

MIDWIFERY/OBSTETRICS AND GYNECOLOGY (OBG) NURSING-I

including SB module

PLACEMENT: VI SEMESTER

THEORY: 3 Credits (60 hours)

PRACTICUM: Skill Lab: 1 Credit (40 hours); Clinical: 3 Credits (240 hours)

DESCRIPTION: This course is designed for students to develop knowledge and competencies on the concepts and principles of midwifery. It helps them to acquire knowledge and skills in rendering respectful maternity care to women during antenatal, intranatal and postnatal periods in hospitals and community settings. It further helps to develop skills in managing normal neonates and participate in family welfare programs.

COMPETENCIES: On completion of the program, the students will be able to

1. Demonstrate professional accountability for the delivery of nursing care as per INC standards/ ICM competencies that are consistent with moral, altruistic, legal, ethical, regulatory and humanistic principles in midwifery practice.
2. Communicate effectively with individuals, families and professional colleagues fostering mutual respect and shared decision making to enhance health outcomes.
3. Recognize the trends and issues in midwifery and obstetrical nursing.
4. Review and describe the anatomy and physiology of human reproductive system and conception.
5. Describe and apply physiology in the management of normal pregnancy, birth and puerperium.
6. Demonstrate competency in providing respectful and evidence based maternity care for women during the antenatal, intranatal and postnatal period.
7. Uphold the fundamental human rights of individuals when providing midwifery care.
8. Promote physiologic labour and birth, and conduct normal childbirth.
9. Provide evidence based essential newborn care.
10. Apply nursing process approach in caring for women and their families.
11. Describe the methods of contraception and role of nurse/midwife in family welfare services.
12. Recognize the importance of and actively participate in family welfare programs.
13. Provide youth friendly health services and care for women affected by gender based violence.

COURSE OUTLINE

T–Theory, SL/L–Skill Lab/Lab, C–Clinical

Unit	Time (Hrs)	Learning Outcomes	Content	Teaching/ Learning Activities	Assessment Methods
I	8(T)	Explain the history and current scenario of midwifery in India Review vital health	Introduction to midwifery <ul style="list-style-type: none"> • History of midwifery in India • <i>Current scenario:</i> <ul style="list-style-type: none"> ○ Trends of maternity care in India ○ Midwifery in India – Transformative education for relationship based and transformative midwifery practice in India • Vital health indicators – Maternal mortality ratio, Infant Mortality Rate, 	<ul style="list-style-type: none"> • Discussion • Demonstration • Roleplay • Directed reading and assignment: ICM competencies • Scenario based learning 	<ul style="list-style-type: none"> • Short answer • Objective type • Essay • Quiz

Unit	Time (Hrs)	Learning Outcomes	Content	Teaching/ Learning Activities	Assessment Methods
		indicators Describe the various national health programs related to RMNCH+A Identify the trends and issues in midwifery Discuss the legal and ethical issues relevant to midwifery practice	Neonatal Mortality Rate, perinatal mortality rate, fertility rates ○ Maternal death audit • National health programs related to RMNCH+A (Reproductive Maternal Newborn and Child Health + Adolescent Health) <i>Current trends in midwifery and OBG nursing:</i> ○ Respectful maternity and newborn care (RMNC) ○ Midwifery-led care units (MLCU) ○ Women centered care, physiologic birthing and demedicalization of birth ○ Birthing centers, water birth, lotus birth ○ Essential competencies for midwifery practice (ICM) ○ Universal rights of child-bearing women ○ Sexual and reproductive health and rights ○ Women's expectations & choices about		

		tice	<p>tcare</p> <p><i>Legal provisions in midwifery practice in India:</i></p> <ul style="list-style-type: none"> • INC/MOH&FW regulations • ICM code of ethics • Ethical issues in maternal and neonatal care • Adoption laws, MTP act, Pre-Natal Diagnostic Test (PNDT) Act, Surrogate mothers • Roles and responsibilities of a midwife/Nurse practitioner midwife in different settings (hospital/community) • Scope of practice for midwives 		
II	6(T) 3(L)	Review the anatomy and physiology of human reproductive system	<p>Anatomy and physiology of human reproductive system and conception (Maternal, Fetal & Newborn physiology)</p> <p><i>Review:</i></p> <ul style="list-style-type: none"> • Female organs of reproduction • Female pelvis – bones, joints, ligaments, planes, diameters, landmarks, inclination, pelvic variations • Foetal skull – bones, sutures, 	<ul style="list-style-type: none"> • Lecture • Discussion • Self-directed learning • Models • Videos & films 	<ul style="list-style-type: none"> • Quiz • Short answer • Essay

Unit	Time (Hrs)	Learning Outcomes	Content	Teaching/ Learning Activities	Assessment Methods
			<p>fontanelles, diameters, moulding</p> <ul style="list-style-type: none"> • Fetopelvic relationship • Physiology of menstrual cycle, menstrual hygiene • Fertilization, conception and implantation • Embryological development • Placental development and function, placental barrier • Fetal growth and development • Fetal circulation & nutrition 		
III	12(T) 10(L) 40(C)	Provide preconception care to eligible couples	<p>Assessment and management of normal pregnancy (ante-natal):</p> <p>Pre-pregnancy Care</p> <ul style="list-style-type: none"> • Review of sexual development (<i>Self Learning</i>) • Socio-cultural aspects of human sexuality (<i>Self Learning</i>) • Preconception care 	<ul style="list-style-type: none"> • Lecture • Discussion • Demonstration • Self-Learning • Health talk • Roleplay • Counseling session 	<ul style="list-style-type: none"> • Short answer • Objectivity type • Assessment of skills with checklist • Case study evaluation • OSCE

		Describe the physiology, assessment and management of normal pregnancy	<ul style="list-style-type: none"> • Pre-conception counseling (including awareness regarding normal birth) Genetic counseling (<i>Self Learning</i>) • Planned parenthood <p>Pregnancy assessment and antenatal care (I, II & III Trimesters)</p> <p>Normal pregnancy</p> <ul style="list-style-type: none"> • Physiological changes during pregnancy • Assess and confirm pregnancy: Diagnosis of pregnancy – Signs, differential diagnosis and confirmatory tests • Review of maternal nutrition & malnutrition • Building partnership with women following RMC protocol • Fathers' engagement in maternity care <p>Ante-natal care:</p> <p>1st Trimesters</p> <ul style="list-style-type: none"> • Antenatal assessment: History taking, physical examination, breast examination, laboratory investigation • Identification and management of minor discomforts of pregnancy 	<ul style="list-style-type: none"> • Case discussion/presentation • Simulation • Supervised clinical practice <ul style="list-style-type: none"> • Refer SBA module & Safemotherhood 	
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Unit	Time (Hrs)	Learning Outcomes	Content	Teaching/ Learning Activities	Assessment Methods
		trimesters	<ul style="list-style-type: none"> • Antenatal care: as per GoI guidelines • Antenatal counseling (lifestyle changes, nutrition, shared decision making, risky behavior, sexual life during pregnancy, immunization etc.) • Danger signs during pregnancy • Respectful care and compassionate communication • Recording and reporting: as per the GoI guidelines • Role of Doula/ASHAs <p>II Trimester</p> <ul style="list-style-type: none"> • Antenatal assessment: abdominal palpation, fetal assessment, auscultate fetal heart rate – Doppler and pinnard's stethoscope • Assessment of fetal well-being: DFMC, biophysical profile, Nonstress test, cardio-tocography, USG, Vibro acoustic stimulation, biochemical tests. 	<p>booklet</p> <ul style="list-style-type: none"> • Lab tests – performance and interpretation • Demonstration • Roleplay 	

