



CURRICULUM FOR **Master of Science in Nursing (MSN) Program**

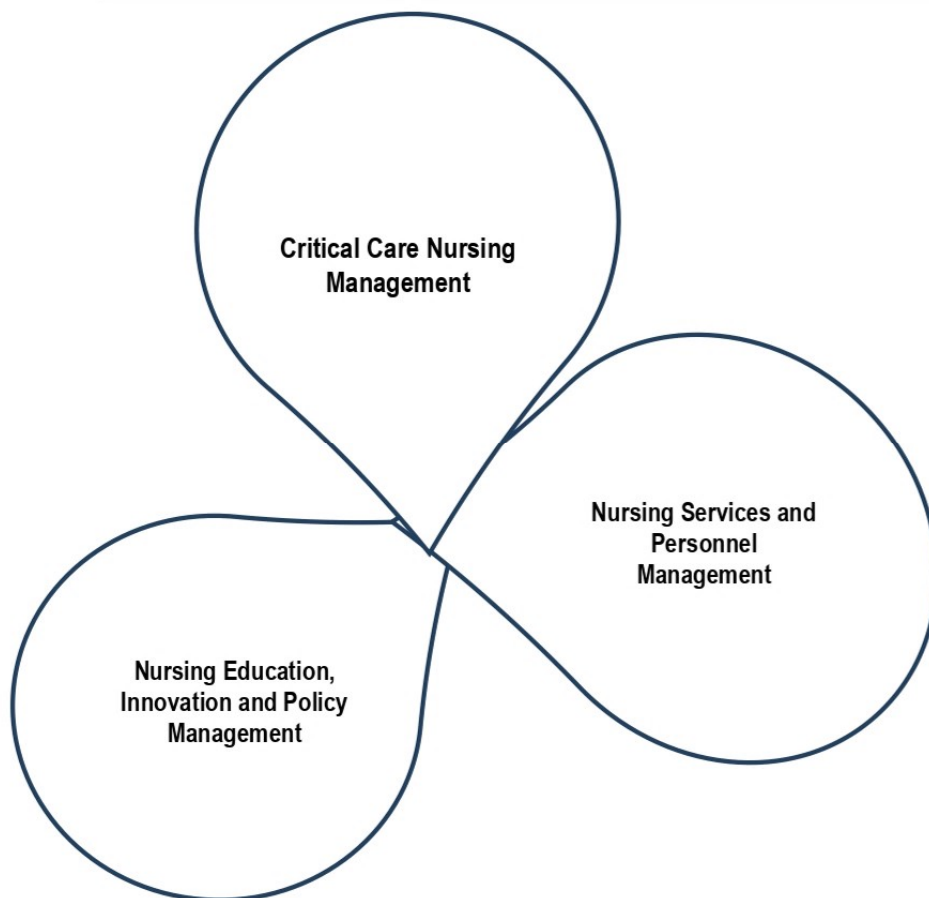
[Two Years Full Time-Research-Based Degree Program]



College of Nursing
Holy Family Hospital (HFH), Rawalpindi
Rawalpindi Medical University

COLLEGE OF NURSING
HOLY FAMILY HOSPITAL, RAWALPINDI MEDICAL
UNIVERSITY, RAWALPINDI

MSN PROGRAM CURRICULUM



College of Nursing:

In pursuit of Excellence for Nursing Education, Advancement of Clinical Practice,
and Promotion of Nursing Research and Human Ethics

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MINUTES OF 15th MEETING OF SYNDICATE, RMU / ALLIED HOSPITALS HELD IN THE SYNDICATE HALL, MAIN CAMPUS, TIPU ROAD, RAWALPINDI MEDICAL UNIVERSITY ON 06-1-2024 at 10.30 A.M

15th meeting of the Syndicate, RMU/Allied Hospitals, Rawalpindi was held on Saturday 06-01-2024 at 10:30 a.m in the Syndicate Hall, Main Campus Tipu Road, Rawalpindi Medical University, Rawalpindi under the chairmanship of Prof. Dr. Javed Akram, Minister for Specialized Healthcare and Medical Education, Punjab / Pro-Chancellor RMU, Rawalpindi, Dr. Jamal Nasir, Minister for Health Primary and Secondary Education Punjab was also present in the meeting:-

Following members attended the meeting:-

1. Prof. Muhammad Umar, Vice Chancellor, Rawalpindi Medical University, Rawalpindi
2. Agha Nabeel, Additional Secretary(D&F), SHC&ME Dept (Rep of Secretary SHC&ME Department, Punjab) – on video linkage
3. Mr. Muhammad Irfan Mehar, Director Local Fund Audit, Rawalpindi (Representative Finance Department)
4. Mr. Kamran Khan, (Representative of Secretary Higher Education Department, Punjab) - on video linkage
5. Mr. M. Umair, Deputy Director (Representative of Secretary Law and Parliamentary Affairs, Punjab) - on video linkage
6. Prof. Jamil Ahmed, Member IT (Representative of Chairman HEC)
7. Dr. Muhammad Saqib Abbasi, Member Syndicate / Philanthropist.
8. Dr. Rizwan Ashraf, Principal, School of Health Science, NUST (Representative of VC NUST)
9. Dr. Ejaz Butt, Medical Superintendent, Holy Family Hospital, Rawalpindi.
10. Dr. Rabbia Khalid Latif, Assistant Registrar, RMU, Rawalpindi (On behalf of Registrar)
11. Ms. Naveela Kausar, Principal College of Nursing, Holy Family Hospital, Rawalpindi

Following were also present:-

1. Prof. Jahangir Sarwar Khan, Principal Rawalpindi Medical College, Rawalpindi
2. Dr. Muhammad Tahir Rizvi, MS BBH, Rawalpindi/invited guest/co-opted member
3. Dr. Farzana Zafar, MS DHQ Hospital, Rawalpindi/invited guest/co-opted member
4. Dr. Khalid Abbas Janjua, MS Institute of Urology & Transplantation, Rawalpindi / invited guest/co-opted member
5. Dr. Shahzad Ahmed, Consultant to VC RMU, Rawalpindi / invited guest/co-opted member
6. Mr. Muhammad Hafeez-ur-Rehman, Treasurer, RMU & Allied Hospitals, Rawalpindi. / Invited guest/co-opted member
7. Ms. Jacqueline Sommers, Principal College of Nursing, BBH Rawalpindi /invited guest/co-opted member
8. Ms. Syeda Ifat Batool, Principal College of Nursing, DHQ Hospital, Rawalpindi / Invited guest/co-opted member
9. Mr. Kashif Zaheer, B&A Officer, RMU, Rawalpindi / Invited guest/co-opted member
10. Dr. Muhammad Umar, Coordinator IAHs, RMU, Rawalpindi

1. The meeting started from recitation of Holy verses from Quran e Majied by Dr. Jamal Nasir.
2. After the introduction of the participants, the Minister for Health, SHC&ME Prof. Javed Akram welcomed all the participants and appreciated the effort of RMU to conduct the paperless meeting of Syndicate. He once again stressed on the approval of statutes of the university for smooth working and directed the universities authorities to vigorously follow the case at appropriate level.
3. Syndicate had special appreciations for Prof. Muhammad Umar, Vice Chancellor, Rawalpindi Medical University for his meritorious service as Vice Chancellor of the university who has been not only working without pay OR any perks and privileges since his appointment as VC in the year 2017 but also contributing financial support to the university from his own resources. Syndicate passed a resolution for meritorious service of Prof. Muhammad Umar and awarded him a certificate for his contributions in uplifting the standards

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| <p>revised curriculum for Masters in Health Professions Education Program Batch of the nursing students has been recommended by the Academic Council of RMU. It is requested that the same may kindly be approved by Syndicate in line with RMU Act 2017 Chapter IV, Rule 24(g).</p> | <p>students of Batch 2 of said program as per recommendations of Academic Council, RMU subject to completion of all codal formalities in the manner as prescribed.</p> | <p>Director DME Assistant Registrar RMU Principal CON HFH</p> |
| <p>7. Approval of Curriculum for Diploma in Medical Jurisprudence Program – RMU : It is submitted that after the promulgation of Rawalpindi Medical University Act 2017(XVI of 2017). The meeting was held on by the Board of Faculty of Forensic Medicine at RMU. The Preparation of draft of Curriculum for Diploma in Medical Jurisprudence and later on the proposed curriculum for the Diploma in Medical Jurisprudence program underwent a thorough review and deliberation. The Board of Faculty of Forensic Medicine examined the curriculum's alignment with the HEC guidelines, program objectives, course structure, elective offerings, and assessment methods. After engaging in discussions and addressing various concerns, the Board of Faculty unanimously approved the curriculum. Department of Forensic Medicine, RMU is keen to start program after completing all the codal procedural formalities. The duration of the program will be 02years. The curriculum of the program has been already approved by the relevant forum. Board of Faculty of Forensic Medicine, RMU has approved the case Syndicate is requested for approval of Diploma in Medical Jurisprudence curriculum program at Department of Forensic Medicine & Toxicology, NTB, RMU</p> | <p>Syndicate approved the curriculum for Diploma in Medical Jurisprudence Program of the university as per recommendations of Board of Faculty/Academic Council, RMU subject to completion of all codal formalities in the manner as prescribed</p> | <p>VC RMU Assistant Registrar RMU Director DME</p> |
| <p>8. Approval of Certificate course in critical care Nursing Program – RMU: It is submitted that after the promulgation of Rawalpindi Medical University Act 2017 (XVI of 2017) the meeting was held on by the Board of Faculty of Nursing at RMU. The preparation of draft of curriculum for certificate course in critical care Nursing. The Board of Faculty of Nursing examined the curriculum's alignment with the PNC guidelines, program objectives, course structure, elective offerings and assessment methods. After engaging in discussions and addressing various concerns, the Board of Faculty unanimously approved the curriculum. College of Nursing and Midwifery HFH/RMU is keen to start program after completing all the codal procedural formalities. The duration of program will be 06 months. Syndicate is requested for approval of certificate course in critical care Nursing curriculum program at College of Nursing HFH/RMU, Rawalpindi.</p> | <p>Syndicate approved the case to start the certificate course in critical care nursing as per recommendations of Board of Faculty, RMU subject to completion of all codal formalities in the manner as prescribed</p> | <p>VC RMU Director DME Principal CON HFH</p> |
| <p>9. Approval of Curriculum of Master of Science in Nursing (MSN) Program – RMU : It is submitted that after the promulgation of Rawalpindi Medical University Act 2017 (XVI of 2017), the meeting was held on by the Board of Faculty of Nursing at RMU. The preparation of draft of curriculum for Master of Science in Nursing (MSN) and later on the proposed curriculum for the Master of Science in Nursing (MSN) underwent a thorough review and deliberation. The Board of Faculty of Nursing examined the curriculum's alignment with the HEC guidelines, program objectives, course structure, elective offerings and assessment methods. After engaging in discussion and addressing various concerns, the Board of Faculty unanimously approved the curriculum. College of Nursing and Midwifery RMU is keen to start program after completing all the codal procedural formalities. The duration of program will be 02 years. The curriculum of the program has been already approved by the relevant forum. Syndicate is requested for approval of Master of Science in Nursing (MSN) curriculum program at College of Nursing HFH/RMU.</p> | <p>Syndicate approved the curriculum for Master of Science in Nursing (MSN) Program of the university as per recommendations of Board of Faculty/Academic Council, RMU subject to completion of all codal formalities in the manner as prescribed</p> | <p>VC RMU Director DME Principal CON HFH</p> |



OFFICE OF THE REGISTRAR, RAWALPINDI MEDICAL UNIVERSITY/ALLIED HOSPITALS,
MAIN CAMPUS, TIPU ROAD, RMU, RAWALPINDI

No. Syndicate/MOM-15/RMU/2024/ 254-65 Dated: 02 Feb., 2024.

Copy for information and necessary action to:-


1. The Chairman / All Members of Syndicate, RMU/Allied Hospitals, Rawalpindi.
2. The Secretary to Government of the Punjab Specialized Healthcare & Medical Education Department, Lahore.
3. The Chairman, Higher Education Commission, H-9, Islamabad.
4. The Vice Chancellor, Rawalpindi Medical University/Allied Hospitals, Rawalpindi.
5. The Medical Superintendents, HFH, BBH, RTH (DHO), IUTR Hospital, Rawalpindi
6. The Treasurer, RMU/Allied Hospitals, Rawalpindi.
7. The Assistant Registrar, RMU, Rawalpindi.
8. All concerned /Master File


Assistant Registrar (on behalf of Registrar)
Rawalpindi Medical University
Rawalpindi


Medical Superintendent (Member)
Holy Family Hospital
Rawalpindi


Vice Chancellor
Rawalpindi Medical University
Rawalpindi


Minister for Health Punjab/Pro-Chancellor
Rawalpindi Medical University
Rawalpindi


Additional Secretary (D&F).
Representative of Secretary
HC&ME Department, Punjab) Lahore

Introduction:

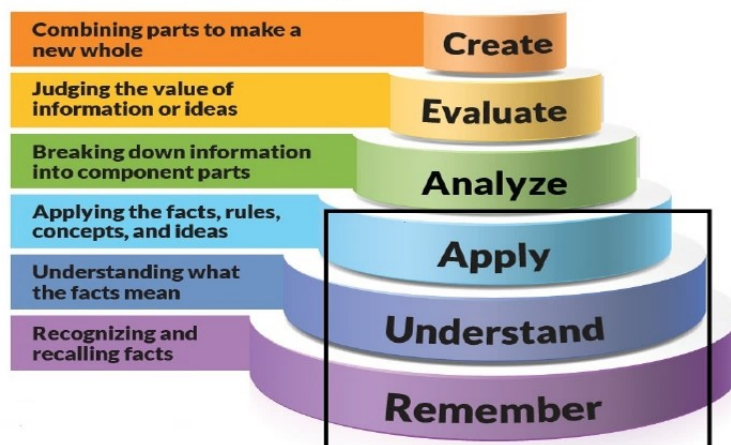
Rapid scientific and technological discoveries have proved that increased demands of more specialized nursing knowledge, skills and practices is indispensable for efficient and effective quality care standards. Literature suggested that degree or license is not the end point of education for nurses. It is because within five to ten years after graduation, knowledge and skills of practice become obsolete for clinical application. This obsolescence can lead to the poor performance of nurses that could help to increase client disability; continued illness and even deaths. Studies have reported that due to improper medical care and attention, medical errors are increased and more than 1,700 patients died along with 9,500 injured annually (Erich Shefler, 2004). According to World Health Organization (WHO, 2005) and Institute of Medicine (IoM, 1999) studies suggested that 75% frequently preventable health care errors occurred in which 44000 to 98000 people died annually in U.S hospitals due to insufficient allocation of human resources, inadequate trainings and improper distribution of resources. This causes increasing cost of care which is almost double, increased hospital length of stay and decreased client care acuity. Department of Health and Human Services (DHHS) and the Agency for Healthcare Research and Quality (AHRQ) conducted several studies, focused on nurses' role in patient safety and quality care. Studies propagated that if proper continuing education and further trainings opportunities may be provided to the nurses, this would be beneficial for safe patient care and role transition of the nurses.

Literature has emphasized that continuing medical education (CME) and continuing nursing education (CNE) has been worldwide recognized and nurses are strongly encouraged to acquire higher nursing education after their basic nursing degree i.e., masters or PhD in nursing. CNE defined as planned educational and experiential learning activities, availed shortly after degree or diploma programme., Diploma nursing or bachelor's degree in nursing (AigaHirotsugu, 2005). Therefore, dire need is to increase capacity building of Masters of Science graduate nurses in both public and private institutions to improve practices and perform advanced clinical cum educational role as nurse practitioner, nurse specialist, educationist, leadership and role model at highest level for nursing advocacy and consultancy.

College of Nursing in Holy Family Hospital has imparted its significant role and produced qualified nurses in Post-RN Bachelor Sciences in Nursing (BSN) programs Since 2017 basic specialty programs of intensive care units, coronary care units, pediatrics, operation theatre, community health, anesthesia, and mental health nursing from 1986 to till dates with basic aim to dispense quality knowledge and improve clinical nursing care standards. Basic diploma recognized nurses in General nursing and Midwifery were the older milestones that college had successfully vanished in 2018 after the development and inclusion of four years bachelor degree nursing program.

Post RN BSc Nursing was started in 2017 with basic aim to replace diploma holder nurses into bachelor's degree program in nursing. This was two years degree program with transitional and approved curriculum set by Pakistan Nursing Council (PNC) to prepare nurses with advance theory and practical skills. These skills were used to enhance critical thinking, problem solving and decision making and research approaches to make practice evidence-based. Approaches were specifically designed for nurses to work independently to solve routine patients 'problems and issues. Since inception and followed up till now, Post RN BSc graduate nurses have proved their transformational role of application as medication nurse, bed side nurse, team leader, diabetic nurse, cardio-pulmonary nurse, code blue, disaster risk management nurse, advocacy, clinical counseling etc. Beside clinical perspective, Post RN B.Sc. graduate nurses also dignified their role in education, research and senior management positions to strengthen contemporary image of nurses in Pakistan and worldwide. Focus of BSN graduate nurses 'training is more emphatic towards 1)cognitive, 2)psychomotor and 3) affective skills. These skills are confined to its application as Blooms' Taxonomy of **knowledge acquisition, comprehension of what is to be trained and application of what is to be learned.**

BSN program- Acquisition Level of Learning



Master of Science in Nursing (MSN) is an advanced-level postgraduate degree for nurses and considered an entry-level degree for transformed role of nurses as educators and services managers at highest level. The degree also helps to prepare a nurse to seek a career as a nurse health policy expert, or clinical nurse leader. The MSN may be used as a prerequisite for doctorate-level nursing education, and used to become an advanced practice registered nurse such as a nurse practitioner, clinical nurse specialist, nurse anesthetist, or nurse midwife. Postgraduate nurses have a major role in ensuring the adequacy of nurses' competence. This academic level is particularly important to the nursing profession because studying at the master's level leads to an enhanced self-esteem, further personal and professional growth, and increased knowledge of nursing theories and its development. MSN graduate nurses also have key responsibilities to work as team members and leaders for a reformed and better-integrated, patient-centered health care system in country.

Nursing practice in Pakistan has been guided by wide range of professional, personal and ethical care standards. These standards are reflected in the attitude and actions of practice amongst nurses in clinical, education and community level. Due to paradigm shift, nursing practice covers a broad continuum from health promotion, to disease prevention, to coordination of care, to cure when possible and to palliative care when cure is not possible. While this continuum of practice is well matched to the needs of the Pakistani population, the nursing profession has its challenges. It is not as diverse as it needs to be with respect to race, ethnicity, gender, and ageing population to provide culturally congruent care to all populations across the provinces. MSN graduate nurses require more education and preparation to adopt new roles quickly in response to rapidly changing health care settings and an evolving health care system. Restrictions on scope of practice, policy and reimbursement-related limitations, and professional tensions have undermined the nursing profession's ability to provide and improve both general and advanced care. Producing a health care system that delivers the right care quality care that is patient centered, accessible, evidence-based, and sustainable at the right time will require transforming the work environment, scope of practice, education, and numbers of Pakistani nurses.

With driving needs and increasing demands of highly skilled nurses in Pakistan, College of Nursing, HFH has initially step forward to start MSN program in a public sector organization under Punjab government to increase capacity building of public and private sector's employed nurses towards higher nursing studies. Meantime, This Curriculum is designed to integrate advance nursing education knowledge to better patient services and nursing administrative excellence, and improved research based outcome in critical care management. In contrast to BSN graduate nursing program, master's in nursing (MSN) is a type of formal CNE program after basic nursing studies. This is an advanced level course of studies in which in depth of knowledge, skills and theories of change attitude are inculcated.

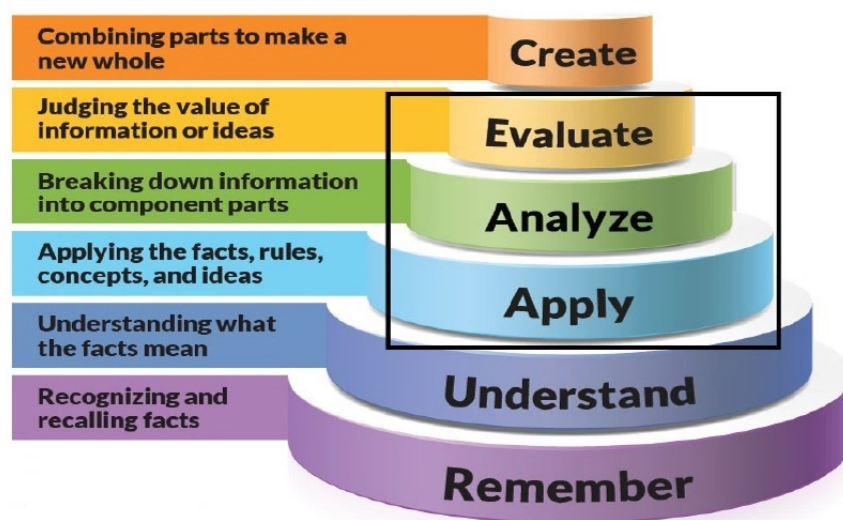
This is because of the modification in existing role and responsibilities of undergraduate employed nurses. Due to their advanced clinical skills and broad scope of practice, Advanced Practice Nurse (APN) role has been introduced to strengthen healthcare systems. APN role has been extended by providing expert care, especially to people who are older and/or having chronic diseases. The International Council of Nurses (ICN) has defined APN as a **registered nurse who holds a master's degree and has acquired expert knowledge base, complex decision making skills and clinical competencies for expanded practice**. The characteristics of this expanded role are shaped by the context and/ or country in which s/he is credentialed to practice. APN competencies incorporate direct clinical care e.g., clinical assessment, clinical interventions, advanced health assessment skills, decision making and diagnostic reasoning skills, case management. They also include expert coaching and guidance (communication, facilitation, reflection and coaching skills), consultation (patient education), research skills (translational research, evaluation of healthcare services), clinical and professional leadership (practice development, planning, implementation and evaluation of programs, change management, quality management), collaboration (intra- and inter-professional), and ethical decision-making skills. To equip nurses for their new responsibilities and ensure a well-educated health workforce, nurse educators need to keep up with a rapidly changing knowledge, skills and new technologies. Nursing education, in addition to conveying necessary skill sets, needs to provide students with the ability to mature as professionals and to continue learning throughout their careers.

Focus of MSN graduate program is based on the enhancement of **1) Affective 2)Cognitive and 3)Psychomotor** skills. Studies suggested that once you reach at top up, you need more ethical, responsible and professional towards job and its requirements. It is because you have more responsibilities on your shoulder being a leader, manager or practitioner, as people behind you are following that what actions you are performing. Changing attitudinal position of a nurse manger is very important in shaping professional image. Lack of ethics development at this stage hampers nurses' ability to recognize their identity towards new role. Nurses are assumed to work independently and collaboratively with other team of inter-professional organizations and share their voices when ethical issues confront with higher authorities, clinicians, patients, and families. By applying this skill, pre-requisite cognition is the foundation of remembering and understanding of previous knowledge in which psychomotor skills are refined and adopted.

Therefore, curriculum of MSN is reflected towards re-shaping the image by acquiring knowledge to analyze demands with rapidly changing health care needs. Psychomotor skills have been utilized by the graduate in terms what actually they learned and acquired throughout the designated program. Level of Knowledge assessment and enhancement, MSN graduate extends his/ her knowledge from **application to analysis of what is to be trained and evaluate of what is to be learned**. It is quite

obvious that we prepare nurses for advance role in continuity of education from graduation to higher/post-graduation which entails to continuing nursing education (CNE) towards continuing professional development (CPD) and lifelong learning (LLL).

MSN program- Acquisition Level of Learning



Therefore, CON has developed sub-Specialized Track Curriculum in which focus was made on three courses as; **Critical Care Nursing Management, Nursing Education and Innovation and Nursing Services and Personnel Management**. This STC will develop vision among postgraduate MSN nurses in acquiring learning skills in order to realize them towards four key messages from the report of **Institute of Medicine (IoM, 2000) Future of Nursing: Leading Change, Advancing Health** and constituted as the basic foundation of this curriculum of MSN degree program:

1. Nurses should practice to the full extent of their education and training to promote services.
2. Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.
3. Nurses should be full partners, with physicians and other health professionals, in redesigning health care in the Pakistan.
4. Effective workforce planning and policy making require better data collection and improved infrastructure information.

Critical care nursing (CCN):-Due to COVID-19 pandemic disease expansion, demand of more specialized nursing human resources has been increased. Outbreak of this COVID 19, the disease was officially declared by World Health Organization (WHO) as pandemic because of overwhelming many countries at same time. Due to severe respiratory symptoms, increased infection rates, and fact that disease has no proper treatment identification to understand the virus behavior, therefore hospitals started to overburdened. The pressure was increased on health workforce to manage the disease

outbreak in hospitals. But the demand for specific services and personals, such as specialized nurses, intensive care units, PPEs, trainings and lack of preparedness has led to high demand for critical care nurses to deal such emergencies. Due to a limited supply of these specialized personnel on staff and available in local areas, hospitals were seeking additional nurses to relieve exhausted systems and to respond to the high patient need.

Therefore, to understand one aspect of specialized nursing workforce, their training preparedness and quick response to save lives with utmost care of physical, mental, spiritual and social wellbeing. MSN program has enough content to train nurses on critically ill or unstable patients and following pandemic wave of COVID-19 emergencies. The role of critical care nurses can be found in a wide variety of environments and specialties, such as general intensive care units, medical intensive care units, surgical intensive care units, trauma intensive care units, coronary care units, cardiothoracic intensive care units, burns unit, pediatrics and some trauma center emergency departments. Studies suggested that keeping patients safe is a core of nursing duty of critical care nurses (CCN). Patients who are severely ill with COVID-19 tend to require a higher level of care than typical ICU patients. They may need to be on a ventilator or other life-saving equipment and require the attention of multiple providers. Corona virus patients also tend to have longer ICU stays. For example, on average, if patient come with pneumonia, heart failure or a heart attack and need a ventilator, it may required for a couple of days. But with COVID, the shortest was 7-10 days, and some were on ventilators for 60, 90, even 100 days.

When built-in system of intensive care units, nurses are uniquely poised and possessed competencies to identify, interrupt, and correct medical errors in any intensive care area unit. Such instances are referred to a near miss, preventable error, or recovered medical errors. Other aspect of CCN specialized nurses have the direct communication with the family members of admitted patients in an intensive care unit. Therefore, the field of critical care nursing specialization in MSN program is expected to grow and nurses may be trained with advanced technology-based knowledge, practice and clinical research to understand and overcome the future critical emergencies.

Nursing Education and Innovation- Higher education for nurses is necessary to ensure that the current and future generations of practical nurses can deliver safe, quality, patient-centered care across all settings. Nursing education is now found as unique among other healthcare professions in Pakistan. It has multiple educational pathways leading to an entry-level license to practice. The qualifications and level of education required for entry into the nursing profession have been widely debated by nurses, nursing organizations, academics, and health ministry for many years. During that spell, competencies role into practice have been expanded, especially in the domains of community and public health, geriatrics, leadership, health policy, system improvement and change, research and evidence-based practice, and teamwork and collaboration. These new competencies have placed increased pressures

on the education system of nursing and its curricula. **Pakistan Nursing Council (PNC)** and **Higher Education Commission (HEC)** have played significance role to uplift nursing education and reformed practice through uniform curriculum system in the country. Due to variety of technological tools and complex information management systems in nursing education, this requires technological innovations and programming in curriculum in order to analyze and synthesis the quality and effectiveness of education towards better care at the end. MSN curriculum also highlights the nurses' coordinated role in collaboration with a variety of health professionals, including physicians, health ministry members, social workers, physical and occupational therapists, school health, and pharmacists, after holding of master's degrees. Shortages of nurses in the positions of primary care providers, faculty, and researchers continue to be a barrier to advancing the profession and improving the delivery of care to patients.

Nursing Services Administration and Personnel Management-WHO expert committee defines the nursing services as the part of the total health organization which aims to satisfy major objective of nursing services, including curative services, prevention and promotion of disease and health wellbeing. Nursing services management is also satisfying the nursing needs of the patients in the hospital and community. Nursing managers and clinical practice nurses work with the members of medical and allied disciplines (i.e., medical, surgical, pediatrics, maternal and child health, laboratory sciences, social service, pharmacy etc.) in supplying a comprehensive program of patient care in the hospital.

Nursing Service managers are regarded as the first-line managers and play administrative roles. They have the responsibility to induce changes in the clinical environment. Recently, this responsibility of nurse managers has become more important than ever due to demands for rationalization, cost cuttings, advancements in medical technology, changing theories, increased human demands in specialized care (IoM, 2011). Nursing services managers need to exercise leadership role to undertake this responsibility. For this responsibility, various strategies have been implemented to develop nursing services Chief or Heads' abilities to promote change. Studies depicted that hierarchical decision-making structure in that they have authority and responsibility for the nursing staffs; they need to move up in the reporting structure of their organizations to increase their ability to contribute to key decisions. This is not happening but nursing chiefs appear to be losing the ground. A 2002 survey by the American Organization of Nurse Executives (AONE) showed that 55 percent of CNOs reported directly to their institution's CEO, compared with 60 percent in 2000. More Chief Nursing Officers described a direct reporting relationship to the chief operating officer instead. Such changes in reporting structure can limit nurse leaders' involvement in decision making about the most important product of hospitals particularly the quality care and impediments in nursing personnel management. .

