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( Declared as deemed to be university under section 3 of UGC act 1956)

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## CURRICULUM

### M.SC NURSING



**Amended in 2020**

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**Philosophy:**

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

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

**Sumandeep Vidyapeeth University believes that:**

1. Post Graduate programme is essential to prepare nurses to improve the quality of nursing education and practice in India.
2. Post graduate programme in nursing builds upon and extends competence acquired at the graduate levels, emphasizes application of relevant theories into nursing practice, education, administration and development of research skills.
3. The programme prepares nurses for leadership position in nursing and health fields who can function as nurse specialists, consultants, educators, administrators and researchers in a wide variety of professional settings in meeting the National priorities and the changing needs of the society.
4. This programme provides the basis for the post masteral programme in nursing. Further the programme encourages accountability and commitment to life long learning which fosters improvement of quality care.

**Aim:**

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

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

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

**Program Outcome:** At the end of four years MSc Nursing Programme the graduates shall be able to,

1. Demonstrate comprehensive and advanced understanding of the core issues and knowledge bases of nursing practice
2. Demonstrate skill in conducting nursing research, interpreting and utilizing the finding from health-related research
3. Demonstrate the ability to effectively communicate, and engage in collaborative intra and inter-professional relationships efforts, to develop and implement policies to improve health care delivery and outcomes.
4. Advocate for patients and families to provide cost-effective, culturally evidence-based, ethical, quality care in and across health care settings.
5. Demonstrate responsibility and accountability for ongoing professional development.

**Guidelines and Minimum Requirements for setting up of a College of Nursing**

1. Any organization under the Central Government, State Government, Local body or a Private or Public Trust, Mission, Voluntary registered under Society Registration Act or a Company registered under company's act wishes to open a M.Sc. Nursing

- programme, should obtain the No Objection/Essentiality certificate from the State Government.
- The Indian Nursing council on receipt of the proposal from the Institution to start nursing program, will undertake the **first inspection** to assess suitability with regard to physical infrastructure, clinical facility and teaching faculty in order to give permission to start the programme.
  - After the receipt of the permission to start the nursing programme from Indian Nursing Council, the institution shall obtain the approval from the State Nursing Council and University.
  - Institution will admit the students only after taking approval of State Nursing Council and University.
  - The Indian Nursing Council will conduct inspection every year till the first batch completes the programme. Permission will be given year by year till the first batch completes.
  - If the institution is recognized for B.Sc. (N) programme and if one batch has passed out after found suitable by INC, then the institution will be exempted from NOC/Essentiality certificate for M.Sc.(N) programme from the State Government.
  - Super Speciality Hospital\*** can start M.Sc.(N) programme, however they have to get NOC/Essentiality certificate from respective State Government to start the M.Sc. (N) programme.

#### STAFFING PATTERN:

##### M.Sc. (N)

If parent hospital is super-speciality hospital like cardio-thoracic hospital/cancer with annual intake 10 M.Sc(N) in cardio thoracic/cancer

Professor cum coordinator	:	1
Reader / Associate Professor	:	1
Lecturer	:	2

The above Faculty shall perform dual role.

##### B.Sc. (N) and M.Sc. (N)

Annual intake of 60 students in B.Sc. (N) and 25 students for M.Sc. (N) programme

Professor-cum-Principal	:	1
Professor-cum-Vice Principal	:	1
Reader / Associate Professor	:	1
Lecturer	:	5
Tutor / Clinical Instructor	:	19

Total

34

One in each specialty and all the M.Sc. (N) qualified teaching faculty will participate in all collegiate programmes.

**Teacher Student Ratio = 1: 10 for M.Sc.(N) programme.**

## **QUALIFICATIONS & EXPERIENCE OF TEACHERS OF COLLEGE OF NURSING**

**Sr. No.                      Post    Qualification & Experience**

**1. Professor-cum-Principal :**

- Masters Degree in Nursing
- 14 years experience after M.Sc. (N) in College of Nursing.
- 3 years experience in administration (Years of experience is relaxable if suitable candidate is not available) (If a candidate is not available, minimum 5 years of experience in college of nursing, with an aggregate of 14 years teaching experience)

**Desirable: Independent published work of high standard / doctorate degree / M. Phil.**

**2. Professor-cum-Vice:**

- Masters Degree in Nursing -14 years experience after M.Sc. (N) in College of Nursing.
- Years experience in administration (Years of experience is relaxable if suitable candidate is not available) (If a candidate is not available, minimum 5 years of experience in college of nursing, with an aggregate of 14 years teaching experience)

**Desirable: Independent published work of high standard / doctorate degree / M. Phil.**

**3. Reader / Associate Professor:**

- Master Degree in Nursing
- 10 years experience after M.Sc.(N) in a College of Nursing. (If a candidate is not available, 5 years of experience in College of Nursing with an aggregate of 10 years teaching experience.

**Desirable: Independent published work of high standard / doctorate degree / M. Phil.**

**4. Lecturer**

- Master Degree in Nursing.
- 3 years teaching experience after M.Sc. (N)

**Note: Qualifications & Experience of Nursing Teaching faculty relaxed till 2012 & placed under Annexure – I**

**External /Guest faculty may be arranged for the selected units in different subjects as required**

**NOTE:**

1. No part time nursing faculty will be counted for calculating total no. of faculty required for a college.
2. Irrespective of number of admissions, all faculty positions (Professor to Lecturer) must be filled.
3. For M.Sc.(N) programme appropriate number of M.Sc. faculty in each speciality be appointed subject to the condition that total number of teaching faculty ceiling is maintained.



4. All nursing teachers must possess a basic university or equivalent qualification as laid down in the schedules of the Indian Nursing Council Act, 1947. They shall be registered under the State Nursing Registration Act.
5. Nursing faculty in nursing college except tutor/clinical instructors must possess the requisite recognized postgraduate qualification in nursing subjects.
6. Holders of equivalent postgraduate qualifications, which may be approved by the Indian Nursing Council from time to time, may be considered to have the requisite recognized postgraduate qualification in the subject concerned.
7. All teachers of nursing other than Principal and Vice-Principal should spend at least 4 hours in the clinical area for clinical teaching and/or supervision of care every day.

**Other Staff (Minimum requirements)**

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

1. Ministerial		
A. Administrative Officer	:	1
B. Office Superintendent	:	1
C. PA to Principal	:	1
D. Accountant/Cashier	:	1
E. Upper Division Clerk	:	2
F. Lower Division Clerk	:	2
2. Store Keeper		
A. Maintenance of stores	:	1
B. Classroom attendants	:	2
C. Sanitary staff	:	As per the physical space
D. Security Staff	:	As per the requirement
3. Peons/Office attendants	:	4
4. Library		
A. Librarian	:	2
B. Library Attendants	:	As per the requirement
5. Hostel		
A. Wardens	:	2
B. Cooks, Bearers, Sanitary Staff	:	As per the requirement
C. Ayas /Peons	:	As per the requirement
D. Security Staff	:	As per the requirement
E. Gardeners & Dhobi (desirable)	:	Depends on structural facilities

**Eligibility Criteria/Admission Requirements:**

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

**Entrance / Selection test:**

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

## **Regulations for examination**

### **A. Eligibility for appearing for the examination**

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

### **B. Classification of results:**

- a. 50% pass in each of the theory and practical separately.
  - b. 50-59% Second division
  - c. 60-74% first division
  - d. 75% and above is distinction
  - e. For declaring the rank aggregate of 2 years marks to be considered.
1. If the candidate fails in either practicals or theory paper he/she has to reappear for both the papers (theory and practical)
  2. Maximum no. of attempts per subject is three (3) inclusive of first attempt. The maximum period to complete the course successfully should not exceed 4 years.
  3. Candidate who fails in any subject, shall be permitted to continue the studies into the second year. However the candidate shall not be allowed to appear for the Second year examination till such time that he/she passes all subjects of the first year M.Sc. nursing examination.

### **Practical:**

1. 4 hours of practical examination per student.
2. Maximum number of 10 students per day per speciality.
3. The examination should be held in clinical area only for clinical specialities
4. One internal and external should jointly conduct practical examination.
5. Examiner – Nursing faculty teaching respective speciality area in M.Sc. nursing programme with minimum 3 years experience after M.Sc nursing.

### **Dissertation**

- a. Evaluation of the dissertation should be done by the examiner prior to viva Duration: Viva-voce -minimum 30 minutes per student.

### **Guidelines for Dissertation**

Tentative Schedule for dissertation

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

Note: - Administrative approval and ethical clearance should be obtained.

### **A. Research Guides**

#### **a) Qualification of Guide**

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

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

#### **b) Guide – Students Ratio**

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

#### **c) Research Committee**

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

### **B. Duration**

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

- |              |   |          |
|--------------|---|----------|
| a. Available | : | 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.
g. <b>Total hours for 2 years</b>	:	<b>3440 hour</b>

#### Course of Instruction Theory Practical

1 <sup>st</sup> Year	Course Code	Theory (hrs)	Practical (hrs)
Nursing education	NCPG-101	150	150
Advance nursing practice	NCPG-102	150	200
Nursing Research and statistics	NCPG-103	150	100
*Clinical speciality –I	NCPG-104	150	650
<b>Total</b>		<b>600</b>	<b>1100</b>
2 <sup>nd</sup> Year			
Nursing Management	NCPG-201	150	150
Nursing Research(Dissertation)	NCPG-202		300
*Clinical Speciality-II	NCPG-203	150	950
<b>Total</b>		<b>300</b>	<b>1400</b>

Educational Visit 2 weeks

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

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

1 <sup>st</sup> Year	Course code	Theory			Practical		
		Hours	Internal	External	Hours	Internal	External
Nursing education	NCPG-101	3	25	75		50	50
Advance nursing practice	NCPG-102	3	25	75			
Nursing Research and statistics	NCPG-103	3	25**	75*			
Clinical speciality -I	NCPG-104	3	25	75		100	100
<b>Total</b>			<b>100</b>	<b>300</b>		<b>150</b>	<b>150</b>
2 <sup>nd</sup> Year							
Nursing Management	NCPG-201	3	25*	75			
Dissertation & Viva	NCPG-202					100	100
Clinical Speciality-II	NCPG-203	3	25	75		100	100
<b>Total</b>			<b>50</b>	<b>150</b>		<b>200</b>	<b>200</b>

\* Nursing research=50 and statistics=25



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

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

**Admission Strength:**

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

**Health Services:**

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

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

## First Year M.Sc Nursing

**Subject: Nursing Education**  
**Course Code: NCPG-101**

Theory : 150 Hours  
Practical : 150 Hours  
Total : 300 Hours

### Course Outcome:

At the completion of the course, the student shall be understand the 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.

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

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

**Course Content: -**

Units	Hours		Course Content
	Theory	Practical	
I	10	00	<b>1. Introduction: -</b> A. Educational: Definition, aims, concepts, philosophies & their education implications. B. Impact of Social, economical, political & technological changes on education: a. Professional education. b. Current trends and issues in education. c. Educational reforms and National Educational policy, various educational policy, various educational commissions – reports. d. Trends in development of nursing education in India.
II	20	30	<b>2. Teaching – Learning Process: -</b> A. Concepts of teaching and learning: Definition, theories of teaching and learning, relationship between teaching and learning. B. Educational aims and objectives; types, domains, levels, elements and writing of educational objectives C. Competency based education (CBE) and outcome based education (OBE) D. Instructional design: Planning and designing the lesson, writing lesson plan: meaning, its need and importance, formats. E. Instruction strategies – Lecture, discussion, demonstration, simulation, laboratory, seminar, panel, symposium, problem solving, problem based learning (PBL), workshop, project, role – play (socio – drama), clinical teaching methods, programmed instruction, self directed learning (SDL), micro teaching, computer assisted instruction (CAI), Computer assisted learning (CAL).
III	10	10	<b>3. Instructional media and methods: -</b> A. Key concepts in the selection and use of media in education B. Developing learning resource material using different media C. Instructional aids – types, uses, selection, preparation, utilization. D. Teacher's role in procuring and managing instructional Aids – Project and non – projected aids, multi media, video – tele conferencing etc. E.
IV	10	00	<b>4. Measurement and evaluation: -</b> A. Concept and nature of measurement and evaluation, meaning, process, purposes, problems in evaluation and measurement. B. Principles of assessment, formative and summative assessment – internal assessment external examination, advantages and disadvantages. C. Criterion and norm referenced evaluation,
V	12	10	<b>5. Standardized and non – standardized tests: -</b>

			<p>A. Meaning, characteristics, objectivity, validity, reliability, usability, norms, construction of tests :</p> <ol style="list-style-type: none"> <li>Essay, short answer, Questions and multiple choice questions.</li> <li>Rating scales, checklist, OSCE / OSPE (Objective structured clinical / Practical examination).</li> <li>Differential scales and summated scale, sociometry, anecdotal record, attitude scale, critical incident technique.</li> </ol> <p>B. Question bank – Preparation, validation, moderation by panel, utilization.</p> <p>C. Developing a system for maintaining confidentiality.</p>
<b>VI</b>	8	5	<p><b>6. Administration, Scoring and Reporting: -</b></p> <ol style="list-style-type: none"> <li>Administering a test: scoring, grading versus marks</li> <li>Objective tests, scoring essay test, methods of scoring, Item analysis.</li> </ol>
<b>VII</b>	12	6	<p><b>7. Standardized Tools: -</b></p> <ol style="list-style-type: none"> <li>Test of intelligence aptitude, interest, personality, achievement, socio – economic status scale, tests for special mental and physical abilities and disabilities.</li> </ol>
<b>VIII</b>	5	6	<p><b>8. Nursing Educational programs: -</b></p> <ol style="list-style-type: none"> <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.phill and Ph.D.) in Nursing, post basic diploma programs, nurse practitioner programs.</li> </ol>
<b>IX</b>	12	25	<p><b>9. Continuing Education in Nursing: -</b></p> <ol style="list-style-type: none"> <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 education programs.</li> <li>Research in Continuing education.</li> <li>Distance education in nursing.</li> </ol>
<b>X</b>	10	10	<p><b>10. Curriculum Development: -</b></p> <ol style="list-style-type: none"> <li>Definition, Curriculum determinants, process and steps of curriculum development, Curriculum models, Types and Framework.</li> <li>Formulation of philosophy, objectives, selection and organization of learning experiences; master plan, course plan, unit plan.</li> <li>Evaluation strategies, process of curriculum change, role of students, faculty, administrators, statutory bodies and other stakeholders.</li> <li>Equivalency of courses: Transcripts, credit system.</li> </ol>
<b>XI</b>	8	4	<p><b>11. Teacher preparation: -</b></p> <ol style="list-style-type: none"> <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 programs</li> <li>Critical analysis of various programs of teacher</li> </ol>



			education in India.
<b>XII</b>	10	5	<b>12. Guidance and Counseling: -</b> A. Concept, principles need, difference between guidance and counseling, trends and issues. B. Guidance and counseling services: diagnostic and remedial. C. Coordination and organization of services D. Techniques of counseling: Interview, case work, characteristics of counselor, problems in counseling. E. Professional preparation and training for counseling.
<b>XIII</b>	15	10	<b>13. Administration of Nursing Curriculum: -</b> A. Role of curriculum coordinator – planning, implementation and evaluation. B. Evaluation of educational programs in nursing – course and program. C. Factors influencing faculty staff relationship and techniques of working together. D. Concept of faculty supervisor (dual) position. E. Curriculum research in nursing F. Different models of collaboration between education and service.
<b>XIV</b>	10	00	<b>14. Management of nursing educational institution: -</b> A. Planning, Organizing, staffing, budgeting, recruitment, discipline, public relation, performance appraisal, welfare services, library services, hostel.
<b>XV</b>	5	5	<b>15. Development and maintenance of standards and accreditation in nursing education programs.</b> A. Role of Indian Nursing Council, State Registration Nursing Council, Boards and University. B. Role of Professional associations and unions.

#### Activities:

1. Framing philosophy, aims and objectives.
2. Lesson Planning.
3. Micro teaching-2.
4. Conduct practice teachings using different teaching strategies -10 (like lecture cum discussion, demonstration- lab method, field trips, seminars, project, role play, panel discussion, clinical methods etc)
5. Preparation and utilization of instructional Aids using different media.
6. Develop course plans, unit plans, rotation plans.
7. Conduct a continuing education workshop.
8. Annotated bibliography.
9. Critical evaluation of any nursing education program offered by a selected institution.
10. Planning and Organizing field visits.
11. Educational visits.
12. Field visits (INC/SNRC) to get familiar with recognition/registration process.
13. Construct, administer and evaluate tools (objective & essay type test, observation checklist, rating scale etc).
14. Observe and practice application of various non-standardized tests (intelligence, Aptitude, Personality, Sociometry, physical & mental disabilities tests.)

#### Methods of Teaching

1. Lecture cum discussion
2. Demonstration/ Return demonstration
3. Seminar / Presentations
4. Project work

5. Field visits
6. Workshop

### **Methods of evaluation**

1. Tests
2. Presentation
3. Project work
4. Written assignments

### **Internal Assessment**

#### **Techniques**

Test- (2 tests)

Assignment

Seminar/presentation

#### **Weightage**

50

25

25

-----  
100  
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#### **Practical – Internal assessment**

Learning resource material

Practice Teaching

Conduct Workshop

/Short Term Course

25

50

25

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

Practice teaching- 1-

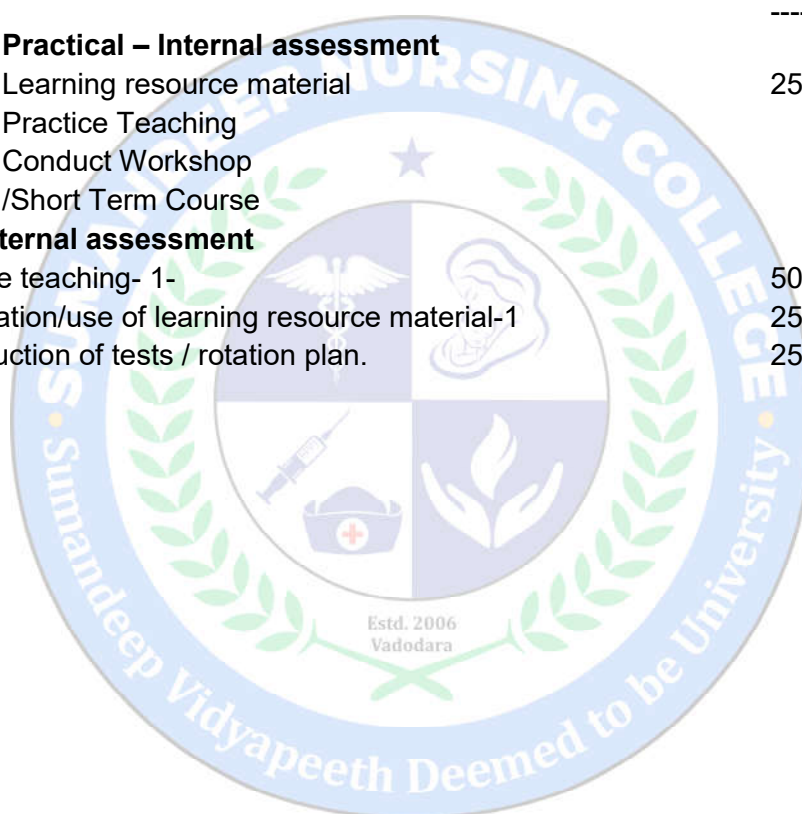
Preparation/use of learning resource material-1

Construction of tests / rotation plan.

50

25

25



## FIRST YEAR M.Sc Nursing

**Subject: Advanced Nursing Practice**  
**Course Code: NCPG-102**

Theory : 150 Hours  
Practical : 200 Hours  
Total : 350 Hours

### Course Outcome:

At the completion of the course, the student shall be understand the concepts and constructs of theoretical basis of advance nursing practice and critically analyze different theories of nursing and other disciplines.

### Objectives:

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

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

### Course Content:

Unit	Hours	Content
I	10	<b>1. Nursing as a Profession: -</b> a. History of development of nursing profession, Characteristics, criteria of the profession, perspective of nursing profession national, global b. Code of ethics (INC), code of professional conduct (INC), autonomy and accountability, assertiveness, visibility of nurses, legal considerations, c. Role of regulatory bodies d. Professional organizations and unions – self defense, individual and collective bargaining. e. Educational preparations, continuing education, career opportunities, professional advancement & role and scope of nursing education. f. Role of research, leadership and management. g. Quality assurance in Nursing (INC). h. Futuristic nursing.
II	5	<b>2. Health care delivery: -</b> A. Health care environment, economics, constraints, planning process, policies, political process vis a vis nursing profession. B. Health care delivery system – national, state, district and local level. C. Major stakeholders in the health care system – Government, non – govt, industry and other professionals. D. Patterns of nursing care delivery in India. E. Health care delivery concerns, national health and family welfare programs, inter – sectoral coordination, role of non – governmental agencies.

		<p>F. Information, education and communication (IEC).</p> <p>G. Tele – Medicine.</p>
III	10	<p><b>3. Genetics: -</b></p> <p>A. Review of cellular division, mutation and law of inheritance, human genome project, The Genomic era.</p> <p>B. Basic concepts of Genes, Chromosomes &amp; DNA.</p> <p>C. Approaches to common genetic disorders.</p> <p>D. Genetic testing – basis of genetic diagnosis, Pre symptomatic and predisposition testing, Prenatal diagnosis &amp; Screening, Ethical, legal &amp; Psychosocial issues in genetic testing.</p> <p>E. Genetic counseling.</p> <p>F. Practical application of genetics in nursing.</p>
IV	10	<p><b>4. Epidemiology: -</b></p> <p>A. Scope, epidemiological approach and methods,</p> <p>B. Morbidity, mortality,</p> <p>C. Concepts of causation of diseases and their screening.</p> <p>D. Application of epidemiology in health care delivery, Health surveillance and health informatics</p> <p>E. Role of Nurse.</p>
V	20 +2	<p><i>The following addition in the Syllabus of M.SC Nursing (First Year) was discussed in the Board of studies meeting (BOS). (Board of Study letter No: SNC/2022/BOS/422 dated 20/06/2020 and vide Notification of Board of Management resolution reference number: SVDU/RI2412-FI2022-23 dated 27/05/2023</i></p> <p><b>5. Bio – Psycho social pathology: -</b></p> <p>A. Pathophysiology and Psychodynamics of disease causation.</p> <p>B. Life processes, homeostatic mechanism biological and psycho – social dynamics in causation of disease, life style.</p> <p>C. Common problems; Oxygen insufficiency, fluid and electrolyte imbalance, nutritional problems, hemorrhage and shock, altered body temperature, unconsciousness, sleep pattern and its disturbances, pain, sensory deprivation.</p> <p>D. Treatment aspects: Pharmacological and Pre – Post operative care aspects,</p> <p>E. Cardio pulmonary resuscitation.</p> <p>F. End of life Care.</p> <p>G. Infection prevention (including HIV) and standard safety measures, bio – medical waste management.</p> <p>H. Role of nurse – Evidence based nursing practice; best Practices.</p> <p>I. Innovations in nursing.</p> <p><b>J. Impact of covid -19 and its Management</b></p>
VI	20	<p><b>6. Philosophy and Theories of Nursing: -</b></p> <p>A. Values, Conceptual models, approaches</p> <p>B. Nursing theories; Nightingale's, Henderson's, Roger's, Peplau's, Abdell's, Lewine's Orem's, Johnson's King's, Neuman's, Roy's, Watson's, etc and their applications,</p> <p>C. Health belief models, Communication and management, etc</p> <p>D. Concept of self health.</p> <p>F. Evidence based practice model.</p>
VII	10	<p><b>7. Nursing process approach: -</b></p>



		<p>A. Health Assessment – illness status of patients / Clients (Individuals, family, community) identification of Health – illness problems, health behaviors, signs and symptoms of clients.</p> <p>B. Methods of collection, analysis and utilization of data relevant to nursing process.</p> <p>C. Formulation of nursing care plans, health goals, implementation, modification and evaluation of care.</p>
<b>VIII</b>	30	<p><b>8. Psychological aspects and Human relations: -</b></p> <p>A. Human behavior, Life processes &amp; growth and development, personality development, defense mechanisms,</p> <p>B. Communication, interpersonal relationships, individual and group dynamics, and organizational behavior,</p> <p>C. Basic human needs, Growth and development, (Conception through preschool, School age through adolescence, Young &amp; middle adult, and Older adult)</p> <p>D. Sexuality and Sexual health</p> <p>E. Stress and adaptation, crisis and its intervention,</p> <p>F. Coping with loss, death and grieving,</p> <p>G. Principles and techniques of Counseling.</p>
<b>IX</b>	10	<p><b>9. Nursing practice: -</b></p> <p>A. Framework, Scope and trends.</p> <p>B. Alternative modalities of care, alternative systems of health and complimentary therapies.</p> <p>C. Extended and expanded role of the nurse, in promotive, preventive, curative and restorative health care delivery system in community and institutions.</p> <p>D. Health promotion and primary health care.</p> <p>E. Independent practice issues, - Independent nurse – midwifery practitioner.</p> <p>F. Collaboration issue and models – within and outside nursing.</p> <p>G. Models of Prevention,</p> <p>H. Family nursing, Home nursing,</p> <p>I. Gender sensitive issues and women empowerment.</p> <p>J. Disaster nursing</p> <p>K. Geriatric considerations in nursing.</p> <p>L. Evidence based nursing practice – Best practices</p> <p>M. Trans – Cultural nursing.</p>
<b>X</b>	25	<p><b>10. Computer applications for patient care deliver system and nursing practice: -</b></p> <p>A. Use of computers in teaching, learning, research and nursing practice.</p> <p>B. Windows, MS office: Word, Excel, Power Point,</p> <p>C. Internet, literature search,</p> <p>D. Hospital Management information system: softwares.</p>
<b>XI</b>	10	<p><b>11. Evidence based Nursing Education</b></p> <p>A. <i>Introduction to evidence based nursing education.</i></p> <p>B. <i>Sources of evidences in evidence based practice and Understanding types of reviews.</i></p> <p>C. <i>Appraising the evidence &amp; formulating research question.</i></p> <p>D. <i>Use of advance search engine/filters.</i></p> <p>E. <i>Introduction to Research design</i></p> <p>F. <i>Identifying the levels of evidences.</i></p>

## Practical

### A. Clinical Posting in the following areas:

- |                                    |   |         |
|------------------------------------|---|---------|
| a. Specialty area- in-patient unit | - | 2 weeks |
| b. Community health center/PHC     | - | 2 weeks |
| c. Emergency/ICU                   | - | 2 weeks |

### B. Activities

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

### C. Methods of Teaching

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

### D. Methods of evaluation

- Tests
- Presentation
- Project work
- Written assignments

## Advance Nursing Procedures

Definition, Indication and nursing implications;

- CPR, TPN, Hemodynamic monitoring, Endotracheal intubation, Tracheostoma, mechanical ventilation, Pacemaker, Hemodialysis, Peritoneal dialysis, LP, BT Pleural and abdominal paracentesis OT techniques, Health assessment, Triage, Pulse oxymetry.