			<ul style="list-style-type: none"> • Antenatal care • Women centered care • Respectful care and compassionate communication • Health education on IFA, calcium and vitamin D supplementation, glucose tolerance test, etc. • Education and management of physiological changes and discomforts of 2nd trimester • Rh negative and prophylactic anti-D • Referral and collaboration, empowerment • Ongoing risk assessment • Maternal Mental Health <p>III Trimester</p> <ul style="list-style-type: none"> • Antenatal assessment: abdominal palpation, fetal assessment, auscultate fetal heart rate – Doppler and pinnaard’s stethoscope • Education and management of physiological changes and discomforts of 3rd trimester • Third trimester tests and screening • Fetal engagement in late pregnancy • Child birth preparation classes 	<ul style="list-style-type: none"> • Demonstration of antenatal assessment 	
Unit	Time (Hrs)	Learning Outcomes	Content	Teaching/ Learning Activities	Assessment Methods
			<ul style="list-style-type: none"> • Birth preparedness and complication readiness including micro birth planning • Danger signs of pregnancy – recognition of ruptured membranes • Education on alternative birthing positions – women’s preferred choices, birth companion • Ongoing risk assessment • Cultural needs • Women centered care • Respectful and compassionate communication • Health education on exclusive breastfeeding • Role of Doula/ASHA’s 	<ul style="list-style-type: none"> • Scenario based learning • Lecture • Simulation • Roleplay • Refer to IGO Guidelines • Health talk • Counseling session • Demonstration of birthing positions • Workshop on alternative birthing positions 	

IV	12(T) 12(L) 80(C)	<p>Apply the physiology of labour in promoting normal childbirth</p> <p>Describe the management and care during labour</p> <p>Discuss how to maintain a safe environment for labour</p> <p>Work effectively for pain management during labour</p>	<p>Physiology, management and care during labour</p> <ul style="list-style-type: none"> • Normal labour and birth • Onset of birth/labour • Pervaginal examination (if necessary) • Stages of labour • Organization of labour room – Triage, preparation for birth • Positive birth environment • Respectful care and communication • Drugs used in labour as per GoI guidelines <p>Fist Stage</p> <ul style="list-style-type: none"> • Physiology of normal labour • Monitoring progress of labour using Partograph/labour care guide • Assessing and monitoring fetal wellbeing • Evidence based care during 1st stage of labour • Pain management in labour (non-pharmacological) • Psychological support – Managing fear • Activity and ambulation during first stage of labour 	<ul style="list-style-type: none"> • Lecture • Discussion • Demonstration • Bedside clinics • Case discussion/presentation • Simulated practice • Supervised Clinical practice – Pervaginal examination, Conduction of normal childbirth • Refer SBA module • LaQshyag guidelines • Dakshata guidelines 	<ul style="list-style-type: none"> • Essay type • Short answer • Objectivity type • Case study evaluation • Assessment of skills with checklist • OSCE
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Unit	Time (Hrs)	Learning Outcomes	Content	Teaching/ Learning Activities	Assessment Methods
		<p>Discuss how the midwife provides care and support for the women during birth to enhance physiological birthing and promote normal birth</p> <p>Assess and</p>	<ul style="list-style-type: none"> • Nutrition during labour • Promote positive childbirth experience for women • Birth companion • Role of Doula/ASHA's <p>Second stage</p> <ul style="list-style-type: none"> • Physiology (Mechanism of labour) • Signs of imminent labour • Intrapartum monitoring • Birth position of choice • Vaginal examination • Psychological support • Non-directive coaching • Evidence based management of physiological birth/Conduction of normal childbirth 	<ul style="list-style-type: none"> • Refer ENBC, N SSK module • Demonstration • Group work • Scenario based learning 	

		<p>provide care of the newborn immediately following birth</p> <p>Discuss the impact of labour and birth as a transitional event in the woman's life</p>	<ul style="list-style-type: none"> • Essential newborn care (ENBC) • Immediate assessment and care of the newborn • Role of Doula/ASHA's <p>Third Stage</p> <ul style="list-style-type: none"> • Physiology – placental separation and expulsion, hemostasis • Physiological management of third stage of labour • Active management of third stage of labour (recommended) • Examination of placenta, membranes and vessels • Assess perineal, vaginal tear/injuries and suture if required • Insertion of postpartum IUCD • Immediate perineal care • Initiation of breastfeeding • Skin to skin contact • Newborn resuscitation <p>Fourth Stage</p> <p><i>Observation, Critical Analysis and Management of mother and newborn</i></p> <ul style="list-style-type: none"> • Maternal assessment, observation fundal height, uterine consistency, urine output, blood loss • Documentation and Record of birth 	<ul style="list-style-type: none"> • Simulation • Roleplay • Demonstration • Videos 	
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Unit	Time (Hrs)	Learning Outcomes	Content	Teaching/ Learning Activities	Assessment Methods
		Ensure initiation of breast feeding and adequate latching	<ul style="list-style-type: none"> • Breastfeeding and latching • Managing uterine cramp • Alternative/complementary therapies • Role of Doula/ASHA's • Various child birth practices • Safe environment for mother and newborn to promote bonding • Maintaining records and reports 		
V	7(T) 6(L) 40(C)	Describe the physiology, management and care of normal puerperium	<p>Postpartum care/ Ongoing care of women</p> <ul style="list-style-type: none"> • Normal puerperium – Physiology, duration • Post-natal assessment and care – facility and home-based care 	<ul style="list-style-type: none"> • Lecture • Discussion • Demonstration • Health talk • 	<ul style="list-style-type: none"> • Essay type • Short answer • Objective type •

			<ul style="list-style-type: none"> • Perineal hygiene and care • Bladder and bowel function • Minor disorders of puerperium and its management • Physiology of lactation and lactation management • Postnatal counseling and psychological support • Normal postnatal baby blues and recognition of postnatal depression • Transition to parenthood • Care for the woman up to 6 weeks after childbirth • Cultural competence (Taboos related to postnatal diet and practices) • Diet during lactation - review • Post-partum family planning • Follow-up of postnatal mothers • Drugs used in the postnatal period • Records and reports 	<p>Simulated practice</p> <ul style="list-style-type: none"> • Supervised clinical practice • Refer SBA module 	<p>Assessment of skills with checklist</p> <ul style="list-style-type: none"> • OSCE
VI	7(T) 7(L) 40(C)	<p>Discuss the need for and provision of compassionate, family centered midwifery care of the newborn</p> <p>Describe the assessment and care of normal neonate</p>	<p>Assessment and ongoing care of normal neonates</p> <ul style="list-style-type: none"> • Family centered care • Respectful newborn care and communication • Normal Neonate – Physiological adaptation • Newborn assessment – Screening for congenital anomalies • Care of newborn up to 6 weeks after 	<ul style="list-style-type: none"> • Lecture • Discussion • Demonstration • Simulated practice session • Supervised clinical practice • Refer safe delivery app module – newborn 	<ul style="list-style-type: none"> • Essay type • Short answer • Objective type • Assessment of skills with checklist • OSCE