Therefore, theoretical cum practical based contents have been included in the curriculum in order to train the brain with nursing services management, leadership and nursing personnel management. Nursing personnel management is an example of nursing services department in which nursing manpower and their personnel matters are dealt by the nursing Chief or nursing superintendent. Programs have been developed for nursing Chief or nursing superintendent towards leadership and services skill development in some countries (Japanese Nursing Association, 2016; Wallis & Kennedy, 2013). A program in the US (Wallis & Kennedy, 2013), that included building transformational leadership, demonstrated positive effects on nursing quality and the work environment (Cummings et al., 2010). In Japan, strategies for developing leadership were developed, such as introducing certified nurse administrators (Japanese Nursing Association, 2016). Furthermore, periodic ward rotation of nurse managers is conventionally scheduled to improve nurse services, stimulate quality ward activity and encouraging nurses' career development (Fujino & Nojima, 2005). Previous studies showed that nurse managers' abilities to promote change should be further developed because they have experienced difficulty in conceptualizing unidentified problems (Yoshida et al., 2010), which is necessary before strategies for change are implemented.

MSN Program

PHILOSOPHY

The philosophy of the MSN program at College of Nursing, Holy Family Hospital R.M.U. is to facilitate the students' transition into advanced nursing practice roles, specifically the nurse educator, nurse practitioner, nursing administrator and nurse researcher; to foster the professional development and clinical leadership in better delivery of healthcare services.

MSN program is built upon and extend competencies acquired at the graduate levels, emphasizes application of relevant theories into nursing practice, education, administration, management and development of research skills.

At the master's level, nursing education has been diversified with increasing specialization in theories and application in advanced nursing practice knowledge. We believe that our masters in nursing graduates will contribute to the advancement of nursing as a profession through the development, implementation and evaluation of advanced practice roles with expanded knowledge and improved skills with ultimate challenge of change attitude of nurses for ethical practices.

We also believe that our masters in nursing graduates will contribute and play a key role to cater better nursing services, personnel management and staff development. This will contribute in increasing acuity level and satisfaction of better patient care and development of image of nursing as a profession.

MISSION

The mission of the Masters of Science in Nursing Program is to provide an avenue of higher education in nursing by the building of leadership and fostering a spirit to serve sick people in their community and hospital for well beings. Nurses are expected to provide a foundational role of their professional identity, dignity and integrity.

AIM

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

PROGRAM OBJECTIVES

The Masters of Science in Nursing (MSN) Program prepares nurses in advanced nursing theory and provides them with experience in specialized nursing roles within the changing patterns of health care. Graduates are equipped to assume leadership roles in inter-professional health groups and conduct independent nursing research or clinical projects.

The graduate of the MSN degree program will be prepared for the professional role as a nurse educator, nurse administrator and researcher and will be able to:

- 1) Utilize and apply the concepts, theories and principles of nursing science.
- 2) Utilize research, advance knowledge and theories from nursing and other disciplines for improving nursing education and nursing practice, thus to improve quality care standards.
- 3) Contribute to the development of the scientific knowledge in nursing by recognizing researchable problems and participating in research to advance the practice of nursing.
- 4) Examine nurses' involvement in policy process within a historical, developmental, ethical and theoretical context.
- 5) Analyze the changing role of govt. and impact of international organization in policy formulation.
- 6) Use organizational and systematic leadership skills in promoting safe and quality patient care, emphasizing ethical and critical decision making and effective working relationships.
- 7) Use effective communication, collaboration, and leadership skills as a member and leader of inter-professional teams to manage and coordinate care.

ROGRAM OUTCOMES:

After the completion of the MSN program, the graduates will able to:

- 1) Utilize evidence-based nursing interventions to generate research for the purpose of expanding nursing science.
- 2) Demonstrate expertise in the provision of care to individuals and groups from diverse backgrounds across the health spectrum.
- 3) Function in a variety of roles collaborating with other disciplines in the attainment of improved patient care and outcomes.
- 4) Continuously evaluate their nursing practice in relation to professional standards and assume accountability for practice.
- 5) Demonstrate comprehensive knowledge of policy formulation and how it impacts nursing practice and health care delivery.
- 6) Analyze ethical issues as they affect communities, society, the health professions, and their own practice.
- 7) Apply principles in decision making, critical thinking and independent judgment to the role of the advance practice nurse.
- 8) Evidence of commitment to continuing professional development (CPD) and promote lifelong learning (LLL).

Program Implementation and Registration:

Semester-Based System:

- 1) Two years full time program
- 2) Total four semesters and each semester is comprised of six months
- 3) Result of each semester is calculated in grade point average (GPA) and all four semester result compiled and calculated in Cumulative Grade Point Average (CGPA)
- 4) Total GPA is calculated as 4.0

Eligibility criteria for Admission/Induction:

- 1) Two years BSN (Post RN) from recognized registered institution, affiliated with HEC approved university
- 2) Two years' experience after BSN (Post RN) is mandatory OR
- 3) Four years BSN (Generic) from recognized registered institution, affiliated with HEC approved university
- 4) Two years' experience after BSN (Post RN)/GBSN is mandatory

Gender: Both female and male candidates are eligible to apply

Age factor: Male and female less than 50 years of age are encouraged to apply. Above 50 will not be considered as an applicant.

Entry Test Assessment (ETA): Entry test is compulsory which is composite of written and oral assessment.

1) Written test paper of 80 marks is designed to assess candidate's fundamental knowledge with following subjects:

- English 20 Questions
- Nursing 40 Questions
- General knowledge 10 Questions
- Analytical 10 Questions

Note: 50 marks are considered to be the pass marks in the test.

2) Oral test of 20 marks is designed to assess candidate's practical knowledge and skills by following committee members:

Chairperson, the Principal of the College

Member 1, the Vice Principal or MSN Program Coordinator

Member 2, the senior nurse or nurse manager of the services or as assigned by the Principal of the College

Member 3, the senior faculty or nurse educator/ instructor, having MSN qualification from the College concerned

Member 4, the senior member of the organization whom the Principal of the College is supervised or as assigned by the Principal of the College.

Teaching Methodologies and Learning Resources:

| TEACHING LEARNING ACTIVITIES AND RESOURCES | |
|--|-----------------------------|
| BRAINSTORMING | PRECEPTOR EVALUATION |
| INTERACTIVE LECTURE, SEMINARS, WORKSHOPS | SCHOLARLY PAPER WRITING |
| GROUP DISCUSSION | CASE STUDIES/ CASE SCENARIO |
| DEMONSTRATION | SWOT ANALYSIS |
| PROBLEM BASED LEARNING (PBL) | PLANNING COMMISSION 1 (PC1) |
| TUTORIAL /ESSENTIAL SKILLS LAB PRACTICE | (LFA) |

| | |
|--|---|
| CLINICAL CASE PRESENTATION, | PERFORMANCE EXAMINATION |
| CLINICAL PROJECT/ COMMUNITY BASED PROJECT. | PROPOSAL WRITING AND PROPOSAL PRESENTATION |
| AUDIO VISUAL AID TECHNOLOGY | THESIS DEFENSE PRESENTATION |
| JOURNAL CLUB, E MAGAZINES | RESEARCH ARTICLES CRITIQUE (QUALITATIVE AND QUANTITATIVE) |

Faculty

- 1) PhD and MSN degree holder faculty
- 2) Equivalent master's degree level of education in health related subjects
- 3) PhD Nursing faculty will be invited as Guest Faculty/ Lecturer.

PROPOSED COURSES FOR 2YEARS MSN DEGREE PROGRAMME CURRICULUM FRAMEWORK- CREDIT SYSTEM

| YEAR I | | | | | |
|------------------|---|--------|--------------------|-----------|--------------|
| Course Code | Semester I | Theory | Clinical/Practicum | Skill Lab | Total Credit |
| NURS 6111 | Theoretical Basis for Nursing Theories & Models | 3 | - | - | 3.0 |
| NURS 6112 | Advanced Biostatistics and Using of SPSS | 3 | - | - | 3.0 |
| NURS 6113 | Advanced Health Assessment | 2 | 1 | - | 3.0 |
| NURS 6114 | Pathophysiology for Advanced Practice | 3 | - | - | 3.0 |
| Total Credits | | | | | 12 |
| YEAR I | | | | | |
| Course Code | Semester II | Theory | Clinical/Practicum | Skill Lab | Total Credit |
| NURS 6121 | Nursing Research | 3 | - | - | 3.0 |
| NURS 6122 | Policy Planning & Development | 3 | - | - | 3.0 |
| NURS 6123 | Pharmacology for Advanced Practice | 3 | - | - | 3.0 |
| NURS 6124 | Academic Writing & Proposal Development | 3 | - | - | 3.0 |
| Total Credits | | | | | 12 |

| YEAR II | | | | | |
|------------------|------------------------------------|--------|--------------------|-----------|--------------|
| Course Code | Semester III | Theory | Clinical/Practicum | Skill Lab | Total Credit |
| NURS 6231 | Curriculum Designs and Development | 3 | - | - | 3.0 |
| NURS 6232 | Leadership in Healthcare | 3 | - | - | 3.0 |
| Total Credits | | | | | 06 |

All the Courses are Mandatory

| YEAR II | | | | | | |
|--|---|--------------|--------------------|-----------|--------------|----------------|
| Option to select a Specialization Course | | | | | | |
| Course Code | Semester III | Theory | Clinical/Practicum | Skill Lab | Total Credit | |
| NURS 6233 | Critical Care Nursing <ul style="list-style-type: none">• Adult Nursing• Pediatrics Nursing | 2 2 | 1 1 | - - | 6.0 | |
| NURS 6234 | • Nursing Education & Innovation <ul style="list-style-type: none">• Testing and Measurement in Teaching | 2 2 | 1 1 | - - | | |
| NURS 6235 | • Nursing Services Administration <ul style="list-style-type: none">• Personnel Management | 2 2 | 1 1 | - - | | |
| | Total Credits | | | | | 6+6= 12 |
| YEAR II | | | | | | |
| Course Code | Semester IV | Total Credit | | | | |
| - | Thesis | 6.0 | | | | |
| | Practicum | 4.0 | | | | |
| | Total Credits | | | | 10.0 | |
| Total Credits of MSN Curriculum: 46 | | | | | | |

NOTE:

1. The matrix of this curriculum is based on credit system and the credit hours are calculated on the following formula:

- 1 Theory Cr = 1 hour
- 1 Clinical Cr = 3 hours
- 1 Lab/Tutorial Cr = 3 hours

2. For elective course, students will perform their duties/ practicum in their specialty area of practice along with their classes.

MSN Course Description:

YEAR ONE SEMESTER ONE

| YEAR I SEMESTER I | |
|----------------------|---|
| ITEM NUMBER | COURSE DESCRIPTION |
| COURSE TITLE | THEORETICAL BASIS OF NURSING THEORIES& MODELS |
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR I, SEMESTER I |
| COURSE PRE-REQUISITE | |

Course Description

This course is designed to identify the importance of nursing theory and its linkage and application with nursing practice. It will provide the opportunity for the student to evaluate factors and issues influencing the role of theory in nursing. To examine process of theory development, theoretical framework, as well as critical analysis of the different levels of nursing theories which is useful in nursing practice. It will also prepare students to evaluate critique and apply nursing theory specifically within a practice setting, and also enhance their educational competency and skills and integrate nursing theory into nursing research.

Course Objectives

At the completion of this course, the student will be able to:

- 1) Illustrate the importance of nursing theory.
- 2) Explain the terminologies related to theory development.
- 3) Critically evaluate the difference among theories, models, and conceptual framework.
- 4) Describe the various steps used in theory development process.
- 5) Discuss the use of theory in evidence-based practice, ethical decision making, and research.
- 6) Examine evidence from practice to develop and refine theoretical perspectives.
- 7) Articulate and demonstrate the relationship between philosophy, theories, research, and nursing practice.
- 8) Explore the utilization of theories in all areas of nursing practice
- 9) Formulate and apply appropriate theoretical framework in their practice setting.
- 10) Integrate theory into nursing research.

Teaching/Learning Strategies:

- Interactive Lecture
- Pre Readings (texts, journals).
- Discussion

Evaluation Criteria

| Evaluation Criteria | |
|---------------------------------------|-----------------------|
| CRITERIA | |
| INTERNAL EVALUATION 50% | FINAL EXAMINATION 50% |
| CONCEPT ANALYSIS PAPER 10% | |
| STUDENT LEAD SEMINAR PRESENTATION 20% | |
| QUIZZES 20% | |
| TOTAL 100% | |

Unit Objectives

Unit I: Introduction to Nursing Theory

At the end of the unit, the learners will be able to:

- 1) Describe the Terminologies used in nursing theory
- 2) Identify the significance of Theory to Nursing
- 3) Discuss History and Philosophy of Science
- 4) Explain Logical Reasoning and Theory Development

Unit II: Nursing Philosophies

At the end of the unit learners will be able to:

- 1) Provide different Definition of Nursing
- 2) Describe Modern Nursing
- 3) Discuss Helping Art of Clinical Nursing
- 4) Identify 21st century Nursing Problems
- 5) Discuss Core, Care, and Cure Model
- 6) Analyze Philosophy and Science of Caring
- 7) Identify the transition process from Novice to Expert

Unit III: Conceptual Models and Grand Theories

At the end of the unit, the learners will be able to:

- 1) Discuss Grand theories and conceptual models of different nursing theorist
 - Dorothea Orem's Self-care Deficit Theory
 - Martha Roger's Science of Unitary Human Beings
 - Myra Levine's Conservation Model
 - Johnson's Behavior System Model,
 - Roy's Adaptation Model,
 - Neuman Systems Model,
 - King's interacting systems framework
- 2) Analyze Elements of Nursing Theory

Unit IV: Middle Range Theories

At the end of the unit learners will be able to:

- 1) Describe middle range theories
 - Psychodynamic Nursing
 - Nursing Process Theory
 - Human to Human Relationship Model
 - Theory of Comfort
 - Modeling and Role-Modeling
 - Maternal Role Attainment
 - Parent-Child Interaction Model
 - Theory of Cultural Care
 - Theory of Human Becoming

- Uncertainty in Illness
- Model of Health
- Conceptual Model for Nursing
- Health Promotion Model

Unit V: Nursing Theory and Nursing Research

At the end of the unit, the learners will be able to.

- 1) Discuss practice oriented research.
- 2) Identify the interaction between theory and research & its implications for nursing research.
- 3) Describe scientific inquiry in Nursing: A model for a new age

Course Schedule

| Unit # | TOPIC | FACULTY |
|-----------------|--|----------------|
| Unit I | Introduction to Nursing Theory <ul style="list-style-type: none"> • Terminologies • Significance of Theory to Nursing • Historical and Philosophy of Science • Logical Reasoning and Theory Development | |
| Unit II | Nursing Philosophies <ul style="list-style-type: none"> • Definition of Nursing • Modern Nursing • Helping Art of Clinical Nursing • Twenty one Nursing Problems • Core, Care, and Cure Model • Philosophy and Science of Caring • From Novice to Expert | |
| Unit III | Conceptual Models and Grand Theories <ul style="list-style-type: none"> • Dorothea Orem's Self-care Deficit Theory • Martha Roger's Science of Unitary Human Beings • Myra Levine's Conservation Model • Johnson's Behavior System Model, • Roy's Adaptation Model, • Neuman Systems Model, • King's interacting systems framework • Elements of Nursing Theory | |
| Unit IV | Middle Range Theories <ul style="list-style-type: none"> • Psychodynamic Nursing • Nursing Process Theory • Human to Human Relationship Model • Theory of Comfort • Modeling and Role-Modeling • Maternal Role Attainment • Parent-Child Interaction Model • Theory of Cultural Care • Theory of Human Becoming • Uncertainty in Illness • Model of Health • Conceptual Model for Nursing • Health Promotion Model | |

| | | |
|---------------|---|--|
| Unit V | Nursing theory and nursing research <ul style="list-style-type: none"> • Practice oriented research • The interaction between theory and research • Toward a new view of science: Implications for nursing research • Scientific inquiry in Nursing: A model for a new age | |
|---------------|---|--|

Table of Specifications:

| Bloom's Taxonomy | | | | |
|---|--------------------------------------|--------------------|--|---------------|
| Subject :Theoretical Basis for Nursing | Knowledge & Comprehension | Application | Analysis, Synthesis &Evaluation | TOTALS |
| Unit – I. Introduction to Nursing Theory | 2% | 3% | 5% | 10% |
| Unit – II Nursing Philosophies | 5% | 7% | 8% | 20% |
| Unit – III Conceptual Model and grand Theories | 7% | 8% | 10% | 25% |
| Unit – IV Middle Range Theories | 6% | 12% | 12% | 30% |
| Unit – V Nursing Theories and Nursing Research | 5% | 5% | 5% | 15% |
| TOTALS | 25% | 35% | 40% | 100% |

Suggested Books:

- H. Nicoll. Perspective on Nursing Theory, 3rd ed., Lippincott, Leslie
- Theoretical Nursing – Development & Progress, 3RD and 4th ed., Lippincott William & Wilkins, Afaf Ibrahim MeleisTomey. M.A. &Alligood, M.R. (2002). Nursing Theorists and Their Work (5thed)St. Louis, Missouri: Mosby, Inc.
- Alligood, M.R. &Tomey, A.M. (2002). Nursing Theory Utilization and Application (2nd ed). St. Louis, Missouri: Mosby, Inc.
- Leddy, S. & Pepper, J.M. (1998). Conceptual Bases of Professional Nursing (4th ed). Philadelphia: Lippincott Williams & Wilkins
- McEwen, M. & Wills, E. (2002). Theoretical Basis for Nursing. Philadelphia: Lippincott Williams & Wilkins
- Parker, M. (2001). Nursing Theories and Nursing Practice. Philadelphia: F.A. Davis

| YEAR I SEMESTER I | |
|-----------------------|--------------------------------------|
| ITEM NUMBER | COURSE DESCRIPTION |
| TITLE | ADVANCE BIOSTATISTICS& USING OF SPSS |
| PROGRAM COURSE NUMBER | MSN-NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR I, SEMESTER I |
| COURSE PRE-REQUISITE | |

Course Description:

This course is designed to provide knowledge for effective use of biostatistics in translational nursing research to include: descriptive and inferential statistical analyses, probability theory, hypothesis testing and measures of central tendency, parametric and nonparametric analyses. Skills acquired by the student will assist in the critical appraisal of research for evidence-based practice with a focus on comprehension of consistency between research designs and statistical tests (correlation, regression, t-tests, analysis of variance and nonparametric tests). Additional skills include use of statistical software packages to practice analysis and interpretation of statistical tests.

Course Objectives:

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

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

Teaching/Learning Strategies:

- Interactive lecture
- Tutorial – on data organization, tabulation, calculation of statistics, use of statistical package, Classroom exercises, organization and tabulation of data
- Computing descriptive and inferential statistics; vital and health statistics and use of computer for data entry and analysis using statistical package.

Evaluation Criteria

| Evaluation Scheme | | |
|-----------------------------|-----|-----------------------|
| CRITERIA | | |
| INTERNAL EVALUATION 50% | | FINAL EXAMINATION 50% |
| TAKE HOME ASSIGNMENT | 30% | FINAL PAPERS |
| QUIZZES/MIDTERM EXAMINATION | 20% | |
| TOTAL 100% | | |

Unit Objectives

Unit I: Introduction to Biostatistics

At the end of this unit, learner will be able to:

- 1) Explain the basic concepts and terminology used in biostatistics including the various kinds of variables, measurement, and measurements of scales
- 2) Describe concepts, types, significance and scope of statistics, meaning of data, sample, parameter, type and levels of data and their measurement

Unit II: Understanding the Meaning of Data

At the end of this unit, learner will be able to:

- 1) Explain how data can be appropriately organized and displayed.
- 2) Describe descriptive statistics including: measures of central tendency (e.g. mean, median and mode) and measures of dispersion (e.g. range, percentiles, variance, quartile deviation mean deviation and standard deviation) and its application.

Unit III: Probability

At the end of this unit, learner will be able to:

- 1) Discuss probability and chance:
 - Probability of events, probability distribution and odd of events
 - Conditional probability and its applications in computing Sensitivity & Specificity
 - Binomial probability distribution
 - Normal probability distribution and applications of normal probability curve
- 2) Discuss non-probability and chance:

Unit IV: Sampling methodology

At the end of the unit learner will be able to:

- 1) Explain sample distribution of the sample mean.
- 2) Discuss estimation of population mean: point estimation and confidence intervals.
- 3) Describe sample size determination for estimation of population mean.
- 4) Discuss bias chance and confounding factors.
- 5) Explain the central limit theorem and its application

Unit V: Hypothesis Testing

At the end of the unit learner will be able to:

- 1) Explain basic elements of testing hypothesis, P-value and its application
- 2) Discuss hypothesis testing for:
 - population mean,
 - paired comparisons,
 - population proportion,
 - population variance
- 3) Describe type I , type II error and power of test
- 4) Discuss measures of Association between exposure and outcomes: Odds Ratio (OR) and Relative Risk (RR)
- 5) Discuss measures of impact of an exposure: Attributable Risk, Casual Inference

Unit VI: Inferential Statistics:

At the end of the unit learner will be able to:

- 1) Determine Inference regarding means:
 - One and two sample/paired (T-test),

- Chi-square test,
 - Z-Test,
 - F-Test,
 - ANOVA,
- 2) McNemar test and their applications
 - 3) Discuss Regression and Correlation

Unit VII: Use of Computers for data analysis

At the end of the unit learner will be able to:

- 1) Discuss the use statistical package. Including SPSS,
- 2) Elucidate the Epi info

Course Schedule

| Unit # | TOPIC | Faculty |
|-----------------|---|----------------|
| Unit I | Introduction to Biostatistics <ul style="list-style-type: none"> • Explain the basic concepts and terminology used in biostatistics including the various kinds of variables, measurement, and measurements of scales. • Describe concepts, types, significance and scope of statistics, meaning of data, sample, parameter, type and levels of data and their measurement. | |
| Unit II | Understanding the meaning of data <ul style="list-style-type: none"> • Explain how data can be appropriately organized and displayed. • Describe descriptive statistics including: measures of central tendency (e.g. mean, median and mode) and measures of dispersion (e.g. range, percentiles, variance, quartile deviation mean deviation and standard deviation) and its application. | |
| Unit III | Probability <ul style="list-style-type: none"> • Discuss probability and chance: <ul style="list-style-type: none"> ○ Probability of events, probability distribution and odd of events. ○ Conditional probability and its applications in computing Sensitivity & Specificity. • Binomial probability distribution. • Normal probability distribution and applications of normal probability curve. | |
| Unit IV | Sampling methodology <ul style="list-style-type: none"> • Sample distribution of the sample mean. • Estimation of population mean: point estimation and confidence intervals • Sample size determination for estimation of population mean. • Bias chance and confounding factors. • Central limit theorem and its application. | |
| Unit V | Hypothesis Testing <ul style="list-style-type: none"> • Explain basic elements of testing hypothesis, P-value and its application. • Discuss hypothesis testing for: <ul style="list-style-type: none"> ○ population mean, ○ paired comparisons, ○ population proportion, | |

| | | |
|-----------------|--|--|
| | <ul style="list-style-type: none"> ○ population variance • Describe type I, type II error and power of test. • Discuss measures of Association between exposure and outcomes: Odds Ratio (OR) and Relative Risk (RR). • Discuss measures of impact of an exposure: Attributable Risk, Casual Inference | |
| Unit VI | Inferential Statistics: <ul style="list-style-type: none"> • Determine Inference regarding means: <ul style="list-style-type: none"> ○ one and two sample/paired (T-test), ○ Chi-square test, ○ Z-Test, ○ F-Test, ○ ANOVA, ○ McNemar test and their applications • Discuss Regression and Correlation | |
| Unit VII | Use of Computers for data analysis <ul style="list-style-type: none"> • Use statistical package. Including SPSS, Epi info | |

Table of Specification

| Bloom's Taxonomy | | | | |
|--|--------------------------------------|--------------------|---|---------------|
| Fundamentals of Biostatistics & Using of SPSS | Knowledge & Comprehension | Application | Analysis, Synthesis & Evaluation | TOTALS |
| Unit – I. Introduction to Biostatistics | 2% | 3% | 5% | 10% |
| Unit – II Understanding the meaning of data | 2% | 3% | 5% | 10% |
| Unit – III Probability | 3% | 5% | 5% | 13% |
| Unit – IV Sampling Methodology | 4% | 8% | 8% | 20% |
| Unit – V Hypothesis Testing | 4% | 8% | 8% | 20% |
| Unit – VI Inferential Statistics | 4% | 4% | 4% | 12% |
| Unit – VII Use of Computers for Data Analysis | 5% | 5% | 5% | 15% |
| TOTAL | 24% | 36% | 40% | 100% |

Suggested Text Books:

- Kuzma, J. W. (1984). *Basic Statistics for Health Sciences*. Mayfield Publishing Company.
- Lyman, O. (1988). *An introduction to Statistical Methods and Data Analysis*. PWS Publishing Company.

- Ibrahim. M. (2001). *Biostatistics & Research Methods*: Statistics for Medical students, Clinical Researchers & Nurses. Al-Hassan publisher. Lahore
- Gildings. D. B, & Douglass. C. W. (1985). *Biostats*: A primer for Health Care Professionals. CAVCA Publisher. Carolina.

| YEAR I SEMESTER II | |
|----------------------|----------------------------|
| ITEM NUMBER | COURSE DESCRIPTION |
| TITLE | ADVANCED HEALTH ASSESSMENT |
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR I, SEMESTER II |
| COURSE PRE-REQUISITE | BASIC PATHOPHYSIOLOGY |

Course Description:

This course focuses on the adult assessment, reasoning, and decision making skills required by the advanced practice nurse in order to formulate a comprehensive health data base for adult clients and to develop accurate diagnoses on which to base plans of care. Students will enhance their assessment skills through the exploration of selected clinical symptoms and physical findings.

Course Objectives

At the end of this course, the learner should be able to:

- 1) Demonstrate the ability to perform a focused or comprehensive advanced health assessment of clients across the lifespan and along the health/illness continuum.
- 2) Identify normal and abnormal findings as appropriate to client presentation.
- 3) Synthesize health assessment information to formulate differential diagnoses.
- 4) Articulate when to seek further consultation or make a referral to a colleague.
- 5) Anticipate emergent, urgent and life-threatening situations.
- 6) Demonstrate the ability to conduct or select appropriate screening and diagnostic interventions interpret results, and determine appropriate follow-up.
- 7) Incorporate client choice, current legislation and professional standards into clinical reasoning and decision-making.
- 8) Discuss various health promotion and illness prevention strategies one might utilize to support clients in improving and restoring health, and preventing injury, illness, disease, and complications.

Teaching/Learning Strategies:

This course is facilitated by providing lectures from expert clinicians followed by practice in clinics settings.

Evaluation Criteria

| Evaluation Criteria | | | |
|-------------------------|-----|----------------------|-----|
| | | CRITERIA | |
| INTERNAL EVALUATION | 50% | EXTERNAL EXAMINATION | 50% |
| QUIZZES/MIDTERM EXAM | 30% | FINAL EXAMINATION | |
| PERFORMANCE EXAMINATION | 20% | | |
| | | TOTAL 100% | |

Physical Assessment Equipment:

Each student will be required to have the following equipment's at each laboratory and clinical experience for completing physical assessment:

- 1) 1 tuning fork (256 Hz) and a 512 Hz tuning fork
- 2) Stethoscope with bell and diaphragm end pieces
- 3) Cloth, retractable tape measure (marked in cm)
- 4) Otoscope/ ophthalmoscope (optional)
- 5) Reflex hammer
- 6) Pen light, flashlight or torch
- 7) Pocket vision screener/ Snellen chart
- 8) Sharp object (sterile pin or tongue blade)
- 9) Watch with second hand
- 10) Tongue depressor
- 11) Thermometer
- 12) Sphygmometer
- 13) Gloves surgical/plastic disposable
- 14) Paper ,pen and pencil.

Unit Objectives**Unit I: History Taking, Recording, Cultural Awareness, and Equipment Needed for The Exam.**

At the end of the unit learners will be able to:

- 1) Identify purpose of health appraisal for episodic/limited and comprehensive visits
- 2) Utilize various interviewing techniques appropriately.
- 3) Differentiate components of a health history: chief complain (CC), history of present illness (PHI), medical history, social history, major illnesses, allergies, infections immunizations, occupational history.
- 4) Genetic: make Genogram diagram.
- 5) Obtain information on each system (review of System) which includes:
- 6) Constitutional symptoms, skin, head, eyes, ears, nose, throat, respiratory tract, breasts, cardiovascular, gastro-intestinal tract, genitourinary tract, endocrine system, musculoskeletal system, lymph nodes, nervous system, sexual functions.
- 7) Able to use correct technique of examination with accurate sequence inspection, palpation, percussion, auscultation.
- 8) Plot collected data on the growth chart.
- 9) Differentiate normal and abnormal development in growing child and adult.
- 10) Calculate body Mass index (BMI) and understand normal and abnormal findings
- 11) Document findings appropriately

Unit II: Examination of Skin includes: Skin, Hair and Nails

At the end of the unit learners will be able to:

- 1) Review anatomy and function of skin, hair, nails
- 2) Describes relevant history pertaining to skin, hair, nails
- 3) Describes and distinguish different skin lesions
- 4) Describe normal and abnormal physiological changes and assessment findings evident in skin, hair, nails of geriatric clients.
- 5) Inspect and palpates skin for hygiene, color, temperature, moisture, texture, thickness, elasticity and vascularity.
- 6) Inspects and palpates scalp and hair for color, texture, distribution and lesions.
- 7) Inspects and palpates finger and toe nails for hygiene, color, shape,
- 8) Document findings appropriately.
- 9) Identify common abnormalities like

- Hair Disorders
 - Nails: Infection
 - Nails: Injury
 - Nails: Changes Associated with Systemic Diseases
 - Nails: Periungual Growths
 - Assess skin for lesions like eczema, acne,
- 10) Differentiate viral infections and fungal infections in the light of skin assessment.

