoid Personality disorder</li> <li>. Antisocial Personality disorder</li> <li>. Borderline Personality disorder</li> <li>. Histrionic Personality disorder</li> <li>. Narcissistic Personality</li> <li>. Avoidance Personality disorder</li> <li>. Dependent Personality disorder</li> <li>. Obsessive- Compulsive Personality disorder</li> <li>. Passive-Aggressive Personality Disorders</li> </ul> </li> <li>• Identification, diagnostic, symptoms</li> <li>• Psychopharmacology</li> <li>• Treatment &amp; Nursing Management</li> </ul>
<b>XVII I</b>	<b>8</b>	<b>The Aging Individual</b> <ul style="list-style-type: none"> <li>• Epidemiological Statistics</li> <li>• Biological Theories</li> <li>• Biological Aspects of Aging</li> <li>• Psychological Aspect of Aging</li> <li>• Memory Functioning</li> <li>• Socio-cultural aspects of aging</li> <li>• Sexual aspects of aging</li> <li>• Special Concerns of the Elderly Population</li> <li>• Psychiatric problems among elderly population</li> <li>• Treatment &amp; Nursing Management</li> </ul>
<b>XIX</b>	<b>5</b>	<b>The Person living with HIV Disease</b> <ul style="list-style-type: none"> <li>• Psychological problems of individual HIV/AIDS</li> <li>• Counseling</li> <li>• Treatment and Nursing Management-Counseling</li> </ul>
<b>XX</b>	<b>5</b>	<b>Problems Related to Abuse or Neglect</b> <ul style="list-style-type: none"> <li>• Vulnerable groups, Women, Children, elderly, psychiatric patients, under privileged, challenged</li> <li>• Predisposing Factors</li> <li>• Treatment &amp; Nursing management –Counseling</li> </ul>

<b>XXI</b>	<b>10</b>	<b>Community Mental Health Nursing</b> <ul style="list-style-type: none"> <li>• National Mental Health Programme-Community mental health program</li> <li>• The Changing Focus of care</li> <li>• The Public Health Model</li> <li>• The Role of the Nurse</li> <li>• Case Management</li> <li>• The Community as Client</li> </ul>
		<ul style="list-style-type: none"> <li>. Primary Prevention</li> <li>. Populations at Risk</li> <li>. Secondary prevention</li> <li>. Tertiary Prevention</li> <li>• Community based rehabilitation</li> </ul>
<b>XXII</b>	<b>5</b>	<b>Ethical and Legal Issues in Psychiatric/Mental Health Nursing</b> <ul style="list-style-type: none"> <li>• Ethical Considerations</li> <li>• Legal Consideration <ul style="list-style-type: none"> <li>. Nurse Practice Acts</li> <li>. Types of Law</li> <li>. Classification within Statutory and Common Law</li> <li>. Legal Issues in Psychiatric/Mental Health Nursing</li> <li>. Nursing Liability</li> </ul> </li> </ul>
<b>XXIII</b>	<b>5</b>	<b>Psychosocial rehabilitation</b> <ul style="list-style-type: none"> <li>• Principles of rehabilitation</li> <li>• Disability assessment</li> <li>• Day care centers</li> <li>• Half way homes</li> <li>• Reintegration into the community</li> <li>• Training and support to care givers</li> <li>• Sheltered workshop</li> <li>• Correctional homes</li> </ul>
<b>XXIV</b>	<b>5</b>	<b>Counseling</b> <ul style="list-style-type: none"> <li>• Liaison psychiatric nursing</li> <li>• Terminal illnesses-Counseling</li> <li>• Post partum psychosis-treatment, care and counseling</li> <li>• Death dying Counseling</li> <li>• Treatment, care and counseling- <ul style="list-style-type: none"> <li>. Unwed mother</li> <li>. HIV and AIDS</li> </ul> </li> </ul>
<b>XXV</b>	<b>5</b>	<b>Administration and management of psychiatric units</b> <ul style="list-style-type: none"> <li>• Design &amp; layout</li> <li>• Staffing</li> <li>• Equipment, Supplies</li> <li>• Norms, Policies and protocols</li> <li>• Quality assurance</li> <li>• Practice standards for psychiatric care unit</li> </ul>
<b>XXVI</b>	<b>5</b>	<b>Education and training in psychiatric care</b> <ul style="list-style-type: none"> <li>• Staff orientation, training and development</li> <li>• In-Service education program</li> <li>• Clinical teaching programs</li> </ul>

Practicals

Total = 960 Hours

1 Week = 30 Hours

Assignments

SN	Area of Posting	No of Week	Total Hours	CS/NCP	CP	GT
1.	Acute Psychiatric Ward	4	120 Hours	1/1	1	-
2.	Chronic Psychiatric Ward	4	120 Hours	1/1	1	-
3.	De-addiction Unit	4	120 Hours	Behaviour Therapy -1		1
4.	Psychiatric Emergency Unit	4	120 Hours			
5.	O.P.D (Neuro and Psychiatric)	3	90 Hours	-	-	1
6.	Child Psychiatric Unit and Child guidance clinic	2	60 Hours	1	-	-
7.	Post natal ward	1	30 Hours			
8.	Family Psychiatric Unit	2	60 Hours	Family therapy -1		
9.	Field Visits	2	60 Hours	Visit to NIMHANS & its Community Mental Health Centre		
10.	Rehabilitation	2	60 Hours	1	-	-
11.	Community Mental Unit	4	120 Hours	Mental Health Awareness camp		
	Total	32 Weeks	960 Hours			

Abbreviation : CS – Case Study-1, CP – Case Presentation – 2. Group therapy-2, Nursing care plan-2

## **ESSENTIAL PSYCHIATRIC NURSING SKILLS**

### **Procedures Observed**

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

### **Procedure Performed**

1. Mental status examination
2. Participating in various therapies-Physical ECT.
3. Administration of Oral, IM, IV psychotherapy drugs
4. Interviewing Skills
5. Communication Skills
6. Counseling Skills
7. Psycho education
8. Interpersonal relationship skills.
9. Community Survey for identifying mental health problems
10. Rehabilitation therapy
11. Health education and life skills training
12. Supportive psycho therapeutic skills
13. Group therapy
14. Milieu therapy
15. Social/Recreational therapy
16. Occupational therapy
17. Journal Presentations -5
18. Family burden assessment

### **Field Visits**

School for Mentally Challenged, Destitute Home, Old Age Home, Remand Home, Orphanage, HIV/AIDS Rehabilitation Programme, Suicide Prevention Programme, Dist./State Mental Hosp, Child Guidance Clinic, Crisis Intervention Programme, Deaddiction Centre

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11. Nursing Diagnosis reference manual 5<sup>th</sup> edition, Sheila M. Sparks, Cynthia M Jalor, Spring House Corporation. Pennsylvania.
12. A Guide to mental health & Psychiatric Nursing , R Sreevani, Jaypee brothers Medical Publishers[p]1<sup>st</sup> edition New Delhi.
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15. Deborrha Aantai Oting, “Psychiatric Nursing” Biological & Behavioural Concepts Thompson, Singapore, 2003.
16. Mary Ann Boyd, “Psychiatric Nursing”- Contemporary Practice. Lippincott. Williams & Willikins Tokyo.
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### **Journals:**

- 1 Indian journal of psychiatry.
- 2 Journal of psychosocial nursing.
- 3 British journal of psychiatric nursing.

**CLINICAL ASSIGNMENTS  
MENTAL HEALTH NURSING**

**EVALUATION**

I Internal Assessment (theory) Periodical Exams - 2    **Maximum Marks : 25**  
(Practical) **Maximum Marks : 50**

**Practicum:**

1. History taking :	50 marks each
2. MSE:	50 marks each
3. Process Recording:	25 marks each
4. Clinical performance evaluation	Marks: 100
5. Case Study:	Marks: 50
6. Case Presentation:	Marks: 50
7. Drugs study	Marks : 50
9. Health Education:	Marks: 25

**Practical Exam :**

1. 1 <sup>st</sup> Periodical viva	Marks: 25
2. Midterm Exam	Marks 50
3. Prelims Exam	Marks 50

**External Assessment** - University Exam :Theory Marks Marks 75  
Practical Marks Marks 50

**MENTAL HEALTH & PSYCHIATRIC NURSING**

**CLINICAL EXPERIENCE GUIDELINES & EVALUATION FORMATS**

***I) PSYCHIATRIC NURSING HISTORY COLLECTION FORMAT***

**c) Demographic data:**

- Name
- Age
- Sex
- Marital Status
- Religion
- Occupation
- Socio-economic status
- Address
- Informant
- Information (Relevant or not) adequate or not

**II. Chief Complaints/presenting complaints (list with duration)**

- In patient's own words and in informants own words.

E.g. : - Sleeplessness x 3 weeks

- Loss of appetite & hearing voices x2 weeks
- talking to self

**III. Present psychiatric history / nature of the current episode**

- Onset - Acute (within a few hours)
- Sub acute (within a few days)
- Gradual (within a few weeks)
- Duration – days, weeks or months
- Course – continuous/episodic
- Intensity / same / increasing or decreasing
- Precipitating factors – yes/no (if yes explain)
- History of current episode (explain in detail regarding the presenting complaints)
- Associated disturbances – includes present medical problems (E.g. Disturbance in sleep, appetite, IPR & social functioning, occupation etc).



#### **IV. Past Psychiatric history:**

- Number of episode with onset and course
- Complete or incomplete remission
- Duration of each episode
- Treatment details and its side effects if any
- Treatment outcomes
- Details if any precipitating factors if present

- V.**
- a) Past Medical History
  - b) Past Surgical History
  - c) Obstetrical History (Female)

Cont..

#### **VI. Family History:**

- Family genogram – 5 generations include only grandparents. But if there is a family history include the particular generation

#### **VII. Personal History:**

- Pre-natal history - Maternal infections
- Exposure to radiation etc.
- Check ups
- Any complications
- Natal history - Type of delivery
- Any complications
- Breath and cried at birth
- Neonatal infections
- Mile stones: Normal or delayed

#### **Behavior during childhood**

- Excessive temper tantrums
- Feeding habit
- Neurotic symptoms
- Pica
- Habit disorders
- Excretory disorders etc.

#### **Illness during childhood**

- Look specifically for CNS infections
- Epilepsy
- Neurotic disorders
- Malnutrition

#### **Schooling**

- Age of going to School
- Performance in the School
- Relationship with peers
- Relationship with teachers

(Specifically look for learning disability and attention deficit)

- Look for conduct disorders E.g. Truancy, stealing

#### **Occupational history**

- Age of joining job
- Relationship with superiors, subordinates & colleagues
- Any changes in the job – if any give details
- Reasons for changing jobs
- Frequent absenteeism

#### **Sexual history**

- Age of attaining puberty (female-menstrual cycles are regular)
- Source and extent of knowledge about sex, any exposures

- **Marital status** : with genogram.

**VIII. Pre morbid personality** : (Personality of a patient consists of those habitual attitudes and patterns of behavior which characterize an individual. Personality sometimes changes after the onset of an illness. Get a description of the personality before the onset of the illness. Aim to build up a picture of the individual, not a type. Enquire with respect to the following areas.)

**1. Attitude to others in social, family and sexual relationship:**

Ability to trust other, make and sustain relationship, anxious or secure, leader or follower, participation, responsibility, capacity to make decision, dominant or submissive, friendly or emotionally cold, etc. Difficulty in role taking – gender, sexual, familial.

**2. Attitudes to self:**

Egocentric, selfish, indulgent, dramatizing, critical, depreciatory, over concerned, self conscious, satisfaction or dissatisfaction with work. Attitudes towards health and bodily functions. Attitudes to past achievements and failure, and to the future.

**3. Moral and religious attitudes and standards:**

Evidence of rigidity or compliance, permissiveness or over conscientiousness, conformity, or rebellion. Enquire specifically about religious beliefs. Excessive religiosity

**4. Mood:**

Enquire about stability of mood, mood swings, whether anxious, irritable, worrying or tense. Whether lively or gloomy. Ability to express and control feelings of anger, anxiety, or depression.

**5. Leisure activities and hobbies:**

Interest in reading, play, music, movies etc. Enquire about creative ability. Whether leisure time is spent alone or with friends. Is the circle of friends large or small?

**6. Fantasy life:**

Enquire about content of day dreams and dreams. Amount of time spent in day dreaming.

**7. Reaction pattern to stress:**

Ability to tolerate frustrations, losses, disappointments, and circumstances arousing anger, anxiety or depression. Evidence for the excessive use of particular defense mechanisms such as denial, rationalization, projection, etc.

**8. Habits:** Eating, sleeping and excretory functions.

**IX. Summary & Clinical Diagnosis**

**EVALUATION CRITERIA FOR PSYCHIATRIC CASE HISTORY TAKING**

(Maximum Marks : 50)

SN	Criteria	Marks Allotted	Marks Obtained
1	Format	03	
2	Presenting Complaints	05	
3	Organization of history of present illness	10	
4	Past history of illness	05	
5	Family history of illness	04	
6	Personal history	05	
7	Pre-morbid personality	05	
8	Physical Examination	08	
9	Summary & Clinical Diagnosis	05	

**Total 50**

## **II) MENTAL STATUS EXAMINATION (MSE) FORMAT:**

### **I. General appearance and behavior (GAAB):**

- a) Facial expression (E.g. Anxiety, pleasure, confidence, blunted, pleasant)
- b) Posture (stooped, stiff, guarded, normal)
- c) Mannerisms (stereotype, negativism, tics, normal)
- d) Eye to eye contact (maintained or not)
- e) Rapport (built easily or not built or built with difficulty)
- f) Consciousness (conscious or drowsy or unconscious)
- g) Behavior (includes social behavior, E.g. Overfriendly, disinherited, preoccupied, aggressive, normal)
- h) Dressing and grooming – well dressed/ appropriate/ inappropriate (to season and situation)/ neat and tidy/ dirty.
- i) Physical features:- look older/ younger than his or her age/ under weight/ over weight/ physical deformity.

### **II. PsychomotorActivity:**

(Increased/decreased/ Compulsive/echopraxia/ Stereotypy/ negativism/ automatic obedience)

### **III. Speech:** One sample of speech (verbatim in 2 or 3 sentences)

- a) Coherence-coherent/ incoherent
- b) Relevance (answer the questions appropriately) – relevant / irrelevant.
- c) Volume (soft, loud or normal)
- d) Tone (high pitch, low pitch, or normal/ monotonous)
- e) Manner – Excessive formal / relaxed/ inappropriately familiar.
- f) Reaction time (time taken to answer the question) – increased, decreased or normal

### **IV. Thought:**

- a) Form of thought/ formal thought disorder – not understandable / normal/ circumstantiality/ tangentiality/ neologism/ word salad/ preservation/ ambivalence).
- b) Stream of thought/ flow of thought- pressure of speech/ flight of ideas/ thought retardation/ mutism/ aphonia/ thought block/ Clang association.)
- c) Content of thought
  - i) Delusions- specify type and give example- Persecutory/ delusion of reference/ delusions of influence or passivity/ hypochondracal delusions/ delusions of grandeur/ nihilistic- Derealization/ depersonalization / delusions of infidelity.
  - ii) Obsession
  - iii) Phobia
  - iv) preoccupation
  - v) Fantasy – Creative / day dreaming.

### **V. Mood (subjective) and Affect (objective):**

- a) Appropriate/ inappropriate(Relevance to situation and thought congruent.
- b) Pleasurable affect- Euphoria / Elation / Exaltation/ Ecstasy
- c) Unpleasurable affect- Grief/ mourning / depression.
- d) Other affects- Anxiety / fear / panic/ free floating anxiety/ apathy/ aggression/ moods swing/ emotional liability

### **VI. Disorders Perception:**

- a) Illusion
- b) Hallucinations- (specify type and give example) – auditory/ visual/ olfactory/ gustatory/ tactile
- c) Others- hypnologic/ hypnopombic/ lilliputian/ kinesthetic/ macropsia/ micropsia/

## **VII. Cognitive functions:**

### **a) Attention and concentration :**

- Method of testing (asking to list the months of the year forward and backward)
- Serial subtractions (100-7)

### **b) Memory:**

- a) Immediate (Teach an address & after 5 mts. Asking for recall)
- b) Recent memory – 24 hrs. recall
- c) Remote : Asking for dates of birth or events which are occurred long back
  - i) Amnesia/ paramnesia/ retrograde amnesia/ anterograde amnesia
  - ii) Confabulation
  - iii) 'Déjà Vu'/ Jamaes Vu
  - iv) Hypermnesia

### **c) Orientation :**

- a. Time approximately without looking at the watch, what time is it?
- b. Place – where he/she is now?
- c. Person – who has accompanied him or her

**d) Abstraction:** Give a proverb and ask the inner meaning (E.g. feathers of a bird flock together/ rolling stones gather no mass)

**e) Intelligence & General Information:** Test by carry over sums / similarities and differences/ and general information/ digit score test.