Unit	Time (Hrs)	Learning Outcomes	Content	Teaching/ Learning Activities	Assessment Methods
			<p>the childbirth (Routine care of newborn)</p> <ul style="list-style-type: none"> • Skin to skin contact and thermoregulation • Infection prevention • Immunization • Minor disorders of newborn and its management 	<p>management</p> <ul style="list-style-type: none"> • Partial completion of SBA module 	
VII	8(T)	Explain various methods of	Family welfare services	<ul style="list-style-type: none"> • Lecture 	<ul style="list-style-type: none"> • Essay type

2(L) 40(C)	<p>family planning and role of nurse/midwife in providing family planning services</p> <p>Describe youth friendly services and role of nurses/midwives</p> <p>Recognize the role of nurses/midwives in gender based violence</p>	<ul style="list-style-type: none"> • Impact of early/frequent child bearing • Comprehensive range of family planning methods <ul style="list-style-type: none"> ○ Temporary methods – Hormonal, non-hormonal and barrier methods ○ Permanent methods – Male sterilization and female sterilization • Action, effectiveness, advantages, disadvantages, myths, misconception and medical eligibility criteria (MEC) for use of various family planning methods • Emergency contraceptives • Recent trends and research in contraception • Family planning counseling using Balanced Counseling Strategy (BCS) • Legal and rights aspects of FP • Human rights aspects of FP in adolescents • Youth friendly services – SRHR services, policies affecting SRHR and attitude of nurses and midwives in provision of services (Review) • Importance of follow up and recommended timing <p>Gender related issues in SRH</p> <ul style="list-style-type: none"> • Gender based violence – Physical, sexual and abuse, Laws affecting GBV and role of nurse/midwife • Special courts for abused people • Gender sensitive health services including family planning 	<ul style="list-style-type: none"> • Supervised practice • Field visits • Scenario based learning • Discussion • GoI guidelines – injectable contraceptives, oral contraceptives, IUCD, male and female sterilization 	<ul style="list-style-type: none"> • Short answers • Objective type • Field visit reports • Vignettes
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DISTRIBUTION OF TEACHING HOURS

STRATEGY		Teaching hours	
Didactic	Lectures		60
Non didactic	Practical /clinical / Small group discussion	240hrs	280
	Demonstration	26 hrs	
	Tutorials	8 hrs	

	Integrated Teaching Program/MPBL	6 hrs	
Total			340Hrs.

TOPICS & OUTCOMES

Subject	Number of Themes	Number of outcomes
Midwifery/ Obstetric and Gynaecology	07	63

DISTRIBUTION OF THEORY HOURS

S. N	Theme	Topics	Teaching hrs.
1	Introductiontomidwifery	Introductiontomidwifery	8
2	Anatomy and physiology of humanreproductive system and conception(Maternal, Fetal & Newbornphysiology)	Anatomy and physiology of humanreproductive system and conception(Maternal, Fetal & Newbornphysiology)	6
3	Assessmentandmanagementofnormalpregnancy(ante-natal): Pre-pregnancyCare	Assessmentandmanagementofnormalpregnancy(ante-natal): Pre-pregnancyCare	12
4	Physiology,managementandcareduringlabour	Physiology,managementandcareduringlabour	12
5	Postpartumcare/Ongoingcareofwomen	Postpartumcare/Ongoingcareofwomen	7
6	Assessmentandongoingcareofnormalneonates	Assessmentandongoingcareofnormalneonates	7
7	Familywelfareservices	Familywelfareservices	8
TOTAL			60 Hours

*Number of EQB themes

** Number of COs

MIDWIFERY/OBSTETRICS AND GYNECOLOGY (OBG) NURSING-I total competencies-63

Core competencies							Non-core competencies	Total Hours
Theme and total hours allotted	Objectives	Topic	Code No	Competency	Must know	Desirable to know	Nice to know	
I 8 (T)	At the end of unit students are able to: Knowledge: Understand and describe regarding trends in midwifery & obstetric nursing. Know the legal and ethical aspects. Skill: Educate the couple regarding preparation of parenthood. Attitude: Discuss expanded role of midwife in Maternity and obstetric nursing practice.	Introduction to midwifery	N-MIDW(I) /OBGN33:VISE M1.2	Explain the history and current scenario of midwifery in India	<ul style="list-style-type: none"> • History of midwifery in India • <i>Current scenario:</i> <ul style="list-style-type: none"> ○ Trends of maternity care in India ○ Midwifery in India – Transformative education for relationship based and transformative midwifery practice in India 			1h
			N-MIDW(I) /OBGN335:VISE M 1.2	Describe the various national health programs related to RMNCH+A	National health programs related to RMNCH+A (Reproductive Maternal Newborn and Child Health + Adolescent Health)			1h
			N-MIDW(I) /OBGN335:VISE M 1.3	Review vital health indicators	Vital health indicators – Maternal mortality ratio, Infant Mortality Rate, Neonatal Mortality Rate, perinatal mortality rate, fertility rates ○ Maternal death audit (5)			1h
			N-MIDW(I) /OBGN335:VISE M 1.4	Describe the trends and issues in midwifery	<i>Current trends in midwifery and OBG nursing:</i> ○ Respectful maternity and newborn care (RMNC)			1h

					<ul style="list-style-type: none"> ○ Midwifery-led care units (MLCU) ○ Women centered care, physiologic birth in and demedicalization of birth 			
			N-MIDW(I) /OBGN335:VISE M 1.5	Describe the birthing centers	<ul style="list-style-type: none"> ○ Birthing centers, water birth, lotus birth ○ Essential competencies for midwifery practice (ICM) ○ Universal rights of child-bearing women ○ Sexual and reproductive health and rights ○ Women's expectations & choices about care 			1h
			N-MIDW(I) /OBGN335:VISE M 1.6	Describe the various national health programs related to RMNCH+A		National health programs related to RMNCH+A (Reproductive Maternal Newborn and Child Health + Adolescent Health)		2h
			N-MIDW(I) /OBGN335:VISE M 1.7	Discuss the legal and ethical issues relevant to midwifery practice			<i>Legal provisions in midwifery practice in India:</i> <ul style="list-style-type: none"> • INC/ MOH & FW regulations 	1/2h