Unit III: Head, Eye, Ear, Nose, and Throat (HEENT)

At the end of the unit learners will be able to:

- 1) Collect pertinent historical data related to patients with HEENT problems.
- 2) Demonstrate advanced head and neck assessment.
- 3) Discuss findings normal and abnormal for client with HEENT complaints.
- 4) Apply geriatric and cultural considerations when assessing clients.
- 5) Document findings appropriately.
- 6) Plan nursing care based on assessment data, including immediate and longer range planning

Unit IV: Thorax

At the end of the unit learners will be able to:

- 1) Collect pertinent historical data related to thorax complaints.
- 2) Apply diagnostic reasoning process to clients with thorax complaints.
- 3) Demonstrates advanced pulmonary and breast assessment.
- 4) Discuss classic positive and negative findings for clients with thorax complaints.
- 5) Apply geriatric and cultural considerations when assessing clients with thorax complaints.
- 6) Document findings.
- 7) Differentiate and label patient problem
- 8) Plan nursing care based on assessment data, including immediate and longer range (3-6 months) planning

Unit V: Cardiovascular and Peripheral Vascular

At the end of the unit learners will be able to:

- 1) Collect pertinent historical data related to chest and lungs complaint.
- 2) Apply diagnostic reasoning process to client with cardiovascular and peripheral vascular complaints.
- 3) Demonstrates advanced cardiovascular and peripheral vascular assessment.
- 4) Discuss classic positive and negative findings for clients with cardiovascular and peripheral vascular complaints.
- 5) Apply geriatric and cultural considerations when assessing clients with cardiovascular and peripheral vascular complaints.
- 6) Document findings.
- 7) Differentiate and label patient problem.
- 8) Plan nursing care based on assessment data, including immediate and longer range (3-6 months) planning.

Unit VI: Abdomen

At the end of the unit learners will be able to:

- 1) Collect pertinent historical data related to abdominal complaints
- 2) Apply diagnostic reasoning process to client with abdominal complaints.
- 3) Demonstrate advanced abdominal assessment.
- 4) Discuss classic positive and negative findings for clients with abdominal complaints.

- 5) Apply geriatric and cultural considerations when assessing clients with abdominal complaints.
- 6) Document findings.
- 7) Differentiate and label patient problem.
- 8) Plan nursing care based on assessment data, including immediate and longer range (3-6 months) planning.

Unit VII: Musculoskeletal

At the end of the unit learners will be able to:

- 1) Collect pertinent historical data related to musculoskeletal complaints.
- 2) Apply diagnostic reasoning process to client with musculoskeletal complaints.
- 3) Demonstrate advanced musculoskeletal assessment.
- 4) Discuss classic positive and negative findings for clients with musculoskeletal complaints.
- 5) Apply geriatric and cultural considerations when assessing clients with musculoskeletal complaints.
- 6) Document findings.
- 7) Differentiate and label patient problem.
- 8) Plan nursing care based on assessment data, including immediate and longer range (3-6 months) planning.

Unit VIII: Male and Female Genitalia

At the end of the unit learners will be able to:

- 1) Collect historical data
- 2) Demonstrate advanced assessment of male and female genitalia
- 3) Discuss normal and abnormal findings
- 4) Assess all age groups infant, children, geriatric and adult populations.
- 5) Document findings appropriately.
- 6) Collect appropriate equipments for procedures (Pap smear, rectal exam)
- 7) Provide appropriate privacy when assessing patient and apply cultural consideration.

Unit IX: Neurological and Mental Status

At the end of the unit learners will be able to:

- 1) Collect pertinent historical data.
- 2) Apply diagnostic reasoning process to client
- 3) Demonstrate advanced assessment technique.
- 4) Discuss classic positive and negative findings for clients
- 5) Document findings.
- 6) Differentiate and label patient problem
- 7) Plan nursing care based on assessment data, including immediate and longer range (3-6 months) planning.

Course Schedule

| Unit # | Topic | Facilitator/Speaker |
|---------------|---|----------------------------|
| Unit 1 | History taking, and Review of system | |
| Unit 2 | Examination of Skin (skin, hair & nails) | |
| Unit 3 | Examination of HEENT | |
| Unit 4 | Examination of Thorax | |
| Unit 5 | Cardiovascular and Peripheral Vascular Assessment | |
| Unit 6 | Examination of Abdomen | |

| | | |
|--------|--|--|
| Unit 7 | Examination of Musculoskeletal System | |
| Unit 8 | Examination of Male and Female Genitalia, Rectum, Breast | |
| Unit 9 | Neurological and Mental Exam | |

Table of Specifications

| Bloom's Taxonomy | | | | |
|---|--------------------------------------|--------------------|---|---------------|
| Subject: Health assessment | Knowledge & Comprehension | Application | Analysis, Synthesis & Evaluation | TOTALS |
| Unit – I Taking, Recording, Cultural Awareness, and Equipment Needed for The Exam. | 4% | 5% | 6% | 15% |
| Unit – II Examination of Skin includes: Skin, Hair and Nails | 4% | 4% | 5% | 13% |
| Unit – III Head, Eye, Ear, Nose, and Throat (HEENT) | 2% | 4% | 4% | 10% |
| Unit – IV Thorax | 3% | 3% | 5% | 11% |
| Unit – V Cardiovascular and Peripheral Vascular | 3% | 3% | 5% | 11% |
| Unit – VI Abdomen | 3% | 3% | 5% | 11% |
| Unit – VII Musculoskeletal | 3% | 3% | 5% | 11% |
| Unit – VIII Male and Female Genitalia | 3% | 3% | 3% | 9% |
| UNIT – IX Neurological and Mental Status | 2% | 2% | 5% | 9% |
| TOTALS | 27% | 30% | 43% | 100% |

Reference:

- Bicklay, L. S. (1999). *Bates' guide to physical examination and history taking* (7thed). Philadelphia: J.B. Lippincott.
- Cox, C. H. (1997). *Clinical applications of nursing diagnosis* (3rd ed).
- DeGowin, R. L., & Brown, D. D. (2000). *Degowin's diagnostic examination* (7th ed.). New York: McGraw-Hill.
- Fuller, J. & Schaller - Ayers, J. (2000). *Health Assessment: A Nursing approach*. (3rded.). Philadelphia: J.B. Lippincott.
- Jarvis, C. (1996). *Physical examination & health assessment* (2nded). Philadelphia: Saunders.
- Mc Farland, G. K, et. al. (1997). *Nursing diagnosis and intervention planning for patient care chapter 1 & 2* (3rd ed).

- Munro, J. F., & Campbell, I.W. (2000). *Macleod's clinical examination* (10th ed). Edinburgh:Churchhill Livingstone.
- Thompson, B. (1991). *Clinical manual of health assessment*. (4th ed).St.Louis:Mosby.
- Weber, J.R. (2001). *Nurses' handbook of health assessment* (4thed).Philadelphia:Lippincott.
- Wilson, S. F; Giddens J. F. (2001). *Health assessment for nursing practice* (2nd ed).St. Louis: Mosby.

| YEAR I SEMESTER I | |
|----------------------|---------------------------------------|
| ITEM NUMBER | COURSE DESCRIPTION |
| TITLE | PATHOPHYSIOLOGY FOR ADVANCED PRACTICE |
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR I, SEMESTER I |
| COURSE PRE-REQUISITE | |

Course Description:

This course is designed to present an orientation to disease as disordered physiology. Course content focuses on alterations in cell function and systemic manifestations using selected, prevalent disease states across the life span. It is intended to enable advanced practice nurses to understand how and why the symptoms and signs of various conditions appear. In approaching disease as disordered physiology, this course analyzes the mechanism(s) of production of the symptoms and signs of different disease syndromes. In doing so, it recognizes the student's and advanced practice nurse's need to understand the mechanism(s) underlying the disease and its clinical manifestations so that rational therapies can be devised. Thus, appropriate screening and diagnostic laboratory evaluative methods will also be included.

COURSE OBJECTIVES:

ON COMPLETION OF THIS COURSE, STUDENT WILL BE ABLE TO:

- 1) Analyze the relationship between normal physiologic and pathological phenomena produced by altered states across the life span
- 2) Describe the developmental physiology, normal etiology, pathogenesis, and clinical manifestations of commonly found/seen altered health states.
- 3) Analyze data with respect to diagnosing client problems.
- 4) Interpret the results of procedures and laboratory tests used for diagnosis of the specific altered health states/organ system alterations.
- 5) Analyze physiologic responses to illness and treatment modalities.
- 6) Apply current research-based knowledge regarding pathological changes in specific disease states.

Teaching/learning Strategies:

- Interactive Lecture
- Discussions
- Case studies presentations

Evaluation Criteria

| Evaluation Criteria | | |
|-------------------------------------|-----|--------------------------|
| CRITERIA | | |
| INTERNAL EVALUATION 50% | | EXTERNAL EXAMINATION 50% |
| MIDTERM EXAM/QUIZZES | 20% | FINAL EXAMINATION |
| CASE STUDY PRESENTATION (3) | 30% | |
| (DUAL ASSIGNMENT WITH PHARMACOLOGY) | | |
| TOTAL 100% | | |

Unit Objectives

Unit I: Cell Function and Cellular Proliferation:

At the end of this unit student will be able to:

- 1) Review of general principles of cell biology, genetics, and the underlying mechanisms of pain
- 2) Recognize the functional component of the cell and its functions.
- 3) Explain the relationships among DNA, genes and chromosomes
- 4) Describe the pathways of cell communication and the phases of cell cycle (cell growth, replication their genetic material, protein synthesis mitosis and cytokinesis,)
- 5) Differentiate anabolism and catabolism
- 6) Discuss the genetic control of cell function and inheritance

Unit II: Infection, Immunity and Inflammation Process

At the end of this unit student will be able to:

- 1) Explain the process of infections, inflammations and immunity
- 2) Describe the pathogenesis of disorders of white blood cells deficiencies
- 3) Describe the mechanism of inflammatory processes in the human cells
- 4) Explain manifestation of leukemia in terms of altered cell differentiation
- 5) Distinguish the lymph proliferative disorders associated with Hodgkin's disease and non-Hodgkin's lymphoma
- 6) Differentiate the signs and symptoms of Hodgkin's disease and non-Hodgkin's lymphoma

Unit III: Gastrointestinal Disorders

At the end of this unit student will be able to:

- 1) Review structure and organization of the gastrointestinal tract (upper and lower) and its function including motility, secretory functions, digestion and absorption
- 2) Explain how the nervous system controls the gastrointestinal tract.
- 3) Identify the gastrointestinal hormones and how they control the process of digestion
- 4) Review physiologic mechanisms involved in anorexia, nausea and vomiting
- 5) Discuss the Pathophysiology of peptic ulcer disease.
- 6) Understand the physiology, manifestations and diagnostic evaluation of different types of hepatitis
- 7) Comprehend the physiology, manifestations and diagnostic evaluation of cirrhosis of liver
- 8) Understand the physiology, manifestations and diagnostic evaluation of cholecystitis and pancreatitis

Unit IV & V: Cardiovascular & Coagulation Disorders

At the end of this unit student will be able to:

- 1) Review the function and distribution of blood flow and blood pressure in the systemic and pulmonary circulations
- 2) Understand the term preload and after load and cardiac contractility
- 3) State the formula for calculating the cardiac output and explain the effect that venous return , cardiac contractility, and heart rate have on cardiac output
- 4) Review cardiac reserve and relate it to the Frank-Starling mechanism
- 5) Discuss the mechanism of atherosclerosis and arteriosclerosis
- 6) Describe the pathological mechanism of coronary heart disease such as angina
- 7) Understand the pathogenesis of coronary heart disease such as myocardial infarction

- 8) Review the conduction system in relation to mechanical function of heart
- 9) Identify life threatening arrhythmias in terms of its manifestation
- 10) Understand the physiology, and manifestations heart failure.

Unit VI: Respiratory Disorders

At the end of this unit student will be able to:

- 1) Review structural organization of respiratory system, exchange of gases between atmosphere and the lung and control of breathing
- 2) Understand the pathology, manifestations and diagnostic evaluations of tuberculosis.
- 3) Describe the pathology, manifestations and diagnostic evaluations of obstructive airway disease such as bronchial asthma
- 4) Explain the mechanism of pulmonary vascular disorders such as pulmonary respiratory distress
- 5) Explain the mechanism of pulmonary vascular disorders such as pulmonary embolism
- 6) Describe the pathology, manifestations and diagnostic evaluations of obstructive airway disease such as chronic bronchitis

Unit VII: Urologic/Renal Disorders

At the end of this unit student will be able to:

- 1) Review anatomy and physiology of renal system.
- 2) Understand the mechanism of acid base balance in terms of metabolic acidosis and alkalosis.
- 3) Describe the Pathophysiology, manifestations and diagnostic evaluation of acute and chronic renal failure.
- 4) Characterize Wilms' tumor in terms of age of onset possible oncogenic origin, manifestations and treatment.

Unit VIII: Hormones and Endocrine Disorders

At the end of this unit student will be able to:

- 1) Review the mechanism of hormonal control in terms of its actions, classification, metabolism and elimination
- 2) Review the general aspect of altered endocrine functions
- 3) Review the mechanism of hormonal control of blood glucose
- 4) Understand the physiology, manifestations and diagnostic evaluation of disorders of diabetes Type I & II
- 5) Comprehend the physiology, manifestations and diagnostic evaluation of thyroid disorders (hyper and hypo)
- 6) Relate the functions of adrenal cortical hormones to Addison's disease and Cushing's syndrome.

Unit IX: Genetics and Mutation

At the end of this unit student will be able to:

- 1) Review the mechanism of genetic control
- 2) Describe the pathogenesis of gene mutation
- 3) Describe process of cell proliferation and cell differentiation
- 4) Describe the characteristics, pathogenesis, manifestation and diagnostic evaluation of benign and malignant neoplasm any type of malignant disorder.

Unit X: Neurological Disorders

At the end of this unit student will be able to:

- 1) Review structure and functions of the brain, spinal cord and autonomic nervous system
- 2) Describe the physiology, types, manifestations and diagnostic evaluation of Parkinson's disease
- 3) Describe the physiology, types, manifestations and diagnostic evaluation of myasthenia gravis
- 4) Describe the physiology, types, manifestations, types and diagnostic evaluation of different kinds of headaches

- 5) Understand the physiology, types, manifestations and diagnostic evaluation of cerebral vascular accident
- 6) Describe the physiology, types, manifestations and diagnostic evaluation of seizure disorders

Unit XI: Psychiatric Disorders

At the end of this unit student will be able to:

- 1) Explain the physiology, types, manifestations and diagnostic evaluation of anxiety
- 2) Describe the physiology, types, manifestations and diagnostic evaluation of Depression
- 3) Discuss the physiology, types, manifestations and diagnostic evaluation of schizophrenia.
- 4) Describe the physiology, types, manifestations and diagnostic evaluation of manic disorder.

COURSE SCHEDULE

| Unit # | Topic | Faculty |
|-------------|--|---------|
| Unit I | Cell Function and Cellular Proliferation: <ul style="list-style-type: none"> Review of general principles of cell biology, genetics, and the underlying mechanisms of pain. Functional component of the cell and its functions. Relationships among DNA, genes and chromosomes Pathways of cell communication and the phases of cell cycle (cell growth, replication their genetic material, protein synthesis mitosis and cytokinesis,) Anabolism and catabolism Genetic control of cell function and inheritance | |
| Unit II | Infection, Immunity and Inflammation <ul style="list-style-type: none"> Process of infections, inflammations and immunity Pathogenesis of disorders of white blood cells deficiencies Mechanism of inflammatory processes in the human cells Manifestation of leukemia in terms of altered cell differentiation Difference between lymphoproliferative disorders associated with Hodgkin's disease and non-Hodgkin's lymphoma Signs and symptoms of Hodgkin's disease and non-Hodgkin's lymphoma | |
| Unit III | Digestive system/Gastrointestinal Disorders <ul style="list-style-type: none"> Structure and organization of the gastrointestinal tract (upper and lower) and its function including motility, secretory functions, digestion and absorption The nervous system and its control in gastrointestinal tract. Gastrointestinal hormones and their control process of digestion Review of physiologic mechanisms involved in anorexia, nausea and vomiting Pathophysiology of peptic ulcer disease. Pathophysiology, manifestations and diagnostic evaluation of different types of hepatitis Pathophysiology, manifestations and diagnostic evaluation of cirrhosis of liver Pathophysiology, manifestations and diagnostic evaluation of cholecystitis and pancreatitis | |
| Unit IV & V | Cardiovascular /Coagulation/Hematological Disorders <ul style="list-style-type: none"> Review the function and distribution of blood flow and blood pressure in the systemic and pulmonary circulations Preload and after load and cardiac contractility Formula for calculating the cardiac output and the effect that venous return , cardiac contractility, and heart rate have on cardiac output Cardiac reserve and relate it to the frank –Starling mechanism Mechanism of atherosclerosis and arteriosclerosis | |

| | | |
|------------------|--|--|
| | <ul style="list-style-type: none"> • Pathological mechanism of coronary heart disease such as angina • Pathogenesis of coronary heart disease such as myocardial infarction • Conduction system and its relation to mechanical function of heart • Life threatening arrhythmias in terms of its manifestation • Physiology and manifestations of heart failure. | |
| Unit VI | Respiratory Disorders <ul style="list-style-type: none"> • Review structural organization of respiratory system, exchange of gases between atmosphere and the lung and control of breathing • Pathophysiology, manifestations and diagnostic evaluations of tuberculosis. • Pathology, manifestations and diagnostic evaluations of obstructive airway disease such as bronchial asthma • Explain the mechanism of pulmonary vascular disorders such as pulmonary respiratory distress • Mechanism of pulmonary vascular disorders such as pulmonary embolism • Pathophysiology, manifestations and diagnostic evaluations of obstructive airway disease such as chronic bronchitis | |
| Unit VII | Urologic/Renal Disorders <ul style="list-style-type: none"> • Anatomy and physiology of renal system. • Mechanism of acid base balance in terms of metabolic acidosis and alkalosis. • Pathophysiology, manifestations and diagnostic evaluation of acute and chronic renal failure. • Characteristics of Wilms' tumor in terms of age of onset possible oncogenic origin, manifestations and treatment. | |
| Unit VIII | Hormones and Endocrine Disorders <ul style="list-style-type: none"> • Mechanism of hormonal control in terms of its actions, classification, metabolism and elimination • Review the general aspect of altered endocrine functions • Mechanism of hormonal control of blood glucose • Pathophysiology, manifestations and diagnostic evaluation of disorders of diabetes Type I & II • Pathophysiology,, manifestations and diagnostic evaluation of thyroid disorders (hyper and hypo) • Relationship of the functions of adrenal cortical hormones to Addison's disease and Cushing's syndrome. | |
| Unit IX | Genetics and Mutation <ul style="list-style-type: none"> • Mechanism of genetic control • Pathogenesis of gene mutation • Process of cell proliferation and cell differentiation • Characteristics, pathogenesis, manifestation and diagnostic evaluation of benign and malignant neoplasm any type of malignant disorder. | |
| Unit X | Neurological Disorders <ul style="list-style-type: none"> • Structure and functions of the brain, spinal cord and autonomic nervous system • Physiology, types, manifestations and diagnostic evaluation of Parkinson's disease • Pathophysiology, types, manifestations and diagnostic evaluation of myasthenia gravis • Physiology, types, manifestations, types and diagnostic evaluation of different kinds of headaches • Pathophysiology, types, manifestations and diagnostic evaluation of cerebral | |

| | | |
|----------------|---|--|
| | vascular accident • Physiology, types, manifestations and diagnostic evaluation of seizure disorders | |
| Unit XI | Mental/Psychiatric Disorders • Physiology, types, manifestations and diagnostic evaluation of anxiety • Pathophysiology, types, manifestations and diagnostic evaluation of Depression • Physiology, types, manifestations and diagnostic evaluation of schizophrenia. • Pathophysiology, types, manifestations and diagnostic evaluation of manic disorder. | |

TABLE OF SPECIFICATION

| Bloom's Taxonomy | | | | |
|--|---------------------------|-------------|----------------------------------|--------|
| Subject: Pathophysiology for Advanced Practice | Knowledge & Comprehension | Application | Analysis, Synthesis & Evaluation | TOTALS |
| Unit – I. Cell Function and Cellular Proliferation | 2% | 2% | 4% | 8% |
| Unit – II Infection, Immunity and Inflammation | 3% | 4% | 5% | 12% |
| Unit – III Digestive system/ Gastrointestinal Disorders | 3% | 4% | 5% | 12% |
| Unit – IV & V Cardiovascular /Coagulation/ Hematological Disorders | 3% | 5% | 7% | 15% |
| Unit – VI Respiratory Disorders | 3% | 4% | 5% | 12% |
| Unit – VII Urologic/Renal Disorders | 2% | 1% | 4% | 7% |
| Unit – VIII Hormones and Endocrine Disorders | 3% | 4% | 5% | 12% |
| Unit – IX Genetics and Mutation | 2% | 2% | 2% | 06% |
| Unit – X Neurological Disorders | 3% | 4% | 5% | 12% |
| Unit – XI Mental/Psychiatric Disorders | 1% | 1% | 2% | 4% |
| TOTALS | 25% | 31% | 44% | 100% |

Recommended Reference Books

- Porth, C. M. (2004). Pathophysiology: Concepts of altered states. (7th Ed.) Philadelphia: Lippincott.
- Tierney, L. M., McPhee, S. J., & Papadakis, M. A. (2004). Current Medical Diagnosis & Treatment. (43rd Ed.). New York: McGraw-Hill.
- McCance, K.L. & Heuther, S. E. (2002). Pathophysiology: The biologic basis for disease in adults and children. (4th Ed.) St. Louis: Mosby.
- Porth, C. M. (2004). Pathophysiology: Concepts of altered states. (7th Ed.) Philadelphia: Lippincott. (pp 69-119)

| YEAR I SEMESTER I | |
|----------------------|--------------------|
| ITEM NUMBER | COURSE DESCRIPTION |
| TITLE | ACADEMIC WRITING-I |
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR I, SEMESTER I |
| COURSE PRE-REQUISITE | |

Course Description:

This course is designed to develop and enhance learners' receptive and productive language skills. It will help students to improve their reading speed as well as comprehension, at a deeper level. Focus will also be on developing writing skills.

Course Objectives

By the end of this course, students will be able to:

- 1) Use advance grammar
- 2) Identify the differences between academic writing and other types of writing.
- 3) Learn strategies to improve wiring styles
- 4) Use of past simple and past perfect tense in summary writing
- 5) Read and summarize simple nursing related texts / information
- 6) Write coherent paragraphs
- 7) Learn and use new vocabulary items
- 8) Write short applications using language of request
- 9) Make appropriate use of specified grammatical items
- 10) Write nursing objectives
- 11) Design resume
- 12) Identify the different types of formal letters.
- 13) Develop speed reading
- 14) Enhance reading skills: skimming and scanning

Teaching/Learning/ Strategies

- Interactive lectures, individual/ pair/ group discussions,
- Computer based language learning.

Course Expectations

- Reading with speed and understanding
- Reading summarizing
- Writing coherently
- Writing short applications

Evaluation Criteria

| CRITERIA | | |
|-------------------------|-----|--------------------------|
| INTERNAL EVALUATION 50% | | EXTERNAL EXAMINATION 50% |
| CLASS PARTICIPATION | 10% | FINAL EXAMINATION |
| SUMMARY WRITING | 10% | |
| MID-TERM EXAM /QUIZZES | 30% | |
| TOTAL 100% | | |

Course outline

Unit – I Advance Grammar

By the end of the unit, students will be able to:

- 1) Use of right word in right place.
- 2) Edit correct conjunctions / linking words.
- 3) Practice subject verb agreement.
- 4) Maintain important elements of grammar.

Unit – II Academic Writing

By the end of the unit, students will be able to:

- 1) Identify the differences between academic writing and other types of writing.
- 2) Include relevant information
- 3) Follow the basic pattern purpose, circumstances and action
- 4) Use of proper action verbs.

Unit – III APA style

By the end of the unit, students will be able to:

- 1) Learn strategies to improve writing styles
- 2) Use APA editorial style
- 3) Write in health and bio medical sciences
- 4) Understand plagiarism and use of quotation

Unit – IV Summarization and Reflection

By the end of the unit, students will be able to:

- 1) Read and analyze a reflective text
- 2) Include appropriate sentence structure
- 3) Use of past simple and past perfect tense in summary writing.
- 4) Write effective summary
- 5) Develop supporting ideas for detail
- 6) Arrange sentences a logical order
- 7) Restate the main idea effectively in the concluding sentences
- 8) Describe a person, object by incorporating all the skills learnt in this unit.

Unit – V Business / Formal Letter Writing

By end of the unit, students will be able to:

- 1) Know the purpose of writing formal letters.
- 2) Use formal language according to letters standards.
- 3) Identify the different types of formal letters.
- 4) Write quality business / formal letters.

Unit – VI Presentation Skills

By end of the unit, students will be able to:

- 1) Present their presentation effectively.
- 2) Differentiate between snap shot, short and long presentation.
- 3) Face barrenness of presentation by dealing technically.

Unit – VII writing skills

By end of the unit, students will be able to:

- 1) Precise the paragraph.
- 2) Write and evaluate essays.

- 3) Practice subject sub agreement.

Unit – VIII creating a career

By end of the unit, students will be able to:

- 1) Examine goals and interest with their skills and ability
- 2) Design resume
- 3) Identify main ingredients of resume
- 4) Write covering letters.

UNIT – IX How to interview people / Interviewing Skills

By end of the unit, students will be able to:

- 1) Identify objective
- 2) Understand role of interviewers and interviewees
- 3) Assessing the CV / resume and application
- 4) Read body language
- 5) Study and practice interviewing skills
- 6) Learn how to deal difficult interview questions

UNIT – X How to prepare for interview

By end of the unit, students will be able to:

- 1) Learn the difference between giving and taking interview
- 2) Behave and listen as an interviewee.
- 3) Answer the questions as an interviewee
- 4) Deal questions from sensitive issues.
- 5) Observe the difference between hearing and listening
- 6) Learn types of listening
- 7) Focus on benefits of better listening
- 8) Develop essential skills of active listening
- 9) Give feedback with positive aspects.

Table of Specifications

| Bloom's Taxonomy | | | | |
|--|--------------------------------------|--------------------|---|---------------|
| Subject Content | Knowledge & Comprehension | Application | Analysis, Synthesis & Evaluation | TOTALS |
| Unit – I Advance Grammar. | 3% | 2% | 4% | 9% |
| Unit – II Academ051NUMS2022ic Writing | 3% | 3% | 3% | 9% |
| Unit – III APA style | 3% | 3% | 3% | 9% |
| Unit – IV Summarization and Reflection | 3% | 4% | 4% | 11% |
| Unit – V Business / Formal Letter Writing | 3% | 3% | 3% | 9% |
| Unit – VI Presentation Skills | 3% | 5% | 3% | 11% |
| Unit – VII Writing skills | 3% | 3% | 3% | 9% |

| | | | | |
|--|-----|-----|-----|------|
| Unit – VIII Creating a career | 2% | 3% | 4% | 9% |
| UNIT – IX How to interview people / Interviewing Skills | 3% | 3% | 5% | 11% |
| UNIT – X How to prepare for interview | 4% | 4% | 5% | 13% |
| TOTALS | 28% | 33% | 37% | 100% |

References

1. American Psychological Association. Retrieved february 24, 2014, from <http://www.apa.org/>
2. Barnet, S., & Bedan, H. (1996). *Current issues and enduring questions: A guide to critical thinking argument with reading* (4th ed.). Boston: Bedford.
3. Davidson, G. (2005). *Get your message across: Improve your spelling*. London: Penguin.
4. Eastwood, J. (2004). *Oxford practice grammar*. Karachi: Oxford University Press.
5. Gelfand, H., & Charles J. Walker, J. C. (Eds.). (2001). *Mastering APA style: Instructor's resource guide* (5th ed.). Washington: American Psychological Association.
6. Gelfand, H., & Charles J. Walker, J. C. (Eds.). (2001). *Mastering APA style: Student's workbook and training guide* (5th ed.). Washington: American Psychological Association.
7. Howe, D. H., Kirkpatrick, T. A., & Kirkpatrick, D. L. (2004). *English for undergraduates*. Karachi: Oxford University Press.
8. 11. Murphy, R. (2004). *Murphy's English Grammar* (3rd ed.). New Delhi: Cambridge University Press.

| YEAR I SEMESTER I | |
|----------------------|----------------------|
| ITEM NUMBER | COURSE DESCRIPTION |
| TITLE | ETHICS IN HEALTHCARE |
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR I, SEMESTER I |
| COURSE PRE-REQUISITE | NURSING ETHICS |

Course Description:

This course studies philosophical ethics as practiced in the health care setting. As such, the course develops philosophical knowledge and, specifically, ethical awareness, ethical knowledge and skills. The course includes an introduction to several traditional moral theories, and using health care setting examples, works to develop student facility in those theoretical frameworks. Then the course progresses through a variety of ethical challenges faced contemporary health care. Those topics may include such as: euthanasia, modern fertility interventions, treatment of impaired newborns, mental illness, use of animals in research, professional ethical codes, scarce resources, genetic engineering, feminists issues, inter-cultural issues, and economics.

Course Objectives:

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

- 1) Discuss selected theoretical perspectives in ethics including ethics in Islamic perspective
- 2) Understand various competing ethical theories and be able to show the strengths and weaknesses of each.
- 3) List and explain the various principles of biomedical ethics.
- 4) Be conversant about many ethical issues raised by modern biomedical technology.
- 5) Help someone fill out an advance directive for health care. Formulate plans for implementing positions at interpersonal, institutional policy and/or governmental policy levels.
- 6) Generate a representation of one's own evolving ethical framework.