**f) Judgment:** - Personal (future plans)

- Social (perception of the society)
- Test (present a situation and ask their response to the situation)

### **g) Insight:**

- a) Complete denial of illness
- b) Slight awareness of being sick
- c) Awareness of being sick attribute it to external / physical factor.
- d) Awareness of being sick, but due to some thing unknown in himself.
- e) Intellectual insight
- f) True emotional insight

## **VIII General Observations:**

- a) Sleep
  - i) Insomnia – temporary/ persistent
  - ii) Hypersomnia – temporary/ persistent
  - iii) Non-organic sleep- wake cycle disturbance
  - iv) EMA- Early Morning Awakening
- b) Episodic disturbances – Epilepsy/ hysterical/ impulsive behavior/ aggressive behavior/ destructive behavior

## **IX Summary & Clinical Diagnosis EVALUATION**

## CRITERIA FOR MENTAL STATUS EXAMINATION

(Maximum Marks : 50)

SN	Criteria	MarksAllotted	MarksObtained
1	<b>Format</b>	<b>02</b>	
2	General appearance	04	
3	Motor disturbances	04	
4	Speech	04	
5	Thought disturbances	04	
6	Perceptual disturbances	05	
7	Affect and mood	04	
8	Memory	03	
9	Orientation	02	
10	Judgment	03	
11	Insight	02	
12	Attention and Concentration	03	
13	Intelligence and General information	03	
14	Abstract thinking	02	
15	General Observation	02	
16	Summary	03	
		<b>Total 50</b>	

### III) EVALUATION OF PROCESS RECORDING

Process recording are written records of encounters with patients that are as verbatim as possible and include both verbal and nonverbal behaviours of the nurse and client.

#### 1. FORMAT:

1. Base line data of the client.
2. List of Nursing problems identified through history, MSE and systematic observation.
3. List of objectives of interactions based on the problems identified and learning needs of.
  - a) Client b) Student

**(Note :** The above data are obtained and recorded on initial contact. Later as each day's interaction are planned, the following format has to be followed).

#### 2. DATE AND TIME DURATION :

#### 3. SETTING : General ward/patient's unit

#### 4. OBJECTIVES TO BE ATTAINED IN THAT PARTICULAR INTERACTION:

1. ....
2. ....

#### PARTICIPANT CONVERSATION INFERENCE THERAPEUTIC COMMUNICATION

##### TECHNIQUE USED

Nurse (N) Good morning Mr. Ramu (smile, looks at patient)

Patient (P) Good morning sister Patient appears (looks down, voice pitch sad and monotonous) un-interested to converse

Mr. Ramu, you appear

Making To be sadder than  
observation, showing interest

Yesterday. Can we  
talk about it? (stands  
closer to patient)

Let us sit down in the

Room (leads the patient to the room)

---

## 5. NATURE OF TERMINATION OF INTERACTION:

Evaluation by the student:

1. Your general impression about the interaction (this could include whether TNPR maintained, use of TCT, co-operation of client etc).
2. Whether objectives achieved, and to what extent. If not- why and how do you intend to achieve it.
3. Summary of your inferences

Evaluation by teacher:

1. Overall recording
2. Phases of nurse patient relationship
3. Use of Therapeutic Communication Techniques
4. Ability to achieve objectives

**NOTE:** Limit objective to one or two and make all efforts to attain the objectives.

At the end of the process recording, mention if you were able to achieve the objective and to what extent. If not, how you intend to achieve it and what hindered you from achieving it. Maintain a therapeutic nurse-patient relationship (TNPR) in all your interactions and use as many therapeutic communications of the participants.

### EVALUATION CRITERIA FOR PROCESS RECORDING EXAMINATION

(Maximum Marks : 25)

SN	Criteria	Marks Allotted	Marks Obtained
1	Format	05	
2	Objectives	03	
3	Setting	02	
4	Therapeutic techniques used	10	
5	Evaluation by students	05	

**Total 25**

### IV) FORMAT FOR NURSING CARE PLAN

1. Bio data of the patient.
2. History of the patient
3. Pre- morbid personality.
4. Physical examination.
5. Mental status examination.
6. Assessment Data – Objective data – Subjective data
7. Nursing Diagnosis.
8. Short term goals, long terms goals.
9. Plan of action with rationale
10. Implementation including health teaching
11. Evaluation.
12. Bibliography.

### VI) FORMAT FOR CASE PRESENTATION / CASE STUDY

1. History
2. Physical examination.
3. Mental status examination.
4. Description of the case.
  - a) Definition
  - b) Etiological Factors
  - c) Psycho Pathology / Psychodynamics
  - d) Clinical Manifestations
    - i) In general
    - ii) In the patient
5. Differential diagnosis.
6. Diagnosis & Prognosis
7. Management-AIM & OBJECTIVES(including Nursing care)

(a) Medical -

- Pharmacotherapy & Somatic therapy
- Psychosocial therapy

(b) Nursing Management – In general

(c) Nursing process approaches

(d) Rehabilitation / Long term care

8. Progress notes.

9. Bibliography.

#### **VI a) Evaluation of Case Presentation**

#### **EVALUATION CRITERIA FOR CASE PRESENTATION**

(Maximum Marks : 50)

SN	Criteria	Marks Allotted	Marks Obtained
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#### **I Case Presentation**

1. <b>History Taking</b>	02
2. <b>Mental Status Examination</b>	02+2
3. <b>Description of Disease Condition</b>	
a) Definition	03
b) Etiological Factors	03
c) Psycho Pathology/ Psychodynamics	02
4. <b>Clinical Manifestations</b>	
a) In general / In books	02
b) In the patient	02
5. <b>Differential Diagnosis</b>	
6. <b>Prognosis</b>	
7. <b>Management</b> - AIM & OBJECTIVES	
a) Pharmacotherapy & Somatic therapy	02
b) Psychosocial approaches	02
8. <b>Nursing Management</b>	
a) General approaches	06+2
b) Nursing Process approach	05
c) Rehabilitation / long term care	05
<b>II Presentation (effectiveness)</b>	04
<b>III A.V. Aids</b>	03
<b>IV Bibliography</b>	03
<b>Total 50</b>	

Remarks & signature of supervisor- Date :  
Date :

Signature of student

#### **VI b) Evaluation of Case Study**

#### **EVALUATION CRITERIA FOR CASE STUDY**

(Maximum Marks : 50)

Sr.No.Criteria	Marks Allotted	Marks Obtained
1. <b>History Taking</b>	02	
2. <b>Mental Status Examination</b>	04	
3. <b>Description of Disease Condition</b> –	06	
a) Definition		
b) Etiological factors		
c) Psychopathology/		
4. <b>Clinical Manifestation</b> –	04	
In general / in book		
In Patient -		
5. <b>Differential diagnosis</b>	04	
6. <b>Prognosis</b>	04	
7. <b>Management</b> –	08	
a) Pharmacotherapy and Somatic therapies		

b) Psychosocial approaches

**8.Nursing Management –**

08+2

a) General approaches

b) Nursing Process

c) Rehabilitation/ long term care

**Drugs Study**

**04**

**Bibliography**

**04**

**Total 50**

**PSYCHIATRIC NURSING**

**VII) CLINICAL PERFORMANCE EVALUATION PROFORMA**

Name of the student :

Batch : Ward :.....

Period: From ----- to ----- Maximum Marks 100

**Excellent 5 V. Good 4 Good 3 Average 2**

**Poor 1**

**I. KNOWLEDGE ABOUT THE PATIENT:**

1. Elicit the comprehensive history of the patient.
2. Understands the disease aspect
3. Examines the mental status of the patient
4. Participates in the management of patient, in relation to drug and psychosocial intervention.
5. Carries out Nursing process with emphasis on: Meeting physical needs of patient.
6. Attends to psycho social needs
7. Identifies and meets the family needs.

**II. COMMUNICATION & INTERPERSONAL SKILLS**

1. Utilizes therapeutic communication techniques while interacting with patients & family members.
2. Improve therapeutic communication skills by process recording.
3. Maintains professional relationship with health team members.

**III. APPLICATION OF THERAPEUTIC MILIEU CONCEPT**

1. Accepts the patient as he is Maintains consistency in behavior and attitude
2. Structures time of the patient
3. Provides a safe environment.

**IV. RECORDING & REPORTING**

1. Records & Reports MSE daily (assigned patients)
2. Applies the principles of recording and reporting (accuracy, apprehensiveness, accountability)

**V. Health Teaching** Incidental and planned teaching.

**VI. Personality**

1. Professional appearance
2. Sincerely Sense responsibility
3. Punctuality

Remarks & Signature of Supervisor & Date

Signature of student & Date



**Internal Assessment**

Theory			
Sl. No.	Techniques	Number	Weightage
1	Tests	2	
	Midterm (50 marks)		50
	Prefinal (75 marks)		75
2	Other Assignment		
	Seminar (100 marks)		100
	Project Work		100
			<hr/> 325

Total Internal Assessment 25

Total External Assessment 75

**CLINICAL SPECIALITY-II**  
**NEPHRO –UROLOGY NURSING**

Placement : II Year M.Sc. Nursing

Hours of Instruction

Theory : 150 Hrs

Practical : 950 Hrs

Total : 1100 Hrs

AIM :

The 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 students to function as a nephro and urology nurse practitioner / specialist and provide quality care. It will further enable the students to function as educator, manager and researcher in the field of nephro and urology nursing.

OBJECTIVES :

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

1. Appreciate trends and issues related to nephro and urological nursing.
2. Describe the epidemiology, aetiology, pathophysiology and diagnostic assessment of nephro and urological conditions.
3. Perform physical, psychosocial and spiritual assessment.
4. Assist in various diagnostic, therapeutic and surgical intervention.
5. Provide comprehensive care to patients with nephro and urological conditions.
6. Describe various drugs used in nephro and urological conditions and nursing responsibilities.
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 complication and 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 conditions.
13. Identify the sources of stress and manage burnout syndrome among health care workers.
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 and urological nursing practice

## COURSE CONTENT

UNIT	TOPIC	HRS	METHOD
I	<p>Introduction</p> <ul style="list-style-type: none"> <li>Historical development : trends and issues in the field of nephro and urological nursing.</li> <li>Nephro and urological problems.</li> <li>Concepts, principles and nursing perspectives.</li> <li>Ethical and legal issues.</li> </ul> <p>Evidence based nursing and its application in nephro and urological nursing. (to be incorporated in all the units).</p>	5	<p>Lecture &amp; discussion</p> <p>-do-</p> <p>-do-</p> <p>Panel discussions</p>
II	<p>Epidemiology</p> <ul style="list-style-type: none"> <li>Major health problems – urinary dysfunction, urinary tract infections, glomerular disorders, obstructive disorders and other urinary disorders.</li> <li>Risk factors associated with nephro and urological conditions – hereditary, psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic considerations.</li> <li>Health promotion, disease prevention, life style modification and its implications to nursing.</li> </ul> <p>Alternate system of medicine / complimentary therapies.</p>	5	Lecture and discussions
III	<p>Review of anatomy and physiology of urinary system</p> <ul style="list-style-type: none"> <li>Embryology</li> <li>Structure and functions</li> <li>Renal circulation</li> <li>Physiology of urine formation</li> <li>Fluid and electrolyte balance</li> <li>Acid base balance</li> <li>Immunology specific to kidney</li> </ul>	5	Lecture Seminars
IV	<p>Assessment and diagnostic measures</p> <ul style="list-style-type: none"> <li>History taking</li> <li>Physical and psychosocial assessment</li> </ul> <p>Assessment of common abnormalities – dysuria, frequency, enuresis, urgency, hesitancy, haematuria, pain, retention, burning on urination, pyuria, incontinence, nocturia, polyuria, oliguria, anuria.</p>	20	Lecture and discussions
IV	<ul style="list-style-type: none"> <li>Diagnostic tests – urine studies, blood chemistry, radiological procedures – KUB, IVP, nephrotomogram, retrograde pyelogram, renal arteriogram, renal ultrasound, CT scan, MRI, cystogram, renal scan, biopsy, endoscopy-cystoscopy, urodynamic studies – cystometrogram, urinary flow studies, sphincter electromyography, voiding pressure flow study, videourodynamics, Whitaker study.</li> </ul> <p>Interpretation of diagnostic measures</p> <p>Nurse's role in diagnostic tests.</p>		

UNIT	TOPIC	HRS	METHOD
V	Renal immunopathy/ Immunopathology <ul style="list-style-type: none"> <li>• General concept of immunopathology</li> <li>• Immune mechanism of glomerular vascular disease.</li> <li>• Role of mediator systems in glomerular vascular disease.</li> </ul>	5	Lecture and discussions
VI	Urological disorders and Nursing Management Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of – <ul style="list-style-type: none"> <li>• Urinary tract infections</li> <li>• Pyelonephritis,</li> <li>• Disorders of ureter, bladder and urethra</li> <li>• Urinary dysfunctions – urinary retention, urinary incontinence, urinary reflux</li> <li>• Bladder disorders – neoplasms, calculi, neurogenic bladder, trauma, congenital abnormalities</li> <li>• Benign prostate hypertrophy (BPH)</li> <li>• Ureteral disorders – ureteritis, ureteral trauma, congenital anomalies of ureters</li> <li>• Urethral disorders – tumours, trauma, congenital anomalies of ureters</li> </ul>	15+3	Lecture, discussion, seminar and symposium
VII	Glomerular disorders and nursing management Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of – <ul style="list-style-type: none"> <li>• Glomerulonephritis – acute and chronic, nephrotic syndrome</li> <li>• Acute renal failure and chronic renal failure</li> <li>• Renal calculi</li> <li>• Renal tumors – benign and malignant</li> <li>• Renal trauma</li> <li>• Renal abscess</li> <li>• Diabetic nephropathy</li> <li>• Vascular disorders</li> <li>• Renal tuberculosis</li> <li>• Polycystic kidney disease</li> <li>• Congenital disorders</li> <li>• Hereditary renal disorders</li> </ul>	25	Lecture, discussion, seminar and symposium
VIII	Management of renal emergencies <ul style="list-style-type: none"> <li>• Anuria</li> <li>• Acute renal failure</li> <li>• Poisoning</li> <li>• Trauma</li> <li>• Urine retention</li> <li>• Acute graft rejection</li> <li>• Haematuria</li> </ul> Nurse's role	10+2	Lecture, discussion and symposium

UNIT	TOPIC	HRS	METHOD
IX	Drugs used in urinary disorders <ul style="list-style-type: none"> <li>• Classification</li> <li>• Indications, contraindications, actions and effects, toxic effects</li> <li>• Role of nurse</li> </ul>	10	Lecture & discussion
X	Dialysis <ul style="list-style-type: none"> <li>• History, types, principles, goals               <ul style="list-style-type: none"> <li>- Haemodialysis – vascular access sites – temporary &amp; permanent</li> <li>- Peritoneal dialysis</li> </ul> </li> <li>• Dialysis procedures – steps, equipments, maintenance</li> <li>• Role of nurse – pre dialysis, intra and post dialysis</li> <li>• Complications</li> <li>• Counseling</li> <li>• Patient education</li> <li>• Records and reports</li> </ul>	10	Lecture, discussion and demonstration
XI	Nursing management of a patient with kidney transplantation <ul style="list-style-type: none"> <li>• Kidney transplantation – a historical review</li> <li>• Immunology of graft rejection</li> </ul>		Lecture, discussion and symposium
XI	<ul style="list-style-type: none"> <li>• The recipient of a renal transplant</li> <li>• Renal preservation</li> <li>• Human Leucocyte Antigen (HLA) typing matching and cross matching in renal transplantation.</li> <li>• Surgical techniques of renal transplantation</li> <li>• Chronic renal transplant rejection</li> <li>• Complications after KTP : Vascular and lymphatic, Urological, Cardiovascular, liver and Neurological, infectious complication</li> <li>• KTP in children and management of paediatric patients with KTP</li> <li>• KTP in developing countries</li> <li>• Result of KTP</li> <li>• Work up of donor and recipient for renal transplant</li> <li>• Psychological aspects of KTP and organ donation</li> <li>• Ethics in transplants</li> <li>• Cadaveric transplantation</li> </ul>	10	
XII	Rehabilitation of patients with nephrological problems <ul style="list-style-type: none"> <li>• Risk factors and prevention</li> <li>• Rehabilitation of patients on dialysis and after kidney transplant</li> <li>• Rehabilitation of patients after urinary diversions</li> <li>• Family and patient teaching</li> </ul>	5	Lecture & Discussion

UNIT	TOPIC	HRS	METHOD
XIII	Paediatric urinary disorders Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of children with Renal diseases – <ul style="list-style-type: none"> <li>• UTI</li> <li>• Ureteral reflux</li> <li>• Glomerulonephritis</li> <li>• Nephrotic syndrome</li> <li>• Infantile nephrosis</li> <li>• Cystic Kidneys</li> <li>• Familial factors in renal diseases in childhood</li> <li>• Haemolytic uraemic syndrome</li> <li>• Benign recurrent haematuria</li> <li>• Nephropathy and Wilm's tumour</li> </ul>	10	Lecture & discussion
XIV	Critical care units – dialysis, KTP unit <ul style="list-style-type: none"> <li>• Philosophy, aim and objectives</li> <li>• Policies, staffing pattern, design and physical plan of dialysis and KTP unit</li> <li>• Team approach and functions</li> <li>• Psychosocial aspects in relation to staff and clients of ICU, dialysis unit</li> <li>• In service education</li> <li>• Ethical and legal issues</li> </ul>	5	Lecture & discussion
XV	<ul style="list-style-type: none"> <li>• Quality assurance in nephrological nursing practice</li> <li>• Role of advance practitioner in nephrological nursing</li> <li>• Professional practice standards</li> <li>• Quality control in nephrological nursing</li> <li>• Nursing audit</li> </ul>	5	Lecture & discussion

