# Subject No.2

## **CLINICAL SPECIALITY II**

# **OBSTETRIC AND GYNAECOLOGICAL NURSING**

Total: 1100 Hours Theory: 150 Hours Practical: 960 Hours

## AIM:

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

### **OBJECTIVES:**

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

- 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.

## **CONTENTS:**

# Unit I -Management of problems of women during pregnancy:

- Risk approach of obstetrical nursing care, concept & goals.
- Screening of high-risk pregnancy, newer modalities of diagnosis.
- Nursing Management of Pregnancies at risk-due to obstetrical complication. Psychosocial and Environmental Pregnancy Risks
- o Pernicious Vomiting. Bleeding in early pregnancy, abortion, ectopic pregnancy, and gestational trophoblostic diseases. Hemorrhage during late pregnancy, ante partum hemorrhage, Placenta praevia, abruptio placenta. Hypertensive disorders in pregnancy, preeclampsia, eclampsia, Heomolysis Elevated liver enzyme Low Platelet count (HELLP) .lso-

immune diseases. Rh and ABO incompatibility. Hematological problems in pregnancy. Hydramnios-oligohydramnios. Prolonged pregnancy- post term, post maturity. Multiple pregnancies. Intra uterine infection & pain during pregnancy. Intra Uterine Growth Retardation (IUGR), Premature Rupture of membrane (PROM), intra uterine death.

• Alternative and complimentary therapies. (1 hr.)

# Unit II -Pregnancies at risk-due to pre-existing health problems:

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

## Unit III -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. 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. Disseminated intravascular coagulation Obstetrical operation: Forceps delivery, Ventouse, Caesarian section, Destructive operations. Genital tract injuries-Third degree perineal tear, WF, RVF.
- Complications of third stage of labour: Post partum Hemorrhage. Retained placenta.

## **Unit IV -Post partum complications:**

 Nursing management of -Puerperal infections, puerperal sepsis, urinary complications, puerperal venous thrombosis and pulmonary embolism. Sub involution of uterus, Breast conditions, Thrombophlebitis. Psychological complications, post partum blues, depression, psychosis.

## **Unit V - High Risk Newborn:**

- Concept, goals, assessment, principles.
- Nursing management of -Pre-term, small for gestational age, post-mature infant, and baby of diabetic and substance use mothers. Respiratory conditions, Asphyxia neonatorum, neonatal apnoea meconium aspiration syndrome, pneumo thorax, pneumo mediastinum. Icterus neonatorum. Birth injuries. Hypoxic ischaemic encephelopathy Congenital anomalies. Neonatal seizures, Neonatal hypocalcaemia, hypoglycemia, hypomagnesaemia Neonatal heart diseases, Neonatal hemolytic diseases. Neonatal infections, neonatal sepsis, opthalmia neonatorum, cogenital syphilis, HIV / AIDS. Advanced neonatal procedures. Calculation of fluid requirements.
- Hematological conditions erythroblastosis fetalis, hemorrhagic disorder in the newborn.
- Organization ·of neonatal care, services (Levels), transport, neonatal intensive care unit, organization and management of nursing services in NICU.

## Unit VI -HIV / AIDS:

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

## Unit VII -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, Ca. cervix Breast carcinoma, Pelvic inflammatory diseases, reproductive tract malignancies, hysterectomy- vaginal and abdominal. Urethral Diverticulum, palliative care of patient with advanced gynecologic cancer, RVF,VVF.

## Unit VIII -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.

## Unit IX -Education and training in obstetrical and gynecological care:

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

## **❖ PRACTICALS:**

- Clinical practice in Obstetric and Gynecological setting i.e. Antenatal Out Patient
  Department, Labour room, Post natal / MCH Clinic, NICU, Obstetrical and gynecological
  Operation Theatre, Gynecological wars, post partum/ MTP Clinic, Infertility centers,
  Community Health Centre/ Primary Health Centre.
- Procedures to be Observed: ART procedures, Ultrasonography, Specific laboratory tests, Amniocentesis, Cervical and vaginal cytology, Fetoscopy, Hysteroscopy, MRI, Surgical diathermy, Cryosurgery.