							<ul style="list-style-type: none"> • ICMcodeofethics • Ethicalissue sinmaternal andneonatal care • Adoption laws, MTP act, Pre-NatalDiagn osticTest(P NDT)Act,S urrogate mothers 	
			N-MIDW(I) /OBGN335:VISE M 1.8	Explain the role of the responsibilities of nurse			<ul style="list-style-type: none"> • Roles and responsibilities of amidwife/Nurse practitioner midwife indifferent settings(hospital/com munity) Scopeofpracticefor midwives 	½ h
II 6 (T)	At the end of unit students are able to: Knowledge: Understand and explain the anatomy of female reproductive system and explain fertilization, fetal growth and development.	Anatomy and physiology of human reproductive system and conception (Maternal, Fetal &	N-MIDW(I) /OBGN335:VISE M 2.1	Explain the structure and function of female reproductive organs.	Female organs of reproduction			1h
			N-MIDW(I) /OBGN335:VISE	Describe the fetal skull and Female	Female pelvis - bones,			1h

<p>Attitude: Explain the features of female pelvis and examine the placenta correctly.</p> <p>Skill: Recognize placenta, liquor amni and umbilical cord.</p>	Newborn physiology)	M 2.2	pelvis	joints, ligaments, planes, diameters, landmarks, inclination, pelvic variations Fetal skull – bones, sutures, fontanelles, diameters, moulding Fetopelvic relationship			
		N-MIDW(I) /OBGN335P:VISEM 2.3	Explain the physiology of menstrual cycle, menstrual hygiene	physiology of menstrual cycle, menstrual hygiene			1h
		N-MIDW(I) /OBGN335:VISEM 2.4	Describe the fertilization, conception and implantation	Fertilization, conception and implantation			1h
		N-MIDW(I) /OBGN335:VISEM 2.5	Explain the embryological development and Placental development and function, placental barrier		Embryological development Placental development and function, placental barrier		1h
		N-MIDW(I) /OBGN335:VISEM 2.6	Describe fetal growth and development and fetal circulation		Fetal growth and development Fetal circulation & nutrition		1h

III 12 (T)	At the end of unit students are able to: Knowledge: Understand and describe physiological changes during pregnancy and diagnose the pregnancy. Know the adaptation procedure. Skill: Demonstrate mechanism of labour. Identify physiological changes during pregnancy and detect minor disorders of pregnancy and provide appropriate care.	Assessment and management of normal pregnancy (ante-natal):	N-MIDW(I) /OBGN335:VISE M 3.1	Explain the pre-pregnancy Care	Pre-pregnancyCare <ul style="list-style-type: none">• Review of sexual development (<i>Self Learning</i>)• Socio-cultural aspects of human sexuality (<i>Self Learning</i>)			1.1/2h
	physiological changes during pregnancy and provide appropriate care. Attitude: Perform antenatal assessment of pregnant women and fetus. Provide nursing care to unwed, teenage mothers and child		N-MIDW(I) /OBGN335:VISE M 3.2	Describe the preconceptional care and counseling	<ul style="list-style-type: none">• Preconception care• Pre-conception counseling (including awareness regarding normal birth) Genetic counseling (<i>Self Learning</i>)• Planned parenthood			2h
			N-MIDW(I) /OBGN335:VISE M 3.3	Describe the physiology, assessment and management of during pregnancy	Pregnancy assessment and antenatal care (I, II & III Trimesters) Normal pregnancy <ul style="list-style-type: none">• Physiological changes during pregnancy			1h
			N-MIDW(I) /OBGN335:VISE M 3.4	Describe the diagnosis of pregnancy	<ul style="list-style-type: none">• Assess and confirm pregnancy: Diagnosis of pregnancy – Signs, differential diagnosis and confirmatory tests			1h

			N-MIDW(I) /OBGN335:VISE M 3.5	Explain the review of maternal nutrition and malnutrition	<ul style="list-style-type: none"> • Reviewofmaternal nutrition&malnutri tion • Buildingpartnership withwomenfollowin gRMC protocol • Fathers‘engagementinmate rnitycare 			1and ½ h
			N-MIDW(I) /OBGN335:VISE M 3.6	Explain the ante- natal assessment/ care in 1 st trimesters	<p>Ante-natalcare: 1stTrimesters</p> <ul style="list-style-type: none"> • Antenatalassessment:His torytaking,physical examination, breastexamination,labor atoryinvestigation 			½ h
			N-MIDW(I) /OBGN335:VISE M 3.7	Explain the management of minor discomforts of pregnancy	Identification and management of minordiscomforts of pregnancy			½ h
			N-MIDW(I) /OBGN335:VISE M 3.8	Explain the Antenatalcare:as perGoIguideline s	<ul style="list-style-type: none"> • Antenatalcare:asperGoIgui delines • Antenatalcounseling(lifest ylechanges,nutrition, shared decision making, riskybehavior, sexual life during pregnancy,immunizationet c.) • Dangersignsduringpregnan cy 			½ h

					<ul style="list-style-type: none"> • Respectful care and compassionate communication • Recording and reporting: as per the GoI guidelines <p>Role of Doula/ASHAs</p>			
			N-MIDW(I) /OBGN335:VISE M 3.9	Explain the antenatal assessment/care in 2 nd trimesters	II Trimester <ul style="list-style-type: none"> • Antenatal assessment: abdominal palpation, fetal assessment, auscultate fetal heart rate – Doppler and pinard’s stethoscope 			½ h
			N-MIDW(I) /OBGN335:VISE M 3.10	Describe the assessment of fetal well-being	<ul style="list-style-type: none"> • Assessment of fetal well-being: DFMC, biophysical profile, Nonstress test, cardiotocography, USG, Vibro acoustic stimulation, biochemical tests. 			1h
			N-MIDW(I) /OBGN335:VISE M 3.11	Explain the antenatal care, women centered care in 2 nd trimester	<ul style="list-style-type: none"> • Antenatal care • Women centered care • Respectful care and compassionate communication • Health education on IFA, calcium and vitamin D supplementation, glucose tolerance test, etc. 			1h

					<ul style="list-style-type: none"> • Education and management of physiological changes and discomforts of 2nd trimester • Rh negative and prophylactic antiD • Referral and collaboration, empowerment • On going risk assessment <p>Maternal Mental Health</p>			
			N-MIDW(I) /OBGN335:VISE M 3.12	Explain the antenatal care, assessment in 3 rd trimesters		<p>III Trimester</p> <ul style="list-style-type: none"> • Antenatal assessment: abdominal palpation, fetal assessment, auscultate fetal heart rate – Doppler and pinard’s stethoscope • Education and management of physiological changes and discomforts of 3rd trimester • Third trimester tests and screening <p>Fetal engagement in late p</p>		½ h

						regnancy		
			N-MIDW(I) /OBGN335:VISE M 3.13	Explain the child birth preparation and completion readiness including micro birth planning			<ul style="list-style-type: none"> • Child birth preparation classes Birth preparedness and complication readiness including micro birth planning • Danger signs of pregnancy – recognition of ruptured membranes • Education on alternative birthing positions – women’s preferred choices, birth companion • Ongoing risk assessment • Cultural needs • Women centered care • Respectful and compassionate communication • Health education on exclusive breastfeeding • Role of Doula/ 	1 h