## PRACTICALS

Total – 900 hrs

1 week = 30 hrs

SL NO	DEPARTMENT / UNIT	NO. OF WEEK	TOTAL HOURS
1	Nephrology ward	6	180 hrs
2	Paediatrics	2	60 hrs
3	Critical care unit	2	60 hrs
4	Urology ward	6	180 hrs
5	Dialysis unit	4	120 hrs
6	Kidney transplant unit	2	60 hrs
7	Uro OT	2	60 hrs
8	Emergency wards	2	60 hrs
9	Uro Nephro OPDs	4	120 hrs
10	Diagnostic lab	2	60 hrs
	<b>Total</b>	<b>32 weeks</b>	<b>960 hrs</b>

## PROCEDURES

### I Procedures observed

1. CT scan
2. MRI
3. Radiographic studies
4. Urodynamics
5. Haemodialysis & Peritoneal dialysis
6. Renal surgeries
7. Lithotripsy (Extra corporeal Shock Wave Lithotripsy)

### II. Procedures assisted

1. Blood transfusion
2. IV cannulation therapy
3. Arterial catheterization
4. Insertion of central line / CVP line
5. Connecting lines for haemodialysis
6. Peritoneal dialysis
7. Renal biopsy
8. Endoscopies – bladder, urethra

### III Procedures performed

1. Health assessment
2. Insertion of urethral and suprapubic catheters
3. Urine analysis
4. Catheterization
5. Peritoneal dialysis
6. Bladder irrigation
7. Care of ostomies
8. Care of urinary drainage
9. Bladder training
10. Care of vascular access
11. Setting up haemodialysis machine and starting, monitoring and closing dialysis
12. Procedures for prevention of infection :
13. Hand washing, disinfection & sterilization surveillance and fumigation and universal precautions
14. Collection of specimens

15. Administration of drugs: IM, IV injection, IV cannulation & fixation of infusion pump, calculation of dosages, blood administration, monitoring fluid therapy, electrolyte imbalance.
16. Nutritional needs, diet therapy & patient education
17. Counseling

#### **IV. Other Procedures:**



## **PRACTICUM**

The students will :

1. Be posted in Nephrology and Urology wards, emergency wards(ICU), dialysis center, Kidney transplant unit, Paediatric ward, Operation theatre, Nephro and urology OPDs.
2. Care for patients undergoing dialysis and kidney transplant and write one case study and one case presentation in Nephrology ward.
3. Care for paediatric cases with Nephro and Urological disorder and write one case study.
4. Care for patients with urological disorders and write atleast one case study & one case presentation.
5. Present the report of experience at dialysis and transplant unit. And procedures observed / assisted in OPDs.
6. Practice the following nursing procedures -
  - Health assessment of patients with Nephro and urological nursing
  - Insertion of urethral and suprapubic catheters
  - Urine analysis
  - Catheterization
  - Peritoneal dialysis
  - Bladder irrigation
  - Care of ostomies
  - Care of urinary drainage
  - Bladder training
  - Care of vascular access
  - Setting up haemodialysis machine and starting, monitoring and closing dialysis
  - Perform urodynamics studies
  - Procedures for prevention of infection :
  - Hand washing, disinfection & sterilization surveillance and fumigation and universal precautions
  - Collection of specimens
  - Administration of drugs: IM, IV injection, IV cannulation & fixation of infusion pump, calculation of dosages, blood administration, monitoring fluid therapy, electrolyte imbalance.
  - Nutritional needs, diet therapy & patient education
  - Counseling

## CLINICAL EXPERIENCE

Total – 900 hrs

1 week = 30 hrs

S N	DEPARTMENT / UNIT	NO. OF WEEK	TOTAL HOURS
1	Nephrology ward	6	180 hrs
2	Paediatrics	2	60 hrs
3	Critical care unit	2	60 hrs
4	Urology ward	6	180 hrs
5	Dialysis unit	4	120 hrs
6	Kidney transplant unit	2	60 hrs
7	Uro OT	2	60 hrs
8	Emergency wards	2	60 hrs
9	Uro Nephro OPDs	4	120 hrs
10	Diagnostic lab	2	60 hrs
	<b>Total</b>	<b>32 weeks</b>	<b>960 hrs</b>

# ***INTERNAL ASSESSMENT PROFORMA & GUIDELINE***

## **CLINICAL SPECIALITY – II**

### **M.Sc. NURSING**

#### **EVALUATION :-**

##### **I. Internal Assessment : (Theory)**

Mid Term Examination	- 50 marks
Pre Final Examination	- 75 marks
Seminar	- 50 marks
Project Work	- 75 marks

-----  
**250 marks**

##### **II. Internal Assessment (Practical)**

Maximum Marks 100

##### **PRACTICUM :-**

- |   |             |
|---|-------------|
| 1. Case Study – Any two (50 Marks each)   | Marks – 100 |
| 2. Case Presentation – Two (50 Marks each)  | Marks – 100 |
| 3. Report presentation Two (50 marks each)<br>(Transplant unit and Urology OPD)   | Marks – 100 |
| 4. Clinical Evaluation Comprehensive Nursing Care.<br>(100 Marks each Any three)<br>(i.e. Urology ward, Nephrology ward, Dialysis Unit, Transplant Unit, Paediatric ward and OPD) | Marks - 300 |

##### **PRACTICAL EXAM :-**

1. Mid Term Exam. Marks – 50
2. Pre Final Exam. Marks – 100

##### **Internal assessment – Practical**

Total of Clinical assignments, clinical evaluation, and two practical exam marks , converted out of 100

## **M.Sc. NURSING : CLINICAL SPECIALITY – II**

### **PROFORMA & GUIDELINE FOR CASE STUDY**

#### **Area :- Nephro / Urology (Maximum Marks – 50)**

01. Selection of patient.
02. Demographic data of the patient.
03. Medical history past and present illness.
04. Comparison of the patient's disease with book picture.
  - a) Anatomy and physiology.
  - b) Etiology.
  - c) Patho physiology.
  - d) Signs and symptoms.
  - e) Diagnosis - provisional & final
  - f) Investigations
  - g) Complications & prognosis.
05. Management:- Medical or Surgical
  - a) Aims and objectives.
  - b) Drugs and Medications.
  - c) Diet.
06. Nursing Management (Nursing Process approach)
  - a) Aims and objectives.
  - b) Assessment and specific observations.
  - c) Nursing diagnosis.
  - d) Nursing care plan (Short term & long term with rationale.)
  - e) Implementation of nursing care with priority.
  - f) Health teaching.
  - g) Day to day progress report & evaluation.
  - h) Discharge planning.
07. Drug Study.
08. Research evidence.
09. Summary and conclusion.
10. Bibliography.

## EVALUATION CRITERIA FOR CASE STUDY.

(Maximum Marks – 50)

Sr. No.	Criteria	Marks allotted.	Marks obtained	Total
01.	Assessment	5		
02.	theoretical knowledge about disease	5		
03.	Comparative study of the patient's disease & book picture.	10		
04.	Management: Medical or Surgical.	5		
05.	Nursing Process.	15		
06.	Drug study.	3		
07.	Summary & conclusion including research evidence.	5		
08.	Bibliography.	2		
Total		50		

Signature of Student

Signature of Clinical supervisor

# **M Sc NURSING: CLINICAL SPECIALITY – II**

## **PROFORMA & GUIDELINE FOR CASE PRESENTATION**

### **I] Patient Biodata**

**Name, Age, Sex, Religion, Marital status, Occupation, Source of health care, Date of admission, Provisional Diagnosis, Date of surgery if any.**

### **II] Presenting complaints**

Describe the complaints with which the child has been brought to the hospital

**III] Socio-economic status of the family:** Monthly income, expenditure on health, food, education etc.

### **IV] History of Illness (Medical & Surgical)**

- i) History of present illness – onset, symptoms, duration, precipitating/aggravating factors
- ii) History of past illness surgery, allergies, medications etc.
- iii) Family history – Family tree, history of illness in the family members, risk factors, congenital problems, psychological problems etc.

**V] Diagnosis:** (Provisional & confirmed).

**Description of disease:** Includes the followings

1. Definition.
2. Related anatomy and physiology
3. Etiology & risk factors
4. Path physiology
5. Clinical features.

### **VI] Physical Examination of Patient (Date & Time)**

Physical examination: with date and time.

Clinical features present in the book Present in the patient

### **VII] Investigations**

Date Investigation done Results Normal value Inferences

### **VIII] Management - (Medical /Surgical)**

- a) Aims of management
- b) Objectives of Nursing Care Plan

### **IX] Treatment:**

S.No

Drug (Pharmacological name)

Dose Frequency/ Time

Action Side effects & drug reaction

Nurse's responsibility

- Medical or Surgical Management.
- Nursing management

### **X] Nursing Care Plan:** Short Term & Long Term plan.

Assessment Nursing

Diagnosis

Objective Plan of care

Rationale Implementation Evaluation

### **XI] Discharge planning:**

**It should include health education and discharge planning given to the patient.**

### **XII] Prognosis of the patient:**

### **XIII] Summary of the case:**

### **IVX] References:**

## **EVALUATION CRITERIA FOR CASE PRESENTATION**

Maximum Marks – 50)

SN	Criteria	Marks Allotted	Marks Obtained	Total
1	Content Subjective & objective data.	08		
2	Problems & need Identified & Nsg. Care Plan	15		
3	Effectiveness of presentation	5		
4	Co-relation with patient & Book i. e. research evidence.	10		
5	Use of A. V. Aids	5		
6	Physical arrangement	2		
7	Group participation	3		
8	Bibliography & references	2		
	Total	50		

(Note :- Two presentations of 50 marks each from Nephrology & urology.

# CLINICAL EVALUATION: COMPREHENSIVE NURSING CARE

(Maximum Marks – 100 each

area.)

Name of the Student

Year: II Year M.Sc Nursing

Duration of Experience:

SN	Criteria	1	2	3	4	5
I	<b>UNDERSTANDING OF PATIENT AS PERSON</b> <b>A. Approach.</b> 1. Rapport with patient/ family members. 2. Collects significant information <b>B. Understanding of patient's health problems.</b> 1. Knowledge about disease condition. 2. Knowledge about investigations. 3. Knowledge about treatment. 4. Knowledge about progress of the patient.					
II	<b>NURSING CARE PLAN</b> <b>A. Assessment of the condition of the patient.</b> 1. History taking – past & present health and illness. 2. Specific observation of the patient. 3. Nursing diagnosis. <b>B. Development of the short – term &amp; long term Nursing care plans.</b> 1. Identification of all problems in the patient/ family. 2. Prioritization & implementation of the plans. 3. Evaluation of the care given & replanning					
III	<b>TECHNICAL SKILL</b> 1. Economical & safe adaptation to the situation & available facilities. 2. Implements the procedure with skill speed & completeness.					
IV	<b>RECORDING &amp; REPORTING</b> 1. Prompt, precise, accurate & relevant. 2. Maintenance of clinical experience file.					
V	<b>HEALTH TEACHING</b> 1. Incidental/ planned teaching with principles of teaching & learning. 2. Uses visual aids appropriately					
VI	<b>PERSONALITY</b> 1. Professional appearance (uniform, dignity, tact fullness interpersonal relationship, punctuality etc. 2. Sincerely, honesty & Sense of responsibility.					
	<b>TOTAL MARKS</b>					

Positive & Negative aspects.

Signature of Student

Signature of Clinical supervisor



**CLINICAL SPECIALITY – II**

**NEUROSCIENCES NURSING**

Placement: II Years

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

**Course Description**

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

**Objectives**

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

1. Appreciate trends and issues related to neurology and neurosurgical Nursing.
2. Review the anatomy and physiology of nervous system.
3. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of patients with neurological and neurosurgical 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 in-service education program for nursing personnel.
14. Develop standards of care for quality assurance in neuroscience nursing practice.
15. Identify the sources of stress and manage burnout syndrome among health care providers.
16. Teach and supervise nurses and allied health workers.
17. Plan and develop physical layout of neuro intensive care unit.

## Course Content

Unit	Hours	Content
<b>I</b>	<b>5</b>	<b>Introduction</b> <ul style="list-style-type: none"> <li>❖ Introduction to neuroscience (neurological and neurosurgical) nursing <ul style="list-style-type: none"> <li>• History – Development in neurological and neurosurgical nursing, Service &amp; education.</li> <li>• Emerging trends and issues in neurology and neuro surgery and its implication to nursing.</li> <li>• Neurological and neurosurgical problems –</li> <li>• Concepts, principles and nursing perspectives</li> <li>• Ethical and legal issues</li> <li>• Evidence based nursing and its application in neurological and neurosurgical nursing.</li> </ul> </li> </ul>
<b>II</b>	<b>5</b>	<b>Epidemiology</b> <ul style="list-style-type: none"> <li>❖ Major health problems-</li> <li>❖ Risk factors associated with neurological conditions- Hereditary, Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic consideration, occupational and infections.</li> <li>❖ Health promotion, disease prevention, life style modification and its implications to nursing.</li> </ul> <p>Alternative system of medicine / complementary therapies</p>
<b>III</b>	<b>10</b>	<b>Review of Anatomy and physiology</b> <ul style="list-style-type: none"> <li>❖ Embry physiology</li> <li>❖ Structure and functions of Nervous system-CNS, ANS, cerebral circulating, cranial and spinal nerves and reflexes, motor and sensory functions.</li> <li>❖ Sensory organs</li> </ul>
<b>IV</b>	<b>15</b>	<b>Assessment and diagnostic measures</b> <ul style="list-style-type: none"> <li>❖ Assessment <ul style="list-style-type: none"> <li>• History taking</li> <li>• Physical assessment, psychosocial assessment</li> <li>• Neurological assessments, Glasgow coma scale interpretation &amp; its relevance to nursing.</li> </ul> </li> </ul> <p>Common assessment abnormalities.</p>

Unit	Hours	Content
		<ul style="list-style-type: none"> <li>❖ Diagnostic measures <ul style="list-style-type: none"> <li>• Cerebro spinal fluid analysis</li> <li>• Radiological studies-Skull and spine X-ray Cerebral Angiography, CT Scan, Single Photon Emission Computer tomography (SPECT), MRI (Magnetic Resonance Imaging), MRA, MRS, Functional MRI, Myelography, PET (Positron Emission Test), Interventional radiology.</li> <li>• Electrographic studies- Electro encephalo graphy, MEG, EMG, video EEG,</li> <li>• Nerve conduction studies-Evoked potentials, visual evoked potentials, brain stem auditory evoked potentials, somatosensory evoked potentials.</li> <li>• Ultrasound studies-Carotid duplex, transcranial Doppler sonography,</li> <li>• Immunological studies</li> <li>• Biopsies – muscle, nerve and Brain.</li> </ul> </li> </ul> <p>Interpretation of diagnostic measures</p> <p>Nurse's role in diagnostic tests.</p>
V	5	<p><b>Meeting Nutritional needs of neurological patients</b></p> <ul style="list-style-type: none"> <li>❖ Basic nutritional requirements</li> <li>❖ Metabolic changes following injury and starvation</li> <li>❖ Nutritional assessment</li> <li>❖ Common neurological problems that interfere with nutrition and strategies for meeting their nutritional needs.</li> <li>❖ Special metabolic and electrolyte imbalances</li> <li>❖ Chronic fatigue syndrome.</li> </ul>
VI	5	<p><b>Drugs used in neurological and neurosurgical disorders</b></p> <ul style="list-style-type: none"> <li>❖ Classification</li> </ul> <p>Indications, contraindications, actions and effects, toxic effects Role of nurse</p>
VII	10	<p><b>Traumatic conditions</b></p> <ul style="list-style-type: none"> <li>❖ Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of <ul style="list-style-type: none"> <li>• Cranio cerebral injuries.</li> <li>• Spinal &amp; spinal cord injuries</li> <li>• Peripheral nerve injuries.</li> <li>• unconsciousness</li> </ul> </li> </ul>