## • Procedures to be assisted:

Operative delivery, abnormal deliveries – Forceps application, Ventouse, Breech, Exchange Blood transfusion, Culdoscopy, Cytoscopy, Tuboscopy, Laparoscopy, Endometrial biopsy, Tubal patent test, Chemotherapy, Radiation therapy, Medical Termination of Pregnancy, Dilatation and Curettage.

## • Procedures to be performed:

Relevant history talking — Obstetric and Gynaec, Complete General physical examination, Antenatal Assessment -20, Assessment of risk status, Health Education, Counseling and mother craft classes, Antenatal Immunization, Assessment of intra uterine foetal well being, Universal precautions — effective infection control methods, Assessment of women in abnormal pregnancy, vaginal examination and inspection (early pregnancy, labour, post partum), Utilization of Partograph, Cervicograph, medical and surgical induction, Conduction of safe delivery, Application of outlet forceps, delivery of breach — Burns Marshall, Loveset manoeuvere, Episiotomy suturing, manual removal of placenta, placenta examination, Post natal assessment — 20, Management of breast engorgement, white leg, Post natal counseling, Reposition of inversion of uterus. Breast care, breast examination, and incision and drainage of breast abscess, Post natal exercises, New born assessment — ruling our congenital anomalies, Assessment of high risk new born, Neonatal resuscitation, Apgar score, Monitoring neonates — Clinically, with monitor, capillary refill time, Assessment of jaundice, Gastric lavage, Gastric gavage, Care of child in multi channel monitor and

ventilator, care of child in radiant, warmer and incubator, kangaroo care, Anthropometric measurement, Neonatal refluxes, Breast feeding, Parental nutrition and fluid balance, infusion pump, feeding techniques, Medication – oral, I.M., I.V. I.D., Capillary blood sample collection, oxygen therapy, phototherapy, Chest physiotherapy, Parental counseling – bereaved parents., Setting of operation theatre, Trolly and table set up for Obstetrical and gynecological operations, Pap smear preparation, Taking vaginal test for ovulation, Counseling infertile couple.

## **CLINICAL SPECIALITY -II**

## **OBSTETRIC AND GYNAECOLOGICAL NURSING**

Unit	Objectives	Contents
No.		
<b>&amp;</b>		
Hours		
	At the end of unit students are able to:	Management of problems of women during pregnancy:
27Hrs)		<ul> <li>Risk approach of obstetrical nursing care, concept &amp; goals.</li> </ul>
	<b>Knowledge:</b> Understand and explain high risk pregnancy.	<ul> <li>Screening of high-risk pregnancy. (3 hrs)</li> </ul>
		Nursing Management of Pregnancies at risk-due to obstetrical
		complication:
	<b>Skill:</b> Identify high risk pregnancy and render culturally	<ul> <li>Bleeding in early pregnancy, abortion, ectopic pregnancy, and</li> </ul>
	congruent comprehensive care to the expectant mothers	gestational trophoblostic diseases. Hemorrhage during late
	with high risk pregnancy.	pregnancy, ante partum hemorrhage, Placenta praevia, abruptio placenta.(5hrs)
		Hypertensive disorders in pregnancy, pre-eclampsia, eclampsia,
	Attitude: Appreciate factors responsible for high risk	Heomolysis Elevated liver enzyme Low Platelet count (HELLP) (5hrs)
	pregnancy in clients.	o Iso-immune diseases. Rh and ABO incompatibility. Hematological
		problems in pregnancy. Hydramnios-oligohydramnios. (2hrs)
		<ul> <li>Newer modalities of diagnosis (1hr.)</li> </ul>
		<ul> <li>Multiple pregnancies. (2hrs)</li> </ul>
		<ul> <li>Intra uterine infection &amp; pain during pregnancy.</li> </ul>
		<ul> <li>Intra Uterine Growth Retardation (IUGR), Premature Rupture of</li> </ul>
		Membrane (PROM), intra uterine death. (3 hrs)
		Pregnancies at risk due to obstetrical complications-Pernicious
		Vomiting. (1 hr.)
		<ul> <li>Prolonged pregnancy- post term, post maturity(2hrs)</li> </ul>
		Psychosocial and Environmental Pregnancy Risks (2hrs)
		Alternative and complimentary therapies. (1 hr.)

