SYLLABUS FOR OBSTETRIC AND GYNACOLOGICAL NURSING

AIM:

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

OBJECTIVES:

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

- Appreciate the trends in the field of midwifery, obstetrics and gynecology as a Speciality.
- Describe the population dynamics and indicators of maternal and child health.
- Describe the concepts of biophysical, psychological and spiritual aspects of normal pregnancy, labour and puerperium.
- Provide comprehensive nursing care to women during reproductive period.
- Integrate the concepts of family centered nursing care and nursing process approach in obstetric and gynecological nursing.
- Identify and analyze the deviations from normal birth process and refer appropriately.
- Describe the pharmacological agents, their effects during pregnancy, child birth, puerperium, lactation and the role of nurse.
- Counsel adolescents, women and families on issues of pertaining pregnancy, child birth and lactation.
- Describe the role of various types of complementary and alternative therapies in obstetrics and gynecological nursing.
- Incorporate evidence based nursing practice and identify the areas of research in the field of obstetric and gynecological nursing.
- Describe the recent advancement in contraceptive technology and birth control measures.
- Appreciate the Legal and Ethical issues pertaining to obstetric and gynecological nursing.
- Describe the epidemiology, etiology, pathophysiology and diagnostic assessment of women with obstetric and gynecological conditions
- Perform physical, psychosocial, cultural & spiritual assessment
- Demonstrate competence in caring for women with obstetrical and gynecological conditions
- Demonstrate competence in caring for high risk newborn.
- Identify and Manage obstetrical and neonatal emergencies as per protocol.
- Practice infection control measures.

- Utilize recent technology and various diagnostic, therapeutic modalities in the management of obstetrical, gynecological and neonatal care.
- Demonstrate skill in handling various equipments/gadgets used for obstetrical, gynecological and neonatal care.
- Teach and supervise nurses and allied health workers.
- Design a layout of specialty units of obstetrics and gynecology
- Develop standards for obstetrical and gynecological nursing practice.
- Counsel women and families.
- Incorporate evidence based nursing practice and identify the areas of research in the field of obstetrical and gynecological nursing
- Function as independent midwifery nurse practitioner

COURSE CONTENTS:

UNIT I: Introduction, Human Reproduction, Family Welfare Services, Administration and management of obstetrical and gynecological unit, Education and training in obstetrical and gynecological care.

Introduction:

- Historical and contemporary perspectives (1 Hr)
- Epidemiological aspects of maternal and child health(1 hour)
- Magnitude of maternal and child health problems
- Issues of maternal and child health; Age, Gender, Sexuality
- Psycho socio-cultural factors.(1Hr)
- Preventive obstetrics (1 hour)
- National health and family welfare programmes related to maternal and child health:-Health care delivery system, National Rural health mission, Role of NGO's (2 hours)
- Theories, models and approaches applied to midwifery practice.(1Hr)
- Role and scope of midwifery practice :-Independent Nurse midwifery practitioner
- Legal and ethical issues: code of ethics and standards of midwifery practice, standing orders (2 hour)
- Evidence based midwifery practice (1 hour)
- Research priorities in obstetric and gynecological nursing.

Human Reproduction:

- Review of anatomy and physiology of human reproductive system:-male and female.(2 Hrs)
- Placenta at term, functions, uses, abnormalities, fetal sac, amniotic fluid, umbilical cord, fetal circulation , fetal skull.(2hrs)
- Hormonal cycle.(1 hour)
- Embryology. (2 hours)
- Genetics, teratology and counseling. (5 hours)
- Clinical implications. (3 hours)

Family Welfare Services:

• Population dynamics. (1 hr)

- Demography trends:-vital statistics, calculation of indicators especially maternal and neonatal mortality rates and problems and other health problems.(2 hrs)
- Recent advancement in contraceptive technology.
- Emergency contraceptives (1 hr)
- Role of nurses in family welfare programmes in all settings. (1 hr)
- Role of independent nurse midwifery practitioner. (1 hour)
- Family life education (1 hr)
- Evidence based studies (1 hr)
- Information, education and communication (IEC), Management information and evaluation system (MIES).(1 hr)
- Teaching and supervision of health team members. (1 hr)

Administration and management of obstetrical and gynecological unit:

- Design & layout. Staffing, Equipment, supplies, Infection control; Standard safety measures.
- Quality Assurance:-Obstetric auditing records / reports, Norms, policies and protocols.
- Practice standards for obstetrical gynecological unit.