Unit	Hours	Content
VIII	10	<b>Cerebro vascular disorders.</b> <ul style="list-style-type: none"> <li>❖ Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of <ul style="list-style-type: none"> <li>• Stroke &amp; arterio venous thrombosis.</li> <li>• Haemorrhagic embolus.</li> <li>• Cerebro vascular accidents.</li> <li>• Intracranial aneurysm.</li> <li>• Subarchnoid Haemorrhage</li> <li>• Arterio venous fistula</li> <li>• Brain tumours</li> </ul> </li> <li>❖ Diseases of cranial nerves;trigeminal neuralgia, Facial palsy, Bulbar palsy.</li> </ul>
IX	10	<b>Degenerating and demyelinating disorders</b> <ul style="list-style-type: none"> <li>❖ Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of <ul style="list-style-type: none"> <li>• Motor neuron diseases.</li> <li>• Movement disorders- Tics, dystonia, chorea, wilson's disease, essential tremors</li> <li>• Dementia</li> <li>• Parkinson's disease</li> <li>• Multiple sclerosis.</li> <li>• Alzemier's</li> </ul> </li> </ul>
X	10	<b>Neuro infections</b> <ul style="list-style-type: none"> <li>❖ Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of Neuro infections <ul style="list-style-type: none"> <li>• Meningitis-types</li> <li>• Encephalitis.</li> <li>• Poliomyelitis.</li> <li>• Parasitic infections.</li> <li>• Bacterial infections.</li> <li>• Neurosyphilis.</li> <li>• HIV &amp; AIDS</li> <li>• Brain abscess</li> </ul> </li> </ul>

Unit	Hours	Content
<b>XI</b>	<b>10</b>	<b>Paroxysmal disorders.</b> <ul style="list-style-type: none"> <li>❖ Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of <ul style="list-style-type: none"> <li>• Epilepsy and seizures.</li> <li>• Status epilepticus.</li> <li>• Syncope.</li> <li>• Menier's syndrome.</li> <li>• Cephalgia.</li> </ul> </li> </ul>
<b>XII</b>	<b>10</b>	<b>Developmental disorders.</b> <ul style="list-style-type: none"> <li>❖ Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and Nursing management of <ul style="list-style-type: none"> <li>• Hydrocephalus</li> <li>• Craniosynostosis</li> <li>• Spina bifida-Meningocele, Meningomyelocele encephalocele</li> <li>• Syringomyelia</li> <li>• Cerebro vascular system anomalies</li> <li>• Cerebral palsies</li> <li>• Down's syndrome</li> </ul> </li> </ul>
<b>XIII</b>	<b>10</b>	<b>Neuro muscular disorders.</b> <ul style="list-style-type: none"> <li>❖ Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of <ul style="list-style-type: none"> <li>• Polyneuritis – G B Syndrome.</li> <li>• Muscular dystrophy.</li> <li>• Myasthenia gravis.</li> <li>• Trigeminal neuralgia.</li> <li>• Bell's palsy.</li> <li>• Menier's disease</li> <li>• Carpal tunnel syndrome</li> <li>• Peripheral neuropathies</li> </ul> </li> </ul>
<b>XIV</b>	<b>5</b>	<b>Neoplasms – surgical conditions.</b> <ul style="list-style-type: none"> <li>❖ Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of <ul style="list-style-type: none"> <li>• Space occupying lesions – types</li> <li>• Common tumors of CNS</li> </ul> </li> </ul>

Unit	Hours	Content
<b>XV</b>	<b>5</b>	<b>Others disorders</b> <ul style="list-style-type: none"> <li>❖ Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of</li> <li>❖ Metabolic disorders- diabetes, insipidus, metabolic encephalopathy</li> <li>❖ Sleep disorders.</li> <li>❖ Auto immune disorders- multiple sclerosis, inflammatory myopathies</li> </ul>
<b>XVI</b>	<b>10</b>	<b>Neuro emergencies</b> <ul style="list-style-type: none"> <li>❖ Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of <ul style="list-style-type: none"> <li>• Increased intracranial pressure</li> <li>• Unconscious</li> <li>• Herniation syndrome</li> <li>• Seizures</li> <li>• Several head injuries</li> <li>• Spinal injuries</li> <li>• Cerebro vascular accidents</li> </ul> </li> </ul>
<b>XVII</b>	<b>5</b>	<b>Rehabilitation</b> <ul style="list-style-type: none"> <li>❖ Concept and Principles of Rehabilitation.</li> <li>❖ Rehabilitation in acute care setting, and following stroke, head injury and degenerative disorders of brain.</li> <li>❖ Physiotherapy.</li> <li>❖ Counseling.</li> </ul> <b>Speech &amp; Language</b> – Neurogenic communication disorders.
<b>XVII I</b>	<b>5</b>	<b>Ethical and legal issues in neuroscience nursing</b> <ul style="list-style-type: none"> <li>❖ Brain death and organ transplantation</li> <li>❖ Euthanasia</li> <li>❖ Negligence and malpractice</li> <li>❖ Nosocomial infections</li> </ul>
<b>XIX</b>	<b>5</b>	<ul style="list-style-type: none"> <li>❖ Quality assurance in neurological nursing practice</li> <li>❖ Role of advance practitioner in neurological nursing</li> <li>❖ Professional practice standards</li> <li>❖ Quality control in neurologic nursing</li> <li>❖ Nursing audit</li> <li>❖ Neuro ICU <ul style="list-style-type: none"> <li>• Philosophy, aims and objectives</li> <li>• Policies, staffing pattern, design and physical plan of neuro ICU</li> <li>• Team approach, functions</li> <li>• Psychosocial aspects in relation to staff and clients of neuro ICU,</li> <li>• In-service education</li> </ul> </li> </ul>

## PRACTICAL

**Total = 960 Hours**

**1 week = 30 Hours**

SN.	Area of posting	No. of Week	Total Hours
1	OPD	2	60
2	Casualty	2	60
3	Diagnosis	2	60
4	Neuro psychiatry	1	30
5	Neuro Medical wards	4	120
6	Paediatric Neuro ward	2	60
7	Neuro surgical wards	4	120
8	Head injury ward	4	120
9	ICU – neuro medicine	4	120
10	ICU – neuro surgical	4	120
11	Rehabilitation	2	60
12	Operation Theatre	1	30
	<b>Total</b>	<b>32 Weeks</b>	<b>960 Hours</b>

- **Visit to cerebral palsy centre**

### ESSENTIAL NEURO NURSING SKILLS

#### I. Procedures Observed

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

#### II. Procedure Assisted

1. Advanced Cardiac life support
2. Lumbar Puncture
3. Biopsies – muscle, nerve and Brain
4. Arterial Blood Gas
5. ECG Recording
6. Blood transfusion
7. IV cannulation – open method
8. Endotracheal intubation
9. Ventilation
10. Tracheostomy

11. ICP monitoring
12. Gama Knife
13. Cerebral angiography
14. Myelography
15. Neuro surgeries

### **III. Procedures Performed:**

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

### **IV. Other Procedures:**



## *REFERENCES*

1. Neuro Science Nursing A Spectrum of care 2<sup>nd</sup> Edition, 2002 , Ellen Barker by Mosby
2. Neuro Science Nursing – Ellen Barker – Mosby’s publication
3. Medical Surgical Nursing 7<sup>th</sup> Edition, 2004, Black, Elsiver’s publication
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6. Text book of Neuro Physiology, Ghai C.L.
7. Text book of Human Neuroanatomy, 5<sup>th</sup> Edition, 1997, Inderbir Singh, T.P. Brothers.
8. Primary Prevention of Mental, Neurological and Psychosocial disorders, WHO, Geneva, AITBS publications, India.
9. Resent journals related to neuro science nursing
10. Sharon – Medical surgical nursing

## **Theory Internal Assessment**

1. Presentation	50 marks
2. Seminar	100 marks
3. Project Work	100 marks
4. Test paper – Mid Term	50 marks
Prelim	75 marks
<hr/>	
<b>Total</b>	<b>375 marks</b>

**Calculate of out of 25**

## **Practical Experience Assignments**

Case study	:	02	(50 marks each)	$50 \times 2 =$	100
Case Presentation	:	02	(50 marks each)	$50 \times 2 =$	100
Care Plan	:	03	(50 marks each)	$50 \times 3 =$	150
Clinical Performance Evaluation:		03	(100 marks each)	$100 \times 3 =$	300
Practical Examination			Mid Term		50
			Pre Term		100
					<hr/>
					800

Internal Assessment Total marks out of 100

External Assessment Total marks out of 100

Final Examinations :

<u>Theory</u>		
Internal	:	25
External	:	75
		<hr/>
<b>Total</b>	:	<b>100</b>
		<hr/>
<u>Practical</u>		
Internal	:	100
External	:	100
		<hr/>
<b>Total</b>	:	<b>200</b>
		<hr/>

## **M.Sc. NURSING : CLINICAL SPECIALITY – II**

### **PROFORMA & GUIDELINE FOR CASE STUDY**

**Area :- (Maximum Marks – 50)**

01. Selection of patient.
02. Demographic data of the patient.
03. Medical history past and present illness.
04. Comparison of the patient's disease with book picture.
  - a) Anatomy and physiology.
  - b) Etiology.
  - c) Patho physiology.
  - d) Signs and symptoms.
  - e) Diagnosis - provisional & final
  - f) Investigations
  - g) Complications & prognosis.
05. Management:- Medical or Surgical
  - a) Aims and objectives.
  - b) Drugs and Medications.
  - c) Diet.
06. Nursing Management (Nursing Process approach)
  - a) Aims and objectives.
  - b) Assessment and specific observations.
  - c) Nursing diagnosis.
  - d) Nursing care plan (Short term & long term with rationale.)
  - e) Implementation of nursing care with priority.
  - f) Health teaching.
  - g) Day to day progress report & evaluation.
  - h) Discharge planning.
07. Drug Study.
08. Research evidence.
09. Summary and conclusion.
10. Bibliography.

## EVALUATION CRITERIA FOR CASE STUDY.

(Maximum Marks – 50)

SN.	Criteria	Marks allotted.	Marks obtained	Total
01.	Assessment	5		
02.	theoretical knowledge about disease	5		
03.	Comparative study of the patient's disease & book picture.	10		
04.	Management: Medical or Surgical.	5		
05.	Nursing Process.	15		
06.	Drug study.	3		
07.	Summary & conclusion including research evidence.	5		
08.	Bibliography.	2		
Total		50		

Signature of Student

Signature of Clinical supervisor

## **M Sc NURSING: CLINICAL SPECIALITY – II**

### **PROFORMA & GUIDELINE FOR CASE PRESENTATION**

#### ***I] Patient Biodata***

**Name, Age, Sex, Religion, Marital status, Occupation, Source of health care, Date of admission, Provisional Diagnosis, Date of surgery if any.**

#### **II] Presenting complaints**

Describe the complaints with which the child has been brought to the hospital

**III] Socio-economic status of the family:** Monthly income, expenditure on health, food, education etc.

#### **IV] History of Illness (Medical & Surgical)**

- i) History of present illness – onset, symptoms, duration, precipitating/aggravating factors
- ii) History of past illness surgery, allergies, medications etc.
- iii) Family history – Family tree, history of illness in the family members, risk factors, congenital problems, psychological problems etc.

**V] Diagnosis:** (Provisional & confirmed).

**Description of disease:** Includes the followings

1. Definition.
2. Related anatomy and physiology
3. Etiology & risk factors
4. Path physiology
5. Clinical features.

#### **VI] Physical Examination of Patient (Date & Time)**

Physical examination: with date and time.

Clinical features present in the book Present in the patient

#### ***VII] Investigations***

Date Investigation done Results Normal value Inferences

#### **VIII] Management - (Medical /Surgical)**

- a) Aims of management
- b) Objectives of Nursing Care Plan

#### **IX] Treatment:**

S.No

Drug (Pharmacological name)

Dose      Frequency/ Time

Action    Side effects & drug reaction

Nurse's responsibility

- Medical or Surgical Management.
- Nursing management

**X] Nursing Care Plan:** Short Term & Long Term plan.

Assessment Nursing

Diagnosis

Objective Plan of care

Rationale Implementation Evaluation

**XI] Discharge planning:**

**It should include health education and discharge planning given to the patient.**

**XII] Prognosis of the patient:**

**XIII] Summary of the case:**

**IVX] References:**

***EVALUATION CRITERIA FOR CASE  
PRESENTATION***

Maximum Marks – 50)

SN	Criteria	Marks Allotted	Marks Obtained	Total
1	Content Subjective & objective data.	08		
2	Problems & need Identified & Nsg. Care Plan	15		
3	Effectiveness of presentation	5		
4	Co-relation with patient & Book i. e. research evidence.	10		
5	Use of A. V. Aids	5		
6	Physical arrangement	2		
7	Group participation	3		
8	Bibliography & references	2		
	Total	50		

# ***CLINICAL EVALUATION: COMPREHENSIVE NURSING CARE***

(Maximum Marks – 100 each area.)

Name of the Student

Year: II Year M.Sc Nursing

Duration of Experience:

SN	Criteria	1	2	3	4	5
I	<b>UNDERSTANDING OF PATIENT AS PERSON</b> <b>A. Approach.</b> 1. Rapport with patient/ family members. 2. Collects significant information <b>B. Understanding of patient's health problems.</b> 1. Knowledge about disease condition. 2. Knowledge about investigations. 3. Knowledge about treatment. 4. Knowledge about progress of the patient.					
II	<b>NURSING CARE PLAN</b> <b>A. Assessment of the condition of the patient.</b> 1. History taking – past & present health and illness. 2. Specific observation of the patient. 3. Nursing diagnosis. <b>B. Development of the short – term &amp; long term Nursing care plans.</b> 1. Identification of all problems in the patient/ family. 2. Prioritization & implementation of the plans. 3. Evaluation of the care given & replanning					
III	<b>TECHNICAL SKILL</b> 1. Economical & safe adaptation to the situation & available facilities. 2. Implements the procedure with skill speed & completeness.					
IV	<b>RECORDING &amp; REPORTING</b> 1. Prompt, precise, accurate & relevant. 2. Maintenance of clinical experience file.					
V	<b>HEALTH TEACHING</b> 1. Incidental/ planned teaching with principles of teaching & learning. 2. Uses visual aids appropriately					
VI	<b>PERSONALITY</b> 1. Professional appearance (uniform, dignity, tact fullness interpersonal relationship, punctuality etc. 2. Sincerely, honesty & Sense of responsibility.					
	<b>TOTAL MARKS</b>					

Positive & Negative aspects.

**Signature of Student**

**Signature of Clinical supervisor**

## **BIBLIOGRAPHY**

### **Anatomy & Physiology**

1. Gerard J. Tortora, Principles of Anatomy and Physiology, 11<sup>th</sup> edition, 2006, published by John Wiley and sons, United States of America
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3. Gray Thibodkar, Textbook of Anatomy and Physiology, 12<sup>th</sup> edition, published by Elsevier, India, 2003
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11. Datta T. K. fundamentals of Operation Theatre Services, Paypee, (2003), New Delhi.
12. Maheswari J , Essentials of Orthopedics (3<sup>rd</sup> ed) Mehta Publication, New Delhi.
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16. Mmedical Surgical Nursing: A Nursing process approach Col. I & II, Ignatacicius, Donna and Workman, Linda, W. B. Saunders company, Philadelphia , 1995
17. Nettina, Sandra, Lippincott Williams & Wilkins, The Lippincott Manuel of Nursing practice, 7<sup>th</sup> ed, 2001, Philadelphia

Name of College

### EVALUATION OF SEMINARS

Date : \_\_\_\_\_

Name of the Student Nurse:

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Subject:

Topic:

Grade Given:

Name of evaluator :

S.N.	BASIC OF EVALUATION	5	4	3	2	1	REMARK
I	<b>Knowledge of subject matter</b> a. Organisation of subject matter b. Classification of ideas with appropriate and interesting examples c. Depth and mastery of subject matter d. Anticipated question and has prepared for answer e. Selection and organisation of A. V. aids f. Integration and co-relation with other subjects. g. Submitted in time for correction						
II	<b>Oragnisation and management of class</b> a. Budgeting of time b. Asked questions for classification c. Class room participation						
III	<b>Effectiveness of Seminar</b> a. Introduction of topic b. Ability to hold students attention c. Stimulate student participation						
IV	<b>Effectiveness of Seminar</b> a. Questioning clear and stimulating b. Maintaining learning atmosphere c. Use of black board						
V	<b>Personal appearance</b> a. Neatness and Professional appearance b. Degree of self confidence c. Language (Appropriate correct, clear, tone mannerism) d. Punctuality (Starting lesson, completing lesson)						
	<b>Total Hours out of 100</b>						

Evaluator's Comments:

Signature of the Student

Name of the College

### NURSING CARE PLAN EVALUATION

B Sc Nursing Course

Name of the Student:

Year & Batch:

Name of the Patient:

Age:

Sex:

M.R.D. No. :

Ward No.

Bed No.

