

# BABA SAHIB AMBADKAR ROAD JAMMU (TAWI)- 180006



# **SYLLABUS**

**M.SC NURSING** 

# PATTERN

INDIAN NURSING COUNCIL

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# Philosophy

National Health Policy(NHP)2002emphasizesthe needtoprepare nursesto functioning super-speciality areas who are required in tertiary careinstitutions, entrusting some limited public health functions to nurses after providing adequate training.

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

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

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

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

## Aim

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

# Objectives

On Completion of the two year M.Sc Nursing programme, the Post Graduate will be ableto:-

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

# **Admission Requirements:**

1. The candidate should be a Registered Nurse and Registered midwife or

equivalent with any State Nursing RegistrationCouncil.

2. The minimum education requirements shall be the passing of:

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

- 3. The candidate should have undergoneB.Sc. Nursing / B.Sc. Hons. Nursing / PostBasic B.Sc. Nursing in an institution which is recognized by Indian NursingCouncil.
- 4. Minimum one year of work experience after Basic B.Sc.Nursing.
- 5. MinimumoneyearofworkexperiencepriororafterPostBasicB.Sc. Nursing.
- 6. Candidate shall be medicallyfit.
- 7. 5% relaxation of marks for SC/ST candidates may begiven.

#### **Entrance/Selection test**

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

## **Course Duration**

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

Total hours for2years	3440hours
40 hoursperweek	1720 hours
Totalweeksavailable	43 weeks
Gazettedholidays	3weeks
Examination	2weeks
Vacation	4weeks
Available	52weeks

## **Course of Instruction**

1st year	Theory (hrs)	Practical (hrs)
Nursing education	150	150
Advance nursing practice	150	200
Nursing Research and statistics	150	100
*Clinical speciality –I	150	650
Total	600	1100

#### II nd Year

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

#### Educational visit 2 weeks

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

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

#### **Scheme of Examination**

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

\* Nursing research=50 and statistics=25

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

Minimum pass marks shall be 50% in each of the Theory and practical papers separately.

# **COURSE CODE**

YEAR	COURSE TITLE	COURSE CODE
FIRST YEAR	Nursing Education	MSCNUR101
	Advance Nursing Practice	MSCNUR102
	Nursing Research and Statistics	MSCNUR103
	Medical Surgical Nursing	MSCNUR104
	Obstetrics and Gynaecological Nursing	MSCNUR105
	Child Health Nursing	MSCNUR106
	Mental Health Nursing	MSCNUR107
	Community Health Nursing	MSCNUR108
	Nursing Education Practical	MSCNUR101
	Medical Surgical Nursing Practical	MSCNUR104
	Obstetrics and Gynaecological Nursing Practical	MSCNUR105
	Child Health Nursing Practical	MSCNUR106
	Mental Health Nursing Practical	MSCNUR107
	Community Health Nursing Practical	MSCNUR108
SECOND YEAR	Nursing Management	MSCNUR201
	Dissertation & Viva	MSCNUR202
	Cardio Vascular & Thoracic Nursing	MSCNUR203
	Critical Care Nursing	MSCNUR204
	Oncology Nursing	MSCNUR205
	Neurosciences Nursing	MSCNUR206
	Nephro-Urology Nursing	MSCNUR207
	Orthopedic Nursing	MSCNUR208

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	Gastro Enterology Nursing	MSCNUR209
	Obstetrics and Gynaecological Nursing	MSCNUR210
	Child Health Nursing	MSCNUR211
	Mental Health Nursing	MSCNUR212
	Community Health Nursing	MSCNUR213
	Cardio Vascular & Thoracic Nursing Practical	MSCNUR203
	Critical Care Nursing Practical	MSCNUR204
	Oncology Nursing Practical	MSCNUR205
	Neurosciences Nursing Practical	MSCNUR206
	Nephro-Urology Nursing Practical	MSCNUR207
	Orthopedic Nursing Practical	MSCNUR208
	Gastro Enterology Nursing Practical	MSCNUR209
	Obstetrics and Gynaecological Nursing Practical	MSCNUR210
	Child Health Nursing Practical	MSCNUR211
	Mental Health Nursing Practical	MSCNUR212
	Community Health Nursing Practical	MSCNUR213

CLASS: M.SC NURSING 1<sup>ST</sup> YEARBRANCH: COMMON TO ALL BRANCHESCOURSE TITLE: NURSING EDUCATIONCOURSE CODE: MSCNUR101DURATION OF EXAMINATION: 3 HOURSHOURS OF INSTRUCTION:THEORY: 150 HOURSPRACTICAL: 150 HOURS

#### **COURSE DESCRIPTION:**

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

#### **COURSE OUTCOMES**

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

- 1. Explain the aims of education, philosophies, trends in education and health: its impact on nursingeducation.
- 2. Describe the teaching learningprocess.
- 3. Prepare and utilize various instructional media and methods in teaching learningprocess.
- 4. Demonstrate competency in teaching, using various instructional strategies.
- 5. Critically analyze the existing nursing educational programs, their problems, issues and futuretrends.
- 6. Describe the process of curriculum development, and the need and methodology of curriculum change, innovation and integration.
- 7. Plan and conduct continuing nursing educationprograms.
- 8. Critically analyze the existing teacher preparation programs in nursing.
- 9. Demonstrate skill in guidance and counseling.
- 10. Describe the problems and issues related to administration of nursing curriculum including selection and organization of clinicalexperience.
- 11. Explain the development of standards and accreditation process in nursing education programs.
- 12. Identify research priorities in nursingeducation.

- 13. Discuss various models of collaboration in nursing education and services.
- 14. Explain the concept, principles, steps, tools and techniques of evaluation
- 15. Construct, administer and evaluate various tools for assessment of knowledge, skill, andattitude.

#### **Course Content**

Units	Hours		Course Content
	Theory	Practical	
Ι	10		<ul> <li>Introduction :</li> <li>Education :Definition, aims, concepts, philosophies &amp; their educationimplications,</li> <li>Impact of Social, economical, political &amp; technological changes oneducation:</li> <li>Professionaleducation</li> <li>Current trends and issues ineducation</li> <li>Educational reforms and National Educational policy, various educationalcommissions-reports</li> <li>Trends in development of nursing education in India</li> </ul>
II	20	30	<ul> <li>Teaching – Learning Process</li> <li>Concepts of teaching and learning:Definition, theories of teaching andlearning, relationship between teaching andlearning.</li> <li>Educationalaims and objectives; types, domains, levels,elementsandwritingofeducationalobjectives</li> <li>Competencybased education(CBE) and outcome basededucation(OBE)</li> <li>Instructionaldesign: Planning and designing the lesson, writing lesson plan : meaning, its need and importance,formats.</li> <li>Instructionstrategies – Lecture, discussion, demonstration, simulation, laboratory, seminar, panel, symposium, problem solving, problem based learning (PBL), workshop, project, role- play(socio-drama), clinicalteaching methods, programmed instruction, self directed learning(SDL), micro teaching,computer assisted instruction(CAI), computer assisted learning(CAL)</li> </ul>

Units	Hours		Course Content
	Theory	Practical	
III	10	10	<ul> <li>Instructional media and methods</li> <li>Key concepts in the selection and use of media ineducation</li> <li>Developing learning resource material using different media</li> <li>Instructional aids – types, uses, selection, preparation, utilization.</li> <li>Teacher's role in procuring and managing instructional Aids – Project and non-projected aids, multi media, video-tele conferencing etc</li> </ul>
IV	10		<ul> <li>Measurement and evaluation:         <ul> <li>Concept and nature of measurement and evaluation, meaning, process, purposes, problems in evaluation andmeasurement.</li> <li>Principles of assessment, formative and summative assessment- internal assessment external examination, advantages anddisadvantages.</li> <li>Criterion and norm referencedevaluation,</li> </ul> </li> </ul>
V	12	10	<ul> <li>Standardized and non-standardized tests :</li> <li>Meaning, characteristics, objectivity, validity, reliability, usability, norms, construction oftests-</li> <li>Essay, shortanswer questions and multiple choicequestions.</li> <li>Rating scales, checklist, OSCE/OSPE(Objective structured clinical/practicalexamination)</li> <li>Differentialscales, and summated scales, sociometry, anecdotal record, attitude scale, critical incidenttechnique</li> <li>Question bank-preparation, validation, moderation by panel, utilization</li> <li>Developing a system for maintainingconfidentiality</li> </ul>
VI	8	5	<ul> <li>Administration, Scoring and Reporting</li> <li>Administering a test; scoring, grading versusmarks</li> <li>Objective tests, scoring essay test, methods of scoring, Itemanalysis.</li> </ul>
VII	12	6	<ul> <li>Standardized Tools</li> <li>Tests of intelligence aptitude, interest, personality, achievement, socio-economic status scale, tests for special mental and physical abilities and disabilities.</li> </ul>

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

#### FIRST YEAR EXAMINATION TO B E HELD IN THE YEAR 2021,2022 COURSE TITLE : NURSING EDUCATION COURSE CODE: MSC NUR 101

Units	Hours		Course Content
	Theory	Practical	
XII	10	5	<ul> <li>Guidance and counseling</li> <li>Concept, principles, need, difference between guidance and counseling, trends andissues.</li> <li>Guidance and counseling services: diagnosticand remedial.</li> <li>Coordination and organization ofservices.</li> <li>Techniques ofcounseling : Interview, case work, characteristics of counselor, problems in counseling.</li> <li>Professional preparation and training forcounseling.</li> </ul>
XIII	15	10	<ul> <li>Administration of Nursing Curriculum</li> <li>Role of curriculum coordinator – planning, implementation andevaluation.</li> <li>Evaluation of educational programs in nursing-course and program.</li> <li>Factors influencing faculty staff relationship and techniques of workingtogether.</li> <li>Concept of faculty supervisor (dual) position.</li> <li>Curriculum research innursing.</li> <li>Different models of collaboration between education andservice</li> </ul>
XIV	10		<ul> <li>Management of nursing educational institutions</li> <li>Planning, organizing, staffing, budgeting, recruitment, discipline, public relation, performance appraisal, welfare services, library services, hostel,</li> </ul>
XV	5	5	<ul> <li>Development and maintenance of standardsand accreditation in nursing education programs.</li> <li>Role of Indian Nursing Council, State Registration Nursing Councils, Boards andUniversity.</li> <li>Role of Professional associations andunions.</li> </ul>

# Activities:

- Framing philosophy, aims and objectives.
- LessonPlanning.
- Microteaching-2.
- Conduct practice teachings using different teaching strategies -10 (like lecture cum discussion, demonstration- lab method, field trips, seminars, project, role play, panel discussion, clinical methodsetc.)
- Preparation and utilization of instructional Aids using differentmedia.
- Develop course plans, unit plans, rotationplans.
- Conduct a continuing educationworkshop.
- Annotatedbibliography.
- Critical evaluation of any nursing education program offered by a selected institution.
- Planning and Organizing fieldvisits.

#### FIRST YEAR EXAMINATION TO B E HELD IN THE YEAR 2021,2022 COURSE TITLE : NURSING EDUCATION COURSE CODE: MSC NUR 101

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

#### **Methods of Teaching**

- Lecture cumdiscussion
- Demonstration/ Returndemonstration
- Seminar /Presentations
- Projectwork
- Fieldvisits
- Workshop

#### Methods of evaluation

- Tests
- Presentation
- Projectwork
- Writtenassignments

#### **Internal Assessment**

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

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

Learning resource material	25
Practice Teaching	50
Conduct Workshop	25
/Short Term Course	

#### **Practical – external assessment**

Practice teaching- 1-	50
Preparation/use of learning resource material-1	25
Construction of tests/rotation plan.	25

#### FIRST YEAR EXAMINATION TO B E HELD IN THE YEAR 2021,2022 COURSE TITLE : NURSING EDUCATION COURSE CODE: MSC NUR 101

#### **Reference Books:**

- 1. B. T. Basavanthappa, Nursing Education, Jaypee Brothers, New Delhi
- 2. Neerja K., Text Book of Nursing Education, Jaypee, New Delhi, Loretta Heidgerken, Teaching and Learning of Nursing, 3rd edition, Konark
- 3. Elsa Sanatombi Devi, Manipal, Manual of Nursing Education
- 4. S. K. Mangal, Advance Educational Psychology, 2nd edition
- 5. Bevis, Em Olivia, Curriculum Building in Nursing a Process, C.V Mosby Co., St. Louis. George Kurian Aleyamma, Principles of Curriculum Development and Evaluation, Vivekanandha Press.
- 6. Bhatia B.D, Principles and Methods of Teaching, Doabra House, New Delhi.
- 7. Billing, Diane M & Halstead, Judith A, Teaching in Nursing: A Guide for Faculty, W.B. Saunders.
- 8. Bloom, Benjamin S Ed, Taxonomy of Educational Objectives: Cognitive Domain, David Mckay CO., Inc, 1956, New York.
- 9. Fuszard, Barbara, Innovating Teaching Strategies in Nursing, Aspen Publishers Inc, 1989, Maryland.
- Gay L.R., Educational Evaluation and Measurement Competencies for Analysis and Application, Ion, Charles E. Merill Publishers Co., 1985, Columbus.
- 11. Guilbert. J J., Educational Handbook for Health Personnel, World Health Organization, 1982, Geneva.
- 12. Guinee. Kathleen k, Teaching and Learning in Nursing, Macmillan, 1978, New York.
- 13. Joyce.B, Models of Teaching, Prentice Hall Inc, Englewood Cliffs, 1986, New Jersey.
- 14. Keay F.E., A History of Education in India and Pakistan, Oxford University Press, 1964, London.
- 15. Modley Doris M, Advancing Nursing Education World Wide, Springer Publishing Co., 1995, New York.

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

#### **Instruction for Paper setter**

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

CLASS: M.SC NURSING 1<sup>ST</sup> YEARBRANCH: COMMON TO ALL BRANCHESCOURSE TITLE: ADVANCE NURSING PRACTICECOURSE CODE:M S C N U R 102DURATION OF EXAMINATION: 3 HOURSHOURS OF INSTRUCTIONTHEORY: 150 HOURSPRACTICAL: 200 HOURS

#### **COURSE DESCRIPTION**

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

#### **COURSE OUTCOMES:**

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

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

#### **Course Content**

Unit	Hours	Content
Ι	10	<ul> <li>Nursing as a Profession <ul> <li>History of development of nursingprofession, characteristics, criteria of theprofession, perspective of nursing profession-national, global</li> <li>Code of ethics(INC), code of professional conduct(INC), autonomy and accountability, assertiveness, visibility of nurses, legalconsiderations,</li> <li>Role of regulatorybodies</li> <li>Professional organizations and unions-self defense, individual and collectivebargaining</li> <li>Educational preparations, continuing education, career opportunities, professional advancement &amp; role and scope of nursingeducation.</li> <li>Role of research, leadership andmanagement.</li> <li>Quality assurance in nursing(INC).</li> <li>Futuristicnursing.</li> </ul> </li> </ul>
II	5	<ul> <li>Health care delivery</li> <li>Health care environment, economics, constraints, planning process, policies, political process vis a vis nursing profession.</li> <li>Healthcare delivery system- national, state, district and locallevel.</li> <li>Major stakeholders in the health care system-Government, non-govt, Industry and otherprofessionals.</li> <li>Patterns of nursing care delivery inIndia.</li> <li>Health care delivery concerns, national health andfamily welfare programs, inter-sectoral coordination, role of non-governmental agencies.</li> <li>Information, education and communication(IEC).</li> <li>Tele-medicine.</li> </ul>
III	10	<ul> <li>Genetics</li> <li>Review of cellular division, mutation and law ofinheritance, human genome project ,The Genomicera.</li> <li>Basic concepts of Genes, Chromosomes &amp;DNA.</li> <li>Approaches to common genetic disorders.</li> <li>Genetic testing – basis of genetic diagnosis, Pre symptomatic and predisposition testing, Prenatal diagnosis &amp;screening, Ethical, legal &amp; psychosocial issues in genetictesting.</li> <li>Genetic counseling.</li> <li>Practical application of genetics innursing.</li> </ul>

IV	10	Epidemiology
1 *	10	<ul> <li>Scope, epidemiological approach andmethods,</li> </ul>
		<ul> <li>Beope, epidemiological approach and neurous,</li> <li>Morbidity, mortality,</li> </ul>
		<ul> <li>Concepts of causation of diseases and theirscreening,</li> </ul>
		<ul> <li>Application of epidemiology in health care delivery, Health survelliance and healthinformatics</li> </ul>
Unit	Hours	Content
V	20	Bio-Psycho social pathology
		Pathophysiology and Psychodynamics of diseasecausation
		□ Lifeprocesses, homeostatic mechanism, biological and
		psycho-social dynamics in causation of disease, lifestyle
		□ Common problems: Oxygen insufficiency, fluid and electrolyte
		imbalance, nutritional problems, hemorrhage
		]andshock, altered body temperature, unconsciousness, sleep
		pattern and its disturbances, pain, sensory deprivation.
		□ Treatmentaspects:pharmacologicalandpre-postoperative
		careaspects,
		<ul> <li>Cardio pulmonaryresuscitation.</li> </ul>
		□ End of lifeCare
		Infection prevention (including HIV) and standard safety
		measures, bio-medical wastemanagement.
		□ Role of nurse- Evidence based nursing practice; Best
		practices
		□ Innovations innursing
VI	20	Philosophy and Theories of Nursing
• •	20	<ul> <li>Values, Conceptual models, approaches.</li> </ul>
		□ Nursing theories: Nightingale's, Hendersons's,Roger's,
		Peplau's, Abdella's, Lewine's, Orem's, Johnson's, King's,
		Neuman's, Roy's, Watson parsce, etc and theirapplications,
		<ul> <li>Health belief models, communication and management,etc</li> </ul>
		<ul> <li>Concept of Selfhealth.</li> </ul>
		Evidence based practicemodel.
<b>X</b> / <b>III</b>	10	Nauchara
VIII	10	Nursing process approach
		□ Health Assessment- illness status of patients/clients
		(Individuals, family, community), Identification of health-
		illness problems, health behaviors, signs and symptoms of
		clients.
		□ Methods of collection, analysis and utilization of data relevant to
		nursingprocess.
		$\square$ Formulation of nursing care plans, health goals,
		implementation, modification and evaluation ofcare.

IX	30	<ul> <li>Psychological aspects and Human relations</li> <li>Human behavior, Life processes &amp; growth anddevelopment, personality development, defense mechanisms,</li> <li>Communication, interpersonal relationships, individual and group, group dynamics, and organizationalbehavior,</li> <li>Basic human needs, Growth and development, (Conception through preschool, School age through adolescence, Young &amp; middle adult, and Olderadult)</li> <li>Sexuality and sexualhealth.</li> <li>Stress and adaptation, crisis and itsintervention,</li> <li>Coping with loss, death andgrieving,</li> <li>Principles and techniques ofCounseling.</li> </ul>
X	10	<ul> <li>Nursing practice</li> <li>Framework, scope andtrends.</li> <li>Alternative modalities of care, alternative systems of health and complimentarytherapies.</li> <li>Extended and expanded role of the nurse, in promotive, preventive, curative and restorative health care delivery system in community andinstitutions.</li> <li>Health promotion and primary healthcare.</li> <li>Independent practice issues,- Independent nurse-midwifery practitioner.</li> <li>Collaboration issues and models-within and outside nursing.</li> <li>Models ofPrevention,</li> <li>Family nursing, Homenursing,</li> <li>Gender sensitive issues and womenempowerment.</li> <li>Disasternursing.</li> <li>Evidence based nursing practice- Bestpractices</li> <li>Trans-culturalnursing.</li> </ul>
XI	25	<ul> <li>Computer applications for patient care delivery system and nursing practice</li> <li>Use of computers in teaching, learning, research and nursingpractice.</li> <li>Windows, MS office: Word, Excel, PowerPoint,</li> <li>Internet, literaturesearch,</li> <li>Statisticalpackages,</li> <li>Hospital management information system:softwares.</li> </ul>

# Practical

Clinical posting in the following areas:

•	Specialty area-in-patient unit	- 2weeks
•	Communityhealthcenter/PHC	- 2weeks
•	Emergency/ICU	- 2weeks

#### Activities

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

#### **Methods of Teaching**

- Lecture cumdiscussion
- Seminar
- Panel discussion
- Debate
- CasePresentations
- Exposure to scientificconferences
- Fieldvisits

#### **Methods of evaluation :**

- Tests
- Presentation
- Seminar
- Writtenassignments

#### **Advance nursing Procedures**

Definition, Indication and nursing implications;

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

#### **Internal Assessment**

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

#### **Reference Books:**

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

2. Kozier B. et al, Fundamentals of Nursing Concepts, Process and Practice, Pearson Education, Inc, 2004.

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

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

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

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

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

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

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

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

## **Instruction for Paper setter**

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

**CLASS:** M.SC NURSING 1<sup>ST</sup> YEAR

#### **BRANCH: COMMAN TO ALL BRANCHES**

#### **COURSE TITLE:** NURSING RESEARCH AND STATISTICS

COURSE CODE: MSCNUR103

#### **DURATION OF EXAMINATION: 3 HOURS**

HOURS OF INSTRUCTION THEORY 150 HOURS PRACTICAL 100 HOURS TOTAL : 250 HOURS

# Part-A : Nursing Research

Theory 100 Hours

Practical 50 Hours

Total: 150 Hours

#### **Course Description:**

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

#### **Course Outcomes:**

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

- 1. Define basic research terms and concepts.
- 2. Review literature utilizing varioussources
- 3. Describe researchmethodology
- 4. Develop a researchproposal.
- 5. Conduct a researchstudy.
- 6. Communicate researchfindings
- 7. Utilize researchfindings
- 8. Critically evaluate nursing researchstudies.
- 9. Write scientific paper forpublication.

#### **Content Outline**

Unit	it Hours		Course Content
	Theory	Practical	
Ι	10		<ul> <li>Introduction:</li> <li>Methods of acquiring knowledge – problem solving and scientificmethod.</li> <li>Research – Definition, characteristics, purposes, kinds of research</li> <li>Historical Evolution of research innursing</li> <li>Basic researchterms</li> <li>Scope of nursing research: areas, problems innursing, health and social research</li> <li>Concept of evidence basedpractice</li> <li>Ethics inresearch</li> <li>Overview of Researchprocess</li> </ul>
II	5	5	<ul> <li>Review of Literature</li> <li>Importance, purposes, sources, criteria for selection of resources and steps in reviewing literature.</li> </ul>
III	12		<ul> <li>Research Approaches and designs</li> <li>Type: Quantitative andQualitative</li> <li>Historical, survey and experimental –Characteristics, types advantages anddisadvantages</li> <li>Qualitative: Phenomenology, grounded theory, ethnography</li> </ul>
IV	10	5	<ul> <li>Research problem:</li> <li>Identification of researchproblem</li> <li>Formulation of problem statement and research objectives</li> <li>Definition ofterms</li> <li>Assumptions anddelimitations</li> <li>Identification ofvariables</li> <li>Hypothesis – definition, formulation andtypes.</li> </ul>
V	5	5	<ul> <li>Developing theoretical/conceptual framework.</li> <li>Theories: Nature, characteristics, Purpose and uses</li> <li>Using,testinganddevelopingconceptual framework, models and theories.</li> </ul>

VI	6		Sempling
V I	U		Sampling <ul> <li>Population and sample</li> </ul>
			<ul> <li>Formation and sample</li> <li>Factors influencing sampling</li> </ul>
			Problems of sampling
VII	20	10	Tools and methods of Data collection:
			□ Concepts of datacollection
			Data sources, methods/techniques quantitative and
			qualitative.
			$\Box$ Tools for data collection – types, characteristics and their
			development
			□ Validity and reliability oftools
			□ Procedure for datacollection
VIII	5		Implementing research plan
			Dilot Study, review research plan (design)., planning for
			datacollection, administration of tool/interventions,
			collection of data
IX	10	10	Analysis and interpretation of data
			□ Plan for data analysis: quantitative and qualitative
			□ Preparing data for computer analysis and presentation.
			□ Statisticalanalysis
			□ Interpretation of data
			Conclusion and generalizations
			□ Summary and discussion
X	10		Reporting and utilizing research findings:
			□ Communication of research results; oral andwritten
			□ Writing research report purposes, methods and style- vancouver,
			American Psychological Association(APA), Campbelletc
			Writing scientific articles for publication: purposes&
			style
XI	3	8	Critical analysis of research reports and articles
XII	4	7	Developing and presenting a research proposal

#### **Activities:**

- Annotated Bibliography of research reports and articles.
- Review of literature of selected topic andreporting
- Formulation of problem statement, objective and hypothesis
- Developing theoretical/conceptualframework.
- Preparation of a sample researchtool
- Analysis and interpretation of givendata
- Developing and presenting researchproposal
- Journal clubpresentation
- Critical evaluation of selected researchstudies
- Writing a scientificpaper.

#### **Method of Teaching**

- Lecture-cum-discussion
- Seminar/Presentations
- Project
- Class roomexercises
- Journal club

#### **Methods of Evaluation**

- Quiz, Tests(Term)
- Assignments/Termpaper
- Presentations
- Projectwork

#### **Internal Assessment**

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

# Part – B : Statistics

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

#### **Course Description**

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

#### **General Objectives**

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

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

Unit	H	ours	Course Content
	Theory	Practical	
I	7	4	<ul> <li>Introduction:</li> <li>Concepts, types, significance and scope of statistics, meaning of data,</li> <li>sample,parameter</li> <li>type and levels of data and theirmeasurement</li> <li>Organization and presentation of data – Tabulation of data;</li> <li>Frequencydistribution</li> <li>Graphical and tabularpresentations.</li> </ul>
II	4	4	Measures of central tendency: Mean, Median, Mode
III	4	5	Measures of variability; □ Range, Percentiles, average deviation, quartile deviation, standard deviation

IV	3	2	Normal Distribution: Probability, characteristics and application of normal probability curve; sampling error.
V	6	8	Measures of relationship:         □       Correlation – need andmeaning         □       Rank ordercorrelation;         □       Scatter diagrammethod         □       Product momentcorrelation         □       Simple linear regression analysis andprediction.
VI	5	2	<ul> <li>Designs and meaning:</li> <li>Experimental designs</li> <li>Comparison in pairs, randomized block design, Latin squares.</li> </ul>
VII	8	10	<ul> <li>Significance of Statistic and Significance of difference</li> <li>between two Statistics (Testing hypothesis)</li> <li>Non parametric test – Chi-square test, Sign, median test, Mann Whitneytest.</li> <li>Parametric test – 't' test, ANOVA,MANOVA,ANCOVA</li> </ul>
VIII	5	5	<ul> <li>Use of statistical methods in psychology and education:</li> <li>Scaling – Z Score, ZScaling</li> <li>Standard Score and TScore</li> <li>Reliability of test Scores: test-retest method,parallel forms, split halfmethod.</li> </ul>
IX	4	2	<ul> <li>Application of statistics inhealth:</li> <li>Ratios, Rates, Trends</li> <li>Vital health statistics – Birth and deathrates.</li> <li>Measures related to fertility, morbidity andmortality</li> </ul>
X	4	8	Use of Computers for data analysis □ Useof statistical package.

# Activities

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

# **Methods of Teaching:**

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

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

#### **Methods of Evaluation**

Test. Classroom statistical exercises.

#### **Internal Assessment**

Weightage 10marks **Techniques** 

Test –(2tests)

#### 100%

#### **Reference Books:**

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

2. Mahajan, B.K, Methods in Biostatistics, Jaypee Brothers, 1999, New Delhi. 3. Rose Hott & Budin. Notter's, Essentials of Nursing Research, spinger publisher, 1999, New York. 4. Patricial Nunhall. Nursing Research, James & Bar, 2001, Canada.