## Internal Assessment

### Techniques

Test - (2 tests)

Assignment

Seminar/presentation

### Weightage

50

25

25

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100  
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**First Year M.Sc Nursing  
Clinical Specialty – I**

**Subject: Medical Surgical Nursing**

**Course Code: NCPG-104**

Theory: - 150 Hours

Practical: - 650 Hours

Total: - 800 Hours

**Course Outcome:** After completion of M.Sc Nursing programme in Medical Surgical Nursing postgraduates shall be able to:

1. Appreciate the trends & issues in the field of Medical Surgical Nursing as a speciality and apply concepts & theories related to health promotion.
2. Integrate the concept of family centered nursing care with associated disorder such as genetic, congenital and long-term illness.
3. Establish caring and empathetic interpersonal relationships with patients and aggregates in various health care settings.
4. Demonstrate skills in techniques of basic and advanced nursing practice skills
5. Incorporate evidence-based Nursing practice and identify the areas of research in the field of Medical Surgical Nursing.
6. Appreciate the role of alternative systems of Medicine in care of patients
7. Appraise the legal & ethical issues relevant to Medical-Surgical Nursing.

**Objectives:**

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

1. Appreciate the trends & issues in the field of Medical – Surgical Nursing as a speciality.
2. Apply concepts & theories related to health promotion.
3. Appreciate the client as a holistic individual.
4. Perform physical, psychosocial assessment of Medical – Surgical patients.
5. Apply Nursing process in providing care to patients.
6. Integrate the concept of family centered nursing care with associated disorder such as genetic, congenital and long-term illness.
7. Recognize and manage emergencies with Medical- Surgical patients.
8. Describe various recent technologies & treatment modalities in the management of critically ill patients.
9. Appreciate the legal & ethical issues relevant to Medical – Surgical Nursing.
10. Prepare a design for layout and management of Medical – Surgical Units.
11. Appreciate the role of alternative systems of Medicine in care of patients.
12. Incorporate evidence based Nursing practice and identify the areas of research in the field of Medical – Surgical Nursing.
13. Recognize the role of Nurse practitioner as a member of the Medical – Surgical health team.
14. Teach Medical – Surgical Nursing to undergraduate nursing students & in-service nurses.

### COURSE CONTENT:

Unit	Hours	Content
I	05	<b>1. Introduction: -</b> A. Historical development of Medical – Surgical Nursing in India B. Current status of health and disease burden in India C. Current concept of health D. Trends & issues in Medical – Surgical Nursing E. Ethical & Cultural issues in Medical – Surgical Nursing F. Right of Patients G. National Health policy, special laws & Ordinances relating to older people H. National goals I. Five year plans J. National health programs related to adult health
II	20	<b>2. Health Assessment of patients: -</b> A. History taking B. Physical examination of various systems C. Nutritional assessment D. Related investigations and diagnostic assessment
III	5	<b>3. Care in hospital settings: -</b> A. Ambulatory care. B. Acute and Critical care C. Long term care D. Home Health Care E. Characteristics, care models, practice settings, interdisciplinary team. F. Hospitalization – effects of hospitalization on the patient & family. G. Stressors & reactions related to disease process H. Nursing care using Nursing process approach.
IV	10	<b>4. Management of patients with disorders of Gastro intestinal tract: -</b> A. Review of anatomy and Physiology B. Common Disorders – etiology, pathophysiology, Clinical manifestations, complications, prognosis. C. Health Assessment – History taking, Physical examination investigation and diagnostic assessment. D. Treatment modalities and trends E. Nursing Management F. Related research studies G. Evidence based nursing practice H. Rehabilitation and follow – up
V	10	<b>5. Management of patients with disorders of nervous system: -</b> A. Review of anatomy and physiology B. Common Disorders – etiology, patho physiology, clinical manifestations, Complications, prognosis. C. Health assessment – History taking, physical examination, investigation and diagnostic assessment. D. Treatment modalities and trends. E. Nursing Management F. Related research studies G. Evidence based nursing practice. H. Rehabilitation and follow – up
VI	10	<b>6. Management of Patients with disorders of respiratory system: -</b> A. Review of anatomy and physiology B. Common Disorders – etiology, patho physiology, clinical



		<p>manifestations, Complications, prognosis.</p> <p>C. Health assessment – History taking, physical examination, investigation and diagnostic assessment.</p> <p>D. Treatment modalities and trends.</p> <p>E. Nursing Management</p> <p>F. Related research studies</p> <p>G. Evidence based nursing practice.</p> <p>H. Rehabilitation and follow – up</p>
<b>VII</b>	10	<p><b>7. Management of Patients with disorders of Cardio vascular system: -</b></p> <p>A. Review of anatomy and physiology</p> <p>B. Common Disorders – etiology, patho physiology, clinical manifestations, Complications, prognosis.</p> <p>C. Health assessment – History taking, physical examination, investigation and diagnostic assessment.</p> <p>D. Treatment modalities and trends.</p> <p>E. Nursing Management</p> <p>F. Related research studies</p> <p>G. Evidence based nursing practice.</p> <p>H. Rehabilitation and follow – up</p>
<b>VIII</b>	5	<p><b>8. Management of Patients with disorders of blood: -</b></p> <p>A. Review of anatomy and physiology</p> <p>B. Common Disorders – etiology, patho physiology, clinical manifestations, Complications, prognosis.</p> <p>C. Health assessment – History taking, physical examination, investigation and diagnostic assessment.</p> <p>D. Treatment modalities and trends.</p> <p>E. Nursing Management</p> <p>F. Related research studies</p> <p>G. Evidence based nursing practice.</p> <p>H. Rehabilitation and follow – up</p>
<b>IX</b>	10	<p><b>9. Management of Patients with disorders of genito urinary system: -</b></p> <p>A. Review of anatomy and physiology</p> <p>B. Common Disorders – etiology, patho physiology, clinical manifestations, Complications, prognosis.</p> <p>C. Health assessment – History taking, physical examination, investigation and diagnostic assessment.</p> <p>D. Treatment modalities and trends.</p> <p>E. Nursing Management</p> <p>F. Related research studies</p> <p>G. Evidence based nursing practice.</p> <p>H. Rehabilitation and follow – up</p>
<b>X</b>	10	<p><b>10. Management of Patients with disorders of endocrine system: -</b></p> <p>A. Review of anatomy and physiology</p> <p>B. Common Disorders – etiology, patho physiology, clinical manifestations, Complications, prognosis.</p> <p>C. Health assessment – History taking, physical examination, investigation and diagnostic assessment.</p> <p>D. Treatment modalities and trends.</p> <p>E. Nursing Management</p> <p>F. Related research studies</p> <p>G. Evidence based nursing practice.</p> <p>H. Rehabilitation and follow – up</p>
<b>XI</b>	10	<p><b>11. Management of Patients with disorders of Musculo - Skeletal system:-</b></p> <p>A. Review of anatomy and physiology</p>

		<ul style="list-style-type: none"> <li>B. Common Disorders – etiology, patho physiology, clinical manifestations, Complications, prognosis.</li> <li>C. Health assessment – History taking, physical examination, investigation and diagnostic assessment.</li> <li>D. Treatment modalities and trends.</li> <li>E. Nursing Management</li> <li>F. Related research studies</li> <li>G. Evidence based nursing practice.</li> <li>H. Rehabilitation and follow – up</li> </ul>
<b>XII</b>	<b>8</b>	<b>12. Management of Patients with disorders of integumentary system: -</b> <ul style="list-style-type: none"> <li>A. Review of anatomy and physiology</li> <li>B. Common Disorders – etiology, patho physiology, clinical manifestations, Complications, prognosis.</li> <li>C. Health assessment – History taking, physical examination, investigation and diagnostic assessment.</li> <li>D. Treatment modalities and trends.</li> <li>E. Nursing Management</li> <li>F. Related research studies</li> <li>G. Evidence based nursing practice.</li> <li>H. Rehabilitation and follow – up</li> </ul>
<b>XIII</b>	<b>5</b>	<b>13. Management of Patients with disorders of Eye and ENT: -</b> <ul style="list-style-type: none"> <li>A. Review of anatomy and physiology</li> <li>B. Common Disorders – etiology, patho physiology, clinical manifestations, Complications, prognosis.</li> <li>C. Health assessment – History taking, physical examination, investigation and diagnostic assessment.</li> <li>D. Treatment modalities and trends.</li> <li>E. Nursing Management</li> <li>F. Related research studies</li> <li>G. Evidence based nursing practice.</li> <li>H. Rehabilitation and follow – up</li> </ul>
<b>XIV</b>	<b>8</b>	<b>14. Management of Patients with disorders of reproductive system: -</b> <ul style="list-style-type: none"> <li>A. Review of anatomy and physiology</li> <li>B. Common Disorders – etiology, patho physiology, clinical manifestations, Complications, prognosis.</li> <li>C. Health assessment – History taking, physical examination, investigation and diagnostic assessment.</li> <li>D. Treatment modalities and trends.</li> <li>E. Nursing Management</li> <li>F. Related research studies</li> <li>G. Evidence based nursing practice.</li> <li>H. Rehabilitation and follow – up</li> </ul>
<b>XV</b>	<b>8</b>	<b>15. Geriatric Nursing: -</b> <ul style="list-style-type: none"> <li>A. Nursing Assessment – History and Physical assessment</li> <li>B. Ageing;</li> <li>C. Demography; Myths and realities</li> <li>D. Concepts and theories of ageing.</li> <li>E. Cognitive Aspects of Ageing</li> <li>F. Normal biological ageing.</li> <li>G. Age related body systems changes.</li> <li>H. Psychosocial Aspects of Aging</li> <li>I. Medications and elderly.</li> <li>J. Stress &amp; coping in older adults.</li> <li>K. Common Health Problems &amp; Nursing Management</li> </ul>

		L. Psychosocial and Sexual M. Abuse of elderly. N. Role of nurse for care of elderly: ambulation, nutritional, Communicational, Psychosocial and spiritual. O. Role of nurse for caregivers of elderly. P. Role of family and formal and non formal caregivers. Q. Use of aids and prosthesis (hearing aids, dentures) R. Legal & Ethical Issues. S. Provisions and Programmes for elderly; privileges, Community Programs and health services; T. Home and institutional care. U. Issues, problems and trends
<b>XVI</b>	<b>8</b>	<b>16. Management of Patients with communicable and sexually transmitted diseases: -</b> A. Review of immune system B. Common Disorders of immune system – HIV / AIDS C. Review of infectious disease process. D. Communicable Diseases – etiology, patho physiology, clinical manifestations, Complications, prognosis E. Health assessment – History taking, physical examination, investigation and diagnostic assessment. F. Treatment modalities and trends. G. Nursing Management H. Related research studies I. Evidence based nursing practice. J. Rehabilitation and follow – up
<b>XVII</b>	<b>8</b>	<b>17. Emergency, trauma and multi – system organ failure:-</b> A. DIC (disseminated intravascular coagulation) B. Trauma, burns, Poisoning C. Etiology, patho physiology, clinical manifestations, Complications, prognosis D. Health assessment – History taking, physical examination, investigation and diagnostic assessment. a. Treatment modalities and trends. b. Nursing Management. c. Related research studies. d. Evidence based nursing practice. e. Rehabilitation and follow – up.

### Practical

Total = 660 Hours  
 1 Week = 30  
 Hours

<b>Sr. No.</b>	<b>Dept. / Unit</b>	<b>No. of week</b>	<b>Total Hours</b>
1	General Medical Ward	4	120 Hours
2	General Surgical Ward	4	120 Hours
3	ICUs	4	120 Hours
4	Oncology	2	60 Hours
5	Ortho	2	60 Hours
6	Cardio	2	60 Hours
7	Emergency Department	2	60 Hours
8	Neuro	2	60 Hours
	<b>Total</b>	<b>22 Weeks</b>	<b>660 Hours</b>

**Student Activities: -**

1. Clinical presentations
2. History taking
3. Health Assessment
4. Nutritional Assessment
5. Health Education related to disease conditions
6. Case studies
7. Project work
8. Field visit





**First Year M.Sc Nursing  
Clinical Specialty – I**

**Subject: Obstetric and Gynecological Nursing.**

**Course Code: NCPG-104**

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

**Course Outcome:**

After completion of M.Sc Nursing programme in Obstetrics and Gynecological Nursing, postgraduates shall be able to:

1. Appreciate the trends in the field of midwifery, obstetrics and gynecology as a speciality.
2. Describe the concepts of biophysical, psychological and spiritual aspects of normal pregnancy, labor and puerperium and provide comprehensive nursing care to women with obstetrical and gynecological conditions.
3. Describe the recent advancement in contraceptive technology and birth control measures Identify and Manage obstetrical and neonatal emergencies as per protocol.
4. Develop standards for obstetrical and gynecological nursing practice.
5. Incorporate evidence-based nursing practice and identify the areas of research in the field of obstetrical and gynecological nursing and function as independent midwifery nurse practitioner

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

1. Appreciate the trends in the field of midwifery, obstetrics and gynecology as a speciality.
2. Describe the population dynamics and indicators of maternal and child health.
3. Describe the concepts of biophysical, psychological and spiritual aspects of normal pregnancy, labor and Puerperium.
4. Provide comprehensive nursing care to women during reproductive period and newborns.
5. Integrate the concepts of family centered nursing care and nursing process approach in obstetric and gynecological nursing.
6. Identify and analyze the deviations from normal birth process and refer appropriately.
7. Describe the pharmacological agents, their effects during pregnancy, child birth, Puerperium, lactation and the role of nurse.
8. Counsel adolescents, women and families on issues pertaining to pregnancy, child birth and lactation.
9. Describe the role of various types of complementary and alternative therapies in obstetric and gynecological nursing.
10. Identify the areas of research in the field of obstetric and gynecological nursing.
11. Describe the recent advancement in contraceptive technology and birth control measures.
12. Appreciate the legal and ethical issues pertaining to obstetric and gynecological nursing.
13. Incorporate evidence based nursing education for obstetric and gynecological nursing cares.
14. Apply the evidence based nursing practices for obstetric and gynecological nursing interventions.
15. Utilize the critical appraisal skills and be able to apply the research evidences.

**Course Content**

Units	Hours	Content
I	10	<b>1. Introduction</b> <ul style="list-style-type: none"> <li>A. Historical and contemporary perspectives</li> <li>B. Epidemiological aspects of maternal and child health</li> <li>C. Magnitude of maternal and child health problems</li> <li>D. Issues of maternal and child health : Age, Gender, Sexuality, psycho Socio cultural factors</li> <li>E. Preventive obstetrics</li> <li>F. National health and family welfare programs related to maternal and child health: health care delivery system-National Rural health mission, Role of NGO's</li> <li>G. Theories, models and approaches applied to midwifery practice</li> <li>H. Role and scope of midwifery practice: Independent Nurse midwifery practitioner</li> <li>I. Legal and Ethical issues: Code of ethics and standards of midwifery practice, standing orders.</li> </ul>
II	15	<b>2. Human reproduction</b> <ul style="list-style-type: none"> <li>A. Review of anatomy and physiology of human reproductive system: male and female</li> <li>B. Hormonal cycles</li> <li>C. Embryology</li> <li>D. Genetics, teratology and counseling</li> <li>E. Clinical implications</li> </ul>
III	25	<b>3. Pregnancy</b> <ul style="list-style-type: none"> <li>A. Maternal adaptation : Physiological, psychosocial <ul style="list-style-type: none"> <li>a. Assessment – Maternal and fetal measures Maternal measures:History taking , examinationGeneral, physical and obstetrical measure, identification of high risk.</li> <li>b. Fetal measure- clinical parameters; biochemical- human estriol, Maternal Serum Alfa Feto Protein, Acetyl Choline esterase (AchE), Triple Test Amniocentesis, Cordocentesis, chorionic villus sampling (CVS)).</li> <li>c. Biophysical- (US IMAGING, Foetal movement count, Ultra Sonography, Cardiotocography, cardiotomography, Non Stress Test(NST), Contraction stress test(CST), amnioscopy, foetoscopy.</li> <li>d. Radiological examination,</li> </ul> </li> <li>B. Interpretation of diagnostic tests and nursing implications</li> <li>C. Nursing managementof the pregnant women, minor disorders of pregnancy and management, preparation for child birth and parenthood, importance of institutional delivery , choice of birth setting, importance and mobilizing of transportation, prenatal counseling, role of nurse and crisis intervention, identification of high risk pregnancy and refer</li> <li>D. Alternative/complementary therapies</li> </ul>
IV	25	<b>4. Normal Labour and nursing management:</b> <ul style="list-style-type: none"> <li>A. Essential factors of labour</li> <li>B. Stages and onset</li> </ul>

		<p><b>First stage: Physiology of normal labour</b></p> <ul style="list-style-type: none"> <li>A. Use of partograph: Principles, use and critical analysis, evidence based studies</li> <li>B. Analgesia and anesthesia in labour</li> <li>C. Nursing management</li> </ul> <p><b>Second stage</b></p> <ul style="list-style-type: none"> <li>A. Physiology , intrapartum monitoring</li> <li>B. Nursing management.</li> <li>C. Resuscitation , immediate newborn care and initiate breast feeding (Guidelines of National neonatology forum of India)</li> </ul> <p><b>Third stage</b></p> <ul style="list-style-type: none"> <li>A. Physiology and nursing management</li> </ul> <p><b>Fourth stage – Observation, critical analysis and Nursing management.</b></p> <ul style="list-style-type: none"> <li>A. Various child birth practice: water birth, position change etc.</li> <li>B. Evidence based practice in relation to labour intervention</li> </ul> <p><b>Role of nurse midwifery practitioner</b></p> <ul style="list-style-type: none"> <li>A. Alternative/complementary therapies</li> </ul>
V	20	<p><b>5. Normal Puerperium and nursing management</b></p> <ul style="list-style-type: none"> <li>A. Physiology of Puerperium</li> <li>B. Physiology of lactation, lactation management, exclusive breast feeding ,Baby Friendly Hospital Initiative(BFHI)</li> <li>C. Assessment of postnatal women.</li> <li>D. Minor discomforts and complications of Puerperium</li> <li>E. Management of mothers during Puerperium: Postnatal exercises Rooming in, bonding, warm chain</li> <li>C. Evidence based studies.</li> </ul> <p><b>Role of nurse midwifery practitioner</b></p> <ul style="list-style-type: none"> <li>A. Alternative/complementary therapies</li> </ul>
VI	20	<p><b>6. Normal Newborn</b></p> <ul style="list-style-type: none"> <li>A. Physiology and characteristics of normal newborn</li> <li>B. Physical and Behavioral assessment of newborn</li> <li>C. Needs of newborn</li> <li>D. Essential newborn care: Exclusive breast feeding, Immunization, Hygiene measures, Newborn nutrition</li> <li>E. Organization of neonatal care, services(Levels), transport, neonatal intensive care unit, organization and management of nursing services in NICU.</li> <li>F. Observation and care of newborn</li> <li>G. Parenting process</li> </ul>
VII	10	<p><b>7. Pharmoco dynamics in obstetrics</b></p> <ul style="list-style-type: none"> <li>A. Drugs used in pregnancy, labour, post- partum and newborn</li> <li>B. Calculation of drug dose and administration □□Effects of drugs used</li> <li>C. Anesthesia and analgesia in obstetrics</li> <li>D. Roles and responsibilities of midwifery nurse practitioner</li> <li>E. Standing orders and protocols and use of selected lifesaving drugs and interventions of obstetric emergencies approved by the MOHFW.</li> </ul>

VIII	10	<b>8. Family welfare services</b> A. Population dynamics B. Demography trends: vital statistics, calculation of indicators especially maternal and neonatal mortality rates and problems and other health problems C. Recent advancement in contraceptive technology D. Role of nurses in family welfare programs in all settings E. Role of independent nurse midwifery practitioner F. Family life education G. Evidence based studies H. Information, Education and Communication(IEC) I. Management information and evaluation system(MIES). J. Teaching and supervision of health team members
IX	5	<b>9. Infertility</b> A. Primary and secondary causes B. Diagnostic procedures C. Counseling: ethical and legal aspects of assisted reproductive technology(ART) D. Recent advancement in infertility management. E. Adoption procedures F. Role of nurses in infertility management
X	5	<b>10. Menopause</b> A. Physiological, psychological and social aspects B. Hormone Replacement Therapy C. Surgical menopause D. Counseling and guidance E. Role of midwifery nurse practitioner
XI	5	<b>11. Abortion</b> A. Types, causes B. Legislations, Clinical rights and professional responsibility C. Abortion procedures D. Complications E. Nursing management F. Integrate evidence for legal aspects of abortion G. Role of midwifery nurse practitioner

#### Practical.

Total = 660 Hours

1 week = 30 Hours

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



**Procedures observed:**

1. Diagnostic investigations: amniocentesis, chordocentesis, chorionic villi sampling.
2. Infertility management: artificial reproduction : artificial insemination, invitro fertilization, and related procedures

**Procedures assisted:**

1. Medical termination of pregnancy.

**Procedures performed:**

- |  |   |    |
|--|---|----|
| 1. Antenatal assessment                          | - | 20 |
| 2. Postnatal assessment                          | - | 20 |
| 3. Assessment during labour : use of partograph  | - | 20 |
| 4. Per vaginal examination                       | - | 20 |
| 5. Conduct of normal delivery                    | - | 20 |
| 6. Episiotomy and suturing-                      | - | 10 |
| 7. Setting up of delivery areas                  | - | 2  |
| 8. Insertion of intra uterine devices( copper T) | - | 1  |

**Others:**

- |  |   |   |
|--|---|---|
| 1. Nursing Process application / Care Study        | - | 4 |
| 2. Clinical Presentation                           | - | 2 |
| 3. Clinical Presentation attended                  | - | 5 |
| 4. Clinical Demonstration                          | - | 2 |
| 5. Clinical teaching                               | - | 2 |
| 6. Seminar   | - | 5 |
| 7. Seminar attended                                | - | 5 |
| 8. Class room teaching                             | - | 2 |
| 9. Field visit                                     | - | 1 |
| 10. Identification of high risk women and referral |   |   |
| 11. Health education: to women and their families  |   |   |
| 12. Motivation of couples for planned parenthood   |   |   |

**First Year M.Sc Nursing  
Clinical Specialty – I**

**Subject: Child Health (Paediatric) Nursing.**

**Course Code: NCPG-104**

Theory	: -150 Hours
Practical	: - 650 Hours
Total	: - 800 Hours

**Course Outcome:** After completion of M.Sc Nursing programme in Child Health Nursing, postgraduates shall be able to:

1. Apply the concepts of growth and development in providing care to the child and their families
2. Integrate the concept of family centered pediatric nursing care with related areas such as genetic disorders, congenital malformations and long-term illness.
3. Demonstrate physical, developmental, and nutritional assessment of pediatric clients, apply nursing process in providing nursing care to neonates & children and appreciate the child as a holistic individual
4. Demonstrate the ability to management of emergencies in neonates and role of pediatric nurse practitioner and as a member of the pediatric and neonatal health team
5. Demonstrate the ability to various recent technologies and treatment modalities in the management of high-risk neonates
6. Incorporate evidence-based nursing practice and identify the areas of research in the field of pediatric/ neonatal nursing..

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

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

### Course Content

Units	Hours	Content
I	10	<b>1. Introduction</b> <ul style="list-style-type: none"> <li>A. Historical development of Pediatrics and Pediatric Nursing in India;</li> <li>B. Current status of child health in India;</li> <li>C. Trends in Pediatrics and Pediatric Nursing,</li> <li>D. Ethical and cultural issues in pediatric care</li> <li>E. Rights of children</li> <li>F. National health policy for children, special laws and ordinances relating to children.</li> <li>G. National goals,</li> <li>H. Five year plans,</li> <li>I. National health programs related to child health.</li> </ul>
II	10	<b>2. Assessment of pediatric clients</b> <ul style="list-style-type: none"> <li>A. History taking</li> <li>B. Developmental assessment</li> <li>C. Physical assessment</li> <li>D. Nutritional assessment</li> <li>E. Family assessment</li> </ul>
III	10	<b>3. Hospitalized child</b> <ul style="list-style-type: none"> <li>A. Meaning of hospitalization of the child, preparation for hospitalization, effects of hospitalization on the child and family</li> <li>B. Stressors and reactions related to developmental stages, play activities for ill hospitalized child.</li> <li>C. Nursing care of hospitalized child and family -principles and practices.</li> </ul>
IV	15	<b>4. Pre-natal Pediatrics</b> <ul style="list-style-type: none"> <li>A. Embryological and fetal development, Prenatal factors influencing growth and development of fetus,</li> <li>B. Genetic patterns of common pediatric disorders, chromosomal aberrations, genetic assessment and counseling legal and ethical aspects of genetic, screening and counseling role of nurse in genetic counseling,</li> <li>C. Importance of prenatal care and role of pediatric nurse.</li> </ul>
V	15	<b>5. Growth and Development of children</b> <ul style="list-style-type: none"> <li>A. Principles of growth and development,</li> <li>B. Concepts and theories of growth and development,</li> <li>C. Developmental tasks and special needs from infancy to adolescence, developmental milestones,</li> <li>D. Assessment of growth and development of pediatric clients,</li> <li>E. Factors affecting growth and development.</li> </ul>
VI	15	<b>6. Behavioral Pediatrics and Pediatric Nursing</b> <ul style="list-style-type: none"> <li>A. Parent child relationship,</li> <li>B. Basic behavioral pediatric principles and specific behavioral pediatric concepts/disorders- maternal deprivation, failure to thrive, child abuse, the battered child,</li> </ul>

		C. Common behavioral problems and their management, D. Child guidance clinic.
<b>VII</b>	<b>15</b>	<b>7. Preventive Pediatrics and Pediatric Nursing</b> A. Concept, aims and scope of preventive pediatrics, B. Maternal health and its influence on child health antenatal aspects of preventive pediatrics, C. Immunization, expanded program on immunization/ universal immunization program and cold chain, D. Nutrition and nutritional requirements of children, changing patterns of feeding, baby- friendly hospital initiative and exclusive breast feeding, E. Health education, nutritional education for children F. Nutritional programs G. National and international organizations related to child health, Role of pediatric nurse in the hospital and community.
<b>VIII</b>	<b>30</b>	<b>8. Neonatal Nursing</b> A. New born baby- profile and characteristics of the new born, B. Assessment of the new born, C. Nursing care of the new born at birth, care of the new born and family, D. High risk newborn- pre term and term neonate and growth retarded babies, E. Identification and classification of neonates with infections, HIV & AIDS, Ophthalmic neonatorum, congenital syphilis. F. High risk new born-Identification, classification and nursing management G. Organization of neonatal care, services(Levels), transport, neonatal intensive care unit, organization and management of nursing services in NICU.
<b>IX</b>	<b>30</b>	<b>9. IMNCI</b> (Integrated management of neonatal and childhood illnesses)

#### Practical

**Total = 660Hours**  
**1 Week = 30Hours**

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

#### Student Activities

1. Nursing process application/care study : 2



2. Clinical presentations	:	2
3. Clinical Presentation attended	:	5
4. Clinical demonstration	:	2
5. Clinical teaching	:	2
6. Health Assessment	:	5
7. Health Education	:	2
8. Growth & developmental assessment	:	5
9. Nutritional assessment and diet planning	:	5
10. Assessment & prescription of nursing interventions for sick children	:	
11. Project work	:	1
12. Field visits	:	2
13. Nursing Process Application / Care Study	:	2
14. Procedure	:	13
15. Seminar	:	2
16. Seminar attended	:	5
17. Classroom teaching	:	2