Education and training in obstetrical and gynecological care:

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

UNIT II: Normal Pregnancy, Intranatal and Postnatal care

Normal pregnancy

- Maternal adaptation: Physiological, psychological.
- Assessment:-Maternal and fetal measures.
- Maternal measures: History taking, Examination-general, physical and obstetrical measures, identification of high risk.
- Fetal measures: Clinical parameters, bio chemical, human estriol, maternal serum Alfa Feto Protein, Acetyl choline esterase (AchE), Triple test Amniocentesis, Cordocentesis, and Chrionicvillus sampling (CVS).
- Biophysical :-US imaging, Fetal movement count, Ultra Sonography ,Cardio tomography, Contraction stress test(CST),Non stress test(NST) , Amnioscopy, Foetoscopy.
- Radiological examination.
- Interpretation of diagnostic tests and nursing implications.
- Nursingmanagementofthewomen,minordisordersofpregnancyandmanageme nt,preparationforchild birth and parenthood, importance of institutional delivery, choice of birth setting, importance and mobilizing of transportation, parental counseling, role of nurse and crisis intervention, identification of high risk pregnancy and referral system.
- Alternative/complimentary therapies.

Intranatal

• Essential factors of labour, Stages and onset.

- **First stage**: Physiology of normal labour, Use of partograph: principles, use and critical analysis, evidence based studies, Analgesia and anesthesia in labour, Nursing management.
- Second stage: Physiology, intra partum monitoring, nursing management, Resuscitation, immediate newborn care and initiate breastfeeding (Guidelines of National neonatology forum of India).
- Third stage: Physiology and nursing management.
- Fourth stage: Observation, critical analysis and nursing management
- Various child birth practices: water birth, position change etc
- Evidencebasedpracticeinrelationtolabourintervention,Roleofpractitionernurse midwife
- Alternative /complimentary therapies.
- Physiology of puerperium.
- Physiology of lactation, lactation management, exclusive breastfeeding, Baby friendly hospital imitative (BFHI).
- Assessment of postnatal women.
- Minor discomforts and complications of puerperium.
- Management of mothers during puerperium: postnatal exercises, Rooming in, bonding, warm chain.
- Evidence based studies.
- Role of practitioner nurse midwife.
- Alternative/complementary therapies.

Norma; puerperium and Nursing management:

- Physiology of puerperium. (2 hrs)
- Physiology of lactation, lactation management, exclusive breast feeding, Baby friendly hospital imitative (BFHI). (4 hrs)
- Assessment of postnatal women. (3 hrs)
- Minor discomforts and complications of puerperium.(2 hrs)
- Management of mothers during puerperium:-postnatal exercises, Rooming in, bonding, warm chain.(3hrs)
- Evidence based studies. (3 hrs)
- Role of practitioner nurse midwife, Milk bank, steam cell banking (2 hrs)
- Alternative/complementary therapies. (1 hr)

Drugs used in pregnancy, labour, post partum.

- Calculation of drug dose and administration. (1 hr)
- Effect of drugs used. (1 hrs)
- Role & responsibilities of midwifery nurse practitioner (1hrs)
- Standing orders and protocols and use of selected life saving drugs and Interventions of obstetric emergencies approved by the MOHFW (1 hrs)

UINT III: High risk pregnancy, abnormal labour, pre-term labour & obstetrical emergencies, Post partum complications

Management of problems of women during pregnancy:

- Risk approach of obstetrical nursing care, concept & goals.
- Screening of high-risk pregnancy. (3 hrs)

Nursing Management of Pregnancies at risk-due to obstetrical complication:

- Bleeding in early pregnancy, abortion, ectopic pregnancy, and gestational trophoblostic diseases. Hemorrhage during late pregnancy, ante partum hemorrhage, Placenta praevia, abruptio placenta.(5hrs)
- Hypertensive disorders in pregnancy, pre-eclampsia, eclampsia, Heomolysis Elevated liver enzyme Low Platelet count (HELLP) (5hrs)
- Iso-immune diseases. Rh and ABO incompatibility. Hematological problems in pregnancy. Hydramnios-oligohydramnios. (2hrs)
- Newer modalities of diagnosis (1hr.)
- Multiple pregnancies. (2hrs)
- Intra uterine infection & pain during pregnancy.
- Intra Uterine Growth Retardation (IUGR), Premature Rupture of Membrane (PROM), intra uterine death. (3 hrs)
- Pregnancies at risk due to obstetrical complications-Pernicious Vomiting. (1 hr.)
- Prolonged pregnancy- post term, post maturity(2hrs)
- Psychosocial and Environmental Pregnancy Risks (2hrs)
- Alternative and complimentary therapies. (1 hr.)

Pregnancies at risk-due to pre-existing health problems:

- Anemia and nutritional deficiencies. Hepatitis Cardio-vascular disease. Thyroid diseases. Epilepsy. Essential hypertension, chronic renal failure. Tropical diseases. Psychiatric disorders (8 hrs)
- Infections Toxoplasmosis Rubella Cytomegalo virus Herpes (TORCH); Reproductive Tract Infection (RTI); STD;, Vaginal infections; Leprosy, Tuberculosis, Swine flu with pregnancy. (5 hrs)
- Other risk factors: Age- Adolescents, elderly; unwed mothers, sexual abuse, substance use.(3hrs)
- Pregnancies complicating with tumors, uterine anomalies, prolapse, ovarian cyst. Metabolic conditions.(2Hr)

HIV / AIDS:

- HIV positive mother and her baby.
- Epidemiology. Screening.
- Parent to child transmission. (PTCT)
- Prophylaxis for mother and baby.
- Standard safety measures. Counseling.
- Breast feeding issues.
- Issues: Legal, ethical, Psychosocial and rehabilitation. (3hrs)
- National policies and guidelines.(1 hr)
- Recent Advanced care of women with HIV (11hrs)

Abnormal labour, pre-term labour & obstetrical emergencies etiology, pathophysiology and nursing management of :

- Uncoordinated uterine actions, Atony of uterus, precipitate labour, prolonged labour. Abnormal lie, presentation, position compound presentation. (5hrs)
- Contracted pelvis-CPD; dystocia. Obstetrical emergencies Obstetrical shock, vasa praevia, inversion of uterus, amniotic fluid embolism, rupture uterus, presentation and prolapse cord. Augmentation of labour. Medical and surgical induction. Version. Manual removal of placenta. Complications of third stage of labour: Post partum Hemorrhage. Retained placenta, Disseminated intravascular coagulation.. (8 hrs)
- Obstetrical operation: Forceps delivery, Ventouse, Caesarian section, Destructive operations. (2 Hrs)
- Genital tract injuries-Third degree perineal tear, WF, RVFVII (2 hrs)

Post partum complications:

Nursing management of-

- Puerperal infections, puerperal sepsis, Sub involution of uterus, Breast conditions, Thrombophlebitis.(7hrs)
- Urinary complications, puerperal venous thrombosis and pulmonary embolism.(2hrs)
- Psychological complications, post partum blues, depression, psychosis(2hrs)
- > Anesthesia and analgesia in obstetrics. (1 hr)
- Role & responsibilities of midwifery nurse practitioner (1 hr)
- Standing orders and protocols and use of selected life saving drugs and Interventions of obstetric emergencies approved by the MOHFW (1 hr)
- > Painless labour, Nicotine replacement therapy during pregnancy, (1 hrs)

UINT IV: Normal and High Risk Newborn

Normal Newborn

- Physiology and characteristics of normal newborn (3 hrs)
- Physical and behavioral assessment of newborn. (2 hrs)
- Needs of newborn. (2 hrs)
- Essential newborn care:-Exclusive breast feeding, Immunization, hygiene measures, newborn nutrition.(5 hrs)
- Organization of neonatal care, services (levels), transport, neonatal intensive care unit, organization and management of nursing services in NICU.(3 hrs)
- Observation and care of newborn.(3 hrs)
- Parenting process.(2 hrs)

High Risk Newborn

- Concept, goals, assessment, principles. (1 hr)
- Nursing management of Pre-term, small for gestational age, post-mature infant, and baby of diabetic and substance use mothers. Respiratory conditions, Asphyxia neonatorum, neonatal apnoea meconium aspiration syndrome, pneumo thorax, pneumo mediastinum (7 hrs)
- Icterus neonatorum. Birth injuries, Hypoxic ischaemic encephalopathy.