							ASHA's	
IV 12 (T)	At the end of unit students are able to: Knowledge: Understand and analyze Partograph. Describe the stages of labour and manage the labour. Skill: Record partograph. Identify and differentiate stages of labour and manage the labour effectively. Assess the new born and perform new born resuscitation. Attitude: Implement and utilize Partograph labour process.	Physiology, management and care during labour	N-MIDW(I) /OBGN335:VISE M 4.1	Explain the physiology and management and care during normal labour	<ul style="list-style-type: none"> • Normal labour and birth • Onset of birth/labour • Per vaginal examination (if necessary) • Stages of labour • Organization of labour room – Triage, preparation for birth • Positive birth environment • Respectful care and communication • Drugs used in labour as per GoI guidelines 			1h
			N-MIDW(I) /OBGN335:VISE M 4.2	Explain the physiology and management and care during 1 st stage of labour	First Stage <ul style="list-style-type: none"> • Physiology of normal labour • Monitoring progress of labour using Partograph/labour care guide • Assessing and monitoring fetal wellbeing • Evidence based care during 1st stage of labour 			2 h

					<ul style="list-style-type: none"> • Pain management in labour (non-pharmacological) • Psychological support– Managing fear 			
			N-MIDW(I) /OBGN335:VISE M 4.3	Explain the activity and ambulation during 1 st stage of labour	<ul style="list-style-type: none"> • Activity and ambulation during first stage of labour • Nutrition during labour • Promote positive childbirth experience for women • Birth companion • Role of Doula/ASHA's 			1h
			N-MIDW(I) /OBGN335:VISE M 4.4	Explain the physiology and management and care during 2 nd stage of labour	<p>Second stage</p> <ul style="list-style-type: none"> • Physiology (Mechanism of labour) • Signs of imminent labour • Intrapartum monitoring • Birth position of choice • Vaginal examination • Psychological support • Non-directive coaching 			1h
			N-MIDW(I) /OBGN335:VISE M 4.5	Explain the evidence based management of conduction of child birth	<ul style="list-style-type: none"> • Evidence based management of physiological birth/Conduction of normal childbirth 			1h

					Essential newborn care (ENBC)			
			N-MIDW(I) /OBGN335:VISE M 4.6	Explain the immediate care of newborn	<ul style="list-style-type: none"> • Immediate assessment and care of the newborn • Role of Doula/ASHA's 			1h
			N-MIDW(I) /OBGN335:VISE M 4.7	Explain the Physiology–placental separation and expulsion, hemostasis	Third Stage Physiology–placental separation and expulsion, hemostasis			1h
			N-MIDW(I) /OBGN335:VISE M 4.8	Explain the Physiological management of third stage of labour	<ul style="list-style-type: none"> • Physiological management of third stage of labour • Active management of third stage of labour (recommended) 			1h
			N-MIDW(I) /OBGN335:VISE M 4.9	Explain the Examination of placenta, membrane and vessels	Examination of placenta, membranes and vessels			½ h
			N-MIDW(I) /OBGN335:VISE M 4.10	Explain the Assess perineal, vaginal tear	Assess perineal, vaginal tear/injuries and suture if required			½ h
			N-MIDW(I) /OBGN335:VISE M 4.11	Explain the insertion of postpartum IUCD	<ul style="list-style-type: none"> • Insertion of postpartum IUCD • Immediate perineal care • Initiation of breastfeeding • Skin to skin contact 			½ h

					Newborn resuscitation			
			N-MIDW(I) /OBGN335:VISE M 4.12	Explain the Observation, Critical Analysis and Management of mother and newborn	Fourth Stage Observation, Critical Analysis and Management of mother and newborn			½ h
			N-MIDW(I) /OBGN335:VISE M 4.13	Explain the maternal assessment in 4 th stage of labour	Maternal assessment, observation fundal height, <ul style="list-style-type: none"> uterine consistency, urine output, blood loss Documentation and Record of birth <ul style="list-style-type: none"> Breastfeeding and latching Managing uterine cramp Alternative/complementary therapies Role of Doula/ASHA's 			½ h
			N-MIDW(I) /OBGN335:VISE M 4.14	Explain the various child birth practices and safe environment for mother and newborn			<ul style="list-style-type: none"> Various child birth practices Safe environment for mother and newborn to promote bonding Maintaining records and reports 	½ h
V	At the end of unit	Postpartum	N-MIDW(I)	Describe the	<ul style="list-style-type: none"> Normal puerperium– 			1h

7 (T)	<p>students are able to:</p> <p>Knowledge: Understand and discuss the physiology of Puerperium and its management.</p> <p>Skill: Provide effective care to new born.</p> <p>Attitude: Motivate mother and family to adopt small family norms.</p>	care/Ongoing care of women	/OBGN335:VISE M 5.1	normal puerperium	<p>Physiology,duration</p> <ul style="list-style-type: none"> • Perinealhygieneandcare • Bladderandbowelfunction 			
			N-MIDW(I) /OBGN335:VISE M 5.2	Explain the Postnatal counseling andpsychological support	<ul style="list-style-type: none"> • Postnatal counseling andpsychological support • Normal postnatal baby blues andrecognitionofpost-nataldepression • Transition to parenthood • Care for the woman upto 6weeks after childbirth • Cultural competence(Taboosrelatedtopostnatal diet andpractices) 			1h
			N-MIDW(I) /OBGN335:VISE M 5.3	Explain the minor disorders of puerperium and its management	<ul style="list-style-type: none"> • Minor disorders of puerperium and its management 			1h
			N-MIDW(I) /OBGN335:VISE M 5.4	Explain the physiology of lactation	<ul style="list-style-type: none"> • Physiology of lactation and lactation management Dietduringlactation-review 			1h

			N-MIDW(I) /OBGN335:VISE M 5.5	Explain the post partum family planning and follow up		<ul style="list-style-type: none"> • Post-partumfamilyplanning • Follow-upofpostnatalmothers 		1 h
			N-MIDW(I) /OBGN335:VISE M 5.6	Describe the drugs used in the postnatal period		<ul style="list-style-type: none"> • Drugs used in the postnatal period 		1h
			N-MIDW(I) /OBGN335:VISE M 5.7	Explain the records and reports			Records and reports	1h
VI 7 (T)	At the end of unit students are able to: Knowledge: Understand and describe normal physiology of normal new born. Attitude: Display confidence while caring new born. Motivate mother for exclusive breast feeding. Skill: Assess neonate correctly.	Assessment and ongoing care of normal neonates	N-MIDW(I) /OBGN335:VISE M 6.1	<ul style="list-style-type: none"> • Explain the family centered care and Respectful new born care and communication 	<ul style="list-style-type: none"> • Family centered care • Respectful new born care and communication 			1h
			N-MIDW(I) /OBGN335:VISE M 6.2	Explain the normal neonate	<ul style="list-style-type: none"> • NormalNeonate– Physiological adaptation 			1h
			N-MIDW(I) /OBGN335:VISE M 6.3	Explain the newborn assessment	<ul style="list-style-type: none"> • Newborn assessment – Screening forcongenitalanomalies 			1h
			N-MIDW(I) /OBGN335:VISE M 6.4	Explain the Care of newborn upto 6weeks after the childbirth (Routinecareofnew born)	Care of newborn upto 6weeks after the childbirth (Routinecareofnew born) <ul style="list-style-type: none"> • Skin to skin contact and thermoregulation 			1h
			N-MIDW(I) /OBGN335:VISE M 6.5	Describe the infection prevention		Infection prevention		1h