**First Year M.Sc Nursing  
Clinical Speciality– I**

**Subject: Mental Health (Psychiatric) Nursing**  
**Course Code: NCPG-104**

Theory: -150 Hours  
Practical: - 650 Hours  
Total: - 800 Hours

**Course Outcome:** After completion of M.Sc Nursing programme in Mental Health Nursing, postgraduates shall be able to:

1. Appraise the trends and issues in the field of psychiatry and psychiatric nursing and understand the concepts of psychobiology in mental disorders and its implications for psychiatric nursing
2. Able to maintain the therapeutic communications skills and relationship with individual and groups and use assertive techniques in personal and professional actions and promotes self-esteem of clients, others and self.
3. Recognize the role of psychiatric nurse practitioner and as a member of the psychiatric and mental health team
4. Describe various types of alternative system of medicines used in psychiatric settings
5. Incorporate evidence-based nursing practice and identify the areas of research in the field of psychiatric nursing

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

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

### Course Content

Units	Hours	Content
I	15	<b>1. Introduction: -</b> A. Mental Health & Mental Illness B. Historical perspectives C. Trends, issues and magnitude D. Contemporary practices E. Mental health laws / Acts F. National mental health program – National mental health authority, state mental health authority G. Human rights of mentally ill H. Mental Health / Mental Illness Continuum I. Classification of mental illnesses – ICD, DSM J. Standards of Psychiatric nursing K. Challenges and Scope of Psychiatric nursing L. Multi – disciplinary team and role of nurse M. Role of Psychiatric nurse – extended and expanded.
II	10	<b>2. Concepts of Psychobiology: -</b> A. The nervous System: B. An Anatomical Review C. The Brain and limbic system D. Nerve Tissue E. Autonomic Nervous system F. Neurotransmitters G. Neuroendocrinology H. Pituitary, Thyroid Gland I. Circadian Rhythms J. Genetics K. Neuro psychiatric disorders L. Psycho immunology M. Normal Immune response N. Implications for psychiatric Illness O. Implications for Nursing
III	10	<b>3. Theories of Personality Development and relevance to nursing practice:</b> A. Psychoanalytic Theory – Freud's B. Interpersonal Theory – Sullivan's C. Theory of Psychosocial Development – Erikson's D. Theory of Object relations E. Cognitive Development Theory F. Theory of Moral Development G. A Nursing Model – Hildegard E. Peplau
IV	5	<b>4. Stress and its management: -</b> A. An Introduction to the concepts of stress. B. Psychological Adaptation to stress. C. Stress as a Biological Response. D. Stress as an Environmental Event. E. Stress as Transaction between the Individual and the Environment. F. Stress management
V	10	<b>5. Therapeutic communication and interpersonal relationship: -</b> A. Review communication process, factors affecting communication B. Communication with individuals and in groups C. Techniques of therapeutic communication touch therapy

		D. Barrier of communication with specific reference to psychopathology E. Therapeutic attitudes F. Dynamics of a therapeutic Nurse – client relationship; Therapeutic use of self-Gaining self – awareness G. Therapeutic nurse – patient relationship its phases; Conditions essential to development of a therapeutic relationship H. Therapeutic impasse and its management
<b>VI</b>	<b>10</b>	<b>6. Assertive Training: -</b> A. Assertive Communication B. Basic Human Rights C. Response Patterns D. (Nonassertive Behavior) E. Assertive Behavior F. Aggressive Behavior G. Behavioral Components of Assertive Behavior H. Techniques that promote assertive Behavior I. Thought – Stopping Techniques Method J. Role of the nurse
<b>VII</b>	<b>10</b>	<b>7. Promoting Self Esteem: -</b> A. Components of Self – Concept B. The Development of Self – Esteem C. The Manifestations of Low – Self – Esteem D. Boundaries
	<b>5</b>	<b>Women and Mental Health</b> A. Normal reaction to conception, pregnancy and puerperium B. Problems related to conception, pregnancy and puerperium and its management C. Counseling – Premarital, Marital and genetic.
<b>VIII</b>	<b>10</b>	<b>8. The nursing process in psychiatric / Mental Health Nursing: -</b> A. Mental health assessment –History taking, mental status examination B. Physical and neurological examination C. Psychometric assessment D. Investigations, Diagnosis and Differential diagnosis E. Interpretation of investigations F. Nurse's role G. Nursing case management a. Critical pathways of care H. Documentation a. Problem – oriented recording. b. Focus charting. c. The PIE method.
<b>IX</b>	<b>35</b>	<b>9. Psycho social and physical therapies: -</b> A. Individual therapy B. Behavioral Therapy – Relaxation therapy, cognitive therapy, positive – negative reinforcement, bio – feedback, guided imagery, ab – reactive therapy C. Group therapy D. Family therapy E. The therapeutic Community F. Occupational therapy G. Recreational therapy H. Play therapy I. Music therapy J. Light therapy



		K. Color therapy L. Aroma therapy
<b>XI</b>	<b>5</b>	<b>10. Electroconvulsive therapy: -</b> A. Historical Perspectives B. Indications C. Contraindications D. Mechanisms of Action E. Side Effects F. Risks Associated with Electroconvulsive therapy G. The Role of The Nurse in Electroconvulsive therapy
<b>X</b>	<b>10</b>	<b>11. Psychopharmacology: -</b> A. Historical Perspective B. Role of a Nurse in Psychopharmacological therapy a. Antianxiety Agents b. Antidepressants Agents c. Mood stabilizers d. Antipsychotics e. Sedative – Hypnotics f. Central Nervous System Stimulants C. Future developments
<b>XII</b>	<b>15</b>	<b>12. Alternative systems of medicine in Mental health: -</b> A. Types of Therapies a. Herbal Medicine b. Unani c. Siddha d. Homeopathic e. Acupressure and Acupuncture f. Diet and Nutrition g. Chiropractic Medicine h. Therapeutic Touch and Massage i. Yoga j. Pet Therapy

#### Practical

Total = 660 Hours

1 week = 30

Hours

Sr. No.	Dept. / Unit	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 Unit/Half way home/ Day care centre	4	120 Hours
	<b>Total</b>	<b>22 Weeks</b>	<b>660 Hours</b>

#### Student Activities

1. History taking
2. Mental health assessment
3. Psychometric assessment
4. Personality assessment
5. Process recording

6. Therapies- Group Therapy
7. Family Therapy
8. Psychotherapy
9. Milieu Therapy
10. The Therapeutic Community
11. Occupational therapy
12. Recreational therapy
13. Play therapy
14. Music therapy
15. Pet therapy
16. Counseling
17. Assisted ECT
18. Assisted EEG
19. Case studies
20. Case presentation
21. Project work
22. Socio and psycho drama
23. Field visits

**Requirements:**

1. Care study	:	2
2. Clinical presentation	:	2
3. Attend Clinical presentation	:	10
4. Clinical demonstration	:	2
5. Clinical teaching	:	2
6. Mental health assessment	:	5
7. Observe/ Assist in psychometric assessment	:	2
8. Assist / perform in therapeutic modalities	:	11
9. Administration of drugs	:	1
10. Project	:	1
11. Psycho education	:	2
12. Seminar	:	2
13. Attended Seminar	:	5
14. Class room teaching	:	2

## CLINICAL SPECIALITY – I

**Subject: Community Health Nursing.**

**Course Code: NCPG-104**

Theory: -150 Hours

Practical: - 650 Hours

Total: - 800 Hours

**Course Outcome:** After completion M.Sc Nursing programme in Community Health Nursing, postgraduates shall be able to:

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

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

1. Appreciate the history and development in the field of Community Health and Community Health Nursing.
2. Appreciate role of individuals and families in promoting health of the Community.
3. Perform physical, developmental and nutritional assessment of individuals, families and groups.
4. Apply the concepts of promotive, preventive, curative and rehabilitative aspects of health while providing care to the people.
5. Apply nursing process approach while providing care to individuals, families, groups and community.
6. Integrate the concepts of family centered nursing approach while providing care to the community.
7. Recognize and participate in the management of emergencies, epidemics and disasters.
8. Apply recent technologies and care modalities while delivering community health nursing care.
9. Appreciate legal and ethical issues pertaining to community health nursing care.
10. Conduct community health nursing care projects.
11. Participate in planning, implementation and evaluation of various national health and family welfare programmes at local, state and the national level.
12. Incorporate evidence based nursing practice and identify the areas of research in the community settings.
13. Participate effectively as a member of Community Health team.
14. Coordinate and collaborate with various agencies operating in the community by using inter- sectorial approach.
15. Teach community health nursing to undergraduates, in-service nurses and the community health workers.
16. Demonstrate leadership and managerial abilities in community health nursing practice.

### Course Content

Units	Hours	Content
I	10	1. Introduction

		<ul style="list-style-type: none"> <li>A. Historical development of Community Health and Community health Nursing- World and India, various health and family welfare committees</li> <li>B. Current status, trends and challenges of Community Health Nursing</li> <li>C. Health status of the Community-community diagnosis</li> <li>D. Scope of Community health Nursing practice</li> <li>E. Ethical and legal issues</li> <li>F. Socio-cultural issues in Community health Nursing</li> <li>G. National Policies, plans and programmes               <ul style="list-style-type: none"> <li>a. National health policy</li> <li>b. National Population policy</li> <li>c. National Health and welfare Programmes</li> <li>d. National Health goals/ indicators/ Millennium developmental goals(MDG)/ Strategies</li> <li>e. Planning process: Five year plans</li> <li>f. National Rural Health Mission</li> <li>g. Panchayat Raj institutions</li> </ul> </li> </ul>
II	10	<b>2. Health</b> <ul style="list-style-type: none"> <li>A. Concepts, issues</li> <li>B. Determinants</li> <li>C. Measurements</li> <li>D. Alternate systems for health promotion and management of health problems</li> <li>E. Health economics</li> <li>F. Health technology</li> <li>G. Genetics and health</li> <li>H. Waste disposal</li> <li>I. Eco system</li> </ul>
III	15	<b>3. Population dynamics and control</b> <ul style="list-style-type: none"> <li>A. Demography</li> <li>B. Transition and theories of population</li> <li>C. National population policy</li> <li>D. National population programmes</li> <li>E. Population control and related programmes</li> <li>F. Methods of family limiting and spacing</li> <li>G. Research, Census, National Family Health Survey</li> </ul>
IV	30	<b>4. Community health Nursing</b> <ul style="list-style-type: none"> <li>A. Philosophy, Aims, Objectives, Concepts, Scope, Principles, Functions</li> <li>B. Community health Nursing theories and models</li> <li>C. Quality assurance: Community health Nursing standards, competencies, Monitoring community health nursing, nursing audits</li> <li>D. Family nursing and Family centered nursing approach</li> <li>E. Family health nursing process               <ul style="list-style-type: none"> <li>a. Family health assessment</li> <li>b. Diagnosis</li> <li>c. Planning</li> <li>d. Intervention</li> <li>e. Evaluation</li> </ul> </li> <li>F. Nursing care for special groups: children, adolescents, adults, women, elderly, physically and mentally challenged- Urban and rural population at large</li> <li>G. Community nutrition</li> </ul>



		H. Concept, role and responsibilities of community health Nurse practitioners/nurse midwifery practitioners-decision making skills, professionalism, legal issues
<b>V</b>	<b>45</b>	<b>5. Maternal and neonatal care</b> A. IMNCI(Integrated Management of Neonatal And Childhood Illnesses) module B. Skilled Birth Attendant (SBA) module
<b>VI</b>	<b>15</b>	<b>6. Disaster nursing (INC module on Reaching out: Nursing Care in emergencies)</b>
<b>VII</b>	<b>10</b>	<b>7. Information, education and communication</b> A. IEC/BCC: Principles and strategies B. Communication Skills C. Management information and evaluation system: Records and reports D. Information technology E. Tele-medicine and tele-nursing F. Journalism G. Mass media H. Folk media
<b>VIII</b>	<b>15</b>	<b>8. Health care delivery system: Urban, rural, tribal and difficult areas</b> A. Health organization: National, State, District, CHC, PHC, Sub Centre, Village - Functions, Staffing, pattern of assistance, layout, drugs, equipments and supplies, Roles and Responsibilities of DPHNO B. Critical review of functioning of various levels, evaluation studies, recommendations and nursing perspectives C. Alternative systems of medicine D. Training and supervision of health workers E. Health agencies: NGO's, Roles and functions F. Inter-sectoral coordination G. Public private partnership H. Challenges of health care delivery system

#### Practical

Total = 660 Hours  
1 week = 30 Hours

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

#### Student Activities

1. Identification of community leaders and resource persons(community mapping)
2. Community health survey
3. Community health nursing process- individual, family and special groups and community
4. Counseling

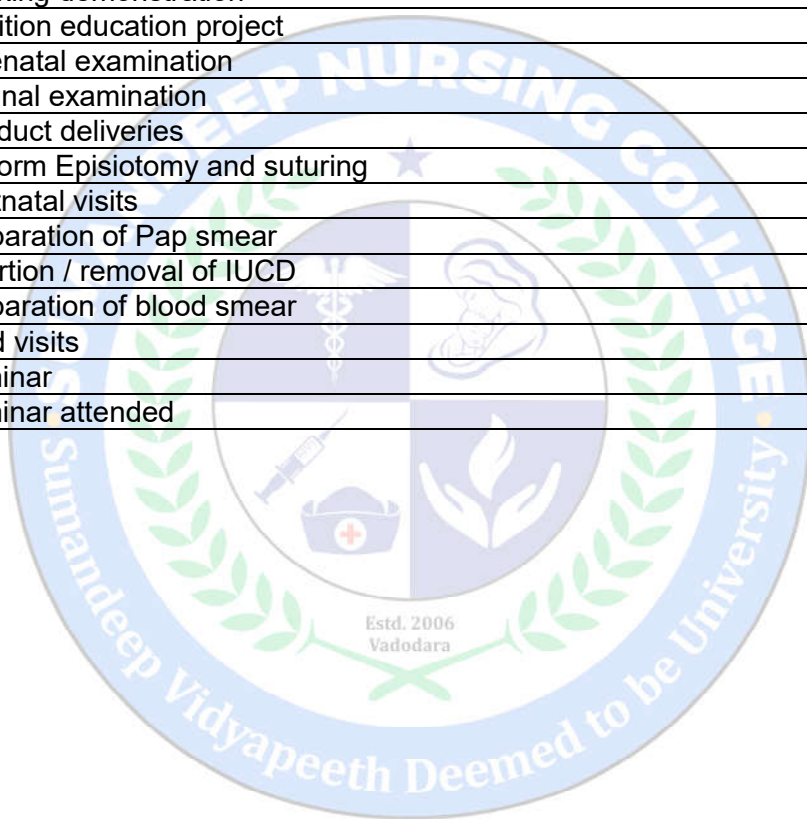
5. Health education – campaign, exhibition, folk media, preparation of IEC materials
6. Organizing and participating in special clinics/camps and national health and welfare programmes-Organize at least one health and family welfare mela/fair (all stalls of national health and family welfare activities should be included)
7. Estimation of Vital health statistics –Exercise
8. Drill for disaster preparedness
9. Organize at least one in-service education to ANM's/LHV/PHN/HW
10. Nutrition – Exercise on nutritional assessment on dietary planning, demonstration and education for various age groups
11. Filling up of Records, reports and registers maintained at SC/PHC/CHC
12. Assist women in self breast examination
13. Conduct antenatal examination
14. Conduct vaginal examination
15. Conduct deliveries
16. Post natal visits
17. Perform Episiotomy and suturing
18. Prepare Pap smear
19. Conduct Insertion/Removal of IUD
20. Blood Slide preparation
21. Field visits
22. Maintenance of log book for various activities



## PRACTICAL REQUIREMENTS

Sr. No	Assignments	Quantity
1.	Community mapping	1

2.	Community health Survey	1
3.	Collection and compilation of vital health statistics	3
4.	Organizing & conducting community leaders meeting	1
5.	Application of Community health nursing process	3
6.	Conduct family	1
7.	Conduct mass health education	1
8.	Exhibition	1
9.	Preparation of IEC materials	1
10.	Organize and participate in various clinics / camp	5
11.	Estimation of vital statistics	1
12.	Drill on disaster preparedness	1
13.	Organize in – service education to ANM/LHV/PHN/HW	1
14.	Nutritional assessment	1
15.	Diet planning	1
16.	Cooking demonstration	1
17.	Nutrition education project	1
18.	Antenatal examination	5
19.	Vaginal examination	2
20.	Conduct deliveries	2
21.	Perform Episiotomy and suturing	2
22.	Postnatal visits	5
23.	Preparation of Pap smear	2
24.	Insertion / removal of IUCD	5
25.	Preparation of blood smear	2
26.	Field visits	8
27.	Seminar	2
28.	Seminar attended	4



### First Year M.Sc Nursing

**Subject: Nursing Research and Statistics**  
**Course Code: NCPG-103**

Theory : 50 Hours  
 Practical : 100 Hours

Total :250 Hours

### **Part-A: - Nursing Research**

Theory : 100 Hours

Practical: 50 Hours

Total : 150 Hours

#### **Course Outcome:**

At the completion of the course, the student shall be understand the research methodology and statistical methods as a basis for identifying research problem, planning and implementing a research plan, evaluate research studies and utilize research findings to improve quality of nursing practice, education and management.

#### **Objectives**

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

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

#### **Course Content**

Units	Hours		Content
	Theory	Practical	
I	10	00	<b>1. Introduction:</b> A. Methods of acquiring knowledge – problem solving and scientific method. B. Research – Definition, characteristics, purposes, kinds of research C. Historical Evolution of research in nursing D. Basic research terms E. Scope of nursing research: areas, problems in nursing, health and social research F. Concept of evidence based practice G. Ethics in research H. Overview of Research process
II	5	5	<b>2. Review of Literature</b> A. Importance, purposes, sources, criteria for selection of resources and steps in reviewing literature.
III	12	00	<b>3. Research Approaches and designs</b> A. Type: Quantitative and Qualitative B. Historical, survey and experimental –Characteristics, types advantages and disadvantages. C. Qualitative: Phenomenology, grounded theory, ethnography
IV	10	5	<b>4. Research problem:</b> A. Identification of research problem B. Formulation of problem statement and research objectives C. Definition of terms D. Assumptions and delimitations E. Identification of variables



			F. Hypothesis – definition, formulation and types.
V	5	5	<b>5. Developing theoretical/conceptual framework.</b> A. Theories: Nature, characteristics, Purpose and uses B. Using, testing and developing conceptual framework, models and theories.
VI	6	-	<b>6. Sampling</b> A. Population and sample B. Factors influencing sampling C. Sampling techniques D. Sample size E. Probability and sampling error F. Problems of sampling
VII	20	10	<b>7. Tools and methods of Data collection:</b> A. Concepts of data collection B. Data sources, methods/techniques quantitative and qualitative. C. Tools for data collection – types, characteristics and their development D. Validity and reliability of tools E. Procedure for data collection
VIII	5	-	<b>8. Implementing research plan</b> A. Pilot Study, review research plan (design)., planning for data collection, administration of tool/interventions, collection of data
IX	10	10	<b>9. Analysis and interpretation of data</b> A. Plan for data analysis: quantitative and qualitative B. Preparing data for computer analysis and presentation. C. Statistical analysis D. Interpretation of data E. Conclusion and generalizations F. Summary and discussion
X	10	-	<b>10. Reporting and utilizing research findings:</b> A. Communication of research results; oral and written B. Writing research report purposes, methods and style- vancouver, American Psychological Association(APA), Campbell etc C. Writing scientific articles for publication: purposes & style
XI	3	8	<b>11. Critical analysis of research reports and articles</b>
XII	4	7	<b>12. Developing and presenting a research proposal</b>
XII	4	0	<i>The following addition in the Syllabus of B.Sc Nursing (Third Year) is introduced as per the suggestions of Education department and Commissionerate of higher education, Government of India dated 17<sup>th</sup> November, 2020.</i> <i>This Notification was discussed in the Board of studies meeting (BOS).</i> <i>(Board of Study letter No: SNC/2021/BOS/185 dated 23/02/2021 and vide Notification of Board of Management resolution reference number: SVDU/R/3051-5/2021-22 Dated 29/07/2021.</i>  <b>Intellectual Property Rights (IPR)</b> A. Introduction- Concept of Intellectual Property, Historical view of Intellectual property system in India and International Scenario, Evolution of Intellectual Property Laws in India, Legal basis of

			<p>Intellectual Property Protection, Need of Protecting Intellectual Property, Theories on concept of property – Major IP Laws in India, Historical view of intellectual property system in India and International scenario.</p> <p>B. Meaning of copyright, copyright eligibility, Term of copyright, Registration of copyright, Infringement and remedies.</p> <p>C. Concept of Patent &amp; criteria of Patentability Inventions not patentable Process of obtaining a patent, Duration of Patents, Rights of Patentee.</p>
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**Activities: -**

1. Annotated Bibliography of research reports and articles.
2. Review of literature of selected topic and reporting.
3. Formulation of problem statement, objective and hypothesis.
4. Developing theoretical/conceptual framework.
5. Preparation of a sample research tool.
6. Analysis and interpretation of given data.
7. Developing and presenting research proposal.
8. Journal club presentation.
9. Critical evaluation of selected research studies.
10. Writing a scientific paper.

**Method of Teaching**

1. Lecture-cum-discussion
2. Seminar/Presentations
3. Project
4. Class room exercises
5. Journal club

**Methods of Evaluation**

1. Quiz, Tests (Term)
2. Assignments/Term paper
3. Presentations
4. Project work

**Internal Assessment**

**Techniques**

Term Test (2 tests)  
Assignment  
Presentation  
Project work

**Total**

**Weightage (15 Marks)**

40%  
20%  
20%  
20%  
**100%**

**Subject: Nursing Research and Statistics.**  
**Course Code: NCPG-103**

**Part-B: - Statistics**

Theory : 100 Hours  
 Practical : 50 Hours  
 Total : 150 Hours

**Course Outcome:**

At the completion of the course, the student shall be understand the statistical methods and apply them in conducting research studies in nursing.

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

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

<b>Course Content</b>			
<b>Units</b>	<b>Hours</b>		<b>Content</b>
	<b>Theory</b>	<b>Practical</b>	
<b>I</b>	<b>7</b>	<b>4</b>	<b>1. Introduction:</b> A. Concepts, types, significance and scope of statistics, meaning of data, B. Sample, parameter C. Type and levels of data and their measurement D. Organization and presentation of data – Tabulation of data; E. Frequency distribution F. Graphical and tabular presentations.
<b>II</b>	<b>4</b>	<b>4</b>	<b>2. Measures of central tendency:</b> A. Mean, Median, Mode
<b>III</b>	<b>4</b>	<b>5</b>	<b>3. Measures of variability;</b> A. Range, Percentiles, average deviation, quartile deviation, standard .
<b>IV</b>	<b>3</b>	<b>2</b>	<b>4. Normal Distribution:</b> B. Probability, characteristics and application of normal probability curve; sampling error.
<b>V</b>	<b>6</b>	<b>8</b>	<b>5. Measures of relationship:</b> A. Correlation – need and meaning C. Rank order correlation; D. Scatter diagram method E. Product moment correlation F. Simple linear regression analysis and prediction.
<b>VI</b>	<b>5</b>	<b>2</b>	<b>6. Designs and meaning:</b> A. Experimental designs B. Comparison in pairs, randomized block design, Latin squares.
<b>VII</b>	<b>8</b>	<b>10</b>	<b>7. Significance of Statistic and Significance of difference between two Statistics (Testing hypothesis)</b> A. Non parametric test – Chi-square test, Sign, median test, Mann Whitney test. B. Parametric test – ‘t’ test, ANOVA, MANOVA,ANCOVA
<b>VIII</b>	<b>5</b>	<b>5</b>	<b>8. Use of statistical methods in psychology and</b>

			<b>education:</b> A. Scaling – Z Score, Z Scaling B. Standard Score and T Score C. Reliability of test Scores: test-retest method, parallel forms, split half method.
<b>IX</b>	<b>4</b>	<b>2</b>	<b>9. Application of statistics in health:</b> A. Ratios, Rates, Trends B. Vital health statistics – Birth and death rates. C. Measures related to fertility, morbidity and mortality
<b>X</b>	<b>4</b>	<b>8</b>	<b>10. Use of Computers for data analysis</b> A. Use of statistical package.

**Activities: -**

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

**Methods of Teaching:**

- Lecture-cum-discussion
- Demonstration – on data organization, tabulation, calculation of statistics, use of statistical package, Classroom exercises, organization and tabulation of data,
- Computing Descriptive and inferential statistics; vital and health statistics and use of computer for data entry and analysis using statistical package

**Methods of Evaluation**

- Test, Classroom statistical exercises

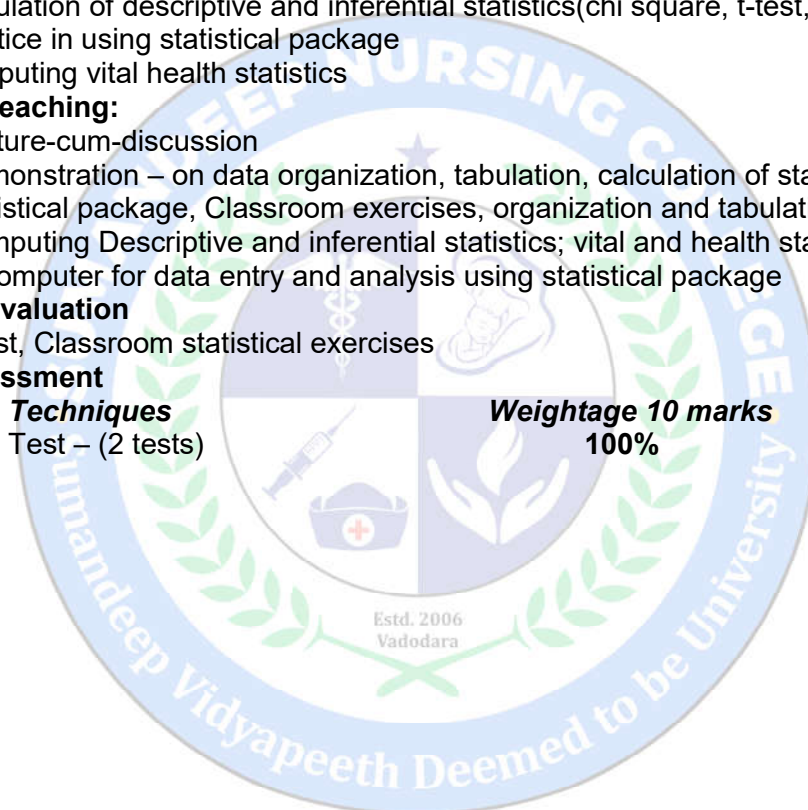
**Internal Assessment**

**Techniques**

Test – (2 tests)

**Weightage 10 marks**

**100%**





## Second Year M.Sc Nursing

**Subject: NURSING MANAGEMENT**  
**Course Code: NCPG- 201**

Theory : 150 Hours

Practical : 150 Hours

Total : 300 Hours

### Course Outcome:

At the completion of the course, the student shall be understand the principles, concepts, trends and issues related to nursing management and appreciate and acquire skills in planning, supervision and management of nursing services at different levels to provide quality nursing services.