Course Format / Teaching & Learning Strategies:

- Lecture, Student presentation, Guest speakers and Cooperative learning in Small Group
- This format is grounded in active student participation, with the teacher often taking the role of "guide on the side," an approach that is associated with development of critical thinking and problem solving skills.
- This approach is in contrast to the "sage on the stage" model in which the teacher lectures for most of each class period while students remain more passive in the learning process.
- The course includes considerable reading and writing. In addition, there is a substantial discussion component to the course.

Evaluation Criteria:

| Evaluation Scheme | | |
|---------------------------|-----|--------------------------|
| CRITERIA | | |
| INTERNAL EVALUATION 50% | | EXTERNAL EXAMINATION 50% |
| QUIZZES/MIDTERM EXAM | 20 | FINAL EXAMINATION |
| CASE-BASED CLASSROOM TEST | 10% | |
| DEBATE | 10% | |
| POSITION PAPER | 10% | |
| TOTAL 100% | | |

Unit Objectives

Unit I: Social, Philosophical, and other historical forces Influences on the Development of Nursing

At the end of the unit learners will be able to:

- 1) Discuss the relationship between social need and the origin of the profession of nursing
- 2) Describe the relationship between moral reasoning and the origin of Nursing
- 3) Describe the mutually beneficial relationship between the broader society and its professions
- 4) Explain the effect of cultures prevailing belief system on the practice of nursing.
- 5) Identify how historic spiritual beliefs and religious practices influenced evolutionary changes in nursing
- 6) Discuss how the historical background of the status of women in various culture is related to practice of nursing.

Unit II: Ethical Theories

At the end of the unit learners will be able to analyze ethical theories:

- 1) Utilitarianism
- 2) Kantianism
- 3) Character ethics: Virtue-based Theory
- 4) Liberal individualism: Rights-based Theory
- 5) Communitarians: community based theory
- 6) Ethics of care : relationship based theory
- 7) Casuistry case based reasoning
- 8) Principle based, common morality theories

Unit III: Ethical Principles

At the end of the unit learners will be able to:

- 1) Elaborate Ethical Principles: Respect of Autonomy
- 2) Discuss the Ethical Principles: Nonmaleficence
- 3) Analyze the Ethical Principles: Beneficence
- 4) Synthesize the Ethical Principles: Justice
- 5) Describe the Professional patient relationship
- 6) Demonstrate Professional Behavior

Unit IV: Values Clarification and Development

At the end of the unit learners will be able to:

- 1) Define and differentiate personal, societal, professional, organizational, and normal values.
- 2) Explain the valuing process
- 3) Discuss how values are acquired
- 4) Describe values conflict and its implication for nursing care

Unit V: Ethical Dilemmas

At the end of the unit learners will be able to:

- 1) Definition and source of knowledge
- 2) Discuss Ways of thinking about ethics
- 3) Describe the Examples of ethical dilemmas.

Unit VI: Professional Ethics and Institutional Constraints in Nursing Practice

At the end of the unit learners will be able to:

- 1) Highlight the importance of nursing, some facts.
- 2) Explore the Multiple ethical obligations/ responsibilities
- 3) Discuss Moral distress
- 4) Elaborate Dynamic and loyalties.
- 5) Describe Nurse –doctor relationship.

Unit VII: Rights Obligations and Health Care

At the end of the unit learners will be able to:

- 1) Concepts of right
- 2) Rights and obligations in health care

Unit VIII: Policy, Ethics, and Health Care

At the end of the unit learners will be able to:

- 1) Describe historical, legislative and political background
- 2) Analyze health care policy-recent decades
- 3) Discuss ethical dimensions of health policy

Course Schedule

| Unit # | Topics | Faculty |
|----------|---|---------|
| Unit I | Social, Philosophical, and other historical forces Influences on the Development of Nursing. <ul style="list-style-type: none"> • The relationship between social need and the origin of the profession of nursing • The relationship between moral reasoning and the origin of Nursing • The mutually beneficial relationship between the broader society and its professions • The effect of cultures prevailing belief system on the practice of nursing. • Identify how historic spiritual beliefs and religious practices influenced evolutionary changes in nursing • The historical background of the status of women in various culture is related to practice of nursing. | |
| Unit II | <u>Ethical Theories</u> Ethical Theories part I <ul style="list-style-type: none"> • Utilitarianism • Kantianism • Character ethics: Virtue-based Theory • Liberal individualism: Rights-based Theory Ethical Theories II <ul style="list-style-type: none"> • Communitarians: community based theory • Ethics of care : relationship based theory • Casuistry case based reasoning • Principle based, common morality theories | |
| Unit III | <u>Ethical Principles</u> Respect of Autonomy <ul style="list-style-type: none"> • Informed consent • Decisional capacity • Competence • Surrogate decision-making • Advance directives: living wills, durable power of attorney of health care • Substituted Judgment Nonmaleficence <ul style="list-style-type: none"> • Normal. vs. beneficence • Withdrawing vs. withholding treatment • Ordinary vs. extraordinary Rx • Sustenance vs. medical technologies | |

| | | |
|------------------|--|--|
| | <ul style="list-style-type: none"> • Intended vs. foreseen effects • Optional vs. obligatory Rx • Killing vs. letting die <p>Beneficence</p> <ul style="list-style-type: none"> • Rules of beneficence • Paternalism: beneficence vs. autonomy • Futility • Balancing benefits, costs and risks (benefits vs. burden) • Ethics consultation and committees • End of life care <p>Justice</p> <ul style="list-style-type: none"> • Formal principle of justice • Material principles of justice • Theories of justice • Fair opportunity • Health care as right • Allocation of health care resources <p>Professional patient relationship</p> <ul style="list-style-type: none"> • Truth Telling • Privacy • Confidentiality • Fidelity <p style="text-align: center;">PROFESSIONAL BEHAVIOR</p> <ul style="list-style-type: none"> • Professional Virtues • Professional Caring • Exemplary Professional Behavior | |
| Unit IV | <p>Values clarification and development</p> <ul style="list-style-type: none"> • Define and differentiate personal, societal, professional, organizational, and normal values. • Valuing process <p>Values are acquired.</p> <ul style="list-style-type: none"> • Conflict and its implication for nursing care | |
| Unit V | <p>Introduction to ethics and Ethical dilemmas</p> <ul style="list-style-type: none"> • Definition and source of knowledge • Ways of thinking about ethics • Examples of ethical dilemmas | |
| Unit VI | <p>Professional ethics and institutional constraints in nursing practice.</p> <ul style="list-style-type: none"> • The importance of nursing, some facts. • Multiple ethical obligations/ responsibilities • Moral distress • Dynamic and loyalties. • Nurse –doctor relations. | |
| Unit VII | <p>Rights obligations and health care</p> <ul style="list-style-type: none"> • Concepts of right • Rights and obligations in health care | |
| Unit VIII | <p>Policy, Ethics, and Health Care</p> <ul style="list-style-type: none"> • Historical ,legislative and political background • Health care policy-recent decades • Ethical dimensions of health policy | |

Guideline for Debate (40%)

Each group will choose a topic. Please take prior appointment for your group for topic submission. All members are required to come for finalization of topic. Each group will have two teams. One team will present arguments in favor of topic (Pro team). The other team will present arguments in opposition to the topic. (Con team)

Each group will be required to submit reference file on the debate.

Each team will have 20 minutes.

- A member from Pro team presents arguments. 3 minutes
- A member from Con team will present argument. 3 minutes.
- Question and Answers for both group 10 minutes.
- Conclusion from both teams 2 minutes each.

Suggested topics for Debate.

- 1) Patients have right to live and die.
- 2) Abortions should be legalized.
- 3) Clients have right to know about their disease and prognosis.
- 4) Placebos should be permitted in Health care.
- 5) Clients have right to receive and refuse treatment.
- 6) Who deserves the priority for treatment? A child aged 5 years or a 55-year elderly man.
- 7) Who should make the decisions patient or family or health team?
- 8) Society benefit vs. patients' benefit (e.g. aids).
- 9) Should organs be sold or not
- 10) Should family be present during CPR / procedures or not.
- 11) Should the culture be respected or not while caring (When conflict with medicine).
- 12) Should learners practice / learn on patients or not.
- 13) Who should take care the spiritual need? Nurse or spiritual leader?
- 14) Should the literature be used from any source without acknowledgement or not.

Position Paper**Description:**

The position paper is a scholarly examination of a selected ethical issue, conflict, or dilemma confronted in healthcare generally and in nursing specifically. The position paper includes:

- Analysis of an ethical issue/conflict/dilemma in health care that nurses confront and on which they should take a position.
- Identification and support for two different positions (decisions and actions) that could reasonably be taken on the issue/conflict/dilemma.
- Rationale for one of the positions (the final position at this point in time) being more ethically justifiable.
- Speculation about the possible consequences of taking and acting on the final position.
- Description of how the final position could/should be implemented.

Approach: The position paper will be done individually. A recommended approach is to:

- A. Describe a recurring situation in which the ethical issue/conflict/dilemma occurs. Some people provide an example of a case that exemplifies this issue/conflict/dilemma, but this is not required.
- B. Analyze the ethical issue/conflict/dilemma inherent in the issue of interest, including:
 1. Identification of the persons involved, as well as the facts, assumptions, and underlying ethical concepts / values/ principles inherent in the situation description;
 2. Specification of the ethical issue/conflict/dilemma - this might be stated in the form of an

- ethical question to be answered by the positions;
 - 3. Description of the ethical issue/conflict/dilemma, e.g., what ethical concepts/values/principles are central and perhaps in conflict;
 - 4. Rationale for it being an ethical issue/conflict/dilemma in health care and for nurses/nursing.
- C. Identify at least two different positions (i.e., decision and corresponding action) that reasonably could be taken in response to the issue/conflict/dilemma.
- 1) Explicate one ethical position in response to this issue/conflict/dilemma.
 - State the position clearly.
 - Develop arguments supporting this position.
 - 2) Explicate a second ethical position in response to this issue/conflict/dilemma.
 - State the position clearly.
 - Develop arguments supporting this position.
- D. After considering both positions and their supporting arguments, identify your final position, indicating why you judge it to be more ethically sound than the other position that was considered.
- E. Briefly speculate about the consequences of acting on the final decision made, including consequences for self, patient(s), and others involved in the situation.
- F. Briefly describe how the position could/should be implemented.

Criteria:

- 1. Completeness, specificity, and accuracy of the analysis
- 2. Clarity, specificity, and relatedness of the two positions to the ethical issue/conflict/dilemma
- 3. Accuracy of the interpretations and application of the ethical concepts, values, principles, and frameworks (if relevant)
- 4. Logical nature of the arguments developed to support:
 - The alternative positions.
 - Final decision about the more ethically sound position
- 5. Realistic nature of the final position, suggested implementation, and possible consequences
- 6. Consistency among all components of the paper
- 7. Adherence to general standards for title page, headings, grammar, punctuation, use of references in body of paper, reference list, etc. (The Publication Manual of the American Psychological Association, 5th ed. is required for writing and format guidance.)

Position Paper: Process

Writing is a mode of learning. The act of writing about a subject helps one to understand that subject more deeply. In addition, writing develops skills of critical thinking and problem solving. Sharing of drafts with others for critique and subsequently revising those drafts helps your expression of ideas to be clear, precise and concise.

In order to promote the development of the position paper, the following sequence of writing activities will occur:

| S.# | Sequence of writing activities |
|-----|--|
| 1 | Initial identification of the ethical issue to be examined and shared with class. Include what you believe to be the inherent conflicting values or principles. Work as a group to provide feedback on each other's ideas (e.g., identify alternative positions, theoretical perspectives, and related actions). |
| 2 | Share an outline of your position paper with your group and discuss. |
| 3 | Share a detailed outline of your position paper with your group, including selected literature |
| 4 | Provide a rough draft of your paper for each member of your group. |
| 5 | Return edited copies of your group's papers and discuss. |
| 6 | Provide copies of your revised draft to your group members; discuss and edit. |
| 7 | Position Paper Presentations. Add feedback provided during presentation. |

Scoring of Position Paper:

| S. No. | COMPONENT | POSSIBLE SCORE |
|--------|---|----------------|
| 1 | DESCRIPTION OF ISSUE | 10 |
| 2 | ANALYSIS | 10 |
| 3 | FIRST POSITION | 15 |
| 4 | SECOND POSITION | 15 |
| 5 | FINAL POSITION | 15 |
| 6 | POSSIBLE CONSEQUENCES | 05 |
| 7 | IMPLEMENTATION | 05 |
| 8 | GRAMMAR, PUNCTUATION, ORGANIZATION, LOGICAL DEVELOPMENT | 10 |
| 9 | ACCURATE USE OF APA STYLE | 10 |
| TOTAL | | 100 |

Table of specification

| Bloom's Taxonomy | | | | |
|--|------------------------------|-------------|------------------------------------|-------------|
| Subject: Ethics in Health Care | Knowledge & Comprehension | Application | Analysis, Synthesis &Evaluation | TOTALS |
| Unit – I Social, Philosophical, and other historical forces Influences on the Development of Nursing | 5% | 5% | 5% | 15% |
| Unit – II Ethical Theories | 6% | 6% | 8% | 20% |
| Unit – III Ethical Principles | 5% | 4% | 3% | 12% |
| Unit – IV Values Clarification and Development | 4% | 3% | 5% | 12% |
| Unit – V Ethical Dilemmas | 3% | 3% | 3% | 9% |
| Unit – VI Professional Ethics and Institutional Constraints in Nursing Practice and Care | 4% | 5% | 5% | 14% |
| Unit – VII Rights Obligations and Health Care | 3% | 3% | 2% | 8% |
| Unit – VIII Policy, Ethics, and Health | 3% | 3% | 4% | 10% |
| TOTALS | 33% | 32% | 35% | 100% |

References:

- Burkhardt, M., A. & Nathaniel A.K (2008) ethics & issues in contemporary nursing (ed 3rd) Delmar United States.
- Davis, A., & Aroskar, M. (2010). Ethical Dilemmas & Nursing Practice. New York: Appleton-Century-Crofts.
- Thompson, I., Melia, K., & Boyd, K. (2000). Nursing Ethics (4thed.). Edinburgh: Churchill Livingstone.

Suggested Articles:

- Armstrong, A. E. (2006). Towards a strong virtue ethics for nursing practice. *The author. Journal compilation: Nursing Philosophy*. 7: 110-124.
- Berggren, I., da Silva, A. B., & Severinsson, E. (2005). Core ethical issues of clinical nursing supervision. *Nursing and Health Sciences*. 7: 21-28.
- Gardiner, P. (2003), (accessed date: Nov 2005). A virtue ethics approach to moral dilemmas in medicine. *Series A virtue ethics approach to moral dilemmas in medicine* Journal of Medical Ethics <http://jme.bmjournals.com/cgi/content/full/29/5/297>.
- Heubal, F, & Andorno, B, N. (2005). The contribution of Kantian moral theory to contemporary medical ethics: A critical analysis. *Medicine, Health Care and Philosophy*, 8:5(18), 5-18.
- Principal of bioethics. (May 2000). *Erlanger Medical Ethics Orientation Manual*, 1-12.
- Sellman, D. (2007). Trusting patients, trusting nurses. *The author. Journal compilation: Nursing Philosophy*. 8: 28-36.

**YEAR ONE
SEMESTER TWO**

| YEAR I SEMESTER II | |
|-----------------------------|--------------------------------------|
| ITEM NUMBER | COURSE DESCRIPTION |
| TITLE | NURSING RESEARCH |
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR I, SEMESTER II |
| COURSE PRE-REQUISITE | FUNDAMENTALS OF BIOSTATISTICS |

Course Description:

This course emphasizes using and applying nursing research. The course covers the steps of the research process. Both quantitative and qualitative research approaches will be a focus of this course. It develops the ability to function as a competent consumer of research in nursing and related fields. In addition to the skills of research analysis, the student will consider the ethical concerns related to the development and application of research in nursing. It will further enable the students to evaluate research studies and utilize research findings to improve quality of nursing practice, education and management.

Course Objectives

At the end of this course the student should be able to:

- 1) Define the basic terms and concepts used in research
- 2) Describe the significance of nursing research.
- 3) Discuss research methodology and research process.
- 4) Discuss the purpose and process of a literature review.
- 5) Formulate potential research objectives, questions, and hypotheses.
- 6) Analyze the various types of research designs, sampling techniques, data gathering methods & tools, and data analysis for both qualitative and quantitative research including advantages and disadvantages of each.
- 7) Critically analyze nursing research studies.
- 8) Identify several sources of nursing research information.
- 9) Describe how studies are designed and how to assess the appropriateness of the designs and methods used to answer the research question
- 10) Discuss the ethical issues related to conducting a research study and to applying research findings

Teaching/Learning Strategies:

- Lecture/discussion, pre-readings, group discussion, classroom exercises, journal club, home assignments.
- The faculty members will serve as facilitators in meeting course objectives

Evaluation Criteria:

| CRITERIA | | |
|---|-----|--------------------------|
| INTERNAL EVALUATION 50% | | EXTERNAL EXAMINATION 50% |
| RESEARCH CRITIQUE PRESENTATIONS (2) (QUANTITATIVE & QUALITATIVE) | 20% | FINAL EXAMINATION |
| SUMMARY OF RESEARCH ARTICLE (2) (QUANTITATIVE & QUALITATIVE) | 10% | |
| QUIZ | 20% | |
| TOTAL 100% | | |

Unit Objectives**Unit I: Introduction of Nursing Research:**

At the end of the unit learner will be able to:

- 1) Explain Nursing Research: Definition, characteristics, purposes, kinds of research and importance of research in nursing
- 2) Describe Past, Present and Future of Nursing Research
- 3) Describe basic terminology used in research
- 4) Discuss the scope of nursing research: areas, problems in nursing, health and social
- 5) research
- 6) Discuss evidence based nursing practice
- 7) Overview of Research process

Unit II: Ethics & Nursing Research

At the end of the unit learner will be able to:

- 1) Discuss the history & codes of ethics in research
- 2) Identify ethical dilemmas & principles in research conduct
- 3) Explain protection of subjects, especially vulnerable subjects

Unit III: Review of Literature

At the end of the unit learner will be able to:

- 1) Describe Importance, purposes, sources, criteria for selection of resources of literature review.
- 2) Explain the steps used in the process of literature review by researchers to do a critical review of the literature on a specific topic
- 3) Recognize the essential elements of a good research literature review

Unit IV: Research Problems, Research Questions, Objectives and Hypotheses

At the end of the unit learner will be able to:

- 1) Identify and define research problem
- 2) Formulate the problem statement, research objectives/ purpose, and questions.
- 3) Define operational and conceptual definitions of terms
- 4) Explain assumptions, limitations
- 5) Identify variables
- 6) Describe hypothesis – definition, formulation and types.

Unit V: Research Approaches and Designs: Quantitative Research Design and Approaches

At the end of the unit learner will be able to:

- 1) Discuss characteristics, advantages and disadvantages of different types of quantitative research designs.
 - Experimental
 - Quasi-Experimental
 - Non-Experimental
 - Epidemiological Designs

- 2) Discuss the relationship of the research design to the research question.
- 3) Identify common problems (risks to validity) inherent in various steps of research designs
- 4) Evaluate the effectiveness (internal & external validity) of a design used in a nursing research study
- 5) Describe methods that can be used to strengthen a wide range of quantitative research design
- 6) Discuss methods to control situational factors

Unit VI: Qualitative Research Approaches and designs

At the end of the unit learner will be able to:

- 1) Discuss characteristics, advantages and disadvantages of different types and approaches of Qualitative research design
 - Phenomenology,
 - Grounded theory,
 - Ethnography
 - Descriptive
 - Historical Research
- 2) Other: Case studies & Narrative Analysis

Unit VII: Theoretical/Conceptual Framework

At the end of the unit learner will be able to:

- 1) Discuss theories: Nature, characteristics, Purpose and uses
- 2) Develop conceptual framework, models and theories.

Unit VIII: Sampling

At the end of the unit learner will be able to:

- 1) Identify the different sampling techniques
- 2) Identify a study's population, setting, and type of sample
- 3) Evaluate the appropriateness of the type of sample for the study's purpose and design
- 4) Analyze process of sample size calculation
- 5) Explain the factors influencing sampling
- 6) Determine the impact of the sampling on the applicability of the results to nursing practice
- 7) Describe probability and sampling error
- 8) Discuss problems of sampling

Unit IX: Data Collection Methods and Tools

At the end of the unit learner will be able to:

- 1) Explain the concept of collection, data sources, and methods/techniques of quantitative and qualitative data.
- 2) Discuss the procedure of data collection
- 3) Identify factors that affect the selection or development of data collection methods used in quantitative and qualitative research
- 4) Discuss the types, characteristics and development of common instruments/tools and methods used for data collection in quantitative and qualitative research
- 5) Discuss the reliability and validity of data-collection methods/tools used in qualitative and quantitative research
- 6) Evaluate the strength and weaknesses of data collection methods used in a research study

Unit X: Implementing Research Plan

At the end of the unit learner will be able to:

- 1) Implement Pilot Study
- 2) Review research plan (design), planning for data collection, administration of tools/interventions, collection of data

Unit XI: Analysis and Interpretation of Data

At the end of the unit learner will be able to:

- 1) Develop a plan for data analysis: quantitative and qualitative
- 2) Prepare data for computer analysis and presentation.
- 3) Utilize Statistical analysis
- 4) Interpretation of findings, communicating research, replication, research support, research utilization
- 5) Draw conclusion and generalizations
- 6) Write Summary and discussion

Unit XII: Reporting and Utilizing Research Findings

At the end of the unit learner will be able to:

- 1) Communicate results; oral and written
- 2) Write research report purposes, methods and style Vancouver, American Psychological Association (APA) etc.
- 3) Write scientific articles for publication
- 4) Scientific and grant writing, proposal writing, grant application and manuscript writing

Unit XIII: Critical Analysis of Research Reports and Articles

At the end of the unit learner will be able to:

- 1) Utilize steps/process used for critiquing qualitative & quantitative research report and articles.

Course Schedule

| Unit # | Topic | Facilitator |
|-----------------|--|--------------------|
| Unit I | Overview of the course Introduction of Nursing Research: <ul style="list-style-type: none"> • Nursing Research: Definition, characteristics, purposes, kinds of research and importance of research in nursing • Past, present and future of nursing research • Basic terminology used in research • Scope of nursing research: areas, problems in nursing, health and social research • Evidence based nursing practice • Overview of research process | |
| Unit II: | Ethics & Nursing Research <ul style="list-style-type: none"> • History & codes of ethics in research • Ethical dilemmas & principles in research conduct • Protection of subjects, esp. vulnerable subjects | |
| Unit III | Review of Literature <ul style="list-style-type: none"> • Importance, purposes, sources, criteria for selection of resources of literature review. • Steps used in the process of literature review by researchers to do a critical review of the literature on a specific topic • Essential elements of a good research literature review | |
| | Research problems, Research Questions and Hypotheses <ul style="list-style-type: none"> • Research problem identification and definition • Formulation of problem statement and research objectives/ purpose, and questions. • Operational and conceptual definitions of terms • Assumptions & limitations • Identification of variables • Hypothesis – definition, formulation and types. | |
| Unit V | Research Approaches and Designs: Quantitative Research Design and | |

| | | |
|------------------|--|--|
| | Approaches <ul style="list-style-type: none"> • Characteristics, advantages and disadvantages of different types of quantitative research designs. <ul style="list-style-type: none"> ▪ Experimental ▪ Quasi-Experimental ▪ Non-Experimental ▪ Epidemiological Designs • Relationship of the research design to the research question. • Common problems (risks to validity) inherent in various steps of research designs • Effectiveness (internal & external validity) of a design used in a nursing research study. • Methods used to strengthen a wide range of quantitative research design • Methods to control situational factors | |
| Unit VI | Qualitative Research Approaches and Designs <ul style="list-style-type: none"> • Characteristics, advantages and disadvantages of different types and approaches of Qualitative research design <ul style="list-style-type: none"> ▪ Phenomenology, ▪ grounded theory, ▪ Ethnography ▪ Descriptive ▪ Historical Research • Other: Case studies & Narrative Analysis | |
| Unit VII | Theoretical/Conceptual Framework <ul style="list-style-type: none"> • Theories: Nature, characteristics, Purpose and uses • Conceptual framework, models and theories. | |
| Unit VIII | Sampling <ul style="list-style-type: none"> • Sampling techniques • Study's population, setting, and type of sample • Appropriateness of the type of sample for the study's purpose and design • Analyze process of sample size calculation • Factors influencing sampling • Impact of the sampling on the applicability of the results to nursing practice. • Probability and sampling error • Problems of sampling | |
| Unit IX | Data Collection Methods & Tools <ul style="list-style-type: none"> • Concept of collection, data sources, and methods/techniques of quantitative and qualitative data. • Procedure of data collection • Factors that affect the selection or development of data collection methods used in quantitative and qualitative research • Types, characteristics and development of common instruments/tools and methods used for data collection in quantitative and qualitative research • Reliability and validity of data-collection methods/tools used in qualitative and quantitative research • Strength and weaknesses of data collection methods used in a research study | |
| Unit X | Implementing Research Plan | |

| | | |
|------------------|---|--|
| | <ul style="list-style-type: none"> Implement Pilot Study Review research plan (design), planning for data collection, administration of tools/interventions, collection of data | |
| Unit XI | Analysis And Interpretation of Data <ul style="list-style-type: none"> Planning for quantitative and qualitative data analysis Preparing data for computer analysis and presentation. Statistical analysis of data Interpretation of data drawing conclusion and generalizations Summary and discussion writing | |
| Unit XII | Reporting and Utilizing Research Findings: <ul style="list-style-type: none"> Communication research results; oral and written Writing research report purposes, methods and style Vancouver, American Psychological Association (APA) etc. Writing scientific articles for publication | |
| Unit XIII | Critical Analysis of Research Reports and Articles: <ul style="list-style-type: none"> Steps/process for critiquing qualitative & quantitative research report and articles. | |

Table of Specifications

| Bloom's Taxonomy | | | | |
|---|--|--------------------|--|---------------|
| Subject: Nursing Research | Knowledge & Comprehension | Application | Analysis, Synthesis &Evaluation | TOTALS |
| Unit – I. Introduction of Nursing Research | 3% | 4% | 3% | 10% |
| Unit – II Ethics & Nursing Research | 1% | 2% | 2% | 5% |
| Unit – III Review of Literature | 1% | 2% | 2% | 5% |
| Unit – IV Research problems, Research Questions and Hypotheses | 3% | 4% | 3% | 10% |
| Unit – V Research Approaches and Designs: Quantitative Research Design and Approaches | 4% | 4% | 4% | 12% |
| Unit – VI Qualitative Research Approaches and Designs | 4% | 4% | 4% | 12% |
| Unit – VII Theoretical/Conceptual Framework | 1% | 1.5% | 1.5% | 4% |
| Unit – VIII Sampling | 4% | 4% | 4% | 12% |
| Unit – IX Data Collection Methods & Tools | 3% | 4% | 3% | 10% |
| Unit – X Implementing Research Plan | 1% | 1.5% | 1.5% | 4% |
| Unit – XI Analysis And Interpretation of Data | 2% | 3% | 3% | 8% |
| Unit – XII Reporting and Utilizing Research Findings | 2% | 2% | 2% | 6% |
| Unit – XIII Critical Analysis of Research Reports and Articles | 1% | - | 1% | 2% |
| TOTALS | 30% | 36% | 34% | 100% |

Suggested Text books:

- Creswell, J. W. (2007). *Qualitative inquiry and research design: Choosing among five approaches* (2nded.). Thousand Oaks, CA: Sage publication
- Polit, D.F. & Beck, C.T. (2008). *Nursing research: Generating and assessing evidence for nursing practice* (8th ed.). Philadelphia: Lippincott Williams & Wilkins.
- American Psychological Association. (2001). *Publication manual of the American psychological association* (5thed.). Washington, DC: American Psychological Association.
- Burns, N., & Grove, S.K. (2001). *The practice of nursing research conduct, critique, & unitization* (4thed.). Philadelphia: W.B. Saunders Company.
- Gordis, L. (2000). *Epidemiology* (2nded.). Philadelphia: Saunders.
- StreubertSpeziale, H.J., & Carpenter Rinaldi, D. (2003). *Qualitative research in nursing* (3rded.). Philadelphia: Lippincott Williams & Wilkins.
- Wood, M. J., & Ross-Kerr, J. C. (2006). *Basic steps in planning nursing research* (6thed.). Boston: Jones & Bartlett Publishers.
- Galvan, J. L. (2006). *Writing literature reviews* (3rded.). Glendale, CA: Pyrczak Publication.
- Wong, S. (1991). *Summary writing: Techniques and practice*. Singapore: Pan Pacific Publication.

| YEAR I SEMESTER II | |
|----------------------|------------------------------------|
| ITEM NUMBER | COURSE DESCRIPTION |
| COURSE TITLE | PHARMACOLOGY FOR ADVANCED PRACTICE |
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR I, SEMESTER I |
| COURSE PRE-REQUISITE | |

Course Description:

This course is builds on prior knowledge on drug classification, actions, interactions and adverse drug reactions. It will provide the knowledge about pharmacological principles including pharmacokinetics and pharmacodynamics, pharmacotherapeutics mechanism of adverse drug reactions, contraindication, and precautions for a prototype drugs for multiple body system will be discussed. Major emphasis will be placed on nursing management practices that minimize adverse effects and maximize therapeutic effects for patients. This course will also facilitate the learners to integrate knowledge of categories of drugs related to system and for the development of case studies for pathophysiology.

Course Objectives:

Upon completion of this course, the student will be able to:

- 1) Utilize terminology associated with pharmacology.
- 2) Discuss the pharmacokinetic, pharmacodynamics and pharmacotherapeutics actions of specified drugs.
- 3) Describe major pharmacological differences and indications for specific pharmacotherapeutics agents within a given drug category.
- 4) Utilize individual drug monograph to identify
 - Drug action
 - Adverse reactions
 - Drug dosage forms
 - Recommended dosage and routes of administration
 - Nursing intervention appropriate to alleviate or prevent drug adverse reactions
 - Client teaching
- 5) Integrate knowledge of categories of drugs as it relates by system to the development of case studies for pathophysiology.