- CO: 1- Discuss the Screening of high-risk pregnancy and role of nurse in midwifery and obstetrical care.
- CO: 2- Define the antepartum hemorrhage in early and late pregnancy and write the applicable care during abortion .
- CO: 3- Describe the HELLP syndrome in pregnancy and write the nursing care
- CO: 4- Identify the mother with Rh and ABO incompatibility.

- CO: 5- Describe the Newer modalities of diagnosis in high risk pregnancy.
- CO: 6- Define the twin pregnancy, Explain the nursing management in such cases.
- CO: 7- Identify the Alternative and complimentary therapies.
- CO:8-Define the Intra Uterine Growth Retardation (IUGR) and identify the symentrical and asymentrical IUGR

Course outcome	Programme outcome							
	Clinical/nur se educator	Profes sional	Commu nicators	Leader and member of the health team and system	Lifelong learner	Critical thinker	Researche r	
						P06		
CO: 1- Discuss the Screening of high-risk pregnancy and role of nurse in midwifery and obstetrical care.	3	3	2	3	3	3	3	
CO: 2- Define the antepartum hemorrhage in early and late pregnancy and write the applicable care during abortion .	3	3	3	2	3	3	2	
CO: 3- Describe the HELLP syndrome in pregnancy and write the nursing care	3	3	3	2	3	3	3	
CO: 4- Identify the mother with Rh and ABO incompatibility.	3	3	3	3	2	3	3	
CO: 5- Describe the Newer modalities of diagnosis in high risk pregnancy.	3	3	3	3	3	3	3	
CO: 6- Define the twin pregnancy ,Explain the nursing management in such cases.	3	3	3	3	2	3	3	
CO: 7- Identify the Alternative and complimentary therapies.	3	3	3	3	3	3	3	
CO:8-Define the Intra Uterine Growth Retardation (IUGR) and identify the symentrical and asymentrical IUGR	3	3	3	3	2	3	3	

# Unit II:Pregnancies at risk-due to pre-existing health problems:

- CO: 1- Define the anemia during pregnancy its types and effect of aneamia on fetus and pregnancy and write the apply nursing care.
- CO: 2- differentiate the gestational and essential hypertension in pregancy.
- CO: 3- Discuss about the Infections Toxoplasmosis Rubella Cytomegalo virus Herpes (TORCH)
- CO: 4- Identify the Pregnancies complicating with associate conditions.
- CO: 5- Describe about the Swine flu with pregnancy and role of nurse.
- CO: 6- Describe the HIV /AIDS in pregnancy and write the nursing care during pregnancy and delivery.
- CO: 7- Describe about the metabolic risk conditions in pregnancy.
- CO: 8- Explain about the ovarian cyst with pregnancy.
- CO: 9- Define the thyroid in pregnancy, Explain the nursing management in such cases.

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	Clinical/nur se educator	Professio nal	Comm unicat ors	Leader and member of the health team and system	Lifelong learner	Critical thinker	Researche r
	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO: 1- Define the anemia during pregnancy its types and effect of aneamia on fetus and pregnancy and write the apply nursing care.	3	3	2	3	3	3	3
CO: 2- differentiate the gestational and essential hypertension in pregancy.	3	3	3	2	3	3	2
CO: 3- Discuss about the Infections Toxoplasmosis Rubella Cytomegalo virus Herpes (TORCH)	3	3	3	2	3	3	3
CO: 4- Identify the Pregnancies complicating with associate conditions.	3	3	3	2	3	3	3
CO: 5- Describe about the Swine flu with pregnancy and role of nurse.	3	3	3	3	2	3	3
CO: 6- Describe the HIV /AIDS in pregnancy and write the nursing care during pregnancy and delivery.	3	3	3	3	3	3	3
CO: 7- Describe about the metabolic risk conditions in pregnancy.	3	3	3	3	2	3	3
CO: 8- Explain about the ovarian cyst with pregnancy.	3	3	3	2	3	3	3
CO: 9- Define the thyroid in pregnancy ,Explain the nursing management in such cases.	3	3	3	2	3	3	3

# Ш At the end of unit students are able to: Abnormal labour, pre-term labour & obstetrical emergencies etiology, (17Hrs) Knowledge: Understand and describe abnormal uterine action and obstetrical emergencies. **Skill:** Performs skillfully antenatal and postnatal presentation. (5hours) assessment and renders care efficiently to high risk clients. Attitude: Identify various factors responsible for high risk pregnancy and learns to manage them.