Advanced neonatal procedures. (5 hrs)

- Calculation of fluid requirements.(2hr)
- Congenital anomalies. Neonatal seizures. Neonatal hypocalcaemia, hypoglycemia, hypomagnesaemia. Neonatal heart diseases. Neonatal hemolytic diseases. Neonatal infections, neonatal sepsis, opthalmia neonatorum, congenital syphilis, HIV / AIDS (6 hrs)
- Organization of neonatal care, services (Levels), transport, neonatal intensive care unit, organization and management of nursing services in NICU. (2 hr)
- Hematological conditions erythroblastosis fetalis, hemorrhagic disorder in the newborn.(2hr)

Drugs used in newborn

Calculation of drug dose and administration and Effect of drugs used. Role & responsibilities of midwifery nurse practitioner .Standing orders and protocols and use of selected life saving drugs and Interventions of obstetric emergencies approved by the MOHFW (2 hrs)

UNIT V: Gynecological problems and nursing management

Gynecological assessment. Gynecological procedures. Etiology, pathophysiology, diagnosis and nursing management of -Menstrual irregularities. Diseases of genital tract, Genital tract infections, uterine displacement. Genital prolapsed, genital injuries, uterine malformation. Uterine fibroid, ovarian tumors, Breast carcinoma, Pelvic inflammatory diseases, reproductive tract malignancies, hysterectomy- vaginal and abdominal Urethral Diverticulum, palliative care of patient with advanced gynecologic cancer, RVF, VVF and Laparoscopic Hysterectomy

- **Infertility:** Primary and secondary causes, Diagnostic procedures. Counseling: Ethical and legal aspects of assisted reproductive technology (ART) Recent advancement in infertility management, Adoption procedures. Surrogacy and its legal and ethical issues Role of nurse in infertility management.
- **Menopause:** Physiological, psychological and social aspects. Hormone replacement therapy, surgical menopause. Alternative and complementary therapies and Counseling and guidance, Role of practitioner nurse midwife.
- Abortion: Types, causes, Legislations, Clinical rights and professional responsibility, Abortion procedures, MTP ACT, and Complication, Nursing management, Role of practitioner nurse midwife.

| Theme no. | Name of theme | Specific Objectives | CONTENT |
|-----------|--|--|---|
| I | Introduction Human Reproduction Family Welfare Services Administration and management of obstetrical and gynecological unit Education and training in obstetrical and gynecological care: | A t the end of unit students are able to Knowledge: Recognize the trends and issues in obstetrics and gynecological nursing. Describe the roll of nurse in family welfare programme. Describe the anatomy and physiology of human reproductive system. Describe the population dynamics and indicators of maternal child health. Describe the methods of contraception and role of nurse in family welfare programme. Describe the organization of obstetrical and gynecological units. Explain the needs for various protocols, policies and regulations required to manage these units. Understands the needs for staff development in obstetrical and gynecological care Skill: Identify and differentiate various approaches applied in midwifery practice. Apply the theories and models in midwifery practice. Calculate the indicators of maternal and child health. Drafts policies and practices established | Introduction: Historical and contemporary perspectives (1 Hr) Epidemiological aspects of maternal and child health (1 hour) Magnitude of maternal and child health problems Issues of maternal and child health; Age, Gender, Sexuality Psycho socio-cultural factors.(1Hr) Preventive obstetrics (1 hour) National health and family welfare programmes related to maternal and child health:-Health care delivery system, National Rural health mission, Role of NGO's (2 hours) Theories, models and approaches applied to midwifery practice.(1Hr) Role and scope of midwifery practice :-Independent Nurse midwifery practitioner Legal and ethical issues: code of ethics and standards of midwifery practice (1 hour) Evidence based midwifery practice (1 hour) Evidence based midwifery practice (1 hour) Review of anatomy and physiology of human reproductive system:-male and female.(2 Hrs) Placenta at term, functions, uses, abnormalities, fetal sac, amniotic fluid, umbilical cord, fetal circulation , fetal skull.(2hrs) Hormonal cycle.(1 hour) Embryology. (2 hours) Clinical implications. (3 hours) |