Teaching/Learning Strategies:

- Lectures, interactive sessions
- Individual case study

Note: *Faculty will work as facilitator and content will be discussed and integrated with disorders/diseases covered in Pathophysiology.*

Evaluation Criteria

| CRITERIA | |
|--|--------------------------|
| INTERNAL EVALUATION 50% | EXTERNAL EXAMINATION 50% |
| QUIZZES/MIDTERM EXAM 20% | FINAL EXAMINATION |
| CASE STUDY PRESENTATION ON DRUGS 30% | |
| (DUAL ASSIGNMENT WITH PATHOPHYSIOLOGY) | |
| TOTAL 100% | |

Unit Objectives

UNIT I: Introduction to Basic Principles of Pharmacology

At the end of this unit, learners will be able to:

- 1) Describe basic terminology used in pharmacology such as pharmacology, clinical pharmacology, pharmacotherapeutics, pharmacokinetic, pharmacokinetics, therapeutic range, half life, drug-drug interaction, drug food interaction, efficacy, potency, therapeutic index, drug induced toxicity and adverse effects.
- 2) Describe the basic pharmacokinetic principles such as absorption, distribution, metabolism and elimination of drugs.
- 3) Describe pharmacodynamics such as agonist, antagonist and drug receptor interaction.

UNIT II: Drugs (pharmacodynamics, pharmacokinetics) influencing pain, inflammation and infection

At the end of this unit, learners will be able to:

- 1) Describe the therapeutic options available for pain
 - Non inflammatory disorders (analgesics)
 - Inflammatory disorders (analgesics)
- 2) Explain the therapeutic options available for bacterial infections
 - Penicillin
 - Cephalosporin
- 3) Discuss the therapeutic options available for viral infections
- 4) Describe the therapeutic options available for fungal infections

UNIT III: Drugs (pharmacodynamics, pharmacokinetics) influencing gastro intestinal Disorders

At the end of this unit, learners will be able to:

- 1) Describe the therapeutic options available for nausea and vomiting
 - Antihistamines
 - Phenothiazines
- 2) Explain the therapeutic options available for peptic ulcer disease
 - Histamine 2 antagonist
 - Proton pump inhibitors
- 3) Describe the therapeutic options available for constipation and diarrhea
 - Bulk forming
 - Opium anti diarrheal

UNIT IV: Drugs (pharmacodynamics, pharmacokinetics) influencing Hematologic disorders

At the end of this unit, learners will be able to:

- 1) Explain the therapeutic options available for thromboembolitic disorders
 - Anticoagulant therapy
 - Anti platelets
 - Thrombolytic agents

UNIT V: Drugs (pharmacodynamics, pharmacokinetics) influencing cardiovascular Disorders

At the end of this unit, learners will be able to:

- 1) Describe the therapeutic options available for congestive heart failure
 - Cardio glycoside
 - Phosphodiesterase

- 2) Explain the therapeutic options available for CHD (angina)
 - Nitrates
 - Beta blockers
- 3) Discuss the therapeutic options available for hypertension
 - Antihypertensive drugs
 - ACE inhibitors
 - Diuretics
 - Angiotension II Blockers
 - β -blockers

UNIT VI: Drugs (pharmacodynamics, pharmacokinetics) influencing respiratory disorders

At the end of this unit, learners will be able to:

- 1) Explain the therapeutic options available for asthma
 - Corticosteroids
 - Beta agonist
 - Anticholinergics: ipratropium
 - Mast cell stabilizers, sodium chromoglycate, Ketotifen
- 2) Discuss the therapeutic options available for tuberculosis
 - Antituberculin drugs
- 3) Describe the therapeutic options available for respiratory distress

UNIT VII: Drugs (pharmacodynamics, pharmacokinetics) influencing renal disorders

At the end of the unit learners will be able to:

- 1) Describe the therapeutic options available for renal dysfunctions
 - Carbonic anhydrase inhibitors
 - Loop diuretics
 - Thiazide diuretics
 - Osmotic diuretics
- 2) Explain the therapeutic options available for renal failure
 - Angiotension converting enzymes

UNIT VIII: Drugs (pharmacodynamics, pharmacokinetics) influencing endocrine disorders

At the end of the unit learners will be able to:

- 1) Discuss the therapeutic options available for type I and type II diabetes
 - Insulin
 - Sulfonylurea
- 2) Describe the therapeutic options available for hyper and hypothyroidism
 - Propylthiuracil
 - Thyroxin
- 3) Explain the therapeutic options available for Cushing syndrome such as cortisol

UNIT IX: Drugs (pharmacodynamics, pharmacokinetics) available for cancer

At the end of the unit learners will be able to:

- 1) Describe the therapeutic options available for cancer
 - Alkylation agents
 - Antimetabolites
 - Antitumor antibiotic
 - Mitotic inhibitors

UNIT X: Drugs (pharmacodynamics, pharmacokinetics) influencing neural disorders

At the end of the unit learners will be able to:

- 1) Describe the therapeutic options available for parkinson's disease
 - Dopaminergic drug
 - Anticholinergic
 - Dopamine agonist
 - Monoamine oxidase B inhibitor
- 2) Explain the therapeutic options available for myasthenia gravis
 - Cholinesterase inhibitors
 - Corticosteroids

Course Schedule

| Unit # | Topics | Faculty |
|----------|--|---------|
| UNIT I | Introduction to basic principles of pharmacology Orientation to the course <ul style="list-style-type: none">• Basic terminology used in pharmacology such as pharmacology, clinical pharmacology, pharmacotherapeutics, pharmacokinetic, pharmacokinetics, therapeutic range, half life, drug-drug interaction, drug food interaction, efficacy, potency, therapeutic index, drug induced toxicity and adverse effects.• Basic pharmacokinetic principles such as absorption, distribution, metabolism and elimination of drugs.• Pharmacodynamics such as agonist, antagonist and drug receptor interaction. | |
| UNIT II | Drugs (pharmacodynamics, pharmacokinetics) influencing pain, inflammation and infection <ul style="list-style-type: none">• Therapeutic options available for pain<ul style="list-style-type: none">◦ Non inflammatory analgesics e.g. acetaminophen◦ Inflammatory disorders• Therapeutic options available for bacterial infections<ul style="list-style-type: none">◦ Penicillin◦ Cephalosporin• Therapeutic options available for viral infections• Therapeutic options available for fungal infections | |
| UNIT III | Drugs (pharmacodynamics, pharmacokinetics) influencing Gastro intestinal disorders <ul style="list-style-type: none">• Therapeutic options available for nausea and vomiting<ul style="list-style-type: none">◦ Antihistamines◦ Phenothiazines• Therapeutic options available for peptic ulcer disease<ul style="list-style-type: none">◦ Histamine 2 antagonist◦ Proton pump inhibitors• Therapeutic options available for constipation and diarrhea<ul style="list-style-type: none">◦ Bulk forming◦ Opioid antidiarrheal | |
| UNIT IV | Drugs (pharmacodynamics, pharmacokinetics) influencing Hematologic disorders <ul style="list-style-type: none">• Therapeutic options available for thromboembolic disorders<ul style="list-style-type: none">◦ Anticoagulant therapy | |

| | | |
|------------------|--|--|
| | <ul style="list-style-type: none"> ◦ Ant platelets ◦ Thrombolytic agents | |
| UNIT V | Drugs (pharmacodynamics, pharmacokinetics) influencing cardiovascular disorders <ul style="list-style-type: none"> • Therapeutic options available for congestive heart failure <ul style="list-style-type: none"> ◦ Cardio glycoside ◦ Phosphodiesterase ◦ Describe the therapeutic options available for CHD (angina) ◦ Nitrates ◦ Beta blockers • Therapeutic options available for hypertension <ul style="list-style-type: none"> ◦ Antihypertensive drugs <ul style="list-style-type: none"> ◆ ACE inhibitors ◆ Diuretics ◆ Angiotension II Blockers ◆ β-blockers | |
| UNIT VI | Drugs (pharmacodynamics, pharmacokinetics) influencing respiratory disorders <ul style="list-style-type: none"> • Therapeutic options available for asthma <ul style="list-style-type: none"> ◦ Corticosteroids ◦ Beta agonist ◦ Antcholergerics ◦ Mast cell stabilizers • Therapeutic options available for tuberculosis <ul style="list-style-type: none"> ◦ Antituberclin drugs • Therapeutic options available for respiratory distress | |
| UNIT VII | Drugs (pharmacodynamics, pharmacokinetics) influencing renal disorders <ul style="list-style-type: none"> • Therapeutic options available for renal dysfunctions <ul style="list-style-type: none"> ◦ Carbonic anhydrase inhibitors ◦ Loop diuretics ◦ Thiazide diuretics ◦ Osmotic diuretics • Therapeutic options available for renal failure <ul style="list-style-type: none"> ◦ Angiotension converting enzymes | |
| UNIT VIII | Drugs (pharmacodynamics, pharmacokinetics) influencing endocrine disorders <ul style="list-style-type: none"> • Therapeutic options available for type I and type II diabetes <ul style="list-style-type: none"> ◦ Insulin ◦ Sulfonylurea's • Therapeutic options available for hyper and hypothyroidism <ul style="list-style-type: none"> ◦ Propylthiuracyl ◦ Thyroxin • The therapeutic options available for Cushing syndrome such as cortisol | |
| UNIT IX | Drugs (pharmacodynamics, pharmacokinetics) available for cancer <ul style="list-style-type: none"> • Therapeutic options available for cancer <ul style="list-style-type: none"> ◦ Alkylating agents ◦ Antimetabolites ◦ Antitumor antibiotic ◦ Mitotic inhibitors | |

| | | |
|---------------|--|--|
| UNIT X | Drugs (pharmacodynamics, pharmacokinetics) influencing nueral disorders <ul style="list-style-type: none"> Therapeutic options available for parkinson's disease <ul style="list-style-type: none"> Dopaminergic drug Anticholenergetic Dopamine agonist Monoamine oxidase B inhibitor Therapeutic options available for myasthenia gravis <ul style="list-style-type: none"> Cholinesterase inhibitors Corticosteriods | |
|---------------|--|--|

Table of Specification

| Bloom's Taxonomy | | | | |
|---|--------------------------------------|--------------------|---|--------------|
| Subject: Pharmacology for Advanced Practice | Knowledge & Comprehension | Application | Analysis, Synthesis & Evaluation | TOTAL |
| Unit – I. Introduction to basic principles of pharmacology | 3% | 5% | 2% | 10% |
| Unit – II Drugs (pharmacodynamics, pharmacokinetics) influencing pain, inflammation and infection | 4% | 4% | 4% | 12% |
| Unit – III Drugs (pharmacodynamics, pharmacokinetics) influencing Gastro intestinal disorders | 3% | 5% | 2% | 10% |
| Unit – IV Drugs (pharmacodynamics, pharmacokinetics) influencing Hematologic disorders | 3% | 3% | 2% | 8% |
| Unit – V Drugs (pharmacodynamics, pharmacokinetics) influencing cardiovascular disorder | 3% | 5% | 2% | 10% |
| Unit – VI Drugs (pharmacodynamics, pharmacokinetics) influencing respiratory disorders | 3% | 5% | 2% | 10% |
| Unit – VII Drugs (pharmacodynamics, pharmacokinetics) influencing renal disorders | 3% | 5% | 2% | 10% |
| Unit – VIII Drugs (pharmacodynamics, pharmacokinetics) influencing endocrine disorders | 5% | 5% | 2% | 12% |
| Unit –IX Drugs (pharmacodynamics, pharmacokinetics) available for cancer | 3% | 3% | 2% | 8% |
| Unit – X Drugs (pharmacodynamics, pharmacokinetics) influencing nueral disorders | 3% | 5% | 2% | 10% |
| TOTALS | 33% | 45% | 22% | 100% |

Pharmacology for Advanced Practice

Table for Pharmacotherapeutics for each drug selected

| DRUG | CATEGORY | ABSORPTION | DISTRIBUTION | METABOLISM | ELIMINATION | ADVERSE EFFECTS | CONTRAINDICATIONS | DRUG-FOOD INTERACTION | INTERACTION WITH OTHER DRUGS CLIENT IS TAKING |
|-------------|-----------------|-------------------|---------------------|-------------------|--------------------|------------------------|--------------------------|------------------------------|--|
| | | | | | | | | | |

Required text

- Gutierrez, K. (1999) Pharmacotherapeutics: Clinical Decision-Making in Nursing. Philadelphia: W. B. Saunders.
- Arcangelo, V. P.; Peterson, A. (2005). Pharmacotherapeutics for advanced practice: A practical approach. Philadelphia: Lippincott
- Lehne, R. (2001) Pharmacology for Nursing Care (4th Ed.) Philadelphia: W. B. Saunders

| YEAR I SEMESTER II | |
|----------------------|---------------------------------|
| ITEM NUMBER | COURSE DESCRIPTION |
| TITLE | POLICY PLANNING AND DEVELOPMENT |
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR I, SEMESTER II |
| COURSE PRE-REQUISITE | |

Course Description:

This course launches the concepts of policy and its development processes. It examines nursing's role in shaping, developing, execute and evaluating policy from historical, theoretical, ethical, and developmental perspectives. Current factors influencing policy processes are explored. Emphasis is on preparing nurses to provide leadership through engaging in all stages of health-enhancing policy development and advocacy. Students participate in the recognition and definition of problems and issues for latent policy initiatives, the critical analysis of existing health policies, and the identification and analysis of various approaches for effectively influencing policy processes. The course will also examine activities related to health, social and economic development implemented by international organizations and/or Ministries of Health. It will discuss the options available to governments, international organizations and agencies that seek to improve health status in countries where the resources available for public health, health policy developments and health services is limited. Policy options and what we know of their effectiveness will be also examined.

Course Objectives

- 1) Introduce students to major determinants of health including strategies to reduce risks and health inequalities.
- 2) Understand planning theories and approaches to organizing effective health service.
- 3) Understand the policy process and regulation of health care markets and professionals.
- 4) Analyze the changing role of governments and impact of international organizations in policy formulation.
- 5) To examine nursing's involvement in policy processes within a historical, developmental, ethical, and theoretical context;
- 6) To analyze the social, economic, and political factors influencing policy development and advocacy at government, workplace, professional/health organizations, and community levels;
- 7) To analyze the process of framing and defining problems and issues for potential policy initiatives;
- 8) To analyze approaches to shaping, developing, implementing, and evaluating policy;
- 9) To analyze the types of evidence, advocacy, and communications that will effectively influence health-enhancing policies.

Evaluation Criteria

| Evaluation Criteria | |
|--|--------------------------|
| CRITERIA | |
| INTERNAL EVALUATION 50% | EXTERNAL EXAMINATION 50% |
| QUIZZES/MIDTERM 20% | FINAL EXAMINATION |
| SWOT ANALYSIS 10% | |
| PLANNING COMMISSION (PC-I PREPARATION) 10% | |
| LOGICAL FRAMEWORK ANALYSIS (LFA) 10% | |
| TOTAL 100% | |

Unit Objectives:**Unit I: Frame Work for Education Policy Analysis:**

At the end of the unit learners will be able to:

- 1) Discuss policy definition and scope
- 2) Describe policy making
- 3) Explain conceptual framework for policy analysis, considering
- 4) Discuss the Application of Policy analysis in research, education, and management issues.

Unit II: Policy, Ethics, and Health Care

At the end of the unit learners will be able to:

- 1) Discuss historical ,legislative and political background
- 2) Analyze health care policy-recent decades
- 3) Describe the ethical dimensions of health policy

Unit III: Notion of Power and its Relationship to Political Systems

At the end of the unit learners will be able to:

- 1) Define Power
- 2) Types of power
- 3) Describe Authority
- 4) Discuss Politics
- 5) Explore ideology

Unit IV: Actors in Policy Making:

At the end of the unit learners will be able to:

- 1) Identify different actors, and how they influence policy:
- 2) Describe national actors (e.g. domestic interest groups, including business; politicians, bureaucrats, the media),
- 3) Discuss International actors (e.g. UN organizations, international interest groups, multinational corporations and public-private partnerships).

Unit V: Health policy

At the end of the unit learners will be able to:

- 1) Analyze the components of policy developments
- 2) Policy process
- 3) Policy reform
- 4) Policy environment
- 5) Policy makers
- 6) Explore the Nurses role in policy making and implementation

Unit VI: National Plan of Educational Development

- 1) First Five Year Plan
- 2) Second Five Year Plan
- 3) National Education Policy and Implementation Program

Course Schedule

| Unit # | Content | Faculty/Speaker |
|----------|--|-----------------|
| Unit I | Frame work for education policy analysis <ul style="list-style-type: none"> • Policy definition and scope • Policy making • Conceptual framework for policy analysis, considering content, context, actors and processes <ul style="list-style-type: none"> ▪ Analysis of the existing situation ▪ The process of generation policy options ▪ Evaluation of policy options ▪ Making the policy decision ▪ Planning policy implementation ▪ Policy impact assessment ▪ Subsequent policy cycles ▪ Application of Policy analysis in research, education, and management issues | |
| Unit II | Policy, Ethics, and Health Care <ul style="list-style-type: none"> • Historical ,legislative and political background • Health care policy-recent decades • Ethical dimensions of health policy | |
| Unit III | Notion of Power and its Relationship to Political Systems: <ul style="list-style-type: none"> • Power • Authority • Politics • Ideology | |
| Unit IV | Actors in Policy Making: <ul style="list-style-type: none"> • Different actors, and how they influence policy: <ul style="list-style-type: none"> ▪ National actors (e.g. domestic interest groups, including business; politicians, bureaucrats, the media), ▪ International actors (e.g. UN organizations, international interest groups, multinational corporations and public-private partnerships). | |
| V | Health policy <ul style="list-style-type: none"> • Components of policy developments <ul style="list-style-type: none"> ▪ policy process ▪ policy reform ▪ policy environment ▪ policy makers • Nurses role in policy making and implementation | |
| VI | National Plan of Educational Development <ul style="list-style-type: none"> • First Five Year Plan • Second Five Year Plan • National Education Policy and Implementation Program | |

Guidelines for preparation of planning commission one:

- 1) Name of the project
- 2) Location of the project District/Province
- 3) Authorities responsible for sponsoring ,execution, operation and maintenance
- 4) Plan provision
- 5) Five year plan
- 6) Current plan
- 7) Project objectives
- 8) Description and justification of project
- 9) Capital cost estimates
- 10) Annual operation cost
- 11) Demand supply analysis
- 12) Financial plan
- 13) Project benefits and analysis
- 14) Implementation of the project
- 15) Management structure and manpower requirement s
- 16) Additional project /decision required
- 17) Certificates

Table of Specifications

| Bloom's Taxonomy | | | | |
|--|--------------------------------------|--------------------|--|---------------|
| Subject :Foundations of Policy and Policy Development | Knowledge & Comprehension | Application | Analysis, Synthesis &Evaluation | TOTALS |
| Unit – I. Work for Education Policy Analysis | 4% | 5% | 6% | 15% |
| Unit – II Policy, Ethics, and Health Care | 4% | 5% | 6% | 15% |
| Unit – III Notion of Power | 6% | 7% | 7% | 20% |
| Unit – IV Actors in Policy Making | 4% | 5% | 6% | 15% |
| Unit – V Health policy | 6% | 6% | 8% | 20% |
| Unit – VI National Plan of Educational Development | 4% | 5% | 6% | 15 |
| TOTALS | 28% | 33% | 39% | 100% |

References

- 1) Chinn, P. L. (2001). *Peace and power: Building communities for the future*. (5th ed). Sudbury, Mass: Jones & Bartlett
- 2) Davis, A., & Aroskar, M. (2010). *Ethical Dilemmas & Nursing Practice*. New York: Appleton-Century-Crofts.
- 3) Hadad, W. D. (1995). *Education policy-planning process: an applied framework*. UNESCO: Paris
- 4) ICN (2005). *guidelines on shaping effective health policy* .international council of nurses Geneva.
- 5) Mason, D., Leavitt, J. & Chaffee, M. (2002). *Policy & Politics: Nursing and Health Care*. (4th ed). Philadelphia: Saunders.
- 6) **Online reference.** www.sociology.org.uk

| COURSE TITLE | |
|--|---|
| ACADEMIC WRITING AND PROPOSAL DEVELOPMENT | |
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR I, SEMESTER II |
| COURSE PRE-REQUISITE | NURSING RESEARCH AND BIOSTATISTICS |

Course Description:

This course is designed for the post graduate students to learn how to prepare such a proposal. Since the majority of research proposals are intended for obtaining research funds. The students work with their course faculty, supervisor, and thesis committee by incorporating feedbacks which enhance the proposal. By the end of the term, the students are ready with a thesis proposal and an Ethics Review Committee form which is properly completed.

Course Objectives:

Upon completion of this course, the student will be able to:

- 1) Apply your theoretical and methodological understanding and skills into devising researchable ideas and specific research questions and hypotheses,
- 2) Conduct a focused review of the relevant literature and create appropriate conceptual framework,
- 3) Develop a realistic research design with specific research strategies.
- 4) Think through and articulate a chapter-by-chapter outline of the intended thesis
- 5) Communicate research ideas and their appropriate theoretical and methodological issues effectively and efficiently.
- 6) Critique other's ideas paying particular attention to both theoretical and methodological rigor and reality.
- 7) Gain understanding of the process of thesis including stress, time, and project management, committee formation, thesis proposition, defense.
- 8) Defend the appropriate components of the proposal
- 9) Complete the Ethics Review Committee application form
- 10) Develop a full proposal for presentation to the thesis committee.

Teaching Strategies:

Discussion, brainstorming, feedback techniques, guided write-up, workshop, student presentations

Evaluation Criteria

| Evaluation Criteria | | |
|-------------------------|-----|--------------------------|
| CRITERIA | | |
| INTERNAL EVALUATION 50% | | EXTERNAL EXAMINATION 50% |
| MIDTERM /QUIZZES | 20% | THESIS PROPOSAL (DRAFT) |
| PROPOSAL PRESENTATION | 10% | |
| CLASS PARTICIPATION | 10% | |
| (ERC FORM) | 10% | |
| TOTAL 100% | | |

Detailed Session/Class Objectives

Unit 1

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

- 1) Discuss the purposes of a research proposal.
- 2) Enumerate the parts of a thesis proposal.

Unit 2

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

- 1) Examine the research topics. (For more focus.)

Unit 3

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

- 1) Discuss the current status of the thesis topic as gleaned from the literature review

Unit 4

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

- 1) Discuss and refine the research questions

Unit 5 (4-hours)

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

- 1) Analyze research designs
- 2) Discuss the rationale for choosing a research design to answer an important question relevant to health
- 3) Use a theory to guide a research design

Unit 6 (4-hours)

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

- 1) Integrate knowledge from nursing and other disciplines to write a testable hypothesis
- 2) Determine sample size
- 3) Apply a sampling plan, recruitment and retention strategies to a proposal

Unit 7 (4-hours)

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

- 1) Discuss the rationale for instrument selection
- 2) Discuss the rationale for an analysis plan

Unit 8

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

- 1) Define the time line for the study.
- 2) Prepare a budget proposal for research.
- 3) Prepare the necessary appendices.

Unit 9

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

- 1) Discuss the first draft of the thesis proposal

Unit 10

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

- 1) Complete the Ethics Review Committee application

Unit 11

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

- 1) Do mock proposal presentation.

Unit 12

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

- 1) Present and defend the thesis proposal to the Thesis Committee.

Course Schedule

| Units | Topic | Activity/facilitator |
|-----------|--|----------------------|
| Unit 1 | <ul style="list-style-type: none"> Overview of proposal Purposes and parts of proposal(selection Topic) | |
| Unit II | <ul style="list-style-type: none"> Examination of thesis topic. Assignment for the next session to be explained. (Literature search) | |
| Unit III | <ul style="list-style-type: none"> Presentation of literature search on selected topic: Implications of the current knowledge to the selected thesis topic. Please note that this presentation is non-graded. | |
| Unit IV | <ul style="list-style-type: none"> Refining the research questions | |
| Unit V | Making Connections <ul style="list-style-type: none"> How To Connect Your Research Problem to a Study Design How To Connect Your Research Problem to a Theory | |
| Unit VI | Writing Hypotheses and Determining Sample Size <ul style="list-style-type: none"> Identifying Variables, Writing Assumptions and Definitions Sampling, Recruitment, and Retention | |
| Unit VII | Measurement & Analysis <ul style="list-style-type: none"> Selecting the Best Instrument: Points to Consider Selecting the Best Analysis Plan: Points to Consider | |
| Unit VIII | <ul style="list-style-type: none"> Timelines, budget, and appendices | |
| Unit IX9 | <ul style="list-style-type: none"> Discussion of Draft 1 | |
| Unit X | <ul style="list-style-type: none"> Writing ERC Proposal | |
| Unit XI | <ul style="list-style-type: none"> Mock Presentations | |
| Unit XII | <ul style="list-style-type: none"> Proposal presentation in front of Supervisor & Committee | |

Class Participation:

- 1) The weight of the discussion is 10% of your final grade.
- 2) The discussion is meant to be a forum for academic exchange hence, each student must participate by Asking relevant and pertinent questions
 - i. Contributing in the discussion with new knowledge, technique or ideas
- 3) The rating will be based on
 - Active participation
 - Relevancy and contribution
 - Appropriateness of questions

Research Proposal

- 1) The total weight of the research proposal is 50%
- 2) Please see the attached Thesis I Proposal Rating Scale as guide.

Proposal Presentation

- 1) The weight of the proposal presentation is 10% of your final grade.
- 2) Please see the attached proposal presentation rating scale as guide.

Suggested Textbooks

- Burns, N. & Grove, SK. (2001). *The practice of nursing research* (4thed.). Philadelphia: WB Saunders.
- Holloway, I. & Wheeler, S. (2002). *Qualitative research in nursing* (2nded.). Oxford, UK: Blackwell Publishing.
- Munhall P.L. & Oiler, C.B. (1993). *Nursing Research A Qualitative Perspective* (2nded.)
- Ogden, T. E. (2002). *Research proposal- a guide to success*. Academic Press.
- Polit, D. & Beck, C. (2004). *Nursing research: Principles and methods* (7thed.). Philadelphia: JB Lippincott.
- Rudestan, K, E. & Newton, R. (2001). *Surviving your dissertation* (2nded.). Sage publications, London.
- Speziale, H. & Carpenter. (2003). *Qualitative research in nursing* (3rded.). Philadelphia: JB Lippincott.
- Tornquist, Elizabeth. (1999). *From proposal to publication: An informal guide to writing*. Addison Wesley publishing.

**YEAR TWO
SEMESTER ONE**

| COURSE TITLE | |
|--|----------------------------|
| CURRICULUM DESIGN AND DEVELOPMENT | |
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR II, SEMESTER I |
| COURSE PRE-REQUISITE | |

COURSE DESCRIPTION:

The course is intended to orient prospective teachers about the principles, process and procedures of curriculum design and development. The participants will be informed about the objectives, selection of content, its scope and outcomes, teaching strategies, and design of instructional materials. This course will also include various factors that affect the process of curriculum development and implementation. Prospective teachers will learn about traditional and progressive notions of curriculum monitoring, assessment and evaluation and these notions influence curriculum improvement efforts.

This course gives prospective teachers the opportunity to develop in-depth understanding of the central idea of curriculum. Furthermore this course will enable prospective teachers to plan and develop curriculum to meet the needs and demands of the times.

COURSE OUTCOMES:

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

- 1) Understand the concept of curriculum
- 2) Differentiate between different types of curriculum
- 3) Gain awareness of curriculum design and development
- 4) Examine the components of the curriculum development process
- 5) State the critical issues, problems and trends in curriculum
- 6) Recognize the role of teacher as curriculum planner and developer to meet the challenges and demands of 21st century
- 7) Learn the skills and knowledge to translate intended curriculum into practice

Teaching Learning Framework

Prospective teachers will be encouraged not only to know about curriculum but also act as curriculum planners and developers. A variety of teaching and learning approaches will be used throughout the course, for example, lecture, group discussion, group work, peer learning and making informational posters as well as question/answers. Discussion and reflection will help 8

Students become familiar with the concept of curriculum, its elements, aims and objectives and the curriculum development process as well.