5. Caroly M.H, Research Methods for Clinical Therapists Applied Project Design and Analysis, 1999, Churchill Livingstone.

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

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

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

9. Macnee C. L, Understanding Nursing Research: Reading & Using Research in Practice, Lippincott Williams, Wilinks, 2004, London.

10. Polit, D.F. & Bleck C.T, Nursing Research Principles & Methods, Lippincott Williams Wilkins, 2004, New York.

11. Polit, Bleck & P. Hungler, Nursing Research Methods, Appraisal & Utilization, 2001, Lippincott. 12. Specials & Carpenter, Qualitative Research in Nursing Advancing the Humanistic Imperative, Lippincott Williams. 2007 \*

#### Latest editions of all the suggested books are recommended

#### Journals:

1. Journal of nursing practice and research.

2. Indian journal of medical ethics **Instruction for paper setter:** 

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question

#### First year Annual Examination to be held in the year 2021, 2022

**CLASS:** M.SC NURSING 1<sup>ST</sup> YEAR

#### **BRANCH:** MEDICAL SURGICAL NURSING

#### COURSE TITLE: CLINICAL SPECIALITY-I

**COURSE CODE:** MSCNUR104

#### **DURATION OF EXAMINATION:** 3 HOURS

#### **HOURS OF INSTRUCTION:**

THEORY: 150HOURS PRACTICAL: 650 HOURS TOTAL: 800 HOURS

#### **COURSE DESCRIPTION**

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

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

#### **COURSE OUTCOMES**

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

- 1. Appreciate the trends & issues in the field of Medical Surgical Nursing as aspeciality.
- 2. Apply concepts & theories related to healthpromotion.
- 3. Appreciate the client as a holistic individual.
- 4. Perform physical, psychosocial assessment of Medical Surgical patients.
- 5. Apply Nursing process in providing care topatients.
- 6. Integrate the concept of family centered nursing care with associated disorder such as genetic, congenital and long-termillness.
- 7. Recognize and manage emergencies with Medical- Surgical patients.

- 8. Describe various recent technologies & treatment modalities in the management of critically illpatients.
- 9. Appreciate the legal & ethical issues relevant to Medical Surgical Nursing.
- 10. Prepare a design for layout and management of Medical Surgical Units.
- 11. Appreciate the role of alternative systems of Medicine in care of patients.
- 12. Incorporate evidence based Nursing practice and identify the areas of research in the field of Medical SurgicalNursing.
- 13. Recognize the role of Nurse practitioner as a member of the Medical Surgical healthteam.
- 14. Teach Medical Surgical Nursing to undergraduate nursing students & in-servicenurses.

Unit	Hours	Content			
Ι	5	Introduction:			
		<ul> <li>Historical development of Medical- Surgical Nursing inIndia.</li> </ul>			
		Current status of health and disease burden inIndia.			
		□ Current concept ofhealth.			
		Trends & issues in Medical –Surgical Nursing.			
		Ethical & cultural issues in Medical – SurgicalNursing.			
		□ Rights of patients.			
		□ National health policy, special laws & ordinances relating toolder			
		people.			
		□ Nationalgoals.			
		□ Five yearplans.			
		National health programs related to adulthealth.			
II	20	Health Assessment of patients			
		□ Historytaking.			
		Physical examination of varioussystems.			
		Nutritionalassessment.			
		<ul> <li>Related investigations and diagnosticassessment.</li> </ul>			

#### **COURSE CONTENT:**

III	5	Care in hospital settings:			
		□ Ambulatorycare.			
		□ Acute and Criticalcare.			
		□ Long termcare.			
		□ Home HealthCare.			
		□ Characteristics, care models, practice settings, interdisciplinary			
		team.			
		□ Hospitalization- effects of hospitalization on the patient & family.			
		□ Stressors & reactions related to diseaseprocess.			
		<ul> <li>Nursing care using Nursing processapproach.</li> </ul>			
IV	10	Management of patients with disorders of Gastro intestinal tract			
		<ul> <li>Review of anatomy and physiology.</li> </ul>			
		□ Common Disorders-etiology, Patho physiology, Clinical			
		manifestations, complications, prognosis.			
		□ Health assessment- History taking, physical examination,			
		investigation and diagnostic assessment.			
		<ul> <li>Treatment modalities andtrends.</li> </ul>			
		□ Nursingmanagement.			
		□ Related researchstudies.			
		<ul> <li>Evidence based nursingpractice.</li> </ul>			
		□ Rehabilitation and follow-up.			
V	10	Management of patients with disorders of nervous system			
v	10	· ·			
v	10	<ul> <li>Review of anatomy and physiology.</li> </ul>			
v	10	<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology, Clinical</li> </ul>			
v	10	<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology, Clinical manifestations, complications, prognosis.</li> </ul>			
v	10	<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications, prognosis.</li> <li>Health assessment-History taking, physical examination,</li> </ul>			
v	10	<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology, Clinical manifestations, complications, prognosis.</li> </ul>			
v	10	<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications, prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnosticassessment.</li> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> </ul>			
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	10	<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications, prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnosticassessment.</li> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> <li>Evidence based nursingpractice.</li> </ul>			
	10	<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications, prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnosticassessment.</li> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> </ul>			
		<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications,prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnosticassessment.</li> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> <li>Evidence based nursingpractice.</li> <li>Rehabilitation andfollow-up.</li> </ul>			
V	10	<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications,prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnosticassessment.</li> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> <li>Evidence based nursingpractice.</li> <li>Rehabilitation andfollow-up.</li> </ul>			
		<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications, prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnosticassessment.</li> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> <li>Evidence based nursingpractice.</li> <li>Rehabilitation andfollow-up.</li> </ul> Management of patients with disorders of respiratory system <ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical</li> </ul>			
		<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications, prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnosticassessment.</li> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> <li>Evidence based nursingpractice.</li> <li>Rehabilitation andfollow-up.</li> </ul> Management of patients with disorders of respiratory system <ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications, prognosis.</li> </ul>			
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		<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications, prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnosticassessment.</li> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> <li>Evidence based nursingpractice.</li> <li>Rehabilitation andfollow-up.</li> </ul> Management of patients with disorders of respiratory system <ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications, prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnosticassessment.</li> </ul>			
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VII	10	<ul> <li>Management of patients with disorders of cardio vascular system</li> <li>□ Review of anatomy and physiology.</li> </ul>			
		□ Common Disorders- etiology, Patho physiology, Clinical			
		manifestations, complications, prognosis.			
		□ Health assessment-History taking, physical examination,			
		investigation and diagnosticassessment.			
		Treatment modalities andtrends.			
		Nursingmanagement.			
		Related researchstudies.			
		<ul> <li>Evidence based nursingpractice.</li> </ul>			
		<ul> <li>Rehabilitation and follow-up.</li> </ul>			
VIII	5	5 Management of patients with disorders of blood			
		□ Review of anatomy and physiology.			
		□ Common Disorders- etiology, Patho physiology, Clinical			
		manifestations, complications, prognosis.			
		$\square$ Health assessment-History taking, physical examination,			
		investigation and diagnosticassessment.			
		Treatment modalities andtrends.			
		Nursingmanagement.			
		Related researchstudies			
		Evidence based nursing practice			
		Rehabilitation and follow-up			
IX	10	Management of patients with disorders of genito urinarysystem			
		<ul> <li>Review of anatomy and physiology.</li> </ul>			
		Common Disorders- etiology, Patho physiology, Clinical			
		manifestations, complications, prognosis.			
		□ Health assessment-History taking, physical examination,			
		investigation and diagnostic assessment.			
		<ul> <li>Treatment modalities andtrends.</li> </ul>			
		Nursingmanagement.			
		□ Related researchstudies.			
		<ul> <li>Evidence based nursingpractice.</li> </ul>			
	4.0	Rehabilitation and follow-up.			
NZ	10	Management of patients with disorders of endocrine system			
X		<ul> <li>Review of anatomy and physiology.</li> <li>Common Disorders - Dethe - should be a Clinical</li> </ul>			
		□ Common Disorders- etiology, Patho physiology, Clinical			
		manifestations, complications, prognosis.			
		□ Health assessment-History taking, physical examination,			
		investigation and diagnosticassessment.			
		Treatment modalities andtrends.			
		<ul> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> </ul>			
		<ul> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> </ul>			
		<ul> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> </ul>			

XI	10	Management of patients with disorders of musculo-skeletal system			
		<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications, prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnosticassessment.</li> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> <li>Evidence based nursingpractice.</li> <li>Rehabilitation andfollow-up.</li> </ul>			
XII	8	Management of patients with disorders of integumentory system			
		<ul> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology,Clinical manifestations, complications,prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnosticassessment.</li> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> <li>Evidence based nursingpractice.</li> <li>Rehabilitation andfollow-up.</li> </ul>			
XIII	5	<ul> <li>Management of patients with disorders of Eye and ENT</li> <li>Review of anatomy andphysiology.</li> <li>Common Disorders-etiology, Patho physiology, Clinical manifestations, complications, prognosis.</li> <li>Health assessment-History taking, physical examination, increation and discrete sectors.</li> </ul>			
		<ul> <li>investigation and diagnosticassessment.</li> <li>Treatment modalities andtrends.</li> </ul>			
		<ul> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> <li>Evidence based nursingpractice.</li> <li>Rehabilitation andfollow-up.</li> </ul>			
XIV	8	<ul> <li>Management of patients with disorders of reproductive system</li> <li>Review of anatomy andphysiology.</li> <li>Common Disorders- etiology, Patho physiology, Clinical manifestations, complications, prognosis.</li> <li>Health assessment-History taking, physical examination, investigation and diagnosticassessment.</li> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> <li>Evidence based nursingpractice.</li> <li>Rehabilitation andfollow-up.</li> </ul>			

XV	8	Geriatric nursing				
		Nursing Assessment-History and Physicalassessment.				
		□ Ageing;				
		Demography; Myths andrealities.				
		$\Box$ Concepts and theories of ageing.				
		<ul> <li>Cognitive Aspects of Ageing.</li> </ul>				
		<ul> <li>Normal biologicalageing.</li> </ul>				
		<ul> <li>Age related body systemschanges.</li> </ul>				
		<ul> <li>Rge related body systemsenanges.</li> <li>Psychosocial Aspects of Aging.</li> </ul>				
		Comment Harley R. Norres Manager 14				
		-				
		□ Abuse of elderly. □ Pole of purse for care of elderly: ambulation putritional				
		□ Role of nurse for care of elderly: ambulation, nutritional,				
		<ul> <li>communicational, psychosocial and spiritual.</li> <li>Role of nurse for caregivers ofelderly.</li> </ul>				
		<ul> <li>Legal &amp; EthicalIssues.</li> <li>Provisions and Programmas for alderly privilages. Community</li> </ul>				
		<ul> <li>Provisions and Programmes for elderly; privileges, Community</li> </ul>				
		Programs and healthservices;				
		<ul> <li>Home and institutional care.</li> </ul>				
<b>X</b> / <b>X</b> / <b>X</b>	0	<ul> <li>Issues, problems andtrends.</li> </ul>				
XVI	8	Management of patients with communicable and sexually				
		transmitted diseases:				
		□ Review of immunesystem.				
		□ Common Disorders of immune system –HIV/AIDS.				
		<ul> <li>Review of infectious disease</li> <li>Review of infecti</li></ul>				
		□ Communicable Diseases- etiology, Patho physiology, Clinical				
		manifestations, complications, prognosis.				
		□ Health assessment-History taking, physical examination,				
		investigation and diagnosticassessment.				
		<ul> <li>Treatment modalities andtrends.</li> <li>Nursingmanagement</li> </ul>				
		<ul> <li>Nursingmanagement.</li> <li>Related researchstudies.</li> </ul>				
		<ul> <li>Evidence based nursingpractice.</li> <li>Rehabilitation andfollow-up.</li> </ul>				
<b>V</b> VI	Q	Emergency, trauma and multi-system organ failure				
	8					
L		<ul> <li>DIC (disseminated intravascularcoagulation)</li> <li>Trauma burns poisoning</li> </ul>				
		Trauma, burns, poisoning Etiology Patho physiology Clinical manifestations complications				
		<ul> <li>Etiology, Patho physiology, Clinical manifestations, complications, prognosis</li> </ul>				
		prognosis. – Health assessment History taking physical examination				
		Health assessment-History taking, physical examination, investigation and diagnosticassessment.				
		<ul> <li>Treatment modalities andtrends.</li> </ul>				
1						
1		Nursingmanagement.     Deleted researchetudies				
1		Related researchstudies.				
1		• Evidence based nursingpractice.				
1		Rehabilitation and follow-up.				

# Practical

Total = 660 Hours

1 Week = 30 Hours

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

#### **Student Activities:**

- Clinical presentations
- Historytaking
- HealthAssessment
- NutritionalAssessment
- Health Education related to diseaseconditions
- Casestudies
- Projectwork
- Fieldvisits

#### **Reference Books:**

- Black M.J. & Hawks H.J, Medical Surgical Nursing, Clinical Management for Positive Outcome, Sauders, Elsevier.
- 2. Brunner and suddarth's, Textbook of Medical surgical Nursing, south Asian edition, Wolters Kluwer.
- 3. Lewis, Medical Surgical Nursing, south Asian edition, Chintamani,
- 4. Urban, A.N. & Greenlac K.K, Guidelines for Critical Care Nursing, Mosby.
- 5. Wood L.S. & Freelicher S.E, Fetal Cardiac Nursing, Lippincott Williams & Wilkings.
- 6. Baughman Diane C, Hand Book for Surgical Nursing, Lipincott, NewYork.
- 7. Philip & Wilma J, Medical- Surgical Nursing, B.T Pubn Bangalore.
- 8. Richardved Lee, Medical Case of the Pregnant Patient, American College, Philadelphia.
- 9. B.T. Basavanthapa, Medical Surgical Nursing, 2<sup>nd</sup> edition, Jaypee Publication.

#### Instruction for paper setter:

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

#### FIRST YEAR ANNUAL EXAMINATION TO BE HELD IN THE YEAR 2021,2022

#### **CLASS:** M.SC NURSING 1<sup>ST</sup> YEAR

#### **BRANCH:** OBSTETRIC AND GYNAECOLOGICAL NURSING

COURSE TITLE: CLINICAL SPECIALITY-I

COURSE CODE: MSCNUR105

**DURATION OF EXAMINATION: 3 HOURS** 

HOURS OF INSTRUCTION THEORY: 150HOURS PRACTICAL: 650 HOURS TOTAL: 800 HOUR

#### **COURSE DESCRIPTION**

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

#### **Course Outcomes**

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

- 1. Appreciate the trends in the field of midwifery, obstetrics and gynecology as aspeciality.
- 2. Describe the population dynamics and indicators of maternal and childhealth
- 3. Describe the concepts of biophysical, psychological and spiritual aspects of normal pregnancy, labor and puerperium.
- 4. Provide comprehensive nursing care to women during reproductive period and newborns.
- 5. Integrate the concepts of family centered nursing care and nursing process approach in obstetric and gynaecologicalnursing.
- 6. Identify and analyze the deviations from normalbirth process and referappropriately.
- 7. Describe the pharmacological agents, their effects duringpregnancy, child birth, puerperium, lactation and the role ofnurse
- 8. Counsel adolescents, women and families on issues pertaining to pregnancy, child birth andlactation
- 9. Describe theroleof various types of complementary and alternative therapies in obstetric and gynaecologicalnursing.

- 10. Incorporate evidence based nursing practice and identify the areas of research in the field of obstetric and gynaecologicalnursing.
- 11. Describetherecentadvancementincontraceptivetechnologyand birth controlmeasures
- 12. Appreciate the legal and ethical issues pertaining to obstetric and gynaecologicalnursing

## **Course Content**

Units	Hours	Content	
I	10	<ul> <li>Introduction <ul> <li>Historical and contemporaryperspectives</li> <li>Epidemiological aspects of maternal and childhealth</li> <li>Magnitude of maternal and child healthproblems</li> <li>Issues of maternal and child health : Age, Gender, Sexuality, psycho Socio culturalfactors</li> <li>Preventiveobstetrics</li> <li>National health and family welfare programmes related to maternal and child health: health care delivery system- National Rural health mission, Role ofNGO's</li> <li>Theories,modelsandapproachesappliedtomidwiferypractice</li> <li>Role and scope of midwifery practice: Independent Nurse midwiferypractitioner</li> <li>Legal and Ethical issues: Code of ethics and standards of midwifery practice, standingorders</li> <li>Evidence based midwiferypractice</li> <li>Research priorities in obstetric and gynaecologicalnursing.</li> </ul> </li> </ul>	
II	15	<ul> <li>Human reproduction         <ul> <li>Review of anatomy and physiology of human reproductive system: male andfemale</li> <li>Hormonalcycles</li> <li>Embryology</li> <li>Genetics, teratology andcounseling</li> <li>Clinicalimplications</li> </ul> </li> </ul>	

25 P	Pregnancy
	<ul> <li>Maternal adaptation : Physiological,psychosocial</li> <li>Assessment- Maternal and foetal measures Maternal measures: Historytaking , exmanination-General,physical and obstetrical measure, identification of highrisk,</li> <li>Foetal measure- clinical parameters, biochemical- human estriol, Maternal Serum Alfa Feto Protein, Acetyl Choline esterase (AchE), Triple Test Aminocentesis, Cordocentesis, chorionic villus sampling (CVS)),</li> <li>Biophysical- (US IMAGING, Foetal movement count, Ultra Sonography, Cardiotocography, cardiotomography,Non Stress Test(NST), Contraction stress test(CST), amnioscopy, foetoscopy,</li> <li>Radiologicalexamination,</li> <li>Interpretation of diagnostic tests and nursingimplications</li> <li>Nursing management of the pregnant women, minor disorders of pregnancy and management, preparation for child birth and parenthood,importanceofinstitutionaldelivery,choiceofbirth setting, importance and mobilizing of transportation, prenatal counseling, role of nurse and crisis intervention, identificationof high risk pregnancy andrefer</li> </ul>

IV	25	Normal Labour and nursing management:
		$\square$ Essential factors of labour
		□ Stages andonset
		First stage: Physiology of normal labour
		• Use of partograph: Principles, use and critical analysis,
		evidence basedstudies
		<ul> <li>Analgesia and anaesthesia inlabour</li> </ul>
		Nursingmanagement
		Second stage
		Physiology, intrapartummonitoring
		Nursingmanagement.
		• Resuscitation, immediate newborn care and initiate breast feeding(GuidelinesofNationalneonatalogyforumofIndia)
		Thirdstage
		<ul> <li>Physiology and nursingmanagement</li> </ul>
		Fourth stage – Observation, critical analysis and Nursing
		management.
		• Various child birth practice: water birth, position changeetc
		• Evidence based practice in relation to labourintervention
		r
		Role of nurse midwifery practitioner
		Alternative/complementarytherapies

V	20	<ul> <li>Normal puerperium and nursing management         <ul> <li>Physiology of puerperium</li> <li>Physiology of lactation, lactation management, exclusive breast feeding ,Baby friendly hospitalintitative(BFHI)</li> <li>Assessment of postnatal women.</li> <li>Minor discomforts and complications of puerperium</li> <li>Management of mothers during puerperium: Postnatal exercises Rooming in, bonding, warmchain</li> <li>Evidence basedstudies</li> </ul> </li> <li>Role of nurse midwifery practitioner</li> </ul>
VI	20	Alternative/complementarytherapies     Normal Newborn
		<ul> <li>Physiology and characteristics of normalnewborn</li> <li>Physical and Behavioural assessment ofnewborn</li> <li>Needs ofnewborn</li> <li>Essential newborn care: Exclusive breast feeding, Immunization,Hygienemeasures,Newbornnutrition</li> <li>Organization of neonatal care, services(Levels), transport, neonatal intensive care unit, organization and management of nursing services inNICU</li> <li>Observation and care ofnewborn</li> </ul>
VII	10	<ul> <li>Parentingprocess</li> <li>Pharmoco dynamics in obstetrics</li> </ul>
		<ul> <li>Drugs used in pregnancy, labour, post partum andnewborn</li> <li>Calculation of drug dose and administration</li> <li>Effects of drugsused</li> <li>Anaesthesia and analgesia inobstetrics</li> <li>Roles and responsibilities of midwifery nursepractitioner</li> <li>Standing orders and protocols and use of selected life saving drugs and interventions of obstetric emergencies approved by theMOHFW</li> </ul>
VIII	10	Family welfare services         Populationdynamics         Demographytrends: vital statistics, calculation of indicators especially maternal and neonatal mortality rates and problems and other healthproblems         Recent advancement in contraceptivetechnology         Role of nurses in family welfare programmes in allsettings         Role of independent nurse midwiferypractitioner         Family lifeeducation         Evidence basedstudies         Information, Education andCommunication(IEC)         Management information and evaluation system(MIES)         Teaching and supervision of health teammembers

IX	5	<ul> <li>Infertility <ul> <li>Primary and secondarycauses</li> <li>Diagnosticprocedures</li> <li>Counseling: ethical and legal aspects of assisted reproductive technology(ART)</li> <li>Recent advancement in infertilitymanagement.</li> <li>Adoptionprocedures</li> <li>Role of nurses in infertilitymanagement.</li> </ul> </li> </ul>
X	5	Menopause         Physiological, psychological and socialaspects         Hormone ReplacementTherapy         Surgicalmenopause         Counseling andguidance         Role of midwifery nurse practitioner
XI	5	Abortion         □ Types, causes         □ Legislations, Clinical rights and professional responsibility         □ Abortion procedures         □ Complications         □ Nursing management         Role of midwifery nurse practitioner

# Practical

Total = 660 Hours1 week = 30Hours

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

#### **Procedures observed**

- Diagnostic investigations : amniotcentecis, chordocentecis, chorionicvilli sampling
- Infertilitymanagement: artificial reproduction : artificial insemination, invitro fertilization, and relatedprocedures

## **Procedures assisted**

• Medical termination of pregnancy,

## **Procedures performed**

- Antenatalassessment-20
- Postnatalassessment-20
- Assessment during labour : use of partograph -20
- Per vaginalexamination-20
- Conduct of normaldelivery-20
- Episiotomy and suturing-10
- Setting up of deliveryareas
- Insertion of intra uterine devices( copperT)

#### Others

- Identification of high risk women andreferral
- Health education: to women and theirfamilies
- Motivation of couples for plannedparenthood

#### **Reference Books:**

- 1. Buckley Kathleen and Kulb Nancy W, High Risk Maternity Nursing Manual, Williams & Wilkin, 1993, Philadelphia.
- 2. Bennet V Ruth & Brown K Linda, Myles Text Book for Midwives, ELBS, Churchill Livingstone.
- 3. Calander, R & Miller A, Obstetrics Illustrated, Churchill & Livingstone, 1993, New York.
- 4. Dawn C.S, Text Book of Obstetrics and Neonatology, Dawn Books, Calcutta.
- 5. Dawn C.S, Text Book of Gynecology and Contraception, Dawn Books, Calcutta.
- 6. Dutta D.C, Text Book of Obstetrics, New Central Agency 2001, Calcutta.
- 7. Dutta D.C, Text Book of Gynecology, New Central Agency, 2001, Calcutta.
- 8. Daftary Shrish, Holland and Brews Manual of Obstetrics, B Churchill Livingstone, New Delhi.
- 9. Dickason Elizabeth jean et al, Maternal Infant Nursing Care, Mosby, St.Louis.
- 10. GoodnerBrenda, Concepts of Obsterics Nursing, Skidmore, Roth Publishing, INC, Texas.
- 11. Gorie Trula Myers et al, Foundations of Maternal Newborn Nursing, WB Saunders, Co., 1998, Philadelphia.
- 12. Ladewing Patricia Wieland et al, Essentials of Maternal Newborn Nursing, Addisol Wesley Nursing, 1990, New York.
- 13. Rashmi Patil, Instruments, Operatuions, Drugs in Obstetrics and Gynaecology, Vors Medical Publications, Mumbai.
- 14. Philips Celeste R, Family Centered Maternity Newborn Care, Mosby New year Book, 1996, St Louis.