Area of Study : Medical/ Surgical/ Psychiatric

Diagnosis

Name of the Surgery

Date of Surgery

Date of Nursing Care given: From

To

SN	Details	Total Marks	Marks Obtained
1	Assessment	12	
2	Nursing Diagnosis	3	
3	Goal	2	
4	Outcome Criteria / Objectives	2	
5	Nursing Intervention	15	
6	Rationale	3	
7	Evaluation	3	
8	Nurses notes/ Progress report of the patient	10	
<b>Total</b>		<b>50</b>	

Remarks:

Teacher's Sign:

Student's Sign

Teacher's Name:

Date:

**References:**

1. Janet Hicks Keen : Critical Care Nursing Consultant; Mosby, 1997
2. Kuruvilla Jaya: Essentials of Critical Care Nursing: Jaypee Brothers, Mumbai, 2007
3. Mervyn Singer: Oxford handbook of Critical care; 2<sup>nd</sup> ed., Oxford University Press, 2005.
4. M. S. Baird, Manual of Critical Care Nursing; 5<sup>th</sup> ed., Elsevier, 2005
5. P. G. Morton: Critical Care Nursing; 8<sup>th</sup> ed., Lippincott Williams and Wilkins, 2005
6. Sheree Comer: Delmar's Critical Care- Nursing Care plans; 2<sup>nd</sup> ed., Thomson, 2005

**Journals:-**

- 1.Critical Care Nursing : AACN
- 2.Critical Care Nursing Clinics

# CLINICAL SPECIALITY – II

## **OBSTETRIC AND GYNAECOLOGICAL NURSING**

Placement – II year

Hours of instruction

Theory: 150

Practical: 950

Total: 1100

### **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 advance-nursing skill for nursing interventions in various obstetrical and gynecological conditions. It will further enable the students to functions 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 gynecological conditions
2. Perform physical, psychological, cultural and spiritual assessment
3. Demonstrate competence in caring for women with obstetrical and gynecological 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, gynecological and neonatal care
9. Teach and supervise nurses and allied health workers
10. Design a layout of specialty units of obstetrics and gynecology
11. Develop standards for obstetrical and gynecological 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 gynecological nursing
14. Function as independent midwifery nurse practitioner

SN	UNIT	TOPIC	THEORY	PRACTICALS
	I	<b>Management of problems of women during pregnancy</b> <ul style="list-style-type: none"> <li>❑ Risk approach of obstetrical nursing care, concept &amp; goals</li> <li>❑ Screening of high –risk pregnancy, newer modalities of diagnosis</li> <li>❑ Nursing management of pregnancies at risk-due to obstetrical complication</li> <li>➤ Pernicious vomiting</li> <li>➤ Bleeding in early pregnancy, abortion, ectopic pregnancy, and gestational trophoblastic diseases</li> <li>➤ Hemorrhage during late pregnancy, ante partum, hemorrhage, placenta praevia, abruptio placenta</li> <li>➤ Hypertensive disorders in pregnancy, pre –eclampsia, eclampsia, heomolysis elevated liver enzyme, Low platelet count (HELLP)</li> <li>➤ I so –immune diseases. Rh and abo incompatibility</li> <li>➤ Hematological problems in pregnancy</li> <li>➤ Hydramnios –oligoydramnios</li> <li>➤ Prolonged pregnancy post term, post maturity</li> <li>➤ Multiple pregnancies</li> <li>➤ Intra uterine infection &amp; pains during pregnancy.</li> </ul> <p>Intra uterine Growth Retardation (IUGR), premature rupture of Membrane (PROM), intra uterine death</p>	25	
	II	<b>Pregnancies at risk-due to pre existing health problems</b> <ul style="list-style-type: none"> <li>❑ Metabolic conditions</li> <li>❑ Anemia and nutritional deficiencies</li> <li>❑ Hepatitis</li> <li>❑ Cardio-vascular disease</li> <li>❑ Thyroid disease</li> <li>❑ Epilepsy</li> <li>❑ Essentials hypertension</li> <li>❑ Chronic renal failure</li> <li>❑ Tropical diseases</li> <li>❑ Psychiatric disorders</li> <li>❑ Infections Toxoplasmosis rubella cytomegalo virus Herpes (TORCH): Reproductive Tract infections (RTI): STD: HIV/AIDS, vaginal infections; Leprosy, Tuberculosis</li> <li>❑ Other risk factors: Age-Adolescents, elderly; unwed mothers, sexual abuse, substance use</li> </ul> <p>Pregnancies complicating with tumors, uterine anomalies, prolapse, ovarian cyst</p>	15	

SN	UNIT	TOPIC	THEORY	PRACTICALS
	III	<b>Abnormal labour, pre-term labour &amp; obstetrical emergencies</b> <ul style="list-style-type: none"> <li>□ Etiology, pathophysiology and nursing management of <ul style="list-style-type: none"> <li>○ Uncoordinated uterine actions, Antony of uterus, precipitate labour, prolonged labour</li> <li>○ Abnormal lie, presentation, position compound presentation</li> <li>○ Contracted pelvis –CPD; dystocia</li> <li>○ Obstetrical emergencies Obstetrical shock, vasa praevia, inversion of uterus, amniotic fluid embolism, rupture uterus, presentations and prolapse cord</li> <li>○ Augmentation of labour Medical and surgical induction</li> <li>○ Version</li> <li>○ Manual removal of placenta</li> <li>○ Obstetrical operation: Forceps delivery, Ventouse, Caesarian section, Destructive operations</li> <li>○ Genital tract injuries –Third degree perinea tear ,VVF,RVF</li> </ul> </li> <li>➤ Complications of third stage of labour: <ul style="list-style-type: none"> <li>○ Post partum Hemorrhage</li> <li>○ Retained Placenta</li> </ul> </li> </ul>	15 + 2	
	IV	<b>Post partum complications</b> <ul style="list-style-type: none"> <li>□ <b>Nursing management of</b> <ul style="list-style-type: none"> <li>○ Puerperal infections, puerperal sepsis, urinary complications, puerperal venous thrombosis and pulmonary embolism</li> <li>○ Sub involution of uterus, breast conditions, Thrombophlebitis Psychological complications, post partum blues, depression, psychosis</li> </ul> </li> </ul>	10	
	V	<b>High Risk Newborn</b> <ul style="list-style-type: none"> <li>□ Concept, goals, assessment, principles.</li> <li>□ Nursing management of <ul style="list-style-type: none"> <li>• Pre-term, small for gestational age, post –mature infant, and baby of diabetic and substance use mothers</li> <li>• Respiratory conditions, asphyxia neonatorum, neonatal apnea meconium aspiration syndrome, pneumo thorax, pneumomediastnum</li> <li>• Icterus neonatorum</li> <li>• Birth injuries</li> <li>• Hypoxic alchemic encephelopathy</li> <li>• Congenital anomalies</li> <li>• Neonatal hypocalcaemia, hypoglycemia, Hypomagnesaemia</li> <li>• Neonatal heart diseases</li> <li>• Neonatal hemolytic disease</li> <li>• Neonatal infections, neonatal sepsis, ophthalmia neonatorum, congenital syphilis, HIV/AIDS</li> <li>• Advanced neonatal procedures</li> <li>• Calculation of fluid requirements</li> <li>• Hematological conditions - erythblastosis fetalis, hemorrhagic disorder in the newborn</li> <li>• Organization of neonatal care, services (Levels), transport, neonatal intensive care unit, organization and management of nursing services in NICU</li> </ul> </li> </ul>	25	

SN	UNIT	TOPIC	THEORY	PRACTICALS
	VI	<b>HIV / AIDS</b> <ul style="list-style-type: none"> <li>❑ HIV positive mother and her baby</li> <li>❑ Epidemiology</li> <li>❑ Screening</li> <li>❑ Parent to child transmission (PTCT)</li> <li>❑ Prophylaxis for mother and baby</li> <li>❑ Slandered safety measures</li> <li>❑ Counseling</li> <li>❑ Breast feeding issues</li> <li>❑ National policies and guidelines</li> </ul> Issues: Legal, ethical, Psychosocial and rehabilitation role of nurse	15	
	VII	<b>Gynecological problems and nursing management</b> <ul style="list-style-type: none"> <li>❑ Gynecological assessment</li> <li>❑ Gynecological procedures</li> <li>❑ Etiology, pathophysiology, diagnosis and nursing               <ul style="list-style-type: none"> <li>○ Menstrual irregularities</li> <li>○ Disease of genital tract</li> <li>○ Genital tract infection</li> <li>○ Uterine displacement</li> <li>○ Genital prolepses</li> <li>○ Genital injuries</li> <li>○ Uterine malformation</li> </ul> </li> </ul> Uterine fibroid, ovarian tumors, Breast carcinoma, pelvic inflammatory diseases, reproductive tract malignancies, hysterectomy-vaginal and abdominal	25	
	VIII	<b>Infertility</b> <ul style="list-style-type: none"> <li>• Primary and secondary causes</li> <li>• Diagnostic procedures</li> <li>• Counseling : ethical and legal aspects of assisted reproductive technology (ART)</li> <li>• Recent advancement in infertility management</li> <li>• Adoption procedures</li> </ul> Role of nurses in infertility management	5	
	IX	<b>Menopause</b> <ul style="list-style-type: none"> <li>• Physiological , Psychological and social aspects</li> <li>• Hormone Replacement Therapy</li> <li>• Surgical Menopause</li> <li>• Counseling and guidance</li> </ul> Role of midwifery nurse practitioner	5	
	X	<b>Administration and management of obstetrical and gynecological unit</b> <ul style="list-style-type: none"> <li>❑ Design &amp; layout</li> <li>❑ Staffing</li> <li>❑ Equipment, supplies</li> <li>❑ Infection control: Slandered safety measures</li> <li>❑ Quality Assurance :obstetric auditing –records /reports</li> </ul> .Norms ,policies and protocols Practice standards for obstetrical and gynecological unit	5	



SNO	UNIT	TOPIC	THEORY	PRACTICALS
	XI	<b>Education and training in obstetrical and gynecological care</b> <ul style="list-style-type: none"> <li>❑ Staff orientation, Training and development</li> <li>❑ In-services education programs</li> </ul> Clinical teaching programs Planning Midwifery programme – GNM, B Sc, ANM,Dai /TBA	2	3
	XII	International & National agencies –ICM ,SOMI	1	

## Practicals

Total = 960 Hours

1 Week = 30 Hours

Clinical practice in Obstetrical and Gynecological setting i.e., Antenatal Out Patient Department, Labor room, Post natal / MCH clinic, NICU, Obstetrical and gynecological Operation Theatres, Gynecological ward, Post partum . MTP clinic, Infertility centers Community Health center / Primary health center.

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

## Essential Obstetrical and gynecological Skill

### Procedure observed

- ART procedures
- Infertility management : artificial reproduction : artificial insemination, invitro fertilization, and related procedures
- Ultra sonography
- Specific laboratory tests
- Amniocentesis
- Cervical & vaginal cytology
- Fetoscopy
- Hysteroscopy
- MRI
- Surgical diathermy
- Cryosurgery

### Procedure Assisted

- Operative delivery
- Abnormal deliveries –Forceps application, Ventouse,Breech
- Exchange blood transfusion
- Culdoscopy
- Cystoscopy

- Tuboscopy
- Laparoscopy
- Endometrical Biopsy
- Tubal Patency test
- Chemotherapy
- Radiation therapy
- Medical termination of Pregnancy
- Dilation and Curettage

### **Procedures performed**

- Relevant history taking obstetric/Gyn
- Complete General physical Examination
- Antenatal assessment - 20
- Assessment of risk status
- Health education, counseling and mother craft classes
- Antenatal immunization
- Assessment of intra uterine fetal well-being
- Universal precautions –effective infection control methods
- Assessment of women in abnormal pregnancy
- Vaginal examination and interpretation (early pregnancy, labour, post partum)
- Utilization of partograph, Cervicograph
- Medical & surgical induction
- Conduction of safe delivery
- Application of outlet forceps, delivery of breach –Burns Marshall, Loveset maneuvers
- Episiotomies suturing
- Manual removal of placenta, placental examination
- Postnatal assessment – 20
- Management of breast engorgement, while leg
- Postnatal counseling
- Reposition of inversion of uterus
- Breast care, breast exam, and drainage breast abcess
- Postnatal exercise
- Newborn assessment –Ruling out congenital anomalies
- Assessment of high risk newborn
- Neonatal resuscitation
- Apgar score
- Monitoring neonates
  - Clinically
  - With monitor
  - Capillary refill time
  - Assessment of jaundice
- Gastric lavage
- Gastric gavages
- Care of child in multi channel monitor and ventilator
- Care of child in radiant, warmer and incubutator
- Kangaroo care
- Anthropometrics measurement
- Neonatal reflexes
- Breast feeding
- Parental nutrition & fluid balance /infusion pump
- Feeding technique
- Medication
  - Oral
  - I.D

I.M

I.V

- Capillary blood sample collection
- Oxygen therapy
- Phototherapy
- Chest physiotherapy
- Parental counseling –bereaved parents
- Setting of operation theatre
- Trolley and table set up for Obstetrical & gynecological operations
- Pap smear preparation
- Taking vaginal test for ovulation
- Vaginal pessaries
- Gynecological therapy
- Insertion of IUD and removal
- Counseling infertile couple

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES**

**M Sc NURSING : CLINICAL SPECIALITY I - OBSTETRIC & GYNAECOLOGIC NURSING**

**SECOND YEAR**

**SCHEME OF INTERNAL ASSESSMENT**

Internal Assessment SN.	Theory Techniques	Number	Weightage
1	Tests Midterm (50 marks) Prefinal (75 marks)	2	50 75
2	Other Assignment Seminar (100 marks) Journal Presentation (50 marks)		100 50 <hr/> 275

Total Internal Assessment 25

Total External Assessment 75

**Practical Experience Evaluation**

1.	Care Plan - ANTENATAL	1	50
2.	INTRANATAL	1	50
3.	POSTNATAL	1	50
4.	Care Plan NEWBORN	1	50
5.	CLINICAL PRESENTATION Antenatal Postnatal	1 1	50 50
6.	CASE BOOK /JOURNAL	1	30
7.	CLINICAL EVALUATION Antnatal, Postnatal	2	200 (100x2)
8.	PRACTICE TEACHING (NG EDN)	1	
9.	PREFINAL EXAMINATION	1	100
10.	Mid term Practical Examination	1	50
11.	Prefinal Practical Examination	1	100
			<b>780</b>

**UNIVERSITY EXAMINATION**

**1.WRITTEN EXAMINATION**

**75 MARKS**

**2. PRACTICAL EXAMINATION**

**100 MARKS**

**Maharashtra University of Health Sciences, Nashik**  
**M.Sc Nursing**  
**Clinical specialty – Obstetric and Gynaecology Nursing**

**SEMINAR EVALUATION PROFORMA**

Subject: ----- Topic: -----

Name of the Student: -----

Date /Time: -----

Name of the Evaluator /Guide: -----

SN.	CRITERIA	Marks allotted	Marks obtained
1	<b>AIMS AND OBJECTIVES</b>	5	
2	<b>ORGANISATION OF CONTENT</b> <ul style="list-style-type: none"><li>▪ Latest information</li><li>▪ Simple to complex</li><li>▪ Application of Nursing Theory</li></ul>	15	
3	<b>PRESENTATION</b> <ul style="list-style-type: none"><li>▪ Introduction</li><li>▪ Content, relevancy</li><li>▪ Teaching technique</li></ul>	50	
4	<b>AUDIOVISUAL AIDS</b>	15	
5	<b>SPEAKER'S QUALITIES</b> <ul style="list-style-type: none"><li>▪ Appearance</li><li>▪ Confidence</li><li>▪ Communication skill</li><li>▪ Voice modulation</li></ul>	5	
6	<b>GROUP DISCUSSION</b>	5	
7	<b>REFERENCES</b>	5	
	<b>TOTAL</b>	<b>100</b>	

**REMARKS**

**SIGNATURE OF STUDENT**

## ***EVALUATION CRITERIA***

<b>CASE RESENTATION</b>	<b>TOTAL SCORE –50</b>
I. Assessment	10
History taking & Physical assessment	
II. Disease condition in detail –Aetiology, Pathophysiology	10
Clinical features, investigations, Medical management	
III. Objectives of care	4
IV. Application of Nursing theories	6
V. Nursing diagnosis	6
VI. Nursing Management	10
VII. Conclusion	4

**Maharashtra University of Health Sciences, Nashik**

**M.Sc Nursing**

**Clinical speciality – Obstetric and Gynaecology Nursing**

**CLINICAL EVALUATION PROFORMA**

**Name of the Student :** \_\_\_\_\_ **DURATION:**\_\_\_\_\_

**Clinical Area :-----**

SN.	CRITERIA	4	3	2	1
<b>1.</b>	<b>PERSONALITY &amp; ATTITUDE</b>				
	Grooming & turn out				
<b>2</b>	Able to think logically & well informed				
<b>3</b>	Attentive listener				
<b>4</b>	Communicate effectively				
<b>5</b>	Trustworthy & reliable				
<b>6</b>	Enthusiastic, interested & takes initiatives when situation demands				
<b>7</b>	Courteous, tactful & considerate in all her dealings with patient, significant other team members.				
<b>8</b>	Displays leadership qualities				
<b>9</b>	Follows instructions & exhibits positive behavioural changes				
<b>10</b>	Complete assignments on time with self motivation & effort				
<b>11</b>	<b>KNOWLEDGE</b>				
	Possess sound knowledge of principles of obstetric Nursing				
<b>12</b>	Has understanding of the modern trends & current issues in obstetric Nursing practices.				
<b>13</b>	Has knowledge of physiological changes during pregnancy, labour & puerperium.				
<b>14</b>	Has adequate knowledge of diet				
<b>15</b>	Demonstrate evidence of self learning by current literature & seeking help from experts in the field.				
<b>16</b>	<b>APPLICATION &amp; SKILL</b>				
	Able to accurately elicit health history				
<b>17</b>	Able to perform & assist in the examination diagnostic procedures T treatment modalities.				
<b>18</b>	Displays skill in trolley setting & assisting in instrumental deliveries & other procedures.				
<b>19</b>	Confident & skillful in conducting normal deliveries & rendering antenatal and postnatal care of gynae patients.				
<b>20</b>	Make relevant observation & records & reports.				
<b>21</b>	Identifies risk factors & manages emergency situations effectively & promptly				
<b>22</b>	Works independently & makes prompt relevant decision in all situation.				
<b>23</b>	Submits assignments with self-motivation & efforts				
<b>24</b>	Demonstrates sound knowledge of drugs used in Obs. And gynae practices				
<b>25</b>	Applies Nursing theories through Nursing process in the clinical field.				