Evaluation Criteria:

| Evaluation Criteria: | | |
|-------------------------|-----|--------------------------|
| CRITERIA | | |
| INTERNAL EVALUATION 50% | | EXTERNAL EXAMINATION 50% |
| QUIZZES/MIDTERM | 30% | FINAL EXAMINATION |
| ASSIGNMENTS | 10% | |
| PRESENTATION | 10% | |
| TOTAL 100% | | |

Unit Objectives**Unit 1: Introduction to Curriculum**

At the end of this unit, learners will be able to:

- 1) Define meaning of curriculum. (Traditional and Progressive conceptions)
- 2) Describe the concept of syllabus, textbooks, course grid, course content and booklet
- 3) Discuss the various forms and process of curriculum development
- 4) Elaborate the essential elements of curriculum development
- 5) Explain the aims, objectives, content selection, course planning and table of specification
- 6) Discuss curriculum implementation process
- 7) Summarize the Taxonomy of educational objectives (Bloom's 3 domains)

Unit 2: Curriculum Design

At the end of this unit, learners will be able to:

- 1) Explain the need and importance of teacher involvement in curriculum designing
- 2) Elaborate the concept of curriculum design
- 3) Discuss the different types of curriculum designs and models
- 4) Describe the process of curriculum design
- 5) Analyze a unit plan in light of the concept of curriculum design

Unit 3: Curriculum Assessment, Monitoring and Evaluation

At the end of this unit, learners will be able to:

- 1) Define assessment, monitoring and evaluation
- 2) Describe traditional and progressive notions of curriculum monitoring and evaluation
- 3) Elaborative forms of curriculum evaluation (Formative and summative)
- 4) Role of evaluation in curriculum improvement
- 5) Describe the traditional and progressive notions of assessment
- 6) Discuss the types of Assessment- Norm referenced and criterion referenced assessment
- 7) Summarize portfolio assessment and performance based assessment
- 8) Explain practical application through critique and development of an assessment plan/course in the program.
- 9) Identify forces and issues influencing nursing curriculum
- 10) Interpret the transcript and credit system
- 11) Discuss difference among annual, semester and term examination system

Unit 4: Curriculum Change and Development in Pakistan

At the end of this unit, learners will be able to:

- 1) Describe the concept and sources of curriculum change
- 2) Explain the process and strategies of curriculum change in Pakistan
- 3) Discuss the process of curriculum development in Pakistan
- 4) Analyze curriculum development at elementary and secondary level

Class Schedule

| | |
|---------|--|
| Unit 1: | Introduction to Curriculum <ul style="list-style-type: none">• Meaning and definition of curriculum. (Traditional and Progressive conceptions)• Concept of syllabus, textbooks, course grid, course content and booklet• Various forms of curriculum• Essential elements in curriculum• Aims, Objectives, content selection, course planning• Curriculum implementation• Taxonomy of educational objectives (Bloom's 3 domains) |
| Unit 2: | Curriculum Design <ul style="list-style-type: none">• Need and importance of teacher involvement in curriculum designing• Concept of curriculum design• Different types of curriculum designs and models• Using the curriculum design process• Analyzing a unit plan in light of the concept of curriculum design. |
| Unit3: | Curriculum Change and Curriculum Development in Pakistan <ul style="list-style-type: none">• Concept and sources of curriculum change• Process and strategies of curriculum change• Issues of curriculum change in Pakistan• Process of curriculum development in Pakistan• Curriculum development at elementary and secondary level• Reserve one session for critique and discussion of the unit they have chosen for analysis in Unit |
| Unit 4 | Curriculum Assessment, Monitoring and Evaluation <ul style="list-style-type: none">• Traditional and progressive notions of curriculum monitoring and evaluation• Forms of Curriculum evaluation• (Formative and summative)• Role of evaluation in curriculum improvement• Traditional and progressive notions of assessment• Types of Assessment- Norm referenced and criterion referenced assessment• Portfolio assessment and performance based assessment)• Practical application through critique & development of an assessment plan for the unit they have chosen to analyze (developed in another course in the program).• Identify forces and issues influencing nursing curriculum• Interpret the transcript and credit system• Discuss difference among annual, semester and term examination system |
| Unit5 | Futuristic Perspectives of Curriculum Content <ul style="list-style-type: none">• Future trends and issues• Factors affecting in curriculum planning, design and development• Presentation of unit critique and analysis. |

COURSE ASSIGNMENTS

Students in the course will receive detailed instructions for completion of the following assignments:

- 1) Analysis and critique of a unit previously prepared in another program course (e.g. Methods of Teaching, Teaching of Science).
- 2) One day workshop on the role of teachers in curriculum improvement
- 3) Group discussion and poster making on writing issues in curriculum development with suggestions
- 4) Paper on writing objectives

Table of specification

| Bloom's Taxonomy | | | | |
|--|--|--------------------|--|---------------|
| Subject: Curriculum Design &Development | Knowledge & Comprehension | Application | Analysis, Synthesis &Evaluation | TOTALS |
| Unit – I Description of curriculum development | 9% | 8% | 10% | 27% |
| Unit – II Curriculum Design | 5% | 5% | 5% | 16% |
| Unit – III Curriculum Change and Curriculum Development in Pakistan | 7% | 7% | 9% | 23% |
| Unit – IV Curriculum Monitoring, Evaluation and Assessment | 8% | 9% | 7% | 23% |
| Unit – V Futuristic Perspectives of Curriculum | 3% | 3% | 4% | 11% |
| TOTALS | 32% | 32% | 36% | 100% |

Note to Faculty Teaching the Course: The following resources may be helpful in choosing appropriate readings. Choice of readings may be included on the syllabus or distributed in class, but they should include only resources that you expect students to use throughout the course. Other readings should be distributed as they are needed.

- Rao V., K. (2005). *Principles of Curriculum*. New Delhi: APH Publishing Co.
- Mridula P. (2007). *Principles of curriculum reforms*. India:
- Veer U. (2004). *Modern Teacher Training*. New Delhi:
- Mansoor N. (2000). *Guidelines to teaching*. Pakistan:
- Ediger M. & Digmar B. (2006). *Issues In school Curriculum*. New Delhi:
- Beane I., A, Toefer C., F., & Alessi S., J. (1986). *Curriculum Planning and Development*. Boston and Bacon
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- <http://www4.uwsp.edu/education/lwilson/curric/curtyp.htm> gives an overview of Curriculum Development and Planning. Lecture format.
- www.col.org/stamp/module13.pdf provides a self-directed learning module focusing on curriculum theory, design and assessment. Copyright protected.

| COURSE TITLE LEADERSHIP IN HEALTHCARE | |
|--|------------------------------|
| COURSE NUMBER | NUR 6232 |
| CREDITS | 3 |
| PLACEMENT | YEAR II, SEMESTER III |
| COURSE PRE-REQUISITE | |

Course Description:

This course examines managerial and leadership concepts, issues, roles, and functions as applied to the role of the professional nurse in various healthcare settings.

Course Objectives:

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

1. Apply theories of effective leadership and management within selected health care arenas.
2. Utilize the skills of critical thinking, ethical decision-making, communication, and therapeutic nursing intervention in managing culturally competent, cost effective care of groups of clients across the wellness/illness continuum.
3. Collaborate with interdisciplinary health care team members in prioritizing and coordinating quality/cost effective healthcare.
4. Demonstrate leadership and management of a care-giving team comprised of individuals with varied cultural and ethnic origins, and varied levels of clinical knowledge and competencies.
5. Utilize skills of inquiry and research as a means to enhance knowledge base, facilitate change, and improve quality of care.
6. Demonstrate professional accountability for effective leadership within nursing practice and for advancement of the profession.
7. Explore the role and influence of international organizations on the Pakistani health care system.
8. Analyze the contemporary challenges for nursing leadership within Pakistani context and worldwide.

Teaching/Learning Strategies:

- Lecture / discussion,
- Guest speakers,
- Small group work,
- Case studies,
- Reports and newspapers reviews.

Evaluation Criteria:

| CRITERIA | |
|------------------------------------|------------------------------|
| INTERNAL EVALUATION 50% | FINAL EXAMINATION 50% |
| QUIZZES / MID-TERM | 20% |
| SWOT ANALYSIS | 10% |
| LEADERSHIP ASSESSMENT PAPER | 10% |
| PRESENTATION | 10% |
| TOTAL 100% | |

Unit Objectives

Unit 1: Organizational Framework and Leadership Theories:

At the end of the unit learners will be able to:

1. Define and describe the significant elements of an organization from a structure, human, symbolic and politics.
2. Contrast the characteristics of a bureaucratic, matrix, and organic organization.
3. Describe the relationship of organization structure, organization goals, its culture and politics.
4. Critique the theories and concepts of management which have emanated from the four perspective.
5. Analyze the manner in which different organization issues impact on the nurse manager's role from structure, human, culture and symbolic frame.
6. Discuss Pakistan health care system and policies.

Unit II: Strategic Planning

At the end of the unit learners will be able to:

1. Define and understand the concepts of strategic planning.
2. Understand the alignment of strategic planning with vision and mission of the organization.
3. Analyze the strategic planning process.
4. Prepare a strategic plan in a Healthcare organization.

Unit III: Financial Resources Management

At the end of the unit learners will be able to:

1. Describe financial management and budgeting.
2. Distinguish between direct and indirect costs.
3. Define and differentiate a performance budget from a traditional budget.
4. Compare the stages of a typical budgetary process.
5. Understand, analyze and interpret budget variance report and identify strategies relevant to cost control.
6. Understand, prepare and present feasibility report.
7. Relate budgetary process with strategic planning

Unit IV: Human Resource Management

At the end of the unit learners will be able to:

1. Discuss the evolution of Human Resource Management Function
2. Critique the theories and concepts of management, which have emanated from the human resource perspective.
3. Analyze the manner in which individual and group behavior within organization impact on the nurse manager's role
4. Discuss the health policies and planning from human resource and nursing perspective. Analyze cotemporary Human Resource issues in nursing from policy and planning perspective

Unit V: Patient Safety and Quality Improvement in Nursing Practice

At the end of the unit learners will be able to:

1. Discuss and analyze integrated Quality Management Models (IOM).
2. Discuss, understand, and critique joint commission international accreditation (JCIA) processes and system.
3. Analyze the fundamental assumptions of continuous quality improvement and total quality management programs.

Unit VI: Benefits Value Realization (BVR) TEST Risk Management:

At the end of the unit learners will be able to:

1. Define and discuss risk identification, risk management, sentinel events and incidents.
2. Discuss current legal issues encountered by health professionals.
3. Analyze incidents reports, adverse events and sentinel events.

Unit VII: Data Management and Information System:

At the end of the unit learners will be able to:

1. Describe the need for organizational health management information systems and advantages of these systems.
2. Familiarize with HMIS within private and government organization.
3. Identify the data needs for nursing professionals.
4. Analyze ways to monitor and measure the nursing performance through a management information system.
5. Highlight the importance of data management for decision-making.
6. Analyze the importance of nursing data for research

Unit VIII: Nursing Care Model:

At the end of the unit learners will be able to:

1. Define and describe nursing care delivery systems.
2. Discuss six common nursing care models.
3. Evaluate and critique Pakistan nursing services care models.
4. Understand and interpret nursing work load analysis.

Unit IX: Trends and Issues in Nursing Administration:

At the end of the unit learners will be able to:

1. Discuss the Evolution of health care system in the world and its impact on nursing profession.
2. Compare and contrast the nursing issues in Pakistan with Nursing in the west.
3. Identify 5 key issues relevant to the nursing leadership in Pakistan.
4. Critique the "vision of Nursing in Pakistan-2030".

Course Schedule

| Unit | Topic | Speaker /Faculty |
|----------|--|------------------|
| Unit 1 | Introduction of organizational framework and leadership theories. Organizational framework from Structural, Human Resource, culture, and Ethical and Political Perspectives | |
| Unit II | Strategic Planning | |
| Unit III | Financial resource management Setting goals and objectives Budget process | |
| Unit IV | Human Resources Management (1 st Discussion on paper themes) | |
| Unit V | <u>Patient Safety and Quality Improvement in Nursing Practice</u> <ul style="list-style-type: none"> o JCIA o ISO Certification o Clinical indicator monitoring o Audit process | |
| Unit VI | Benefits Value Realization (BVR) TEST <ul style="list-style-type: none"> o Understanding and Analyzing BVRSRisk management | |

| | | |
|------------------|---|--|
| | <ul style="list-style-type: none"> ○ Risk identification ○ Adverse events ○ Incidents report and sensitive complaints ○ Legal issues | |
| Unit VII | Data Management <ul style="list-style-type: none"> ○ Organizational Integration and processes ○ Health Management Information System ○ Communication ○ Processes ○ Barriers (Human, technology) | |
| Unit VIII | Nursing Care Model: <ul style="list-style-type: none"> ○ Nursing care delivery systems. ○ Six common nursing care models. ○ Critique pakistan nursing services care models. ○ Understand and interpret nursing work load analysis | |
| Unit IX | Trends and Issues in Nursing Administration: <ul style="list-style-type: none"> ○ Evolution of health care system in the world and it its impact on nursing profession. ○ Trends and issues that have surfaced from reading ○ Compare and contrast the nursing issues in Pakistan with Nursing in the west. ○ Identify 5 key issues relevant to the nursing leadership in Pakistan. ○ Critique the “Vision of Nursing in Pakistan-2030”. | |

Table of Specifications

| Bloom's Taxonomy | | | | |
|--|--|--------------------|--|---------------|
| Subject: Leadership in Healthcare | Knowledge & Comprehension | Application | Analysis, Synthesis &Evaluation | TOTALS |
| Unit – I Organizational Framework and Leadership Theories | 5% | 5% | 4% | 14% |
| Unit – II Strategic Planning | 4% | 3% | 3% | 10% |
| Unit – III Financial Resources Management | 5% | 5% | 5% | 15% |
| Unit – IV Human Resource Management | 4% | 4% | 4% | 12% |
| Unit – V Patient Safety and Quality Improvement in Nursing Practice | 2% | 2% | 2% | 6% |
| Unit – VI Benefits Value Realization (BVR) TEST Risk Management | 2% | 2% | 2% | 6% |
| Unit – VII Data Management and Information System | 5% | 4% | 4% | 13% |
| Unit – VIII Nursing Care Model: | 4% | 4% | 4% | 12% |
| UNIT – IX Trends and Issues in Nursing Administration | 4% | 4% | 4% | 12% |
| TOTALS | 35% | 33% | 32% | 100% |

Leadership Assessment Paper

Guidelines for writing the paper:

This paper is a comprehensive leadership assessment of an individual who has a nursing administrative position in the health care agency or field of your own employment (e.g. hospital, hospice, school of nursing, outpatient surgery unit, clinic, etc.). Although you will need to define the status and title of the position, you are not to use identifying names of the person or the setting. Descriptions of the role and the setting are required. You will need to access the information from a job description, expectations for the role, performance appraisal guidelines, and required competencies. You will also need to spend time with this individual so begin to schedule it right away. The paper will be a minimum of 10 double-spaced pages in length and maximum of 14 pages, excluding the title sheet and the reference list, and must address these criteria:

1. Description of the healthcare system (size, responsibilities, mission, and service commitment)
2. A copy of the agency's organizational chart (scanned in to your paper, or typed in chart form if you do not have a scanner)
3. Description of nursing administrative position and fiscal responsibilities
4. Overview of the management responsibilities of the administrator
5. Description of the nursing care delivery system in the agency or setting
6. Discussion of the leadership style and characteristics of the administrator
7. Presentation of communication strategies utilized by administrator
8. Discussion of evidence of negotiation and conflict management skills
9. Discussion of how she implements ANA standards of practice
10. Summary

<http://allnurses.com/nursing-management/writing-paper-need-662599.html> retrieved dated 14/12/14.

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Helpful websites:

- <http://www.icn.ch>
- <http://www.nursingconsult.com/>
- <http://www.who.org>.
- <http://www.nursingworld.org>
- www.apastyle.org.

Advance Specialty Courses:

| COURSE TITLE | |
|----------------------------------|-----------------------|
| NURSING EDUCATION AND INNOVATION | |
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR II, SEMESTER III |
| COURSE PRE-REQUISITE | |

Course Description:

This course is designed to assist students to develop a broad understanding of Fundamental Principles, concepts, trends and issues related to education and nursing education and technological innovation. The application of knowledge, rather than straight didactic content, is a hallmark of nursing education programs and necessitates the use of technologies that allow students to think outside of traditional educational models. The use of technology in educational programs allows the faculty to engage students in application level activities in and out of the classroom. Faculty and practitioners who are able to engage students with the use of technology provide them a tool for exploration and problem solving in their work and clinical environments. Teaching students to use technology effectively, then translates into the meaningful use of technology at the bedside for effective, efficient patient education, provider updates and at your fingertip resources. This course further, provide opportunity to the students to understand, appreciate and acquire skills in teaching and evaluation, implementation, maintenance of standards and accreditation of various nursing educational programs.

Course Outcome:

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

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

Teaching / Learning strategies

- Lecture cum discussion
- Presentations
- Field Visits

Evaluation Criteria:

| CRITERIA | | |
|-------------------------|-----|--------------------------|
| INTERNAL EVALUATION 50% | | EXTERNAL EXAMINATION 50% |
| QUIZZES/MIDTERM EXAM | 20% | FINAL EXAMINATION |
| WRITTEN ASSIGNMENTS | 20% | |
| PRESENTATION | 10% | |
| TOTAL 100% | | |

Table of Specification:

| Subject: Nursing Education and Innovation | Bloom's Taxonomy | | | TOTALS |
|--|---------------------------|-------------|----------------------------------|--------|
| | Knowledge & Comprehension | Application | Analysis, Synthesis & Evaluation | |
| Unit – I Introduction of Nursing Education | 9% | 8% | 10% | 27% |
| Unit – II Teaching – Learning Development | 5% | 5% | 5% | 16% |
| Unit – III Instructional Media and Methods (Teaching & Learning Methodologies) | 7% | 7% | 9% | 23% |
| Unit – IV Measurement and Evaluation | 8% | 9% | 7% | 23% |
| Unit – V Standardized and Non-Standardized Tests | 3% | 3% | 4% | 11% |
| Unit – VI Administration, Scoring and Reporting | | | | |
| Unit – VII Standardized Educational Assessment Tools | | | | |
| Unit – VIII Nursing Educational Programs | | | | |
| Unit – IX Continuing Nursing Education (CNE) | | | | |
| Unit – X Clinical Teaching, Supervision and Teacher Preparation | | | | |
| Unit – XI Administration of Nursing Curriculum | | | | |
| Unit – XII Management of Nursing Educational Institutions | | | | |
| Unit – XIII Educational Teaching Innovation | | | | |
| Unit – VI Program Evaluation | | | | |
| TOTALS | 32% | 32% | 36% | 100% |

Unit Objectives

Unit 1: Introduction of Nursing Education

At the end of the unit learners will be able to:

- 1) Define Education, aims, objectives, concepts, philosophies, mission, vision and their implications
- 2) Discuss the impact of social, economical, political and technological innovation and changes on education:
 - Professional education,
 - Current trends and issues in education
 - Educational reforms and National Educational policy, various educational commissions-reports
 - Historical development of nursing education in Pakistan

Unit 2: Teaching – Learning Development

At the end of the unit learners will be able to:

- 1) Define and discuss the concepts of teaching and learning
- 2) Discuss theories of teaching and learning, relationship between teaching and learning.
- 3) Explore the educational objectives; types, domains, levels, elements and writing of educational objectives
- 4) Elaborate the Competency based education (CBE) and outcome based education (OBE)
- 5) Discuss the Instructional design including Planning and designing the lesson, writing lesson plan: meaning, its need and importance, formats.
- 6) Develop the instruction strategies about Lecture, discussion, demonstration, simulation, laboratory, seminar, panel, symposium, problem solving, problem based learning (PBL), workshop, project, role- play(socio- drama), clinical teaching methods, programmed instruction, self-directed learning (SDL), micro teaching, computer assisted instruction (CAI), computer assisted learning (CAL)

7)

Unit 3: Instructional Media and Methods (Teaching & Learning Methodologies):

At the end of the unit learners will be able to:

- 1) Discuss the key concepts in the selection and use of media in education
- 2) Developing learning resource material using different media
- 3) Discuss the instructional aids – types, uses, selection, preparation, utilization.
- 4) Discuss instructional Aids – types, uses, selection, preparation, utilization
- 5) Elaborate the Teacher's role in procuring and managing instructional Aids
- 6) Discuss instructional strategies: Lecture, discussion, demonstration, simulation, laboratory, seminar, panel, symposium, problem based learning (PBL), workshop, Projector Assisted Teaching, Role-Play (socio- drama), Clinical Teaching Methods, Self-Directed Learning (SDL)
- 7) Concepts of Mentorship, Preceptorship and as Facilitator of learning

Unit 4: Measurement and Evaluation:

At the end of this unit, the learners will be able to:

- 1) Discuss the concept and nature of measurement and evaluation, meaning, process, purposes, problems in evaluation and measurement.
- 2) Explore the principles of assessment, formative and summative assessment- internal assessment external examination, advantages and disadvantages.
- 3) Discuss the criterion and norm referenced evaluation

Unit 5: Standardized and non-standardized tests:

At the end of this unit, the learners will be able to:

- 1) Discuss the meaning, characteristics, objectivity, validity, reliability, usability, norms, construction of tests:
 - Essay, short answer questions and multiple choice questions.
 - Rating scales, checklist, OSCE/OSPE (Objective structured clinical/practical examination)
 - Differential scales, and summated scales, sociometry, anecdotal record, attitude scale, critical incident technique
- 2) Describe Question bank-preparation, validation, moderation by panel, and utilization.
- 3) Developing a system for maintaining confidentiality and secrecy of exam papers

Unit 6: Administration, Scoring and Reporting:

At the end of this unit, the learners will be able to:

- 1) Describe the administration, Scoring and Reporting
- 2) Discuss the administering a test; scoring, grading versus marks
- 3) Explore objective tests, scoring essay test, methods of scoring, Item analysis

Unit 7: Standardized Educational Assessment Tools:

At the end of this unit, the learners will be able to:

- 1) Discuss the tests of intelligence aptitude, interest, personality, achievement, socio-economic status scale, tests for special mental and physical abilities and disabilities

Unit 8: Nursing Educational programs:

At the end of this unit, the learners will be able to:

- 1) Discuss the perspectives of nursing education: Global and national.
- 2) Explore the patterns of nursing education and training programs in Pakistan (Non-university and University based programs): General Nursing and Midwifery, Post Basic Diploma Specialty Program, B.Sc. Nursing, M.Sc Nursing programs, M.Phil and PhD in Nursing or advanced diploma programs after masters programs as nurse practitioner, Family Practitioner programs etc.

Unit 9: Continuing Nursing Education (CNE):

At the end of this unit, the learners will be able to:

- 1) Discuss Concepts, Definition, Importance, Scope, Principles and assessments of learning needs.
- 2) Describe the types of CNE programs, and planning, implementation and evaluation of CNE programs.
- 3) Elaborate the research application in continuing nursing education.
- 4) Discuss the importance of distance education in nursing.

Unit 10: Clinical Teaching, Supervision and Teacher Preparation:

At the end of this unit, the learners will be able to:

- 1) Describe the concept of Teacher, roles & responsibilities, functions, characteristics, competencies, qualities
- 2) Discuss the preparation of professional teacher
- 3) Organize professional aspects of teacher preparation programs
- 4) Evaluation: self and peer
- 5) Critical analysis of various programs of teacher education in Pakistan
- 6) Clinical Teaching/ learning preparation, strategies, and methods
- 7) Ways to improve clinical teaching
- 8) Strategies to promote critical thinking and reflective practice in clinical setting
- 9) Role of the Clinical Educator in managing clinical teaching
- 10) Clinical Supervision Model for Student's Assessment

Unit 11: Administration of course curriculum:

At the end of this unit, the learners will be able to:

- 1) Role of course coordinator – planning, implementation and evaluation
- 2) How to develop annual, semester and monthly course plan
- 3) Evaluation of annual, semester course and overall program
- 4) Factors influencing faculty staff relationship and techniques of working together
- 5) Concept of faculty supervisor (dual) position
- 6) Curriculum research in nursing
- 7) Different models of collaboration between education and services

Unit 12: Management of Nursing Educational Institutions:

At the end of this unit, the learners will be able to:

- 1) Discuss planning, organizing, staffing, budgeting, recruitment, discipline, public relation, performance appraisal, welfare services, library services, hostel
- 2) Development and maintenance of standards and accreditation in nursing education programs
- 3) Role of Pakistan Nursing Council, Provincial Nursing Boards, Nursing Health Advisory Board and University
- 4) Role of Professional associations and unions

Unit 13: Educational Teaching Innovation:

At the end of this unit, the learners will be able to:

- 1) Discuss Team teaching, Educational Gaming, and Personalized System of Instruction (PSI)
- 2) Explore Microteaching (MT), Basic approaches, Teaching skills, MT procedure, advantages and disadvantages
- 3) Discuss Smart Classroom Management, and Role of Teacher and Teaching Management
- 4) Discuss Online Class Management System
- 5) Discuss about linking of Video-conferencing and Zooming Classroom Lecturing
- 6) Discuss the Educational Management Information System (EMIS) and process of designing of EMIS system in Nursing College.

Unit 14: Program Evaluation:

At the end of this unit, the learners will be able to:

- 1) Discuss the approaches used for program evaluation, course evaluation and student evaluation
- 2) Elaborate the planning strategies in educational program evaluations

Class Schedule

| Unit # | Topic | Faculty |
|-----------------|--|----------------|
| Unit I | Introduction to Education and Nursing Education <ul style="list-style-type: none"> • Definition Education, Nursing education, aims, objectives, concepts, philosophies, mission, vision and their implications • Impact of social, economical, political and technological innovation and changes on education <ul style="list-style-type: none"> ▪ Professional education ▪ Current Trends and Issues in Education ▪ Educational Reforms and National Educational Policy, various educational commissions-reports • Historical Development of Nursing Education in Pakistan | |
| Unit II | Teaching – Learning Development <ul style="list-style-type: none"> • Concepts and Definitions of Teaching and Learning • Theories of Teaching and Learning, and relationship between teaching and learning. • Development of educational objectives; types, domains, levels, elements and writing of educational objectives • Competency based education (CBE) and outcome based education (OBE) • Instructional design including Planning and designing the lesson, writing lesson plan; meaning, and importance. • Teacher – roles & responsibilities, functions, characteristics, competencies, qualities. | |
| Unit III | Instructional Media and Methods (Teaching & Learning Methodologies): <ul style="list-style-type: none"> • Key concepts in the selection and use of media in education • Developing learning resource material using different media • Instructional aids – types, uses, selection, preparation, utilization. • Teacher's role in procuring and managing instructional Aids • Instructional strategies: Lecture, discussion, demonstration, simulation, laboratory, seminar, panel, symposium, problem based learning (PBL), workshop, Projector Assisted Teaching, Role-Play (socio- drama), Clinical Teaching Methods, Self-Directed Learning (SDL) • Concepts of Mentorship, Preceptorship and as Facilitator of learning | |
| Unit IV | Measurement and Evaluation: <ul style="list-style-type: none"> • Concept of term test measurement and evaluation (purposes, process, principles of assessment, formative and summative • Instructional model and developing the table of specification • Difference between criterion and norm referenced evaluation. | |

| | | |
|------------------|---|--|
| Unit V | Standardized and Non-Standardized Tests: <ul style="list-style-type: none"> • Characteristics that affects on the, objectivity, validity, reliability, usability, norms, construction of tests. • Planning and developing appropriate test items: Essay, short answer questions and multiple choice questions. • Rating scales, checklist, OSCE/OSPE (Objective structured clinical/practical examination) • Different scales, and summated scales, sociometry, anecdotal record, attitude scale, critical incident technique • Question bank preparation, through validation, moderation by panel, utilization a system for maintaining confidentiality. | |
| Unit VI | Administration, Scoring and Reporting <ul style="list-style-type: none"> • Test, scoring, grading versus marks, objective tests, scoring essay test, methods of scoring, item analysis. • Issues in interpretation of results that effect on scores (exemplify with any NEB) | |
| Unit VII | Standardized Educational Assessment Tools: <ul style="list-style-type: none"> • Tests of intelligence: <ul style="list-style-type: none"> ▪ Aptitude test, ▪ Interest and personality assessment test, ▪ Scholastic achievement test, ▪ Socio-economic status scale, ▪ Tests for special mental and physical abilities and disabilities | |
| Unit VIII | Continuing Education in Nursing <ul style="list-style-type: none"> • Basic Concepts, Definition, Importance, Scope, Principles and assessments of learning needs. • Types of CNE programs, and planning, implementation and evaluation of CNE programs. • Research application in continuing nursing education. • Concept and Importance of Distance Education (DE) in nursing. | |
| Unit IX | Clinical Teaching, Supervision and Teacher Preparation: <ul style="list-style-type: none"> • Concept of Teacher, roles & responsibilities, functions, characteristics, competencies, qualities • Preparation of professional teacher • Professional aspects of teacher preparation programs • Evaluation: self and peer • Critical analysis of various programs of teacher education in Pakistan • Clinical Teaching/ learning preparation, strategies, and methods • Ways to improve clinical teaching • Strategies to promote critical thinking and reflective practice in clinical setting • Role of the Clinical Educator in managing clinical teaching • Clinical Supervision Model for Student's Assessment and Learning | |

| | | |
|-----------------|---|--|
| Unit X | Management of Nursing Educational Institutions: <ul style="list-style-type: none"> • Leadership styles needed for educational management • Influences of politics and power on an educational organization • Responsibilities of nurse educator in management of nursing institution (Planning, organizing, staffing, budgeting, recruitment, discipline, public relation, performance appraisal, welfare services, library services, hostel) • Legislative factors affecting on educational institution: <ul style="list-style-type: none"> ▪ The Pakistan Nurses Act 1973 ▪ Pakistan Nursing Federation • Process development and maintenance of standards and accreditation in nursing education programs. • Role of Pakistan Nursing Council, Provincial Nursing Boards, Nursing Health Advisory Board and University • Role of Professional Associations and Unions | |
| Unit XI | Nursing Educational Programs: <ul style="list-style-type: none"> • Perspectives of nursing education: Global and National. • Patterns of nursing education and training programs in Pakistan (Non-university and University based programs): <ul style="list-style-type: none"> ▪ General Nursing and Midwifery, ▪ Post Basic Diploma Specialty Program, ▪ B.Sc. Nursing, ▪ M.Sc Nursing programs, ▪ M.Phil and PhD in Nursing or ▪ Advanced diploma after master's programs as Nurse Practitioner, Family Practitioner, Nurse Educator, and Clinical Nurse Specialist programs etc. | |
| Unit XII | Administration of course Curriculum: <ul style="list-style-type: none"> • Role of course coordinator – planning, implementation and evaluation • Development of annual, semester and monthly course plan • Evaluation of annual, semester course and overall program • Factors influencing faculty staff relationship and techniques of working together • Concept of faculty supervisor (dual) position • Curriculum research in nursing • Different models of collaboration between education and services | |

| | | |
|------------------|---|--|
| Unit XIII | Educational Teaching Innovation: <ul style="list-style-type: none"> • Team teaching, Educational Gaming, and Personalized System of Instruction (PSI) • Microteaching (MT), Basic approaches, Teaching skills, MT procedure, advantages and disadvantages • Concept of Smart Classroom, its Management, and role of teacher and teaching management of Smart Classroom • Online Class Management System • Linking of Video-conferencing and Zooming Classroom Lecturing • Educational Management Information System (EMIS) and process of designing of EMIS system in Nursing College. | |
| Unit XIV | Program Evaluation <ul style="list-style-type: none"> • Program Evaluation Definition, Process and Development • Approaches used for <ul style="list-style-type: none"> ▪ program evaluation, ▪ course evaluation and ▪ student evaluation • Important planning strategies in educational program evaluations. | |

| COURSE TITLE | |
|--|------------------------------|
| NURSING SERVICE ADMINISTRATION AND PERSONNEL MANAGEMENT | |
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR II, SEMESTER III |
| COURSE PRE-REQUISITE | |

Course Description:

This course sets the foundational stage for the nurse administrator specialty track. This course will help nurses enhance their knowledge and skills of nursing administration for rendering care to the patients in any healthcare institution. This course will enable the nurses to build capabilities and competencies required for leading the nursing teams for administering specific treatment plans, care planning, care execution, evaluation of care, health-education, follow-up of care. This course is specially aimed at making nurses proficient in the specialized area of nursing administration. Interested nurses can enhance their skills and knowledge by taking this course and make a career for themselves in this discipline. This course empowers nurses to acquire in-depth knowledge and understanding of the leadership styles, management theories and team-building for care, cure and promotion of health of patient populations. Successful candidates can work in any healthcare establishment and provide specialized care with clinical decision-making and critical thinking.