#### Instruction for paper setter:

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

# **CLASS:** M.SC NURSING 1<sup>ST</sup> YEAR

## BRANCH: CHILD HEALTH (PAEDIATRIC) NURSING

## COURSE TITLE: CLINICAL SPECIALITY-I

COURSE CODE: MSCNUR106

## **DURATION OF EXAMINATION: 3 HOURS**

HOURS OF INSTRUCTION THEORY: 150HOURS PRACTICAL: 650 HOURS TOTAL: 800 HOURS

#### **COURSE DESCRIPTION**

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

#### **Course Outcomes**

At the end of the course the students will be ableto:

- 1. Appreciate the history and developments in the field of pediatrics and pediatric nursing as aspecialty
- 2. Apply the concepts of growth and development in providing care to the pediatric clients and theirfamilies.
- 3. Appreciate the child as a holistic individual
- 4. Perform physical, developmental, and nutritional assessment of pediatricclients
- 5. Apply nursing process in providing nursing care to neonates & children
- 6. Integrate the concept of family centered pediatric nursing care with related areas such as genetic disorders, congenital malformations and long termillness.
- 7. Recognize and manage emergencies inneonates
- 8. Describe various recent technologies and treatment modalities in the management of high riskneonates
- 9. Appreciate the legal and ethical issues pertaining to pediatric and neonatalnursing
- 10. Prepare a design for layout and management of neonatalunits
- 11. Incorporate evidence based nursing practice and identify the areas of research in the field of pediatric/neonatalnursing

# 12. Recognize the role of pediatric nurse practitioner and as a member of the pediatric and neonatal healthteam

13. Teach pediatricnursing to undergraduate students & &in-service nurses

#### **Course Content**

Unit	Hours	Content
Ι	10	<ul> <li>Introduction <ul> <li>Historical development of Pediatrics and Pediatric Nursing in India;</li> <li>Current status of child health inIndia;</li> <li>Trends in Pediatrics and PediatricNursing,</li> <li>Ethical and cultural issues in pediatriccare</li> <li>Rights ofchildren</li> <li>National health policy for children, special laws and ordinances relating tochildren.</li> <li>Nationalgoals,</li> <li>Five yearplans,</li> <li>National health programs related to childhealth.</li> </ul> </li> </ul>
II	10 Hrs	Assessment of pediatric clients         Image: Historytaking         Developmentalassessment         Physicalassessment         Nutritionalassessment         Familyassessment
III	10	<ul> <li>Hospitalized child</li> <li>Meaning of hospitalization of the child, preparationfor hospitalization, effects of hospitalization on the child and family</li> <li>Stressors and reactions related to developmental stages, play activities for ill hospitalizedchild.</li> <li>Nursing care of hospitalized child and family -principles and practices</li> </ul>
IV	15	<ul> <li>Pre-natal Pediatrics</li> <li>Embryological and fetal development, Prenatal factors influencing growth and development of fetus,</li> <li>Genetic patternsof common pediatric disorders, chromosomalaberrations, genetic assessment and counseling legal and ethical aspects of genetic, screening and counseling role of nurse in geneticcounseling,</li> <li>Importance of prenatal care and role of pediatricnurse.</li> </ul>

COURSE CODE: MSCNUR106

	15	<ul> <li>Growth and Development of children</li> <li>Principles of growth anddevelopment,</li> </ul>
		<ul> <li>Concepts and theories of growth anddevelopment,</li> </ul>
		adolescence, developmentalmilestones,
		□ Assessment of growth and development of pediatricclients,
		<ul> <li>Factors affecting growth and development.</li> </ul>
VI	15	Behavioral Pediatrics and Pediatric Nursing
		<ul> <li>Parent childrelationship,</li> </ul>
		<ul> <li>Basicbehavioralpediatricprinciplesandspecificbehavioral</li> </ul>
		pediatricconcepts/disorders-maternaldeprivation,failure
		to thrive, child abuse, the battered child,
		<ul> <li>Common behavioral problems and theirmanagement,</li> </ul>
		□ Child guidanceclinic.
VII	15	Preventive Pediatrics and Pediatric Nursing
		□ Concept, aims and scope of preventive pediatrics,
		□ Maternal health and its influence on child health antenatal
		aspects of preventive pediatrics,
		□ Immunization, expanded program on immunization/
		universal immunization program and coldchain,
		□ Nutrition and nutritional requirements of children, changin
		patterns of feeding, baby- friendly hospital initiative and exclusiv
		breastfeeding,
		<ul> <li>Health education, nutritional education forchildren</li> </ul>
		<ul> <li>Nutritional programs</li> </ul>
		□ National and internationalorganizationsrelatedtochild
		health,
		ileanti,
		Role of pediatric nurse in the hospital and community.
VIII	30	Neonatal Nursing
		<ul> <li>New born baby- profile and characteristics of the newborn,</li> </ul>
		$\square$ Assessment of the newborn,
		□ Nursing care of the new born at birth, care of the newborn
		and family,
		□ High risk newborn- pre term and term neonate and growth
		retardedbabies,
		<ul> <li>Identification and classification of neonates withinfections,</li> </ul>
		HIV & AIDS, Ophthalmia neonatorum, congenital syphilis.
		□ High risk new born- Identification, classification and
		nursingmanagement
		□ Organization of neonatal care, services(Levels),transport,
		neonatal intensive care unit, organization and management of
		nursing services in NICU.
		IMNCI
	30	
IX	30	
IX	30	(Integrated management of neonatal and childhood illnesses)

# **Practical**

Total = 660Hours 1 Week = 30Hours

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

## **Student Activities**

- Clinicalpresentations
- Growth & developmentalassessment
- Assessment & prescription of nursing interventions for sickchildren
- Health education related to diseaseconditions
- Nutritionalassessment
- Projectwork
- Fieldvisits

#### **Reference Books:**

- 1. Alexander NM, Brown MS, Paediatric Physical Diagnosis for Nurses, McGrew Hill Book Co., New York.
- 2. Ball, Paediatric Nursing Caring for Children, 1999, Prenticehall.
- 3. Behrman, Richard K & Vaughan, Nelson, s, TextBook of Paediatrics, WB Saunders Co.,
- 4. Blake G, Florence & Wright, Essentials of Paediatric Nursing,
- 5. Barbara EW, Guidelines in the Care of the Low Birth Weight, Orient Longman
- 6. Bowden Greenberg, Paediatric Nursing Procedure, Lippincott, Williams& Wilkins
- 7. Cameron, Jelinek et al, Text Book of Emergency Paediatric Medicine,
- 8. Ghai O P, Essential Text Book Of Paediatrics" Jaypee Brothers
- 9. Ghosh Shanti, Nutrition and Child Care, Jaypee Brothers, New Delhi.
- 10. Ghosh Shanti, Know Your Child, Jaypee Brothers, New Delhi.
- 11. Gupte Suraj, Neonatal Emergencies Jaypee Brothers, New Delhi.
- 12. Gupte Suraj, A Short Text Book of Paediatrics, Jaypee Brothers, New Delhi.
- 13. Guha DK, Manual of Practical Newborn Care, Jaypee Brothers, New Delhi. M.Sc. (Nursing) Revised Hathfield N, Introductory Paediatric Nursing, Lippincott, 2003.
- 14. Helens CL & Roberts, Paediatric Nursing, CV Mosby & Co.
- \* Latest editions of all the suggested books are recommended\*

## Instruction for paper setter:

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

FIRST YEAR ANNUAL EXAMINATION TO BE HELD IN THE YEAR 2021, 2022

## **CLASS:** M.SC NURSING 1<sup>ST</sup> YEAR

## BRANCH: MENTAL HEALTH (PSYCHIATRIC) NURSING

#### COURSE TITLE: CLINICAL SPECIALITY-I

COURSE CODE: MSCNUR107

#### **DURATION OF EXAMINATION: 3 HOURS**

HOURS OF INSTRUCTION THEORY: 150HOURS PRACTICAL: 650 HOURS TOTAL: 800 HOUR

#### COURSEDESCRIPTION

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

#### **Course Outcomes**

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

- 1. Appreciate the trends and issues in the field of psychiatry and psychiatricnursing.
- 2. Explain the dynamics of personality development and human behaviour.
- 3. Describe the concepts of psychobiology in mental disorders and its implications for psychiatricnursing
- 4. Demonstrate therapeutic communications skills in allinteractions
- 5. Demonstrate the role of psychiatric nurse practitioner in various therapeuticmodalities
- 6. Establish and maintain therapeutic relationship with individual and groups
- 7. Uses assertive techniques in personal and professionalactions
- 8. Promotes self-esteem of clients, others and self
- 9. Apply the nursing process approach in caring for patients with mental disorders
- 10. Describe the psychopharmacological agents, their effects and nurses role
- 11. Recognize the role of psychiatric nurse practitioner and as a member of the psychiatric and mental healthteam
- 12. Describe various types of alternative system of medicines used in psychiatricsettings

13. Incorporate evidence based nursing practice and identify the areas of research in the field of psychiatricnursing

## **Course Content**

Units	Hours	Content
Ι	15	Introduction
		Mental Health and MentalIllness
		Historical perspectives
		Trends, issues andmagnitude
		□ Contemporarypractices
		Mental healthlaws/Acts
		National mental health program -National mental health
		authority, state mental healthauthority
		Human rights of mentallyill
		Mental Health/ Mental Illness Continuum
		□ Classification of mental illnesses-ICD,DSM
		Standards of Psychiatricnursing
		Challenges and Scope of psychiatricnursing
		<ul> <li>Multi-disciplinary team and role of nurse</li> </ul>
		Role of psychiatric nurse- extended and expanded
II	10	Concepts of Psychobiology
		□ The NervousSystem:
		An AnatomicalReview
		The Brain and limbicsystem
		NerveTissue
		Autonomic Nervoussystem
		Neurotransmitters
		□ Neuroendocrinology
		Pituitary, ThyroidGland
		CircadianRhythms
		□ Genetics
		Neuro psychiatricdisorders
		□ Psychoimmunology
		Normal Immuneresponse
		Implications for psychiatricIllness
		□ Implications forNursing

III	10	Theories of Personality Development and relevance to nursing	
		practice	
		Psychoanalytic Theory-Freud's	
		□ Interpersonal Theory-Sullivan's	
		□ Theory of PsychosocialDevelopment-Erikson's	
		□ Theory of object relations	
		Cognitive DevelopmentTheory	
		□ Theory of MoralDevelopment	
		□ A Nursing Model-HildegardE.Peplau	
IV	5	Stress and its management	
		$\square$ An introduction to the concepts of stress	
		Psychological Adaptation tostress	
		□ Stress as a BiologicalResponse.	
		□ Stress as an EnvironmentalEvent.	
		□ Stress as Transaction between the Individual and the	
		Environment.	
		□ Stressmanagement.	
V	10	Therapeutic communication and interpersonal relationship	
		□ Review communication process, factors affecting	
		communication	
		Communication with individuals and ingroups	
		□ Techniques of therapeutic communication-touchtherapy	
		□ Barrier of communication with specific reference to	
		psychopathology	
		□ Therapeuticattitudes	
		Dynamics of a therapeutic Nurse-client relationship;	
		Therapeutic use of self Gainingself-awareness	
		□ Therapeutic nurse-patient relationship its phases ; Conditions	
		essential to development of a therapeuticrelationship	
		Therapeutic impasse and itsmanagement	
VI	10	Assertive Training	
		□ AssertiveCommunication	
		Basic HumanRights	
		□ ResponsePatterns	
		(NonassertiveBehavior	
		AssertiveBehavior	
		AggressiveBehavior	
		Passive-AggressiveBehavior)	
		<ul> <li>Behavioral Components of AssertiveBehavior</li> </ul>	
		<ul> <li>Denavioral Components of AssertiveBehavior</li> <li>Techniques that Promote AssertiveBehavior</li> </ul>	
		<ul> <li>Thought-Stopping TechniquesMethod</li> </ul>	
		Role of The Nurse	

VII	10	Promoting Self-Esteem
,	10	<ul> <li>Components of Self-Concept</li> </ul>
		□ The Development of Self-Esteem
		□ The Manifestations of Low-Self-Esteem
		<ul> <li>Boundaries</li> </ul>
		Role of The Nurse
VIII	10	The nursing process in psychiatric/mental health nursing
		□ Mental health assessment- History taking, mental status
		examination
		Physical and neurological examination
		□ Psychometricassessment
		<ul> <li>Investigations, Diagnosis and Differential diagnosis</li> </ul>
		<ul> <li>Interpretation of investigations</li> </ul>
		$\square$ Nurse'srole
		<ul> <li>Nursing case management</li> </ul>
		Critical pathways ofcare
		Problem-orientedrecording
		Focuscharting
		The PIEmethod
IX	35	Psycho social and physical therapies
IA		
		□ Behavioural Therapy- Relaxation therapy, cognitive therapy,
		positive-negativereinforcement, bio-feedback, guidedimagery, ab-
		reactivetherapy
		□ GroupTherapy
		□ FamilyTherapy
		• • • • • • • • • • • • • • • • • • • •
		□ MilieuTherapy
		<ul> <li>MilieuTherapy</li> <li>The TherapeuticCommunity</li> </ul>
		<ul> <li>MilieuTherapy</li> <li>The TherapeuticCommunity</li> <li>Occupationaltherapy</li> </ul>
		<ul> <li>MilieuTherapy</li> <li>The TherapeuticCommunity</li> <li>Occupationaltherapy</li> <li>Recreationaltherapy</li> </ul>
		<ul> <li>MilieuTherapy</li> <li>The TherapeuticCommunity</li> <li>Occupationaltherapy</li> <li>Recreationaltherapy</li> <li>Playtherapy</li> </ul>
		<ul> <li>MilieuTherapy</li> <li>The TherapeuticCommunity</li> <li>Occupationaltherapy</li> <li>Recreationaltherapy</li> <li>Playtherapy</li> <li>Musictherapy</li> </ul>
		<ul> <li>MilieuTherapy</li> <li>The TherapeuticCommunity</li> <li>Occupationaltherapy</li> <li>Recreationaltherapy</li> <li>Playtherapy</li> </ul>
		<ul> <li>MilieuTherapy</li> <li>The TherapeuticCommunity</li> <li>Occupationaltherapy</li> <li>Recreationaltherapy</li> <li>Playtherapy</li> <li>Musictherapy</li> </ul>
		<ul> <li>MilieuTherapy</li> <li>The TherapeuticCommunity</li> <li>Occupationaltherapy</li> <li>Recreationaltherapy</li> <li>Playtherapy</li> <li>Musictherapy</li> <li>Lighttherapy</li> </ul>

	X	10	Psychopharmacology
			□ HistoricalPerspectives
			□ Role of a Nurse in PsychopharmacologicalTherapy
			AntianxietyAgents
			AntidepressantsAgents
			Moodstabilizers
			Antipsychotics
			Sedative-Hypnotics
			Central Nervous SystemStimulants
			□ Futuredevelopments
	XI	5	Electroconvulsive Therapy
			□ HistoricalPerspectives
			□ Indications
			□ Contraindications
			□ Mechanisms of Action
			□ SideEffects
			□ Risks Associated with ElectroconvulsiveTherapy
			□ The Role of The Nurse in ElectroconvulsiveTherapy
1			
	XII	15	Alternative systems of medicine in mental health
			Types of Therapies
			HerbalMedicine
1		1	

• Unani
• Siddha
Homeopathic
Acupressure and Acupuncture
• Diet and Nutrition
ChiropracticMedicine
Therapeutic Touch and Massage
• Yoga
• Pet Therapy

## **Practical** Hours

# **Total = 660**

## 1 Week = 30 Hours

S.No.	Area of Posting	No. of Week	Total Hours
1	Acute Psychiatric Ward	4	120 Hours
2	Chronic Psychiatric ward	4	120 Hours
3	Psychiatric Emergency Unit	2	60 Hours
4	O.P.D	2	60 Hours
5	Family Psychiatric Unit	2	60 Hours

6	Community Mental Health Unit	4	120 Hours
7	Rehabilitation / Occupational Therapy	4	120 Hours
	Unit/Half way home/ Day carecentre		
	Total	22 Weeks	660 Hours

## **Student Activities**

- Historytaking
- Mental healthassessment
- Psychometricassessment
- Personalityassessment
- Processrecording
- Therapies- GroupTherapy
- FamilyTherapy
- Psychotherapy
- MilieuTherapy
- The TherapeuticCommunity
- Occupationaltherapy
- Recreationaltherapy
- Playtherapy
- Musictherapy
- Pet therapy
- Counselling
- AssistedECT
- AssistedEEG
- Casestudies
- Casepresentation
- Projectwork
- Socio and psychodrama
- Fieldvisits

## **Reference Books:**

1. Brown R. T. Feldman G. R., Epilepsy -Diagnosis and Management, Little Brown And Co., 1983, Toronto.

2. Beck M. C. Rawtins P. R. and et al, Mental Health – Psychiatric Nursing. The C.V. Mosby Co., Ltd. 1984, Toronto.

- 3. Coleman C. J, Abnormal Psychology and Modern Life. P. B. Tara and Sons Co. Pvt Ltd. 1982.
- 4. Kaplan H. Saddock B, Synopsis of Psychiatry, William sand Wilkins, 1991, Bathmov.

5. Stuart W. G. Sundeen J. S, Principles and Practice of Psychiatric Nursing, Mosby Year book, 1991, London.

- 6. Taylor C.M., Essentials of Psychiatric Nursing, CV Mosby Co., 1982, London.
- 7. Bimlakapoor CV, A Text book of Psychiatric Nursing, Mosby Co., 1982, Delhi.
- 8. Shivas, "Basic Concept of Psychiatric Mental Health Nursing, B.I Publications, 1994.
- 9. Sreevani.R, A guide to mental health and Psychiatric nursing, 5<sup>th</sup> edition, published by Jaypee brothers.
- 10. verghese, Mary essentials of psychiatric 3<sup>rd</sup> edition

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

#### **Instruction for paper setter:**

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

#### FIRST YEAR ANNUAL EXAMINATION TO BE HELD IN THE YEAR 2021, 2022

# **CLASS:** M.SC NURSING 1<sup>ST</sup> YEAR

## **BRANCH:** COMMUNITY HEALTHNURSING

COURSE TITLE: CLINICAL SPECIALITY-I

COURSE CODE: MSCNUR108

#### **DURATION OF EXAMINATION: 3 HOURS**

HOURS OF INSTRUCTION THEORY: 150HOURS PRACTICAL: 650 HOURS TOTAL: 800 HOUR

#### **COURSE DESCRIPTION**

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

#### **COURSE OUTCOMES**

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

- 1. Appreciate the history and development in the field of Community Health and Community HealthNursing.
- 2. Appreciate role of individuals and families in promoting health of the Community.
- 3. Perform physical, developmental and nutritional assessment of individuals, families and groups.
- 4. Apply the concepts of promotive, preventive, curative and rehabilitative aspects of health while providing care to thepeople.
- 5. Applynursingprocessapproachwhileprovidingcaretoindividuals, families, groups and community.
- 6. Integrate the concepts of family centered nursing approach while providing care to the community.
- 7. Recognize and participate in the management of emergencies, epidemics and disasters.
- 8. Apply recent technologies and care modalities while delivering community health nursingcare.
- 9. Appreciate legal and ethical issues pertaining to community health

nursingcare.

- 10. Conduct community health nursing careprojects.
- 11. Participatein planning, implementation and evaluation of various national health and family welfare programmes at local, state and the nationallevel.
- 12. Incorporate evidence based nursing practice and identifythe areas of research in the communitysettings.
- 13. Participate effectively as a member of Community Healthteam.
- 14. Coordinate and collaborate with various agenciesoperating in the community by using inter-sectoralapproach.
- 15. Teach community health nursing to undergraduates, in-service nurses and the community healthworkers.
- 16. Demonstrate leadership and managerial abilities in community health nursingpractice

#### **Course Content**

Unit	Hours	Content
Ι	10	Introduction
		□ Historical development of Community Health and Community health
		Nursing- World and India, various health and family
		welfarecommittees
		Current status, trends and challenges of Community Health
		Nursing
		Health status of the Community-community diagnosis
		Scope of Community health Nursingpractice
		Ethical and legalissues
		Socio-cultural issues in Community healthNursing
		<ul> <li>National Policies, plans and programmes</li> </ul>
		National healthpolicy
		National Populationpolicy
		National Health and welfareProgrammes
		NationalHealthgoals/indicators/Millenniumdevelopmental
		goals(MDG)/Strategies
		Planning process: Five yearplans
		National Rural HealthMission
		Panchayat rajinstitutions

II	10	Health
11	10	
		□ Concepts,issues
		Determinants
		□ Measurements
		□ Alternate systems for health promotion and management of
		health problems
		□ Healtheconomics
		□ Healthtechnology
		$\Box$ Genetics and health
		□ Wastedisposal
		□ Ecosystem
	1 =	•
III	15	Population dynamics and control
		□ Demography
		Transition and theories of population
		National population policy
		National population programmes
		Population control and related programmes
		Methods of family limiting and spacing
		Research, Census, National Family HealthSurvey
Unit	Hours	Content
IV	30	Community health Nursing
IV	50	•
		De Philosophy, Aims, Objectives, Concepts, Scope, Principles,
		Functions
		Community health Nursing theories and models
		□ Quality assurance: Community health Nursing standards,
		competencies, Monitoring community health nursing, nursing audits
		<ul> <li>competencies, Monitoring community health nursing, nursing audits</li> <li>Family nursing and Family centered nursingapproach</li> </ul>
		competencies, Monitoring community health nursing, nursing audits
		<ul> <li>competencies, Monitoring community health nursing, nursing audits</li> <li>Family nursing and Family centered nursingapproach</li> <li>Family health nursingprocess</li> </ul>
		<ul> <li>competencies, Monitoring community health nursing, nursing audits</li> <li>Family nursing and Family centered nursingapproach</li> <li>Family health nursingprocess         <ul> <li>Family health hassessment</li> </ul> </li> </ul>
		<ul> <li>competencies, Monitoring community health nursing, nursing audits</li> <li>Family nursing and Family centered nursingapproach</li> <li>Family health nursingprocess         <ul> <li>Family health assessment</li> <li>Diagnosis</li> </ul> </li> </ul>
		<ul> <li>competencies, Monitoring community health nursing, nursing audits</li> <li>Family nursing and Family centered nursingapproach</li> <li>Family health nursingprocess         <ul> <li>Family health assessment</li> <li>Diagnosis</li> <li>Planning</li> </ul> </li> </ul>
		<ul> <li>competencies, Monitoring community health nursing, nursing audits</li> <li>Family nursing and Family centered nursingapproach</li> <li>Family health nursingprocess         <ul> <li>Family health assessment</li> <li>Diagnosis</li> <li>Planning</li> <li>Intervention</li> </ul> </li> </ul>
		<ul> <li>competencies, Monitoring community health nursing, nursing audits</li> <li>Family nursing and Family centered nursingapproach</li> <li>Family health nursingprocess         <ul> <li>Family health assessment</li> <li>Diagnosis</li> <li>Planning</li> </ul> </li> </ul>
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V	45	<ul> <li>competencies, Monitoring community health nursing, nursing audits</li> <li>Family nursing and Family centered nursingapproach</li> <li>Family health nursingprocess         <ul> <li>Family health nursingprocess</li> <li>Family health nursingprocess</li> <li>Family healthassessment</li> <li>Diagnosis</li> <li>Planning</li> <li>Intervention</li> <li>Evaluation</li> </ul> </li> <li>Nursing care for special groups: children, adolescents, adults, women, elderly, physically and mentally challenged- Urban and rural population atlarge</li> <li>Communitynutrition</li> <li>Concept, role and responsibilities of community health Nurse practitioners/nurse midwiferypractitioners-decision making skills, professionalism, legalissues</li> </ul> <li>Maternal and neonatal care         <ul> <li>IMNCI(Integrated Management of Neonatal And Childhood</li> </ul> </li>

VI	15	<ul> <li>Disaster nursing (INC module on Reaching out: Nursing Care in emergencies)</li> </ul>
VII	10	<ul> <li>Information, education and communication <ul> <li>IEC/BCC: Principles andstrategies</li> <li>CommunicationSkills</li> <li>Management information and evaluation system: Recordsand reports</li> <li>Informationtechnology</li> <li>Tele-medicine andtele-nursing</li> <li>Journalism</li> <li>Massmedia</li> <li>Folkmedia</li> </ul> </li> </ul>
VIII	15	<ul> <li>Health care delivery system: Urban, rural, tribal and difficult areas</li> <li>Healthorganization: National, State, District, CHC, PHC, Sub Centre, Village -Functions, Staffing, pattern of assistance, layout, drugs, equipments and supplies,Roles and Responsibilities of DPHNO</li> <li>Critical review of functioning of various levels, evaluation studies, recommendations and nursingperspectives</li> <li>Alternative systems of medicine</li> <li>Training and supervision of healthworkers</li> </ul>
		<ul> <li>Health agencies: NGO's, Roles andfunctions</li> <li>Inter-sectoral coordination</li> <li>Public private partnership</li> <li>Challenges of health care deliverysystem</li> </ul>

# Practical

#### Total = 660Hours 1 Week = 30 Hours

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

## **Student Activities**

- Identification of community leaders and resource persons(community mapping)
- Community healthsurvey
- Community health nursing process- individual, family and special groups and community
- Counseling

- Health education campaign, exhibition, folk media, preparation of IEC materials
- Organisingand participating in special clinics/camps and national health and welfare programmes-Organise atleast one health and family welfaremela/fair(allstallsofnationalhealthandfamilywelfareactivities should beincluded)
- Estimation of Vital health statistics-Exercise
- Drill for disaster preparedness
- Organise atleast one in-service education toANM's/LHV/PHN/HW
- Nutrition Exercise on nutritional assessment on dietary planning, demonstration and education for various agegroups
- Filling up of Records, reports and registers maintained atSC/PHC/CHC
- Assist women in self breastexamination
- Conduct antenatalexamination
- Conduct vaginalexamination
- ConductdeliveriesPost natalvisits
- Perform Episiotomy and suturing
- Prepare Papsmear
- Conduct Insertion/Removal ofIUD
- Blood Slidepreparation
- Fieldvisits
- Maintenance of log book for variousactivities

## **Reference Books:**

- 1. Clark, June & Jill Handerson, Community Health, Churchill Livingstone, 1993, New York.
- 2. Freeman B. Ruth, Public Health Practices, W. W. Saunders CO., 1990, Philadelphia.
- 3. Fromer Joan Margot, Community Health Care and the Nursing Process, C.VMosby CO., Toronto.
- 4. K. Park, Text Book of Preventive and Social Medicine, Ms Banarsidas Bhanot CO., 1996, Jabalpur.
- 5. Rao S. Kasthuri, An Introduction to Community Health Nursing, B. I. Publishers, Madras.
- 6. Bijayalakshmi Dash, A Comprehensive text book of Community Health Nursing, Jaypee Publications, 2017.
- 7. Suryakanta, AH, Community Medicine with Recent Advances, Jaypee Publshers, New Delhi.
- 8. BT, Basavanthappa, Community Health Nursing, Jaypee Publshers, New Delhi.

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

#### Instruction for paper setter:

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

Second year Annual Examination to be held in the year 2022, 2023

## CLASS: M.SC NURSING 2<sup>ND</sup> YEAR

## **BRANCH:** COMMON TO ALL BRANCHES

## **COURSE TITLE:** NURSING MANAGEMENT

## **COURSE CODE: MSCNUR201**

#### **DURATION OF EXAMINATION: 3 HOURS**

#### **HOURS OF INSTRUCTION:**

**THEORY:** 150 HOURS **PRACTICAL:** 150 HOURS **TOTAL:** 300 HOURS

#### **Course Description**

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

#### **Course Outcomes**

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

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

## **Course Content**

Unit	Hours	Content	
Ι	10	<ul> <li>Introduction</li> <li>Philosophy, purpose, elements, principles and scope of administration</li> <li>Indian Constitution, Indian Administrative system vis a vis health care delivery system: National, State and Local</li> <li>Organisation and functions of nursing services and education at National, State, Districtandinstitutions: Hospital and Community</li> <li>Planning process: Five year plans, Various Committee Reports on health, State and National Health policies, national population policy, national policy on AYUSH and plans,</li> </ul>	
Π	10	Management         □       Functions of administration         □       Planning and control         □       Co-ordination and delegation         □       Decision making – decentralization basic goals of decentralization.         □       Decision making – decentralization basic goals of decentralization.         □       Concept of management         □       Concept, types, principles and techniques         □       Vision and Mission Statements         □       Philosophy, aims and objective         □       Current trends and issues in Nursing Administration         □       Theories and models         Application to nursing service and education	
III	15	Planning         □       Planning process: Concept, Principles, Institutional policies         □       Mission, philosophy, objectives,         □       Strategic planning         □       Operational plans         □       Management plans         □       Programme evaluation and review technique(PERT), Gantt chart, Management by objectives(MBO)         □       Planning new venture         □       Planning for change         □       Innovations in nursing         Application to nursing service and education	

IV	15	Organisation
	15	<ul> <li>Concept, principles, objectives, Types and theories, Minimum requirements for organisation, Developing an organizational Structure, levels, organizational Effectiveness and organizational Climate,</li> <li>Organising nursing services and patient care: Methods of patient assignment- Advantages and disadvantages, primary nursingcare,</li> <li>Planning and Organising: hospital, unit and ancillary services(specifically central sterile supply department, laundry, kitchen, laboratory services, emergency etc)</li> <li>Disaster management: plan, resources, drill, etc Application to nursing service and education</li> </ul>
V	15	Human Resource for health
	13	<ul> <li>Staffing <ul> <li>Philosophy</li> <li>Norms: Staff inspection unit(SIU), Bajaj Committee, High power committee, Indian nursing council (INC)</li> <li>Estimation of nursing staff requirement- activity analysis</li> <li>Various research studies</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> </li> <li>Applications to nursing service and education</li> </ul>
VI	15	<ul> <li>Directing <ul> <li>Roles and functions</li> <li>Motivation: Intrinsic, extrinsic, Creating motivating climate,</li> <li>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 conflict: 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</li> </ul> </li> </ul>

VII	10	Material management
V 11	10	
		<ul> <li>Planning and procurement procedures : Specifications</li> </ul>
		□ ABC analysis,
		□ VED (very important and essential daily use) analysis
		Planning equipments and supplies for nursing care: unit and
		hospital
		□ Inventory control
		□ Condemnation
		Application to nursing service and education
VIII	15	Controlling
		Quality assurance – Continuous Quality Improvement
		• Standards
		Models
		Nursing audit
		<ul> <li>Performance appraisal: Tools, confidential reports, formats,</li> </ul>
		Management, interviews
		Supervision and management: concepts and principles
		<ul> <li>Discipline: service rules, self discipline, constructive versus</li> </ul>
		destructive discipline, problem employees, disciplinary proceedings- enquiry
		etc
		□ Self evaluation or peer evaluation, patient satisfaction, utilization
		review
		Application to nursing service and education
IX	15	Fiscal planning
		□ Steps
		□ Plan and non-plan, zero budgeting, mid-term appraisal, capital and
		revenue
		<ul> <li>Budget estimate, revised estimate, performance budget</li> </ul>
		Audit     Cost offectiveness
		□ Cost effectiveness
		□ Cost accounting
		Critical pathways
		□ Health care reforms
		□ Health economics
		□ Health insurance
		<ul> <li>Budgeting for various units and levels</li> </ul>
		Application to nursing service and education

X	10	Nursing informatics
21	10	$\Box$ Trends
		□ General purpose
		<ul> <li>Patient record system</li> </ul>
		<ul> <li>Nursing records and reports</li> <li>Management information and exclassion restore (MIES)</li> </ul>
		□ Management information and evaluation system (MIES)
		E- nursing, Telemedicine, telenursing
		Electronic medical records
	10	
XI	10	Leadership Concents Types Theories
		<ul> <li>Concepts, Types, Theories</li> </ul>
		□ Styles
		□ Manager behaviour
		□ Leader behaviour
		Effective leader: Characteristics, skills
		□ Group dynamics
		□ Power and politics
		□ lobbying
		Critical thinking and decision making
		□ Stress management
		Applications to nursing service and education
XII	10	Legal and ethical issues
		Laws and ethics
		□ Ethical committee
		□ Code of ethics and professional conduct
		□ Legal system: Types of law, tort law, and liabilities
		□ Legal issues in nursing: negligence, malpractice, invasion of privacy,
		defamation of character
		Patient care issues, management issues, employment issues
		□ Medico legal issues
		□ Nursing regulatory mechanisms: licensure, renewal, accreditation
		□ Patients rights, Consumer protection act(CPA)
		□ Rights of special groups: children, women, HIV, handicap, ageing
		<ul> <li>Professional responsibility and accountability</li> </ul>
		□ Infection control
		<ul> <li>Standard safety measures</li> </ul>

## PRACTICALS

- 1. Prepare prototype personal files for staff nurses, faculty and cumulative records
- 2. Preparation of budget estimate, Revised estimate and performance budget
- 3. Plan and conduct staff development programme
- 4. Preparation of Organisation Chart
- 5. Developing nursing standards/protocols for various units
- 6. Design a layout plan for speciality units /hospital, community and educational institutions
- 7. Preparation of job description of various categories of nursing personnel
- 8. Prepare a list of equipments and supplies for 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 reports, nurse's notes, Official letters, curriculum vitae, presentations etc.
- 16. Prepare a plan for disaster management
- 17. Group work
- 18. Field appraisal report

## **Reference Books:**

- 1. Nursing administration and management, Trained Nurses Association of India, 1<sup>ST</sup> edition, 2007.
- 2. D.C. Joshi, Mmta Joshi, Hospital administration, Jaypee publications, 2009.
- 3. Joginder Vati, Principles and practice of Nursing management & Administration, Jaypee publications, 2013.
- 4. Jagannah Mohanty, Educational administration, supervision & school management, 2<sup>nd</sup> edition, Deep and deep publications.
- 5. BT Basavanthappa, Nursing Administration, 3<sup>rd</sup> edition, Jaypee publications, 2014.
- 6. Alamelu Venkatraman, Newer trends in management of nursing services and education, Jaypee publications, 2017.
- 7. N.N. Yalayyaswamy, ward management and supervision and professional adjustments and trends for nurses in India, CBS publications, 2009.