			N-MIDW(I) /OBGN335:VISE M 6.6	Explain the immunization		Immunization		1h
			N-MIDW(I) /OBGN335:VISE M 6.7	Explain the minor disorders of new born			Minor disorders of newborn and its management	1h
VII 8 (T)	Knowledge: Describe various methods of family planning. Skill: Identify eligible couple for family planning and meet their needs for family planning. Attitude: Volunteers to disseminate the knowledge about family planning and family planning methods.	Family welfare services	N-MIDW(I) /OBGN335:VISE M 7.1	Describe the impact of fearly and frequent childbirthing	<ul style="list-style-type: none"> • Impactofearly/frequent childbearing 			1h
			N-MIDW(I) /OBGN335:VISE M 7.2	Describe the family planning methods	<ul style="list-style-type: none"> • Comprehensive range of family planning methods <ul style="list-style-type: none"> ○ Temporary methods – Hormonal,non-hormonalandbarriermethods ○ Permanent methods – Malesterilizationandfe malesterilization 			2h
			N-MIDW(I) /OBGN335:VISE M 7.3	Explain the Action, effectiveness, advantages, disadvantages, myths and misconceptionandmedicaleligibilitycriteria(MEC)for use of various family planningmethods	<ul style="list-style-type: none"> • Action, effectiveness, advantages,disadvantages, myths, misconceptionandmedicaleligibilitycriteria(MEC)for use of various family planningmethods 			1h
			N-MIDW(I) /OBGN335:VISE M 7.4	Explain the emergency contraception	<ul style="list-style-type: none"> • Emergencycontraceptives Recenttrendsandresearchinco 			1h

				nterception			
		N-MIDW(I) /OBGN335:VISE M 7.5	Explain the family planning counseling.		<ul style="list-style-type: none"> Family planning counseling using Balanced Coun- seling Strategy (BCS) 		½ h
		N-MIDW(I) /OBGN335:VISE M 7.6	Explain the legal and rights aspects of FP		<ul style="list-style-type: none"> Legal and rights aspects of FP Human rights aspects of FP adolescents 		½ h
		N-MIDW(I) /OBGN335:VISE M 7.7	Explain the Youth friendly services		<ul style="list-style-type: none"> Youth friendly services – SRHR services, polici- es affecting SRHR and attitude of nurses and midwives in provision of services (Review) <p>Importance of follow up and recommended timing</p>		1h
		N-MIDW(I) /OBGN335:VISE M 7.8	Explain the gender related issues in SRH			<p>Gender related issues in SRH</p> <ul style="list-style-type: none"> Gender based violence – Physical, sexual and abuse, Laws affecting GBV and role of nurse/ midwife Special courts for abused people 	1h

							e Gendersensitivehea lthservicesincludin gfamilyplanning	
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TEACHING STRATEGIES:

Total Hours: 340 Theory Hours:60 Lab Hours:40 Clinical Hours: 240

Theory

Continuous Assessment: 10Marks

Sr. No	Assignments	Percentage of Attendance	Allotted marks	Total Marks for attendance
1	Attendance	95-100%	2	2 marks
		90-94%	1.5	
		85-89%	1	
		80-84%	0.5	
		<80%	0	
		Number assignments	Marks	Total Marks
2	Written Assignments (Home assignment)	2	2X5	10
3	Seminar/Microteaching/Individual presentation(Drug Presentation-NORMAL)	2	2x6	12
4	Group work/Work/Visit Report(Visit to Laqshya labour room)	1	1x6	06
Total				30/3=10Marks
5	CompletionofSBAModule	1	1x10	10
			Total	40/4=10

Note: If there is mandatory module in that semester, marks obtained by student out of 10 can be added to 30 totaling 40 marks

Total=40/4=10mark

CompletionofSBAModule
Completionofsafedelivery app

Practical

Continuous assessment: 10marks

Sr. No	Assignments	Percentage of Attendance	Allotted marks	Total Marks for attendance
1	Attendance	95-100%	2	2 marks
		90-94%	1.5	
		85-89%	1	
		80-84%	0.5	
		<80%	0	
		Number assignments	Marks	Total Marks
2	Nursing care plan-ANC,PNC	2x10	20	10marks
3	Clinical presentation-ANC	1x20	20	
4	Health Talk	1x20	20	
5	Continuous evaluation of Clinical performance	01	10marks	10marks
6	End of posting OSCE	01	05marks	05marks
7	Completion of procedures and clinical requirements		03marks	03marks
Total				30/3=10

Distribution of Non didactic hour 240

Practical /clinical / Small group discussion (320)

Competency no.	Competency	Domain	T-L Method	Teaching Hrs.
MIDW(I) BGN335:VISEM 3.1	Explain the pre-pregnancy Care	K	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 3.7	Explain the management of minor discomforts of pregnancy	K	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 4.3	Explain the activity and ambulation during 1 st stage of labour	K	Small group discussion	5Hours
MIDW(I) BGN335:VISEM 4.8	Explain the Physiological managementof third stage of labour	K	Small group discussion	10Hours
MIDW(I) BGN335:VISEM 1.8	Explain the role of the responsibilities of nurse	K	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 2.2	Describe the fetal skull	K	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 2.2	Describe the Female pelvis	K	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 2.3	Explain the physiology of menstrual cycle, menstrualhygiene	K	Small group discussion	5 Hours
MIDW(I) /OBGN335: ISEM3.7	Explain the management of minor discomforts of pregnancy	K	Small group discussion	5 Hours
MIDW(I) /OBGN335: ISEM 4.1	Explain the physiology and management and care during normal labour	K	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 2.6	Describe fetal growth and development and fetal circulation	K	Small group discussion	10 Hours
MIDW(I) BGN335:VISEM 3.2	Describe the preconceptional care and counsreling	K	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 3.3	Describe the physiology, assessment and management of during pregnancy	K,S	Small group discussion	5Hours
MIDW(I) BGN335:VISEM 3.4	Describe the diagnosis of pregnancy	K,S	Small group discussion	5 Hours
MIDW(I) /OBGN335- ISEM 3.6	Explain the ante-natal assessment/ care in 1 st trimesters	K,S	Small group discussion	5 Hours