| regulations while | |
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| regulations while managing obstetrical and gynecological units. Organizes staff training programmes in Obstetrical and gynecological care. Attitude: Appreciate the importance of family welfare programme. Combines various interaction skills for genetic counseling. Enforces standards of care in obstetrical and gynecological units to render quality care. Formulates a policy for staff development in the unit | Family Welfare Services: Population dynamics. (1 hr) Demography trends:-vital statistics, calculation of indicators especially maternal and neonatal mortality rates and problems and other health problems.(2 hrs) Recent advancement in contraceptive technology. Emergency contraceptives (1 hr) Role of nurses in family welfare programmes in all settings. (1 hr) Role of independent nurse midwifery practitioner. (1 hour) Family life education (1 hr) Evidence based studies (1 hr) Information, education and communication (IEC), Management information and evaluation system (MIES).(1 hr) Teaching and supervision of health team members. (1 hr) Administration and management of obstetrical and gynecological unit: Design & layout. Staffing, Equipment, supplies, Infection control; Standard safety measures. Quality Assurance:-Obstetrica and protocols. Practice standards for obstetrical gynecological unit. |
| | Education and training in obstetrical and gynecological care: • Staff orientation, training |
| | and development, In- service education |

| | | | program, Clinical |
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| I | Normal Pregnancy, Intranatal and Postnatal | A t the end of unit students are able to Knowledge: Describe the diagnosis and management of women during antenatal period. Describe the concepts of biophysical and biochemical methods to asses maternal and fatal well being. Explain the role of midwives in preparation for child birth and parenthood. Interprets the partograph correctly. Describe the physiology of puerperium and its management. : Describe the physiology of lactation. Skill: Identifies physiological changes during pregnancy. Detects the minor disorders of pregnancy. Identifies the high risk pregnancies. Identifies the early signs of stages of labour. Apply the partograph labour process. Detect the minor discomforts and complications of puerperium. Attitude: Assist in fetal well being. Asses the newborn and performs newborn resuscitation | Maternal adaptation: Physiological, psychological. Assessment:-Maternal and fetal measures. Maternal measures: History taking, Examination- general,physicalandobstet ricalmeasures,identificati on of high risk. Fetal measures: Clinical parameters, bio chemical, human estriol, maternal serum Alfa Feto Protein, Acetyl choline esterase (AchE), Triple test Amniocentesis, Cordocentesis, and Chrionicvillus sampling (CVS). Biophysical :-US imaging, Fetal movement count, Ultra Sonography ,Cardio tomography, Contraction stress test(CST),Non stress test(NST) , Amnioscopy,Foetoscopy. Radiologicalexamination. Interpretation of diagnostic tests and nursingimplications. Nursingmanagementofthe women,minordisordersof pregnancyandmanagemen t,preparationforchild birth and parenthood, importance of institutional delivery, choice of birth setting, importance and |