**REMARKS:**

**SIGNATURE OF THE SUPERVISOR**

**SIGNATURE OF THE STUDENT**

## CLINICAL SPECIALITY- II

# **MEDICAL SURGICAL NURSING – ONCOLOGY NURSING**

**Placement: II year M.Sc Nsg.**

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

### **Course Description:**

This course is designed to assist students in developing expertise and in-depth understanding in the field of 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 psychological 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 on 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.



## **COURSE OUTLINE**

Unit	Time Hours		Content
	T	P	
<b>I</b>	<b>4</b>		<b>Introduction</b> <ul style="list-style-type: none"> <li>• Epidemiology- incidence, Prevalence- Global, National, State and Local</li> <li>• Disease burden, concept of cancer, risk factors</li> <li>• Historical perspectives</li> <li>• Trends and issues</li> <li>• Principles of cancer management</li> <li>• Roles and responsibilities of oncology nurse</li> </ul>
<b>II</b>	<b>5</b>		<b>The Nature of Cancer</b> <ul style="list-style-type: none"> <li>• Normal cell biology</li> <li>• The Immune system</li> <li>• Pathological and pathophysiological changes in tissues <ul style="list-style-type: none"> <li>○ Biology of the cancer cell</li> <li>○ Clone formation Transformation</li> <li>○ Tumors stem lines</li> <li>○ Structure of a solid tumor</li> <li>○ Products produced by the tumor</li> </ul> </li> </ul> Systemic effects of tumor growth
<b>III</b>	<b>4</b>		<b>Etiology of Cancer</b> <ul style="list-style-type: none"> <li>• Carcinogenesis</li> <li>• Theories of cancer causation</li> <li>• Risk factors</li> <li>• Carcinogens – genetic factors, chemical carcinogens, radiation, viruses, Immune system failure, rapid tissue proliferation</li> <li>• Hormone changes, diet, emotional Factors.</li> </ul>

Unit	Time Hours		Content
	T	P	
IV	10	2	<b>Diagnostic Evaluation</b> <ul style="list-style-type: none"> <li>* Health assessment: History taking, physical examination</li> <li>* Staging and grading of tumors</li> <li>* TNM classification</li> <li>* Common diagnostic tests <ul style="list-style-type: none"> <li>• Blood investigation: Haematological, Bio-chemical, Tumor markers, Hormonal assay</li> <li>• Cytology: Fine needle aspiration cytology (FNAC)</li> <li>• Histopathology: Biopsy</li> <li>• Radiological assessment: MRI, Ultrasound, Computed tomography, Mammography, Positron Emission tomography (PET), Radio nuclide imaging, Functional metabolism imaging</li> <li>• Endoscopies</li> </ul> </li> </ul> <p>Nurses responsibilities in diagnostic measures</p>
V	10	2	<b>Levels of prevention and care</b> <ul style="list-style-type: none"> <li>* Primary prevention – Guidelines for cancer detection, general measures, Warning signs of cancer.</li> <li>* Self examination – Oral, Breast, Testicular</li> <li>* Secondary prevention – early diagnosis</li> <li>* Screening</li> <li>* Tertiary prevention – disability limitation</li> <li>* Rehabilitation : Mobility, Speech, Bowel and bladder, Ostomies etc.</li> <li>* Patient and family education</li> <li>* Discharge instruction, follow-up care and use of community resources.</li> </ul>

Unit	Time Hours		Content
	T	P	
VI	25	4	<p><b>Cancer Treatment Modalities and Nurse's Role</b></p> <p><b>* <i>Surgery</i></b></p> <ul style="list-style-type: none"> <li>• Principles of surgical oncology</li> <li>• Current surgical strategy</li> <li>• Determining surgical risk</li> <li>• Special surgical techniques</li> <li>• Pre-intra postoperative nursing care</li> <li>• Acute and chronic surgical complications</li> <li>• Future directions and advances</li> </ul> <p><b>Chemotherapy</b></p> <ul style="list-style-type: none"> <li>• Principles and classification of chemotherapeutics.</li> <li>• Pharmacology of antineoplastic drugs -Mechanism of action, Absorption, protein binding, Biotransformation, excretion common side effects, drug Toxicity.</li> <li>• Calculating drug doses,</li> <li>• Therapeutic response to chemotherapy-Tumor variables, drug resistance,</li> <li>• Safety precautions</li> </ul> <p><b>Radiation Therapy</b></p> <ul style="list-style-type: none"> <li>• Physics of radiotherapy</li> <li>• Types of ionizing rays</li> <li>• Radiation equipments : Linear accelerator, cobalt, Implants, Isotopes.</li> <li>• Types of therapies: Oral, Brachytherapy, teletherapy, selection Therapy.</li> </ul>

Unit	Time Hours		Content
	T	P	
			<ul style="list-style-type: none"> <li>• Effects of radiation on the body Tissue.</li> <li>• Radiation biology-cell damage hypoxic cells, alteration of tumor Kinetics.</li> <li>• Approaches to radiation therapy</li> <li>• External radiotherapy</li> <li>• Internal radiotherapy-unsealed,</li> <li>• Sealed sources.</li> <li>• Effectiveness of radiotherapy- Radiosensitivity, treatment effects</li> <li>• Complications of radiotherapy</li> <li>• Radiation safety : Standards of Bhaba Atomic Research Centre (BARC)</li> </ul> <p><b>Bone Marrow Transplantation/Stem Cell Transplantation</b></p> <ul style="list-style-type: none"> <li>• Types, indications, t transplantation Procedure and complications.</li> <li>• Types and donor sources</li> <li>• Preparation and care of donor and recipient</li> <li>• Legal and ethical issues</li> </ul> <p><b>Immunotherapy (Biotherapy)</b></p> <ul style="list-style-type: none"> <li>• Concepts and principles</li> <li>• Classifications of agents</li> <li>• Treatment and applications</li> </ul> <p><b>Gene Therapy</b></p> <ul style="list-style-type: none"> <li>• Current Concepts and practices</li> </ul> <p><b>Alternative and Complementary Therapies</b></p> <ul style="list-style-type: none"> <li>• Current practices</li> </ul>

Unit	Time Hours		Content
	T	P	
<b>VII</b>	<b>10</b>	<b>4</b>	<p><b>Pain management : Theories, types and</b></p> <ul style="list-style-type: none"> <li>• Nature of cancer pain</li> <li>• Pathophysiology of pain</li> <li>• Pain threshold</li> </ul> <p><b>Assessment of pain</b></p> <ul style="list-style-type: none"> <li>• Principles of cancer pain control</li> <li>• Pharmacological: Opioid and nonopioid analgesic therapy</li> <li>• Patient controlled analgesia (PCA)</li> <li>• Other invasive techniques of pain control</li> <li>• Recent developments in Cancer pain</li> </ul> <p><b>Non-Pharmacological pain relief technique.</b></p> <ul style="list-style-type: none"> <li>• Complementary therapies (Music, massage, meditation, relaxation techniques, biofeed back etc)</li> <li>• Psychological intervention in pain control</li> <li>• Alternative system of medicines</li> </ul> <p>Role of nurse</p>
<b>VIII</b>	5		<p><b>Palliative care</b></p> <ul style="list-style-type: none"> <li>• Definition an scope, philosophy</li> <li>• Concept and elements of palliative care</li> <li>• Global and Indian perspective of palliative care</li> <li>• Quality of life issues</li> <li>• Communication skill</li> <li>• Nursing perspective of palliative care and its elements</li> <li>• Home care</li> <li>• Hospice care</li> </ul> <p>Role of nurse in palliative care</p>

Unit	Time Hours		Learning Objectives	Content	Method of Teaching	Evaluation
	T	P				
IX	2		Recognize the process of infection and preventive methods	<b>Infection control</b> <ul style="list-style-type: none"> <li>• Process of infection, risk of hospitalization, nosocomial infections-prevention and control of in acute, long term care facility and community based care</li> <li>• Standard safety measure</li> </ul>	Seminar Presentation	Essay type questions
X	30		Describe the care of patients with various type of malignancies.	<b>Nursing Care of Patients With Specific Malignant Disorders</b> <ul style="list-style-type: none"> <li>• Malignancies of G.I. system-oral, oesophagus, stomach, rectal, liver &amp; pancreas, care of ostomies/stoma</li> <li>• Respiratory malignancies</li> <li>• Genito urinary system malignancies prostate Bladder, renal testicular malignancies.</li> <li>• Gynecological malignancies-cervix uterus, ovary.</li> <li>• Hematological malignancies-Lymphomas, Leukemias.</li> <li>• Malignancies of musculoskeletal system</li> <li>• Endocrine malignancies</li> <li>• Skin</li> <li>• Head and Neck – brain tumors</li> <li>• Other malignancies – Breast cancer</li> </ul>	Clinical presentation Nursing Process Nursing rounds Case conference	Evaluation of case study, care plan
XI	10		Provide nursing care to paediatric group of patients	<b>Paediatric malignancies</b> <ul style="list-style-type: none"> <li>• Leukemia, Lymphoma, Neuro blastoma</li> <li>• Wilm's tumor, Soft tissue sarcoma, Retinoblastoma</li> <li>• Nursing Management of children with Paediatric Malignancies</li> </ul>	Clinical presentation Nursing Rounds	Assess the skill with evaluation nursing care plan

Unit	Time Hours		Learning Objectives	Content	Method of Teaching	Evaluation
	T	P				
<b>XII</b>	<b>15</b>		Recognize the clinical manifestations of cancer patients	<b>Nursing Management of Physiological Conditions and Symptoms Of Cancer Patient</b> <ul style="list-style-type: none"> <li>• Nutrition – effects of cancer on nutritional status and its consequences: Anemia, Cachexia, Xerostomia, mucositis, Dysphagia, Nausea and vomiting, constipation, Diarrhea, electrolyte imbalances, Taste alterations.</li> <li>• Impaired mobility: Decubitus ulcer, pathologic fractures, thrombophlebitis, pulmonary embolism, contractures, footdrop</li> </ul> <b>Other symptoms</b> <ul style="list-style-type: none"> <li>• Dyspepsia &amp; hiccup, dyspnoea</li> <li>• Intestinal obstruction</li> <li>• Fungating wounds</li> <li>• Anxiety &amp; depression, insomnia</li> <li>• Lymph edema</li> </ul> <b>Impact of cancer on sexuality</b> <ul style="list-style-type: none"> <li>• Effects of radiotherapy/ chemotherapy/surgery on sexuality of the cancer patient</li> <li>• Nursing management of cancer patients experiencing sexual dysfunction</li> <li>• Sexual counseling</li> </ul>	Clinical presentation Ward Teaching Nursing Process  Guided Group Discussion	Evaluate care plan case study
<b>XIII</b>	<b>10</b>			<b>Cancer Emergencies</b> <ul style="list-style-type: none"> <li>• Disseminated intravascular Coagulation (DIC).</li> <li>• Malignant pleural effusion</li> <li>• Neoplastic cardiac tamponade and septic shock spinal cord compression</li> <li>• Superior venacava syndrome</li> </ul>		

Unit	Time Hours		Learning Objectives	Content	Method of Teaching	Evaluation
	T	P				
			Appreciate the role of the nurse in cancer emergencies	<ul style="list-style-type: none"> <li>• Metabolic emergency: hyper and hypo calcemia</li> <li>• Surgical emergency</li> <li>• Urological emergency</li> <li>• Haemorrhage</li> <li>• Organ obstruction</li> <li>• Brain metastasis</li> <li>• Nurses role in managing oncologic emergencies</li> </ul>	Lecture Cum Discussion Seminar Presentation	Short Answers
<b>XIV</b>	<b>8</b>		<p>Describe the psychosocial aspects of nursing care</p> <p>Explains the ethical, moral and legal issues in caring for the cancer patients</p>	<p><b>Psycho-Social Aspects of Nursing Care</b></p> <ul style="list-style-type: none"> <li>• Psychological responses of patients with cancer</li> <li>• Psychosocial assessment</li> <li>• Crisis intervention, coping mechanisms</li> <li>• Stress management, spiritual/ Cultural care and needs.</li> <li>• Counseling: individual and family</li> <li>• Maximizing quality of life of patient and family</li> </ul> <p><b>Ethical, moral and legal issues</b></p> <ul style="list-style-type: none"> <li>• Care of dying patient</li> <li>• Grief and grieving process</li> <li>• Bereavement support</li> <li>• Care of Nurses who care for the dying</li> </ul>	Guided Group Discussion Conducting Guidance and Counseling Group Conference	Short answers checklist
<b>XV</b>	<b>2</b>		Design a layout and develop standards for management of Oncology units/hospitals and nursing care	<p><b>Layout and Design of an oncology institution/ward, OPD, chemotherapy unit, Bone marrow trans-plantation unit, pain clinic etc.</b></p> <ul style="list-style-type: none"> <li>• Practice Standards of oncology nursing Policies and Procedures</li> <li>• Establishing Scheduling orders and Protocols</li> </ul> <p><b>Quality Assurance Programme in Oncology units</b></p> <ul style="list-style-type: none"> <li>• Nursing audit</li> </ul>	Field Trip Presentation of Observation Report	Evaluate the project work and presentation



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2. L.K. Clarke & M.J. Dropkin (2006) Site-Specific Cancer Series: Head and Neck Cancer.
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4. D. Camp.-Sorrell & R.A. Hawkins (2006) Clinical Manual for the Oncology Advanced Practice Nurse (2<sup>nd</sup> ed.)
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9. M. Polovich, J.M. White & L.O. Kelleher (2005) Chemotherapy & Biotherapy Guidelines and Recommendations for Practice (2<sup>nd</sup> ed.)
10. B. Nevidjon (2004) Continuing the Legacy: More Voices of Oncology Nurses
11. L.A. Jacobs (2003) Master Degree with a Specialty in Advanced Practice Oncology Nursing (4<sup>th</sup> Ed.)
12. K. Jennings – Dozier (2002) Cancer Prevention Detection, a Nursing Perspective
13. M. Frank - Stromborg (2001) Cancer Prevention in Diverse P. Cultural Implications for the Multidisciplinary Team.
14. C. Burke (1998) Psychological Dimensions of Nursing care
15. A. S. Luggen and S. E. Meiner (2000) Hand book for the Care of the older Adult with Cancer.
16. G. Decker (1999) An Introduction to Complementary and Alternative Therapies
17. D. W. Bruner, M. L. Haas & T.K. Gosse (2004) Manual for Radiation Oncology Nursing Practice & Education (3<sup>rd</sup> ed.)
18. M. M. Gullatte (2001) Clinical Guide to Antineoplastic Therapy: A Chemotherapy Handbook.
19. K. Kuebler & P. Espe (2002) Palliative Practices from A-Z for Bedside Clinician
20. C. Catlin-Huth, M. L. Hai Pollock (2002) Radiation Therapy Patient Care.
21. L. A. Jacobs (2002) Standards of Oncology Nursing Generalist and Advanced Practice (3<sup>rd</sup> ed)
22. V. Fieler & P. Hanson (2000) Oncology Nursing in the Home
23. S. Ezzone (2004) Hematopoietic Stem Cell Transplantation: A Manuel for Nursing Practice
24. Whedon – Blood and Marrow Stem Cell Transplantation (2<sup>nd</sup> ed)
25. Wilkes – Cancer & HIV Clinical Nutrition Pocket Guide (2<sup>nd</sup> ed.)
26. Yarbrow/Frogge/Goodman – Cancer Nursing: Principles and Practice (6<sup>th</sup>ed.)
27. American Cancer Society – A Cancer Source Book for Nurses (8<sup>th</sup> ed.)
28. Yarbrow/ Frogge/ Goodman – Cancer Symptom Management, Patient Self-Care Guides (2)
29. Yarbrow/Frogge/Goodman – A Clinical Guide to Cancer Nursing (5<sup>th</sup> ed)
30. Hassey Dow – Contemporary issues in Breast Cancer, A Nursing Perspective (2<sup>nd</sup> ed.)
31. Vogel/Bevers – Handbook of Breast Cancer Risk assessment: Evidence based Guidelines for Evaluation, Prevention Counseling & Treatment
32. Johnson/Gross – Handbook of Oncology Nursing (3<sup>rd</sup> ed) King/ Hinds Quality of Life: From Nursing and Patient Perspectives
33. Brunner/ Siddarth – Text Book of Medical Surgical Nursing. 2004 (10<sup>th</sup> ed.)
34. Sorresen /Luckman – Medical Surgical Nursing (1994) (5<sup>th</sup> ed)

### Journals:

- 1 Oncology nursing news letter.