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

## **Instruction for paper setter:**

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question

Second year Annual Examination to be held in the year 2022, 2023

CLASS: M.SC NURSING 2<sup>ND</sup> YEAR

## **BRANCH:** CARDIO VASCULAR & THORACIC NURSING

## COURSE TITLE: MEDICAL SURGICAL NURSING

(CLINICAL SPECIALITY II)

#### **COURSE CODE: MSCNUR203**

#### **DURATION OF EXAMINATION: 3 HOURS**

#### **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 cardiovascular and thoracic nursing. It will help students to develop advanced skills for nursing intervention in various cardio medical and surgical conditions. It will enable the student to function as Cardio vascular and Thoracic Nurse practitioner/specialist. It will further enable the student to function as educator, manager and researcher in the field of cardio vascular and thoracic nursing.

#### **Course Outcome**

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

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

## Second Year Annual Examination to be held in the year 2022, 2023 COURSE TITLE: MEDICAL SURGICAL NURSING (CARDIO VASCULAR & THORACIC NURSING) COURSE CODE: MSCNUR203

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

## **CONTENT OUTLINE**

Unit	Hours	Content
I	5	<ul> <li>Introduction         <ul> <li>Historical development, trends and issues in the field of cardiology.</li> <li>Cardio vascular and thoracic conditions – major health problem.</li> <li>Concepts, principles and nursing perspectives</li> <li>Ethical and legal issues</li> <li>Evidence based nursing and its application in cardio vascular and thoracic nursing( to be incorporated in all the units)</li> </ul> </li> </ul>
II	5	<ul> <li>Epidemiology</li> <li>Risk factors: hereditary, psycho social factors, hypertension, smoking, obesity, diabetes mellitus etc</li> <li>Health promotion, disease prevention, Life style modification</li> <li>National health programs related to cardio vascular and thoracic conditions</li> <li>Alternate system of medicine</li> <li>Complementary therapies</li> </ul>

## Second Year Annual Examination to be held in the year 2022, 2023 COURSE TITLE: MEDICAL SURGICAL NURSING (CARDIO VASCULAR & THORACIC NURSING) COURSE CODE: MSCNUR203

III	5	Review of anatomy and physiology of cardio vascular and
		respiratory system
		□ Review of anatomy and physiology of heart, lung, thoracic cavity and
		blood vessels. Embryology of heart and lung.
		□ Coronary circulation
		Hemodynamics and electro physiology of heart.
		<ul> <li>Bio-chemistry of blood in relation to cardio pulmonary function.</li> </ul>

## Second Year Annual Examination to be held in the year 2022, 2023 COURSE TITLE: MEDICAL SURGICAL NURSING (CARDIO VASCULAR & THORACIC NURSING) COURSE CODE: MSCNUR203

TT7	20	Aggagement and Diagnostic Maggurage
IV	20	Assessment and Diagnostic Measures:
		<ul> <li>History taking</li> <li>Physical assessment</li> </ul>
		• Heart rate variability: Mechanisms, measurements, pattern, factors,
		impact of interventions on HRV
		Diagnostic tests
		Hemodynamic monitoring: Technical aspects, monitoring,
		functional hemodynamic indices, ventricular function indices, output
		measurements (Arterial and swan Ganz monitoring).
		Blood gases and its significance, oxygen supply and demand
		• Radiologic examination of the chest: interpretation, chest film findings
		• Electro cardiography(ECG) : electrical conduction through the heart, basic
		electrocardiography, 12 lead electrocardiogram, axis determination
		- ECG changes in: intraventricular conduction abnormalities- Arrhythmias,
		ischemia, injury and infarction, atrial and ventricular enlargement,
		electrolyte imbalance,
		• Echocardiography: technical aspects, special techniques, echocardiography
		of cardiac structures in health and disease, newer techniques
		• Nuclear and other imaging studies of the heart: Magnetic Resonance
		Imaging.
		Cardio electrophysiology procedures: diagnostic studies, interventional and
		catheter ablation, nursing care
		• Exercise testing: indications and objectives, safety and personnel, pretest
		considerations, selection, interpretation, test termination, recovery period
		Cardiac catheterization: indications, contraindications, patient
		preparation, procedure, interpretation of data
		Pulmonary function test: Bronchoscopy and graphies
		Interpretation of diagnostic measures
		Nurse's role in diagnostic tests
		□ Laboratory tests using blood: Blood specimen collection, Cardiac markers,
		Blood lipids, Hematologic studies, Blood cultures, Coagulation studies,
		Arterial blood gases, Blood Chemistries, cardiac enzyme studies, Serum
		Concentration of Selected drugs.
		Interpretation and role of nurse

V	25	Cardiac disorders and nursing management:				
•	23	🗆 Etiology, clinical manifestations, diagnosis, prognosis, related				
		pathophysiology, treatment modalities and nursing management of:				
		• Hypertension				
		Coronary Artery Disease.				
		Angina of various types.				
		Cardiomegaly				
		Myocardial Infarction, Congestive cardiac failure				
		Heart Failure, Pulmonary Edema, Shock.				
		Rheumatic heart disease and other Valvular Diseases				
		• Inflammatory Heart Diseases, Infective Endocarditis, Myocarditis, Pericarditis.				
		Cardiomyopathy, dilated, restrictive, hypertrophic.				
		<ul> <li>Arrhythmias, heart block</li> </ul>				
		i i i i i i i i i i i i i i i i i i i				
		Associated illnesses				
VI	10	Altered pulmonary conditions				
	10	<ul> <li>Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, treatment modalities and nursing management of:</li> <li>Bronchitis</li> </ul>				
		Bronchial asthma				
		Bronchiectasis				
		• Pneumonias				
		Lung abscess, lung tumour				
		Pulmonary tuberculosis, fibrosis, pneumoconiosis etc				
		Pleuritis, effusion				
		Pneumo, haemo and pyothorax				
		Interstitial Lung Disease				
		Cystic fibrosis				
		Acute and Chronic obstructive pulmonary disease (conditions leading				
		to)				
		Cor pulmonale				
		Acute respiratory failure				
		<ul> <li>Adult respiratory distress syndrome</li> </ul>				
		<ul> <li>Pulmonary embolism</li> </ul>				
		<ul> <li>Pulmonary Hypertension</li> </ul>				

VII	10	<ul> <li>Vascular disorders and nursing management</li> <li>Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, treatment modalities and nursing management of:</li> <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>Varicose veins</li> <li>Chronic venous insufficiency and venous leg ulcers</li> <li>Pulmonary embolism</li> </ul>
VIII	10	<ul> <li>Cardio thoracic emergency interventions</li> <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 aspects of care</li> <li>Stress management; ICU psychosis</li> <li>Role of nurse</li> </ul>
		<ul> <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> <li>Oxygen delivery systems.</li> <li>Nasal Cannula</li> </ul>
		<ul> <li>Oxygen mask, Venturimask</li> <li>Partial rebreathing bag</li> <li>Bi-PAP and C-PAP masks</li> <li>Uses, advantages, disadvantages, nursing implications of each.</li> <li>Mechanical Ventilation</li> </ul>
		<ul> <li>Principles of mechanical ventilation</li> <li>Types of mechanical ventilation and ventilators.</li> <li>Modes of ventilation, advantage, disadvantage, complications.</li> <li>PEEP therapy, indications, physiology, and complications. Weaning off the ventilator.</li> <li>Nursing assessment and interventions of ventilated patient.</li> </ul>

10	Congenital Heart Diseases,
	Etiology, clinical manifestations, diagnois, prognosis, related
	pathophysiology, treatment modalities and nursing management of:
	Embryological development of heart.
	Classification – cyanotic and acyanotic heartdisease.
	• Tetralogy of Fallots.
	Atrial Septal Defect, Ventricular Septal Defect., Eisenmenger's
	complex.
	Patent ductus arteriosus, AP window
	Truncus Arteriosus.
	Transposition of great arteries.
	Total Anomaly of Pulmonary Venous Connection.
	Pulmonary stenosis, atresia.
	Coarctation of aorta.
	• Ebstein's anomaly
	• Double outlet right ventricle, Single ventricle, Hypoplastic left heart
	syndrome.
10	Pharmacology
_	□ Review
	□ Pharmacokinetics
	Analgesics/Anti inflammatory agents
	□ Antibiotics, antiseptics
	□ Drug reaction & toxicity
	Drugs used in cardiac emergencies
	□ Blood and blood components
	Antithrombolytic agents
	Inotropic agents
	Beta-blocking agents
	Calcium channel blockers.
	Vaso constrictors
	Vaso dilators
	• ACE inhibitors.
	Anticoagulents
	Antiarrhythmic drugs.
	<ul> <li>Anti hypertensives</li> </ul>
	<ul> <li>Diuretics</li> </ul>
	<ul><li>Sedatives and tranquilizers.</li></ul>
	<ul><li>Digitalis.</li></ul>
	-
	• • Principles of drug administration, role and responsibilities of nurses and care of drugs
	10

XII	20	Nursing Care of patient undergoing cardio thoracic surgery	
		<ul> <li>Indications, selection of patient</li> <li>Preoperative assessment and preparation; counselling.</li> </ul>	
		□ Intraoperative care: Principles of open heart surgery, equipment,	
		anaesthesia, cardiopulmonary by pass.	
		<ul> <li>Surgical procedures for Coronary Artery Bypass Grafting, recent advances a types of grafts, Valve replacement or reconstruction, cardiac transplant, Palliat surgery and different Stents, vascular surgery, other recent advances.</li> <li>Thoracic surgery: lobectomy, pneumonectomy, tumour excisionetc</li> <li>Immediate postoperative care : assessment, post operative problems a interventions : Bleeding, Cardiac tamponade, Low cardiac output, Infarcti Pericardial effusion, Pleural effusion, Pneumothorax, Haemothor Coagulopathy, Thermal imbalance, Inadequate., ventilation/perfusi Neurological problems, renal problems, Psychological problems.</li> <li>Chest physiotherapy</li> <li>Nursing interventions- life style modification, complementary therapy/alternative systems of medicine.</li> </ul>	
		<ul> <li>Intermediate and late post operative care after CABG, valve surgery, others.</li> </ul>	
		Fellow up care	
		Follow up care	
VIII	_		
XIII	5	Cardiac rehabilitation	
АШ	5	□ Process	
	5	<ul> <li>Process</li> <li>Physical evaluation</li> </ul>	
	5	<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> </ul>	
	5	<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> </ul>	
	5	<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> <li>Counseling</li> </ul>	
хш	5	<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> </ul>	
XIII XIV	5	<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> <li>Counseling</li> <li>Follow up care</li> </ul> Intensive Coronary Care Unit/intensive cardio thoracic unit:	
		<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> <li>Counseling</li> <li>Follow up care</li> </ul> Intensive Coronary Care Unit/intensive cardio thoracic unit: <ul> <li>Quality assurance</li> </ul>	
		<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> <li>Counseling</li> <li>Follow up care</li> </ul> Intensive Coronary Care Unit/intensive cardio thoracic unit: <ul> <li>Quality assurance</li> <li>Standards, Protocols, Policies, Procedures</li> </ul>	
		<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> <li>Counseling</li> <li>Follow up care</li> </ul> Intensive Coronary Care Unit/intensive cardio thoracic unit: <ul> <li>Quality assurance</li> <li>Standards, Protocols, Policies, Procedures</li> <li>Infection control; Standard safety measures</li> </ul>	
		<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> <li>Counseling</li> <li>Follow up care</li> </ul> Intensive Coronary Care Unit/intensive cardio thoracic unit: <ul> <li>Quality assurance</li> <li>Standards, Protocols, Policies, Procedures</li> <li>Infection control; Standard safety measures</li> <li>Nursing audit</li> </ul>	
		<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> <li>Counseling</li> <li>Follow up care</li> </ul> Intensive Coronary Care Unit/intensive cardio thoracic unit: <ul> <li>Quality assurance</li> <li>Standards, Protocols, Policies, Procedures</li> <li>Infection control; Standard safety measures</li> <li>Nursing audit</li> <li>Design of ICCU/ICTU</li> </ul>	
		<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> <li>Counseling</li> <li>Follow up care</li> </ul> Intensive Coronary Care Unit/intensive cardio thoracic unit: <ul> <li>Quality assurance</li> <li>Standards, Protocols, Policies, Procedures</li> <li>Infection control; Standard safety measures</li> <li>Nursing audit</li> <li>Design of ICCU/ICTU</li> <li>Staffing; cardiac team</li> </ul>	
		<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> <li>Counseling</li> <li>Follow up care</li> </ul> Intensive Coronary Care Unit/intensive cardio thoracic unit: <ul> <li>Quality assurance</li> <li>Standards, Protocols, Policies, Procedures</li> <li>Infection control; Standard safety measures</li> <li>Nursing audit</li> <li>Design of ICCU/ICTU</li> <li>Staffing; cardiac team</li> <li>Burn out syndrome</li> </ul>	
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		<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> <li>Counseling</li> <li>Follow up care</li> </ul> Intensive Coronary Care Unit/intensive cardio thoracic unit: <ul> <li>Quality assurance</li> <li>Standards, Protocols, Policies, Procedures</li> <li>Infection control; Standard safety measures</li> <li>Nursing audit</li> <li>Design of ICCU/ICTU</li> <li>Staffing; cardiac team</li> <li>Burn out syndrome</li> <li>Nurse's role in the management of I.C.C.U and ICTU.</li> <li>Mobile coronary care unit.</li> </ul>	
		<ul> <li>Process</li> <li>Physical evaluation</li> <li>Life style modification</li> <li>Physical conditioning for cardiovascular efficiency through exercise</li> <li>Counseling</li> <li>Follow up care</li> </ul> Intensive Coronary Care Unit/intensive cardio thoracic unit: <ul> <li>Quality assurance</li> <li>Standards, Protocols, Policies, Procedures</li> <li>Infection control; Standard safety measures</li> <li>Nursing audit</li> <li>Design of ICCU/ICTU</li> <li>Staffing; cardiac team</li> <li>Burn out syndrome</li> <li>Nurse's role in the management of I.C.C.U and ICTU.</li> </ul>	

## **Practicals**

#### Total – 960 Hours 1 Weeks = 30 Hours

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

## **Essential Nursing Skills Procedures Observed**

- 1. Echo cardiogram
- 2. Ultrasound
- 3. Monitoring JVP , CVP
- 4. CT SCAN
- 5. MRI
- 6. Pet SCAN
- 7. Angiography

- 8. Cardiac cathetrisation
- 9. Angioplasty
- 10. Various Surgeries
- 11. Any other

### I. Procedures Assisted

- 1. Arterial blood gas analysis
- 2. Thoracentesis
- 3. Lung biopsy
- 4. Computer assisted tomography (CAT Scan)
- 5. M.R.I.
- 6. Pulmonary angiography
- 7. Bronchoscopy
- 8. Pulmonary function test
- 9. ET tube insertion
- 10. Tracheostomy tube insertion
- 11. Cardiac catheterisation
- 12. Angiogram
- 13. Defibrillation
- 14. Treadmill test
- 15. Echo cardiography
- 16. Doppler ultrasound
- 17. Cardiac surgery
- 18. Insertion of chest tube
- 19. CVP Monitoring
- 20. Measuring pulmonary artery pressure by Swan-Ganz Catheter
- 21. Cardiac Pacing

### **II.** Procedures Performed

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

Catheter, nasal canula, mask, tent Through ET and Tracheostomy tube Manual resuscitation bag 4. Mechanical ventilation

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

Percussion & Vibration

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

- 15. Identification of different Arrhythmias Abnormal pulses, respirations
- 16. Pulse oxymetry
- 17. Introduction of intracath
- 18. Bolus I.V. Injection
- 19. Life line
- 20. Maintenance of "Heplock"
- 21. Subcutaneous of Heparin
- 22. Obtaining leg measurements to detect early swelling in thrombophlebetes
- 23. Identification of Homans signs
- 24. Buergen Allen exercises

#### **Reference Books:**

- 1. B. Venkatasan, Textbook of cardiothoracic Nursing, 1<sup>st</sup> edition, Jaypee publications, 2017.
- 2. P. Hariprasath, Text book of cardio vascular Nursing, 1<sup>st</sup> edition, Jaypee publications, 2016.
- 3. Raj & Rajan GV, Essentials of cardio vascular Nursing, 1 edition, Jaypee publications, 2016.
- 4. Wong & Malik, Diabetes and cardiovascular disease, 1<sup>st</sup> edition, Jaypee publications, 2015.
- 5. Reena George, Textbook of cardiac nursing, 1<sup>st</sup> edition, Jaypee publications, 2017.
- 6. Pradip K Deb, CSI Textbook of cardiology, 1<sup>st</sup> edition, Jaypee, 2019.
- 7. London, Cardiology- An illustrated textbook, 2 volumes, 2<sup>nd</sup> edition, Jaypee, 2019.
- 8. Nicola Sharon Ambros, Textbook of comprehensive cardiology for nurses, Jaypee, 2019.

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

#### Instruction for paper setter:

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question

Second year annual examination to be held in the year 2022, 2023

**CLASS:** M.SC NURSING 2<sup>ND</sup> YEAR

### **BRANCH:** CRITICAL CARE NURSING

### COURSE TITLE: MEDICAL SURGICAL NURSING (CLINICAL SPECIALITY II)

### **COURSE CODE: MSCNUR204**

### **DURATION OF EXAMINATION: 3 HOURS**

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

#### **COURSE OUTCOMES**

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

- 1. Appreciate trends and issues related to Critical Care Nursing.
- 2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of critically ill patients
- 3. Describe the various drugs used in critical care and nurses responsibility
- 4. Perform physical, psychosocial & spiritual assessment
- 5. Demonstrate advance skills/competence in managing critically ill patients including Advance Cardiac Life Support.
- 6. Demonstrate skill in handling various equipments/gadgets used for critical care
- 7. Provide comprehensive care to critically ill patients.
- 8. Appreciate team work & coordinate activities related to patient care.
- 9. Practice infection control measures.
- 10. Assess and manage pain .
- 11. Identify complications & take appropriate measures.
- 12. Discuss the legal and ethical issues in critical care nursing

- 13. Assist patients and their family to cope with emotional distress, spiritual, grief and anxiety
- 14. Assist in various diagnostic, therapeutic and surgical procedures
- 15. Incorporate evidence based nursing practice and identify the areas of research in the field of critical care nursing
- 16. Identify the sources of stress and manage burnout syndrome among health care providers.
- 17. Teach and supervise nurses and allied health workers.
- 18. Design a layout of ICU and develop standards for critical care nursing practice.

#### **Course Content**

Unit	Hours	Content	
Ι	5	<ul> <li>Introduction to Critical Care Nursing <ul> <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 &amp; ventilators</li> <li>Flow sheets</li> </ul> </li> </ul>	
II	10	<ul> <li>Concept of Holistic care applied to critical care nursing practice</li> <li>Impact of critical care environment on patients:-         <ul> <li>Risk factors, Assessment of patients, Critical care psychosis prevention &amp; nursing care for patients affected wit psychophysiological &amp; psychosocial problems of critical care uni Caring for the patient's family, family teaching</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> </li> </ul>	

III	14	Review			
		□ Pharmacokinetics			
		Analgesics/Anti inflammatory agents			
		□ Antibiotics, antiseptics			
		Drug reaction & toxicity			
		<ul> <li>Drugs used in critical care unit (inclusive of ionotropic, life saving</li> </ul>			
		drugs)			
		Drugs used in various body systems			
		□ IV fluids and electrolytes			
		Blood and blood components			
		□ Principles of drug administration, role of nurses and care of drugs			
IV	5	Pain Management			
		Pain & Sedation in Critically ill patients			
		□ Theories of pain, Types of pain, Pain assessment, Systemic responses to			
		pain			
		pain management-pharmacological and non-pharmacological			
		measures			
		□ Placebo effect			
V	5	Infection control in intensive care unit			
		□ Nosocomial infection in intensive care unit; methyl resistant			
		staphylococcus aureus (MRSA), Disinfection, Sterilization, Standard			
		safety measures, Prophylaxis for staff			
VI	10	Gastrointestinal System			
		□ Causes, Pathophysiology, Clinical types, Clinical features, diagnosis,			
		Prognosis, Management: Medical, Surgical and Nursing management			
		of:-Acute Gastrointestinal Bleeding, Abdominal injury, Hepatic			
		Disorders:-Fulminent hepatic failure, Hepatic encephalopathy, Acute			
		Pancreatitis, Acute intestinal obstruction, perforative peritonitis			
VII	10	Renal System			
		□ Causes, pathophysiology, Clinical types, Clinical features, diagnosis,			
		Prognosis, Management: Medical, Surgical and Nursing management			
		of:-Acute Renal Failure, Chronic Renal Failure, Acute tubular necrosis,			
		Bladder trauma			
		Management Modalities: Hemodialysis, Peritoneal Dialysis, Continuous			
		Ambulatory Peritoneal Dialysis, Continuous arterio venus			
		hemodialysis, Renal Transplant,			
	1				

VIII	10	Nervous System		
		<ul> <li>Causes, pathophysiology, Clinical types,Clinical features, diagnor Prognosis, Management: Medical, Surgical and Nursing managem of:-Common Neurological Disorders:-Cerebrovascular dise Cerebrovascular accident, Seizure disorders, GuilleinBarre-Syndror Myasthenia Gravis, Coma, Persistent vegetative state, Encephalopa Head injury, Spinal Cord injury</li> <li>Management Modalities: Assessment of Intracranial press Management of intracranial hypertension, Craniotomy</li> <li>Problems associated with neurological disorders: Thermo regulat Unconsciousness, Herniation syndrome</li> </ul>		
IX	5	Endocrine System		
	-	□ Causes, Pathophysiology, Clinical types, Clinical features, diagnosis,		
		Prognosis, Management: Medical, Surgical and Nursing Management		
		of :-Hypoglycemia, Diabetic Ketoacidosis, Thyroid crisis,		
		Myxoedema, Adrenal crisis, Syndrome of Inappropriate/		
		hypersecretion of Antidiuretic Hormone (SIADH)		
X	15	Management of other Emergency Conditions		
		□ Mechanism of injury, Thoracic injuries, Abdominal injuries, pelvic		
		fractures, complications of trauma, Head injuries		
		<ul> <li>Shock: Shock syndrome, Hypovolemic, Cardiogenic, Anaphylactic, Neurogenic and Septic shock</li> </ul>		
		□ Systemic inflammatory Response: The inflammatory response, Multiple		
		organ dysfunction syndrome		
		<ul> <li>Disseminated Intravascular Coagulation</li> </ul>		
		Drug Overdose and Poisoning,		
		<ul> <li>Acquired Immunodeficiency Syndrome (AIDS)</li> <li>Orbithalmia: Eva injurias, Clausana, natinal data almont</li> </ul>		
		<ul> <li>Ophthalmic: Eye injuries, Glaucoma, retinal detachment</li> <li>Ear Nose Throat: Foreign bodies, stridor, bleeding, quincy, acute</li> </ul>		
		Ear Nose Throat: Foreign bodies, stridor, bleeding, quincy, acute allergic conditions		
		<ul> <li>Psychiatric emergencies;, suicide,</li> </ul>		
		$\Box$ crisis intervention		

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

Unit	Hours	Content		
<ul> <li>assessment, diagnosis, prognosis,</li> <li>Nursing management of burns</li> <li>Fluid and electrolyte therapy – cal administration</li> <li>Pain management</li> <li>Wound care</li> <li>Infection control</li> </ul>		<ul> <li>Clinical types, classification, pathophysiology, clinical features, assessment, diagnosis, prognosis, Management: Medical, Surgical &amp; 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> </ul>		
XIV	5	Obstetrical Emergencies         □ Causes, Pathophysiology, Clinical types, clinical features, diagnostic         Prognosis, Management: Medical, Surgical and Nursing management o         :Antepartum haemorrhage, Preeclampsia, eclampsia, Obstructed labour         and ruptured uterus, Post partum haemorrhage, Peurperal sepsis,         Obstetrical shock		
XV	10	<ul> <li>Neonatal Paediatric emergencies</li> <li>Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and Nursing management of         <ul> <li>Neonatal emergencies</li> <li>Asphyxia Neonatarum, Pathological Jaundice in Neonates, Neonatal seizures, Metabolic disorders, Intra cranial Hemorrhage, Neonatal Sepsis, RDS/HMD (Respiratory Distress Syndrome/Hyaline Membrane Disease), Congenital disorders:-</li> <li>Cyanotic heart disease, tracheo oesophageal fistula, congenital hypertropic pyloric stenosis, imperforate anus</li> <li>Pediatric emergencies</li> <li>Dehydration, Acute broncho pneumonia, Acute respiratory distress syndrome, Poisoning, Foreign bodies, seizures, traumas, Status asthmaticus</li> </ul> </li> </ul>		
XVI	2	Legal and ethical issues in critical care-Nurse's role         □       Brain death         □       Organ donation & Counselling         □       Do Not Resuscitate(DNR)         □       Euthanasia         □       Living will		

XVII	2	Quality assurance
		□ Standards, Protocols, Policies, Procedures
		□ Infection control; Standard safety measures
		□ Nursing audit
		□ Staffing
		$\square$ Design of ICU/CCU

**Practical:** 

Total = 960 Hours 1 Week = 30 Hours

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

### ESSENTIAL CRITICAL CARE NURSING SKILLS

### I. Procedures Observed

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

### **II.** Procedures Assisted

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

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

### **III.** Procedure Performed

- 1. Airway management
- a. Application of oropharyngeal airway
- b. Oxygen therapy
- c. CPAP (Continuous Positive Airway pressure)
- d. Care of tracheostomy
- e. Endotracheal extubation
- 2. Cardiopulmonary resuscitation, Basic cardiac life support, ECG

3. Monitoring of critically ill patients – clinically with monitors, capillary refill time (CRT) assessment of jaundice, ECG.