MIDW(I) BGN335:VISEM 3.9	Explain the ante-natal assessment/care in 2 nd trimesters	K,S	Small group discussion	5 Hours
MIDW(I) /OBGN335- ISEM 3.10	Describe the assessment of fetal well-being	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 3.12	Explain the ante-natal care, assessment in 3 rd trimesters	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 4.1	Explain the physiology and management and care during normal labour	K,S	Small group discussion	10Hours
MIDW(I) /OBGN335- ISEM 4.2	Explain the physiology and management and care during 1 st stage of labour	K,S	Small group discussion	10Hours
MIDW(I) BGN335:VISEM 4.4	Explain the physiology and management and care during 2 nd stage of labour	K,S	Small group discussion	10Hours
MIDW(I) BGN335:VISEM 4.6	Explain the immediate care of newborn	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 4.7	Explain the Physiology–placental separation and expulsion, hemostasis	K,S	Small group discussion	10 Hours
MIDW(I) BGN335:VISEM 4.9	Explain the Examination of placenta,membranesandvessels	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 4.10	Explain the Assess perineal,vaginaltear	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 4.11	Explain the insertion of postpartum IUCD	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 4..13	Explain the maternal assessment in 4 th stage of labour	K,S	Small group discussion	10Hours
MIDW(I) BGN335:VISEM 5.1	Describe the normal puerperium	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 5.2	Explain the Postnatal counseling and psychological support	K,S	Small group discussion	5Hours
MIDW(I) BGN335:VISEM 5.3	Explain the minor disorders of puerperium and its management	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 5.4	Explain the physiology of lactation	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 5.5	Explain the post partum family planning and follow up	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 5.6	Describe the drugs used in the postnatal period	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 6.1	Explain the family centered care and Respectful new born care and communication	K	Small group discussion	10Hours
MIDW(I) BGN335:VISEM 6.2	Explain the normal neonate	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM6.3	Explain the newborn assessment	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 6.5	Describe the infection prevention	K,S	Small group discussion	5Hours
MIDW(I) BGN335:VISEM 7.2	Describe the family planning methods	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 7.4	Explain the emergency contraception	K,S	Small group discussion	5Hours
MIDW(I) BGN335:VISEM 7.5	Explain the family planning counseling.	K,S	Small group discussion	5 Hours
MIDW(I) BGN335:VISEM 6.5	Describe the infection prevention	K,S	Small group discussion	5 Hours
				240 Hours

Lab Hours (26 hrs.)

Sr. No.	Competency no	Topic	Domain	T-L Method	Teaching Hrs
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1.	N-MIDW(I) /OBGN335 4.4	Use of obstetrics and gynecological instruments	K,S	Demonstration, Small group discussion	1Hour
2.	N-MIDW(I) /OBGN335 2.2	Describe the fetal skull and Female pelvis	K,S	Demonstration, Small group discussion	2Hour
3.	N-MIDW(I) /OBGN335 2.2	Describe Female pelvis	K,S	Demonstration, Small group discussion	1Hour
4.	N-MIDW(I) /OBGN335 4.4	Mechanism of labour- Normal labour	K,S	Demonstration, Small group discussion & Role play	1Hour
5.	N-MIDW(I) /OBGN335 3.6	Ante-natal assessment in 1 st trimesters	K,S	Demonstration, Small group discussion	1Hour
6.	N-MIDW(I) /OBGN335-VISEM 3.9	Ante-natal assessment in 2 nd trimesters	K,S	Demonstration, Small group discussion & Role play	1Hour
7.	N-MIDW(I) /OBGN335-VISEM 3.12	Ante-natal assessment in 3 rd trimesters	K,S	Demonstration, Small group discussion & Role play	1Hour
8.	N-MIDW(I) /OBGN335 4.10	Assess the perineal,vaginal tear	K,S	Demonstration, Small group discussion	1Hour
9.	N-MIDW(I) /OBGN335 4.6	Immediate care of newborn	K,S	Demonstration, Small group discussion	1Hour
10.	N-MIDW(I) /OBGN335 4.9	Examination of placenta,membranesandvessels	K,S	Demonstration, Small group discussion & Role play	1Hour
11.	N-MIDW(I) /OBGN335 4.11	Insertion of postpartum IUCD	K,S	Demonstration, Small group discussion	1Hour
12.	N-MIDW(I) /OBGN335 6.3	Newborn assessment Screening forcongenitalanomalies	K,S	Demonstration, Small group discussion	1Hour
13.	N-MIDW(I) /OBGN335 6.2	Normal neonate	K,S	Demonstration, Small group discussion & Role play	1Hour
14.	N-MIDW(I) /OBGN335 6.4	Care of newborn upto 6weeks after the childbirth (Routinecareofnewborn)	K,S	Demonstration, Small group discussion	1Hour
15.	NMIDW(II)/ OBGN410:VIISEM 4.4	Tray set up for labour	K,S	Maladaptive behavior of individual and groups	1Hour
16.	N-MIDW(I) /OBGN335 3.6	Ante-natal assessment in 1 st trimesters	K,S	Demonstration, Small group discussion & Role play	1Hour
17.	N-MIDW(I) /OBGN335:VISEM 6.3	Newborn assessment	K,S	Maladaptive behavior of individual and groups	1Hour
18.	N-MIDW(I) /OBGN335:VISEM 3.3	History collection and physical examination	K,S	Demonstration, Small group discussion & Role play	1 Hour
19.	N-MIDW(I) /OBGN335:VISEM 4.11	Explain the insertion of postpartum IUCD	K,S	Demonstration, Small group discussion	1Hour
20.	N-MIDW(I) /OBGN335:VISEM 4.8	Active management of third stage of labour	K,S	Demonstration, Small group discussion & Role play	1Hour
21.	N-MIDW(I) /OBGN335:VISEM 4.13	Breast Self-Examination	K,S	Maladaptive behavior of individual and groups	1Hour

22.	N-MIDW(I) /OBGN335:VISEM 3.3	Assessment during pregnancy	K,S	Demonstration, Small group discussion & Role play	1Hour
23.	N-MIDW(I) /OBGN335:VISEM 4.4	Management and care during 2 nd stage of labour	K,S	Demonstration, Small group discussion	1Hour
24.	N-MIDW(I) /OBGN335:VISEM 4..13	Maternal assessment in 4 th stage of labour	K,S	Demonstration, Small group discussion & Role play	1Hour
25.	N-MIDW(I) /OBGN335:VISEM 5.6	Describe the drugs used in the postnatal period	K,S	Demonstration, Small group discussion & Role play	1Hour
TOTAL					26 Hours

Modified Tutorials (8 hours)

Sr. No	Comp. no	Topic	Domain	T-L Method	Teaching Hrs
1.	N-MIDW(I) /OBGN335:VISEM 2.3	physiology of menstrual cycle, menstrualhygiene	K,S	Tutorials	1 Hour
2.	N-MIDW(I) /OBGN335:VISEM 3.7	Minor discomforts of pregnancy	K,S	Tutorials	1 Hour
3.	N-MIDW(I) /OBGN335:VISEM 5.1	Normal puerperium	K,S	Tutorials	1 Hour
4.	N-MIDW(I) /OBGN335:VISEM 5.3	Minor disorders of puerperium and its management	K,S	Tutorials	1 Hour
5.	N-MIDW(I) /OBGN335:VISEM 6.3	Newborn assessment	K,S	Tutorials	1 Hour
6.	N-MIDW(I) /OBGN335:VISEM 4.7	Physiology–placental separation and expulsion	K,S	Tutorials	1 Hour
7.	N-MIDW(I) /OBGN335:VISEM 6.7	Minor disorders of new born	K,S	Tutorials	1 Hour
8.	N-MIDW(I) /OBGN335:VISEM 7.4	E emergency contraception	K,S	Tutorials	1 Hour
TOTAL					10 Hours