## **PRACTICALS**

1. Clinical practice in the care of patients with various malignant disorders.
2. Assessment of clients suffering with various malignant disorders.
3. Applying Theories and nursing process in the management of patients suffering with various malignancies.
4. Providing care to patients with ostomies and other appliances.
5. Assisting for implantations of radioisotopes.
6. Clinical case presentations of a patient.
7. Projects
8. Clinical and classroom teachings.
9. Health education on related disease conditions.
10. Field Visits Regional cancer centers/ cancer specialty hospitals /unit, Hospice, mobile palliative care, community oncology centers /home care unit, cancer registry, cancer detection centers etc.

## **Procedures Observed**

1. **CT Scan**
2. **MRI**
3. **Ultra sound**
4. **Mammography**
5. **Radio Nuclide Imaging**
6. **Bone Scan**
7. **Thyroid Function Test**
8. **Functional and Metabolic Imaging**
9. **Transportation of radioactive materials**
10. **Others**

## **Procedures Assisted**

- 1 **IV cannulation –Open method**
- 2 **Chemotherapy**
- 3 **Radiotherapy – Brachytherapy – Low Density Radiation, High Density Radiation.**
- 4 **Interstitial implantation**
- 5 **Teletherapy – Treatment planning**
- 6 **Bone marrow aspiration and biopsy**
- 7 **Biopsy – tissue**
- 8 **FNAC – Fine Needle Aspiration Cytology & Biopsy**
- 9 **Advance cardiac life support**
- 10 **Endotracheal intubation**
- 11 **Defibrillation ventilation**
- 12 **Tracheostomy**
- 13 **Thoracentesis**
- 14 **Paracentesis**
- 15 **Lumbar Puncture**
- 16 **Arterial Blood Gas**
- 17 **Nerve Block**
- 18 **Chest tube insertion**
- 19 **Intercostal drainage**
- 20 **CVP monitoring**

### **Procedure Performed**

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

### **Other procedures**

1. Alternative therapies

### **Clinical Experience**

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

## **GUIDELINES TO WRITE CLINICAL PRESENTATION – MSc NURSING**

1. Introduction
2. Patient's Profile
3. Health History
  - a. Chief complaints on admission
  - b. Present & Past illness (Medical surgical, Obstetrics, pediatric, psychiatric, Oncology)
  - c. Family History
  - d. Specific information of the patient
4. Health Assessment
  - a. Physical examination (head to foot & system assessment)
  - b. Investigation
  - c. Health information from other sources
5. Provisional Medical diagnosis
6. Treatment
7. Correlation of clinical and book picture
  - a. Definition
  - b. Clinical features
  - c. Prognosis
  - d. Etiology
  - e. Investigation
  - f. Complication
  - g. Pathophysiology
  - h. Treatment
8. Nursing Management – Nursing process
9. Plan of discharge & rehabilitation
10. Conclusion
11. Bibliography

### **Practical Experience Assignments**

Case study	:	02	(50 marks each)	50 x 2 =	100
Case Presentation	:	02	(50 marks each)	50 x 2 =	100
Care Plan	:	03	(50 marks each)	50 x 3 =	150
Clinical Performance Evaluation:		03	(100 marks each)	100 x 3 =	300
Practical Examination			Mid Term		50
			Pre Term		100
					<hr/>
					800

Internal Assessment Total marks out of 100

External Assessment Total marks out of 100

### **(Theory)**

Midterm Exam	50
Prefinal Exam	75
Seminar	50
Project work on planning oncology unit	75
<hr/>	
	800

## **M.Sc. NURSING : CLINICAL SPECIALITY – II**

### **PROFORMA & GUIDELINE FOR CASE STUDY**

**Area :- (Maximum Marks – 50)**

01. Selection of patient.
02. Demographic data of the patient.
03. Medical history past and present illness.
04. Comparison of the patient's disease with book picture.
  - a) Anatomy and physiology.
  - b) Etiology.
  - c) Patho physiology.
  - d) Signs and symptoms.
  - e) Diagnosis - provisional & final
  - f) Investigations
  - g) Complications & prognosis.
05. Management:- Medical or Surgical
  - a) Aims and objectives.
  - b) Drugs and Medications.
  - c) Diet.
06. Nursing Management (Nursing Process approach)
  - a) Aims and objectives.
  - b) Assessment and specific observations.
  - c) Nursing diagnosis.
  - d) Nursing care plan (Short term & long term with rationale.)
  - e) Implementation of nursing care with priority.
  - f) Health teaching.
  - g) Day to day progress report & evaluation.
  - h) Discharge planning.
07. Drug Study.
08. Research evidence.
09. Summary and conclusion.
10. Bibliography.

## EVALUATION CRITERIA FOR CASE STUDY.

(Maximum Marks – 50)

SN	Criteria	Marks allotted.	Marks obtained	Total
01.	Assessment	5		
02.	theoretical knowledge about disease	5		
03.	Comparative study of the patient's disease & book picture.	10		
04.	Management: Medical or Surgical.	5		
05.	Nursing Process.	15		
06.	Drug study.	3		
07.	Summary & conclusion including research evidence.	5		
08.	Bibliography.	2		
Total		50		

Signature of Student

Signature of Clinical supervisor

# **M Sc NURSING: CLINICAL SPECIALITY – II**

## **PROFORMA & GUIDELINE FOR CASE PRESENTATION**

### ***I] Patient Biodata***

**Name, Age, Sex, Religion, Marital status, Occupation, Source of health care, Date of admission, Provisional Diagnosis, Date of surgery if any.**

### **II] Presenting complaints**

Describe the complaints with which the child has been brought to the hospital

**III] Socio-economic status of the family:** Monthly income, expenditure on health, food, education etc.

### **IV] History of Illness (Medical & Surgical)**

- i) History of present illness – onset, symptoms, duration, precipitating / aggravating factors
- ii) History of past illness surgery, allergies, medications etc.
- iii) Family history – Family tree, history of illness in the family members, risk factors, congenital problems, psychological problems etc.

### **V] Diagnosis: (Provisional & confirmed).**

**Description of disease:** Includes the followings

1. Definition.
2. Related anatomy and physiology
3. Etiology & risk factors
4. Path physiology
5. Clinical features.

### **VI] Physical Examination of Patient (Date & Time)**

Physical examination: with date and time.

Clinical features present in the book Present in the patient

### ***VII] Investigations***

Date Investigation done Results Normal value Inferences

### **VIII] Management - (Medical /Surgical)**

- a) Aims of management
- b) Objectives of Nursing Care Plan

### **IX] Treatment:**

S.No	Drug (Pharmacological name)	Dose	Frequency/ Time	Action	Side effects & drug reaction
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Nurse's

responsibility

- Medical or Surgical Management.
- Nursing management

### **X] Nursing Care Plan: Short Term & Long Term plan.**

Assessment Nursing

Diagnosis

Objective Plan of care

Rationale Implementation Evaluation

### **XI] Discharge planning:**

**It should include health education and discharge planning given to the patient.**

### **XII] Prognosis of the patient:**

### **XIII] Summary of the case:**

### **IVX] References:**

**EVALUATION CRITERIA FOR CASE PRESENTATION**

Maximum Marks – 50)

SN	Criteria	Marks Allotted	Marks Obtained	Total
1	Content Subjective & objective data.	08		
2	Problems & need Identified & Nsg. Care Plan	15		
3	Effectiveness of presentation	5		
4	Co-relation with patient & Book i. e. research evidence.	10		
5	Use of A. V. Aids	5		
6	Physical arrangement	2		
7	Group participation	3		
8	Bibliography & references	2		
	Total	50		



**CLINICAL EVALUATION: COMPREHENSIVE NURSING CARE****(Maximum Marks – 100 each area.)**

Name of the Student

Year: II Year M.Sc Nursing

Duration of Experience:

SN	Criteria	1	2	3	4	5
I	<b>UNDERSTANDING OF PATIENT AS PERSON</b> <b>A. Approach.</b> 1. Rapport with patient/ family members. 2. Collects significant information. <b>B. Understanding of patient's health problems.</b> 1. Knowledge about disease condition. 2. Knowledge about investigations. 3. Knowledge about treatment. 4. Knowledge about progress of the patient.					
II	<b>NURSING CARE PLAN</b> <b>A. Assessment of the condition of the patient.</b> 1. History taking – past & present health and illness. 2. Specific observation of the patient. 3. Nursing diagnosis. <b>B. Development of the short – term &amp; long term Nursing care plans.</b> 1. Identification of all problems in the patient/ family. 2. Prioritization & implementation of the plans. 3. Evaluation of the care given & replanning					
III	<b>TECHNICAL SKILL</b> 1. Economical & safe adaptation to the situation & available facilities. 2. Implements the procedure with skill speed & completeness.					
IV	<b>RECORDING &amp; REPORTING</b> 1. Prompt, precise, accurate & relevant. 2. Maintenance of clinical experience file.					
V	<b>HEALTH TEACHING</b> 1. Incidental/ planned teaching with principles of teaching & learning. 2. Uses visual aids appropriately					
VI	<b>PERSONALITY</b> 1. Professional appearance (uniform, dignity, tact fullness interpersonal relationship, punctuality etc. 2. Sincerely, honesty & Sense of responsibility.					
	<b>TOTAL MARKS</b>					

Positive &amp; Negative aspects.

**Signature of Student****Signature of Clinical supervisor**

**M. Sc. Nursing Second Year  
Clinical Specialty-II,  
Medical Surgical Nursing  
ORTHOPEDIC NURSING**

**Hours of instruction  
Theory: 150 hrs  
Practical: 950 hrs  
Total: 1100 hrs**

**Course Description**

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

<b>Unit</b>	<b>Time (hrs)</b>	<b>Contents</b>
I	5	<p>Introduction</p> <ul style="list-style-type: none"><li>➤ Historical Perspectives- history &amp; trends in orthopedic nursing</li><li>➤ Definition &amp; scope of orthopedic nursing.</li><li>➤ Anatomy and physiology of Musculo-skeletal system</li><li>➤ Posture ,body ,landmark ,Skeletal system, muscular system, Nervous system-main nerve</li><li>➤ Healing of –injury, bone injury</li><li>➤ Repair of ligaments.</li><li>➤ Systemic response to injury</li><li>➤ Ergonomic, body mechanics biomechanical measures</li><li>➤ Orthopedic team</li></ul>
II	8	<p>Assessment of orthopedic patient.</p> <ul style="list-style-type: none"><li>➤ Health Assessment: History, Physical examination, Inspection, Palpation, Movement Measurement Muscle Strength Testing.</li><li>➤ Diagnostic studies- Radiological Studies, Muscle enzymes, Serologic studies.</li></ul>
III	10	<p>Care of patients with devices.</p> <ul style="list-style-type: none"><li>• Biomaterials( metals, stainless steel, titanium, cobalt, ceramic, polymers etc)</li><li>• Splints, braces, various types of plaster cast.</li><li>• Various types of tractions.</li><li>• Various types of orthopedic beds and mattresses.</li><li>• Comfort devices.</li><li>• Implants in Orthopedic.</li><li>• Prosthetics &amp;Orthotics.</li></ul>

Unit	Time (hrs)	Contents
IV	15	<p>Trauma &amp; injuries</p> <ul style="list-style-type: none"> <li>➤ Causes, Pathophysiology, Clinical types, clinical features Diagnosis, Prognosis, Managements, Medicals surgical and nursing management of :</li> <li>➤ Early management of trauma.</li> <li>➤ Fractures</li> <li>➤ Injuries of the <ul style="list-style-type: none"> <li>❖ shoulder and arm</li> <li>❖ elbow ,fore arm, wrist, hand</li> <li>❖ hip, thigh, knee, leg ankle, foot</li> <li>❖ spine</li> <li>❖ head injury</li> <li>❖ Chest injury:</li> </ul> </li> <li>a) Polytruma</li> <li>b) Nerve Injuries</li> <li>c) Vascular injuries</li> <li>d) Soft tissue injuries</li> <li>e) Sports injuries</li> <li>f) Amputation</li> </ul>
V	8	<p>Infection of bone and joints.</p> <ul style="list-style-type: none"> <li>➤ Causes, Pathophysiology, Clinical types, clinical features Diagnosis, Prognosis, Management, Medical surgical and nursing management of :</li> <li>a) Tuberculosis</li> <li>b) Osteomyelitis</li> <li>c) Arthritis</li> <li>d) Leprosy</li> </ul>
VI	5	<p>Bone Tumors</p> <ul style="list-style-type: none"> <li>➤ Causes, Pathophysiology, Clinical types, clinical features, Diagnosis, Prognosis, Management, Medical surgical and nursing management of :</li> <li>a) Bone Tumors-benign, Malignant and metastatic.</li> <li>b) Different types of therapies for tumors</li> </ul>
		<p>c) Complementary therapies such as Yoga, Masaj, Rekhi therapy Unani Medicines, Ayurvedic treatments, Homeopathic, ect.</p>
VI		<p>Bone Tumors</p> <ul style="list-style-type: none"> <li>➤ Causes, Pathophysiology, Clinical types, clinical features, Diagnosis, Prognosis, Management, Medical surgical and nursing management of :</li> <li>a) Bone Tumors-benign, Malignant and metastatic.</li> <li>b) Different types of therapies for tumors.</li> <li>c) Complementary therapies such as Yoga, Masaj, Rekhi therapy Unani Medicines, Ayurvedic treatments, Homeopathic, ect.</li> </ul>
VII	10	<p>Deformities</p> <ul style="list-style-type: none"> <li>➤ Causes, Pathophysiology, Clinical types, clinical features, Diagnosis, Prognosis- Medical surgical and nursing management of :Scoliosis, Kyphosis, Lordosis</li> <li>➤ Congenital disorder: Congenital dislocation of hip (CDH), Dislocation of patella, knee.</li> <li>➤ Varus and Valgus deformities</li> <li>➤ Deformities of digits</li> </ul>

		<ul style="list-style-type: none"> <li>➤ Rotational deformity of lower extremity in children ( torsion, version)</li> <li>➤ Congenital torticollis.</li> <li>➤ Meningocele, Meningomyelocele, Spina bifida.</li> <li>➤ Chromosomal disorders.</li> <li>➤ Computer related deformities.</li> </ul>
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Unit	Time (hrs)	Contents
VIII	5	Disorder of spine <ul style="list-style-type: none"> <li>➤ Intervertebral disc prolapse, Fracture of the spine</li> <li>➤ Low back disorder-Low back pain, PID ,spinal stenosis, spondylosis</li> </ul>
IX	5	Nutritional/metabolic and endocrine disorders <ul style="list-style-type: none"> <li>➤ Causes, Pathophysiology, Clinical types, clinical features Diagnosis, Prognosis, Medical surgical and nursing management of :</li> <li>a) Rickets</li> <li>b) Scurvy</li> <li>c) Hyper vitaminosis A and D</li> <li>d) Hypercalcemia, Hypophosphatasia</li> <li>e) Osteomalacia.</li> <li>f) Osteoporosis</li> <li>g) Paget's disease</li> <li>h) Gout</li> <li>i) Gigantism</li> <li>j) Dwarfism</li> <li>k) Acromegaly</li> <li>l) Marfan's Syndrome</li> <li>m) Gaucher's disease</li> <li>n) Renal osteodystrophy</li> <li>o) Therapeutic diets for various orthopedic disorders</li> </ul>
X	8	Neuro-muscular disorders <ul style="list-style-type: none"> <li>➤ Causes ,Pathophysiology, clinical types ,clinical features, diagnosis prognosis medical surgical and nursing management :</li> <li>b) Poliomyelitis, cerebral palsy</li> <li>c) Myasthenia gravis</li> <li>d) Spina bifida-Neural tube defects.</li> </ul>

Unit	Time (hrs)	Contents
		e) Peripheral nerve lesion f) Paraplegia , hemiplegia, quadriplegia Muscular dystrophy
X I	8	Chronic/degenerative diseases of joints and autoimmune disorders: ➤ Causes ,Pathophysiology ,clinical types ,clinical features, diagnosis prognosis, medical surgical and nursing management of: a) Osteo Arthritis b) Rheumatoid arthritis c) Ankylosing spondylitis d) spinal disorders e) Systemic Lupus Erythematosus
XII	5	Orthopedic disorders in children ➤ General and special consideration on pediatric orthopedics ➤ Genetic disorders ➤ Congenital anomalies ➤ Growth disorders ➤ Genetic counseling ➤ Amniocentesis ➤ Bone dysplasias ➤ Nurses role in genetic counseling
XIII	5	Geriatric problems ➤ Geriatric population , types of disabilities ,causes, treatment and management – hospitalization ,rest, physiotherapy , involvement of family members ,social opportunities ➤ Care at home – involvement of family and community follow up care and rehabilitation
XIV	6	Pharmacokinetic ➤ Principles of drug administration ➤ Analgesics and anti-inflammatory agents ➤ Antibiotics and antiseptics ➤ Drugs used in orthopedic and neuromuscular disorders ➤ Blood and blood components ➤ Care of drugs and nurses role