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

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



### COURSE CONTENT:

Unit	Hours	Content
I	10	<b>1. Introduction</b> <ul style="list-style-type: none"> <li>A. Philosophy, purpose, elements, principles and scope of administration</li> <li>B. Indian Constitution, Indian Administrative system vis a vis health care delivery system: National, State and Local</li> <li>C. Organization and functions of nursing services and education at National, State, District and institutions: Hospital and Community</li> <li>D. 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>
II	10	<b>2. Management</b> <ul style="list-style-type: none"> <li>A. Functions of administration</li> <li>B. Planning and control</li> <li>C. Co-ordination and delegation</li> <li>D. Decision making – decentralization basic goals of decentralization.</li> <li>E. Concept of management</li> </ul> <b>Nursing management</b> <ul style="list-style-type: none"> <li>A. Concept, types, principles and techniques</li> <li>B. Vision and Mission Statements</li> <li>C. Philosophy, aims and objective</li> <li>D. Current trends and issues in Nursing Administration</li> <li>E. Theories and models</li> <li>F. Application to nursing service and education</li> </ul>
III	15	<b>3. Planning</b> <ul style="list-style-type: none"> <li>A. Planning process: Concept, Principles, Institutional policies</li> <li>B. Mission, philosophy, objectives,</li> <li>C. Strategic planning</li> <li>D. Operational plans</li> <li>E. Management plans</li> <li>F. Programme evaluation and review technique(PERT), Gantt chart, Management by objectives(MBO)</li> <li>G. Planning new venture</li> <li>H. Planning for change</li> <li>I. Innovations in nursing.</li> <li>J. Application to nursing service and education</li> </ul>
IV	15	<b>4. Organization</b> <ul style="list-style-type: none"> <li>A. Concept, principles, objectives, Types and theories, Minimum requirements for organization, Developing an organizational Structure, levels, organizational Effectiveness and organizational Climate,</li> <li>B. Organizing nursing services and patient care: Methods of patient assignment- Advantages and disadvantages, primary nursing care,</li> <li>C. Planning and Organizing: hospital, unit and ancillary services(specifically central sterile supply department, laundry, kitchen, laboratory services, emergency etc)</li> <li>D. Disaster management: plan, resources, drill, etc.</li> <li>E. Application to nursing service and education</li> </ul>
V	15	<b>5. Human Resource for health</b> <ul style="list-style-type: none"> <li>A. Staffing <ul style="list-style-type: none"> <li>a. Philosophy</li> <li>b. Norms: Staff inspection unit(SIU), Bajaj Committee, High power committee, Indian nursing council (INC)</li> </ul> </li> </ul>

		<ul style="list-style-type: none"> <li>c. Estimation of nursing staff requirement- activity analysis</li> <li>d. Various research studies</li> <li>B. Recruitment: credentialing, selection, placement, promotion</li> <li>C. Retention</li> <li>D. Personnel policies</li> <li>E. Termination</li> <li>F. Staff development programme</li> <li>G. Duties and responsibilities of various category of nursing personnel</li> <li>H. Applications to nursing service and education</li> </ul>
<b>VI</b>	<b>15</b>	<b>6. Directing</b> <ul style="list-style-type: none"> <li>A. Roles and functions</li> <li>B. Motivation: Intrinsic, extrinsic, Creating motivating climate, Motivational theories</li> <li>C. Communication : process, types, strategies, Interpersonal communication, channels, barriers, problems, Confidentiality, Public relations</li> <li>D. Delegation; common delegation errors</li> <li>E. Managing conflict: process, management, negotiation, consensus</li> <li>F. Collective bargaining: health care labour laws, unions, professional associations, role of nurse manager</li> <li>G. Occupational health and safety</li> <li>H. Application to nursing service and education</li> </ul>
<b>VII</b>	<b>10</b>	<b>7. Material management</b> <ul style="list-style-type: none"> <li>A. Concepts, principles and procedures</li> <li>B. Planning and procurement procedures : Specifications</li> <li>C. ABC analysis,</li> <li>D. VED (very important and essential daily use) analysis</li> <li>E. Planning equipment and supplies for nursing care: unit and hospital</li> <li>F. Inventory control</li> <li>G. Condemnation</li> <li>H. Application to nursing service and education</li> </ul>
<b>VIII</b>	<b>15</b>	<b>8. Controlling</b> <ul style="list-style-type: none"> <li>A. Quality assurance – Continuous Quality Improvement               <ul style="list-style-type: none"> <li>a. Standards</li> <li>b. Models</li> <li>c. Nursing audit</li> </ul> </li> <li>B. Performance appraisal: Tools, confidential reports, formats, Management, interviews</li> <li>A. Supervision and management: concepts and principles</li> <li>B. Discipline: service rules, self- discipline, constructive versus destructive discipline, problem employees, disciplinary proceedings-enquiry etc.</li> <li>C. Self- evaluation or peer evaluation, patient satisfaction, utilization review</li> </ul> <p>Application to nursing service and education</p>
<b>IX</b>	<b>15</b>	<b>9. Fiscal planning</b> <ul style="list-style-type: none"> <li>A. Plan and non-plan, zero budgeting, mid-term appraisal, capital and revenue</li> <li>B. Budget estimate, revised estimate, performance budget</li> <li>C. Audit</li> <li>D. Cost effectiveness</li> <li>E. Cost accounting</li> <li>F. Critical pathways</li> <li>G. Health care reforms</li> <li>H. Health economics</li> <li>I. Health insurance</li> </ul>

		J. Budgeting for various units and levels K. Application to nursing service and education
<b>X</b>	<b>10</b>	<b>10. Nursing informatics</b> A. Trends B. General purpose C. Use of computers in hospital and community D. Patient record system E. Nursing records and reports F. Management information and evaluation system (MIES) G. E- nursing, Telemedicine, telenursing H. Electronic medical records
<b>XI</b>	<b>10</b>	<b>11. Leadership</b> A. Concepts, Types, Theories B. Styles C. Manager behavior D. Leader behavior E. Effective leader: Characteristics, skills F. Group dynamics G. Power and politics H. Lobbying I. Critical thinking and decision making J. Stress management K. Applications to nursing service and education
<b>XII</b>	<b>10</b>	<b>12. Legal and ethical issues</b> <b>A. Laws and ethics</b> a. Ethical committee b. Code of ethics and professional conduct c. Legal system: Types of law, tort law, and liabilities d. Legal issues in nursing: negligence, malpractice, invasion of privacy, defamation of character e. Patient care issues, management issues, employment issues f. Medico legal issues g. Nursing regulatory mechanisms: licensure, renewal, accreditation h. Patients' rights, Consumer protection act(CPA) i. Rights of special groups: children, women, HIV, handicap, ageing j. Professional responsibility and accountability k. Infection control l. Standard safety measures

**Practical: -**

1. Prepare prototype personal files for staff nurses, faculty and cumulative records.
2. Preparation of budget estimate, revised estimate and performance budget.
3. Plan and conduct staff development programme.
4. Preparation of Organization Chart.
5. Developing nursing standards/protocols for various units.
6. Design a layout plan for speciality units /hospital, community and educational institutions.
7. Preparation of job description of various categories of nursing personnel.
8. Prepare a list of equipment 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.



**Second Year M.Sc Nursing**  
**CLINICAL SPECIALITY – II**  
**Subject: Medical Surgical Nursing**  
**Sub speciality – Cardio Vascular and Thoracic Nursing**

**Course Code: NCPG-203**

Theory: -150 Hours

Practical: - 950 Hours

Total: - 1100 Hours

**Course Outcome:** After completion of MSc Nursing programme in Medical Surgical Nursing postgraduates shall be able to:

1. Establish expertise and in-depth understanding in the field of cardiovascular and thoracic nursing.
2. Demonstrate advanced skills for nursing intervention in various cardio medical and surgical conditions.
3. Integration of the function as Cardio vascular and Thoracic Nurse practitioner/specialist and as educator, manager and researcher in the field of cardio vascular and thoracic nursing.

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

1. Appreciate trends and issues related to Cardio Vascular and Thoracic Nursing.
2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of cardio vascular and thoracic conditions.
3. Participate in national health programs for health promotion, prevention and rehabilitation of patients with cardio vascular and thoracic conditions.
4. Perform physical, psychosocial & spiritual assessment.
5. Assist in various diagnostic, therapeutic and surgical procedures.
6. Apply nursing process in providing comprehensive care to patients with cardio vascular and thoracic conditions.
7. Demonstrate advance skills/competence in managing patients with cardio vascular and thoracic conditions including Advance Cardiac Life Support.
8. Describe the various drugs used in cardio vascular and thoracic conditions and nurses responsibility.
9. Demonstrate skill in handling various equipments/gadgets used for critical care of cardio vascular and thoracic patients.
10. Appreciate team work & coordinate activities related to patient care.
11. Practice infection control measures.
12. Identify emergencies and complications & take appropriate measures
13. Discuss the legal and ethical issues in cardio vascular and thoracic nursing
14. Assist patients and their family to cope with emotional distress, grief, anxiety and spiritual needs.
15. Appreciate the role of alternative system of medicine in care of patient.
16. **Incorporate evidence based nursing practice and identify the areas of research in the field of cardio vascular and thoracic nursing.**
17. Identify the sources of stress and manage burnout syndrome among health care providers.
18. Teach and supervise nurses and allied health workers.
19. Design a layout of ICCU and ICTU and develop standards for cardio vascular and thoracic and thoracic nursing practice.

### COURSE CONTENT:

Unit	Hours	Content
I	5	<b>1. Introduction</b> <ul style="list-style-type: none"> <li>A. Historical development, trends and issues in the field of cardiology.</li> <li>B. Cardio vascular and thoracic conditions–major health problem</li> <li>C. Concepts, principles and nursing perspectives</li> <li>D. Ethical and legal issues</li> </ul>
II	5	<b>2. Epidemiology</b> <ul style="list-style-type: none"> <li>A. Risk factors: hereditary, psycho social factors, hypertension, smoking, obesity, diabetes mellitus etc.</li> <li>B. Health promotion, disease prevention, Life style modification</li> <li>C. National health programs related to cardio vascular and thoracic conditions</li> <li>D. Alternative system of medicine</li> <li>E. Complementary therapies</li> </ul>
III	5	<b>3. Review of anatomy and physiology of cardio vascular and respiratory system</b> <ul style="list-style-type: none"> <li>A. Review of anatomy and physiology of heart, lung, thoracic cavity and blood vessels. Embryology of heart and lung.</li> <li>B. Coronary circulation</li> <li>C. Hemodynamic and electro physiology of heart.</li> <li>D. Bio-chemistry of blood in relation to cardio pulmonary function</li> </ul>
IV	20	<b>4. Assessment and Diagnostic Measures:</b> <ul style="list-style-type: none"> <li>A. History taking</li> <li>B. Physical assessment                             <ul style="list-style-type: none"> <li>a. Heart rate variability: Mechanisms, measurements, pattern, factors, impact of intervention on HRV</li> </ul> </li> <li>C. Diagnostic tests                             <ul style="list-style-type: none"> <li>a. Hemodynamic monitoring: Technical aspects, monitoring, functional hemodynamic indices, ventricular function indices Out measurements (Arterial and swan Ganz monitoring) blood gases and its significance, oxygen supply and demand</li> <li>b. Radio logic examination of the chest: interpretation, chest film findings.</li> <li>c. 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 balance.</li> <li>d. Echocardiography: technical aspects, special techniques, echocardiography of cardiac structures in health and disease, newer techniques.</li> <li>e. Nuclear and other imaging studies of the heart: Magnetic Resonance Imaging.</li> <li>f. Cardio electrophysiology procedures: diagnostic studies, interventional and catheter ablation, nursing care.</li> <li>g. Exercise testing: indications and objectives, safety and personnel,</li> </ul> </li> </ul>

		<p>pretest considerations, selection, interpretation, test termination, recovery period.</p> <p>h. Cardiac catheterization: indications, contraindications, patient preparation, procedures, interpretation of data</p> <p>i. Pulmonary function test: Bronchoscopy and graphics</p> <p>j. Interpretation of diagnostic measures</p> <p>k. Nurse's role in diagnostic tests</p> <p>D. 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.</p> <p>E. Interpretation and role of nurse</p>
V	25	<p><b>5. Cardiac disorders and nursing management</b></p> <p>A. Etiology, clinical manifestations, diagnosis, related pathophysiology, treatment modalities and nursing management of:</p> <ol style="list-style-type: none"> <li>Hypertension</li> <li>Coronary artery Disease.</li> <li>Angina of various types.</li> <li>Cardiomegaly</li> <li>Myocardial infarction, Congestive cardiac failure</li> <li>Heart failure, pulmonary Edema, shock.</li> <li>Rheumatic heart disease and other valvular diseases</li> <li>Inflammatory Heart Diseases, Infective Endocarditis, Myocarditis, pericarditis.</li> <li>Cardiomyopathy, dilated, restrictive, hypertrophic.</li> <li>Arrhythmias, heart block</li> </ol> <p>B. Associated illnesses</p>
VI	10	<p><b>6. Altered pulmonary conditions</b></p> <p>A. Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, treatment modalities and nursing management of:</p> <ol style="list-style-type: none"> <li>Bronchitis</li> <li>Bronchial asthma</li> <li>Bronchiectasis</li> <li>Pneumonias</li> <li>Lung abscess, lung tumor</li> <li>Pulmonary tuberculosis, fibrosis, pneumoconiosis etc</li> <li>Pleuritis, effusion</li> <li>Pneumo, haemo and pyothorax</li> <li>Interstitial lung Disease</li> <li>Cystic fibrosis</li> <li>Acute and Chronic obstructive pulmonary disease (conditions leading to)</li> <li>Cor pulmonale</li> <li>Acute respiratory failure</li> <li>Adult respiratory distress syndrome</li> <li>Pulmonary embolism</li> <li>Pulmonary Hypertension</li> </ol>
VII	10	<p><b>7. Vascular disorders and nursing management</b></p>



		<p>A. Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, treatment modalities and nursing management of:</p> <ol style="list-style-type: none"> <li>Disorders of arteries</li> <li>Disorders of the aorta</li> <li>Aortic Aneurysms,</li> <li>Aortic dissection</li> <li>Raynaud's phenomenon</li> <li>Peripheral arterial disease of the lower extremities</li> <li>Venous thrombosis</li> <li>Varicose veins</li> <li>Chronic venous insufficiency and venous leg ulcers</li> <li>Pulmonary embolism</li> </ol>
VIII	10	<p><b>8. Cardio thoracic emergency interventions:</b></p> <ol style="list-style-type: none"> <li>CPR – BLS and ALS</li> <li>Use of ventilator, defibrillator, pacemaker</li> <li>Post resuscitation care.</li> <li>Psychosocial and spiritual aspects of care</li> <li>Stress management ; ICU psychosis</li> <li>Role of nurse</li> </ol>
IX	10	<p><b>9. Nursing care of a patient with obstructive airway</b></p> <ol style="list-style-type: none"> <li>Assessment</li> <li>Use of artificial airway</li> <li>Endotracheal intubation, tracheotomy and its care</li> <li>Complication, minimum cuff leak, securing tubes</li> </ol> <p>A. Oxygen delivery systems</p> <ol style="list-style-type: none"> <li>Nasal Cannula</li> <li>Oxygen mask, venture mask</li> <li>Partial rebreathing bag</li> <li>Bi – PAP and C – PAP masks</li> <li>Uses, advantages, disadvantages, nursing implications of each</li> </ol> <p>B. Mechanical Ventilation</p> <ol style="list-style-type: none"> <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> </ol>
X	10	<p><b>10. Congenital Heart Diseases,</b></p> <p>A. Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, treatment modalities and nursing management of:</p> <ol style="list-style-type: none"> <li>Embryological development of heart</li> <li>Classification – cyanotic and cyanotic heart disease</li> <li>Tetra logy of Fallouts.</li> <li>Atrial septal defect, ventricular septal defect, Eisenmenger's complex.</li> <li>Patent ductus arteriosus, AP window</li> <li>Truncus Arteriosus</li> <li>Transposition of great arteries.</li> </ol>

		<ul style="list-style-type: none"> <li>h. Total anomaly of pulmonary venous connection.</li> <li>i. Pulmonary stenosis, atresia.</li> <li>j. Coarctation of aorta.</li> <li>k. Epstein's anomaly</li> <li>l. Double outlet right ventricle, single ventricle, Hypoplastic left heart syndrome.</li> </ul>
XI	10	<p><b>11. Pharmacology</b></p> <ul style="list-style-type: none"> <li>A. Review</li> <li>B. Pharmacokinetics</li> <li>C. Analgesics/Anti-inflammatory agents</li> <li>D. Antibiotics, antiseptics</li> <li>E. Drug reaction &amp; toxicity</li> <li>F. Drugs used in cardiac emergencies</li> <li>G. Blood and blood components               <ul style="list-style-type: none"> <li>a. Antithrombolytic agents</li> <li>b. Inotropic agents</li> <li>c. Beta – blocking agents</li> <li>d. Calcium channel blockers.</li> <li>e. Vaso constrictors</li> <li>f. Vaso dilators</li> <li>g. ACE inhibitors.</li> <li>h. Anticoagulants</li> <li>i. Antiarrhythmic drugs.</li> <li>j. Anti-hypertensive</li> <li>k. Diuretics</li> <li>l. Sedatives and tranquilizers.</li> <li>m. Digitalis.</li> <li>n. Antilipemics</li> </ul> </li> <li>H. Principles of drug administration, role and responsibilities of nurses and care of drugs.</li> </ul>
XII	20	<p><b>12. Nursing care of patients undergoing cardio thoracic surgery</b></p> <ul style="list-style-type: none"> <li>A. Indications, selection of patient</li> <li>B. Preoperative assessment and preparation; counseling.</li> <li>C. Intraoperative care: Principles of open heart surgery, equipment, anesthesia, cardiopulmonary bypass.</li> <li>D. Surgical procedures for coronary artery bypass grafting, recent advances and types of grafts, valve replacement or reconstruction, cardiac transplant, palliative surgery and different stents, vascular surgery, other recent advances.</li> <li>E. Thoracic surgery: lobotomy, pneumonectomy, tumour excision etc.</li> <li>F. Immediate postoperative care, assessment, post-operative problems and interventions, bleeding, cardiac tamponade, low cardiac pneumothorax, haemothorax, Coagulopathy, Thermal imbalance, inadequate, ventilation/perfusion, Neurological problems, renal problems, Psychological problems.</li> <li>G. Chest physiotherapy</li> <li>H. Nursing interventions life style modification, complementary therapy/alternative systems of medicine</li> <li>I. Intermediate and late post-operative care after CABG, valve surgery, others.</li> </ul>

		J. Follow up care
XIII	5	<b>13. Cardiac rehabilitation</b> A. Process B. Physical evaluation C. Life style modification D. Physical conditioning for cardiovascular efficiency through exercise E. Counseling F. Follow up care.
XIV	5	<b>14. Intensive coronary care unit/intensive cardio thoracic unit:</b> A. Quality assurance a. Standards, protocols, policies, procedures b. Infection control; Standard safety measures c. Nursing audit d. Design of ICCU/ICTU e. Staffing cardiac team f. Burn out syndrome B. Nurse's role in the management of I.C.C.U and ICTU. C. Mobile coronary care unit. D. Planning in service educational programme and teaching

### Practical

Total – 960 hours  
1 Week – 30 hours

Sr. No.	Dept. / 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	Pediatric Intensive		2	60 Hours
9	OPD		2	60 Hours
	Total		32 Weeks	960 Hours

### Essential Nursing Skills

#### A. Procedures Observed

1. Echo cardiogram

2. Ultrasound
3. Monitoring JVP, CVP
4. CT SCAN
5. MRI
6. Pet SCAN
7. Angiography
8. Cardiac catheterization
9. Angioplasty
10. Various Surgeries
11. Any Other

**B. Procedures Assisted**

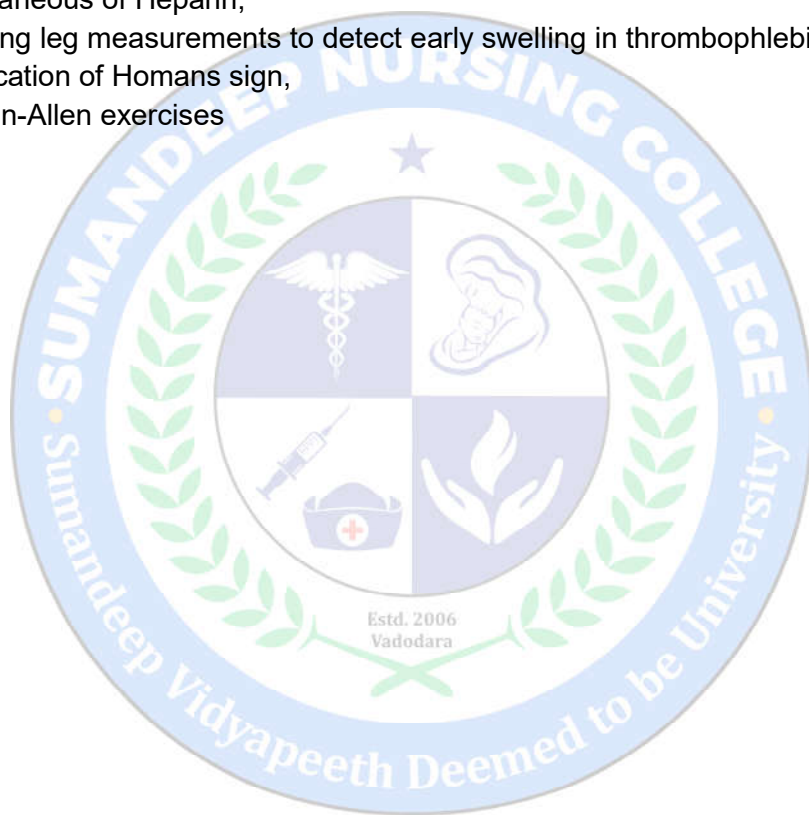
1. Arterial blood gas analysis
2. Thoracentesis
3. Lung biopsy
4. Computer assisted tomography (CAT Scan)
5. M.R.I
6. Pulmonary Angiography
7. Bronchoscopy
8. Pulmonary function test
9. ET tube insertion
10. Tracheotomy tube insertion
11. Cardiac catheterization
12. Angiogram
13. Defibrillation
14. Treadmill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

**C. Procedures Performed (Retrieved through Evidence Based Nursing Practices)**

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,
4. Catheter, nasal cannula, mask, tent
5. Through ET and Tracheotomy tube
6. Manual resuscitation bag
7. Mechanical ventilation
8. Spirometer
9. Tuberculin skin test
10. Aerosol therapy
11. Nebulizer therapy
12. Water seal drainage
13. Chest physiotherapy including – Breathing exercises coughing exercises percussion & vibration
14. Suctioning-Oropharyngeal, nasotracheal, Endotracheal through tracheotomy tube



15. Artificial airway cuff maintenance
16. CPR
17. Care of client on ventilator
18. Identification of different – Arrhythmias
19. Abnormal pulses, respirations
20. B.P. Variation
21. Heart sounds
22. Breath sounds
23. Pulse oximetry
24. Introduction of intracath,
25. Bolus I.V. Injection,
26. Life line,
27. Maintenance of “Heplock”
28. Subcutaneous of Heparin,
29. Obtaining leg measurements to detect early swelling in thrombophlebitis,
30. Identification of Homans sign,
31. Buerger-Allen exercises



## Second year M.Sc Nursing

**Subject: Medical Surgical Nursing**

**Sub-Specialty: Critical Care Nursing**

**Course Code: NCPG-203**

Theory: 150 hours

Practical: 950 hours

Total: 1100 hours

### Course Outcome

After completion of MSc Nursing programme in Medical Surgical Nursing (Critical Care Nursing) postgraduates shall be able to develop expertise and in depth knowledge in the field of Critical care nursing, advanced skills for nursing intervention in caring for critically ill patients, demonstrate function as critical care nurse practitioner/specialist and as educator, manager and researcher in the field of Critical Care Nursing.

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

1. Appreciate trends and issues related to Critical Care Nursing.
2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of critically ill patients.
3. Describe the various drugs used in critical care and nurse's 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
I	5	<b>1. Introduction to Critical Care Nursing</b> A. Historical review- Progressive patient care(PPC) B. Review of anatomy and physiology of vital organs, fluid and electrolyte balance C. Concepts of critical care nursing D. Principles of critical care nursing E. Scope of critical care nursing F. Critical care unit set up including equipment, supplies, use and care of various type of monitors & ventilators G. Flow sheets
II	10	<b>2. Concept of Holistic care applied to critical care nursing practice</b> A. Impact of critical care environment on patients:- B. Risk factors, Assessment of patients, Critical care psychosis, prevention & nursing care for patients affected with psycho physiological & psychosocial problems of critical care unit, Caring for the patient's family, family teaching C. The dynamics of healing in critical care unit:-therapeutic touch, Relaxation, Music therapy, Guided Imagery, acupressure D. Stress and burnout syndrome among health team members
III	14	<b>3. Review</b> A. Pharmacokinetics B. Analgesics/Anti-inflammatory agents C. Antibiotics, antiseptics D. Drug reaction & toxicity E. Drugs used in critical care unit (inclusive of ionotropic, lifesaving drugs) F. Drugs used in various body systems G. IV fluids and electrolytes H. Blood and blood components I. Principles of drug administration, role of nurses and care of drugs of latest evidences
IV	5	<b>4. Pain Management</b> A. Pain & Sedation in Critically ill patients B. Theories of pain, Types of pain, Pain assessment, Systemic responses to pain C. pain management-pharmacological and non-pharmacological measures D. Placebo effect
V	5	<b>5. Infection control in intensive care unit</b> <b>A.</b> Nosocomial infection in intensive care unit; methyl resistant staphylococcus aureus (MRSA), Disinfection, Sterilization, Standard safety measures, Prophylaxis for staff
VI	10	<b>6. Gastrointestinal system</b> A. Causes, Pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: Medical, Surgical and Nursing management of:-Acute Gastrointestinal Bleeding, Abdominal injury, Hepatic Disorders:-Fulminant hepatic failure, Hepatic encephalopathy, Acute

		Pancreatitis, Acute intestinal obstruction, perforative peritonitis
VII	10	<b>7. Renal system</b> A. 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 B. Management Modalities: Hemodialysis, Peritoneal Dialysis, Continuous Ambulatory Peritoneal Dialysis, Continuous arteriovenous hemodialysis, Renal Transplant,
VIII	10	<b>8. Nervous system</b> A. Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: Medical, Surgical and Nursing management of:-Common Neurological Disorders:-Cerebrovascular disease, Cerebrovascular accident, Seizure disorders, GuilleinBarre-Syndrome, Myasthenia Gravis, Coma, Persistent vegetative state, Encephalopathy, Head injury, Spinal Cord injury B. Management Modalities: Assessment of Intracranial pressure, Management of intracranial hypertension, Craniotomy C. Problems associated with neurological disorders: Thermo regulation, Unconsciousness, Herniation syndrome
IX	5	<b>9. Endocrine system</b> A. 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	<b>10. Management of other Emergency conditions</b> A. Mechanism of injury, Thoracic injuries, Abdominal injuries, pelvic fractures, complications of trauma, Head injuries B. Shock: Shock syndrome, Hypovolemic, Cardiogenic, Anaphylactic, Neurogenic and Septic shock C. Systemic inflammatory Response: The inflammatory response, Multiple organ dysfunction syndrome D. Disseminated Intravascular Coagulation E. Drug Overdose and Poisoning, F. Acquired Immunodeficiency Syndrome (AIDS) G. Ophthalmic: Eye injuries, Glaucoma, retinal detachment H. Ear Nose Throat: Foreign bodies, stridor, bleeding, quincy, acute allergic conditions I. Psychiatric emergencies; suicide, J. crisis intervention
XI	20	<b>11. Cardiovascular emergencies</b> A. Principles of Nursing in caring for patients with Cardiovascular disorders B. Assessment: Cardiovascular system: Heart sounds, Diagnostic studies: - Cardiac enzymes studies, Electrocardiographic monitoring, Holter monitoring, Stress test. Echo cardiography, Coronary angiography, Nuclear medicine studies



		<p>C. Causes, Pathophysiology, Clinical types, Clinical features, Diagnostic Prognosis, Management : Medical, Surgical &amp; Nursing management of:-Hypertensive crisis, Coronary artery disease, Acute Myocardial infarction, Cardiomyopathy, Deep vein thrombosis, Valvular diseases, Heart block, Cardiac arrhythmias &amp; conduction disturbances, Aneurysms, Endocarditis, Heart failure Cardio pulmonary resuscitation BCLS/ ACLS</p> <p>D. Management Modalities: Thrombolytic therapy, Pacemaker – temporary &amp; 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</p>
XII	15	<p><b>12. Respiratory System</b></p> <p>A. Acid-base balance &amp; imbalance</p> <p>B. Assessment : History &amp; Physical Examination</p> <p>C. 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</p> <p>D. Causes Pathophysiology, Clinical types, Clinical features, Prognosis, Management: Medical, Surgical and Nursing management of Common pulmonary disorders:-Pneumonia, Status asthmaticus, interstitial lung disease, Pleural effusion, Chronic obstructive pulmonary disease, Pulmonary tuberculosis, Pulmonary edema, Atelectasis, Pulmonary embolism, Acute respiratory failure, Acute respiratory distress syndrome (ARDS), Chest Trauma Haemothorax, Pneumothorax</p> <p>E. Management Modalities:-Airway Management</p> <p>F. Ventilatory Management:-Invasive, non- invasive, long term mechanical ventilations</p> <p>G. Bronchial Hygiene:-Nebulization, deep breathing exercise, chest physiotherapy, postural drainage, Inter Costal Drainage, Thoracic surgery.</p>
XIII	7	<p><b>13. Burns</b></p> <p>A. Clinical types, classification, pathophysiology, clinical features, assessment, diagnosis, prognosis, Management: Medical, Surgical &amp; Nursing management of burns</p> <p>B. Fluid and electrolyte therapy – calculation of fluids and its administration</p> <p>C. Pain management</p> <p>D. Wound care</p> <p>E. Infection control</p> <p>F. Prevention and management of burn complications</p> <p>G. Grafts and flaps</p> <p>H. Reconstructive surgery</p> <p>I. Rehabilitation</p>

XIV	5	<b>14. Obstetrical Emergencies</b> A. Causes, Pathophysiology, Clinical types, clinical features, diagnostic Prognosis, Management: Medical, Surgical and Nursing management of :Antepartum hemorrhage, Preeclampsia, eclampsia, Obstructed labour and ruptured uterus, Postpartum hemorrhage, Puerperal sepsis, Obstetrical shock
XV	10	<b>15. Neonatal pediatric emergencies</b> A. Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and Nursing management of a. Neonatal emergencies B. 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:- b. Cyanotic heart disease, tracheo-oesophageal fistula, congenital hypertrophic pyloric stenosis, imperforate anus. c. Pediatric emergencies C. Dehydration, Acute Broncho pneumonia, Acute respiratory distress syndrome, Poisoning, Foreign bodies, seizures, traumas, Status asthmatics.
XVI	2	<b>16. Legal and ethical issues in critical care-Nurse's role</b> A. Brain death B. Organ donation & Counseling C. Do Not Resuscitate (DNR) D. Euthanasia E. Living will
XVII	2	<b>17. Quality assurance</b> A. Standards, Protocols, Policies, Procedures B. Infection control; Standard safety measures C. Nursing audit D. Staffing E. Design of ICU/CCU

**Practical**

Total – 960 Hours  
1 Week – 30 Hours

Sr. No.	Dept. / Unit	No. of Week	Total Hours
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	Pediatric/NICU	2	60 Hours
	<b>Total</b>	<b>32 Weeks</b>	<b>960 Hours</b>

Essential Critical care nursing skills

**Procedures Observed**

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

**Procedures Assisted (Retrieved through Evidence Based Nursing Practices)**

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

**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 intubation
- 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.