# pathopyhsiology and nursing management of: • Uncoordinated uterine actions, Atony of uterus, precipitate labour, prolonged labour. Abnormal lie, presentation, position compound

- 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, (7 hours)
- o Obstetrical operation: Forceps delivery, Ventouse, Caesarian section, Destructive operations. (2 Hrs)
- o Genital tract injuries-Third degree perineal tear, WF, RVFVII (2 hrs)
- Disseminated intravascular coagulation. (1 hours)

# Unit-III:Abnormal labour, pre-term labour & obstetrical emergencies

- CO: 1- Define the Uncoordinated uterine actions with their types and write the management in details of any one.
- CO: 2- Define the atony of uterus ,its r causes and medical management.
- CO: 3- Define the CPD, identify the methods to find CPD
- CO: 4- Define the dystocia, write the nursing management in dystocia in labor.
- CO: 5- Describe about the obstetric shock and role of nurse.
- CO: 6- Define the inversion of uterus and its management and write the nursing care during delivery and after delivery.
- CO: 7- Describe about the induction of labor.
- CO: 8- Explain about the PPH.
- CO: 9- Define the perineal tear, degree of perineal tear, Explain the nursing management in such cases.

Course outcome	Programi	me outcor	ne				
	Clinical/	Profess	Communi	Leader and	Lifelong	Critical	Researc
	nurse	ional	cators	member of the	learner	thinker	her
	educato			health team			
	r			and system			
	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO: 1- Define the Uncoordinated uterine actions with their	3	3	2	3	3	3	3
types and write the management in details of any one.							
CO: 2- Define the atony of uterus ,its r causes and medical	3	3	3	2	3	3	2
management.							
CO: 3- Define the CPD , identify the methods to find CPD	3	3	3	2	3	3	3

nursing m	anagement in such cases.  At the end of unit students are able to:	Doot no.		 nplications				
	fine the perineal tear, degree of perineal tear, Explain the	3	3	3	2	3	3	3
CO: 8- Exp	lain about the PPH.	3	3	3	2	3	3	3
CO: 7- Des	scribe about the induction of labor.	3	3	3	3	2	3	3
	ine the inversion of uterus and its management and enursing care during delivery and after delivery.	3	3	3	3	3	3	3
CO: 5- Des	scribe about the obstetric shock and role of nurse.	3	3	3	3	2	3	3
dystocia ir	ı labor.							
CO: 4- De	fine the dystocia, write the nursing management in	3	3	3	2	3	3	3

(11Hrs)

Knowledge: Understand and explain post partum complications.

Skill: Demonstrate competence in identifying and rendering prompt care to the clients with post partum complications.

**Attitude:** Takes initiative to prevent post partum complications.

Nursing management of-

- Puerperal infections, puerperal sepsis, Sub involution of uterus, Breast conditions, Thrombophlebitis. .(6hrs)
- Urinary complications, puerperal venous thrombosis and pulmonary embolism.(3hours)
- Psychological complications, post partum blues, depression, psychosis(2hours)

# **Unit IV:Post partum complications:**

- CO: 1- Define the post partum complication and describe in details of any one complication.
- CO: 2- Define the sub involution of uterus its causes and management.
- CO: 3- Describe the post partum blue.
- CO: 4- Describe UTI and write the management and nursing care of UTI in post partum period.

Course outcome	Programm	e outcome					
				Leader	Lifelong	Critical	Researcher
	Clinical/n	Professio	Communi	and	learner	thinker	
	urse	nal	cators	member			
	educator			of the			
				health			
				team			
				and			
				system			
	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO: 1- Define the post partum complication and describe in	3	3	2	3	3	3	3
details of any one complication.							