- 4. Gastric lavage
- 5. Assessment of critically ill patients

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

6. Admission & discharge of critically ill patients

7. Nutritional needs – gastrostomy feeds, pharyngeal feeds, jejunostomy feeds, TPN, formula preparation & patient education.

8. Assessment of patient for alteration in blood sugar levels monitoring blood sugar levels periodically & administering insulin periodically.

9. Administration of drugs: IM, IV injection, IV cannulation & fixation of infusion pump, calculation of dosages, use of insulin syringes/ tuberculin, monitoring fluid therapy, blood administration.

10. Setting up dialysis machine and starting, monitoring and closing dialysis

11. Procedures for prevention of infections:

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

12. Collection of specimen.

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

### **Reference Books:**

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

- 2. Jaya Kuruvilla, Essential of critical care nursing, jaypee publications, 2008.
- Simon, Critical care nursing: practice guide, 2<sup>nd</sup> edition, jaypee, 2017.
- 4. Richhariya, Textbook of emergeny and trauma care, 1<sup>st</sup> edition, jaypee, 2018.
- 5. Gowda & Gowda, Advanced critical in Medical Surgical & Neonatal Nursing, 1<sup>st</sup> edition, 2017.
- 6. Farokh Erach Udwaida, Principles of critical care, 3<sup>rd</sup> edition, 2014.
- 7. Todi et al, Critical care update 2018, 1<sup>st</sup> edition, 2018.
- 8. Good, Advanced critical care nursing, 2<sup>nd</sup> edition, Elsevier, 2017.
- 9. Sole, introduction to critical care nursing, 7<sup>th</sup> edition, Elsevier publications, 2016.

#### Instruction for paper setter:

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question

Second year Annual Examination to be held in the year 2022, 2023

**CLASS:** M.SC NURSING 2<sup>ND</sup> YEAR

### **BRANCH:** ONCOLOGY NURSING

### COURSE TITLE: MEDICAL SURGICAL NURSING

COURSE CODE: MSCNUR205

### **DURATION OF EXAMINATION: 3 HOURS**

### **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

### **COURSE OUTCOMES**

- 1. Explain the prevention, screening and early detection of cancer
- 2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of oncological disorders of various body systems
- 3. Describe the psychosocial effects of cancer on patients and families.
- 4. Demonstrate skill in administering/assisting in various treatment modalities used for patients with cancer
- 5. Apply nursing process in providing holistic care to patients with cancer.
- 6. Apply specific concepts of pain management
- 7. Appreciate the care of death and dying patients and value of bereavement support.
- 8. Describe the philosophy, concept and various dimensions of palliative care
- 9. Appreciate the role of alternative systems of medicine in care of cancer patients
- 10. Appreciate the legal & ethical issues relevant to oncology nursing

- 11. Recognize and manage Oncological emergencies
- 12. Counsel the patients with cancer and their families
- 13. Incorporate evidence based nursing practice and identify the areas of research in the field of oncology nursing
- 14. Recognize the role of oncology nurse practitioner as a member of oncology team
- 15. Collaborate with other agencies and utilize resources in caring for cancer patients.
- 16. Teach and supervise nurses and allied health workers.
- 17. Design a layout and develop standards for management of oncology units/hospitals and nursing care.

#### **Content outline**

Unit	Hours.	Content	
Ι	4	<ul> <li>Introduction</li> <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>	
Π	5	<ul> <li>The Nature of Cancer</li> <li>Normal cell biology</li> <li>The Immune system</li> <li>Pathological and pathophysiological changes in tissues</li> <li>Biology of the cancer cell</li> <li>Clone formation Transformation</li> <li>Tumor stem lines</li> <li>Structure of a solid tumor</li> <li>Products produced by the tumor</li> <li>Systemic effects of tumor growth</li> </ul>	
III	4	<ul> <li>Etiology of Cancer</li> <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>	

	10	
IV	10	Diagnostic Evaluation
		Health assessment: History taking, physical examination,
		□ Staging and grading of tumors,
		□ TNM Classification
		Common diagnostic tests
		Blood investigation: Haemetological, Bio-chemical, Tumor markers, Hormonal assay
		• Cytology:Fine needle aspiration cytology(FNAC)
		<ul> <li>Histopathology: Biopsy</li> </ul>
		Radiological assessment: MRI, Ultrasound, Computed
		tomography, Mammography, Positron emission
		tomography(PET), Radio nuclide imaging, Functional
		metabolism imaging
		• Endoscopies
		Nurses responsibilities in diagnostic measures
V	10	Levels of prevention and care
		□ Primary prevention – Guidelines for cancer detection, general
		measures, Warning signs of cancer,
		Self examination-Oral, Breast, Testicular
		□ Secondary prevention – early diagnosis.
		□ Screening
		□ Tertiary prevention – disability limitation,
		□ Rehabilitation : Mobility, Speech, Bowel and bladder, Ostomies etc
		□ Patient and family education,
		□ Discharge instruction, follow-up care and use of community
		resources.

VI	25	Cancer Treatment Modalities and Nurse's Role
		□ Surgery
		Principles of surgical oncology
		• Current surgical strategy,
		Determining surgical risk
		Special surgical techniques
		Pre-intra-postoperative nursing care
		Acute and chronic surgical complications
		Future directions and advances
		□ Chemotherapy
		Principles and classification of chemotherapeutics
		Pharmacology of antineoplastic drugs- Mechanism of action, Absorption, protein binding, Bio-transformation, excretion, common side effects, drug toxicity
		Calculating drug doses,
		• Therapeutic response to chemotherapy-Tumor variables, drug resistance,
		Safety precautions
		□ Radiation Therapy
		Physics of radiotherapy
		• Types of ionizing rays
		Radiation equipments:Linear accelerator, cobalt,
		Implants, Isotopes,
		• Types of therapies: Oral, Brachy therapy, tele therapy, selectron

		therapy
		• Effects of radiation on the body tissue,
		• Radiation biology – cell damage hypoxic cells, alteration of
		tumor kinetics.
		• Approaches to radiation therapy –
		<ul> <li>External radiotherapy</li> </ul>
		<ul> <li>Internal radiotherapy – unsealed,</li> </ul>
		<ul> <li>Sealed sources.</li> </ul>
		Effectiveness of radiotherapy-Radiosensitivity, treatment effects
		Complications of radiotherapy
		Radiation safety: Standards of Bhaba Atomic Research Centre(BARC)
		Bone Marrow Transplantation /Stem Cell Transplantation
		• Types, indications, transplantation procedure, complications and
		nursing managment
		• Types and donor sources
		<ul> <li>Preparation and care of donor and recipient</li> </ul>
		<ul> <li>Bone marrow bank</li> </ul>
		<ul> <li>Legal and ethical issues</li> </ul>
		Classification of agents     Treatment and applications
		Treatment and applications
		Gene Therapy
		Current Concepts and practices
		□ Alternative and Complementary Therapies
		Current practices
VII	10	Pain management:- Theories, types and
		Nature of cancer pain
		Pathophysiology of pain
		Pain threshold
		□ Assessment of pain
		Principles of cancer pain control
		Pharmacological: Opioid and non-opioid analgesic therapy
		<ul> <li>Patient controlled analgesia(PCA)</li> </ul>
		<ul> <li>Other invasive techniques of pain control</li> </ul>
		Recent developments in Cancer pain
		Recent developments in Cancer pain
		<ul> <li>Recent developments in Cancer pain</li> <li>Non- Pharmacological pain relief technique-</li> </ul>
		Non- Pharmacological pain relief technique-
		<ul> <li>Non- Pharmacological pain relief technique-</li> <li>Complementary therapies(Music, massage, meditation,</li> </ul>
		<ul> <li>Non- Pharmacological pain relief technique-</li> <li>Complementary therapies(Music, massage, meditation, relaxation techniques, biofeed back etc)</li> </ul>
		<ul> <li>Non- Pharmacological pain relief technique-</li> <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>
		<ul> <li>Non- Pharmacological pain relief technique-</li> <li>Complementary therapies(Music, massage, meditation, relaxation techniques, biofeed back etc)</li> <li>Psychological intervention in pain control</li> </ul>

VIII	5	Palliative care	
		Definition and scope, philosophy	
		<ul> <li>Concept and elements of palliative care</li> </ul>	
		□ Global and Indian perspective of palliative care	
		Quality of life issues	
		Communication skill	
		Nursing perspective of palliative care and its elements	
		□ Home care	
		□ Hospice care	
		Role of nurse in palliative care	
IX	2	□ Infection control:	
		Process of infection, risk of hospitalization, nosocomial	
		infections- prevention and control of infection in acute, long	
		term care facility and community based care	
		Standard safety measures	
X	30	Nursing Care of Patients With Specific Malignant Disorders	
		<ul> <li>Malignancies of G.I. system-oral, oesophagus, stomach, rectal,</li> </ul>	
		liver & pancreas, care of ostomies/stoma	
		Respiratory malignancies	
		<ul> <li>Genito urinary system malignancies- prostate Bladder, renal</li> </ul>	
		testicular malignancies,	
		<ul> <li>Gynecological malignancies-cervix, uterus, ovary</li> </ul>	
		<ul> <li>Hematological malignancies-Lymphomas, Leukemias.</li> </ul>	
		<ul> <li>Malignancies of musculoskeletal system</li> </ul>	
		Endocrine malignancies	
		□ Skin	
		Head and Neck -brain tumors	
		Other malignancies – Breast cancer, AIDS related Malignancies	
		(Kaposi's Sarcoma)	
XI	10	Paediatric malignancies	
		<ul> <li>Leukemia, Lymphoma, Neuro- blastoma</li> </ul>	
		Wilm's tumor, Soft tissue sarcoma, Retinoblastoma	
		Nursing Management of children with Paediatric Malignancies	

XII	15		
		Of Cancer Patient	
		□ <u>Nutrition</u> : - effects of cancer on nutritional Status and its	
		consequences:-Anemia, Cachexia, Xerostomia, mucositis, Dysphagia,	
		nausea and vomiting, constipation, diarrhoea, electrolyte imbalances,	
		taste alterations	
		🗆 Impaired mobility: Decubitus ulcer, pathologic fractures,	
		thrombophlebitis, pulmonary embolism, contractures, footdrop	
		Other symptoms	
		Dyspepsia & hiccup, dyspnoea	
		$\Box$ intestinal obstruction,	
		□ Fungating wounds	
		Anxiety & depression, insomnia	
		□ Lymph edema	
		Impact of cancer on sexuality:	
		□ Effects of radiotherapy/ chemotherapy/surgery on sexuality of the cancer	
		patient	
		Nursing management of cancer patients experiencing sexual	
		dysfunction	
		Sexual counseling	
XIII	10	Cancer Emergencies	
		□ Disseminated intravascular coagulation(DIC),	
		Malignant pleural effusion	
		Neoplastic cardiac tamponade and septic shock spinal cord	
		compression	
		Superior venacava syndrome	
		Metabolic emergency: hyper and hypo calcemia	
		Surgical emergency	
		□ Urological emergency	
		□ Hemorrhage	
		$\Box$ Organ obstruction	
		Brain metastasis	
		Nurses role in managing oncologic emergencies	
XIV	8	Psycho-Social Aspects of Nursing Care	
		Psychological responses of patients with cancer	
		Psychosocial assessment –	
		Crisis intervention, coping mechanisms	
		□ Stress management, spiritual/cultural care and needs	
		Counseling: individual and family	
		Maximizing quality of life of patient and family	
		Ethical, moral and legal issues-	
		□ End of life care	
		□ Grief and grieving process	
		□ Bereavement support	
		$\Box$ Care of Nurses who care for the dying.	

XV 2	Layout and Design of an oncology institution/ ward, OPD, chemotherapy unit, Bone marrow transplantation unit, Pain clinic etc□ Practice Standards of oncology nursing • Policies and Procedures
	<ul> <li>Establishing Standing orders and Protocols</li> <li>Quality Assurance Programme in oncology units</li> <li>Nursing audit</li> </ul>

#### **Clinical Experience**

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

### **Procedures Observed**

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

#### **Procedures Assisted**

- a. IV cannulation Open method
- b. Chemotherapy
- c. Radiotherapy Brachytherapy Low Density Radiation, High Density Radiation.
- d. Interstitial implantation
- e. Bio-therapy and Gene therapy
- f. Teletherapy Treatment planning

- g. Bone marrow aspiration and biopsy
- h. Biopsy-tissue
- i. Needle Aspiration Cytology and biopsy
- j. Advance Cardiac life support
- k. Endotracheal intubation
- l. Defibrillation Ventilation
- m. Tracheostomy
- n. Thoracentesis
- o. Paracentesis
- p. Lumbar Puncture
- q. Arterial Blood Gas
- r. Nerve Block
- s. Chest tube insertion
- t. Intercostal drainage
- u. CVP monitoring

#### **Procedure Performed**

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

### **REFERENCES:**

- 1. Dennis A Cascitato, Manual of clinical oncology, 5<sup>th</sup> edition, Lippincott publications, 2004.
- 2. Springer, TNM Atlas, 5<sup>th</sup> edition, 2004.
- 3. Ram sharan Mehta, Oncology nursing, Jaypee publications, 2007.
- 4. Mirza Qaiser Baig, Principles and practice of chemo therapy planning, Jaypee publications, 2017.
- 5. Suresh K Sharma, Manual of Medical surgical Nursing, Lippincott publications, 2017.
- 6. Bipin valchandji Daga, Radiodiagnosis. Nuclear medicine, Radio therapy and radiation oncology, 1<sup>st</sup> edition, Jaypee publications, 2013.
- 7. Newton, Mosby's oncology nursing advisor, 2<sup>nd</sup> edition, Elsevier publications, 2016.
- 8. Langhrone, Oncology Nursing, 5<sup>th</sup> edition, Elsevier publications, 2007.

## Instruction for paper setter:

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question

### CLASS: M.SC NURSING 2<sup>ND</sup> YEAR

### **BRANCH:** NEUROSCIENCES NURSING

### COURSE TITLE: MEDICAL SURGICAL NURSING

COURSE CODE: MSCNUR206

### **DURATION OF EXAMINATION: 3 HOURS**

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.

### **COURSE OUTCOMES**

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

- 1. Appreciate trends and issues related to neurologyand neurosurgical Nursing.
- 2. Review the anatomy and physiology of nervous system
- 3. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of patients with neurological and neurosurgical disorders
- 4. Perform neurological assessment and assist in diagnostic procedures
- 5. Describe the concepts and principles of neuroscience nursing
- 6. Describe the various drugs used in neurosciences and nurses responsibility
- 7. Assist in various therapeutic and surgical procedures in neuroscience nursing
- 8. Demonstrate advance skills/competence in managing patients with neurological and neurosurgical disorder following nursing process approach
- 9. Identify psychosocial problems of patients with disabilities and assist patients and their family to cope with emotional distress, spiritual, grief and anxiety
- 10. Participate in preventive, promotive and rehabilitative services for neurological and neurosurgical patients.
- 11. Explain the legal and ethical issues related to brain death, organ transplantation and practice of neuroscience nursing
- 12. Incorporate evidence based nursing practice and identify the areas of research in the field of neuroscience nursing
- 13. Organise and conduct inservice education program for nursing personnel.
- 14. 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		Content	
	Hours		
Ι	5	<ul> <li>Introduction</li> <li>Introduction to neuroscience(neurological and neurosurgical) nursing</li> <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</li> </ul>	
II	5	<ul> <li>Evidence based harsing and its application in neurological and neurosurgical nursing</li> <li>Epidemiology <ul> <li>Major health problems-</li> <li>Risk factors associated with neurological conditions- Hereditary,</li> <li>Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic considerations, occupational and infections.</li> <li>Health promotion, disease prevention, life style modification and its implications to nursing</li> </ul> </li> <li>Alternate system of medicine/complementary therapies</li> </ul>	
III	10	Review of Anatomy and physiology Embryology Structure and functions of Nervous system- CNS, ANS, cereberal circulation, cranial and spinal nerves and reflexes, motor and sensory functions Sensory organs	

IV	15	<ul> <li>Assessment and diagnostic measures <ul> <li>Assessment</li> </ul> </li> <li>Assessment</li> <li>History taking</li> <li>Physical assessment, psychosocial assessment</li> <li>Neurological assessments, Glasgow coma scale interpretation &amp; its relevance to nursing.</li> <li>Common assessment abnormalities <ul> <li>Diagnostic measures</li> <li>Cerebro spinal fluid analysis</li> </ul> </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>Electorgraphic 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>Interpretation of diagnostic measures</li> <li>Nurse's role in diagnostic tests</li>
V	5	Meeting Nutritional needs of neurological patients         Basic nutritional requirements         Metabolic changes following injury and starvation         Nutritional assessment         Common neurological problems that interfere with nutrition and strategies for meeting their nutritional needs         Special metabolic and electrolyte imbalances         Chronic fatigue syndrome
VI	5	Drugs used in neurological and neurosurgical disorders Classification Indications, contraindications, actions and effects, toxic effects
		Role of nurse

VII	10	Traumatic conditions.
V 11	10	□ Causes, pathophysiology, Clinical types, Clinical features, diagnosis,
		Prognosis, Management: medical, surgical and Nursing management of
		<ul> <li>Cranio cerebral injuries.</li> </ul>
		<ul> <li>Spinal &amp; Spinal cord injuries.</li> </ul>
		<ul> <li>Peripheral nerve injuries.</li> </ul>
		<ul> <li>Unconsciousness</li> </ul>
		• Onconsciousness
VIII	10	Cerebro vascular disorders.
		□ Causes, pathophysiology, Clinical types, Clinical features,
		diagnosis, Prognosis, Management: medical, surgical and Nursing
		management of
		• Stroke & arterio venous thrombosis.
		Haemorrhagic embolus.
		Cerebro vascular accidents.
		• Intracranial aneurysm.
		Subarchnoid Haemorrhage.
		• Arterio venous fistula.
		Brain tumours
		Diseases of cranial nerves; Trigiminal neuralgia, Facial palsy,
		Bulbar palsy.
IX	10	Degenerating and demyelinating disorders
		□Causes, pathophysiology, Clinical types, Clinical features,
		diagnostic, Prognosis , Management: medical, surgical
		and Nursing management of
		Motor neuron diseases.
		• Movement disorders- Tics, dystonia, chorea, wilson's disease,
		essential tremors
		• Dementia.
		Parkinson's disease.
		• Multiple sclerosis.
		• Alzemier's

X	10	<ul> <li>Neuro infections</li> <li>Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and Nursing management of Neuro infections</li> <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>
XI	10	<ul> <li>Paroxysmal disorders.</li> <li>Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of</li> <li>Epilepsy and seizures.</li> <li>Status epilepticus.</li> <li>Syncope.</li> <li>Menier's syndrome.</li> <li>Cephalgia.</li> </ul>
XII	10	<ul> <li>Developmental disorders.</li> <li>Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and Nursing management of</li> <li>Hydrocephalus.</li> <li>Craniosynostosis.</li> <li>spina bifida- Meningocele, Meningomyeloceleencephalocele</li> <li>syringomyelia.</li> <li>Cerebro vascular system anomalies.</li> <li>Cerebral palsies.</li> <li>Down's syndrome</li> </ul>

III	10	Neuro muscular disorders.		
		<ul> <li>Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and Nursing management of</li> <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>		
XIV	5	Neoplasms – surgical conditions.		
		□ Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical		
		and Nursing management of		
		Space occupying lesions -types		
		Common tumors of CNS,		
XV	5	<ul> <li>Other disorders</li> <li>□ Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and Nursing management of</li> <li>□ Metabolic disorders- diabetes, insipidus, metabolic encephalopathy</li> </ul>		
		□ Sleep disorders		
		□ Auto immune disorders- multiple sclerosis, inflammatory Myopathies		
XVI	10	Neuro emergencies		
		<ul> <li>Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and Nursing management of</li> <li>Increased intracranial pressure</li> <li>Unconscious</li> <li>Herniation syndrome</li> <li>Seizures</li> <li>Severe head injuries</li> <li>Spinal injuries</li> <li>Cerebro vascular accidents</li> </ul>		

COURSE CODE: MSCNUR206

XVII	5	<ul> <li>Rehabilitation.</li> <li>Concept and Principles of Rehabilitation.</li> <li>Factors affecting quality of life and coping</li> <li>Rehabilitation in acute care setting, and following stroke, head injury and degenerative disorders of brain</li> <li>Physiotherapy.</li> <li>Counselling</li> <li>Care giver's role</li> </ul> Speech & LanguageNeurogenic communication disorders, Speech therapy
XVIII	5	Ethical and legal issues in neuroscience nursing <ul> <li>Brain death and organ transplantation</li> <li>Euthanasia</li> <li>Negligence and malpractice</li> <li>Nosocomial infections</li> </ul>
XIX	5	<ul> <li>Quality assurance in neurolgical 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</li> <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>

Practical

## Total 32 Weeks 960 Hours

S.NO	AREA OF POSTING	No. of Week	<b>Total Hours</b>
1	O.P.D.	2	60
2	Casualty	2	60
3	Diagnostics	2	60
4	Neuro psychiatry	1	30
5	Neuro Medical wards	4	120
6	Paediatric Neuro ward	2	60
7	Neuro surgical wards	4	120
8	Head Injury ward	3	90

**COURSE CODE: MSCNUR206** 

9	ICU- neuro medicine	4	120
10	I.C.U neuro surgical	4	120
11	Rehabilitation	2	60
12	Operation Theatre	2	60

### ESSENTIAL NEURO NURSING SKILLS

I.	Procedures	Observed
<b>_</b> ,	I I Occuai es	C SSCI / Cu

- CT scan
- MRI
- PET
- EEG
- EMG
- Sleep pattern studies/Therapy
- Radiographical studies
- Neuro surgeries
- Nerve conduction studies
- Ultrasound studies
- Any other

### II. Procedures Assisted

- Advanced Cardiac life support
- Lumbar Puncture
- Biopsies muscle, nerve and Brain
- Arterial Blood Gas

# Second Year Annual Examination to be held in the year 2022, 2023 COURSE TITLE: MEDICAL SURGICAL NURSING (NEUROSCIENCES NURSING)

#### **COURSE CODE: MSCNUR206**

- ECG Recording
- Blood transfusion
- IV cannulation open method
- Endotracheal intubation
- Ventilation
- Tracheostomy
- ICP monitoring
- Gama Knife
- Cereberal angiography
- Myelography
- Neuro surgeries

## **Procedures Performed:**

- Airway management
- Application of Oro Pharyngeal Airway
- Care of Tracheostomy
- Conduct Endotracheal Intubation
- Use of AMBU bag, artificial respirators
  - Setting of Ventilators and Care of patients on ventilators
- Cardio Pulmonary Resuscitation -Defibrillation
- Neurological assessment -Glasgow coma scale
- Gastric Lavage
- IV Cannulation
- Administration of emergency IV Drugs, fluid
- Care of patients with incontinence, bladder training

### Catheterization

0

- Care of patients on traction related to the neurological conditions
- Blood Administration.
- Muscle strengtheningexercises
- Guidance and counseling
- Monitoring management and care of monitors.

### **Reference Books:**

- 1. Barker, Neuroscience Nursing A Spectrum of care, 3<sup>rd</sup> edition, Elsevier publications, 2007.
- 2. Prema & Graicy, Essentials of Neurological & Neurosurgical Nursing, 2<sup>nd</sup> edition, Jaypee, 2013.
- 3. Clement, Textbook on neurological & neurosurgical nursing, 1<sup>st</sup> edition, jaypee, 2015.
- 4. Shah & Shah, Brain & Neurological disorders, 1<sup>st</sup> edition, jaypee, 2017.
- 5. Sukhpal Kaur, Clinical Neurosciences & critical care nursing, 1st edition, jaypee, 2014.
- 6. Lewis, Medical surgical nursing, 10<sup>th</sup> edition, Elsevier publications, 2016.