Course outline

Unit 1: Introduction to Nursing Profession:

At the end of the unit learners will be able to:

- 1) Define the nature of Nursing as Science and Arts
- 2) Define the characteristics of Profession and process of professionalization
- 3) Elaborate is nursing as Science or Arts with present scenario
- 4) Explain the professional socialization of nursing profession
- 5) Examine the need for Nursing Administration

Unit 2: Concept of Administration:

At the end of the unit learners will be able to:

- 1) Define the meaning and Nature of Administration
- 2) Discuss the difference between Administration and Management
- 3) Explore the philosophy of Administration
- 4) Elaborate the principles of Administration
- 5) Elucidate the elements of Administration
- 6) Explain the theories of Administration and Management
- 7) Exercise the modern management theories

Unit 3: Management in Healthcare Delivery System:

At the end of the unit learners will be able to:

- 1) Definition and Functions of Management
- 2) Discuss the types and Techniques of Management
- 3) Explain the functions and Levels of Managers
- 4) Elaborate the ABC and VED Analysis

Unit 4: Hospital Administration:

At the end of the unit learners will be able to:

- 1) Define meaning, Philosophy and Functions of Hospital
- 2) Explore the evolution and Classification of Hospital
- 3) Discuss the hospital Utilization and Statistics
- 4) Composition of Hospital Departments
- 5) Explain the planning Job Requirements and Job Descriptions of Hospitals
- 6) Elaborate the human Resource Requirements in Hospital
- 7) Examine and frame the rules, Regulations and Policy of Hospital

Unit 5: Nursing Services Administration:

At the end of the unit learners will be able to:

- 1) Planning for Hospital Nursing Services Administration
- 2) Philosophy and Objectives of Nursing Services in Hospital
- 3) Nursing Services Administration Unit and Administrative Norms
- 4) Nursing Services Department
- 5) Organizing and Management of Nursing Services Unit
- 6) Factors influencing Ward Management
- 7) Equipment Management
- 8) Nursing Care Delivery System Management
- 9) Evaluation and Accountability of Nursing Services Administration

Unit 6: Nursing Services Staffing:

At the end of the unit learners will be able to:

- 1) Meaning, Types and Principles of Nursing Staffing
- 2) Philosophy and Objectives of Nursing Staffing
- 3) Line-Staffing Relationships
- 4) Nursing Staffing Policies
- 5) Recruitment and Retention Process
- 6) Steps in Staffing
- 7) Steps Used in Recruitment Process
- 8) Staffing Formula
- 9) Factors Influencing Staffing Requirements in the Nursing Services Unit
- 10) Roles and Functions of Nursing Administrators in Staffing Schedules
- 11) Principles of Staffing and Scheduling
- 12) Roles and Responsibilities of Nursing Personnel in managing Staffing and Scheduling
 - Chief of Nursing/ Director Nursing Services
 - Nursing Superintendent
 - Head Nurse/ Nurse Manager of the Unit

Unit 7: Nursing Budgeting:

At the end of the unit learners will be able to:

- 1) Budgeting Meaning, Purposes and Importance
- 2) Principles and Classification of Budgeting
- 3) Budgeting Approaches and Process with Fiscal Year Analysis
- 4) Advantages and Disadvantages of Budgeting
- 5) Nursing Budgeting and Process
- 6) Terms Used in Budgeting

Unit 8: Clinical Supervision:

At the end of the unit learners will be able to:

- 1) Clinical Supervision Meaning, Purposes and Importance
- 2) Principles, Classification and Component of Clinical Supervision
- 3) Reflective Learning and Clinical Supervision Models
- 4) Roles and Responsibilities of Nursing Supervisor

Unit 9: Quality Assurance and Quality Control (QA & QC):

At the end of the unit learners will be able to:

- 1) QA & QC Meaning, Purposes and Importance in Services Management
- 2) Standards as a Device for Quality Control
- 3) Total Quality Management (TQM)
- 4) Quality Improvement (QI)
- 5) Nursing Audit and Nursing Standards
- 6) Nursing Care Standards in Ward Management
- 7) Process of Patient Care Auditing
- 8) Risk Management and Disaster Management

Unit 10: Discipline and Procedure in Nursing Services Management:

At the end of the unit learners will be able to:

- 1) Office Procedure, Drafting and Communication
- 2) Public Sector Management
- 3) Discipline and Dealing with Disciplinary Problems
- 4) General Principles and Procedures of Enquiry
- 5) Principles and Functions of an Enquiry Officer

Unit 11: Personnel Management in Nursing Services:

At the end of the unit learners will be able to:

- 1) Historical Perspective of Personnel/ Human Resource Management (P/HRM)
- 2) Objectives, Functions and Activities of P/HRM
- 3) Manpower Planning and Health Manpower Planning and Management
- 4) Factors Determining the Number of Personnel
- 5) Managerial Conflict and Resolution Theory
- 6) Job Description, Job Specification and Job Evaluation
- 7) Performance Appraisal and Evaluation Process, Methods and Application

Unit 12: Continuing Nursing Education (CNE) and Staff Development:

At the end of the unit learners will be able to:

- 1) Meaning, Philosophy and Need for CNE and Staff Development
- 2) Types, Principles, and Importance of CNE and Staff Development
- 3) Difference amongst continuing education, in-service education, Adult Education and Staff Development
- 4) Staff Development Purposes, Model and Process
- 5) Administrative Structure of Staff Development Program
- 6) Guidelines for Organizing State-level Trainings/ Workshops
- 7) Career Development and Career Enhancement Program

Class Schedule

| Unit # | Topic | Faculty |
|----------|--|---------|
| Unit I | Introduction to Nursing Profession <ul style="list-style-type: none"> • Nature of Nursing as Science and Arts • Characteristics of Professionalization • Is Nursing a Profession or Occupation • Nursing as Science and Arts • Professional Socialization of Nursing • Need for Nursing Administration | |
| Unit II | Concept of Administration: <ul style="list-style-type: none"> • Meaning and Nature of Administration • Difference between Administration and Management • Philosophy of Administration • Principles of Administration • Elements of Administration • Theories of Administration and Management • Modern Management Theories | |
| Unit III | Management in Healthcare Delivery System: <ul style="list-style-type: none"> • Definition and Functions of Management • Types and Techniques of Management • Functions and Levels of Managers • ABC and VED Analysis | |
| Unit IV | Hospital Administration: <ul style="list-style-type: none"> • Meaning, Philosophy and Functions of Hospital • Evolution and Classification of Hospital • Hospital Utilization and Statistics • Composition of Hospital Departments • Planning Job Requirements and Job Descriptions of Hospitals • Human Resource Requirements in Hospital • Rules, Regulations and Policy of Hospital | |
| Unit V | Nursing Services Administration: <ul style="list-style-type: none"> • Planning for Hospital Nursing Services Administration • Philosophy and Objectives of Nursing Services in Hospital • Nursing Services Administration Unit and Administrative Norms • Nursing Services Department • Organizing and Management of Nursing Services Unit • Factors influencing Ward Management • Equipment Management • Nursing Care Delivery System Management • Evaluation and Accountability of Nursing Services Administration | |

| | | |
|------------------|--|--|
| Unit VI | Nursing Services Staffing: <ul style="list-style-type: none"> • Meaning, Types and Principles of Nursing Staffing • Philosophy and Objectives of Nursing Staffing • Line-Staffing Relationships • Nursing Staffing Policies • Recruitment and Retention Process • Steps in Staffing • Steps Used in Recruitment Process • Staffing Formula • Factors Influencing Staffing Requirements in the Nursing Services Unit • Roles and Functions of Nursing Administrators in Staffing Schedules • Principles of Staffing and Scheduling • Roles and Responsibilities of Nursing Personnel in managing Staffing and Scheduling <ul style="list-style-type: none"> ▪ Chief of Nursing/ Director Nursing Services ▪ Nursing Superintendent ▪ Head Nurse/ Nurse Manager of the Unit | |
| Unit VII | Nursing Budgeting: <ul style="list-style-type: none"> • Budgeting Meaning, Purposes and Importance • Principles and Classification of Budgeting • Budgeting Approaches and Process with Fiscal Year Analysis • Advantages and Disadvantages of Budgeting • Nursing Budgeting and Process • Terms Used in Budgeting | |
| Unit VIII | Clinical Supervision: <ul style="list-style-type: none"> • Clinical Supervision Meaning, Purposes and Importance • Principles, Classification and Component of Clinical Supervision • Reflective Learning and Clinical Supervision Models • Roles and Responsibilities of Nursing Supervisor | |
| Unit IX | Quality Assurance and Quality Control (QA & QC): <ul style="list-style-type: none"> • QA & QC Meaning, Purposes and Importance in Services Management • Standards as a Device for Quality Control • Total Quality Management (TQM) • Quality Improvement (QI) • Nursing Audit and Nursing Standards • Nursing Care Standards in Ward Management • Process of Patient Care Auditing • Risk Management and Disaster Management | |
| Unit X | Discipline and Procedure in Nursing Services Management: <ul style="list-style-type: none"> • Office Procedure, Drafting and Communication • Public Sector Management • Discipline and Dealing with Disciplinary Problems • General Principles and Procedures of Enquiry • Principles and Functions of an Enquiry Officer | |

| | | |
|-----------------|--|--|
| Unit XI | Personnel Management in Nursing Services: <ul style="list-style-type: none"> • Historical Perspective of Personnel/ Human Resource Management (P/HRM) • Objectives, Functions and Activities of P/HRM • Manpower Planning and Health Manpower Planning and Management • Factors Determining the Number of Personnel • Managerial Conflict and Resolution Theory • Job Description, Job Specification and Job Evaluation • Performance Appraisal and Evaluation Process, Methods and Application | |
| Unit XII | Continuing Nursing Education (CNE) and Staff Development: <ul style="list-style-type: none"> • Meaning, Philosophy and Need for CNE and Staff Development • Types, Principles, and Importance of CNE and Staff Development • Difference amongst continuing education, in-service education, Adult Education and Staff Development • Staff Development Purposes, Model and Process • Administrative Structure of Staff Development Program • Guidelines for Organizing State-level Trainings/ Workshops • Career Development and Career Enhancement Program | |

Table of Specification

| Bloom's Taxonomy | | | | |
|---|------------------------------|-------------|---------------------------------------|-------------|
| Subject: Nursing Services Administration and Personnel Management | Knowledge & Comprehension | Application | Analysis, Synthesis &Evaluation | TOTALS |
| Unit – I Introduction to Nursing Profession | 9% | 8% | 10% | 27% |
| Unit – II Concept of Administration | 5% | 5% | 5% | 16% |
| Unit – III Management in Healthcare Delivery System | 7% | 7% | 9% | 23% |
| Unit – IV Hospital Administration | 8% | 9% | 7% | 23% |
| Unit – V Nursing Services Staffing | 3% | 3% | 4% | 11% |
| Unit – VI Nursing Budgeting | | | | |
| Unit – VII Nursing Budgeting | | | | |
| Unit – VIII Clinical Supervision | | | | |
| Unit – IX Quality Assurance and Quality Control (QA & QC) | | | | |
| Unit – X Discipline and Procedure in Nursing Services Management | | | | |
| Unit – XI Personnel Management in Nursing Services | | | | |
| Unit – XII Continuing Nursing Education (CNE) and Staff Development | | | | |
| TOTALS | 32% | 32% | 36% | 100% |

References:

Sunita Joseph. 2019. Nursing Administration and Management. AITBS publisher, India

BT., Basavathappa. Nursing Administration., India

| COURSE TITLE CRITICAL CARE NURSING (CCN)-I ADULT NURSING MANAGEMENT | |
|---|-----------------------|
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR II, SEMESTER III |
| COURSE PRE-REQUISITE | |

Course Description:

This course is designed to develop the students with the knowledge of fundamentals in critical care nursing. Students will also assess the responses to critical illness of patient and family and develop insight to ethical and legal issues in critical care.

Course Objective

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

- 1) Develop a specific theoretical knowledge related to physiological and psychosocial responses to critical health disruptions.
- 2) Develop a system to evaluate health status, identify responses to critical health disruptions, and define learning needs of critically ill patients and their families.
- 3) Analyze research results and its implication in the area of critical care that relate to current practice.
- 4) Evaluate the value of collaboration in the care of the critical ill, and those with system specific disorders.
- 5) Reflect on legal and ethical issues related to critical nursing.

Teaching Strategies:

Discussion, brainstorming, feedback techniques, guided write-up, workshop, student presentations

Evaluation Criteria

| Evaluation Criteria | | |
|-------------------------|-----|--------------------------|
| CRITERIA | | |
| INTERNAL EVALUATION 50% | | EXTERNAL EXAMINATION 50% |
| MIDTERM /QUIZZES | 20% | THESIS PROPOSAL (DRAFT) |
| PROPOSAL PRESENTATION | 10% | |
| CLASS PARTICIPATION | 10% | |
| (ERC FORM) | 10% | |
| TOTAL 100% | | |

Course Content: Critical Care Nursing-I (Adult Nursing Management)

Unit No. 1 Overview of Critical Care Nursing:

At the end of this unit, the learners will be able to:

- 1) Define of Critical Care Nursing
- 2) Discuss the Evolution Theory of critical care
 - Critical Care Concept
 - Critical Care Medicine (CCM)
 - Critical Care Nursing (CCN)
- 3) Enumerate the Critical care nurse competencies
- 4) Discuss the role development of critical care nurse
- 5) Discuss the role of the interdisciplinary collaboration team
- 6) Discuss how to organize critical care team
- 7) Discuss the Standards of Practices of critical care units

Unit No. 2 Approach to Critical Care

At the end of this unit, the learners will be able to:

- 1) Standards of care /Evidence based best practices
- 2) AACN synergy model of critical care
- 3) Teaching and discovery/research in critical care

Unit No. 3Improving the Quality of Care in the Intensive Care Unit

At the end of this unit, the learners will be able to:

- 1) Defining standards and best practices.
- 2) Defining critical care unit performance
- 3) Measuring and interpreting critical care performance through audit
- 4) Improving intensive care performance
 - Conceptual framework

Unit No. 4Strategies to improve Performance

At the end of this unit, the learners will be able to:

- 1) Oxygen administration
- 2) Airway management
- 3) Type of airways
- 4) Endotracheal intubation
- 5) Tracheotomy
- 6) Suctioning

Unit No. 5 Radiology

At the end of this unit, the learners will be able to:

- 1) Define Significance of X-Ray as a Diagnostic Procedure
- 2) Discuss basic X Rays effect on human anatomical parts i.e., bones, Tissues blood and image on X ray film
- 3) Verbalize Views of Chest X rays
- 4) Define basics of Interpreting a chest X ray
- 5) Discuss X ray Patient pre, Intra Post care
- 6) Define Hazards of radiation and there precautions
- 7) Basic understanding of special imaging, studies such as CT, Ultrasound, MRI,Fluoroscopy Nuclear Medicine interventional radiology etc.
- 8) Interpretation of Chest x-ray exhibiting following lungs, Heart, Abdomen pathologies

Lungs: Atelectasis, Pulmonary edema, Pulmonary Hypertension, Pneumothorax, Hemothorax, Tracheal shift, Tuberculosis, Hyper inflated lungs, Lungs with secretions

- Heart:** Location on chest X-ray, Cardiomegaly, Permanent pace maker wires to the heart, CVP and Swan gauze lines
- Abdomen:** AP supine view, PA erect view, lateral decubitus view, lateral view, PA prone view, dorsal decubitus view, oblique views

Unit No. 6 Code Management and Rapid Response Team

At the end of this unit, the learners will be able to:

- 1) Rapid response team roles and responsibility
- 2) Concept of Crisis Resource Management
- 3) Equipment's used
- 4) Advance Cardiac Life Support
- 5) Pharmacological interventions during code
- 6) Documentation of Code events
- 7) The Concept of Therapeutic Hypothermia after code

Unit No. 7 Family Presence during Resuscitation

At the end of this unit, the learners will be able to:

- 1) Ethical issues arises due to presence of family during resuscitation
- 2) Family presence during resuscitation policy & guidelines
- 3) Benefits and pitfalls of family presence during resuscitation
- 4) Nurses perceptions of family presence during resuscitation

Unit No. 8 Invasive Hemodynamic Monitoring:

At the end of this unit, the learners will be able to:

- 1) Right artery pressure/ Central Venous pressure,
- 2) Pulmonary artery pressure,/Swan Gauze catheter
- 3) Arterial versus Venous blood gases sampling
- 4) Insertion its measurement Interpretation
- 5) Intra-Aortic Balloon Pump

Unit No. 9 Patient and Family Responses to Critical Care Experience

At the end of this unit, the learners will be able to:

- 1) The critically ill patient and its impact of family process
- 2) Communication with patient and family in critical care
- 3) Assessment of family need and providing relevant guidance and support
- 4) Visiting policy
- 5) Family teaching and involvement in care

Unit No. 10 Philosophical Foundation of Bioethics in Criticalcare

At the end of this unit, the learners will be able to:

- 1) Different Ethical decision making practical models, frameworks and tools
- 2) Four principle approach to health care ethics by Beauchamp and Childress
- 3) Ethical decision making according to Professional codes and standards
- 4) Role of nurses in ethical decision makings
- 5) Discuss the importance of legal and ethical issues in critical care nursing
- 6) Discuss the contemporary ethical issues
 - Informed consent and patient autonomy verses dignity
 - Advance directives
 - Decision regarding life sustaining treatment
 - End of life issue

- Brain death
- 7) Discuss the restrictive Interventions in ICU relating to ethical perspectives
 - Restrain as an emerging ethical issue
 - Role of nurses in maintaining patient safety and advocacy

Unit No. 11 End of Life Issues and managing the concept of Death and Dying:

At the end of this unit, the learners will be able to:

- 1) Ethical issues near the end of life
- 2) End of life issues and care provided by nurses.
- 3) Resources (patient/nurse/ family education) about end of life issues.
- 4) Clinical practice guidelines for communicating prognosis and end of life issues
- 5) Breaking bad news and nurse's roles and responsibilities.
- 6) The medical Futility: Implications for critical care nurses
- 7) Management of psychological, spiritual distress and suffering
- 8) Patient Code status (Cardio-Pulmonary Resuscitation (CPR), No code, Do Not Resuscitate (DNR), full code)
- 9) Withholding and withdrawing life sustaining measures
- 10) Patient and family decision making for sustaining life support
- 11) Advance directives
- 12) Guidelines for end of life support
- 13) Role of nurses in withdrawing end of life support.

Unit No. 12 Infection Control and Surveillance in the Intensive Care Unit:

At the end of this unit, the learners will be able to:

- 1) Surveillance
- 2) Structural/Organizational Factors That Affect ICU Infection Control
- 3) Invasive Devices And ICU-Acquired Infections
- 4) Interventions To Prevent Nosocomial Infections
- 5) Antibiotic Resistance In The ICU
- 6) Preventing Antibiotic Resistance In The ICU
- 7) Hand hygiene
- 8) Preventing transmission of pathogens between ICU personnel and patients
- 9) Infection control issues related to specific pathogens

Unit No. 13 Cardiovascular Alterations in Critical Care:

At the end of this unit, the learners will be able to:

- 1) Acute coronary syndrome and angina
- 2) Myocardial infarction and complications
- 3) Heart Failure
- 4) Arrhythmias
 - Atrial
 - Ventricular
 - Atrioventricular blocks
 - Cardiac pacemaker

Unit No. 14 Renal Alterations in Critical Care:

At the end of this unit, the learners will be able to:

- 1) Fluids and electrolytes disorders in critical care

- 2) Fluid and electrolyte replacement therapy evidence based guidelines
- 3) Acute renal failure
- 4) Dialysis
- 5) Renal transplant
- 6) Diabetic Ketoacidosis
- 7) Diabetes Insipidus
- 8) Syndrome of Inappropriate Diabetes Insipidus (SIADH)
- 9) Adrenocortical Insufficiency
- 10) Thyroid Crisis
- 11) Nursing care and Management

Unit No. 15 Assessment of Severity of Illness and Management of Common complications:

At the end of this unit, the learners will be able to:

- 1) Purposes of scoring systems
- 2) Development of scoring systems
- 3) Severity-of-illness scoring systems in clinical use including escalation policy
- 4) Clinical, administrative, and management uses of scoring systems
- 5) Ethical issues relevant to use of scoring systems to guide management sources of error and bias in scoring systems importance of preventive interventions in the intensive Care Unit (ICU)
- 6) Effective prevention in the ICU: Do an environmental scan
- 7) Effective prevention in the ICU: Understand current behavior
- 8) Effective prevention in the ICU adopt effective behavior-change strategies
- 9) Compliance with Euglycemia
- 10) Nasal surgery care
- 11) Bleeding nose
- 12) Anterior Nasal Packing
- 13) Posterior Nasal Packing
- 14) Tonsillectomy patient care
- 15) Tongue bite protection
- 16) Throat surgery care

Class Schedule

| Unit # | Topic | Faculty |
|----------|---|---------|
| Unit I | Overview of Critical Care Nursing <ul style="list-style-type: none"> • Definition of Critical Care Nursing • Evolution Theory of critical care <ul style="list-style-type: none"> ▪ Critical Care Concept ▪ Critical Care Medicine (CCM) ▪ Critical Care Nursing (CCN) • List the Critical care nurses competencies • Role development of critical care nurse • Role of the interdisciplinary collaboration team • How to organize critical care team • Standards of Practices(SoPs) in critical care units | |
| Unit II | Approaches to the Critical Care Nursing <ul style="list-style-type: none"> • Standards of care /Evidence based best practices • AACN synergy model of critical care • Teaching and discovery/research in critical care | |
| Unit III | Improving the Quality of Care in the Intensive Care Unit <ul style="list-style-type: none"> • Defining standards and best practices. | |

| | | |
|------------------|--|--|
| | <ul style="list-style-type: none"> Defining critical care unit performance Measuring and interpreting critical care performance through audit Improving intensive care performance Conceptual framework | |
| Unit IV | Strategies to improve Performance <ul style="list-style-type: none"> Oxygen administration Airway management Type of airways Endotracheal intubation Tracheostomy Suctioning | |
| Unit V | Radiology <ul style="list-style-type: none"> Define Significance of X-Ray as a Diagnostic Procedure Basic X Rays effect on human anatomical parts i.e., bones, Tissues blood and image on X ray film Verbalize Views of Chest X rays basics of Interpreting a chest X ray X ray Patient pre, Intra Post care Hazards of radiation and there precautions Basic understanding of special imaging, studies such as CT, Ultrasound, MRI, Fluoroscopy Nuclear Medicine interventional radiology etc. Interpretation of Chest x-ray exhibiting following lungs, Heart, Abdomen pathologies <p>Lungs: Atelectasis, Pulmonary edema, Pulmonary Hypertension, Pneumothorax, Hemothorax, Tracheal shift, Tuberculosis, Hyper inflated lungs, Lungs with secretions</p> <p>Heart: Location on chest X-ray, Cardiomegaly, Permanent pace maker wires to the heart, CVP and Swan gauze lines</p> <p>Abdomen: AP supine view, PA erect view, lateral decubitus view, lateral view, PA prone view, dorsal decubitus view, oblique views</p> | |
| Unit VI | Code Management and Rapid Response Team <ul style="list-style-type: none"> Rapid response team roles and responsibility Concept of Crisis Resource Management Equipment's used Advance Cardiac Life Support Pharmacological interventions during code Documentation of Code events The Concept of Therapeutic Hypothermia after code | |
| Unit VII | Family Presence during Resuscitation <ul style="list-style-type: none"> Ethical issues arises due to presence of family during resuscitation Family presence during resuscitation policy & guidelines Benefits and pitfalls of family presence during resuscitation Nurses perceptions of family presence during resuscitation | |
| Unit VIII | Invasive Hemodynamic Monitoring: <ul style="list-style-type: none"> Right artery pressure/ Central Venous pressure, Pulmonary artery pressure,/Swan Gauze catheter Arterial versus Venous blood gases sampling | |

| | | |
|----------------|---|--|
| | <ul style="list-style-type: none"> • Insertion its measurement Interpretation • Intra-Aortic Balloon Pump | |
| Unit IX | Patient and Family Responses to Critical Care Experience <ul style="list-style-type: none"> • The critically ill patient and its impact of family process • Communication with patient and family in critical care • Assessment of family need and providing relevant guidance and support • Visiting policy • Family teaching and involvement in care | |
| Unit X | Philosophical Foundation of Bioethics in Critical care <ul style="list-style-type: none"> • Different Ethical decision making practical models, frameworks and tools • Four principle approach to health care ethics by Beauchamp and Childress • Ethical decision making according to Professional codes and standards • Role of nurses in ethical decision makings • Importance of legal and ethical issues in critical care nursing • The contemporary ethical issues <ul style="list-style-type: none"> ▪ Informed consent and patient autonomy verses dignity ▪ Advance directives ▪ Decision regarding life sustaining treatment ▪ End of life issues ▪ Brain death • Restrictive Interventions in ICU relating to ethical perspectives <ul style="list-style-type: none"> ▪ Restrain as an emerging ethical issue ▪ Role of nurses in maintaining patient safety and advocacy | |

| | | |
|-----------------|---|--|
| Unit XI | End of Life Issues and managing the concept of Death and Dying: <ul style="list-style-type: none"> • Ethical issues near the end of life • End of life issues and care provided by nurses. • Resources (patient/nurse/ family education) about end of life issues. • Clinical practice guidelines for communicating prognosis and end of life issues • Breaking bad news and nurse's roles and responsibilities. • The medical Futility: Implications for critical care nurses • Management of psychological, spiritual distress and suffering • Patient Code status (Cardio-Pulmonary Resuscitation (CPR), No code, Do Not Resuscitate (DNR), full code) • Withholding and withdrawing life sustaining measures • Patient and family decision making for sustaining life support • Advance directives • Guidelines for end of life support • Role of nurses in withdrawing end of life support. | |
| Unit XII | Infection Control and Surveillance in the Intensive Care Unit: <ul style="list-style-type: none"> • Surveillance • Structural/Organizational Factors That Affect ICU Infection Control • Invasive Devices And ICU-Acquired Infections | |

| | | |
|------------------|--|--|
| | <ul style="list-style-type: none"> • Interventions To Prevent Nosocomial Infections • Antibiotic Resistance In The ICU • Preventing Antibiotic Resistance In The ICU • Hand hygiene • Preventing transmission of pathogens between ICU personnel and patients • Infection control issues related to specific pathogens | |
| Unit XIII | Cardiovascular Alterations in Critical Care <ul style="list-style-type: none"> • Acute coronary syndrome and angina • Myocardial infarction and complications • Heart Failure • Arrhythmias <ul style="list-style-type: none"> ○ Atrial ○ Ventricular ○ Atrioventricular blocks ○ Cardiac pacemaker | |
| Unit XIV | Renal Alterations in Critical Care: <ul style="list-style-type: none"> • Fluids and electrolytes disorders in critical care • Fluid and electrolyte replacement therapy evidence based guidelines • Acute renal failure • Dialysis • Renal transplant • Diabetic Ketoacidosis • Diabetes Insipidus • Syndrome of Inappropriate Diabetes Insipidus (SIADH) • Adrenocortical Insufficiency • Thyroid Crisis • Nursing care and Management | |
| Unit XV | <u>Assessment of Severity of Illness and Management of Common complications:</u> <ul style="list-style-type: none"> • Purposes of scoring systems • Development of scoring systems • Severity-of-illness scoring systems in clinical use including escalation policy • Clinical, administrative, and management uses of scoring systems • Ethical issues relevant to use of scoring systems to guide management sources of error and bias in scoring systems importance of preventive interventions in the intensive Care Unit (ICU) • Effective prevention in the ICU: Do an environmental scan • Effective prevention in the ICU: Understand current behavior • Effective prevention in the ICU adopt effective behavior-change strategies • Compliance with Euglycemia • Nasal surgery care • Bleeding nose • Anterior Nasal Packing • Posterior Nasal Packing • Tonsillectomy patient care • Tongue bite protection • Throat surgery care | |