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| mobilizing of |
| transportation, parental |
| counseling, role of nurse |
| and crisis intervention, |
| identification of high risk |
| pregnancy and |
| referralsystem. |
| • Alternative/complimentary |
| therapies. |
| • Essential factors of labour, |
| Stages andonset. |
| • First stage: Physiology |
| of normal labour, Use of |
| partograph: - principles, |
| use and critical analysis, |
| evidencebasedstudies,An |
| algesiaandanesthesiainlab |
| our,Nursingmanagement. |
| • Second stage: |
| Physiology, intra partum |
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| <u> </u> |
| management, |
| Resuscitation, immediate |
| newborncareandinitiatebr |
| eastfeeding(Guidelinesof |
| Nationalneonatologyforu |
| mofIndia). |
| • Third stage: Physiology |
| and nursingmanagement. |
| • Fourth stage: |
| Observation, critical analysis and |
| nursingmanagement |
| Various child birth |
| practices : water birth, |
| position changeetc |
| Evidencebasedpracticeinre |
| lationtolabourintervention, |
| Roleofpractitionernursemi |
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| Alternative |
| /complimentarytherapies. |
| • Physiology ofpuerperium. |
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| vebreastfeeding,Babyfrie |
| ndlyhospitalimitative |
| (BFHI). |
| • Assessment of |
| postnatalwomen.Minor discomforts and |
| complications |
| ofpuerperium. |
| Managementofmothersduri |
| ngpuerperium:postnatalexe |
| rcises,Roomingin,bonding, |
| warmchain. |
| • Evidence basedstudies. |
| • Role of practitioner nursemidwife. |
| • Alternative/complementar ytherapies. |
| Norma; puerperium and Nursing |
| management: |
| • Physiology of puerperium. (2 hrs) |
| • Physiology of lactation, lactation management, exclusive breast |
| feeding, Baby friendly hospital |
| imitative (BFHI). (4 hrs) |
| • Assessment of postnatal women. (3 hrs) |
| • Minor discomforts and |
| complications of puerperium.(2 hrs) |
| • Management of mothers during |
| puerperium:-postnatal exercises, Rooming in, bonding, warm |
| chain.(3hrs) |
| • Evidence based studies. (3 hrs) |
| • Role of practitioner nurse |
| midwife, Milk bank, steam cell banking (2 hrs) |
| Alternative/complementary therapies. (1 hr) |
| Drugs used in pregnancy, labour, |
| post partum. |
| • Calculation of drug dose and |
| administration. (1 hr) |
| Effect of drugs used. (1 hrs) Role & responsibilities of |
| • Role & responsibilities of |
| 1 |
| midwifery nurse practitioner (1hrs) |

| III | High Risk Pregnancy, Abnormal Labour and Post-partum complications | At the end of unit students are able to: Knowledge: Understand and explain high risk pregnancy. Explain various medical conditions that put the mother at risk during pregnancy. Understand and describe abnormal uterine action and obstetrical | and use of selected life saving drugs and Interventions of obstetric emergencies approved by the MOHFW (1 hrs) Management of problems of women during pregnancy: Risk approach of obstetrical nursing care, concept & goals. Screening of high-risk pregnancy: (3 hrs) Nursing Management of Pregnancies at risk-due to obstetrical complication: Bleeding in early pregnancy, abortion, ectopic pregnancy, and gestational trophoblostic diseases. Hemorrhage during |
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| | | Explain various medical conditions that put the mother at risk during pregnancy. Understand and describe abnormal uterine action and | pregnancy. (3 hrs) Nursing Management of Pregnancies at risk-due to obstetrical complication: Bleeding in early pregnancy, abortion, ectopic pregnancy, and gestational trophoblostic |
| | | conditions. Performs skillfully antenatal and postnatal assessment and renders care efficiently to high risk clients. Demonstrate competence in identifying and rendering prompt care to the clients with post | diagnosis (1hr.) Multiple pregnancies. (2hrs) Intra uterine infection & pain during pregnancy. Intra Uterine Growth Retardation (IUGR), Premature Rupture of Membrane (PROM), intra uterine death. (3 hrs) |

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| | partum complications. | • Pregnancies at risk due to |
| | Attitude: Appreciate | obstetrical complications- |
| | factors responsible for | Pernicious Vomiting. (1 hr.) |
| | high risk pregnancy in clients. Identify factors | • Prolonged pregnancy- post |
| | responsible for making | term, post maturity(2hrs) |
| | the pregnancy risky in | • Psychosocial and Environmental |
| | general medical | Pregnancy Risks (2hrs) |
| | conditions. | Alternative and complimentary |
| | Identify various factors | therapies. (1 hr.) |
| | responsible for high | Pregnancies at risk-due to |
| | risk pregnancy and | pre-existing health problems: |
| | learns to manage them. | • Anemia and nutritional |
| | Takes initiative to | deficiencies. Hepatitis |
| | prevent post partum complications | Cardio-vascular disease. |
| | | Thyroid diseases. |
| | | Epilepsy. Essential |
| | | hypertension |
| | | Chronic renal failure. |
| | | Tropical diseases. Psychiatric |
| | | disorders (8 hrs) |
| | | • Infections Toxoplasmosis |
| | | Rubella Cytomegalo virus |
| | | Herpes (TORCH); |
| | | Reproductive Tract Infection |
| | | (RTI); STD;, Vaginal |
| | | infections; Leprosy, |
| | | Tuberculosis, Swine flu with |
| | | pregnancy. (5 hrs) |
| | | • Other risk factors: Age- |
| | | Adolescents, elderly; unwed |
| | | mothers, sexual abuse, |
| | | substance use. |
| | | (3hrs) |
| | | • Pregnancies complicating |
| | | with tumors, uterine |
| | | anomalies, prolapse, ovarian |
| | | cyst. Metabolic |
| | | conditions.(2Hr) |
| | | HIV / AIDS: |
| | | • HIV positive mother and her |
| | | baby.Epidemiology. Screening. |
| | | Parent to child transmission. |
| | | (PTCT) |