### **Instruction for paper setter:**

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

## Second year Annual Examination to be held in the year 2022, 2023

**CLASS:** M.Sc Nursing 2<sup>nd</sup> year

BRANCH: Nephro- Urology Nursing

COURSE TITLE: Medical Surgical Nursing

COURSE CODE: MSCNUR207

## **DURATION OF EXAMINATION: 3 HOURS**

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

#### **Course Outcomes**

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

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

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

#### **Course Content**

Unit	Hours	Content
I	5	<ul> <li>Introduction</li> <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> <li>Evidence based nursing and its application in nephro and urological nursing(to be incorporated in all the units)</li> </ul>
II	5	<ul> <li>Epidemiology</li> <li>Major health problems- urinary dysfunction, urinary tract infections, Glomuerular disorders, obstructive disorders ad other urinary disorders</li> <li>Risk factors associated with nephro and urological conditions 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>Alternate system of medicine/complementary therapies</li> </ul>
III	5	<ul> <li>Review of anatomy and physiology of urinary system</li> <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>

COURSE CO	DE: MSCI	NUR20/
IV V	20 5	<ul> <li>Assessment and diagnostic measures         <ul> <li>History taking</li> <li>Physical assessment, psychosocial assessment</li> <li>Common assessment abnormalities-dysurea, frequency, enuresis, urgency, hesistancy, hematuria, pain, retention, burning on urination, pneumaturia, incontinence, nocturia, polyurea, anuria, oliguria,</li> <li>Diagnostic tests-urine studies, blood chemistry, radiological procedures-KUB, IVP,nephrotomogram, retrograde pylogram, renal arteriogram, renalultrasound, CT scan, MRI, cystogram, renal scan, biopsy, endoscopy-cystoscopy, urodynamics studies-cystometrogram, urinary flow study, sphincter electromyography, voiding pressure flow study, videourodynamics, Whitaker study Interpretation of diagnostic measures Nurse's role in diagnostic tests</li> </ul> </li> <li>Renal immunopathy/Immunopathology         <ul> <li>General Concept of immunopathology</li> </ul> </li> </ul>
		<ul> <li>Immune mechanism of glomerual vascular disease</li> <li>Role of mediater systems in glomerula vascular disease</li> </ul>
VI	15	<ul> <li>Urological Disorders and Nursing Management</li> <li>Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of</li> <li>Urinary tract infections- pyelonephritis, lower urinary tract infections,</li> <li>Disorders for ureters, bladder and urethera</li> <li>Urinary tract infections-</li> <li>Urinary dysfunctions- urinary retention, urinary incontinence, urinary reflux,</li> <li>Bladder disorders- neoplasms, calculi, neurogenic bladder, trama, congenital abnormalities</li> <li>Benign prostrate hypertrophy(BPH)</li> <li>Ureteral disorders: ureteritis, ureteral trauma, congenital anomalies of ureters</li> <li>Uretheral disorders- tumours, trauma, congenial anomalies of ureters,</li> </ul>
VII	25	<ul> <li>Glomueral disorders and nursing management</li> <li>Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of</li> <li>Glomueralo nephritis- chronic, acute, nephritic syndrome</li> <li>Acute Renal failure and chronic renal failure.</li> <li>Renal calculi</li> <li>Renal tumours-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</li> <li>Congenital disorders</li> <li>Hereditary renal disorders</li> </ul>

INSE CUI	DE: MSC	
VIII	10	Management of Renal emergencies
		🗆 Anuria
		Acute Renal failure
		□ Poisoning
		🗆 Trauma
		□ Urine retention
		□ Acute graft rejection
		Hematuria
		$\square$ Nurse's role
IX	10	Drugs used in urinary disorders
		□ Classification
		Indications, contraindications, actions and effects, toxic effects
		$\square$ Role of nurse
Χ	10	Dialysis
		Dialysis- Historical, types, Principles, goals
		Hemodialysis- vascular access sites- temporary and permanent
		Peritoneal dialysis
		<ul> <li>Dialsyis Procedures- steps, equipments, maintenance,</li> </ul>
		□ Role of nurse- pre dialysis, intra and post dialysis
		□ Complications-
		□ Counseling
		□ patient education
		□ Records and reports
XI	10	□ Kidney transplantation
		Nursing management of a patient with Kidney transplantation
		Kidney transplantations- a historical review
		Immunology of graft rejections
		□ The recipient of a renal transplant
		□ Renal preservations
		Human Leucocytic Antigen(HLA) typing matching and cross
		matching in renal transplantation
		Surgical techniques of renal transplantations
		Chronic renal transplant rejection
		□ Complication after KTP: Vascular and lymphatic, Uroloical,
		cardiovascular, liver and neurological, infectious complication
		□ KTP in children and management of pediatric patient with KTP
		□ KTP in developing countries
		□ Results of KTP
		Work up of donor and recipient for renal transplant
		Psychological aspect of KTP and organ donations
		□ Ethics in transplants
		Cadaveric transplantation
XII	5	Rehabilitation of patient with nephrological problems
		□ Risk factors and prevention
		<ul> <li>Rehabilitation of patients on dialysis and after kidney transplant</li> </ul>
		Rehabilitation of patients after urinary diversions
		□ Family and patient teaching

# Second Year Annual Examination to be held in the year 2022, 2023

## COURSE TITLE: MEDICAL SURGICAL NURSING (NEPHRO-UROLOGY NURSING) COURSE CODE: MSCNUR207

XIII	10	Pediatric urinary disorders
		<ul> <li>Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of children with Renal Diseases -UTI, ureteral reflux, glomerulo nephritis, nephrotic syndrome infantile nephrosis, cystic kidneys, familial factors in renal diseases in childhood, Haemolytic uraemic syndrome. Benign recurrent haemturia, nephropathy, wilms' Tumour</li> </ul>
XIV	5	Critical care units- dialysis , KTP unit
		Philosophy, aims and objectives
		<ul> <li>Policies, staffing pattern, design and physical plan of Dialysis and</li> </ul>
		KTP units
		Team approach, functions
		<ul> <li>Psychosocial aspects in relation to staff and clients of ICU, dialysis</li> </ul>
		unit
		□ In-service education
		Ethical and legal issues
XV	5	<ul> <li>Quality assurance in nephrological nursing practice</li> </ul>
		□ Role of advance practioner in nephrological nursing
		Professional practice standards
		<ul> <li>Quality control in nephrological nursing</li> </ul>
		Nursing audit

### **Practical:**

# **Total = 960 Hours**

1 Week = 30 Hours

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

# **Procedures observed**

**I.Procedures Observed** 

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

# **II.** Procedures Assisted

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

## 1. Health assessment

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

# 17. Counselling

# **REFERENCES:**

- 1. Sabnis et al, Urology instrumentation- A Comprehensive guide, 1<sup>st</sup> edition, Jaypee, 2015.
- 2. MA Salam, Principles and practice of urology, 2<sup>nd</sup> edition, Jaypee, 2013.
- 3. Anil K Mandal, Textbook of nephrology, 3<sup>rd</sup> edition, Jaypee, 2014.
- 4. Pranaw Kumar Jha & Vijay Kher, Manual of Nephrology, 1<sup>st</sup> edition, Jaypee, 2016.
- 5. Caroline S Counts, Core curriculum for nephrology nursing, 9<sup>th</sup> edition, American nephrology nurses Association, 2015.
- 6. Judith Z Kallanbach, Review of haemodialysis for nurses and dialysis personnel, Elsevier publications, 9<sup>th</sup> edition, 2015.
- 7. John T Daugirdas, Handbook for dialysis, 5<sup>th</sup> edition, LWW publications, 2014.

## **Instruction for paper setter:**

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

**CLASS:** M.Sc Nursing 2<sup>nd</sup> year

**BRANCH:** Orthopedic Nursing

**COURSE TITLE:** Medical Surgical Nursing

COURSE CODE: MSCNUR208

#### **DURATION OF EXAMINATION: 3 HOURS**

#### **Hours of instruction:**

**Theory:** 150 Hours **Practical:** 950 Hours **Total:** 1100 Hours

#### **Course Description**

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

#### **Course Outcomes**

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

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

- 12. Appreciate the legal and ethical issues pertaining to patients with orthopedic conditions and those requiring rehabilitation.
- 13. Appreciate the role of alternative system of medicine in care of patients with orthopedic conditions
- 14. Incorporate evidence based nursing practice and identify the areas of research in the field of orthopedic nursing.
- 15. Recognize the role of orthopedic nurse practitioner and as a member of the orthopedic and rehabilitation team.
- 16. Teach orthopedic nursing to undergraduate students and in-service nurses.
- 17. Prepare a design and layout of orthopedic and rehabilitative units.

## **Course Content**

Unit	Hours	Content
Ι	5	Introduction
		<ul> <li>Historical perspectives – History and trends in orthopedic nursing</li> <li>Definition and scope of orthopedic nursing</li> <li>Anatomy and physiology of Musculo-skeletal system</li> <li>Posture, Body landmarks Skeletal system Muscular system. Nervous system - Main nerves</li> <li>Healing of - Injury, bone injury,</li> <li>Repair of ligaments</li> <li>Systemic response to injury</li> <li>Ergonomics, Body mechanics, biomechanical measures</li> </ul>
		Orthopedic team
II	8	<ul> <li>Assessment of Orthopedic Patient</li> <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	<ul> <li>Care of patients with devices</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 and Orthotics</li> </ul>

IV	15	Injuries
IV	15	<ul> <li><i>Trauma &amp; Injuries</i></li> <li>Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, management, medical surgical and nursing management of : <ul> <li>Early management of Trauma</li> <li>Fractures</li> <li>Injuries of the</li> </ul> </li> <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> </ul>
		<ul> <li>Chest injury</li> <li>Polytrauma</li> <li>Nerve injuries</li> <li>Vascular injuries</li> <li>Soft tissue injuries</li> <li>Sports injuries</li> <li>Amputation</li> </ul>
V	8	Infections of Bones and Joints
		<ul> <li>Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, management, medical surgical and nursing management of :</li> <li>Tuberculosis</li> <li>Osteomyelitis</li> <li>Arthritis</li> <li>Leprosy</li> </ul>
VI	5	Bone Tumours
		<ul> <li>Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, management, medical surgical and nursing management of:</li> <li>Bone tumors – Benign, Malignant and metastatic</li> <li>Different types of therapies for tumors</li> </ul>
VII	10	Deformities
		<ul> <li>Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis – medical surgical and nursing management of:Scoliosis, Kyphosis,Lordosis</li> <li>Congenital disorders: Congenital dislocation of hip(CDH), Dislocation of patella, knee,</li> <li>Varus and valgus deformities,</li> <li>Deformities of digits,</li> <li>Congenital torticollis.</li> <li>Meningocele, meningomyelocele, spina bifida,</li> <li>Chromosomal disorders.</li> <li>Computer related deformities</li> </ul>

VIII	5	Disorders of the spine
		$\Box$ Intervertebral disc prolapse, Fracture of the spine
		□ Low back disorder – Low back pain, PND, spinal stenosis,
		Spondylosis
IX	5	Nutritional/Metabolic and Endocrine Disorders
		□ Causes, pathophysiology, clinical types, clinical features, diagnosis,
		prognosis, medical surgical and nursing management of:
		• Rickets,
		• Scurvy,
		<ul> <li>Hyper vitaminosis A and D,</li> </ul>
		<ul> <li>Osteomalacia,</li> </ul>
		Osteoporosis
		<ul> <li>Paget's disease,</li> </ul>
		<ul><li>gout,</li></ul>
		<ul><li>Gigantism,</li></ul>
		-
		• Dwarfism,
		• Acromegaly.
		Therapeutic diets for various orthopedic disorders
X	8	Neuro-Muscular Disorders:
		□ Causes, pathophysiology, clinical types, clinical features, diagnosis,
		prognosis, medical surgical and nursing management of:
		Poliomyelitis, Cerebral Palsy
		Myasthenia gravis
		• Spina bifida.
		Peripheral nerve lesion,
		Paraplegia, Hemiplegia, Quadriplegia.
		Muscular dystrophy
XI	8	Chronic/Degenerative Diseases of Joints and Autoimmune
		Disorders:
		□ Causes, pathophysiology, clinical types, clinical features, diagnosis,
		prognosis – medical surgical and nursing management of:
		Osteo Arthritis
		Rheumatoid Arthritis
		• Ankylosing spondylitis.
		• Spinal disorders.
		Systemic Lupus Erythematosus
XII	5	Orthopedic Disorders in Children:
	-	<ul> <li>General and special consideration on pediatric orthopedics</li> </ul>
		□ Genetic disorders
		<ul> <li>Congenital anomalies</li> </ul>
		□ Growth disorders
		□ Genetic counseling
		<ul> <li>Nurses role in genetic counseling</li> </ul>

XIII	5	Geriatric Problems
		Geriatric population, types of disabilities, causes, treatment and
		Management – Hospitalization, rest, physiotherapy, involvement of
		family members, social opportunities.
		$\Box$ Care at home – involvement of family and community, follow up care
		and rehabilitation
XIV	6	Pharmacokinetics
'	Ű	<ul> <li>Principles of drug administration</li> </ul>
		<ul> <li>Analgesics and anti inflammatory agents</li> </ul>
		$\square$ Antibiotics, Antiseptics,
		<ul> <li>Drugs used in orthopedics and neuromuscular disorders</li> </ul>
		<ul> <li>Blood and blood components</li> </ul>
		□ Care of drugs and nurses role
XV	30	Nurses Role in Orthopedic Conditions
Λν	50	□ Gait analysis
		<ul> <li>Urodynamic studies</li> </ul>
		<ul> <li>Prevention of physical deformities</li> </ul>
		<ul> <li>Alteration of body temperature regulatory system and immune</li> </ul>
		systems
		<ul> <li>Immobilization – cast, splints, braces and tractions</li> </ul>
		□ Altered sleep patterns
		<ul> <li>Impaired communication</li> <li>Self some and estimities of deiter listing</li> </ul>
		<ul> <li>Self care and activities of daily living</li> <li>Diaddan and harmal metabilitation</li> </ul>
		□ Bladder and bowel rehabilitation
		□ Sensory function rehabilitation
		<ul> <li>Psychological reaction related to disabilities and disorders.</li> </ul>
		Coping of individual and family with disabilities and disorders
		Maintaining sexuality
		Spirituality – A rehabilitative prospective
		Orthopedic Reconstructive Surgeries
		Deplement manager II'r Knee Cheelden
		· · · ·
		□ Spine surgeries
		□ Grafts and flaps surgery
		Deformity correction.
		Physiotherapy
		<ul> <li>Concepts, Principles, purpose,</li> </ul>
		<ul> <li>Mobilization – Exercises: types, re-education in walking:</li> </ul>
		Crutch walking, wheel chair, Transfer techniques,
		<ul> <li>Types of gaits: Non-weight bearing, partial weight bearing,</li> </ul>
		four point crutch, tripoid, walking with sticks, calipers
		<ul> <li>Forms of therapies: Hydrotherapy, electrotherapy, wax bath,</li> </ul>
		heat therapy, ice, helio therapy, radiant heat,
		Chest physiotherapy

XVI	8	Rehabilitation
		<ul> <li>Principles of rehabilitation, definition, philosophy, process,</li> </ul>
		Various types of therapies
		Special therapies and alternative therapies
		Rehabilitation counseling
		□ Preventive and restorative measures.
		□ Community based rehabilitation (CBR)
		□ Challenges in rehabilitation.
		$\square$ Role of the nurse in rehabilitation,
		Legal and ethical issues in rehabilitation nursing
		Occupational therapy
XVII	5	National Policies and Programmes
		<ul> <li>National programmes for rehabilitation of persons with disability -</li> </ul>
		National Institutes, artificial limbs manufacturing Corporation, District
		Rehabilitation Centers and their schemes
		<ul> <li>Regional rehabilitation centers etc.</li> </ul>
		Public policy in rehabilitation nursing
		$\Box$ The persons with disabilities act 1995,
		<ul> <li>Mental rehabilitation and Multiple disabilities act 1992,</li> </ul>
		□ The National Trust Rules 1999 and 2000
		Rehabilitation Council of India
		Legal and ethical aspects in orthopedic nursing
		□ Rehabilitation health team and different categories of team members.
XVIII	4	Quality assurance
		Standards, Protocols, Policies, Procedures
		Nursing audit
		□ Staffing
		Design of orthopedic, physiotherapy and rehabilitation unit

### Practicals

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

### **Procedures Observed**

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

# 11. Others

## **Procedures Assisted**

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

### **Peocedures Performed**

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

# **Other Procedures**

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- 2. Prakash PKotwal & Mayilvahanam, Textbook of orthopedics', Elsevier publications, 2005.
- 3. Jayant Joshi, Essential of Orthopedics & applied physiotherapy, Elsevier publications, 2009.
- 4. Manish Kumar Varshney, Essential orthopedics principles and practice, Jaypee, 1st edition, 2016.
- 5. Apurv Mehra, Magic book of orthopedics, 5<sup>th</sup> edition, Jaypee, 2017.
- 6. James Cyriax, Textbook of orthopedic medicine, vol.1, 8<sup>th</sup> edition, 2006.
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- 10. Kulkarni & Badhulkar, Textbook of orthopedics & trauma, 3<sup>rd</sup> edition, Jaypee, 2016.
- 11. RM Shenoy, Essential of orthopedics, 2<sup>nd</sup> edition, Jaypee, 2014.

# **Instruction for Paper setter:**

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

## Second year Annual Examination to be held in the year 2022, 2023

**CLASS:** M.SC NURSING 2<sup>ND</sup> YEAR

# **BRANCH:** GASTRO ENTEROLOGY NURSING

## COURSE TITLE: MEDICAL SURGICAL NURSING

COURSE CODE: MSCNUR209

**DURATION OF EXAMINATION: 3 HOURS** 

#### **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 gastro enterology Nursing. It will help students to develop advanced skills for nursing intervention in various gastro enterology conditions. It will enable the student to function as gastro enterology nurse practitioner/specialist and provide quality care. It will further enable the student to function as educator, manager, and researcher in the field of gastro enterology nursing

### **COURSE OUTCOMES**

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

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

- 12. Assist patients and their family to cope with emotional distress, grief, anxiety and spiritual needs
- 13. Discuss the legal and ethical issues in GE nursing
- 14. Identify the sources of stress and manage burnout syndrome among health care providers
- 15. Appreciate the role of alternative system of medicine in care of patient
- 16. Incorporate evidence based nursing practice and identify the areas of research in the field of gastrointestinal nursing
- 17. Teach and supervise nurses and allied health workers.
- 18. Design a layout of Gastro entrology intensive care unit (GEICU), liver care/transplant unit

Unit	Hours	Content
I	5	<ul> <li>Introduction <ul> <li>Historical development: trends and issues in the field of gastro enterology.</li> <li>Gastro enterological problems</li> <li>Concepts, principles and nursing perspectives</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> </li> </ul>
II	5	<ul> <li>Epidemiology</li> <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	<ul> <li>Review of anatomy and physiology of gastrointestinal system</li> <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	Assessment and diagnostic measures
		□ History taking
		Physical assessment, psychosocial assessment
		□ Diagnostic tests
		• Radiological studies:Upper GIT- barium swallow, lower GIT-
		Barrium enema,
		• Ultra sound:
		Computed tomography
		• MRI
		Cholangiography: Percutaneous transheptatic
		Cholangiogram(PTC)
		Magnetic Resonance Cholangio pancreotography (MRCP)
		• Nuclear imaging scans(scintigraphy)
		• Endoscopy
		□ Colonoscopy
		□ Proctosigmoidoscopy
		Endoscopic Retrogrde Cholongio pancreotography (ERCP)
		□ Endoscopic ultrasound
		□ Peritonoscopy(Laproscopy)
		<ul> <li>Gastric emptyingstudies</li> </ul>
		Blood chemistries: Serum amylase, serum lipase
		□ Liver biopsy
		Miscellaneous tests:Gastric analysis, fecal analysis
		□ Liver function tests: Bile formation and excretion, dye excretion test,
		Protein metabolism, haemostatic functions- prothrombin vitamin K
		production, serum enzyme tests,Lipid metabolism- serum cholesterol
		Interpretation of diagnostic measures Nurse's role in diagnostic tests

	1 .				
V	25	Gastro intestinal disorders and nursing management			
		Etiology, clinical manifestations, diagnosis, prognosis, related			
		pathophysiology, medical, surgical and nursing management of			
		• Disorders of the mouth:Dental caries,Peridontal disease,Acute tooth			
		infection, Stomatitis, Thrush (moniliasis), Gingivitis, Leukoplakia,			
		Inflammation of the parotid gland, Obstruction to the flow of			
		saliva, Fracture of the jaw			
		• Disorders of the oesophagus: Reflux oesophagitis, Oesophageal			
		achalasia, Oesoophageal varices, Hiatus hernia, Diverticulum			
		• Disorders of the stomach and duodenum: Gastritis, Peptic ulcer,			
		Dumping of the stomach, Food poisoning, idiopathic			
		gastroparesis, Aerophagia and belching syndrome, Ideopathic			
		cyclic nausea and vomiting, Rumination syndrome, Functional			
		dyspepsia, Chronic Non specific (functional) abdominal pain			
		<ul> <li>Disorders of the small intestine</li> </ul>			
		<ul> <li>Malabsorption syndrome – tropical sprue</li> </ul>			
		<ul> <li>Gluten – sensitive enteropathy (Coeliac disease)</li> </ul>			
		- Inflammatory diseases of intestines and abdomen,: appendicitis,			
		Peritonities, Intestinal obstruction, Abdominal TB,			
		Gastrointestinal polyposis syndrome			
		<ul> <li>Chronic inflammatory bowel disease, Ulcerative colites, crohn's</li> </ul>			
		disease			
		<ul> <li>Infestations and infections – Worm infestations, Typhoid,</li> </ul>			
		Leptospirosis			
		<ul> <li>Solitary rectal ulcer syndrome</li> </ul>			
		- Alteration in bowel elimination (diarrhoea, constipation, fecal			
		impaction, fecal incontinence, Irritable bowel syndrome,			
		Chronic idiopathic constipation, Functional diarrhoea			
		Anorectal Conditions: Hemorrhoide, Anal fissure, Anal fistula,			
		Abscess, Strictures, Rectal prolapse, Pruritis ani, Pelonidal disease,			
		Anal condylomas, Warts			
1					

VI	15	Disorder of liver, pancreas gall bladder and nursing management	
		□ Disorders of liver biliary tract :	
		$\Box$ Viral Hepatitis – A, B, C, D & E	
		$\square$ Toxic hepatitis	
		• Cirrhosis of liver, liver failure, Liver transplantation	
		Non cirrhotic portal fibrosis	
		• Liver abscess,;	
		Parasitic and other cysts of the liver	
		• Disorders of the Gall Bladder and Bile Duct:	
		□ Cholecystitis	
		□ Cholelitheasis	
		□ Choledocholilethiasis	
		Disorders of the pancreas: Pancreatitis,	
		□ Benign tumors of islet cells	
		Disorders of the Peritoneum	
		• Infections of the peritoneum	
		□ Surgical peritonitis	
		Spontaneous bacterial peritonitis	
		□ Tuberculosis peritonitis	
		Disorders of the Diaphragm	
		Diaphragmatic hernia	
		Congenital hernias	
		Paralysis of diaphragm	
		• Tumors of the diaphragm	
		□ Hiccups	
VII	15	Gastro intestinal emergencies and nursing interventions	
	_	□ Etiology, clinical manifestations, diagnosis, prognosis, related	
		pathophysiology, medical, surgical and nursing management of:	
		Esophageal varices,	
		• Ulcer perforation,	
		Acute cholecystitis	
		• Diverticulitis	
		Fulminant hepatic failure	
		Biliary obstruction	
		Bowel obstruction	
		Gastroenteritis	
		• Intussusception	
		Acute intestinal obstruction, perforation	
		Acute pancreatitis	
		Cirrhosis of liver complications	
		<ul> <li>Liver, spleen, stomach pancreatic, mesenteric, bowel and</li> </ul>	
		greater vessel injuries	
		<ul> <li>Acute appendicitis/peritonitis</li> </ul>	
		<ul> <li>Acute abdomen</li> </ul>	
	1	- Acute abdomen	

		Food poisoning
VIII	15	<ul> <li>Congenital Anomalies of Esophagus</li> <li>Esophageal atresia</li> <li>Tracheo esophagealfistulaEsophageal stenosis</li> <li>Esophageal duplications</li> <li>Dysphagia – Lusoria – aberrent right subclavian artery compressing esophagus</li> <li>Esophageal rings – schalzkiring</li> <li>Esophageal webs</li> </ul>
		<ul> <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>
		<ul> <li>Congenital Anomalies of Duodenal</li> <li>Duodenal Atresia or stenosis</li> <li>Annular pancreas</li> <li>Duodenal duplication cysts</li> <li>Malrotation and mid gut volvolus</li> </ul>
		<ul> <li>Developmental anomalies of the intestine:</li> <li>Abdominal wall defects (omphalocele and Gastroschisis)</li> <li>Meckel's diverticulum</li> <li>Intestinal atresia</li> <li>Hirschsprung's disease</li> </ul>

IX	15	Pharmo Kinetics			
		Drugs used in GIT			
		Principles of administration			
		Roles responsibilities of nurses			
		Drugs in Peptic ulcer disease			
		Proton Pump inhibitors			
		□ H <sub>2</sub> Receptor Antagonists			
		□ Cytoprotective Agents:			
		Drugs used in Diarrhea			
		Drugs used in constipation			
		Drugs used in Inflammatory Bowel Disease			
		□ Aminosalicylates			
		□ Corticosteroids			
		□ Immunomodulators			
		□ chemotherapy			
		□ Antibiotics			
		□ Antiemetics:			
		□ Anticholinergics			
		□ Antihistaminics			
		□ Antihelminthics			
		D Vitamin Supplements			
X	10	Nutrition and nutritional problems related to GI system			
2	10	<ul> <li>Nutrition and nutritional problems related to GI system</li> <li>Nutritional assessment and nursing interventions</li> </ul>			
		<ul> <li>Therapeutic diets</li> </ul>			
		<ul> <li>Adverse reactions between drugs and various foods</li> </ul>			
		<ul> <li>Adverse reactions between utigs and various roots</li> <li>Malnutrition- etiology, clinical manifestations and management</li> </ul>			
		<ul> <li>Tube feeding, parenteral nutrition, total parenteral nutrition</li> </ul>			
		<ul> <li>Obesity- etiology, clinical manifestations and management</li> </ul>			
		<ul> <li>Eating disorders- anorexia nervosa, bulimia nervosa</li> </ul>			
		$\square$ Recent advances in nutrition			
XI	15	Malignant disorders of gastro intestinal system			
		□ Etiology, clinical manifestations, diagnosis, prognosis, related			
		pathophysiology, medical, surgical, other modalities and nursing			
		management of:			
		• Malignancy of oral cavity ,Lip,Tongue,buccal mucosa,			
		oropharynx, Salivary gland			
		• Esophageal, Gastric, Carcinoma of bowel - Small bowel,			
		Colorectal and Anal carcinoma,			
		Liver, biliary tract and Pancreatic carcinoma			
XII	5	Administration and management of GE unit			
		Design & layout			
		□ Staffing,			
		Equipment, supplies,			
		Infection control; Standard safety measures			
		Quality Assurance:-Nursing audit –records /reports, Norms,			
		policies and protocols			
		□ Practice standards			

XIII	5	Education and training in GE care			
		□ Staff orientation, training and development,			
		□ In-service education program,			
		Clinical teaching programs			

**Practicals:** 

Total = 960 Hours 1 Week = 30 Hours

S.No.	Deptt./Unit	No. of Week	<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
	Total	32 Weeks	960 Hours

### **Procedures Assisted**

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

### **Procedures Performed**

- 1. History and Physical assessment
- 2. RT intubation / extubation / aspiration/suction
- 3. Gastric lavage and gavage
- 4. Bowel wash

5.	Therapeutic Diets
6.	Ostomy feeding
7.	Stoma care
8.	Monitoring vital parameters
9.	Plan of inservice education programme for nursing staff and Class-IV employees
10.	Counseling

#### **REFERENCES:**

1. Black M.J., Hawks H.J, Medical Surgical Nursing, Clinical Management for Positive Outcome, 7th edition, Sauders, Elsevier.

- 2. BT Basavanthappa, Handbook of medical surgical nursing, vol 1&2, 3<sup>rd</sup> edition, Jaypee, 2015.
- 3. Kochutherisiamma Thomas, Medical surgical nursing, Vol 1&2, 1<sup>st</sup> edition, Jypee, 2018.
- 4. Society of gastroenterology nurses and associates, Gastroenterology nursing, 5<sup>th</sup> edition,2013.
- 5. Norton Greenberger et al, Current diagnosis and treatment of gastroenterology, hepatology and endoscopy,
- 3<sup>rd</sup> edition, LANGES, 2015.
- 6. Rjiv Mehta, Clinical gastroenterology, Paras publications, 4<sup>th</sup> edition, 2020.
- 7. Lippincott, Manual of Gastroenterology, south asian edition, 4<sup>th</sup> edition, 2008.