XV	30	<p>Nurses role in orthopedic conditions</p> <ul style="list-style-type: none"> <li>➤ Gait analysis</li> <li>➤ Urodynamic studies</li> <li>➤ Prevention of physical deformities</li> <li>➤ Alteration of body temperature regulatory system and immune systems</li> <li>➤ Immobilization –cast, splints, braces, and tractions</li> <li>➤ Prevention and care of problems related to immobility</li> <li>➤ Altered sleep patterns</li> <li>➤ Impaired communication</li> <li>➤ Self care and activities of daily living</li> <li>➤ Bladder and bowel rehabilitation</li> <li>➤ Sensory function rehabilitation</li> <li>➤ Psychological reaction related to disabilities and disorders</li> <li>➤ Coping of individual and family with disabilities and disorders</li> <li>➤ Maintaining sexuality</li> </ul> <p>Spirituality-A rehabilitative prospective</p>
		<p><b>Orthopedic Reconstructive Surgeries</b></p> <ul style="list-style-type: none"> <li>➤ Basic orthopedic operation techniques</li> <li>➤ Replacement surgeries-hip, knee, shoulder</li> <li>➤ Spine surgeries</li> <li>➤ Grafts and flaps surgery</li> <li>➤ Deformity correction</li> <li>➤ Microsurgeries</li> </ul> <p><b>Physiotherapy</b></p> <ul style="list-style-type: none"> <li>➤ Concepts, principles , purposes</li> <li>a) Mobilization –exercises: types , re-education in walking, crutch walking, wheel chair, transfer techniques</li> <li>b) Types of gait : non-weight, bearing, partial weight bearing, four point crutch, tripod ,walking with sticks, calipers</li> <li>c) Forms of therapies: Hydrotherapy, Electrotherapy, Wax heat therapy, ice, helio therapy radiant heat</li> <li>d) Chest physiotherapy</li> </ul>
XVI	8	<p>Rehabilitation</p> <ul style="list-style-type: none"> <li>➤ Principles of rehabilitation, definition philosophy, process</li> <li>➤ Various types of therapies</li> <li>➤ Special therapies and alternative therapies</li> <li>➤ Rehabilitation counseling</li> <li>➤ Preventive and restorative measures</li> <li>➤ Community based rehabilitation (CBR)</li> <li>➤ Challenges in rehabilitation</li> <li>➤ Role of the nurse in rehabilitation</li> <li>➤ Legal and ethical issues in rehabilitation nursing</li> <li>➤ Occupational therapy</li> </ul>

Unit	Time (hrs)	Contents
XVII	5	National policies and programmes <ul style="list-style-type: none"> <li>➤ National programmes for rehabilitation of persons with disability, National institutes ,artificial limbs manufacturing corporation</li> <li>District rehabilitation centers and their schemes</li> <li>➤ Regional rehabilitation centers etc</li> <li>➤ Public policy in rehabilitation nursing</li> <li>➤ The person s with disabilities act 1995 ,</li> <li>➤ Mental rehabilitation and multiple disabilities act 1992,</li> <li>➤ The national trust rules 1999 and 2000</li> <li>➤ Rehabilitation council of India</li> <li>➤ Legal and ethical aspects in orthopedic nursing</li> <li>➤ Rehabilitation health team and different categories of team members</li> </ul>
XVIII	4	Quality assurance <ul style="list-style-type: none"> <li>➤ Standards, protocols, policies, procedures</li> <li>➤ Nursing audit</li> <li>➤ Staffing</li> <li>➤ Design of orthopedic physiotherapy and rehabilitation unit</li> </ul>

### **Field Visits:**

Visit to rehabilitation center.

Visit to workshops where these devices are made.

Visit to paraplegic center.

Visit to rehabilitation center

Visit to physiotherapy unit

Field Visit: Artificial limbs manufacturing corporation , District, Regional rehabilitation center



## Practicals

1. Clinical practice in orthopedic ,physiotherapy and rehabilitation unit
2. Application of tractions and plaster casts and removal of tractions and plaster casts and other appliances
3. Apply Theories and Nursing process in the management of patients with orthopedic conditions
4. Provide various types of physical and rehabilitative therapies
5. Provide health education on related diseases condition
6. unit management and plan designing

## Clinical Experience

Total: 960 hrs  
1 week =30hrs

SN	Dept./unit	No. of weeks	Total hrs
1	Orthopedic ward	8	240 hrs
2	Orthopedic operation theatre	4	120 hrs
3	Neuro surgical ward	2	60 hrs
4	Orthopedic O.P.D.	4	120 hrs
5	Casualty /Emergency and Trauma	4	120 hrs
6	Rehabilitation units	2	60 hrs
7	Physiotherapy	4	120 hrs
8	Pediatric / Pediatric surgery unit	2	60 hrs
9	Field Visit	2	60 hrs
	Total	32 weeks	960 hrs

### Procedure Observed

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

**Procedures Assisted**

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

**Procedures performed**

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

## References: -

### Books:-

1. B.T. Basavanthappa(2005); Orthopedic for Nurses;1<sup>st</sup> ed;Jaypee Brothers, New Delhi
2. David Dandy, Dennis Edwards(1998); Essential Orthopedic and Trauma;3<sup>rd</sup> ed;Langman Singapore
3. David Evans(1993); Techniques in Orthopedic Surgery; 1<sup>st</sup> ed,Blackwell Publications,London
4. Ebnezar's John - Text book of Orthopedics' 3<sup>rd</sup> Edition J.P. Brother, New Delhi.
5. Mary Powell(1976); Orthopedic Nursing;7<sup>th</sup> ed.;Churchill Livingstone
6. Maheshwari J., 'Essential Orthopedic' 3<sup>rd</sup> Edition 2005, Mehta Publications , New Delhi.
7. Natrajan Mayilvahan “ Natrajan's Text Book of Orthopedic and Traumatology, with multiple choice questions” , 6<sup>th</sup> Edition, All India Publications and Distributors, New Delhi.
8. Roger Dee &et al (1997); Principles of orthopedic Practice; 2<sup>nd</sup> ed; Mcgraw Hill
9. Ronald MaRae ‘Clinical Orthopedic Examination’ 5<sup>th</sup> edition, Churchill Livingstone, 2004.
10. Segelov's Philip M. ‘Complications of Fractures and Dislocations’ , 1<sup>st</sup> Edition 1990, champion and Hall Publications.
11. S.Perrycanale ed; (2003); Cambell's Operative Orthopedics; 10<sup>th</sup> ed; Mosby
12. Wood Lovell and Robert Winter(1978); Pediatric Orthopedics; Vol. I &II; J.B.Lippincott Co.

### Journals:-

1. Journal of Bone and Joint Surgery – British  
- American
2. Clinical Orthopedic and Related Research
3. The Journal of Trauma , Injury, Infection and Critical Care
4. Journal Of Pediatric Orthopedics
5. Journal of orthopedic nursing

Scheme of examination:

	Theory		Practical	
Clinical Speciality-II Orthopedic Nursing	Internal 25	External 75	Internal 100	External 100

## Internal Assessment:-

### Theory

Test- (2 tests)

Mid term Examination - 50 marks theory

Pre final examination - 75 marks theory

Seminar -50 marks

Project work -75 marks

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Total	375 marks
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### Practical Experience Assignments

Case study : 02 (50 marks each)  $50 \times 2 = 100$

Case Presentation : 02 (50 marks each)  $50 \times 2 = 100$

Care Plan : 03 (50 marks each)  $50 \times 3 = 150$

Clinical Performance Evaluation: 03 (100 marks each)  $100 \times 3 = 300$

Practical Examination Mid Term 50

Pre Term 100

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800

Internal Assessment Total marks out of 100

External Assessment Total marks out of 100

Final Examinations :

#### Theory

Internal : 25

External : 75

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**Total : 100**

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#### Practical

Internal : 100

External : 100

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**Total : 200**

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## **M.Sc. NURSING : CLINICAL SPECIALITY – II**

### **PROFORMA & GUIDELINE FOR CASE STUDY**

**Area :- (Maximum Marks – 50)**

01. Selection of patient.
02. Demographic data of the patient.
03. Medical history past and present illness.
04. Comparison of the patient's disease with book picture.
  - a) Anatomy and physiology.
  - b) Etiology.
  - c) Patho physiology.
  - d) Signs and symptoms.
  - e) Diagnosis - provisional & final
  - f) Investigations
  - g) Complications & prognosis.
05. Management:- Medical or Surgical
  - a) Aims and objectives.
  - b) Drugs and Medications.
  - c) Diet.
06. Nursing Management (Nursing Process approach)
  - a) Aims and objectives.
  - b) Assessment and specific observations.
  - c) Nursing diagnosis.
  - d) Nursing care plan (Short term & long term with rationale.)
  - e) Implementation of nursing care with priority.
  - f) Health teaching.
  - g) Day to day progress report & evaluation.
  - h) Discharge planning.
07. Drug Study.
08. Research evidence.
09. Summary and conclusion.
10. Bibliography.

## EVALUATION CRITERIA FOR CASE STUDY.

(Maximum Marks – 50)

SN	Criteria	Marks allotted.	Marks obtained	Total
01.	Assessment	5		
02.	theoretical knowledge about disease	5		
03.	Comparative study of the patient's disease & book picture.	10		
04.	Management: Medical or Surgical.	5		
05.	Nursing Process.	15		
06.	Drug study.	3		
07.	Summary & conclusion including research evidence.	5		
08.	Bibliography.	2		
Total		50		

Signature of Student

Signature of Clinical supervisor

# **M Sc NURSING: CLINICAL SPECIALITY – II**

## **PROFORMA & GUIDELINE FOR CASE PRESENTATION**

### ***I] Patient Biodata***

**Name, Age, Sex, Religion, Marital status, Occupation, Source of health care, Date of admission, Provisional Diagnosis, Date of surgery if any.**

### **II] Presenting complaints**

Describe the complaints with which the child has been brought to the hospital

**III] Socio-economic status of the family:** Monthly income, expenditure on health, food, education etc.

### **IV] History of Illness (Medical & Surgical)**

- i) History of present illness – onset, symptoms, duration, precipitating/aggravating factors
- ii) History of past illness surgery, allergies, medications etc.
- iii) Family history – Family tree, history of illness in the family members, risk factors, congenital problems, psychological problems etc.

**V] Diagnosis:** (Provisional & confirmed).

**Description of disease:** Includes the followings

1. Definition.
2. Related anatomy and physiology
2. Etiology & risk factors
3. Path physiology
5. Clinical features.

### **VI] Physical Examination of Patient (Date & Time)**

Physical examination: with date and time.

Clinical features present in the book Present in the patient

### **VII] Investigations**

Date Investigation done Results Normal value Inferences

### **VIII] Management - (Medical /Surgical)**

- a) Aims of management
- b) Objectives of Nursing Care Plan

### **IX] Treatment:**

S.No Drug (Pharmacological name)

Dose Frequency/ Time

Action Side effects & drug reaction

Nurse's responsibility

- Medical or Surgical Management.
- Nursing management

### **X] Nursing Care Plan:** Short Term & Long Term plan.

Assessment Nursing

Diagnosis

Objective Plan of care

Rationale Implementation Evaluation

### **XI] Discharge planning:**

**It should include health education and discharge planning given to the patient.**

### **XII] Prognosis of the patient:**

### **XIII] Summary of the case:**

### **IVX] References:**

**EVALUATION CRITERIA FOR CASE PRESENTATION**

Maximum Marks – 50)

SN	Criteria	Marks Allotted	Marks Obtained	Total
1	Content Subjective & objective data.	08		
2	Problems & need Identified & Nsg. Care Plan	15		
3	Effectiveness of presentation	5		
4	Co-relation with patient & Book i. e. research evidence.	10		
5	Use of A. V. Aids	5		
6	Physical arrangement	2		
7	Group participation	3		
8	Bibliography & references	2		
	Total	50		



**CLINICAL EVALUATION: COMPREHENSIVE NURSING CARE****(Maximum Marks – 100 each area.)**

Name of the Student \_\_\_\_\_

Year: II Year M.Sc Nursing

Duration of Experience: \_\_\_\_\_

SN	Criteria	1	2	3	4	5
I	<b>UNDERSTANDING OF PATIENT AS PERSON</b> <b>A. Approach.</b> 1. Rapport with patient/ family members. 2. Collects significant information <b>B. Understanding of patient's health problems.</b> 1. Knowledge about disease condition. 2. Knowledge about investigations. 3. Knowledge about treatment. 4. Knowledge about progress of the patient.					
II	<b>NURSING CARE PLAN</b> <b>A. Assessment of the condition of the patient.</b> 1. History taking – past & present health and illness. 2. Specific observation of the patient. 3. Nursing diagnosis. <b>B. Development of the short – term &amp; long term Nursing care plans.</b> 1. Identification of all problems in the patient/ family. 2. Prioritization & implementation of the plans. 3. Evaluation of the care given & replanning					
III	<b>TECHNICAL SKILL</b> 1. Economical & safe adaptation to the situation & available facilities. 2. Implements the procedure with skill speed & completeness.					
IV	<b>RECORDING &amp; REPORTING</b> 1. Prompt, precise, accurate & relevant. 2. Maintenance of clinical experience file.					
V	<b>HEALTH TEACHING</b> 1. Incidental/ planned teaching with principles of teaching & learning. 2. Uses visual aids appropriately					
VI	<b>PERSONALITY</b> 1. Professional appearance (uniform, dignity, tact fullness interpersonal relationship, punctuality etc. 2. Sincerely, honesty & Sense of responsibility.					
	<b>TOTAL MARKS</b>					

Positive &amp; Negative aspects.

Signature of Student \_\_\_\_\_

Signature of Clinical supervisor \_\_\_\_\_

Name of College \_\_\_\_\_

**EVALUATION OF SEMINARS**

Date : \_\_\_\_\_

Name of the Student Nurse:

Date: Time:

Subject:

Topic:

Grade Given: Name of evaluator :

S.N.	BASIC OF EVALUATION	5	4	3	2	1	REMARK
I	<b>Knowledge of subject matter</b> a. Organisation of subject matter b. Classification of ideas with appropriate and interesting examples c. Depth and mastery of subject matter d. Anticipated question and has prepared for answer e. Selection and organisation of A. V. aids f. Integration and co-relation with other subjects. g. Submitted in time for correction						
II	<b>Oragnisation and management of class</b> a. Budgeting of time b. Asked questions for classification c. Class room participation						
III	<b>Effectiveness of Seminar</b> a. Introduction of topic b. Ability to hold students attention c. Stimulate student participation						
IV	<b>Effectiveness of Seminar</b> a. Questioning clear and stimulating b. Maintaining learning atmosphere c. Use of black board						
V	<b>Personal appearance</b> a. Neatness and Professional appearance b. Degree of self confidence c. Language (Appropriate correct, clear, tone mannerism) d. Punctuality (Starting lesson, completing lesson)						
	<b>Total Hours out of 100</b>						

Evaluator's Comments:

Signature of the Student

Name of the College

### NURSING CARE PLAN EVALUATION

B Sc Nursing Course

Name of the Student:

Year & Batch:

Name of the Patient:

Age:

Sex:

M.R.D. No. :

Ward No.

Bed No.

Area of Study : Medical/ Surgical/ Psychiatric

Diagnosis

Name of the Surgery

Date of Surgery

Date of Nursing Care given: From

To

SN	Details	Total Marks	Marks Obtained
1	Assessment	12	
2	Nursing Diagnosis	3	
3	Goal	2	
4	Outcome Criteria / Objectives	2	
5	Nursing Intervention	15	
6	Rationale	3	
7	Evaluation	3	
8	Nurses notes/ Progress report of the patient	10	
<b>Total</b>		<b>50</b>	

Remarks:

Teacher's Sign:

Student's Sign

Teacher's Name:

Date:

**References:**

1. Janet Hicks Keen : Critical Care Nursing Consultant; Mosby, 1997
2. Kuruvilla Jaya: Essentials of Critical Care Nursing: Jaypee Brothers, Mumbai, 2007
3. Mervyn Singer: Oxford handbook of Critical care; 2<sup>nd</sup> ed., Oxford University Press, 2005.
4. M. S. Baird, Manual of Critical Care Nursing; 5<sup>th</sup> ed., Elsevier, 2005
5. P. G. Morton: Critical Care Nursing; 8<sup>th</sup> ed., Lippincott Williams and Wilkins, 2005
6. Sheree Comer: Delmar's Critical Care- Nursing Care plans; 2<sup>nd</sup> ed., Thomson, 2005

**Journals:-**

- 1.Critical Care Nursing : AACN
- 2.Critical Care Nursing Clinics