CO: 2 D:	Constitution of the constitution of			12	1	12		12			
manageme	fine the sub involution of uterus its causes and	3	3	3	2	3	3	2			
	scribe the post partum blue.	3	3	3	2	3	3	3			
	scribe UTI and write the management and nursing care of	3	3	3	2	3	3	3			
UTI in post	partum period.										
V	At the end of unit students are able to:	High Ris	k Newbo	rn:							
(25Hrs)		• Conc	ept, goals	s, assessme	ent, princip	oles. (1 hr)					
	Knowledge: Understand and explain various conditions	• Nursi	ing mana	gement of	- Pre-term	, small for	gestational	age, post-			
	that jeopardize the life of new born.	mature infant, and baby of diabetic and substance use mothers.									
		Respiratory conditions, Asphyxia neonatorum, neonatal apnoea									
	<b>Skill:</b> Identify life threatening conditions in new born	meconium aspiration syndrome, pneumo thorax, pneumo mediastinum									
	and renders life saving care.	(7 hrs) Icterus neonatorum.									
		Birth injuries, Hypoxic ischaemic encephalopathy. Advanced neonatal									
	Attitude: Develops skills in identifying congenital	procedures. (5 hours)  • Calculation of fluid requirements.									
	abnormalities in new born.										
	Takes initiative to organize progressive patient care in	(2 hr)									
	NICU.	<ul> <li>Congenital anomalies. Neonatal seizures. Neonatal hypocalcaemia,</li> </ul>									
		hypoglycemia, hypomagnesaemia. Neonatal heart diseases.									
					_			onatal sepsis,			
		О	pthalmia	neonatoru	ım, congen	ital syphili	s, HIV / AID	S (6 hrs)]			
			•				-	rt, neonatal			
		_					· ·	rsing services			
			CU. (2 hr			0		9			
			•	•	tions - ervt	hroblastos	is fetalis, he	emorrhagic			

# **Unit V: High Risk Newborn:**

- CO: 1- Explain the condition of Asphyxia neonatorum
- CO: 2- Desribe the Respiratory conditions in high risk newborn
- CO: 3- identify the birth injury while giving care to baby
- CO: 4- Describe any one advanced neonatal procedure.
- CO: 5- Explain the neonatal heart disease.
- CO: 6-Identify the congenital anamolies during assessing the newborn baby
- CO: 7- describe the Organization of neonatal care.
- CO: 8- Discuss any one hemorrhagic disorder in the newborn.

Course outcome	Programme outcome	

disorder in the newborn. (2 hr)

		Clinical/n urse educator	Professio nal	Commun icators	Leader and member of the health team and system	Lifelong learner	Critical thinker	Researcher
		PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO: 1- Exp	lain the condition of Asphyxia neonatorum	3	3	2	3	3	3	3
CO: 2- De newborn	sribe the Respiratory conditions in high risk	3	3	3	2	3	3	2
CO: 3- ide	entify the birth injury while giving care to baby	3	3	3	2	3	3	3
CO: 4- De	scribe any one advanced neonatal procedure.	3	3	3	2	3	3	3
CO: 5- Exp	lain the neonatal heart disease.	3	3	2	3	3	3	3
	CO: 6-Identify the congenital anamolies during assessing the newborn baby		3	3	2	3	3	2
CO: 7- des	cribe the Organization of neonatal care.	3	3	3	2	3	3	3
CO: 8- Disc	cuss any one hemorrhagic disorder in the newborn.	3	3	3	2	3	3	3
VI (15Hrs)	At the end of unit students are able to:  Knowledge: Explain course of HIV infection and the treatment modalities.  Skill: Provide comprehensive care to the client with HIV positive, protect self and prevent spread of disease.  Attitude: Maintain confidentiality, educate people and motivate client to continue prescribed treatment.							

# Unit VI:HIV / AIDS:

- CO: 1- Discuss the parents to child transmission of HIV/AIDS, write the applicable role of nurse in care of HIV positive patients.
- CO: 2- Desribe the Standard safety measures during care of positive HIV mother and baby
- CO: 3- identify the issues Legal, ethical, Psychosocial and rehabilitation, write about the breast feeding issues.
- CO: 4- Describe the Recent Advanced care of women with HIV.
- $\operatorname{CO:}$  5- Explain the National policies for the  $\operatorname{HIV/AIDS}\,$  .