**Other Procedures:**





**Second Year M.Sc Nursing**  
**CLINICAL SPECIALITY – II**  
**Subject: Medical Surgical Nursing.**  
**Sub-Specialty: Oncology Nursing**

**Course Code: NCPG-203**

Theory: 150 hours  
Practical: 950 hours  
Total: 1100 hours

**Course Outcome:**

At the completion of the course, the student shall be understand the indepththe field of oncology nursing, advanced skills for nursing intervention in various oncological conditions, function as oncology nurse practitioner/specialist and provide quality care and function as educator, manager, and researcher in the field of oncology nursing.

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

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
I	4	<b>1. Introduction</b> <ul style="list-style-type: none"> <li>A. Epidemiology-Incidence, Prevalence – Global, National, State and Local</li> <li>B. Disease burden, concept of cancer, risk factors</li> <li>C. Historical perspectives</li> <li>D. Trends and issues</li> <li>E. Principles of cancer management</li> <li>F. Roles and responsibilities of oncology nurse</li> </ul>
II	5	<b>2. The Nature of Cancer</b> <ul style="list-style-type: none"> <li>A. Normal cell biology</li> <li>B. The Immune system</li> <li>C. Pathological and pathophysiological changes in tissues</li> <li>D. Biology of the cancer cell</li> <li>E. Clone formation Transformation</li> <li>F. Tumor stem lines</li> <li>G. Structure of a solid tumor</li> <li>H. Products produced by the tumor</li> <li>I. Systemic effects of tumor growth</li> </ul>
III	4	<b>3. Etiology of cancer</b> <ul style="list-style-type: none"> <li>A. Carcinogenesis,</li> <li>B. Theories of cancer causation</li> <li>C. Risk factors</li> <li>D. Carcinogens – genetic factors, chemical carcinogens, radiation, viruses, Immune system failure, rapid tissue proliferation</li> <li>E. Hormone changes, diet, emotional factors.</li> </ul>
IV	10	<b>4. Diagnostic Evaluation</b> <ul style="list-style-type: none"> <li>A. Health assessment: History taking, physical examination,</li> <li>B. Staging and grading of tumors,</li> <li>C. TNM Classification</li> <li>D. Common diagnostic tests               <ul style="list-style-type: none"> <li>a. Blood investigation: Hematological, Bio-chemical, Tumor markers, Hormonal assay</li> <li>b. Cytology: Fine needle aspiration cytology(FNAC)</li> <li>c. Histopathology: Biopsy</li> <li>d. Radiological assessment: MRI, Ultrasound, Computed tomography, Mammography, Positron emission tomography(PET), Radio nuclide imaging, Functional metabolism imaging</li> <li>e. Endoscopies</li> </ul> </li> <li>E. Nurses responsibilities in diagnostic measures</li> </ul>
V	10	<b>5. Levels of prevention and care</b> <ul style="list-style-type: none"> <li>A. Primary prevention – Guidelines for cancer detection, general measures, Warning signs of cancer,</li> <li>B. Self-examination-Oral, Breast, Testicular</li> <li>C. Secondary prevention – early diagnosis.</li> <li>D. Screening</li> <li>E. Tertiary prevention – disability limitation,</li> <li>F. Rehabilitation :Mobility , Speech, Bowel and bladder, Ostomiesetc</li> <li>G. Patient and family education,</li> <li>H. Discharge instruction, follow-up care and use of community resources.</li> </ul>
VI	25	<b>6. Cancer Treatment Modalities and Nurse's Role</b> <ul style="list-style-type: none"> <li>A. Surgery</li> </ul>

		<ul style="list-style-type: none"> <li>a. Principles of surgical oncology</li> <li>b. Current surgical strategy</li> <li>c. Determining surgical risk</li> <li>d. Special surgical techniques</li> <li>e. Pre-intra-postoperative nursing care.</li> <li>f. Acute and chronic surgical complication</li> <li>g. Future directions and advances</li> </ul> <p><b>B. Chemotherapy</b></p> <ul style="list-style-type: none"> <li>a. Principles and classification of chemotherapeutics</li> <li>b. Pharmacology of antineoplastic drugs-Mechanism of action, Absorption, protein, binding, Bio-transformation, excretion, common side effects, drug toxicity</li> <li>c. Calculating drug doses,</li> <li>d. Therapeutic response to chemotherapy-Tumor variables, drug resistance,</li> <li>e. Safety precaution</li> </ul> <p><b>C. Radiation Therapy</b></p> <ul style="list-style-type: none"> <li>a. Physics of radiotherapy</li> <li>b. Types of ionizing rays</li> <li>c. Radiation equipments: Linear accelerator, cibalt,implants, isotopes</li> <li>d. Types of therapies: Oral, Brachy therapy, tele therapy, selectron therapy</li> <li>e. Effects of radiation on the body tissue.</li> <li>f. Radiation biology-cell damage hypoxic cells, alteration of tumor of kinetics</li> <li>g. Approaches to radiation therapy</li> <li>h. External radiotherapy</li> <li>i. Internal radiotherapy-unsealed</li> <li>j. Sealed sources.</li> <li>k. Effectiveness of radiotherapy-radio sensitivity, treatment effects</li> <li>l. Complications of radiotherapy</li> <li>m. Radiation safety: standards of Bhabha Atomic Research Centre (BARC)</li> </ul> <p><b>D. BONE Marrow Transplantation/Stem Cell Transplantation</b></p> <ul style="list-style-type: none"> <li>a. Types, indications, transplantation procedure, complications and nursing management</li> <li>b. Types and donor sources</li> <li>c. Preparation and care donor and recipient</li> <li>d. Bone marrow bank</li> <li>e. Legal and ethical issues</li> </ul> <p><b>E. Immunotherapy (Biotherapy)</b></p> <ul style="list-style-type: none"> <li>a. Concepts and principles</li> <li>b. Classification of agents</li> <li>c. Treatment and applications</li> </ul> <p><b>F. Gene Therapy</b></p> <ul style="list-style-type: none"> <li>a. Current concepts and practices</li> </ul> <p><b>G. Alternative and complementary Therapies</b></p> <ul style="list-style-type: none"> <li>b. Current practices</li> </ul>
VII	10	<p><b>7. Pain Management:</b>theories, types and</p> <ul style="list-style-type: none"> <li>a. Nature of cancer pain</li> <li>b. Pathophysiology of pain</li> <li>c. Pain threshold</li> </ul> <p><b>A. Assessment of pain</b></p>

		<ul style="list-style-type: none"> <li>a. Principles of cancer pain control</li> <li>b. Pharmacological: opioid and non-opioid analgesic therapy</li> <li>c. Patient controlled analgesia (PCA)</li> <li>d. Other invasive techniques of pain control</li> <li>e. Recent developments in Cancer pain</li> </ul> <p><b>B. Non pharmacological pain relief techniques:</b></p> <ul style="list-style-type: none"> <li>a. Complementary therapies (Music, massage, meditation, relaxation techniques, biofeed back etc.)</li> <li>b. Psychological intervention in pain control</li> <li>c. Alternative system of medicines</li> </ul> <p><b>C. Role of nurse</b></p>
VIII	5	<p><b>8. Palliative care</b></p> <ul style="list-style-type: none"> <li>A. Definition and scope, philosophy</li> <li>B. Concept and elements of palliative care</li> <li>C. Global and Indian perspective of palliative care</li> <li>D. Quality of life issues</li> <li>E. Communication skill</li> <li>F. Nursing perspective of palliative care and its elements</li> <li>G. Home care</li> <li>H. Hospice care</li> <li>I. Role of nurse in palliative care.</li> </ul>
IX	2	<p><b>9. Infection control:</b></p> <ul style="list-style-type: none"> <li>A. Process of infection, risk of hospitalization, nosocomial infection-prevention and control of infection in acute, long term care facility and community based care</li> <li>B. Stander safety measures</li> </ul>
X	30	<p><b>10. Nursing Care of patient with specific malignant disorders</b></p> <ul style="list-style-type: none"> <li>A. Malignancies of G.I. system-oral, esophagus, stomach, rectal, liver &amp; pancreas, care of ostomies/stoma</li> <li>B. Respiratory malignancies</li> <li>C. Genito- urinary system malignancies-prostate Bladder, renal testicular malignancies</li> <li>D. Gynecologist malignancies-cervix, uterus, ovary</li> <li>E. Hematological malignancies- Lymphomas, Leukemias.</li> <li>F. Malignancies of musculoskeletal system</li> <li>G. Endocrine malignancies</li> <li>H. Skin</li> <li>I. Head and Neck-Breast cancer, AIDS related Malignancies (Kaposi's Sarcoma)</li> </ul>
XI	10	<p><b>11. Pediatric malignancies</b></p> <ul style="list-style-type: none"> <li>A. Leukemia, Lymphoma, Neuro- blastoma</li> <li>B. Wilm's tumor, soft tissue sarcoma, Retinoblastoma</li> <li>C. Nursing Management of children with pediatric malignancies</li> </ul>
XII	15	<p><b>12. Nursing Management of Physiological condition and symptoms of Cancer Patient</b></p> <ul style="list-style-type: none"> <li>A. <b>Nutrition:-</b> effects of cancer on nutritional status and its consequences:- Anemia, Cachexia, Xerostomis, mucositis, Dysphagia, nausea and vomiting, constipation, diarrhea, electrolyte imbalances, taste alterations</li> <li>B. Impaired mobility: Decubitus ulcer, pathologic fractures, thrombophlebitis, pulmonary embolism, contractures, footdrop</li> <li>C. <b>Other symptoms:</b> <ul style="list-style-type: none"> <li>a. Dyspepsia &amp; hiccup, dyspnoea</li> <li>b. Intestinal obstruction</li> <li>c. Fungating wounds</li> </ul> </li> </ul>



		<ul style="list-style-type: none"> <li>d. Anxiety &amp; depression, insomnia</li> <li>e. Lymph edema</li> </ul> <p><b>D. Impact of cancer on sexuality:</b></p> <ul style="list-style-type: none"> <li>a. Effects of radiotherapy/chemotherapy/surgery on sexuality of the cancer patient</li> <li>b. Nursing management of cancer patient experiencing sexual dysfunction</li> <li>c. Sexual counseling</li> </ul>
XIII	10	<p><b>13. Cancer Emergencies</b></p> <ul style="list-style-type: none"> <li>A. Disseminated intravascular coagulation (DIC)</li> <li>B. Malignant pleural effusion</li> <li>C. Neoplastic cardiac dampened and septic shock spinal cord compression</li> <li>D. Superior venacava syndrome</li> <li>E. Metabolic emergency: hyper and hypocalcaemia</li> <li>F. Surgical emergency</li> <li>G. Urological emergency</li> <li>H. Hemorrhage</li> <li>I. Organ obstruction</li> <li>J. Brain metastasis</li> <li>K. Nurses role in managing oncologic emergencies</li> </ul>
XIV	8	<p><b>14. Psycho-Social Aspects Nursing Care</b></p> <ul style="list-style-type: none"> <li>A. Psychological responses of patients with cancer</li> <li>B. Psychological assessment</li> <li>C. Crisis intervention, coping mechanisms</li> <li>D. Stress management, spiritual/cultural care and needs</li> <li>E. Counseling: individual and family</li> <li>F. Maximizing quality of life of patient and family</li> <li>G. Ethical, moral and legal issues               <ul style="list-style-type: none"> <li>a. End of life care</li> <li>b. Grief and grieving process</li> <li>c. Bereavement support</li> <li>d. Care of nurses who care for the dying.</li> </ul> </li> </ul>
XV	2	<p><b>15. Layout and Design of an oncology institution/ ward, OPD, chemotherapy unit, Bone marrow transplantation unit, Pain clinic etc.</b></p> <ul style="list-style-type: none"> <li>A. Practice standards of oncology nursing               <ul style="list-style-type: none"> <li>a. Policies and procedures</li> </ul> </li> <li>B. Establishing Standing orders and protocols</li> <li>C. Quality Assurance Programme in oncology units               <ul style="list-style-type: none"> <li>b. Nursing audit</li> </ul> </li> </ul>

## Clinical Experience

Sr. No.	Dept. /Unit	No. of Week	Total Hours
1	Medical Oncology ward	6	180 Hours
2	Surgical Oncology ward	6	80 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	Outpatient 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 visit	1	30 Hours
	Total	32 Weeks	960 Hours

**Procedure 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

**Procedure Assisted: -**

1. IV cannulation -Open method
2. Chemotherapy
3. Radiotherapy-Brach therapy-Low density Radiation, High Density Radiation.
4. Interstitial implantation
5. Bio-therapy and Gene therapy
6. Teletherapy-Treatment planning
7. Bone marrow aspiration and biopsy
8. Biopsy-tissue
9. FNAC-Fine Needle Aspiration Cytology and biopsy
10. Advance Cardiac life support
11. Endotracheal intubation
12. Defibrillation ventilation

13. Tracheotomy
14. Thoracentesis
15. Paracentesis
16. Lumbar puncture
17. Arterial blood Gas
18. Nerve block
19. Chest tube insertion
20. Intercostal drainage
21. CVP monitoring

**Procedure Performed (Retrieved through Evidence Based Nursing Practices)**

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

**Other procedures** (As per the institutional protocol)

1. Alternative therapies



**Second Year M.Sc Nursing**  
**CLINICAL SPECIALITY – II**  
**Subject: Medical Surgical Nursing**  
**Sub- Specialty: Neurosciences Nursing**

**Course Code: NCPG-203**

Theory: 150 hours  
Practical's: 950 hours  
Total: 1100 hours

**Course Outcome:**

After completion of M.Sc Nursing programme in Medical Surgical Nursing (Neurosciences Nursing) postgraduates shall be understand the in-depth knowledge in the field of neurology and neurosurgical Nursing, advanced skills for nursing intervention in caring for patients with neurological and neurosurgical disorders, function as neuroscience nurse practitioner/ specialist and function as educator, manager and researcher in the field of neurology and neurosurgical Nursing.

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

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



## Content Outline

Unit	Hours	Content
I	5	<b>1. Introduction</b> A. Introduction to neuroscience (neurological and neurosurgical) nursing a. History-Development in neurological and neurosurgical nursing, Service & education b. Emerging trends and issues in neurology and neuro surgery and its implication to nursing. c. neurological and neurosurgical problems – d. Concepts, principles and nursing perspectives e. Ethical and legal issues
II	5	<b>2. Epidemiology</b> A. Major health problems- B. Risk factors associated with neurological conditions- Hereditary, Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic considerations, occupational and infections. C. Health promotion, disease prevention, life style modification and its implications to nursing. D. Alternate system of medicine/complementary therapies
III	10	<b>3. Review of Anatomy and physiology</b> A. Embryology B. Structure and functions of Nervous system- CNS, ANS, cerebral circulation , cranial and spinal nerves and reflexes, motor and sensory functions C. Sensory organs
IV	15	<b>4. Assessment and diagnostic measures</b> A. <b>Assessment</b> a. History taking b. Physical assessment, psychosocial assessment c. Neurological assessments, Glasgow coma scale interpretation & its relevance to nursing. d. Common assessment abnormalities B. <b>Diagnostic measures</b> a. Cerebro spinal fluid analysis b. 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. c. Electorgraphic studies- Electro encephalography, MEG, EMG, video EEG, d. Nerve conduction studies-Evoked potentials, visual evoked potentials, brain stem auditory evoked potentials, somatosensory evoked potentials e. Ultrasound studies-Carotid duplex, transcranial Doppler sonography, f. Immunological studies g. Biopsies – muscle, nerve and Brain. D. Interpretation of diagnostic measures E. Nurse's role in diagnostic tests.

V	5	<b>5. Meeting Nutritional needs of neurological patients</b> <ul style="list-style-type: none"> <li>A. Basic nutritional requirements</li> <li>B. Metabolic changes following injury and starvation</li> <li>C. Nutritional assessment</li> <li>D. Common neurological problems that interfere with nutrition and strategies for meeting their nutritional needs</li> <li>E. Special metabolic and electrolyte imbalances</li> <li>F. Chronic fatigue syndrome</li> </ul>
VI	5	<b>6. Drugs used in neurological and neurosurgical disorders</b> <ul style="list-style-type: none"> <li>A. Classification</li> <li>B. Indications, contraindications, actions and effects, toxic effects</li> <li>C. Role of nurse</li> </ul>
VII	10	<b>7. Traumatic conditions.</b> <ul style="list-style-type: none"> <li>A. Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of: <ul style="list-style-type: none"> <li>a. Cranio cerebral injuries.</li> <li>b. Spinal &amp; Spinal cord injuries.</li> <li>c. Peripheral nerve injuries.</li> <li>d. Unconsciousness</li> </ul> </li> </ul>
VIII	10	<b>8. Cerebro vascular disorders.</b> <ul style="list-style-type: none"> <li>A. Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis, Management: medical, surgical and Nursing management of: <ul style="list-style-type: none"> <li>a. Stroke &amp; arterio venous thrombosis.</li> <li>b. Haemorrhagic embolus.</li> <li>c. Cerebro vascular accidents.</li> <li>d. Intracranial aneurysm.</li> <li>e. Subarchnoid Haemorrhage.</li> <li>f. Arterio venous fistula.</li> <li>g. Brain tumours</li> </ul> </li> <li>B. Diseases of cranial nerves; Trigeminal neuralgia, Facial palsy, Bulbar palsy.</li> </ul>
IX	10	<b>9. Degenerating and demyelinating disorders</b> <ul style="list-style-type: none"> <li>A. Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and Nursing management of</li> <li>B. Motor neuron diseases.</li> <li>C. Movement disorders- Tics, dystonia, chorea, wilson's disease, essential tremors</li> <li>D. Dementia.</li> <li>E. Parkinson's disease.</li> <li>F. Multiple sclerosis.</li> <li>G. Alzheimer's</li> </ul>
X	10	<b>10. Neuro infections</b> <ul style="list-style-type: none"> <li>A. Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis, Management: medical, surgical and nursing management of neuroinfections <ul style="list-style-type: none"> <li>a. Meningitis-types</li> <li>b. Encephalitis.</li> <li>c. Poliomyelitis.</li> <li>d. Parasitic infections.</li> <li>e. Bacterial infections</li> <li>f. Neurosyphilis</li> <li>g. HIV &amp; AIDS.</li> </ul> </li> </ul>

		h. Brain abscess.
XI	10	<b>11. Paroxysmal disorders.</b> A. Causes, pathophysiology, Clinical types, Clinical features, diagnosis, Prognosis , Management: medical, surgical and Nursing management of a. Epilepsy and seizures. b. Status epilepticus. c. Syncope. d. Meniere's syndrome. e. Cephalgia.
XII	10	<b>12. Developmental disorders.</b> A. Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and Nursing management of: a. Hydrocephalus. b. Craniosynostosis. c. spina bifida- Meningocele, Meningomyelocele, encephalocele d. syringomyelia. e. Cerebro vascular system anomalies. f. Cerebral palsies. g. Down's syndrome
XIII	10	<b>13. Neuro muscular disorders.</b> A. Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and Nursing management of: a. Polyneuritis – G B Syndrome. b. Muscular dystrophy. c. Myasthenia gravis. d. Trigeminal neuralgia. e. Bell's palsy. f. Meniere's disease g. Carpal tunnel syndrome h. Peripheral neuropathies
XIV	5	<b>14. Neoplasms – surgical conditions.</b> B. 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	<b>15. Other disorders</b> A. Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and Nursing management of a. Metabolic disorders- diabetes, insipidus, metabolic encephalopathy b. Sleep disorders c. Auto immune disorders- multiple sclerosis, inflammatory myopathies.
XVI	10	<b>16. Neuro emergencies</b> A. Causes, pathophysiology, Clinical types, Clinical features, diagnostic, Prognosis , Management: medical, surgical and Nursing management of: a. Increased intracranial pressure b. Unconscious

		<ul style="list-style-type: none"> <li>c. Herniation syndrome</li> <li>d. Seizures</li> <li>e. Severe head injuries</li> <li>f. Spinal injuries</li> <li>g. Cerebro vascular accidents</li> </ul>
XVII	05	<b>15. Rehabilitation.</b> <ul style="list-style-type: none"> <li>A. Concept and Principles of Rehabilitation.</li> <li>B. Factors affecting quality of life and coping</li> <li>C. Rehabilitation in acute care setting, and following stroke, head injury and degenerative disorders of brain</li> <li>D. Physiotherapy.</li> <li>E. Counselling</li> <li>F. Care giver's role</li> <li>G. Speech &amp; Language:-Neurogenic communication disorders, Speech Therapy</li> </ul>
XVIII	5	<b>16. Ethical and legal issues in neuroscience nursing</b> <ul style="list-style-type: none"> <li>A. Brain death and organ transplantation</li> <li>B. Euthanasia</li> <li>C. Negligence and malpractice</li> <li>D. Nosocomial infections</li> </ul>
XIX	5	<b>17. Quality assurance in neurological nursing practice</b> <ul style="list-style-type: none"> <li>A. Role of advance practitioner in neurological nursing</li> <li>B. Professional practice standards</li> <li>C. Quality control in neurologic nursing</li> <li>D. Nursing audit</li> <li>E. Neuro ICU               <ul style="list-style-type: none"> <li>a. Philosophy, aims and objectives</li> <li>b. Policies, staffing pattern, design and physical plan of neuro ICU</li> <li>c. Team approach, functions</li> <li>d. Psychosocial aspects in relation to staff and clients of neuro ICU,</li> <li>e. In-service education</li> </ul> </li> </ul>



**Practical**

Total = 960 Hours  
1 Week = 30 Hours

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

**ESSENTIAL NEURO NURSING SKILLS****Procedures Observed**

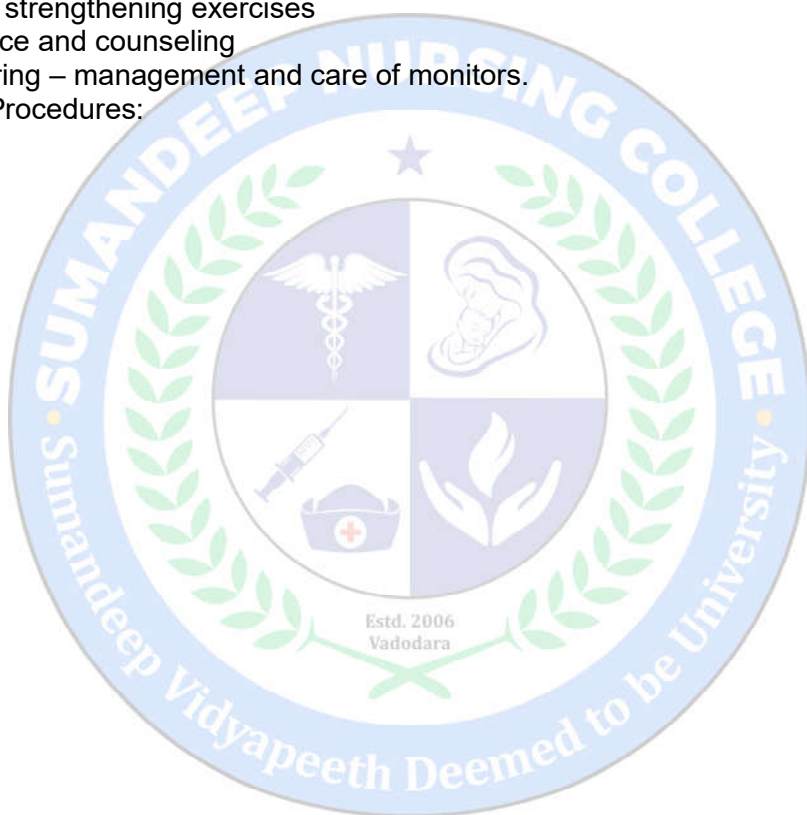
1. CT scan
2. MRI
3. PET
4. EEG
5. EMG
6. Sleep pattern studies/Therapy
7. Radiographical studies
8. Neuro surgeries
9. Nerve conduction studies
10. Ultrasound studies
11. Any others

**Procedures Assisted**

1. Advanced Cardiac life support
2. Lumbar Puncture
3. Biopsies – muscle, nerve and Brain
4. Arterial Blood Gas
5. ECG Recording
6. Blood transfusion
7. IV cannulation – open method
8. Endotracheal intubation
9. Ventilation
10. Tracheostomy
11. ICP monitoring
12. Gama Knife
13. Cerebral angiography
14. Myelography
15. Neuro surgeries

**Procedures Performed (Retrieved through Evidence Based Nursing Practices)**

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



**Second Year M.Sc Nursing**  
**CLINICAL SPECIALITY – II**  
**Subject: Medical Surgical Nursing**  
**Sub- Specialty: Nephro-Urology Nursing**

**Course Code: NCPG-203**

Theory: 150 hours  
Practical: 950 hours  
Total: 1100 hours

**Course Outcome:**

After completion of M.Sc Nursing programme in Medical Surgical Nursing (Nephro-Urology Nursing) postgraduates shall be able to develop in-depth knowledge, advanced skills for nursing intervention in various nephro and urological conditions, demonstrate function as nephro and urology nurse practitioner/specialist and provide quality care and to function as educator, manager, and researcher in the field of Nephro and urology nursing.