#### **Instruction for Paper setter:**

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question

### Second year Annual Examination to be held in the year 2022, 2023

# CLASS: M.SC NURSING 2<sup>ND</sup> YEAR

## **BRANCH:** CLINICAL SPECIALITY - II

## COURSE TITLE: OBSTETRICS AND GYNAECOLOGICAL NURSING

### COURSE CODE: MSCNUR210

### **DURATION OF EXAMINATION: 3 HOURS**

#### **HOURS OF INSTRUCTION:**

**THEORY:** 150 HOURS **PRACTICAL:** 950 HOURS **TOTAL:** 1100 HOURS

#### **COURSE DESCRIPTION**

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

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

# **COURSE OUTCOMES**

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

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

- 13. Incorporate evidence based nursing practice and identify the areas of research in the field of obstetrical and gynaecological nursing
- 14. Function as independent midwifery nurse practitioner

# **Contents Outline**

Unit	Hours	Content		
Ι	25	Management of problems of women during pregnancy		
		□ Risk approach of obstetrical nursing care , concept & goals.		
		<ul> <li>Screening of high-risk pregnancy, newer modalities of</li> </ul>		
		diagnosis.		
		<ul> <li>Nursing Management of Pregnancies at risk-due to obstetrical</li> </ul>		
		complication		
		Pernicious Vomiting.		
		• Bleeding in early pregnancy, abortion, ectopic pregnancy, and gestational trophoblostic diseases.		
		Hemorrhage during late pregnancy, ante partum		
		hemorrhage, Placenta praevia, abruptio placenta.		
		• Hypertensive disorders in pregnancy, pre-eclampsia,		
		eclampsia, Heomolysis Elevated liver enzyme Low Platelet count (HELLP)		
		• Iso-immune diseases. Rh and ABO incompatibility		
		• Hematological problems in pregnancy.		
		Hydramnios-oligohydramnios		
		• Prolonged pregnancy- post term, post maturity.		
		Multiple pregnancies.		
		• Intra uterine infection & pain during pregnancy.		
		• Intra Uterine Growth Retardation(IUGR), Premature		
		Rupture of Membrane(PROM), intra uterine death		

II	15	Pregnancies at risk-due to pre-existing health problems
		□ Metabolic conditions.
		□ Anemia and nutritional deficiencies
		□ Hepatitis
		□ Cardio-vascular disease.
		□ Thyroid diseases.
		□ Epilepsy.
		Essential hypertension
		□ Chronic renal failure.
		□ Tropical diseases.
		Psychiatric disorders
		Infections Toxoplasmosis Rubella Cytomegalo virus Herpes
		(TORCH); Reproductive Tract Infection(RTI);STD; HIV/AIDS,
		Vaginal infections; Leprosy, Tuberculosis
		□ Other risk factors: Age- Adolescents, elderly; unwed mothers,
		sexual abuse, substance use
		□ Pregnanciescomplicating with tumors, uterine anomalies,
		prolapse, ovarian cyst
III	15	Abnormal labour, pre-term labour & obstetrical emergencies
		Etiology, pathopyhsiology and nursing management of
		• Uncoordinated uterine actions, Atony of uterus,
		precipitate labour, prolonged labour.
		Abnormal lie, presentation, position compound
		presentation.
		Contracted pelvis-CPD; dystocia.
		Obstetrical emergencies Obstetrical shock, vasa praevia,
		inversion of uterus, amniotic fluid embolism, rupture
		uterus, presentation and prolapse cord.
		uterus, presentation and profapse cord.
		<ul> <li>Augmentation of labour. Medical and surgical induction.</li> </ul>
		• Augmentation of labour. Medical and surgical induction.
		<ul><li>Augmentation of labour. Medical and surgical induction.</li><li>Version</li></ul>
		<ul> <li>Augmentation of labour. Medical and surgical induction.</li> <li>Version</li> <li>Manual removal of placenta.</li> </ul>
		<ul> <li>Augmentation of labour. Medical and surgical induction.</li> <li>Version</li> <li>Manual removal of placenta.</li> <li>Obstetrical operation:Forceps delivery, Ventouse,</li> </ul>
		<ul> <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> </ul>
		<ul> <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 perineal tear, VVF, RVF</li> <li>Complications of third stage of labour:</li> </ul>
		<ul> <li>Augmentation of labour. Medical and surgical induction.</li> <li>Version <ul> <li>Manual removal of placenta.</li> <li>Obstetrical operation:Forceps delivery, Ventouse, Caesarian section, Destructive operations</li> <li>Genital tract injuries-Third degree perineal tear, VVF, RVF</li> </ul> </li> <li>Complications of third stage of labour: <ul> <li>Post partum Hemorrhage.</li> </ul> </li> </ul>
		<ul> <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 perineal tear, VVF, RVF</li> <li>Complications of third stage of labour:</li> </ul>
		<ul> <li>Augmentation of labour. Medical and surgical induction.</li> <li>Version <ul> <li>Manual removal of placenta.</li> <li>Obstetrical operation:Forceps delivery, Ventouse, Caesarian section, Destructive operations</li> <li>Genital tract injuries-Third degree perineal tear, VVF, RVF</li> </ul> </li> <li>Complications of third stage of labour: <ul> <li>Post partum Hemorrhage.</li> </ul> </li> </ul>

IV	10	post partum complications		
		□ Nursing management of		
		• Puerperal infections, puerperal sepsis, urinary		
		complications, puerperal venous thrombosis and		
		pulmonary embolism		
		• Sub involution of uterus, Breast conditions,		
		Thrombophlebitis		
		• Psychological complications, post partum blues,		
		depression, psychosis		
V	25	High Risk Newborn		
		□ Concept, goals, assessment, principles.		
		□ Nursing management of		
		• Pre-term, small for gestational age, post-mature infant, and baby of diabetic and substance use mothers.		
		Respiratory conditions, Asphyxia neonatorum, neonatal		
		apnoea meconium aspiration syndrome, pneumo thorax,		
		pneumo mediastinum		
		• Icterus neonatorum.		
		• Birth injuries.		
		Hypoxic ischaemic encephelopathy		
		Congenital anomalies.		
		• Neonatal seizures.		
		Neonatal hypocalcaemia, hypoglycemia,		
		hypomagnesaemia.		
		Neonatal heart diseases.		
		Neonatal hemolytic diseases		
		• Neonatal infections, neonatal sepsis, opthalmia		
		neonatorum, cogenital syphilis, HIV/AIDS		
		Advanced neonatal procedures.		
		Calculation of fluid requirements.		
		• Hematological conditions – erythroblastosis fetalis,		
		<ul> <li>hemorrhagic disorder in the newborn</li> <li>Organization of neonatal care, services(Levels), transport,</li> </ul>		
		neonatal intensive care unit, organization and		
		management of nursing services in NICU		
VI	15	HIV/AIDS		
		□ HIV positive mother and her baby		
		□ Epidemiology		
		□ Screening		
		Parent to child transmission(PTCT)		
		Prophylaxis for mother and baby		
		Standard safety measures		
		□ Counseling		
		□ Breast feeding issues		
		<ul> <li>National policies and guidelines</li> <li>Issues: Legal athical, Psychosocial and rehabilitation</li> </ul>		
		Issues: Legal,ethical, Psychosocial and rehabilitation		
		Role of nurse		

VII	25	Gynecological problems and nursing management		
		□ Gynecological assessment		
		□ Gynecological procedures		
		Etiology, pathophysiology, diagnosis and nursing		
		management of		
		Menstrual irregularities		
		Diseases of genital tract		
		Genital tract infections		
		Uterine displacement		
		Genital prolapse		
		Genital injuries		
		Uterine malformation		
		• Uterine fibroid, ovarian tumors, Breast carcinoma, Pelvic		
		inflammatory diseases, reproductive tract malignancies,		
		hysterectomy – vaginal and abdominal.		
		• Sexual abuse, rape, trauma, assault		
VIII	5	Administration and management of obstetrical and		
		gynaecological unit		
		□ Design & layout		
		□ Staffing,		
		<ul> <li>Equipment, supplies,</li> </ul>		
		Infection control; Standard safety measures		
		□ Quality Assurance:-Obstetric auditing –records /reports,		
		Norms, policies and protocols		
		Practice standards for obstetrical and gynaecological unit		
IX	5	Education and training in obstetrical and gynaecological care		
		□ Staff orientation, training and development,		
		□ In-service education program,		
		Clinical teaching programs.		

# **Practicals**

# Total = 960 Hours 1 Week = 30 Hours

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

## **Essential Obstetrical And Gynecological Skills**

### **Procedure Observed**

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

### **Procedures Assisted**

- Operative delivery
- Abnormal deliveries-Forceps application, Ventouse, Breech
- Exchange blood transfusion
- Culdoscopy.
- Cystoscopy
- Tuboscopy
- Laparoscopy.
- Endometrial Biopsy
- Tubal patent test
- Chemotherapy
- Radiation therapy

- Medical Termination of Pregnancy.
- Dilatation and Curettage

## **Procedures Performed**

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

- Assessement, calculation and administration of fluids and medications:
  - Oral
  - I.D.
  - I.M.
  - I.V.- Securing IV line, infusion pump
- Administration of drug per rectum
- Capillary blood sample collection.
- Oxygen therapy.
- Phototherapy.
- Chest physiotherapy.
- counseling Parental, bereavment, family planning, infertility etc
- Setting of operation theatre.
- Trolley and table set up for Obstetrical & gynaecoligical operations.
- Pap smear.
- Vaginal smear.
- Insertion of pessaries,
- Insertion of IUD and removal.
- Teaching skills
- communication skills
- Prepare referral slips
- Pre transport stabilization
- Networking with other stake holders

#### **Reference Books:**

- 1. Dutta D.C, Text Book of Obstetrics, 9<sup>th</sup> edition, Hiralal Konar, Jaypee, 2017..
- 2. Dutta D.C, Text Book of Gynaecology, Hiralal Konar, 8<sup>th</sup> edition, Jaypee, 2020.
- 3. Howkins & Bourne Shaw's Textbook of Gynaecology, Padubirdri, 17<sup>th</sup> edition, Elsevier, 2018.
- 4. Dr. Shally Magon- Saju Sira, Textbook of Midwifery and obstetrics, 4<sup>th</sup> edition, Lotus publications.
- 5. Sadhana Gupta, A Comprehensive textbook of obstetrics and gynaecology, 1<sup>st</sup> edition, Jaype, 2011.
- 6. Jeffcoate's Principles of gynaecology, Malhotra et al,9<sup>th</sup> edition, Jaypee publications, 2019.
- 7. Ashok kumar, Drugs in obstetrics & Gynaecology, 1<sup>st</sup> edition, Jaypee publications, 2016.
- 8. Annamma Jacob, Maternal & Neonatal nursing care plans, 2<sup>nd</sup> edition, Jaypee, 2019.

## **Instruction for Paper setter:**

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question

### Second year Annual Examination to be held in the year 2022, 2023

**CLASS:** M.Sc Nursing 2<sup>nd</sup> year

**BRANCH:** Clinical Speciality - II

COURSE TITLE: Child Health Nursing

COURSE CODE: MSCNUR211

## **DURATION OF EXAMINATION: 3 HOURS**

**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 Paediatric nursing

#### **Course Outcomes**

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 areas of research in the field of pediatric nursing

# Second Year Annual Examination to be held in the year 2022, 2023 COURSE TITLE: CHILD HEALTH NURSING COURSE CODE: MSCNUR211

#### **Course Content**

Unit	Hours	Content
I	5 35	Introduction         □ Current principles, practices and trends in Pediatric Nursing         □ Role of pediatric nurse in various settings -Expanded and extended         □ Pathophysiology, assessment(including interpretation of
		<ul> <li>Various invasive and non-invasive diagnostic procedures), treatment modalities and nursing intervention in selected pediatric medical disorders</li> <li>Child with respiratory tract: choanal atresia, tonsillitis, epistaxis, aspiration.</li> <li>Lower respiratory tract: Broncheolitis, Bronchopneumonia, Asthma, cystic fibrosis</li> <li>Child with gastro-intestinal disorders: <ul> <li>Diarrheal diseases, gastro-esophageal reflux.</li> <li>Hepatic disorders: Hepatitis, Indian childhood cirrhosis, liver transplantation.</li> <li>Malabsorption syndrome, Malnutrition</li> </ul> </li> <li>Child with renal/ urinary tract disorders: Nephrotic syndrome, Nephritis, Hydronephrosis, hemolytic-uremic syndrome, kidney transplantation</li> <li>Child with cardio-vascular disorders: <ul> <li>Acquired: Rheumatic fever, Rheumatic heart disease,</li> <li>Congenital: Cynotic and acynotic</li> </ul> </li> <li>Child with neological disorders: Convulsions, Meningitis, encephalitis, guillian- Barre syndrome</li> <li>Child with oncological disorders: Leukemias, Lymphomas, Rhabdomyosarcoma, retinoblastoma, hepatoblastoma, bone tumors</li> <li>Child with blood disorders: Anemias, thalassemias, hemophilia, polycythemia, thrombocytopenia, and disseminated intravascular coagulation</li> </ul>

# Second Year Annual Examination to be held in the year 2022, 2023 COURSE TITLE: CHILD HEALTH NURSING COURSE CODE: MSCNUR211

III	35	<ul> <li>Assessment(including interpretation of various invasive and non-invasive diagnostic procedures), treatment modalities including cosmetic surgery and nursing interventions in selected pediatric surgical problems/ Disorders</li> <li>Gastrointestinal system: Cleft lip, cleft palate and conditions requiring plastic surgery, Tracheo esophageal fistula/atresia, Hirschsprungs' disease/megacolon, malrotation, intestinal obstruction, duodenal atresia,</li> </ul>
		<ul> <li>gastrochisis, exomphalus, anorectal malformation, omphalocele, diaphragmatic hernia</li> <li>Anomalies of the nervous system: Spina bifida, Meningocele, Myelomeningocele, hydrocephalus</li> <li>Anomalies of the genito-urinary system: Hypospadias, Epispadias, Undescended testes, Exstrophy bladder</li> <li>Anomalies of the skeletal system</li> <li>Eye and ENT disorders</li> <li>Nursing management of the child with traumatic injuries: General principles of managing Pediatric trauma <ul> <li>Head injury, abdominal injury, poisoning, foreign body</li> </ul> </li> <li>obstruction, burns <ul> <li>&amp; Bites</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> </li> </ul>
IV	10	<ul> <li>Intensive care for pediatric clients</li> <li>Resuscitation, stabilization &amp; monitoring of pediatric patients</li> <li>Anatomical &amp; physiological basis of critical illness in infancy and childhood</li> <li>Care of child requiring long-term ventilation</li> <li>Nutritional needs of critically ill child</li> <li>Legal and ethical issues in pediatric intensive care</li> <li>Intensive care procedures, equipment and techniques</li> <li>Documentation</li> </ul>

V	20	High Risk Newborn	
		□ Concept, goals, assessment, principles.	
		□ Nursing management of	
		• Post-mature infant, and baby of diabetic and substance use mothers.	
		• Respiratory conditions, Asphyxia neonatorum, neonatal apnoea meconium aspiration syndrome, pneumo thorax, pneumo mediastinum	
		• Icterus neonatorum.	
		• Birth injuries.	
		Hypoxic ischaemic encephelopathy	
		Congenital anomalies.	
		• Neonatal seizures.	
		<ul> <li>Neonatal hypocalcaemia, hypoglycemia, hypomagnesaemia.</li> </ul>	
		Neonatal heart diseases.	

		<ul> <li>Neonatal hemolytic diseases</li> <li>Neonatal infections, neonatal sepsis, opthalmia neonatorum, cogenital syphilis, HIV/AIDS</li> <li>Advanced neonatal procedures.</li> <li>Calculation of fluid requirements.</li> </ul>
		<ul> <li>Hematological conditions – erythroblastosis 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>
VI	10	<ul> <li>Developmental disturbances and implications for nursing <ul> <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> </li> </ul>
VII	10	<ul> <li>Challenged child and implications for nursing</li> <li>Physically challenged, causes, features, early detection &amp; management</li> <li>Cerebral palsied child,</li> <li>Mentally challenged child.</li> <li>Training &amp; rehabilitation of challenged children</li> </ul>
VIII	5	<ul> <li>Crisis and nursing intervention</li> <li>The hospitalized child,</li> <li>Terminal illness &amp; death during childhood</li> <li>Nursing intervention-counseling</li> </ul>
IX	5	<ul> <li>Drugs used in Pediatrics</li> <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>

X	10	<ul> <li>Administration and management of pediatric care unit</li> <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>
XI	5	<ul> <li>Education and training in Pediatric care</li> <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

S. No.	Deptt./ Unit	No. of Week	<b>Total Hours</b>
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

#### Field Visit:

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

#### Essential

#### I. Procedures Observed:

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

#### II. Procedures Assisted

- 1. Advanced neonatal life support
- 2. Lumbar Puncture
- 3. Arterial Blood Gas
- 4. ECG Recording
- 5. Umbilical catheterization arterial and venous
- 6. Arterial B P monitoring
- 7. Blood transfusion- exchange transfusion full and partial
- 8. IV cannulation & therapy
- 9. Arterial catheterization
- 10. Chest tube insertion
- 11. Endotracheal intubation
- 12. Ventilation
- 13. Insertion of long line
- 14. Assist in surgery

#### **III.** Procedures performed:

- Airway Management
  - Application of Oro Pharyngeal Airway
  - Oxygen therapy
  - CPAP(Continuous Positive Airway Pressure)
  - Care of Tracheostomy
  - Endotracheal Intubation
- Neonatal Resuscitation
- Monitoring of Neonates clinically & with monitors, CRT(Capillary Refill Time), assessment of jaundice, ECG
- Gastric Lavage
- Setting of Ventilators
- Phototherapy
- Assessment of Neonates: Identification & assessment of risk factors, APGAR Score, gestation age, Anthropometric assessment, Weighing the baby, Newborn examination, detection of life threatening congenital abnormalities,
- Admission & discharge of neonates
- Feeding management of breast feeding, artificial feeding, expression of breast milk, OG(Orogastric) tube insertion, gavage feeding, TPN, Breast feeding counseling
- Thermoregulation- Axillary temperature, Kangaroo Mother Care (KMC), Use of Radiant warmer, incubators, management of thermoregulation & control
- Administration of Drugs: I/M, IV injection, IV Cannulation & fixation infusion pump, Calculation of dosages, Neonatal formulation of drugs, use of tuberculin/ insulin syringes, Monitoring fluid therapy, Blood administration.
- Procedures for prevention of infections: Hand washing, disinfections & sterilization, surveillance, fumigation
- Collection of specimens
- Setting, Use & maintenance of basic equipment: Ventilator, O<sub>2</sub> analyzer, monitoring equipment, Photo therapy unit, Flux meter, Infusion pump, Radiant warmer, incubator, Centrifuge machine, Bilimeter, Refractometer, laminar flow

#### **Reference Books:**

- 1. Parthasarathy, IAP Textbook of pediatrics, 6<sup>th</sup> edition, Jaypee, 2016.
- 2. Suraj Gupate, The short textbook of Pediatrics, 12<sup>th</sup> edition, Jaypee, 2016.
- 3. Hutchison's Paediatrics, Krishna M Goel, Devendra K Gupta, 2<sup>nd</sup> edition, Jaypee, 2012.
- 4. Subrata Sarkar, Pediatric Nursing, 1<sup>st</sup> edition, Jaypee, 2018.
- 5. Santhanam, Illustrated textbook of pediatrics, 1<sup>st</sup> edition, Jaypee, 2018.
- 6. Wong's Essential of paediatric nursing, Marilyn J Hochenberry, Mosby, 2008.
- Marlow's Textbook of pediatric nursing, south asian edition, Dorothy R Marlow, Raman Kalia, Elsevier, 2013.
- 8. Perry, Hockenberry, Maternal child nursing care, 5<sup>th</sup> edition, Elsevier, 2014.
- 9. A Sudhakar, Essentials of pediatric nursing, Jaypee, 2017.

#### **Instruction for Paper setter:**

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

#### Second year Annual Examination to be held in the year 2022, 2023

**CLASS:** M.Sc Nursing 2<sup>nd</sup> year

BRANCH: Clinical Speciality - II

COURSE TITLE: Mental Health(Psychiatric) Nursing

COURSE CODE: MSCNUR212

#### **DURATION OF EXAMINATION: 3 HOURS**

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

#### **COURSE OUTCOME**

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

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

- 10. Prepare a design for layout and describe standards for management of Psychiatric units/emergency units/hospitals
- 11. Teach psychiatric nursing to undergraduate students & in-service nurses.

#### **Course Content**

Unit	Hours	Content
Ι	2	<b>Principles and practice of Psychiatric nursing</b> <ul> <li>Review</li> </ul>
II	10	<ul> <li>Crisis Intervention</li> <li>Crisis, Definition</li> <li>Phases In The Development of A Crisis</li> <li>Types of Crisis; Dispositional , Anticipated Life Transitions Traumatic Stress, Maturational/ Development , Reflecting Psychopathology</li> <li>Psychiatric Emergencies and their management</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	<ul> <li>Anger/ Aggression Management</li> <li>Anger and Aggression, Types, Predisposing Factors</li> <li>Management</li> <li>Role of The Nurse</li> </ul>
IV	5	<ul> <li>The Suicidal Client</li> <li>Epidemiological Factors</li> <li>Risk Factors</li> <li>Predisposing Factors: Theories of Suicide-Psychological, Sociological ,Biological</li> <li>Nursing Management</li> </ul>
V	5	<ul> <li>Disorders of Infancy, Childhood, and Adolescence</li> <li>Mentally Challenged</li> <li>Autistic Disorders</li> <li>Attention-Deficit/Hyperactivity Disorder</li> <li>Conduct Disorders, behavioural 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	Delirium, Dementia, and Amnestic Disorders	
		□ Delirium	
		Dementia	
		□ Amnesia	
		Psychopharmacological Intervention and Nursing	
		Management	
VII	10	Substance-Related Disorders	
		Substance-Use Disorders	
		Substance-Induced Disorders	
		Classes Of Psychoactive Substances	
		Predisposing Factors	
		The Dynamics Of Substance-Related Disorders	
		□ The Impaired Nurse	
		□ Codependency	
		Treatment Modalities For Substance-Related Disorders and	
		Nursing Management	
VIII	10	Schizophrenia and Other Psychotic Disorders (Check ICD10)	
		Nature of the Disorder	
		Predisposing Factors	
		Schizophrenia -Types	
		Disorganized Schizophrenia	
		Catatonic Schizophrenia	
		Paranoid Schizophrenia	
		<ul> <li>Undifferentiated Schizophrenia</li> </ul>	
		<ul> <li>Residual Schizophrenia</li> </ul>	
		Other Psychotic disorders	
		Schizoaffective Disorder	
		Brief Psychotic Disorder	
		Schizophrenicform Disorder	
		Psychotic Disorder Due to a General Medical Condition	
		Substance-Induced Psychotic Disorder	
		Treatment and Nursing Management	
IX	8	Mood Disorders	
		Historical Perspective	
		□ Epidemiology	
		□ The Grief Response	
		Maladaptive Responses To Loss	
		Types Of Mood Disorders	
		Depressive disorders	
		Bipolar disorders	
		Treatment and Nursing Management	

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X	8	Anxiety Disorders <ul> <li>Historical Aspects</li> </ul>
		<ul> <li>Types</li> <li>Panic Disorder</li> </ul>
		<ul> <li>Generalized Anxiety Disorder</li> </ul>
		<ul> <li>Obsessive-Compulsive Disorder</li> <li>Posttraumatic Stress Disorder</li> </ul>
		Anxiety Disorder Due to a General Medical Condition
		Substance-Induced Anxiety Disorder
		□ Treatment Modalities
777		Psychopharmacology & Nursing Management
XI	5	Somatoform And Sleep Disorders
		Somatoform Disorders
		Historical Aspects
		Epidemiological Statistics
		Pain Disorder
		Hypochondriasis
		Conversion Disorder
		Body Dysmorphic Disorder
		□ Sleep Disorder
		<ul> <li>Treatment Modalities and Nursing Management</li> </ul>
XII	4	Dissociative Disorders and Management
		□ Historical Aspects
		Epidemiological Statistics
		Application of the Nursing Management
		Treatment Modalities and Nursing Management
XIII	4	Sexual And Gender Identity Disorders
		Development Of Human Sexuality
		Sexual Disorders
		Variation In Sexual Orientation
		Nursing Management
XIV	4	Eating Disorders
		Epidemiological Factors
		Predisposing Factors : Anorexia Nervosa And Bulimia Nervosa
		obesity
		□ Psychopharmacology
		Treatment & Nursing Management
XV	4	Adjustment and Impulse Control Disorders
		Historical and Epidemiological Factors
		Adjustment Disorders
		Impulse Control Disorders
		Treatment & Nursing Management

XVI	4	Medical Conditions due to Psychological Factors
		□ Asthma
		□ Cancer
		Coronary Heart Disease
		Peptic Ulcer
		Essential Hypertension
		<ul> <li>Migraine Headache</li> </ul>
		□ Rheumatoid Arthritis
		□ Ulcerative Colitis
		<ul> <li>Treatment &amp; Nursing Management</li> </ul>
XVII	8	Personality Disorders
	Ū	<ul> <li>Historical perspectives</li> </ul>
		<ul> <li>Types Of Personality Disorders</li> </ul>
		<ul> <li>Paranoid Personality Disorder</li> </ul>
		<ul> <li>Schizoid Personality Disorder</li> </ul>
		· ·
		Borderline Personality Disorder
		Histrionic Personality Disorder
		Narcissitic Personality Disorder
		Avoidance Personality Disorder
		Dependent Personality Disorder
		Obsessive-Compulsive Personality Disorder
		Passive-Aggressive Personality Disorders
		Identification, diagnostic, symptoms
		□ Psychopharmacology
		□ Treatment & Nursing Management
XVIII	8	The Aging Individual
		Epidemiological Statistics
		Biological Theories
		Biological Aspects of Aging
		Psychological Aspects of Aging
		Memory Functioning
		□ Socio-cultural aspects of aging
		□ Sexual aspects of aging
		□ Special Concerns of the Elderly Population
		Psychiatric problems among elderly population
		□ Treatment & Nursing Management
XIX	5	The person living with HIV Disease
		Psychological problems of individual HIV/AIDS
		□ Counseling
		□ Treatment & Nursing Management
XX	5	Problems Related to Abuse or Neglect
	-	Vulnerable groups, Women, Children, elderly, psychiatric
		patients, under privileged, challenged
		<ul> <li>Predisposing Factors</li> </ul>
		<ul> <li>Treatment &amp; Nursing management- Counseling</li> </ul>

XXI	7	Community Mental Health Nursing		
		National Mental Health Program- Community mental health		
		program		
		□ The Changing Focus of care		
		<ul> <li>The Public Health Model</li> </ul>		
		$\square$ The Role of the Nurse		
		<ul> <li>Case Management</li> </ul>		
		<ul> <li>The community as Client</li> </ul>		
		<ul> <li>Primary Prevention</li> </ul>		
		<ul> <li>Populations at Risk</li> </ul>		
		1		
		Secondary prevention		
		Tertiary Prevention		
		Community based rehabilitation		
XXII	5	Ethical and Legal Issues in Psychiatric/Mental Health		
		Nursing		
		Ethical Considerations		
		□ Legal Consideration		
		Nurse Practice Acts		
		$\Box$ Types of Law		
		Classification within Statutory and Common Law		
		Legal Issues in Psychiatric/Mental Health Nursing		
		Nursing Liability		
XXIII	5	Psychosocial rehabilitation		
		□ Principles of rehabilitation		
		Disability assessment		
		□ Day care centers		
		□ Half way homes		
		□ Reintegration into the community		
		□ Training and support to care givers		
		□ Sheltered workshops		
		Correctional homes		
XXIV	5	Counseling		
		□ Liaison psychiatric nursing		
		Terminal illnesses-Counseling		
		Post partum psychosis-treatment, care and counseling		
		Death dying- Counseling		
		□ Treatment, care and counseling –		
		• Unwed mothers		
		• HIV and AIDS		
XXV	5	Administration and management of psychiatric units including		
		emergency units		
		□ Design & layout		
		□ Staffing,		
		□ Equipment, supplies,		
		□ Norms, policies and protocols		
		□ Quality assurance		
		Practice standards for psychiatric nursing		
		$\square$ Documentation		

XXVI	5	<ul> <li>Education and training in psychiatric care</li> <li>Staff orientation, training and development,</li> <li>In-service education program,</li> <li>Clinical teaching programs.</li> </ul>
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#### **Practicals**

#### Total = 960 Hours 1 Week = 30 Hours

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

# Essential Psychiatric nursing skills

## **Procedures Observed**

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

#### **Procedures Performed**

- 1. Mental status examination
- 2. Participating in various therapies Physical; ECT,
- 3. Administration of Oral, IM, IV psychotropic drugs
- 4. Interviewing skills
- 5. Counseling skills
- 6. Communication skills

- 7. Psychoeducation
- 8. Interpersonal relationship skills
- 9. Community Survey for identifying mental health problems
- 10. Rehabilitation therapy
- 11. Health education and life skills training.
- 12. Supportive psychotherapic skills
- 13. Group therapy
- 14. Milieu therapy
- 15. Social/Recreational therapy.
- 16. Occupational therapy.