| • Prophylaxis for mother and |
|---|
| baby. |
| • Standard safety measures. Counseling. |
| Breast feeding issues. |
| • Issues: Legal, ethical |
| Psychosocial and rehabilitation |
| (3hrs) |
| • National policies and |
| guidelines.(1 hr)Recent Advanced care of |
| • Recent Advanced care of women with HIV (11hrs) |
| Abnormal labour, pre-term |
| labour & obstetrical |
| emergencies |
| Etiology, |
| pathophysiology and |
| nursing management of : |
| • Uncoordinated uterine |
| actions, Atony of uterus, |
| precipitate labour, |
| prolonged labour. |
| Abnormal lie, |
| presentation, position |
| compound presentation. |
| (5hrs) |
| • Contracted pelvis-CPD; |
| dystocia. Obstetrical |
| emergencies Obstetrical |
| shock, vasa praevia, |
| inversion of uterus, |
| amniotic fluid embolism, |
| rupture uterus, |
| presentation and prolapse |
| cord. Augmentation of |
| labour. Medical and |
| surgical induction. |
| Version. Manual removal |
| of placenta. |
| Complications of third |
| stage of labour: Post |
| partum Hemorrhage. |
| Retained placenta, |
| Disseminated intravascular |
| coagulation (8 hrs) |

| | | | • Obstetrical operation: Forceps delivery, |
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| | | | Ventouse, Caesarian section, Destructive |
| | | | operations. (2 Hrs)Genital tract injuries- |
| | | | Third degree perineal |
| | | | tear, WF, RVFVII (2 hrs) Post partum complications: |
| | | | Nursing management of- |
| | | | • Puerperal infections, |
| | | | puerperal sepsis, Sub |
| | | | involution of uterus, Breast |
| | | | conditions, |
| | | | Thrombophlebitis.(7hrs) |
| | | | • Urinary complications, |
| | | | puerperal venous thrombosis and pulmonary |
| | | | embolism.(2hrs) |
| | | | Psychological complications, |
| | | | post partum blues, |
| | | | depression, psychosis(2hrs) |
| | | | Anesthesia and analgesia in obstetrics. (1 hr) |
| | | | Role & responsibilities of midwifery nurse practitioner (1 |
| | | | hr) Standing orders and protocols |
| | | | and use of selected life saving |
| | | | drugs and Interventions of |
| | | | obstetric emergencies approved by the MOHFW (1 hr) |
| | | | ➢ Painless labour, Nicotine |
| | | | replacement therapy during |
| | | | pregnancy, (1 hrs) |
| IV | Normal and | A t the end of unit | Normal Newborn: |
| | High Risk | students are able to | • Physiology and characteristics of |
| | Newborn | Knowledge: Describe the normal physiology | normal newborn (3 hrs)Physical and behavioral |
| | | of newborn. Describe | assessment of newborn. (2 hrs) |
| | | the organization and | • Needs of newborn. (2 hrs) |
| | | management of | • Essential newborn care:- Exclusive breast feeding, |
| | | neonatal services in | Immunization, hygiene measures, |
| | | NICU. Understand and explain various | newborn nutrition.(5 hrs) |
| | | various | |