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

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

## Content Outline

Unit	Hours	Content
I	5	<b>1. Introduction</b> <ul style="list-style-type: none"> <li>A. Historical development: trends and issues in the field of nephro and urological nursing.</li> <li>B. nephro and urological problems</li> <li>C. Concepts, principles and nursing perspectives</li> <li>D. Ethical and legal issues</li> </ul>
II	5	<b>2. Epidemiology</b> <ul style="list-style-type: none"> <li>A. Major health problems- urinary dysfunction, urinary tract infections, Glomerular disorders, obstructive disorders and other urinary disorders</li> <li>B. Risk factors associated with nephro and urological conditions conditions- Hereditary, Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic considerations</li> <li>C. Health promotion, disease prevention, life style modification and its implications to nursing</li> <li>D. Alternate system of medicine/complementary therapies</li> </ul>
III	5	<b>3. Review of anatomy and physiology of urinary system</b> <ul style="list-style-type: none"> <li>A. Embryology</li> <li>B. Structure and functions</li> <li>C. Renal circulation</li> <li>D. Physiology of urine formation</li> <li>E. Fluid and electrolyte balance</li> <li>F. Acid base balance</li> <li>G. Immunology specific to kidney</li> </ul>
IV	20	<b>4. Assessment and diagnostic measures</b> <ul style="list-style-type: none"> <li>A. History taking</li> <li>B. Physical assessment, psychosocial assessment</li> <li>C. Common assessment abnormalities-dysurea, frequency, enuresis, urgency, hesitancy, hematuria, pain, retention, burning on urination, hematuria, incontinence, nocturia, polyurea, anuria, oliguria.</li> <li>D. Diagnostic tests-urine studies, blood chemistry, radiological procedures-KUB, IVP, nephrotomogram, retrograde pyelogram, renal arteriogram, renal ultrasound, CT scan, MRI, cystogram, renal scan, biopsy, endoscopy-cystoscopy, urodynamics studies, cystometrogram, urinary flow study, sphincter electromyography, voiding pressure flow study, videourodynamics, Whitaker study.</li> <li>E. Interpretation of diagnostic measures.</li> <li>F. Nurse's role in diagnostic tests</li> </ul>
V	5	<b>5. Renal immunopathy/Immunopathology</b> <ul style="list-style-type: none"> <li>A. General Concept of immunopathology</li> <li>B. Immune mechanism of glomerular vascular disease</li> <li>C. Role of mediator systems in glomerular vascular disease</li> </ul>
VI	15	<b>6. Urological Disorders and Nursing Management</b> <ul style="list-style-type: none"> <li>A. Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of</li> <li>B. Urinary tract infections- pyelonephritis, lower urinary tract infections,</li> <li>C. Disorders for ureters, bladder and urethra</li> <li>D. Urinary tract infections-</li> <li>E. Urinary dysfunctions- urinary retention, urinary incontinence, urinary reflux.</li> </ul>



		<p>F. Bladder disorders- neoplasms, calculi, neurogenic bladder, trauma, congenital abnormalities</p> <p>G. Benign prostrate hypertrophy(BPH)</p> <p>H. Ureteral disorders: urethritis, ureteral trauma, congenital anomalies of ureters</p> <p>I. Ureteral disorders- tumors, trauma, congenital anomalies of ureters.</p>
VII	25	<p><b>7. Glomeruli disorders and nursing management</b></p> <p>A. Etiology, clinical manifestations, diagnosis, prognosis, relatedpathophysiology, medical , surgical and nursing management of:</p> <ol style="list-style-type: none"> <li>Glomeruli nephritis- chronic, acute , nephritic syndrome</li> <li>Acute Renal failure and chronic renal failure.</li> <li>Renal calculi</li> <li>Renal tumors-benign and malignant</li> <li>Renal trauma</li> <li>Renal abscess</li> <li>Diabetic nephropathy</li> <li>Vascular disorders</li> <li>Renal tuberculosis</li> <li>Polycystic</li> <li>Congenital disorders</li> <li>Hereditary renal disorders</li> </ol>
VIII	10	<p><b>8. Management of Renal emergencies</b></p> <ol style="list-style-type: none"> <li>Anuria</li> <li>Acute Renal failure</li> <li>Poisoning</li> <li>Trauma</li> <li>Urine retention</li> <li>Acute graft rejection</li> <li>Hematuria</li> <li>Nurse's role</li> </ol>
IX	10	<p><b>9. Drugs used in urinary disorders</b></p> <ol style="list-style-type: none"> <li>Classification</li> <li>Indications, contraindications, actions and effects, toxic effects</li> <li>Role of nurse.</li> </ol>
X	10	<p><b>10. Dialysis</b></p> <ol style="list-style-type: none"> <li>Dialysis- Historical, types, Principles, goals <ol style="list-style-type: none"> <li>Hemodialysis- vascular access sites- temporary and permanent</li> <li>Peritoneal dialysis</li> </ol> </li> <li>Dialysis Procedures- steps, equipments, maintenance,</li> <li>Role of nurse- pre dialysis, intra and post dialysis</li> <li>Complications-</li> <li>Counseling</li> <li>patient education</li> <li>Records and reports</li> </ol>
XI	10	<p><b>11. Kidney transplantation</b></p> <ol style="list-style-type: none"> <li>Nursing management of a patient with Kidney transplantation</li> <li>Kidney transplantations- a historical review</li> <li>Immunology of graft rejections</li> <li>The recipient of a renal transplant</li> <li>Renal preservations</li> <li>Human Leucocytic Antigen(HLA) typing matching and cross matching in renal transplantation</li> <li>Surgical techniques of renal transplantations</li> </ol>

		H. Chronic renal transplant rejection I. Complication after KTP: Vascular and lymphatic, Urological, cardiovascular, liver and neurological, infectious complication J. KTP in children and management of pediatric patient with KTP K. KTP in developing countries L. Results of KTP M. Work up of donor and recipient for renal transplant N. Psychological aspect of KTP and organ donations O. Ethics in transplants P. Cadaveric transplantation
XII	5	<b>12. Rehabilitation of patient with nephrological problems</b> A. Risk factors and prevention B. Rehabilitation of patients on dialysis and after kidney transplant C. Rehabilitation of patients after urinary diversions D. Family and patient teaching
XIII	10	<b>13. Pediatric urinary disorders</b> A. Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical, surgical and nursing management of children with Renal Diseases -UTI, ureteral reflux, glomerulonephritis, nephrotic syndrome infantile nephrosis, cystic kidneys, familial factors in renal diseases in childhood, Haemolyticuraemicsyndrome. Benign recurrent hematuria, nephropathy, Wilms' tumor.
XIV	5	<b>14. Critical care units- dialysis, KTP unit</b> A. Philosophy, aims and objectives B. Policies, staffing pattern, design and physical plan of Dialysis and KTP units C. Team approach, functions D. Psychosocial aspects in relation to staff and clients of ICU, dialysis unit E. In-service education F. Ethical and legal issues
XV	5	<b>15. Quality assurance in nephrological nursing practice</b> A. Role of advance practitioner in nephrological nursing B. Professional practice standards C. Quality control in nephrological nursing D. Nursing audit.

**Practical.**

Total = 960 Hours  
1 Week = 30 Hours

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

**Procedures Observed:**

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

**Procedures Assisted:**

1. Blood transfusion.
2. I V canulation 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

**Procedure Performed (Retrieved through Evidence Based Nursing Practices):**

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

**Other Procedures:**

**CLINICAL SPECIALITY – II**  
**Subject: Medical Surgical Nursing**  
**Sub- Specialty: Orthopedic Nursing**

**Course Code: NCPG-203**

Theory: 150 hours  
 Practical's: 950 hours  
 Total: 1100 hours

**Course Outcome:**

At the completion of the course, the student shall be understand the skills for nursing intervention in various orthopedic conditions, function as orthopedic nurse practitioner/specialist providing quality care and function as educator, manager, and researcher in the field of orthopedic nursing.

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

1. Appreciate the history and developments in the field of orthopedic nursing
2. Identify the psycho-social needs of the patient while providing holistic care.
3. Perform physical and psychological assessment of patients with orthopedic conditions and disabilities.
4. Describe various disease conditions and their management
5. Discuss various diagnostic tests required in orthopedic conditions
6. Apply nursing process in providing care to patients with orthopedic conditions and those requiring rehabilitation.
7. Recognize and manage orthopedic emergencies.
8. Describe recent technologies and treatment modalities in the management of patients with orthopedic conditions and those requiring rehabilitation.
9. Integrate the concept of family centered, long term care and community based rehabilitation to patients with orthopedic conditions.
10. Counsel the patients and their families with orthopedic conditions
11. Describe various orthotic and prosthetic appliances
12. Appreciate the legal and ethical issues pertaining to patients with orthopedic conditions and those requiring rehabilitation.
13. Appreciate the role of alternative system of medicine in care of patients with orthopedic conditions
14. Incorporate evidence based nursing practice and identify the areas of research in the field of orthopedic nursing.
15. Recognize the role of orthopedic nurse practitioner and as a member of the orthopedic and rehabilitation team.
16. Teach orthopedic nursing to undergraduate students and in-service nurses.
17. Prepare a design and layout of orthopedic and rehabilitative units.

**Content Outline**

Unit	Hours	Content
I	5	<b>1. Introduction</b> A. Historical perspectives – History and trends in orthopedic nursing B. Definition and scope of orthopedic nursing C. Anatomy and physiology of Musculo-skeletal system D. Posture, Body landmarks Skeletal system Muscular system. Nervous system - Main nerves E. Healing of - Injury, bone injury, F. Repair of ligaments G. Systemic response to injury H. Ergonomics, Body mechanics, biomechanical measures I. Orthopedic team
II	8	<b>2. Assessment of Orthopedic Patient</b> A. Health Assessment: History, physical examination- Inspection, palpation, movement, Measurement, muscle strength Testing. B. Diagnostic studies – Radiological studies, Muscle enzymes,



		serologic studies
III	10	<b>3. Care of patients with devices</b> A. Splints, braces, various types of plaster cast B. Various types of tractions, C. Various types of orthopedic beds and mattresses D. Comfort devices E. Implants in orthopedic F. Prosthetics and Orthotics
IV	15	<b>4. Injuries</b> <b>Trauma &amp; Injuries</b> A. Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, management, medical surgical and nursing management of : a. Early management of Trauma b. Fractures <b>B. Injuries of the</b> a. Shoulder and arm b. Elbow, fore arm, wrist, hand c. Hip, thigh, knee, leg, ankle, foot d. Spine e. Head injury <b>C. Chest injury</b> a. Polytrauma b. Nerve injuries c. Vascular injuries d. Soft tissue injuries e. Sports injuries f. Amputation
V	8	<b>5. Infections of Bones and Joints</b> A. Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, management, medical surgical and nursing management of : a. Tuberculosis b. Osteomyelitis c. Arthritis d. Leprosy
VI	5	<b>6. Bone Tumors</b> A. Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, management, medical surgical and nursing management of: B. Bone tumors – Benign, Malignant and metastatic C. Different types of therapies for tumors
VII	10	<b>7. Deformities</b> A. Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis – medical surgical and nursing management of: Scoliosis, Kyphosis, Lordosis B. Congenital disorders: Congenital dislocation of hip (CDH), Dislocation of patella, knee, C. Varus and valgus deformities, D. Deformities of digits, E. Congenital torticollis. F. Meningocele, meningocele, spina bifida, G. Chromosomal disorders. H. Computer related deformities

VIII	5	<b>8. Disorders of the spine</b> A. Intervertebral disc prolapse, Fracture of the spine B. Low back disorder – Low back pain, PND, spinal stenosis, spondylosis
IX	5	<b>9. Nutritional/Metabolic and Endocrine Disorders</b> A. Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, medical surgical and nursing management of: <ol style="list-style-type: none"> <li>Rickets,</li> <li>Scurvy,</li> <li>Hyper vitaminosis A and D,</li> <li>Osteomalacia,</li> <li>Osteoporosis</li> <li>Paget's disease,</li> <li>gout,</li> <li>Gigantism,</li> <li>Dwarfism,</li> <li>Acromegaly.</li> <li>Therapeutic diets for various orthopedic disorders</li> </ol>
X	8	<b>10. Neuro-Muscular Disorders:</b> A. Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis, medical surgical and nursing management of: <ol style="list-style-type: none"> <li>Poliomyelitis, Cerebral Palsy</li> <li>Myasthenia gravis</li> <li>Spina bifida.</li> <li>Peripheral nerve lesion,</li> <li>Paraplegia, Hemiplegia, Quadriplegia.</li> <li>Muscular dystrophy</li> </ol>
XI	8	<b>11. Chronic/Degenerative Diseases of Joints and Autoimmune Disorders:</b> A. Causes, pathophysiology, clinical types, clinical features, diagnosis, prognosis – medical surgical and nursing management of: <ol style="list-style-type: none"> <li>Osteo Arthritis</li> <li>Rheumatoid Arthritis</li> <li>Ankylosing spondylitis.</li> <li>Spinal disorders.</li> <li>Systemic Lupus Erythematosus</li> </ol>
XII	5	<b>12. Orthopedic Disorders in Children:</b> A. General and special consideration on pediatric orthopedics B. Genetic disorders C. Congenital anomalies D. Growth disorders E. Genetic counseling F. Nurses role in genetic counseling
XIII	5	<b>13. Geriatric Problems</b> A. Geriatric population, types of disabilities, causes, treatment and Management – Hospitalization, rest, physiotherapy, involvement of family members, social opportunities. B. Care at home – involvement of family and community, follow up care and rehabilitation.
XIV	6	<b>14. Pharmacokinetics</b> A. Principles of drug administration B. Analgesics and anti - inflammatory agents C. Antibiotics, Antiseptics, D. Drugs used in orthopedics and neuromuscular disorders E. Blood and blood components

		F. Care of drugs and nurses role <b>Use of evidence based nursing practices</b>
XV	30	<b>15. Nurses Role in Orthopedic Conditions</b> <ul style="list-style-type: none"> <li>A. Gait analysis</li> <li>B. Urodynamic studies</li> <li>C. Prevention of physical deformities</li> <li>D. Alteration of body temperature regulatory system and immune systems</li> <li>E. Immobilization – cast, splints, braces and tractions</li> <li>F. Prevention and care of problems related to immobility</li> <li>G. Altered sleep patterns</li> <li>H. Impaired communication</li> <li>I. Self - care and activities of daily living</li> <li>J. Bladder and bowel rehabilitation</li> <li>K. Sensory function rehabilitation</li> <li>L. Psychological reaction related to disabilities and disorders.</li> <li>M. Coping of individual and family with disabilities and disorders</li> <li>N. Maintaining sexuality</li> <li>O. Spirituality – A rehabilitative prospective</li> </ul> <b>Orthopedic Reconstructive Surgeries</b> <ul style="list-style-type: none"> <li>A. Replacement surgeries – Hip, Knee, Shoulder</li> <li>B. Spine surgeries</li> <li>C. Grafts and flaps surgery</li> <li>D. Deformity correction.</li> </ul> <b>Physiotherapy</b> <ul style="list-style-type: none"> <li>A. Concepts, Principles, purpose,</li> <li>B. Mobilization – Exercises: types, re-education in walking: Crutch walking, wheel chair, Transfer techniques,</li> <li>C. Types of gaits: Non-weight bearing, partial weight bearing, four point crutch, tripod, walking with sticks, calipers</li> <li>D. Forms of therapies: Hydrotherapy, electrotherapy, wax bath, heat therapy, ice, helio therapy, radiant heat,</li> <li>E. Chest physiotherapy</li> </ul>
XVI	8	<b>16. Rehabilitation</b> <ul style="list-style-type: none"> <li>A. Principles of rehabilitation, definition, philosophy, process,</li> <li>B. Various types of therapies</li> <li>C. Special therapies and alternative therapies</li> <li>D. Rehabilitation counseling</li> <li>E. Preventive and restorative measures.</li> <li>F. Community based rehabilitation (CBR)</li> <li>G. Challenges in rehabilitation.</li> <li>H. Role of the nurse in rehabilitation,</li> <li>I. Legal and ethical issues in rehabilitation nursing</li> <li>J. Occupational therapy</li> </ul>
XVII	5	<b>17. National Policies and Programmes</b> <ul style="list-style-type: none"> <li>A. National programmes for rehabilitation of persons with disability - National Institutes, artificial limbs manufacturing Corporation, District Rehabilitation Centers and their schemes</li> <li>B. Regional rehabilitation centers etc.</li> <li>C. Public policy in rehabilitation nursing</li> <li>D. The persons with disabilities act 1995,</li> <li>E. Mental rehabilitation and Multiple disabilities act 1992,</li> <li>F. The National Trust Rules 1999 and 2000</li> <li>G. Rehabilitation Council of India</li> <li>H. Legal and ethical aspects in orthopedic nursing</li> </ul>

		I. Rehabilitation health team and different categories of team members.
XVIII	4	<b>18. Quality assurance</b> A. Standards, Protocols, Policies, Procedures B. Nursing audit C. Staffing D. Design of orthopedic, physiotherapy and rehabilitation unit

### Practicals

Total = 960 Hours  
1 Week = 30 Hours

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

### Practical

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

### Procedures Observed:

1. X Ray
2. Ultrasound
3. MRI
4. C T Scan/bone scan
5. Arthroscopy
6. Electrothermally – assisted capsule shift or ETAC (Thermal capsulorrhaphy)
7. Fluoroscopy
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.

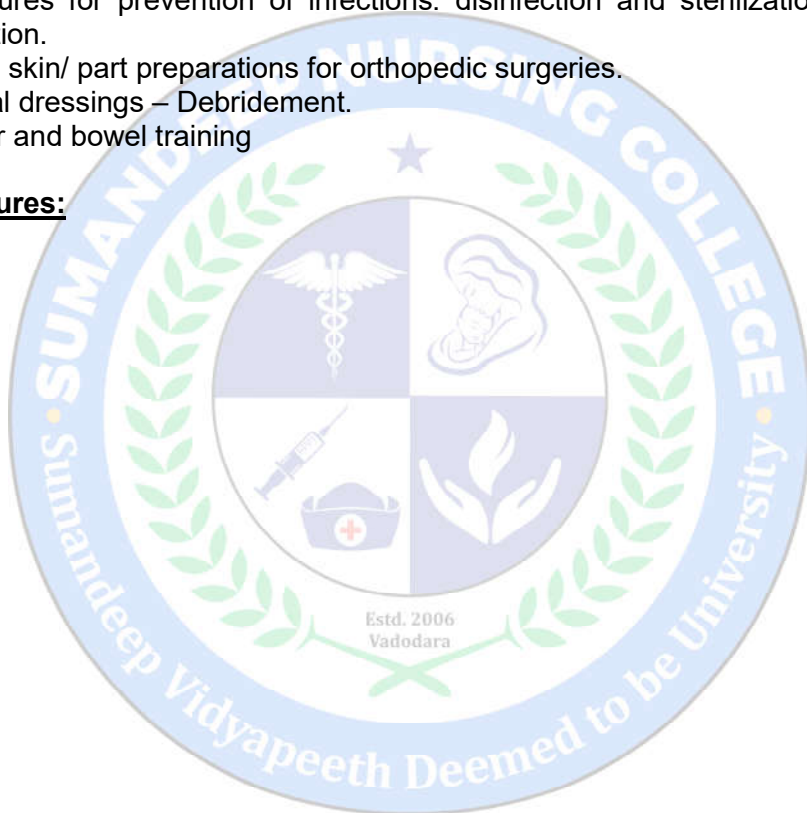


6. Injection – Intra articular, intra osseous.
7. Advance Life Support

**Procedures Performed (Retrieved through Evidence Based Nursing Practices):**

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:**



**Second Year M.Sc Nursing  
CLINICAL SPECIALITY – II  
Subject: Medical Surgical Nursing  
Sub- Specialty: Gastroenterology Nursing**

**Course Code: NCPG-203**

Theory: 150 hours  
Practical: 950 hours  
Total: 1100 hours

**Course Outcome:**

At the completion of the course, the student shall be understand and develop advanced skills for nursing intervention in various gastroenterology conditions , function as gastro enterology nurse practitioner/specialist and provide quality care and function as educator, manager, and researcher in the field of gastroenterology nursing.

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

1. Appreciate trends and issues related to gastroenterology nursing
2. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of gastrointestinal conditions
3. Participate in national health programs for health promotion, prevention and rehabilitation of patients with gastrointestinal conditions
4. Perform physical, psychosocial & spiritual assessment
5. Assist in various diagnostic, therapeutic and surgical procedures
6. Provide comprehensive care to patients with gastrointestinal conditions
7. Describe the various drugs used in gastrointestinal conditions and nurses responsibility
8. Demonstrate skill in handling various equipments/gadgets used for patients with gastrointestinal conditions
9. Appreciate team work & coordinate activities related to 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 enterology intensive care unit (GEICU) , liver care/transplant unit.

**Content Outline**

Unit	Hours	Content
I	5	<b>1. Introduction</b> A. Historical development: trends and issues in the field of gastro enterology.

		<ul style="list-style-type: none"> <li>B. Gastro enterological problems</li> <li>C. Concepts, principles and nursing perspectives</li> <li>D. Ethical and legal issues</li> <li>E. Evidence based nursing and its application in gastrointestinal nursing(to be incorporated in all the units)</li> </ul>
II	5	<b>2. Epidemiology</b> <ul style="list-style-type: none"> <li>A. Risk factors associated with GE conditions- Hereditary, Psychosocial factors, smoking, alcoholism, dietary habits, cultural and ethnic considerations</li> <li>B. Health promotion, disease prevention, life style modification and its implications to nursing</li> <li>C. National health programmes related to gastroenterology</li> <li>D. Alternate system of medicine/complementary therapies</li> </ul>
III	5	<b>3. Review of anatomy and physiology of gastrointestinal system</b> <ul style="list-style-type: none"> <li>A. Gastrointestinal system</li> <li>B. Liver, biliary and pancreas</li> <li>C. Gerontologic considerations</li> <li>D. Embryology of GI system</li> <li>E. Immunology specific to GI system</li> </ul>
IV	15	<b>4. Assessment and diagnostic measures</b> <ul style="list-style-type: none"> <li>A. History taking</li> <li>B. Physical assessment, psychosocial assessment</li> <li>C. Diagnostic tests               <ul style="list-style-type: none"> <li>a. Radiological studies:Upper GIT- barium swallow, lower GITBarrium enema</li> <li>b. Ultra sound:</li> <li>c. Computed tomography</li> <li>d. MRI</li> <li>e. Cholangiography: Percutaneous transheptaticCholangiogram(PTC).</li> <li>f. Magnetic Resonance Cholangiopancreatography (MRCP)</li> <li>g. Nuclear imaging scans(scintigraphy)</li> <li>h. Endoscopy</li> <li>i. Colonoscopy</li> <li>j. Proctosigmoidoscopy</li> <li>k. Endoscopic RetrogrdeCholongiopancreatography (ERCP)</li> <li>l. Endoscopic ultrasound</li> <li>m. Peritonoscopy(Laproscopy)</li> <li>n. Gastric emptying studies</li> <li>o. Blood chemistries: Serum amylase, serum lipase</li> <li>p. Liver biopsy</li> <li>q. Miscellaneous tests:Gastric analysis, fecal analysis</li> <li>r. Liver function tests: Bile formation and excretion, dye excretion test, Protein metabolism, haemostatic functions-prothrombin vitamin K production, serum enzyme tests,Lipidmetabolismserum cholesterol</li> </ul> </li> <li>D. Interpretation of diagnostic measures</li> <li>E. Nurse's role in diagnostic tests</li> </ul>
V	25	<b>5. Gastro intestinal disorders and nursing management</b> <ul style="list-style-type: none"> <li>A. Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical , surgical and nursing management of:               <ul style="list-style-type: none"> <li>a. Disorders of the mouth:Dentalcaries,Peridontaldisease,Acute tooth infection, Stomatitis, Thrush (moniliasis),Gingivitis, Leukoplakia, Inflammation of the parotid gland, Obstruction to</li> </ul> </li> </ul>

		<p>the flow of saliva, Fracture of the jaw</p> <p>b. Disorders of the oesophagus: Reflux oesophagitis, Oesophageal achalasia, Oesophageal varices, Hiatus hernia, Diverticulum</p> <p>c. Disorders of the stomach and duodenum: Gastritis, Peptic ulcer, Dumping of the stomach, Food poisoning, idiopathic astroparesis, Aerophagia and belching syndrome, Idiopathic cyclic nausea and vomiting, Rumination syndrome, Functional dyspepsia, Chronic Nonspecific (functional) abdominal pain.</p> <p>d. Disorders of the small intestine</p> <ol style="list-style-type: none"> <li>Malabsorption syndrome – tropical sprue</li> <li>Gluten – sensitive enteropathy (Coeliac disease)</li> <li>Inflammatory diseases of intestines and abdomen: appendicitis, Peritonitis, Intestinal obstruction, Abdominal TB, Gastrointestinal polyposis syndrome</li> <li>Chronic inflammatory bowel disease, Ulcerative colitis, crohn's disease</li> <li>Infestations and infections – Worm infestations, Typhoid, Leptospirosis</li> <li>Solitary rectal ulcer syndrome</li> <li>Alteration in bowel elimination (diarrhea, constipation, fecal impaction, fecal incontinence, Irritable bowel syndrome, Chronic idiopathic constipation, Functional diarrhea</li> </ol> <p><b>B. Anorectal Conditions:</b> Hemorrhoid, Anal fissure, Anal fistula, Abscess, Strictures, Rectal prolapse, Pruritis and, Pelonidal disease, Anal condylomas, Warts.</p>
VI	15	<p><b>6. Disorder of liver, pancreas gall bladder and nursing management</b></p> <p>A. Disorders of liver biliary tract :</p> <p>B. Viral Hepatitis – A, B, C, D &amp; E</p> <p>C. Toxic hepatitis</p> <ol style="list-style-type: none"> <li>Cirrhosis of liver, liver failure, Liver transplantation</li> <li>Non cirrhotic portal fibrosis</li> <li>Liver abscess;</li> <li>Parasitic and other cysts of the liver</li> <li>Disorders of the Gall Bladder and Bile Duct: <ol style="list-style-type: none"> <li>Cholecystitis</li> <li>Cholelithiasis</li> <li>Choledocholithiasis</li> </ol> </li> </ol> <p>D. Disorders of the pancreas:</p> <ol style="list-style-type: none"> <li>Pancreatitis,</li> <li>Benign tumors of islet cells</li> </ol> <p>E. Disorders of the Peritoneum</p> <ol style="list-style-type: none"> <li>Infections of the peritoneum</li> <li>Surgical peritonitis</li> <li>Spontaneous bacterial peritonitis</li> <li>Tuberculosis peritonitis</li> </ol> <p>F. Disorders of the Diaphragm</p> <ol style="list-style-type: none"> <li>Diaphragmatic hernia</li> <li>Congenital hernias</li> <li>Paralysis of diaphragm</li> <li>Tumors of the diaphragm</li> <li>Hiccups</li> </ol>
VII	15	<p><b>7. Gastro intestinal emergencies and nursing interventions</b></p> <p>A. Etiology, clinical manifestations, diagnosis, prognosis, related</p>