Course outcome	Programme outcome
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	Clinical/ nurse educato r	Professional	Commun icators	Leader and member of the health team and system	Lifelo ng learn er	Critical thinker	Research er
	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO: 1- Discuss the parents to child transmission of HIV/AIDS, write the applicable role of nurse in care of HIV positive patients.	3	3	2	3	3	3	3
CO: 2- Desribe the Standard safety measures during care of positive HIV mother and baby	3	3	3	2	3	3	2
CO: 3- identify the issues Legal, ethical, Psychosocial and rehabilitation, write about the breast feeding issues.	3	3	3	2	3	3	3
CO: 4- Describe the Recent Advanced care of women with HIV.	3	3	3	2	3	3	3
CO: 5- Explain the National policies for the HIV/AIDS .	3	3	3	2	3	3	3

VII (25Hrs) 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 problems and nursing management:**

- Gynecological assessment. Gynecological procedures. (4 hrs)
- Etiology, pathophysiology, diagnosis and nursing management of: Menstrual irregularities. Diseases of genital tract. Genital tract infections. Uterine displacement. Genital prolapsed. Genital injuries. Uterine malformation. (10 hrs)
- Uterine fibroid, ovarian tumors, Breast carcinoma, Ca cervix (3 hours)
   Pelvic inflammatory diseases, reproductive tract malignancies,
   hysterectomy- vaginal and abdominal (4 hrs)
- Urethral Diverticulum, palliative care of patient with advanced gynecologic cancer, RVF,VVF (2 hours)
- Laparoscopic Hysterectomy and Urinary Incontinence .(2hours)

# Unit VII: Gynecological problems and nursing management:

- CO: 1- Explain about the Menstrual irregularities.
- CO: 2- Desribe the Genital prolapsed and write the applicable role in post operative patients.
- CO: 3- classify the uterine fibroid
- CO: 4- Describe the breast cancer and write the role of nurse in mastectomy.
- CO: 5- Identify the need of hysterectomy.
- CO: 6- Explain the role of nurse in patient with advanced gynecologic cancer.

Course outcome	Programme outcome
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	Clinical/ nurse educator	Professi onal	Communi cators	Leader and member of the health team and system	Lifelong learner	Critical thinker	Research er
	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO: 1- Explain about the Menstrual irregularities.	3	3	2	3	3	3	3
CO: 2- Desribe the Genital prolapsed and write the applicable role in post operative patients.	3	3	3	2	3	3	2
CO: 3- Classify the uterine fibroid	3	3	3	2	3	3	3
CO: 4- Describe the breast cancer and write the role of nurse in mastectomy.	3	3	3	2	3	3	3
CO: 5- Identify the need of hysterectomy.	3	3	3	2	3	3	3
CO: 6- Explain the role of nurse in patient with advanced gynecologic cancer .	3	3	3	2	3	3	3
	1	•	•	•	•	•	•

# VIII (6Hrs)

At the end of unit students are able to:

**Knowledge:** Describe the organization of obstetrical and gynecological units. Explain the needs for various protocols, policies and regulations required to manage these units.

**Skill:** Drafts policies and practices established regulations while managing obstetrical and gynecological units.

**Attitude:** Enforces standards of care in obstetrical and gynecological units to render quality care.

# Administration and management of obstetrical and gynecological unit:

- Equipment, supplies.
- Infection control; Standard safety measures.
- Quality Assurance:-Obstetric auditing records / reports, Norms, policies and protocols. Practice standards for obstetrical gynecological unit. (4 hrs)
- Design & layout
- Staffing. (1 hr)
- Practice standard for obstetrical gynecological unit. (1 hr)

# Unit VIII: Administration and management of obstetrical and gynecological unit:

- CO: 1- Describe the Standard safety measures and write the role of nurse n infection control.
- CO: 2- Explain the role of nurse in Quality Assurance.
- CO: 3- Discuss the nursing audit in the care of obstetrical gynecological ward.
- CO: 4- Discuss the practice standard for obstetrical gynecological ward.

Course outcome	Programme outcome						
	Clinical/n	Professio	Communi	Leader and	Lifelon	Critical	Researcher
	urse	nal	cators	member of	g	thinker	
	educator			the health	learner		
				team and			
				system			

		PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO: 1- Describe the Standard safety measures and write the role of nurse n infection control.		3	3	2	3	3	3	3
CO: 2- Exp	plain the role of nurse in Quality Assurance.	3	3	3	2	3	3	2
CO: 3- Discuss the nursing audit in the care of obstetrical gynecological ward.		3	3	3	2	3	3	3
CO: 4- Discuss the practice standard for obstetrical gynecological ward.		3	3	3	2	3	3	3
IX	At the end of unit students are able to:	Education and training in obstetrical and gynecological care:						
(6Hrs)	Knowledge: Understands the needs for staff	Staff orientation, training and development.(2 hrs)						

development in obstetrical and gynecological care.