| jeopardize the life of new born. Skill: Perform neonatal assessment and identify the normal characteristics of newborn. Identifies the need of newborn. Identify life threatening conditions in new born and renders life saving care. Attitude: Displays confidence while caring newborn.Develops skills in identifying congenital abnormalities in new born. Takes initiative to organize progressive patient care in NICU | Organization of neonatal care, services (levels), transport, neonatal intensive care unit, organization and management of nursing services in NICU.(3 hrs) Observation and care of newborn.(3 hrs) Parenting process.(2 hrs) gh Risk Newborn: Concept, goals, assessment, principles. (1 hr) Nursing management of - Pre-term, small for gestational age, post-mature infant, and baby of diabetic and substance use mothers. Respiratory conditions, Asphyxia neonatorum, neonatal apnoea meconium aspiration syndrome, pneumo thorax, pneumo mediastinum (7 hrs) Icterus neonatorum. Birth injuries, Hypoxic ischaemic encephalopathy. Advanced neonatal procedures. (5 hrs) Calculation of fluid requirements.(2hr) Congenital anomalies. Neonatal seizures. Neonatal hypoglycemia, hypoglycemia, hypoglycemia, hypoglycemia, hypomagnesaemia. Neonatal infections, neonatal sepsis, opthalmia neonatorum, congenital syphilis, HIV / AIDS (6 hrs)] Organization of neonatal |
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| | Gynecological | At the end of unit | management of nursing services in NICU. (2 hr) Hematological conditions - erythroblastosis fetalis, hemorrhagic disorder in the newborn.(2hr) Drugs used in newborn Calculation of drug dose and administration and Effect of drugs used. Role & responsibilities of midwifery nurse practitioner .Standing orders and protocols and use of selected life saving drugs and Interventions of obstetric emergencies approved by the MOHFW (2 hrs) |
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| V | Gynecological problems and nursing management | At the end of unit students are able to: Knowledge: Understand and explain various gynecological conditions. Skill: Renders care to the clients with gynecological conditions Attitude: Considers the gender identity aspects of gynecological conditions while rendering care to the clients with gynecological conditions | Gynecological assessment. Gynecological procedures. Etiology, pathophysiology, diagnosis and nursing management of -Menstrual irregularities. Diseases of genital tract, Genital tract infections, uterine displacement. Genital prolapsed, genital injuries, uterine malformation. Uterine fibroid, ovarian tumors, Breast carcinoma, Pelvic inflammatory diseases, reproductive tract malignancies, hysterectomy- vaginal andabdominalUrethral Diverticulum, palliative care of patient with advanced gynecologic cancer, RVF, VVF and Laparoscopic Hysterectomy Infertility: • Primary and secondary causes, Diagnosticprocedures. • Counseling:Ethicalandlegalas pectsofassistedreproductivete chnology(ART) • Recent advancement in |

| | infertility management, Adoptionprocedures ○ Surrogacy and its legal and ethical issues ○ Role of nurse in |
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| | infertilitymanagement. Menopause: |
| | ○ Physiological, psychological and socialaspects. |
| | • Hormone replacement therapy, surgicalmenopause. |
| | Alternative and complementary therapies andCounseling and guidance, |
| | • Role of practitioner nursemidwife. |
| | Abortion: |
| | Types, causes, Legislations, Clinical rights and professional responsibility, Abortion procedures, MTP ACT, and Complication, Nursing management, Role of practitioner nursemidwife. |

LIST OF RECOMMENDED BOOKS AND JOURNALS:

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

- Tindall VR, Jeffcoate's Principles of Gynaecology
- Wonna Donna L, Perry Shannon et al", Maternal child Nursing", 1998, Iedn,
- John C. Hobbins, "Obstetric Ultrasound: Artistry in Practice"
- <u>Adel Farouk</u>," <u>History Taking Clinical Examination Case Presentation in</u> <u>Obstetrics Gynecology</u>"
- <u>Philip N. Baker</u>, "Obstetrics by Ten Teachers"
- <u>E. Malcolm Symonds</u> "<u>Essential Obstetrics and Gynaecology</u>"
- <u>Arthur T. Evans</u>, "<u>Manual of Obstetric</u>s"
- John David Gordon, "Obstetrics, Gynecology and Infertility: Pocket Edition: Handbook for <u>Clinicians</u>"
- Pranav Pandya, "Fetal Medicine"
- Carolyn Muller, "<u>GYNECOLOGIC CANCER CARE: INNOVATIVE PROGRESS</u>
- DC Dutta's Textbook of Obstetrics: Including Perinatology and Contraception
- Howkins & Bourne Shaw's Textbook of Gynaecology
 - J. B. Sharma, <u>Textbook of Obstetrics</u>