		<p>pathophysiology, medical , surgical and nursing management of:</p> <ol style="list-style-type: none"> <li>Esophageal varices,</li> <li>Ulcer perforation,</li> <li>Acute cholecystitis</li> <li>Diverticulitis</li> <li>Fulminant hepatic failure</li> <li>Biliary obstruction</li> <li>Bowel obstruction</li> <li>Gastroenteritis</li> <li>Intussusception</li> <li>Acute intestinal obstruction, perforation</li> <li>Acute pancreatitis</li> <li>Cirrhosis of liver complications</li> <li>Liver , spleen, stomach pancreatic, mesenteric, bowel and greater vessel injuries</li> <li>Acute appendicitis /peritonitis</li> <li>Acute abdomen</li> <li>Food poisoning</li> </ol>
VIII	15	<p><b>8. Congenital Anomalies of Esophagus</b></p> <ol style="list-style-type: none"> <li>Esophageal atresia</li> <li>Tracheo esophageal fistula</li> <li>Esophageal duplications</li> <li>Dysphagia – Lusoria – aberrant right subclavian artery compressing esophagus</li> <li>Esophageal rings – schalzkiring</li> <li>Esophageal webs</li> </ol> <p><b>A. Congenital Anomalies of Stomach</b></p> <ol style="list-style-type: none"> <li>Gastric atresia</li> <li>Micro gastia</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> </ol> <p><b>B. Congenital Anomalies of Duodenal</b></p> <ol style="list-style-type: none"> <li>Duodenal Atresia or stenosis</li> <li>Annular pancreas</li> <li>Duodenal duplication cysts</li> <li>Malrotation and mid gut volvulus</li> </ol> <p><b>C. Developmental anomalies of the intestine:</b></p> <ol style="list-style-type: none"> <li>Abdominal wall defects (omphalocele and Gastroschisis)</li> <li>Meckel's diverticulum</li> <li>Intestinal atresia</li> </ol> <p><b>D. Hirschsprung's disease</b></p>
IX	15	<p><b>9. Pharmo Kinetics</b></p> <ol style="list-style-type: none"> <li>Drugs used in GIT</li> <li>Principles of administration</li> <li>Roles responsibilities of nurses</li> <li>Drugs in Peptic ulcer disease</li> <li>Proton Pump inhibitors</li> <li>H2 Receptor Antagonists</li> <li>Cytoprotective Agents:</li> <li>Drugs used in Diarrhea</li> <li>Drugs used in constipation</li> </ol>

		J. Drugs used in Inflammatory Bowel Disease K. Aminosalicylates L. Corticosteroids M. Immunomodulators N. chemotherapy O. Antibiotics P. Antiemetics: Q. Anticholinergics R. Antihistaminics S. Anthelmintics T. Vitamin Supplements
X	10	<b>10. Nutrition and nutritional problems related to GI system</b> A. Nutritional assessment and nursing interventions B. Therapeutic diets C. Adverse reactions between drugs and various foods D. Malnutrition- etiology , clinical manifestations and management E. Tube feeding, parenteral nutrition, total parenteral nutrition F. Obesity- etiology, clinical manifestations and management G. Eating disorders- anorexia nervosa, bulimia nervosa H. Recent advances in nutrition
XI	15	<b>11. Malignant disorders of gastro intestinal system</b> A. Etiology, clinical manifestations, diagnosis, prognosis, related pathophysiology, medical , surgical, other modalities and nursing management of: a. Malignancy of oral cavity,Lip,Tongue,buccal mucosa, oropharynx, Salivary gland b. Esophageal , Gastric , Carcinoma of bowel - Small bowel, Colorectal and Anal carcinoma, c. Liver, biliary tract and Pancreatic carcinoma
XII	6	<b>12. Administration and management of GE unit</b> A. Design & layout B. Staffing, C. Equipment, supplies, D. Infection control; Standard safety measures E. Quality Assurance:-Nursing audit –records /reports, Norms, policies and protocols F. Practice standards
XIII	5	<b>13. Education and training in GE care</b> A. Staff orientation, training and development, B. In-service education program, C. Clinical teaching programs

### Practical

Total = 960 Hours  
1 Week = 30 Hours

Sr. No.	Dept. /Unit	No. of Week	Total Hours
1	Diagnostic labs	2	60 Hours
2	Emergency and casualty	3	90 Hours
3	Liver transplant unit	1	30 Hours
4	GE Medical Ward	6	180 Hours

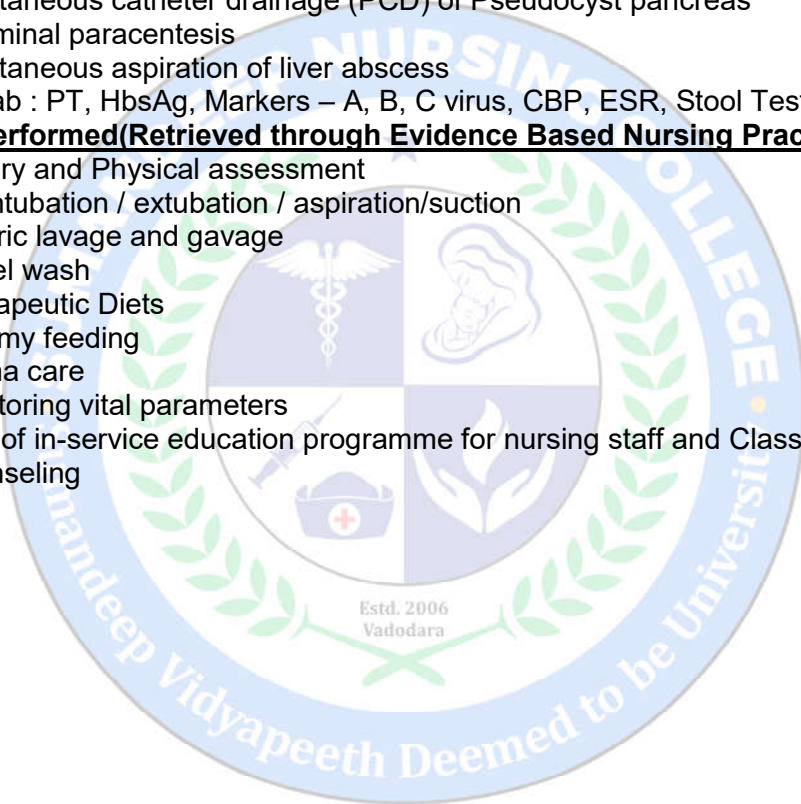
5	GE Surgical Ward	8	240 Hours
6	OT	2	60 Hours
7	ICU	4	120 Hours
8	Pediatric gastroenterology	2	60 Hours
9	Oncology	2	60 Hours
10	GE OPD	2	60 Hours
	Total	32 Weeks	960 Hours

**Procedures Assisted:**

1. Endoscopy room – Upper G.I. Endoscopy (Diagnostic and therapeutic).
2. Sigmoidoscopy
3. Colonoscopy
4. Polypectomy
5. Endoscopic retrograde cholangiopancreatography (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(Retrieved through Evidence Based Nursing Practices) :**

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 in-service education programme for nursing staff and Class-IV employees
10. Counseling



## Second Year M.Sc Nursing

Subject: Obstetric and Gynecological Nursing-II

Course Code: NCPG-203

Theory: 150 hours

Practical: 950 hours

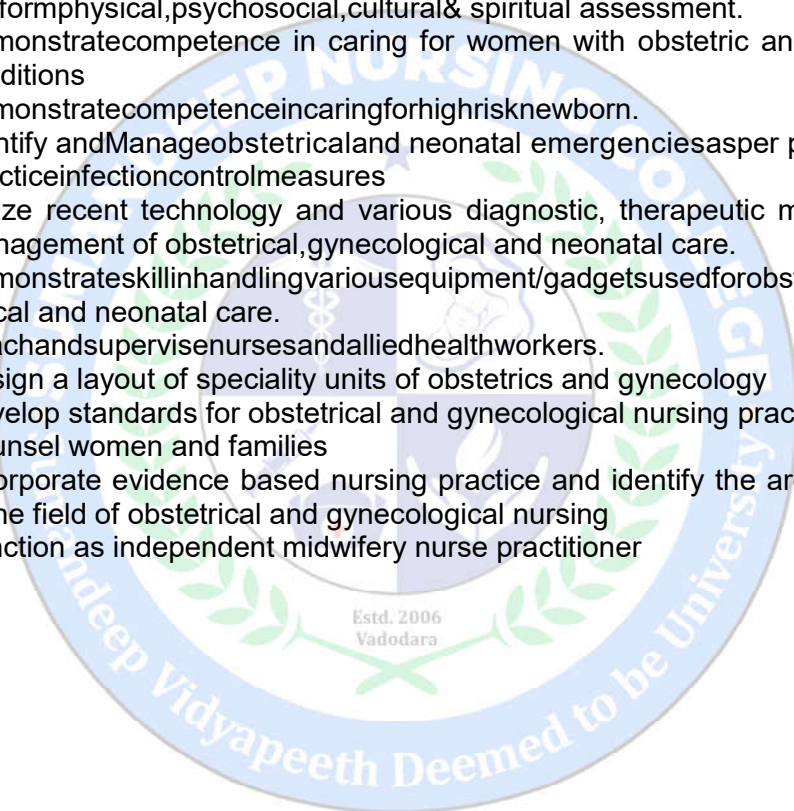
Total: 1100 hours

### Course Outcome:

At the completion of the course, the student shall be understand and develop advanced nursing skills for nursing interventions in various obstetrical and gynecological conditions and function as midwifery nurse practitioner/ specialist, educator, manager and researcher in the field of obstetric and gynecological nursing.

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

1. Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of women with obstetric and gynecological conditions.
2. Perform physical, psychosocial, cultural & spiritual assessment.
3. Demonstrate competence in caring for women with obstetric and gynecological conditions
4. Demonstrate competence in caring for high risk newborn.
5. Identify and Manage obstetrical and neonatal emergencies as per protocol.
6. Practice infection control measures
7. Utilize recent technology and various diagnostic, therapeutic modalities in the management of obstetrical, gynecological and neonatal care.
8. Demonstrate skill in handling various equipment/gadgets used for obstetrical, gynecological 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 gynecological nursing practice.
12. Counsel women and families
13. Incorporate evidence based nursing practice and identify the areas of research in the field of obstetrical and gynecological nursing
14. Function as independent midwifery nurse practitioner





## Contentsk Outline

Unit	Hours	Content
I	25	<b>1. Management of problems of women during pregnancy</b> <ul style="list-style-type: none"> <li>A. Risk approach of obstetrical nursing care , concept &amp; goals.</li> <li>B. Screening of high-risk pregnancy, newer modalities of diagnosis.</li> <li>C. Nursing Management of Pregnancies at risk-due to obstetrical complication <ul style="list-style-type: none"> <li>a. Pernicious Vomiting.</li> <li>b. Bleeding in early pregnancy, abortion, ectopic pregnancy and gestational trophoblastic diseases.</li> <li>c. Hemorrhage during late pregnancy, ante partum hemorrhage, Placenta praevia, abruptio placenta.</li> <li>d. Hypertensive disorders in pregnancy, pre-eclampsia, eclampsia, Hemolysis Elevated liver enzyme Low Platelet count (HELLP)</li> <li>e. Iso-immune diseases. Rh and ABO incompatibility</li> <li>f. Hematological problems in pregnancy.</li> <li>g. Hydramnios-oligohydramnios</li> <li>h. Prolonged pregnancy- post term, post maturity.</li> <li>i. Multiple pregnancies.</li> <li>j. Intra uterine infection &amp; pain during pregnancy.</li> <li>k. Intra Uterine Growth Retardation (IUGR), Premature</li> <li>l. Rupture of Membrane (PROM), intra uterine death</li> </ul> </li> </ul>
II	15	<b>2. Pregnancies at risk-due to pre-existing health problems</b> <ul style="list-style-type: none"> <li>A. Metabolic conditions.</li> <li>B. Anemia and nutritional deficiencies</li> <li>C. Hepatitis</li> <li>D. Cardio-vascular disease.</li> <li>E. Thyroid diseases.</li> <li>F. Epilepsy.</li> <li>G. Essential hypertension</li> <li>H. Chronic renal failure.</li> <li>I. Tropical diseases.</li> <li>J. Psychiatric disorders</li> <li>K. Infections Toxoplasmosis Rubella Cytomegalo virus Herpes (TORCH); Reproductive Tract Infection (RTI); STD; HIV/AIDS, Vaginal infections; Leprosy, Tuberculosis</li> <li>L. Other risk factors: Age- Adolescents, elderly; unwed mothers, sexual abuse, substance use</li> <li>M. Pregnancies complicating with tumors, uterine anomalies, prolapse, ovarian cyst.</li> </ul>

III	15	<p><b>3. Abnormal labour, pre-term labour&amp; obstetrical emergencies</b></p> <p>A. Etiology, pathophysiology and nursing management of</p> <ol style="list-style-type: none"> <li>Uncoordinated uterine actions, Atony of uterus, precipitate labour, prolonged labour.</li> <li>Abnormal lie, presentation, position compound presentation.</li> <li>Contracted pelvis-CPD; dystocia.</li> <li>Obstetrical emergencies Obstetrical shock, vasa PREVIA praevia, inversion of uterus, amniotic fluid embolism, rupture uterus, presentation and prolapse cord.</li> <li>Augmentation of labour. Medical and surgical induction.</li> <li>Version</li> <li>Manual removal of placenta.</li> <li>Obstetrical operation: Forceps delivery, Ventouse, Caesarian section, Destructive operations.</li> <li>Genital tract injuries-Third degree perineal tear, VVF, RVF</li> </ol> <p>B. Complications of third stage of labour:</p> <ol style="list-style-type: none"> <li>Post partum Hemorrhage.</li> <li>Retained placenta</li> </ol>
IV	10	<p><b>4. Post partum complications</b></p> <p>A. Nursing management of</p> <ol style="list-style-type: none"> <li>Puerperal infections, puerperal sepsis, urinary complications, puerperal venous thrombosis and pulmonary embolism</li> <li>Sub involution of uterus, Breast conditions, Thrombophlebitis</li> <li>Psychological complications, post partum blues, depression, psychosis</li> </ol>
V	25	<p><b>5. High Risk Newborn</b></p> <p>A. Concept, goals, assessment, principles.</p> <p>B. Nursing management of</p> <ol style="list-style-type: none"> <li>Pre-term, small for gestational age, post-mature infant, and baby of diabetic and substance use mothers.</li> <li>Respiratory conditions, Asphyxia neonatorum, neonatal apnoea meconium aspiration syndrome, pneumo thorax, pneumomediastinum</li> <li>Icterus neonatorum.</li> <li>Birth injuries.</li> <li>Hypoxic ischaemic encephalopathy</li> <li>Congenital anomalies.</li> <li>Neonatal seizures.</li> <li>Neonatal hypocalcaemia, hypoglycemia, hypomagnesaemia</li> </ol>

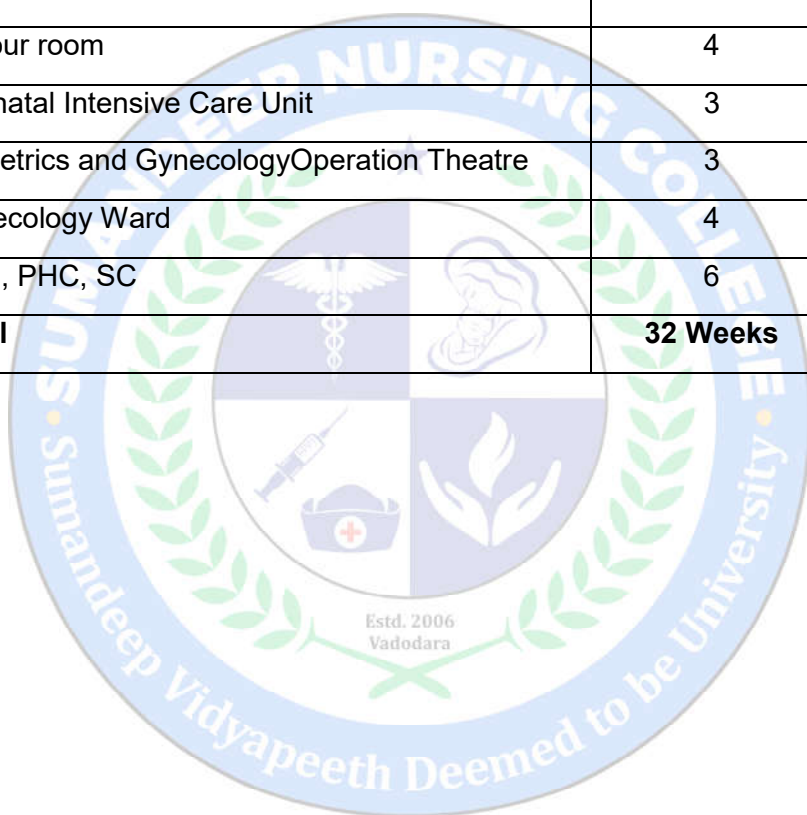
		<ul style="list-style-type: none"> <li>i. Neonatal heart diseases.</li> <li>j. Neonatal hemolytic diseases</li> <li>k. Neonatal infections, neonatal sepsis, ophthalmic neonatorum, congenital syphilis, HIV/AIDS</li> <li>l. Advanced neonatal procedures.</li> <li>m. Calculation of fluid requirements.</li> <li>n. Hematological conditions - erythroblastosis fetalis, hemorrhagic disorder in the newborn.</li> <li>o. Organization of neonatal care, services (Levels), transport, neonatal intensive care unit, organization and management of nursing services in NICU.</li> </ul>
<b>VI</b>	15	<b>6. HIV/AIDS</b> <ul style="list-style-type: none"> <li>A. HIV positive mother and her baby</li> <li>B. Epidemiology</li> <li>C. Screening</li> <li>D. Parent to child transmission (PTCT)</li> <li>E. Prophylaxis for mother and baby</li> <li>F. Standard safety measures</li> <li>G. Counseling</li> <li>H. Breastfeeding issues</li> <li>I. National policies and guidelines</li> <li>J. Issues: Legal, ethical, Psychosocial and rehabilitation</li> <li>K. Role of nurse</li> </ul>
<b>VII</b>	25	<b>7. Gynecological problems and nursing management</b> <ul style="list-style-type: none"> <li>A. Gynecological assessment</li> <li>B. Gynecological procedures</li> <li>C. Etiology, pathophysiology, diagnosis and nursing management of               <ul style="list-style-type: none"> <li>a. Menstrual irregularities</li> <li>b. Diseases of genital tract</li> <li>c. Genital tract infections</li> <li>d. Uterine displacement</li> <li>e. Genital prolapse</li> <li>f. Genital injuries</li> <li>g. Uterine malformation</li> <li>h. Uterine fibroid, ovarian tumors, Breast carcinoma, Pelvic inflammatory diseases, reproductive tract malignancies, hysterectomy – vaginal and abdominal.</li> <li>i. Sexual abuse, rape, trauma, assault</li> </ul> </li> </ul>
<b>VIII</b>	5	<b>8 Administration and management of obstetrical and gynecological unit.</b> <ul style="list-style-type: none"> <li>A. Design &amp; layout</li> <li>B. Staffing,</li> <li>C. Equipment, supplies,</li> <li>D. Infection control; Standard safety measures</li> <li>E. Quality Assurance:- Obstetric auditing – records/reports, Norms, policies and protocols.</li> <li>F. Practice standards for obstetrical and gynecological unit</li> </ul>

IX	5	<b>9 Education and training in obstetrical and gynecological care.</b> A. Staff orientation, training and development, B. In-service education program, C. Clinical teaching programs.
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### Practicals

Total= 960 Hours  
1 Week = 30 Hours

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





## Essential Obstetrical and Gynecological Skills

### Procedure Observed

1. Assisted Reproductive Technology procedures
2. UltraSonography
3. Specific laboratory tests.
4. Amniocentesis.
5. Cervical & vaginal cytology.
6. Fetoscopy.
7. Hysteroscopy.
8. MRI.
9. Surgical diathermy.
10. Cryosurgery.

### Procedures Assisted

1. Operative delivery
2. Abnormal deliveries-Forceps application, Ventouse, Breech
3. Exchange blood transfusion
4. Culdoscopy.
5. Cystoscopy
6. Tuboscopy
7. Laparoscopy.
8. Endometrial Biopsy
9. Tubal patency test
10. Chemotherapy
11. Radiation therapy
12. Medical Termination of Pregnancy.
13. Dilatation and Curettage



## **Procedures Performed**

1. History taking.
2. Physical Examination-General
3. Antenatal assessment. –20
4. Pelvic examination
5. Assessment of risk status.
6. Assessment of Intra uterine fetal well-being. kick chart and fetal movement chart, Doppler assessment, Non Stress Test, Contraction stress test (Oxytocin challenge test)
7. Universal precautions- Disposal of biomedical waste.
8. Per Vaginal examination and interpretation (early pregnancy, labour, post partum).
9. Utilization of Partograph
10. Medical & Surgical induction (Artificial rupture of membranes).
11. Vacuum extraction
12. Conduct of delivery.
13. Prescription and administration of fluids and electrolytes through intravenous route.
14. Application of outlet forceps, delivery of breech – Burns Marshall, Loveset manoeuvre
15. Repair of tears and Episiotomy suturing.
16. Vacuum extraction
17. controlled cord traction, Manual removal of placenta, placental examination,
18. Manual vacuum aspiration
19. Postnatal assessment.-20
20. Management of breast engorgement
21. Thrombophlebitis (white leg)
22. Postnatal counseling.
23. Reposition of inversion of uterus.
24. Laboratory tests: Blood- Hb, Sugar, Urine-albumin, sugar
25. Breast care, breast exam, and drainage breast abscess.
26. Postnatal exercise.
27. 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
28. Anthropometric measurement
29. Neonatal resuscitation
30. Gastric Lavage
31. Care of newborn in multi channel monitor and ventilator.
32. Care of newborn in radiant warmer and incubator.
33. Kangaroo mother care.
34. Assisting mother with exclusive Breast-feeding
35. Feeding technique:
  - a. Katori, spoon
  - b. Naso/orogastric,
  - c. Total Parenteral nutrition.
36. Assessment, calculation and administration of fluids and medications:
  - a. Oral
  - b. I.D.
  - c. I.M.
  - d. I.V.- Securing IV line, infusion pump

37. Administration of drug perrectum
38. Capillary blood samplecollection.
39. Oxygen therapy.
40. Phototherapy.
41. Chestphysiotherapy.
42. counseling – Parental, bereavement, family planning, infertilityetc
43. Setting of operationtheatre.
44. Trolley and table set up for Obstetrical&gynaecological operations.
45. Papsmear.
46. Vaginalsmear.
47. Insertion of pessaries,
48. Insertion of IUD andremoval.
49. Teachingskills
50. communication skills
51. Prepare referralslips
52. Pre transportstabilization
53. Networking with other stakeholders

**Others:**

**Requirements:**

- |   |   |   |
|---|---|---|
| 1. Nursing Process application / Care Study | : | 4 |
| 2. Clinical Presentation                    | : | 2 |
| 3. Clinical Presentation attended           | : | 5 |
| 4. Clinical Demonstration                   | : | 2 |
| 5. Clinical teaching                        | : | 2 |
| 6. Seminar                                  | : | 5 |
| 7. Seminar attended                         | : | 5 |
| 8. Class room teaching                      | : | 2 |
| 9. Field visit                              | : | 1 |



## Second Year M.Sc Nursing

### Subject: Child Health (Pediatric) Nursing-II

**Course code: NCPG-203**

Theory: 150 hours  
Practicals: 950 hours  
Total: 1100 hours

#### **Course Outcome:**

At the completion of the course, the student shall be understand and develop advanced skills for nursing intervention in various Child Health Nursing conditions, function as pediatric nurse practitioner/specialist and function as educator, manager, and researcher in the field of Pediatric nursing.