**Skill:** Organizes staff training programmes in Obstetrical and gynecological care.

Attitude: Formulates a policy for staff development in the unit.

- In-service education program. (3 hrs)
- Clinical teaching programs. (1 hr)

Unit IX: Education and training in obstetrical and gynecological care:

CO: 1- Describe the continue in-service education programme.

CO: 2- Identify the role of nurse in Clinical teaching programs.

Course outcome	Programme outcome						
	Clinical/	Profes	Communica	Leader	Lifelong	Critical	Researcher
	nurse	sional	tors	and	learner	thinker	
	educator			membe			
				r of the			
				health			
				team			
				and			
				system			
	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO: 1- Describe the continue in-service education	3	3	2	3	3	3	3
programme.							
CO: 2- Identify the role of nurse in Clinical teaching programs.	3	3	3	2	3	3	2

## AREA AND DISTRIBUTION OF CLINICAL HOURS:

Sr. No.	Dept / Unit	No. of weeks	Total hours
1	Antenatal OPD including Infertility clinic/ Reproductive medicine, Family welfare and post partum clinic and PTCT.	6	180
2	Antenatal and post natal ward	6	180
3	Labour Room	4	120
4	Neonatal Intensive Care Unit	3	90
5	Obstetric and Gynaec Operation Theatre	3	90
6	Gynaec Ward	4	120
7	CHC, PHC, SC	6	180
	Total	32 weeks	960 hours

## **TEACHING STRATEGY:**

Total Hours: 1110 Theory Hours: 150 Clinical Hours: 960

## **TEACHING METHOD:**

Lectures, Seminars, Case presentation & discussion, Clinical observation & Symbiotic activity, SISA (Symbiotic interdepartmental scientific activity), IDCD (Interdepartmental case discussion) and Syndicate Journal Club.

- A.V. AIDS:
- OHP, LCD, Posters, Blackboard, Demonstration

## **ASSIGNMENTS:**

## Theory:

Sr. No.	Assignment	No./Quantity	Total Marks	
1	Seminar	Four	1X50	200
			Total Marks	200

## **Practical:**

Sr. No.	Assignment	No./	Marks per	Total
		Quantity	Assignment	Marks
1	Teaching learning module Preparation (Group work)	One	1X25	25
2	Case study	Two	1X25	50
3	Case presentation	One	1X50	50
4	Nursing Care Plans	Two	1X25	50
5	Clinical Performance Evaluation	One	1X100	100
6	Specific Day Celebration (Group work)	One	1X25	25
7	Visit Report (Minimum two visits)	One	1X25	25
	(Shall be evaluated as one assignment)			
8	Organizing Mass Health Education Programme	One	1X25	25
	(Group Work)			
9	Procedure Evaluation	One	1X25	25
		•	Total Marks	375

**Please Note:** Institutions /Areas of Visit shall be decided by the concern department/competent authority depending on the permission and convenience.

### 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"
- Adel Farouk," <u>History Taking Clinical Examination Case Presentation in Obstetrics Gynecology</u>"
- Philip N. Baker, "Obstetrics by Ten Teachers"
- E. Malcolm Symonds "Essential Obstetrics and Gynaecology"
- Arthur T. Evans, "Manual of Obstetrics"
- John David Gordon, "Obstetrics, Gynecology and Infertility: Pocket Edition: Handbook for Clinicians"
- Pranav Pandya, "Fetal Medicine"
- Carolyn Muller, "GYNECOLOGIC CANCER CARE: INNOVATIVE PROGRESS
- 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>
- American Journal of Nursing
- Health and population
- Indian Journal of Nursing and Midwifery
- Journal of Obstetrics and Gynaecology
- Journal of Paediatrics
- Journal of Family Welfare
- Nursing Journal of India
- Nursing Times
- Paediatrics today
- Paediatric clinics of India
- Obstetrics