#### **Reference Books:**

- 1. R Sreevani, A guide to mental health & Psychiatric nursing, K Reddemma, 4<sup>th</sup> edition, Jaypee, 2016.
- 2. Rajesh G Konnur, Textbook of psychiatric nursing, 1<sup>st</sup> edition, Jaypee, 2016.
- 3. RC Jiloha, Forensic Psychiatry- An Indian perspective, 1<sup>st</sup> edition, Jaypee, 2019.
- 4. Babu, Psychology for nurses, 2<sup>nd</sup> edition, Elsevier publications, 2018.
- 5. Theodore, Textbook of mental health nursing, 1<sup>st</sup> edition, Elsevier, 2015.
- 6. Helay, Psychiatric drugs explained, 6<sup>th</sup> edition, Elsevier, 2016.
- 7. Stuart, Principles and practice of psychiatric nursing, 10<sup>th</sup> edition, Elsevier, 2013.
- 8. Debr's Mental health Nursing, D. Elakkuvana Baskararaj, EMMESS publications, 2014.

#### **Instruction for Paper setter:**

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

#### Second year Annual Examination to be held in the year 2022, 2023

**CLASS:** M.Sc Nursing 2<sup>nd</sup> year

BRANCH: Clinical Speciality - II

**COURSE TITLE:** Community Health Nursing

COURSE CODE: MSCNUR213

#### **DURATION OF EXAMINATION: 3 HOURS**

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

#### **Course Outcomes**

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

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

- 2. Apply epidemiological concepts and principles in community health nursing practice
- 3. Perform community health assessment and plan health programmes
- 4. Describe the various components of Reproductive and child health programme.
- 5. Demonstrate leadership abilities in organizing community health nursing services by using inter-sectoral approach.

6. Describe the role and responsibilities of community health nurse in various national health and family welfare programmes

- 7. Participate in the implementation of various national health and family welfare programme
- 8. Demonstrate competencies in providing family centered nursing care independently
- 9. Participate/Conduct research for new insights and innovative solutions to health problems
- 10. Teach and supervise nurses and allied health workers.

11. Design a layout of sub center/Primary health center/Community health center and develop standards for community health nursing practice.

**Content Outlines** 

Unit	Hours	Content
Ι	20	Epidemiology <ul> <li>Introduction</li> </ul>
		Concept, scope, definition, trends, History and development of modern Epidemiology
		Contribution of epidemiology
		• Implications
		Epidemiological methods
		□ Measurement of health and disease:
		□ Health policies
		Epidemiological approaches
		• Study of disease causatives
		Health promotion
		• Levels of prevention
		□ Epidemiology of
		Communicable diseases
		Non-communicable diseases
		Emerging and re-emerging diseases Epidemics
		National Integrated disease Surveillance Programme
		Health information system
		Epidemiology study and reports
		Role of Community health nurse

# Second Year Annual Examination to be held in the year 2022, 2023 COURSE TITLE: COMMUNITY HEALTH NURSING

COURSE	CODE:	MSCNUR213	

II	40	National Health and Family Welfare Programmes				
	□ Objectives, Organisation/manpower/resources, Activities, O					
inter-sectoral approach, implementation, item/purpose, re						
	responsibilities of community health nurse:					
National Vector Borne Disease Control Program (NVBDCP)						
		NationalFilaria Control Programme				
		National Leprosy Eradication Programme				
		Revised national TB Control Programme				
		National Programme for Control of Blindness				
		National Iodine Deficiency disorders Control     Progeramme				
		National Mental Health Programme				
		National AIDS Control Programme				
		National Cancer Control Programme				
		RCH I and II				
		Non- communicable disease programmes				
		• NRHM				
		- Health Schemes:				
		* ESI				
		* CGHS				
		* Health Insurance				
III	15	School Health				
		Introduction: definition, concepts, objectives,.				
		Health assessment, Screening, identification, referral and				
		follow up,				
		□ Safe environment				
		□ Services, programmes and plans- first aid, treatment of minor				
		ailments				
		□ Inter-sectoral coordination				
		□ Adolescent health				
		Disaster, disaster preparedness, and management				
		□ Guidance and counseling				
		□ School health records - maintenance and its importance				
		<ul> <li>Roles and responsibilities of community health nurse</li> </ul>				

IV	15	International health		
		□ Global burden of disease		
		□ Global health rules to halt disease spread		
		<ul> <li>Global health priorities and programes</li> </ul>		
		International quarantine		
		Health tourism		
		<ul> <li>International cooperation and assistance</li> </ul>		
		International travel and trade		
		Health and food legislation, laws, adulteration of food		
		Disaster management		
		□ Migration		
		$\Box$ International health agencies –World Health organizations,		
		World health assembly, UNICEF, UNFPA, SIDA, US AID,		
		DANIDA, DFID. AusAID etc		
		International health issues and problems		
		International nursing practice standards		
		International health vis-a vis national health		
		International health days and their significance		
$\mathbf{V}$	15	Education and administration		
		□ Quality assurance		
		Standards, Protocols, Policies, Procedures		
		□ Infection control; Standard safety measures		
		□ Nursing audit		
		Design of Sub-Centre/Primary Health Centre/		
		Community health center		
		□ Staffing; Supervision and monitoring-Performance		
		appraisal		
		Budgeting		
		□ Material management		
		□ Role and responsibilities of different categories of		
		personnel in community health		
		<ul> <li>Referral chain- community outreach services</li> <li>Transportation</li> </ul>		
		Transportation     Dublic relations		
		Public relations Planning in convice advectional programme and		
		□ Planning in-service educational programme and		
		teaching		
		□ Training of various categories of health workers-		
		preparation of manuals		

	DE: MSCNU 10	Geriatric				
		Concept, trends, problems and issues				
		□ Aging process, and changes				
		□ Theories of ageing				
		□ Health problems and needs				
		Psycho-physiological stressors and disorders				
		□ Myths and facts of aging				
		□ Health assessment				
		□ Home for aged-various agencies				
		□ Rehabilitation of elderly				
		□ Care of elderly				
		□ Elderly abuse				
		Training and supervision of care givers				
		□ Government welfare measures Programmes for elderly- Role of				
		NGOs				
		<ul> <li>Roles and responsibilities of Geriatric nurse in the Community</li> </ul>				
VII	10	Rehabilitation				
		Introduction: Concepts, principles, trends, issues,				
		Rehabilitation team				
		Models, Methods				
		Community based rehabilitation				
		Ethical issues				
		<ul> <li>Rehabilitation Council of India</li> </ul>				
		<ul> <li>Disability and rehabilitation- Use of various prosthetic devices</li> </ul>				
		<ul> <li>Psychosocial rehabilitation</li> </ul>				
		<ul> <li>Rehabilitation of chronic diseases</li> </ul>				
<ul> <li>Restorative rehabilitation</li> <li>Vocational rehabilitation</li> <li>Role of voluntary organizations</li> </ul>						
						□ Guidance and counseling
						□ Welfare measures
		Role and responsibilities of community health nurse				

# Second Year Annual Examination to be held in the year 2022, 2023

# COURSE TITLE: COMMUNITY HEALTH NURSING COURSE CODE: MSCNUR213

RSE CODE: MSCNUR213						
VIII	10	Community mental health				
		Magnitude, trends and issues				
		National Mental Health Program- Community mental health				
		program				
		□ The Changing Focus of care				
		The Public Health Model				
		<ul> <li>Case Management- Collaborative care</li> </ul>				
		□ Crisis intervention				
		□ Welfare agencies				
		Population at Risk				
		$\square$ The community as Client				
		Primary Prevention				
		Secondary prevention				
		Tertiary Prevention				
		Community based rehabilitation				
		□ Human rights of mentally ill				
		□ Substance use				
		Mentally challenged groups				
		Role of community health nurse				
IX	15	Occupational health				
125	15	<ul> <li>Introduction: Trends, issues, Definition, Aims,</li> </ul>				
		Objectives, Workplace safety				
		□ Ergonomics and Ergonomic solutions				
		<ul> <li>Occupational environment- Physical, social, Decision</li> </ul>				
		□ Measures for Health promotion of workers; Prevention and				
		control of occupational diseases, disability limitations and				
		rehabilitation				
		□ Women and occupational health				
		□ Violence at workplace				
		□ Child labour				
		Disaster preparedness and management				
		Legal issues: Legislation, Labour unions, ILO and WHO				
		recommendations, Factories act, ESI act				
		□ Role of Community health nurse, Occupational health				
		Team				
		<ul> <li>making, Critical thinking</li> <li>Occupational hazards for different categories of people- physical, chemical, biological, mechanical, , Accidents,</li> <li>Occupational diseases and disorders</li> <li>Measures for Health promotion of workers; Prevention and control of occupational diseases, disability limitations and rehabilitation</li> <li>Women and occupational health</li> <li>Occupational education 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> <li>Role of Community health nurse, Occupational health</li> </ul>				

Total = 960 Hours

#### 1 Week = 30 Hours

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

#### **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 centers
- Palliative care
- Home of old age
- Mental health units
- De-addication centres
- School health services
- Industry
- Selected industrial health centers
- ESI unit
- Municipality/ corporation office

#### Assisted

- Laparoscopic sterilization
- Vasectomy

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

#### Performed

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

#### maintenance,

- Training and Supervision of various categories of personnel
- Liaison with NGO's

#### **Reference Books:**

- 1. Samta Soni, National health programmes & policies, CBS Publishers, 1<sup>st</sup> edition, 2018.
- 2. K. Park, Preventive and social medicine, 24<sup>th</sup> edition, Bhanot publications, 2017.
- 3. Ceccy Correia, Comprehensive community health nursing, Jaypee, 2011.
- 4. S. Kamalam, Essentials in community health nursing practice, 3<sup>rd</sup> edition, Jaypee, 2017.
- 5. Bijaylakshmi Dash, A Comprehensive textbook of community health nursing, 1<sup>st</sup> edition, Jaypee, 2017.
- 6. AH. Suryakanta, Community medicine with recent advancements, 4<sup>th</sup> edition, Jaypee, 2016.
- 7. Kazmi & Khan, Basics in epidemiology & Biostatistics, 1<sup>st</sup> edition, Jaypee, 2015.
- 8. IASPM'S Textbook of community medicine, AM Khadari, 2<sup>nd</sup> edition, Jaypee, 2020.
- 9. Marcia Stanhope, Public health nursing, 8<sup>th</sup> edition, Jaypee, 2008.

#### **Instruction for Paper setter:**

Question papers shall be subjective type. The number of questions can be 5 to 7 depending upon the weightage given to each question.

# UNIVERSITY OF JAMMU M.SC NURSING Statutes 2020

# **UNIVERSITY OF JAMMU**

# STATUTES GOVERNING THE AWARD OF M.SC NURSING DEGREE COURSE

#### **1. DURATION OF THE COURSE:**

The duration of the course of instruction leading to the degree of M.Sc Nursing shall be two academic years. The examination shall be held in two parts i.e. Part- I at the end of the course of First year, Part- II at the end of the course of Second year (Final).

#### 2. DETAIL OF WORKING/HOLIDAYS:

- a. Weeks available per year : 52 weeks
- b. Vacation : 4 weeks
- c. Examination : 2 weeks
- d. Gazetted holidays : 3 weeks
- e. Total weeks available : 43 weeks
- f. 40 hours per week : 1720 hours

Total hours for 2 years 3440 hours

#### **3. ELIGIBILITY FOR ADMISSION:**

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

#### 4. COURSE OF INSTRUCTION:

#### FIRST YEAR

Subject	Theory	Practical
	(hrs)	(hrs)
Nursing Education	150	150
Advance Nursing Practice	150	200
Nursing Research and Statistics	150	100
*Clinical speciality – I	150	650
Total	600	1100

#### SECOND YEAR

Subject	Theory	Practical
	(hrs)	(hrs)
Nursing Management	150	150
Nursing Research (Dissertation)		300
*Clinical speciality -II	150	950
Total	300	1400

Educational visit 2 weeks

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

#### Note:

- a. The medium of instruction and examination shall be English
- b. The candidates may choose any one of the clinical specialities/branches of study named above at the time of admission
- c. Students have to maintain log book for each activity during the course of study

#### **5. SCHEME OF EXAMINATION:**

	Theory	Theory			Practical		
FIRST YEAR	Hours	Internal	External	Hours	Internal	External	
Nursing Education	3	25	75		50	50	
Advance Nursing Practice	3	25	75				
Nursing Research and Statistics	3	25**	75*				
Clinical Speciality – I	3	25	75		100	100	
Total		100	300		150	150	
SECOND YEAR							
Nursing Management	3	25	75				
Dissertation & Viva					100	100	
Clinical Speciality – II	3	25	75		100	100	
Total		50	150		200	200	

\*Nursing Research = 50 and statistics = 25

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

#### Note:

- **a.** In case of combined subjects, minimum pass marks of 50% will be obtained as a combined score of sections under the same paper and a separate pass in each section is not mandatory.
- **b.** A candidate must pass in internal and external examinations in each of the papers separately.

#### c. Practical:

- i. 4 hours of practical examination per student
- ii. Maximum number of 10 students per day per speciality
- iii. The examination shall be held in clinical area only for clinical specialities
- iv. One internal and one external examiners shall jointly conduct practical examination

#### d. Dissertation:

- i. Evaluation of the dissertation shall be done by the examiner prior to viva
- ii. Duration: viva-voce minimum 30 minutes per student

#### e. Classification of results:

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

#### 6. RESEARCH GUIDES:

#### a) Qualification of Guide

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

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

#### b) Guide - Student Ratio

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

#### c) Research Committee

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

#### 7. EXAMINATION:

There shall be one regular examination annually followed by biannual examination on such dates as approved by the Controller of examinations.

#### 7.1 EXAMINATION FORMS:

The examination forms prescribed by the University along with the prescribed fee must reach the Controller of Examinations at least one month before the date of commencement of the regular examination. Late fee shall be charged if the forms and the fee are received thereafter.

The fee so prescribed is subject to the change as per the University notification from time to time.

Examination forms and fee for the biannual examination must reach the Controller of Examinations within one month after the declaration of result of regular examination. Late fee shall be charged if the forms and the fee are received thereafter.

#### 7.2. ELIGIBILITY FOR THE EXAMINATION:

The Examination each year shall be open to:

- a) A regular student who produces the following certificates signed by the Principal of the College:
- i. Certificate of good character.
- ii. Certificate that the student attended the required number of lectures as prescribed under statutes.
- iii. Certificate that the student has qualified the sessionals/ clinicals etc.

- b) A candidate who was otherwise eligible to appear in the regular examination in particular year but:
  - i. Could not appear or fill the examination form due to genuine reason (to be certified by an appropriate authority)
  - ii. Was unable to pass the examination in any paper(s) can appear in the biannual/subsequent examination

C. A candidate who does not have adequate attendance to appear in the regular examination will take up the said examination in the biannual/subsequent session after acquiring the required attendance.

#### 7.3 ATTENDANCE:

Subject to the Provisions of these statutes no candidate shall be eligible

- a. To appear in the examination unless he/she has minimum of 75% attendance (irrespective of the kind of the absence in theory and practical/clinical in each subject for appearing in the examination).
- b. For award of degree unless he/she has 100% attendance in each of practical areas.
- c. The teacher concerned shall submit the attendance statement of the concerned students to the Head of the Department/Principal within 5 days after the class work of the year is over.
- d. M.Sc nursing students shall attend conferences, workshops, seminars and do publication/presentation of papers during their study period.
- M.Sc Nursing students who do not have adequate attendance to appear for the 1<sup>st</sup> year regular examination will take up the said examination in the biannual/subsequent session after acquiring the required attendance. The duration of the 2<sup>nd</sup> year of the M.Sc Nursing programme will be calculated only from the time of appearance in the 1<sup>st</sup> year examination. But they have to complete the course successfully within 4 years of duration.

#### 7.4 CONDONATION

When any candidate falls short of attendance in any year it may be condoned after sufficient cause is shown by him/her in writing in this regard:

- a. By the Principal of the College up to Maximum of 5% of the total lectures delivered in all the papers.
- b. In addition to above a maximum of 5% of the total lectures delivered may also be condoned by the Vice-Chancellor only when it is endorsed and recommended by the Principal of the College.

#### 8. PARTICIPATION IN SPORT EVENTS

- a. Notwithstanding anything contrary contained in these statutes, where a candidate participates in any one or more of the activities as specified in the University Statues, he/she may be treated as present on all working days not exceeding 30 days in one academic year.
- b. The candidate participating in such event must produce a copy of certificate to the Head of the Department/

Principal of the College within seven days from the end of the event, failing which no such benefit shall be given.

c. The authority competent to issue the candidate participation certificate shall bring to the notice of the Head of the Department, name, roll no. of the candidate and the date(s) on which the activities were conducted within a week's period from the end of the event.

#### 9. PROMOTION

Notwithstanding anything contained in the statute or regulation, promotion to the next higher class shall be made from the next day following completion of  $1^{st}$  year examination. If a candidate fails in one or more subjects on declaration of result, he/she shall be allowed to continue however all papers need to be cleared before appearing in the  $2^{nd}$  year (final) examination.

#### **10. RE-APPEAR**

- a. A candidate who fails in one or more papers in annual examination shall be permitted to reappear in such paper/papers only in the biannual/subsequent examination of the same year.
- b. If a candidate fails in either practical or theory, he/she has to appear in both practical and theory.
- c. A candidate who fails in an examination or having been eligible but unable to appear in the examination shall take up the examination according to the syllabus which was in force in the last annual examination.

#### **11. REEVALUATION/RETOTALING OF ANSWER PAPERS:**

Reevaluation of answer scripts is not permitted. Only re-totaling of theory papers is allowed in the failed subjects if it is applied through the college.

#### **12. GRACE MARKS:**

Grace marks for each subject is not permitted and grace marks shall not exceed five marks in total marks for one academic year in Theory paper only.

#### **13. BOARD OF EXAMINERS FOR PRACTICALS:**

a. The Board of Examiners shall consist of

- i. Subject Incharge as internal examiner
- ii. External Examiner

b. The external and internal examiners shall be appointed exclusively from the panel recommended by the Principal of the College and approved by the Vice- Chancellor.

c. The quorum for the conduct of examination by the Board of Examiners shall be at least 2 including External Examiner.

#### **14. ELIGIBILTY OF EXAMINERS:**

**a.** An examiner whether internal or external in a Nursing subject (theory/practical) having M.Sc Nursing with specialization in the concerned subject and a minimum of three years of teaching experience in college of nursing after M.Sc Nursing.

**b**. In case of Statistics, the examiner with masters, M.Phil or Ph.D in statistics or operational research will be considered.

c. External examiner(s) shall rotate after every two years.

**d**. In the case of non- availability of an external examiner in a subject, a retired teacher with requisite qualification and teaching experience may be appointed within seven years of superannuation.

**e**. The practical/ clinical and oral examination in each subject shall be conducted jointly by the external and internal examiners and the award sheet containing the marks of practical/clinical and oral shall be compiled and signed by the external and internal examiners before it is submitted to the University.

**f**. The external and internal examiners shall be appointed by the university exclusively from the panel of examiners (external and internal) submitted by the principal of the college and approved by the Dean, Faculty of Medical Sciences. The internal examiner shall be from the concerned college.

g. External examiner shall not be from the same University.

#### 15. Paper setting:

Question papers shall be subjective type. The number of questions can be 5 to7 depending upon the weightage given to each question.

# 16. Interpretation, if any, shall be determined by the Vice-Chancellor in consultation with the Dean, Faculty of Medical Sciences and the decision taken shall be final and binding on all concerned.

#### 17. Internal Assessment and maintenance of record:

- a. The internal assessment marks reserved for theory part of the examination in each subject shall be calculated on the basis of performance in theory and viva in periodical assessment examinations, and the marks reserved for the practical part of the examination shall be calculated on the basis of performance in practical in periodical assessment and day to day internal assessment of the candidate.
- b. For periodical assessment at least two terminal examinations in each subject shall be arranged by the concerned Head of the Department at regular intervals of not less than four months, throughout the duration of the course of study for the subjects, in which the candidate shall be examined in theory, oral and clinical. The last terminal examination shall be held not later than one month before the commencement of the University Examination in the subject.
- c. The internal assessment marks reserved for theory part of the examination, shall be calculated from the total number of marks in theory and oral obtained by a candidate in the terminal examination (and other class tests that may be held from time to time if the department so desires), irrespective of the fact whether a candidate has appeared in all of these or not.
- d. Day to day assessment marks (to be added to practical part of the examination) will be allotted from the total number of marks in practical obtained by a candidate in terminal examination and general performance of the candidate throughout the course of study, on the basis of records of clinical case sheets, ward leaving tests, quiz

and or stage examinations depending on the subject and the convenience of the department concerned.

- e. Marks in both cases of internal assessment i.e. those reserved for theory and those for practical shall be computed on the basis of direct percentage from the total marks obtained in the terminal examinations (including any class test) and day to day assessment.
- f. The total marks allotted to each terminal examination shall be same and the marks allotted in each examination shall be distributed between theory, oral, practical and or clinical part in the same proportion as stands allotted for the University Examination of the subject.
- g. At the time of final internal assessment at the end of session, fractions less than half a mark shall be ignored and fractions of half marks or more shall be raised to the next whole number.
- h. After termination of each terminal examination (any class test if held) the Head of the Department shall prepare a statement of award in triplicate on the prescribed Performa showing part-wise marks obtained by the candidate in the concerned subject. One copy of the said award shall be submitted to the Principal of the College for onward transmission to the Controller of Examinations at least two weeks before the commencement of examinations, other copy shall be notified to the candidate and the third copy shall be kept in the office record of the department concerned. The Head of the Department shall maintain the record where marks scored by each candidate in each assessment examination shall be recorded along with the final score of internal assessment calculated at the end of the course of study for the subject.
- i. The record of the award of the terminal examinations (class tests) and the final internal assessment marks based on these tests and day to day assessment shall remain in the custody of the Head of the Department of the subject concerned and shall be retained for a period of not less than six months after the declaration of the result of the concerned University Examination.
- j. The record of periodical examination and internal assessment shall be opened to periodical inspection at least one time during the course of study of the subject concerned by the Inspector to be appointed by the Vice-Chancellor.
- k. In case a candidate fails to appear in the regular examination due to any reason, the internal assessment marks based on all the periodical examinations and day to day assessment during full academic period shall be considered for any subsequent examination in which he/she appears for the first time.
- The internal assessment marks of any candidate who fails in one or more papers of any examination shall be carried forward to the next examination he/she will however, have the option to improve his/her marks of sessionals examination at the time of appearing in the reappear papers.
- m. Research Project internal assessment: It includes
  - i. Submission of research proposal in time
  - ii. Selection of research problem
  - iii. Day to day feedback to the Research guide

- iv. Submission of final dissertation
- v. Chapter wise evaluation of research project
- vi. Viva-voce internal examination

#### **18. GUIDELINES FOR DISSERTATION:**

**a.** Tentative Schedule for dissertation

S.No	Activities	Scheduled Time
1.	Submission of the research proposal	End of 9 <sup>th</sup> month of 1 <sup>st</sup> year
2.	Submission of dissertation – Final	End of 9 <sup>th</sup> month of 2 <sup>nd</sup> year

- d. Administrative approval and ethical clearance shall be obtained from the college research committee.
- e. The dissertation shall be submitted in the office of the Principal, College of Nursing on the notified date. Extension of one week for submission may be granted by the Principal concerned in deserving cases on recommendation of the concerned guide.
- f. Four copies of the dissertation shall be submitted along with soft copy (CD) to the office of the Principal for evaluation. The submitted dissertation shall be evaluated by one external and one internal examiner appointed by the university. If there are any corrections in dissertation suggested by the examiner(s), the candidate will make such corrections and will be allowed to re-submit the dissertation in the specified time limit. One copy shall be submitted to the University through proper channel.

#### **19. MERCY CHANCE/RELAXATION OF MAXIMUM TIME PERIOD:**

Maximum time limit for completing M.Sc Nursing course is four years. For a candidate who is unable to complete the course in prescribed time limit, the maximum time limit can be relaxed subject to the condition that such candidate qualifies a basic examination conducted (for the purpose) by the respective State Nursing Council in order to be allowed to continue the course/appear in the University Examination.

# **UNIVERSITY OF JAMMU**

# **EVALUATION PROFORMA FOR DISSERTATION**

#### **REGISTRATION NO:**

CLASS: M.Sc (N) II YEAR

#### **EXAMINATION CENTRE:**

SPECI	ALITY:	DATE:		
S.NO	CRITERIA	MARKS	MARKS	
		ALLOTTED	OBTAINED	
1.	CHAPTER - I	(11)		
	a. Introduction – Background and Need for the	4		
	study			
	b. Statement of the problem	1		
	c. Objectives & Hypothesis of the study	1		
	d. Operational Definition	2		
	e. Delimitations	1		
	f. Conceptual Framework & theory application	2		
2.	CHAPTER- II	(3)		
	a. Review of related literature	3		
3.	CHAPTER- III	(13)		
	a. Research Design	2		
	b. Variables	1		
	c. Setting & population	1		
	d. Sample selection (Inclusive & Exclusive)	2		
	criteria and techniques			
	e. Development and description of the tool	2		
	(Validity & Reliability)			
	f. Pilot study	2		
	g. Procedure for data collection/Intervention	2		
	Protocol			
	h. Ethical and legal considerations	1		
4.	CHAPTER –IV	(4)		
	a. Data analysis and Interpretations	4		
5.	CHAPTER – V	(5)		

	a. Discussion	5	
6.	CHAPTER-VI	(5)	
	a. Summary and conclusion	1	
	b. Implications	1	
	c. Recommendations	2	
	d. Limitations	1	
7.	DISSERTATION FORMAT	(4)	
	a. References	2	
	b. Total format/ Style of writing	2	
8.	PRESENTATION SKILLS	(5)	
	a. Content organization and sequence	2	
	b. Time Management	1	
	c. Voice – audibility, modulated and clear	2	
	TOTAL	50	

# **UNIVERSITY OF JAMMU**

# **INTERNAL ASSESSMENT PROFORMA FOR RESEARCH DISSERTATION**

S.NO	CRITERIA FOR EVALUATION	MARKS	MARKS
		ALLOTTED	OBTAINED
1.	SUBMISSION OF RESEARCH PROPOSAL	5	
	IN TIME		
2.	SELECTION OF RESEARCH PROBLEM	10	
3.	DAY TO DAY FEEDBACK TO THE	10	
	RESEARCH GUIDE		
4.	SUBMISSION OF FINAL DISSERTATION	5	
5.	CHAPTER WISE EVALUATION OF	50	
	RESEARCH PROJECT (AS PER		
	PROFORMA)		
6.	VIVA-VOCE INTERNAL EXAMINATION	20	
	TOTAL	100	
	TOTAL	100	