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

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

Unit	Hours	Content
I	5	<b>1. Introduction</b> A. Current principles, practices and trends in Pediatric Nursing B. Role of pediatric nurse in various settings -Expanded and extended
II	35	<b>2. Pathophysiology, assessment(including interpretation of various invasive and non-invasive diagnostic procedures), treatment modalities and nursing intervention in selected pediatric medical disorders</b> <b>A. Child with respiratory disorders:</b> a. Upper respiratory tract: choanal atresia, tonsillitis, epistaxis, aspiration. b. Lower respiratory tract: Broncheolitis, Bronchopneumonia, Asthma, cystic fibrosis <b>B. Child with gastro-intestinal disorders:</b> a. Diarrheal diseases, gastro-esophageal reflux. b. Hepatic disorders: Hepatitis, Indian childhood cirrhosis, liver transplantation. c. Malabsorption syndrome, Malnutrition d. Child with renal/ urinary tract disorders: Nephrotic syndrome, Nephritis, Hydronephrosis, hemolytic-uremic syndrome, kidney transplantation <b>C. Child with cardio-vascular disorders:</b> a. Acquired: Rheumatic fever, Rheumatic heart disease, b. Congenital: Cyanotic and acyanotic <b>D. Child with endocrine/metabolic disorders:</b> a. Diabetes insipidus, Diabetes Mellitus – IDDM, NIDDM, hyper

		<p>and hypo thyroidism, phenylketonuria, galactosemia</p> <p><b>E. Child with Neurological disorders:</b></p> <p>a. Convulsions, Meningitis, encephalitis, guillian- Barre syndrome, Child with oncological disorders: Leukemias, Lymphomas, Wilms' tumor, neuroblastomas, neuroblastomas, Rhabdomyosarcoma, retinoblastoma, hepatoblastoma, bone tumors</p> <p><b>F. Child with blood disorders:</b></p> <p>a. Anemia, thalassemias, hemophilia, polycythemia, thrombocytopenia, and disseminated intravascular coagulation</p> <p><b>G. Child with skin disorders</b></p> <p>a. Common Eye and ENT disorders</p> <p>b. Common Communicable diseases</p>
III	35	<p>3. <b>Assessment</b>(including interpretation of various invasive and non-invasive diagnostic procedures), treatment modalities including cosmetic surgery and nursing interventions in selected pediatric surgical problems/ Disorders</p> <p>A. <b>Gastrointestinal system:</b> Cleft lip, cleft palate and conditions requiring plastic surgery, Tracheoesophageal fistula/atresia, Hirschsprungs' disease/megacolon, malrotation, intestinal obstruction, duodenal atresia, gastrochisis, exomphalus, anorectal malformation, omphalocele, diaphragmatic hernia.</p> <p>B. <b>Anomalies of the nervous system:</b> Spina bifida, Meningocele, Myelomeningocele, hydrocephalus.</p> <p>C. <b>Anomalies of the genito-urinary system:</b> Hypospadias, Epispadias, Undescended testes, Exstrophy bladder.</p> <p>D. <b>Anomalies of the skeletal system:</b> Eye and ENT disorders</p> <p>E. <b>Nursing management of the child with traumatic injuries:</b> General principles of managing Pediatric trauma,</p> <p>a. Head injury, abdominal injury, poisoning, foreign body obstruction, burns &amp; Bites</p> <p>F. <b>Child with oncological disorders:</b> Solid tumors of childhood, Nephroblastoma, Neuroblastoma, Hodgkin's/NonHodgkin's Lymphoma, Hepatoblastoma, Rhabdomyosarcoma</p> <p>G. Management of stomas, catheters and tubes.</p> <p>H. Management of wounds and drainages</p>
IV	10	<p>4. <b>Intensive care for pediatric clients</b></p> <p>A. Resuscitation, stabilization &amp; monitoring of pediatric patients</p> <p>B. Anatomical &amp; physiological basis of critical illness in infancy and childhood</p> <p>C. Care of child requiring long-term ventilation</p> <p>D. Nutritional needs of critically ill child</p> <p>E. Legal and ethical issues in pediatric intensive care</p> <p>F. Intensive care procedures, equipment and techniques</p> <p>G. Documentation</p>
V	20	<p>5. <b>High Risk Newborn</b></p> <p>A. Concept, goals, assessment, principles.</p> <p>B. Nursing management of:</p> <p>a. Post-mature infant, and baby of diabetic and substance use mothers.</p> <p>b. Respiratory conditions, Asphyxia neonatorum, neonatal apnoea meconium aspiration syndrome, pneumo thorax,</p>



		<p>pneumo mediastinum</p> <p>c. Icterus neonatorum.</p> <p>d. Birth injuries.</p> <p>e. Hypoxic ischemic encephalopathy</p> <p>f. Congenital anomalies.</p> <p>g. Neonatal seizures.</p> <p>h. Neonatal hypocalcaemia, hypoglycemia, hypomagnesaemia.</p> <p>i. Neonatal heart diseases.</p> <p>j. Neonatal hemolytic diseases</p> <p>k. Neonatal infections, neonatal sepsis, Ophthalmia neonatorum, congenital syphilis, HIV/AIDS</p> <p>l. Advanced neonatal procedures.</p> <p>m. Calculation of fluid requirements.</p> <p>n. Hematological conditions - erythroblastosis fetalis, hemorrhagic disorder in the newborn</p> <p>o. Organization of neonatal care, services (Levels), transport, neonatal intensive care unit, organization and management of nursing services in NICU.</p>
VI	10	<p><b>7. Developmental disturbances and implications for nursing</b></p> <p>A. Adjustment reaction to school,</p> <p>B. Learning disabilities</p> <p>C. Habit disorders, speech disorders,</p> <p>D. Conduct disorders,</p> <p>E. Early infantile autism, Attention deficit hyperactive disorders (ADHD), depression and childhood schizophrenia.</p>
VII	10	<p><b>8. Challenged child and implications for nursing</b></p> <p>A. Physically challenged, causes, features, early detection &amp; management</p> <p>B. Cerebral palsied child,</p> <p>C. Mentally challenged child.</p> <p>D. Training &amp; rehabilitation of challenged children</p>
VIII	5	<p><b>9. Crisis and nursing intervention</b></p> <p>A. The hospitalized child,</p> <p>B. Terminal illness &amp; death during childhood</p> <p>C. Nursing intervention-counseling.</p>
IX	5	<p><b>10. Drugs used in Pediatrics</b></p> <p>A. Criteria for dose calculation</p> <p>B. Administration of drugs, oxygen and blood</p> <p>C. Drug interactions</p> <p>D. Adverse effects and their management</p>
X	10	<p><b>11. Administration and management of pediatric care unit</b></p> <p>A. Design &amp; layout</p> <p>B. Staffing,</p> <p>C. Equipment, supplies,</p> <p>D. Norms, policies and protocols</p> <p>E. Practice standards for pediatric care unit</p> <p>F. Documentation</p>
XI	5	<p><b>12. Education and training in Pediatric care</b></p> <p>A. Staff orientation, training and development,</p> <p>B. In-service education program,</p>

**C. Clinical teaching programs.**

**Practical:**

Total = 960 Hours

1 week = 30 Hours

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

**CLINICAL REQUIREMENTS**

Sl. No.	Requirements	Quantity
1.	Nursing Process Application / Care Study	(2)
2.	Clinical Presentation	(2)
3.	Clinical Presentation attended	(5)
4.	Clinical demonstration	(2)
5.	Clinical teaching	(2)
6.	Health Assessment	(5)
7.	Nutritional assessment diet planning	(5)
8.	Growth and development assessment	(5)
9.	Assessment of High risk new born	(3)
10.	Project	(1)
11.	Health Education	(2)
12.	Seminar	(5)
13.	Seminar attended	(5)
14.	Classroom teaching	(4)
15.	Procedures	(38)

**Procedures Observed:**

1. Echo cardiogram
2. Ultrasound head
3. ROP screening (Retinopathy of prematurity)
4. Any other

**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

**Procedures Performed:**

1. Airway Management
2. Application of Oro Pharyngeal Airway
3. Oxygen therapy
4. CPAP(Continuous Positive Airway Pressure)
5. Care of Tracheostomy
6. Endotracheal Intubation
7. Neonatal Resuscitation
8. Monitoring of Neonates – clinically & with monitors, CRT(Capillary Refill Time), assessment of jaundice, ECG
9. Gastric Lavage
10. Setting of Ventilators
11. Phototherapy
12. 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.
13. Admission & discharge of neonates
14. Feeding - management of breast feeding, artificial feeding, expression of breast milk, OG(Orogastric) tube insertion, gavage feeding, TPN, Breast feeding counseling.
15. Thermoregulation- Axillary temperature, Kangaroo Mother Care (KMC), Use of Radiant warmer, incubators, management of thermoregulation & control.
16. 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.
17. Procedures for prevention of infections: Hand washing, disinfections & sterilization, surveillance, fumigation.
18. Collection of specimens
19. Setting, Use & maintenance of basic equipment: Ventilator, O2 analyzer, monitoring equipment, Photo therapy unit, Flux meter, Infusion pump, Radiant warmer, incubator, Centrifuge machine, Bilimeter, Refractometer, laminar flow

**Others:**

## Second Year M.Sc Nursing

### Subject :Psychiatric (Mental Health) Nursing-II

Course Code: NCPG-203

Theory: 150 hours

Practical: 950 hours

Total: 1100 hours

#### Course Outcome:

At the completion of the course, the student shall be understand and develop advanced skills for nursing intervention in various psychiatric conditions, function as psychiatric nurse practitioner/specialist and to function as educator, manager, and researcher in the field of Psychiatric nursing.

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

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

#### Content Outline

Unit	Hours	Content
I	2	<b>1. Principles and practice of Psychiatric nursing</b> A. Review
II	10	<b>2. Crisis Intervention</b> A. Crisis, Definition B. Phases In The Development of A Crisis C. Types of Crisis; Dispositional , Anticipated Life Transitions Traumatic Stress, Maturation/ Development , Reflecting Psychopathology D. Psychiatric Emergencies and their management E. Grief and grief reaction F. Crisis Intervention; Phases G. Post traumatic stress disorder (PTSD) H. Role of the Nurse I. Present your Disseminating Evidence Project on treatment of person with stress.
III	4	<b>3. Anger/ Aggression Management</b> A. Anger and Aggression, Types, Predisposing Factors B. Management C. Role of The Nurse
IV	5	<b>4. The Suicidal Client</b>

		<ul style="list-style-type: none"> <li>A. Epidemiological Factors</li> <li>B. Risk Factors               <ul style="list-style-type: none"> <li>a. <b>Predisposing Factors:</b> Theories of Suicide-Psychological, Sociological, Biological</li> </ul> </li> <li>C. Nursing Management</li> </ul>
<b>V</b>	5	<b>5. Disorders of Infancy, Childhood, and Adolescence</b> <ul style="list-style-type: none"> <li>A. Mentally Challenged</li> <li>B. Autistic Disorders</li> <li>C. Attention-Deficit/Hyperactivity Disorder</li> <li>D. Conduct Disorders, behavioural disorders</li> <li>E. Oppositional Defiant Disorder</li> <li>F. Tourette's Disorders</li> <li>G. Separation Anxiety Disorder</li> <li>H. Psychopharmacological Intervention and Nursing Management</li> </ul>
<b>VI</b>	5	<b>6. Delirium, Dementia, and Amnesic Disorders</b> <ul style="list-style-type: none"> <li>A. Delirium</li> <li>B. Dementia</li> <li>C. Amnesia</li> <li>D. Psychopharmacological Intervention and Nursing Management</li> </ul>
<b>VII</b>	10	<b>7. Substance-Related Disorders</b> <ul style="list-style-type: none"> <li>A. Substance-Use Disorders</li> <li>B. Substance-Induced Disorders</li> <li>C. Classes Of Psychoactive Substances</li> <li>D. Predisposing Factors</li> <li>E. The Dynamics Of Substance-Related Disorders</li> <li>F. The Impaired Nurse</li> <li>G. Codependency</li> <li>H. Treatment Modalities For Substance-Related Disorders and Nursing Management</li> </ul>
<b>VIII</b>	10	<b>8. Schizophrenia and Other Psychotic Disorders (Check ICD10)</b> <ul style="list-style-type: none"> <li>A. Nature of the Disorder</li> <li>B. Predisposing Factors</li> <li>C. Schizophrenia –Types               <ul style="list-style-type: none"> <li>a. Disorganized Schizophrenia</li> <li>b. Catatonic Schizophrenia</li> <li>c. Paranoid Schizophrenia</li> <li>d. Undifferentiated Schizophrenia</li> <li>e. Residual Schizophrenia</li> </ul> </li> <li>D. Other Psychotic disorders               <ul style="list-style-type: none"> <li>a. Schizoaffective Disorder</li> <li>b. Brief Psychotic Disorder</li> <li>c. Schizophreniform Disorder</li> <li>d. Psychotic Disorder Due to a General Medical Condition</li> <li>e. Substance-Induced Psychotic Disorder</li> </ul> </li> <li>E. Treatment and Nursing Management</li> </ul>
<b>IX</b>	8	<b>9. Mood Disorders</b> <ul style="list-style-type: none"> <li>A. Historical Perspective</li> <li>B. Epidemiology</li> <li>C. The Grief Response</li> <li>D. Maladaptive Responses To Loss</li> <li>E. Types Of Mood Disorders</li> </ul>



		F. Depressive disorders G. Bipolar disorders H. Treatment and Nursing Management
<b>X</b>	8	<b>10. Anxiety Disorders</b> A. Historical Aspects B. Epidemiological Statistics C. How Much is too Much? D. Types <ul style="list-style-type: none"> <li>a. Panic Disorder</li> <li>b. Generalized Anxiety Disorder</li> <li>c. Phobias</li> <li>d. Obsessive-Compulsive Disorder</li> <li>e. Posttraumatic Stress Disorder</li> <li>f. Anxiety Disorder Due to a General Medical Condition</li> <li>g. Substance-Induced Anxiety Disorder</li> </ul> E. Treatment Modalities F. Psychopharmacology & Nursing Management
<b>XI</b>	5	<b>11. Somatoform And Sleep Disorders</b> A. Somatoform Disorders B. Historical Aspects <ul style="list-style-type: none"> <li>a. Epidemiological Statistics</li> <li>b. Pain Disorder</li> <li>c. Hypochondriasis</li> <li>d. Conversion Disorder</li> <li>e. Body Dysmorphic Disorder</li> </ul> C. Sleep Disorder D. Treatment Modalities and Nursing Management
<b>XII</b>	4	<b>12. Dissociative Disorders and Management</b> A. Historical Aspects B. Epidemiological Statistics C. Application of the Nursing Management D. Treatment Modalities and Nursing Management
<b>XIII</b>	4	<b>13. Sexual And Gender Identity Disorders</b> A. Development Of Human Sexuality B. Sexual Disorders C. Variation In Sexual Orientation D. Nursing Management
<b>XIV</b>	4	<b>14. Eating Disorders</b> A. Epidemiological Factors B. Predisposing Factors : Anorexia Nervosa And Bulimia Nervosa obesity C. Psychopharmacology D. Treatment & Nursing Management
<b>XV</b>	4	<b>15. Adjustment and Impulse Control Disorders</b> A. Historical and Epidemiological Factors B. Adjustment Disorders C. Impulse Control Disorders D. Treatment & Nursing Management.
<b>XVI</b>	4	<b>16. Medical Conditions due to Psychological Factors</b> A. Asthma

		<ul style="list-style-type: none"> <li>B. Cancer</li> <li>C. Coronary Heart Disease</li> <li>D. Peptic Ulcer</li> <li>E. Essential Hypertension</li> <li>F. Migraine Headache</li> <li>G. Rheumatoid Arthritis</li> <li>H. Ulcerative Colitis</li> <li>I. Treatment &amp; Nursing Management</li> </ul>
<b>XVII</b>	8	<b>17. Personality Disorders</b> <ul style="list-style-type: none"> <li>A. Historical perspectives</li> <li>B. Types Of Personality Disorders               <ul style="list-style-type: none"> <li>a. Paranoid Personality Disorder</li> <li>b. Schizoid Personality Disorder</li> <li>c. Antisocial Personality Disorder</li> <li>d. Borderline Personality Disorder</li> <li>e. Histrionic Personality Disorder</li> <li>f. Narcissitic Personality Disorder</li> <li>g. Avoidance Personality Disorder</li> <li>h. Dependent Personality Disorder</li> <li>i. Obsessive-Compulsive Personality Disorder</li> <li>j. Passive-Aggressive Personality Disorders</li> </ul> </li> <li>C. Identification, diagnostic, symptoms</li> <li>D. Psychopharmacology</li> <li>E. Treatment &amp; Nursing Management</li> </ul>
<b>XVIII</b>	8	<b>18. The Aging Individual</b> <ul style="list-style-type: none"> <li>A. Epidemiological Statistics</li> <li>B. Biological Theories</li> <li>C. Biological Aspects of Aging</li> <li>D. Psychological Aspects of Aging</li> <li>E. Memory Functioning</li> <li>F. Socio-cultural aspects of aging</li> <li>G. Sexual aspects of aging</li> <li>H. Special Concerns of the Elderly Population</li> <li>I. Psychiatric problems among elderly population</li> <li>J. Treatment &amp; Nursing Management</li> </ul>
<b>XIX</b>	5	<b>19. The person living with HIV Disease</b> <ul style="list-style-type: none"> <li>A. Psychological problems of individual HIV/AIDS</li> <li>B. Counseling</li> <li>C. Treatment &amp; Nursing Management</li> </ul>
<b>XX</b>		<b>20. Problems Related to Abuse or Neglect</b> <ul style="list-style-type: none"> <li>A. Vulnerable groups, Women, Children, elderly, psychiatric patients, under privileged, challenged</li> <li>B. Predisposing Factors</li> <li>C. Treatment &amp; Nursing management- Counseling</li> </ul>

<b>XXI</b>	<b>7</b>	<b>21. Community Mental Health Nursing</b> A. National Mental Health Program- Community mental health program B. The Changing Focus of care C. The Public Health Model D. The Role of the Nurse E. Case Management F. The community as Client a. Primary Prevention b. Populations at Risk c. Secondary prevention d. Tertiary Prevention G. Community based rehabilitation
<b>XXII</b>	<b>5</b>	<b>22. Ethical and Legal Issues in Psychiatric/Mental Health Nursing</b> A. Ethical Considerations B. Legal Consideration C. Nurse Practice Acts D. Types of Law E. Classification within Statutory and Common Law F. Legal Issues in Psychiatric/Mental Health Nursing G. Nursing Liability
<b>XXIII</b>	<b>5</b>	<b>23. Psychosocial rehabilitation</b> A. Principles of rehabilitation B. Disability assessment C. Day care centers D. Half way homes E. Reintegration into the community F. Training and support to care givers G. Sheltered workshops H. Correctional homes
<b>XXIV</b>	<b>5</b>	<b>24. Counseling</b> A. Liaison psychiatric nursing B. Terminal illnesses-Counseling C. Postpartum psychosis-treatment, care and counseling D. Death dying- Counseling E. Treatment, care and counseling – a. Unwed mothers b. HIV and AIDS
<b>XXV</b>	<b>5</b>	<b>25. Administration and management of psychiatric units including emergency units</b> A. Design & layout B. Staffing, C. Equipment, supplies, D. Norms, policies and protocols E. Quality assurance F. Practice standards for psychiatric nursing G. Documentation
<b>XXVI</b>	<b>5</b>	<b>26. Education and training in psychiatric care</b> A. Staff orientation, training and development, B. In-service education program, C. Clinical teaching programs.

**Practicals**

Total = 960 Hours  
One Week = 30 Hours

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

**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 psychotherapeutic skills
13. Group therapy
14. Milieu therapy
15. Social/Recreational therapy.
16. Occupational therapy.

**Requirements**

- |                                   |   |    |
|-----------------------------------|---|----|
| 1. Care study                     | - | 5  |
| 2. Clinical presentation          | - | 2  |
| 3. Clinical presentation attended | - | 10 |
| 4. Clinical demonstration         | - | 2  |
| 5. Clinical teaching              | - | 2  |
| 6. Drugs                          | - | 6  |

7. Counseling	-	3
8. Crisis intervention	-	1
9. Psycho education	-	3
10. Community Survey	-	1
11. Seminar		
12. Class room teaching		





## Second Year M.Sc Nursing

### Subject: Community Health Nursing-II

Course Code: NCPG-203

Theory: 150 hours  
Practical's: 950 hours  
Total: 1100 hours

#### Course Outcome:

At the completion of the course, the student shall be understand and develop advanced skills for nursing intervention in various aspects of community health care settings, function as Community Health Nurse practitioner/specialist and to function as educator, manager and researcher in the field of community health nursing.

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

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

#### Content Outline

Unit	Hours	Content
I	20	<b>1. Epidemiology</b> A. Introduction <ol style="list-style-type: none"><li>a. Concept, scope, definition, trends, History and development of modern Epidemiology</li><li>b. Contribution of epidemiology</li><li>c. Implications</li></ol> B. Epidemiological methods C. Measurement of health and disease: D. Health policies E. Epidemiological approaches <ol style="list-style-type: none"><li>a. Study of disease causatives</li><li>b. Health promotion</li><li>c. Levels of prevention</li></ol> F. Epidemiology of <ol style="list-style-type: none"><li>a. Communicable diseases</li></ol>

		<ul style="list-style-type: none"> <li>b. Non-communicable diseases</li> <li>G. Emerging and re-emerging diseases Epidemics</li> <li>H. National Integrated disease Surveillance Programme</li> <li>I. Health information system</li> <li>J. Epidemiology study and reports</li> <li>K. Role of Community health nurse</li> </ul>
II	40	<p><b>2. National Health and Family Welfare Programmes</b></p> <p>Objectives, Organisation/manpower/resources, Activities, Goals, inter-sectoral approach, implementation, item/purpose, role and responsibilities of community health nurse:</p> <ul style="list-style-type: none"> <li>A. National Vector Borne Disease Control Programm (NVBDGP)</li> <li>B. National Filariasis Control Programme</li> <li>C. National Leprosy Eradication Programme</li> <li>D. Revised national TB Control Programme</li> <li>E. National Programme for Control of Blindness</li> <li>F. National Iodine Deficiency disorders Control Programme</li> <li>G. National Mental Health Programme</li> <li>H. National AIDS Control Programme</li> <li>I. National Cancer Control Programme</li> <li>J. RCH I and II</li> <li>K. Non-communicable disease programmes</li> <li>L. NRHM</li> <li>M. Health Schemes:               <ul style="list-style-type: none"> <li>a. ESI</li> <li>b. CGHS</li> <li>c. Health Insurance</li> </ul> </li> </ul>
III	15	<p><b>3. School Health</b></p> <ul style="list-style-type: none"> <li>A. Introduction: definition, concepts, objectives,</li> <li>B. Health assessment, Screening, identification, referral and follow up,</li> <li>C. Safe environment</li> <li>D. Services, programmes and plans- first aid, treatment of minor ailments</li> <li>E. Inter-sectoral coordination</li> <li>F. Adolescent health</li> <li>G. Disaster, disaster preparedness, and management</li> <li>H. Guidance and counseling</li> <li>I. School health records - maintenance and its importance</li> <li>J. Roles and responsibilities of community health nurse</li> </ul>
IV	15	<p><b>4. International health</b></p> <ul style="list-style-type: none"> <li>A. Global burden of disease</li> <li>B. Global health rules to halt disease spread</li> <li>C. Global health priorities and programmes</li> <li>D. International quarantine</li> <li>E. Health tourism</li> <li>F. International cooperation and assistance</li> <li>G. International travel and trade</li> <li>H. Health and food legislation, laws, adulteration of food</li> <li>I. Disaster management</li> <li>J. Migration</li> <li>K. International health agencies –World Health organizations, World health assembly, UNICEF, UNFPA, SIDA, US AID, DANIDA, DFID. AusAIDetc</li> <li>L. International health issues and problems</li> </ul>

		<p>M. International nursing practice standards</p> <p>N. International health vis-a vis national health</p> <p>O. International health days and their significance</p>
V	15	<p><b>5. Education and administration</b></p> <p>A. Quality assurance</p> <p>B. Standards, Protocols, Policies, Procedures</p> <p>C. Infection control; Standard safety measures</p> <p>D. Nursing audit</p> <p>E. Design of Sub-Centre/Primary Health Centre/ Community health center</p> <p>F. Staffing; Supervision and monitoring-Performance appraisal</p> <p>G. Budgeting</p> <p>H. Material management</p> <p>I. Role and responsibilities of different categories of personnel in community health</p> <p>J. Referral chain- community outreach services</p> <p>K. Transportation</p> <p>L. Public relations</p> <p>M. Planning in-service educational programme and teaching</p> <p>N. Training of various categories of health workerspreparation of manuals</p>
VI	10	<p><b>6. Geriatric</b></p> <p>A. Concept, trends, problems and issues</p> <p>B. Aging process, and changes</p> <p>C. Theories of ageing</p> <p>D. Health problems and needs</p> <p>E. Psycho-physiological stressors and disorders</p> <p>F. Myths and facts of aging</p> <p>G. Health assessment</p> <p>H. Home for aged-various agencies</p> <p>I. Rehabilitation of elderly</p> <p>J. Care of elderly</p> <p>K. Elderly abuse</p> <p>L. Training and supervision of care givers</p> <p>M. Government welfare measures Programmes for elderly-Role of NGOs</p> <p>N. Roles and responsibilities of Geriatric nurse in the community</p>
VII	10	<p><b>7. Rehabilitation</b></p> <p>A. Introduction: Concepts, principles, trends, issues,</p> <p>B. Rehabilitation team</p> <p>C. Models, Methods</p> <p>D. Community based rehabilitation</p> <p>E. Ethical issues</p> <p>F. Rehabilitation Council of India</p> <p>G. Disability and rehabilitation- Use of various prosthetic devices</p> <p>H. Psychosocial rehabilitation</p> <p>I. Rehabilitation of chronic diseases</p> <p>J. Restorative rehabilitation</p> <p>K. Vocational rehabilitation</p> <p>L. Role of voluntary organizations</p> <p>M. Guidance and counseling</p> <p>N. Welfare measures</p>

		O. Role and responsibilities of community health nurse
VIII	10	<b>8. Community mental health</b> A. Magnitude, trends and issues B. National Mental Health Program- Community mental health program C. The Changing Focus of care D. The Public Health Model E. Case Management- Collaborative care F. Crisis intervention G. Welfare agencies H. Population at Risk I. The community as Client a. Primary Prevention b. Secondary prevention c. Tertiary Prevention J. Community based rehabilitation K. Human rights of mentally ill L. Substance use M. Mentally challenged groups N. Role of community health nurse
IX	15	<b>9. Occupational health</b> A. Introduction: Trends, issues, Definition, Aims, Objectives, Workplace safety B. Ergonomics and Ergonomic solutions C. Occupational environment- Physical, social, Decision making, Critical thinking D. Occupational hazards for different categories of people physical, chemical, biological, mechanical, , Accidents, E. Occupational diseases and disorders F. Measures for Health promotion of workers; Prevention and control of occupational diseases, disability limitations and rehabilitation G. Women and occupational health H. Occupational education and counseling I. Violence at workplace J. Child labour K. Disaster preparedness and management L. Legal issues: Legislation, Labour unions, ILO and WHO recommendations, Factories act, ESI act M. Role of Community health nurse, Occupational health team

**Practicals**

Total = 960 Hours  
Week = 30 Hours

Sr. No.	Dept. /Unit	No. of Week	Total Hours
1	<b>Urban and Rural community</b>	17	120 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
	<b>Total</b>	<b>32 Weeks</b>	<b>960 Hours</b>

**Observed:**

1. MCH office and DPHNO
2. CHC/ First Referral Unit(FRU)
3. Child guidance clinic
4. Institute/Unit for mentally challenged
5. District TB centre
6. AIDS control society
7. Filariasis clinic
8. RCH clinic
9. STD clinic
10. Leprosy clinic
11. Community based rehabilitation unit
12. Cancer centers
13. Palliative care
14. Home of old age
15. Mental health units
16. De-addiction centres
17. School health services
18. Industry
19. Selected industrial health centers
20. ESI unit
21. Municipality/ corporation office

**Assisted**

1. Laparoscopic sterilization
2. Vasectomy
3. All clinics related to RCH
4. Monitoring of national health and family welfare programmes

**Performed**

1. Conduct various clinics
2. School health assessment.
3. Health survey.
4. Health assessment
5. Drug administration as per the protocols
6. Treatment of minor ailments
7. Investigating outbreak of epidemic.
8. Screening for leprosy, TB and non-communicable disease
9. Presumptive and radical treatment for Malaria.
10. Counseling



11. Report writing
12. Referrals
13. Writing a project proposal
14. Material management- requisition for indent, condemnation, inventory maintenance
15. Training and Supervision of various categories of personnel
16. Liaison with NGO's

Sr.No	Assignments	Nos
	<b>COMMUNITY HEALTH NURSING - II</b>	
1.	Conduct / participate various clinics	5
2.	Conduct school health programme	1
3.	Community health survey	1
4.	Health Assessment	5
5.	Application of Nursing process	2
6.	Administration of drug in special clinics	2
7.	Treatment of minor ailments	10
8.	Investigation of outbreak of an epidemic	1
9.	Screening for diseases	4
10.	Counseling of special Group	2
11.	Referrals and follow ups	5
12.	Material management	4
13.	Training and supervision on health personnel	1
14.	Writing a project proposal	1
15.	Liaison with NGOs	2
16.	Participate in various Programmes	8
17.	Records and Reports	2
18.	Field Visits	19
19.	Seminar	5
20.	Seminar attended	5
21.	Classroom Teaching	4