Integration/MPBL- 06 hrs

Sr. No	Competency No.	Topic	Domai n	T-L Method	Teaching Hrs
1.	N-MIDW(I) /OBGN335:VISEM 4.1	Normal labour	K,S	Lecture cum discussio n	6 Hour

PRACTICUM

PLACEMENT: VI & VII SEMESTER

VI SEMESTER: MIDWIFERY/OBSTETRICS AND GYNECOLOGY (OBG) NURSING - I

SKILL LAB & CLINICAL: Skill Lab – 1 Credit (40 hours); Clinical – 3 Credits (240 hours)

PRACTICE COMPETENCIES: On completion of the course, the students will be able to:

1. Counsel women and their families on pre-conception care
2. Demonstrate lab tests ex. urine pregnancy test
3. Perform antenatal assessment of pregnant women
4. Assess and care for normal antenatal mothers
5. Assist and perform specific investigations for antenatal mothers
6. Counsel mothers and their families on antenatal care and preparation for parenthood
7. Conduct childbirth education classes
8. Organize labour room
9. Prepare and provide respectful maternity care for mothers in labour
10. Perform per-vaginal examination for a woman in labour if indicated
11. Conduct normal childbirth with essential newborn care
12. Demonstrate skills in resuscitating the newborn
13. Assist women in the transition to motherhood
14. Perform postnatal and newborn assessment
15. Provide care for postnatal mothers and their newborn
16. Counsel mothers on postnatal and newborn care
17. Perform PPIUCD insertion and removal
18. Counsel women on family planning and participate in family welfare services
19. Provide youth friendly health services
20. Identify, assess, care and refer women affected with gender based violence

SKILL LAB: Procedures/Skills for demonstration and return demonstration:

1. Urine pregnancy test
2. Calculation of EDD, Obstetrical score, gestational weeks
3. Antenatal assessment
4. Counseling antenatal mothers
5. Micro birth planning
6. PV examination
7. Monitoring during first stage of labour – Plotting and interpretation of partograph

8. Preparation for delivery – setting up labour room, articles, equipment
9. Mechanism of labour – normal
10. Conduction of normal childbirth with essential newborn care
11. Active management of third stage of labour
12. Placental examination
13. Newborn resuscitation
14. Monitoring during fourth stage of labour
15. Postnatal assessment
16. Newborn assessment
17. Kangaroo mother care
18. Family planning counseling
19. PPIUCD insertion and removal

CLINICAL POSTINGS (6 weeks × 40 hours per week = 240 hours)

Clinical Area	Duration (weeks)	Clinical Learning Outcomes	Procedural Competencies/ Clinical Skills	Clinical Requirements	Assessment Methods
Antenatal OPD and Antenatal ward	1 week	<p>Perform antenatal assessment</p> <p>Perform laboratory tests for antenatal women and assist in selected antenatal diagnostic procedures</p> <p>Counsel antenatal women</p>	<ul style="list-style-type: none"> • History collection • Physical examination • Obstetric examination • Pregnancy confirmation test • Urine testing • Blood testing for Hemoglobin, grouping & typing • Blood test for malaria • KICK chart • USG/NST • Antenatal counseling • Preparation for childbirth • Birth preparedness and complication readiness 	<ul style="list-style-type: none"> • Antenatal palpation • Health talk • Case study 	<ul style="list-style-type: none"> • OSCE • Case presentation
Labour room	3 weeks	<p>Monitor labour using partograph</p> <p>Provide care to women during labour</p> <p>Conduct normal childbirth, provide care to mother and immediate care of newborn</p>	<ul style="list-style-type: none"> • Assessment of woman in labour • Partograph • Per vaginal examination when indicated • Care during first stage of labour • Pain management techniques • Upright and alternative positions in labour • Preparation for labour – articles, physical, psychological • Conduction of normal childbirth 	<ul style="list-style-type: none"> • Partograph recording • PV examination • Assisting/ Conduction of normal childbirth • Case study • Case presentation • Episiotomy and suturing if indicated 	<ul style="list-style-type: none"> • Assignment • case study • Case presentation • OSCE

			<ul style="list-style-type: none"> • Essential newborn care • Newborn resuscitation • Active management of third stage of labour • Monitoring and care during fourth stage of labour 	<ul style="list-style-type: none"> • Newborn resuscitation 	
Post-partum clinic and Postnatal Ward including FP unit	2 weeks	<p>Perform postnatal assessment</p> <p>Provide care to normal postnatal mothers and newborn</p>	<ul style="list-style-type: none"> • Postnatal assessment • Care of postnatal mothers – normal • Care of normal newborn • Lactation management 	<ul style="list-style-type: none"> • Postnatal assessment • Newborn assessment • Case study 	<ul style="list-style-type: none"> • Assignment • Case study • Case presentation

Clinical Area	Duration (weeks)	Clinical Learning Outcomes	Procedural Competencies/ Clinical Skills	Clinical Requirements	Assessment Methods
		Provide postnatal counseling Provide family welfare services	<ul style="list-style-type: none"> • Postnatal counseling • Health teaching on postnatal and newborn care • Family welfare counseling 	<ul style="list-style-type: none"> • Case presentation • PPIUCD insertion & removal 	

Note: Partial Completion of SBA module during VI semester

Formative Assessment

1. Sessional Examinations: Theory: I

Sr. No.	Question paper – Theory	Total
Maximum marks	30	30

2. Sessional Examinations: Theory: II

Sr. No.	Question paper – Theory	Total
Maximum marks	30	30

c. Calculation of Internal Assessment (IA): Theory

- Total marks of two sessional examinations along with continuous assessment
 $30\text{marks} \times 2 = 60/4 = 15$
- $10 + 15 = 25$ Marks
- Minimum required - 50 %

Sr. No.	Attendance					Home Assignment		Drug presentation report		Total	IA	Sessional exam-1	Sessional exam-2	Total Sessional Exam		Total	IA
	95-100 %	90-94	85-89	80-84	Below 80	1	2	1	2								
	2 M	1.5 M	1 M	0.5 M	0 M	1	2	1	2			1	2	$(30+30=60/4=15)$			
	2M					5 M	5 M	6 M	6 M	24 M	12.5 M	30 M	30 M	60 M	15 M	12.5 M	25 M
1.																	
2.																	

2. Formative Assessment: Practical

a. Practical: Sessional examinations: I

Exam pattern	Sessional examination I	Total
OSCE	10 marks	30Marks
DOP (Directly observed practical in the clinical setting)	20marks	

b. Practical: Sessional examinations: II

Exam pattern	Sessional examination II	Total
OSCE	10 marks	30 Marks
DOP (Directly observed practical in the clinical setting)	20marks	