Table of specification

| Subject: CCN-I Adult Nursing Management | Bloom's Taxonomy | | | TOTALS |
|--|---------------------------|-------------|----------------------------------|--------|
| | Knowledge & Comprehension | Application | Analysis, Synthesis & Evaluation | |
| Unit – I Overview to Critical Care Nursing | 9% | 8% | 10% | 27% |
| Unit – II Approaches to Critical Care Nursing | 5% | 5% | 5% | 16% |
| Unit – III Improving the Quality of Care in the Intensive Care Unit | 7% | 7% | 9% | 23% |
| Unit – IV Strategies to improve Performance | 8% | 9% | 7% | 23% |
| Unit – V Radiology | 3% | 3% | 4% | 11% |
| Unit – VI Code Management and Rapid Response Team | 9% | 8% | 10% | 27% |
| Unit – VII Family Presence during Resuscitation | 5% | 5% | 5% | 16% |
| Unit – VIII Invasive Hemodynamic Monitoring | 7% | 7% | 9% | 23% |
| Unit – IX Patient and Family Responses to Critical Care Experience | 8% | 9% | 7% | 23% |
| Unit – X Philosophical Foundation of Bioethics in Criticalcare | 3% | 3% | 4% | 11% |
| Unit – XI End of Life Issues and managing the concept of Death and Dying | 9% | 8% | 10% | 27% |
| Unit – XII Infection Control and Surveillance in the Intensive Care Unit | 5% | 5% | 5% | 16% |
| Unit – XIII Cardiovascular Alterations in Critical Care | 7% | 7% | 9% | 23% |
| Unit – XIV Renal Alterations in Critical Care | 8% | 9% | 7% | 23% |
| Unit – XV Assessment of Severity of Illness and Management of Common complications | 5% | 5% | 5% | 16% |
| TOTAL | | | | |

| COURSE TITLE CRITICAL CARE NURSING (CCN)-II PEDIATRICS NURSING MANAGEMENT | |
|--|------------------------------|
| COURSE NUMBER | NUR 611 |
| CREDITS | 3 |
| PLACEMENT | YEAR II, SEMESTER III |
| COURSE PRE-REQUISITE | |

Course Description:

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

OBJECTIVES:

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

- 1) Appreciate the history and developments in the field of pediatrics and pediatric nursing as a Specialty
- 2) Apply the concepts of growth and development in providing care to the pediatric clients and their families.
- 3) Appreciate the patient as a holistic individual
- 4) Perform physical, developmental, and nutritional assessment of Pediatric clients
- 5) Apply nursing process in providing nursing care to neonates and children
- 6) Integrate the concept of family centered Pediatric nursing care with related areas such as disorders, congenital malformations and long term illness.
- 7) Recognize and manage emergencies in neonate's and Pediatric
- 8) Describe various recent technologies and treatment modalities in the management of high risk Neonates
- 9) Appreciate the legal and ethical issues pertaining to pediatric and neonatal nursing
- 10) Prepare a design for layout and management of neonatal units
- 11) Incorporate evidence based nursing practice and identifies the areas of research in the field of Pediatric/neonatal nursing

Course Content:

Unit No. 1 Introduction-Pre-natal phase:

At the end of this unit, the learners will be able to:

- 1) Embryological and
- 2) Teratogenic Drugs
- 3) Family History
- 4) Screen for malformation , Anomalies at 15 weeks of pregnancy
- 5) Prenatal diagnosis by CVS
- 6) Supplementation of folicacid.
- 7) Fetal development, Prenatal factors influencing growth and development of fetus,
- 8) Genetic patterns of common pediatric disorders, chromosomal
 - o aberrations, genetic assessment
- 9) Counseling legal and ethical aspects of genetic, screening

- 10) Role of nurses in genetic counseling
- 11) Importance of prenatal care
- 12) Ethical and cultural issues in pediatric care
- 13) Rights of children
- 14) National health policy for children, special laws and ordinances relating to children MDGs
- 15) National health programs related to child health:
 - Toxo/ Rubella/LMC
 - HEP B. VAC
 - HCV Screen
 - HIV Screen
 - Tetanus Prophylaxis

Unit No. 2 Neonatal Nursing:

At the end of this unit, the learners will be able to:

- 1) Principal of Neonatal resuscitation
- 2) Hearing screen
- 3) T4.TSH
- 4) Thermo-Regulation of a neonate
- 5) Assessment of the new born: Dysmorphism. WT/HT/OFC/GESTATION
- 6) Growth monitoring of a neonate
- 7) Nursing care of the new born at birth, care of the new born and family,
- 8) High risk neonate – pre term and term neonate and growth retarded babies.
- 9) Neonatal infections prevention and management: Febrile neonate/Sepsis
- 10) Identification and classification of neonates with infection HIV and AIDS, Ophthalmic neonatorum, congenital syphilis.
- 11) High risk of new born – Identification, classification and nursing management.
- 12) Management of Neonatal problems
- 13) Identification of a sick neonate
- 14) Respiratory distress syndrome & HMD
- 15) Neonatal Hypoglycemia
- 16) Neonatal Hyperbilirubinemia
- 17) Common metabolic problems
- 18) Renal failure
- 19) Inborn error of metabolism
- 20) Nutritional requirements
- 21) D3/iron

Unit No. 3 IMNCI (Integrated Management of Neonatal and childhood illnesses):

At the end of this unit, the learners will be able to:

- 1) Concept
- 2) Principles of IMNCI
- 3) Case management process
- 4) Outpatient management of children age 2 months up to 5 years
- 5) **Assessment of pediatrics client**
- 6) History taking
- 7) Developmental assessment
- 8) Physical assessment

- 9) Weight and Height
- 10) Hemo-dialysis / peritoneal dialysis
- 11) Post cardiac surgery monitoring & care
- 12) Nutritional assessment
- 13) Family assessment

Unit No. 4 Respiratory/cardiac emergencies:

At the end of this unit, the learners will be able to:

- 1) Aspiration Pneumonia
- 2) Pathophysiology of lung disease, ie pneumonia, atelectasis, ARDS.
- 3) Pertinent issues include lung mechanics, normal and abnormal gas exchange, and evaluation of blood gases.
- 4) Physiotherapy / chestphysio
- 5) Basic understanding of Ventilator support in the post-operative patient, the patient with neurological disease, and the patient with lung disease.
- 6) Issues to be covered include modes of conventional ventilation (SIMV, pressure control, pressure support), weaning strategies, and complications associated with mechanical ventilation.
- 7) Basic understanding of non-conventional modes of pulmonary support available for severe lung disease

Unit No. 5 CNS-Resuscitation-Pediatric Head Injuries:

At the end of this unit, the learners will be able to:

- 1) Initial evaluation of the comatose child—Glasgow coma scale, vital signs, brain-stem evaluation.
- 2) Basic understanding of pathophysiology of injury to the intracranial normal/abnormal cerebral blood flow, cerebral edema, and subsequent alterations in the setting of injury or disease.
- 3) Understanding of the indications and limitations of monitoring of the
- 4) Status epilepticus
- 5) Meningitis/ Encephalitis
- 6) Hydrocephalus/spina bifida/myelomeningocele
- 7) CNS—ICP, EEG,

Unit No.6 GI /Nutrition:

At the end of this unit, the learners will be able to:

- 1) Quantifying growth of a neonate
- 2) NGT feed along with speech therapy
- 3) Importance of breast feeding
- 4) Counseling/training mothers on breast feeding
- 5) Formula milks & their management
- 6) Feeding technique and issues
- 7) Contra indication of breast feeding
- 8) Complication related to feeding issues
- 9) Malnutrition :undernourished and obesity in children Failure to thrive (FFT)

Unit No.7Pediatric dosages of critical care specific drugs:

At the end of this unit, the learners will be able to:

- 1) Inotropes, vasoactive drugs, and cardiac glycosides
 - Dopamine
 - Epinephrine
 - Measuring doses and administration of high risk drugs
 - Measuring micro doses
 - Nor-epinephrine
 - Vasopressin/DDAVP/Anti hypertension
 - Sodium Nitropruside
 - labetalol
 - Dobutamine
 - Milrinone
 - Adenosine
 - Nesiritide
 - Digoxin
- 2) Sedatives and relaxants
- 3) PICU Analgesia

Unit No.8 Critical care concepts of Shock Management:

At the end of this unit, the learners will be able to:

- 1) Hypovolemic shock
- 2) Cardiogenic shock
- 3) Intra osseous line
- 4) Distributive shock
 - Septic Shock
 - Neurogenic
 - Anaphylactic
- 5) Care of a patient with Peritoneal and Hemodialysis

Unit No.9Concepts of PALS:

At the end of this unit, the learners will be able to:

- 1) Define **PALS**
- 2) Discuss high-quality Child CPR AED and Infant CPR
- 3) Recognize the patients who do and do not require immediate intervention
- 4) Discuss cardiopulmonary arrest early and application of CPR within 10 seconds
- 5) Elucidate the PALS CPR team dynamics
- 6) Differentiate between respiratory distress and failure

Class Schedule

| Unit # | Topic | Faculty |
|--------|---|---------|
| Unit I | Introduction-Pre-natal phase: <ul style="list-style-type: none"> • Embryological and • Teratogenic Drugs • Family History • Screen for malformation , Anomalies at 15 weeks of pregnancy | |

| | | |
|----------------|--|--|
| | <ul style="list-style-type: none"> • Prenatal diagnosis by CVS • Supplementation of folic acid. • Fetal development, Prenatal factors influencing growth and development of fetus, • Genetic patterns of common pediatric disorders, chromosomal <ul style="list-style-type: none"> ▪ aberrations, genetic assessment • Counseling legal and ethical aspects of genetic, screening • Role of nurses in genetic counseling • Importance of prenatal care • Ethical and cultural issues in pediatric care • Rights of children • National health policy for children, special laws and ordinances relating to children MDGs • National health programs related to child health: <ul style="list-style-type: none"> ▪ Toxo/ Rubella/LMC ▪ HEP B. VAC ▪ HCV Screen ▪ HIV Screen ▪ Tetanus Prophylaxis | |
| Unit II | Neonatal Nursing: <ul style="list-style-type: none"> • Principal of Neonatal resuscitation • Hearing screen • T4.TSH • Thermo-Regulation of a neonate • Assessment of the new born: Dysmorphism. WT/HT/OFC/GESTATION • Growth monitoring of a neonate • Nursing care of the new born at birth, care of the new born and family, • High risk neonate – pre term and term neonate and growth retarded babies. • Neonatal infections prevention and management: Febrile neonate/Sepsis • Identification and classification of neonates with infection HIV and AIDS, Ophthalmia neonatorum, congenital syphilis. • High risk of new born – Identification, classification and nursing management. • Management of Neonatal problems • Identification of a sick neonate • Respiratory distress syndrome & HMD • Neonatal Hypoglycemia • Neonatal Hyperbilirubinemia • Common metabolic problems • Renal failure • Inborn error of metabolism • Nutritional requirements • D3/iron | |

| | | |
|-----------------|--|--|
| Unit III | Integrated Management of Neonatal and childhood illnesses (IMNCI): <ul style="list-style-type: none"> • Concept • Principles of IMNCI • Case management process • Outpatient management of children age 2 months up to 5 years • Assessment of pediatrics client • History taking • Developmental assessment • Physical assessment • Weight and Height • Hemo-dialysis / peritoneal dialysis • Post cardia surgery monitoring & care • Nutritional assessment • Family assessment | |
| Unit IV | Respiratory/cardiac emergencies <ul style="list-style-type: none"> • Aspiration Pneumonia • Pathophysiology of lung disease, ie pneumonia, atelectasis, ARDS. • Pertinent issues include lung mechanics, normal and abnormal gas exchange, and evaluation of blood gases. • Physiotherapy / chestphysio • Basic understanding of Ventilator support in the post-operative patient, the patient with neurological disease, and the patient with lung disease. • Issues to be covered include modes of conventional ventilation (SIMV, pressure control, pressure support), weaning strategies, and complications associated with mechanical ventilation. • Basic understanding of non-conventional modes of pulmonary support available for severe lung disease | |
| Unit V | CNS-Resuscitation-Pediatric Head Injuries: <ul style="list-style-type: none"> • Initial evaluation of the comatose child—Glasgow coma scale, vital signs, brain-stem evaluation. • Basic understanding of pathophysiology of injury to the intracranial normal/abnormal cerebral blood flow, cerebral edema, and subsequent alterations in the setting of injury or disease. • Understanding of the indications and limitations of monitoring of the • Status epilepticus • Meningitis/ Encephlitis • Hydrocephalus/spina bifida/myelomeningocele • CNS—ICP, EEG, | |

| | | |
|------------------|--|--|
| Unit VI | GI /Nutrition: <ul style="list-style-type: none"> • Quantifying growth of a neonate • NGT feed along with speech therapy • Importance of breast feeding • Counseling/training mothers on breast feeding • Formula milks & their management • Feeding technique and issues • Contra indication of breast feeding • Complication related to feeding issues • Malnutrition :undernourished and obesity in children Failure to thrive (FFT) | |
| Unit VII | Pediatric dosages of critical care specific drugs: <ul style="list-style-type: none"> • Inotropes, vasoactive drugs, and cardiac glycosides <ul style="list-style-type: none"> ▪ Dopamine ▪ Epinephrine ▪ Measuring doses and administration of high risk drugs ▪ Measuring micro doses ▪ Nor-epinephrine ▪ Vasopressin/DDAVP/Anti hypertension ▪ Sodium Nitropruside ▪ labetalol ▪ Dobutamine ▪ Milrinone ▪ Adenosine ▪ Nesiritide ▪ Digoxin • Sedatives and relaxants • PICU Analgesia | |
| Unit VIII | Critical care concepts of Shock Management: <ul style="list-style-type: none"> • Hypovolemic shock • Cardiogenic shock • Intra osseous line • Distributive shock <ul style="list-style-type: none"> ▪ Septic Shock ▪ Neurogenic ▪ Anaphylactic • Care of a patient with Peritoneal and Hemodialysis | |
| Unit IX | Concepts of Pediatrics Advance Life Support (PALS): <ul style="list-style-type: none"> • Concept of PALS • High-quality Child CPR AED and Infant CPR • Recognize the patients who do and do not require immediate intervention • Cardiopulmonary arrest early and application of CPR within 10 seconds • PALS CPR team dynamics • Differentiate between respiratory distress and failure | |

Table of Specification

| Subject: CCN-II Pediatrics Nursing Management | Bloom's Taxonomy | | | TOTAL |
|--|---------------------------|-------------|----------------------------------|-------------|
| | Knowledge & Comprehension | Application | Analysis, Synthesis & Evaluation | |
| Unit – I Introduction-Pre-natal phase | 9% | 8% | 10% | 27% |
| Unit – II Neonatal Nursing | 5% | 5% | 5% | 16% |
| Unit – III Integrated Management of Neonatal and childhood illnesses (IMNCI) | 7% | 7% | 9% | 23% |
| Unit – IV Respiratory/cardiac emergencies | 8% | 9% | 7% | 23% |
| Unit – V CNS-Resuscitation-Pediatric Head Injuries | 3% | 3% | 4% | 11% |
| Unit – VI GI /Nutrition | 9% | 8% | 10% | 27% |
| Unit – VII Pediatric dosages of critical care specific drugs | 5% | 5% | 5% | 16% |
| Unit – VIII Critical care concepts of Shock Management | 7% | 7% | 9% | 23% |
| Unit – IX Concepts of Pediatrics Advance Life Support (PALS) | 8% | 9% | 7% | 23% |
| TOTALS | | | | 100% |

Title : **Advance Specialty Practicum**

Credits : 6

Placement: : Year II, Semester III

Course Description:

This course will provide an opportunity to the post graduate students for advanced specialty practice. This can play a vital part with the experts who provide care to patients with advanced training in highly specialized areas. Advanced practice nurses are able to care for patients with complex conditions who have undergone sensitive and highly technical procedures. Students select areas (such as education, management pediatrics, mental health Nursing, critical care unit, oncology practice that are complementary or preparatory to their research project work, congruent with their interests and career paths and that help them to further add to knowledge gained from core and support MScN courses. This course provides opportunities to explore multiple nursing roles, critical thinking and communicate skillfully with multiple clients in designated settings. Individual learning experiences and learning goals/objectives are established by the student in consultation with the course facilitator and preceptor.

Upon completion of this course, the student will be able to:

1. Conceptualize nursing processes in a selected field of nursing (practice, leadership, or teaching-learning) from a chosen nursing theoretical perspective;
2. Integrate supporting philosophies and theories that inform nursing practices in the area of study;
3. Incorporate evidence, best practices, and multiple ways of knowing in practice within the selected field of nursing;
4. Critically examine how organizations and socio-political contexts influence the selected field of nursing;
5. Demonstrate leadership in the selected field of nursing, including critically examining institutional practices and formulating a vision of leadership in nursing;
6. Reflectively critique her/his practice and knowledge synthesis, thus identifying preferred areas for future development.

Teaching/Learning Strategies:

Self-directed learning through identification of preceptor and facilitator of course faculty

Course Expectations:

1. The faculty members will serve as facilitator in the fulfillment of course objectives.
2. The class will be conducted to discuss student learning contract
3. The student will come to class prepared to discuss the assignment scheduled for each meeting.
4. The MSN students are assumed to be adult learners. As such, it is expected that they search and share current references with one another.
5. After selection of specific field, student will follow CON, SZABMU specialty practicum course grid as guideline.

Evaluation Criteria:

| Evaluation Criteria: | | |
|-------------------------|-----|---|
| CRITERIA | | |
| INTERNAL EVALUATION 50% | | EXTERNAL EXAMINATION 50% |
| PRECEPTOR EVALUATION | 25% | FINAL PRACTICUM AS EXTERNAL EXAMINATION |
| CLINICAL PROJECT | 25% | |
| TOTAL 100% | | |

PURPOSE

Preceptorship permits expert clinicians to share their skills and knowledge with graduate students. Preceptorship promotes reality-based learning, assists graduate students to deal effectively with professional/bureaucratic role conflicts, and consolidates the theoretical and clinical components of advanced health assessment in preparation for advanced nursing practice.

EXPECTATIONS OF PRECEPTOR

The Preceptor/clinician will:

1. Negotiate the day and time of the clinical practicum with the graduate student in order to be available as a resource to the learner during the defined clinical hours.
2. Observe and evaluate the learner's basic health assessment skills, including symptom analysis, relevant history-taking, and physical examination techniques
3. Make preliminary judgment regarding recording/documentation/dictation by the learner e.g., co-signing procedures (if applicable).
4. Provide learning opportunities while caring for the selected patients.
5. Demonstrate/ assist with performance of special techniques in physical examination
6. Supervise learning regarding appropriate laboratory and diagnostic tests

7. Assist in the systematic examination of results of diagnostic tests e.g., ECG, Xray or laboratory results
8. Evaluate the learner's abilities to: present cases, conduct relevant history and physical examination, indicate appropriate laboratory and diagnostic tests, evaluate results appropriately and systematically, and derive conclusions regarding the focus for health care interventions in the course starting in January
9. Complete written evaluations of the learner and the Preceptorship experience by deadline on evaluation forms

EXPECTATIONS OF LEARNER

The learner will:

1. Demonstrate accountability in identifying learning needs and strategies
2. Adhere to the policies of the clinical area.
3. Clarify expectations for the Preceptorship
4. Establish an open dialogue and working relationship with the preceptor
5. Request guidance from the course leader and/or preceptor when required
6. Evaluate self, preceptor, Preceptorship, course, and instructor.

EXPECTATIONS OF COURSE FACULTY/FACILITATOR

The course faculty will:

1. Develop course outline and appropriate guidance for Preceptorship
2. Negotiate clinical placement and on-site visits
3. Conduct selected seminars, laboratory demonstrations, and supervise laboratory practice (if required)
4. Meet with learner to assess progress
5. Be available to the preceptor as required regarding practicum and student's learning needs
6. Coordinate learning opportunities with the learner
7. Assist the learner with problem-solving regarding obstacles to learning
8. Promote learners' critical thinking skills in verbal and written feedback
9. Assume responsibility for assigning a course grade with input from the preceptor.

Suggested Reading According to the Electives

- Ansari, I. M. (2003) *Community Medicine and Public Health*. (6thed) Karachi Urdu Bazaar
- Lawa, S., Harper, C. and Marcus, R. (2003). *Research for Development: A practical guide*. Save the children: SAGE: London
- Bolman, L. & Deal, T. (2003). *Reframing organizations*. San Francisco, Jossey-Bass.
- Hadad, W. D. (1995). *Education policy-planning process: an applied framework*. UNESCO: Paris
- Huber, D. (2006). *Leadership and Nursing Care Management* (2nded.). Philadelphia: W.B. Saunders.
- Kuzma, J. W. (1984). *Basic Statistics for Health Sciences*. Mayfield Publishing Company
- Lashari, T. (2004). *Pakistan's National Health Policy Quest for a Vision*. The Network Publication: Islamabad
- Polit, D. & Beck, C. (2004). *Nursing research: Principles and methods* (7th ed.). Philadelphia: JB Lippincott.

- Porth, C. M. (2004). *Pathophysiology: Concepts of altered health states* (4th ed.). Philadelphia: J. B Lippincott Company
- Robinson, D. L. (2003). Clinical Decision Making: A Case Study Approach. Philadelphia: Lippincott.
- Stanhope, M., & Lancaster, J. (2000). *Community Health Nursing: process and practice for promotion of health* (5th edition). St. Louis: Mosby.
- Sullivan, E.J., & Decker, P.J. (2001). Effective Leadership & Management in Nursing. (5th Ed.). New Jersey. Prentice Hall. Upper Saddle River.

CASE STUDY EVALUATION FORM

Student's Name: _____ Evaluator: _____

Case Study Title: _____

INSTRUCTION: Please use the scales provided to rank the items included on form. Encircle your answer to each item.**Key:** Excellent - 4 Good - 3 Fair - 2 Unsatisfactory - 1

| S.No. | Characteristics Under Review | Circle The Most Appropriate | | | |
|-------|---|-----------------------------|---|---|---|
| 1 | Appropriate selection of case study and the pre-reading material provided | 1 | 2 | 3 | 4 |
| 2 | selection of appropriate articles for pre-reading preferably evidence base (including the framework/model) | 1 | 2 | 3 | 4 |
| 3 | Pertinent present and past medical history and current diagnosis. | 1 | 2 | 3 | 4 |
| 4. | Clinical presentation: signs and symptoms, physical findings with rational (Pathophysiology). | 1 | 2 | 3 | 4 |
| 5. | Selection of appropriate diagnostic tests with rational and its implication on patient | 1 | 2 | 3 | 4 |
| 6. | Pharmacotherapeutic treatment with scientific rationale | 1 | 2 | 3 | 4 |
| 7. | Selection of appropriate theoretical framework/ model for providing holistic care of the case the application in the nursing process of the case. | 1 | 2 | 3 | 4 |
| 8 | Appropriate application of theory/model/framework in the nursing process of the case | 1 | 2 | 3 | 4 |
| 9 | Accuracy and adequacy of interpretation of the theoretical concepts in the case study | 1 | 2 | 3 | 4 |
| 10 | Clarity and logical presentation of case study in a complete manner | 1 | 2 | 3 | 4 |
| 11 | Effectiveness in communication of the issues in the case study in terms of language and logical flow. | 1 | 2 | 3 | 4 |
| 12 | Use of recent references | 1 | 2 | 3 | 4 |

Comments: _____

Evaluator's Signature: _____

Student's Comments:

Student's Signature: _____ Student's Name: _____

receptor Evaluation (CLINICAL)**30%**

Name of the Student: ----- Clinical Setting: -----

Name of Preceptor: -----

Rate your Clinical Practicum student on each item below

Preceptor Evaluation Form**A. CLINICAL PRACTICE**

| Overall Competency | Un-satisfactory | Below Average | Average | Above Average | Excellent |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | 1 | 2 | 3 | 4 | 5 |
| Establishes rapport with clients & families | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Competence to conduct a history & physical examination appropriate to cases | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Accurately and succinctly documents history and physical examination findings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Selects and interpret appropriate laboratory and diagnostic tests | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Formulate appropriate differential diagnoses | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Expression of critical thinking as related to differential diagnosis | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Integrates knowledge of pathophysiology and clinical epidemiology in planning preventative and therapeutic management of cases | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Considers existing management guidelines and current practice standards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Incorporates research findings while case discussions and management | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Integrates sensitivity to culture, ethnicity, gender, lifestyle, and occupation during management | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Promotes autonomy and shared decision making with clients | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates effective clinical decision making throughout the clinical | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Documents relevant and appropriate plan of care | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Identifies outcomes to specific preventative and therapeutic strategies for the cases | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Initiates consultation and referrals as indicated | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

B. PROFESSIONAL PRACTICE

| Overall competency | Unsatisfactory 1 | Below Average 2 | Average 3 | Above Average 4 | Excellent 5 |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Identifies learning needs, goals, and objectives, and re-evaluates regularly | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Actively seeks learning experiences and opportunities to advance knowledge and skills in the clinical area | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Incorporates constructive feedback in improving skills for case assessment/management | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Establishes and maintains a collaborative relationship with health care colleagues | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Obtains necessary level of assistance and supervision for assessment/management | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstrates accountability in the learning process | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Accepts and incorporates suggestions and guidance from preceptor and multidisciplinary team members | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Discusses professional and ethical situations in respectful and dignified manner | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Alters behaviours appropriately after preceptor feedback | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Additional Comments (if required) -----

Preceptors Signature ----- Date: -----

Preceptorship Model for Learning

Assumptions

Preceptors are expert clinicians with the knowledge, skills, and attitudes essential for assisting graduate students to prepare for advanced nursing practice. Preceptors assist graduate students to achieve an advanced level of functioning in health assessment and physical examination. Preceptors have the communication and interpersonal skills to facilitate open, honest dialogue and positive, constructive feedback for graduate students. Preceptors are familiar with the administration, organizational structure, and context of the clinical agency. Learners practice in a safe and ethical manner; recognize their strengths and limitations, and act accordingly; establish and maintain effective professional working relationships; monitor their progress; seek assistance as required; and demonstrate accomplishment of course objectives in the clinical area. Preceptors and learners are present in the clinical area according to the dates/times negotiated.

Purpose

Preceptorship permits expert clinicians to share their skills and knowledge with graduate students. Preceptorship promotes reality-based learning, assists graduate students to deal effectively with professional/bureaucratic role conflicts, and consolidates the theoretical and clinical components of advanced health assessment in preparation for advanced nursing practice.

Expectations of Preceptor

The Preceptor/clinician will:

1. Negotiate the day and time of the clinical practicum with the graduate student in order to be available as a resource to the learner during the defined clinical hours.
2. Observe and evaluate the learner's basic health assessment skills, including symptom analysis, relevant history-taking, and physical examination techniques
3. Make preliminary judgment regarding recording/documentation/dictation by the learner e.g., co-signing procedures (if applicable).
4. Provide learning opportunities while caring for the selected patients.
5. Demonstrate/ assist with performance of special techniques in physical examination
6. Supervise learning regarding appropriate laboratory and diagnostic tests
7. Assist in the systematic examination of results of diagnostic tests e.g., ECG, Xray or laboratory results
8. Evaluate the learner's abilities to: present cases, conduct relevant history and physical examination, indicate appropriate laboratory and diagnostic tests, evaluate results appropriately and systematically, and derive conclusions regarding the focus for health care interventions in the course starting in January
9. Complete written evaluations of the learner and the Preceptorship experience by deadline on evaluation forms

Expectations of Learner

The learner will:

1. Demonstrate accountability in identifying learning needs and strategies
2. Adhere to the policies of the clinical area.
3. Clarify expectations for the Preceptorship
4. Establish an open dialogue and working relationship with the preceptor
5. Request guidance from the course leader and/or preceptor when required
6. Evaluate self, preceptor, Preceptorship, course, and instructor.

Expectations of Course Faculty/Facilitator

The course faculty will:

1. Develop course outline and appropriate guidance for Preceptorship
2. Negotiate clinical placement and on-site visits
3. Meet with learner to assess progress
4. Be available to the preceptor as required regarding practicum and student's learning needs
5. Coordinate learning opportunities with the learner
6. Assist the learner with problem-solving regarding obstacles to learning
7. Promote learners' critical thinking skills in verbal and written feedback
8. Assume responsibility for assigning a course grade with input from the preceptor.

Presentation /Seminar Schedule

| Dates /Time | Seminar/Meetings/Assignment | Topic / student /facilitator |
|-------------|--|------------------------------|
| | Introductory Meeting with preceptor, students and facilitator | |
| | Student Led Seminar Introduction to the presentation and clinical issues discussion | |
| | Student Led Seminar clinical issues discussion | |
| | Student Led Seminar clinical issues discussion | |
| | Student Led Seminar clinical issues discussion Students Presentation (1 & 2) | |
| | Student Led Seminar clinical issues discussion Students Presentation (3 & 4) | |
| | Student Led Seminar clinical issues discussion Students Presentation (5 & 6) | |
| | Student Led Seminar clinical issues discussion Students Presentation (7& 8) | |
| | Student Led Seminar clinical issues discussion Students Presentation (9 & 10) | |
| | Student Led Seminar clinical issues/project discussion Students Presentation (11& 12) | |
| | Student Led Seminar clinical issues/project discussion | |
| | Student Led Seminar Project Presentation | |
| | Seminar 02 Project Presentation | |

NOTE: Students are required to make up the clinical hours for all public and other holidays in order to complete the clinical hours for 8 credits

Evaluation Guidelines

Seminar Participation

20%

All students are expected to attend each seminar for the discussions of cases and issues during practicum course.

Content: 70%

Beginning with assessment data (laboratory, radiological etc) related to a specific case situation, the seminar should focus on clinical decision making related to a clinical/community phenomena. Multidisciplinary management strategies that have been derived from empirical, theoretical and practice related literature should be identified. Advanced clinical skills, including pharmacologic prescribing (doses, frequencies) should be described. Identification of management outcomes based on quality indicators should be evident. Relevant references should be provided during discussion.

Process: 30%

Includes introduction, outline of seminar, clarity, logic, organization, stimulation of discussion, management of questions

Time frame: 2hrs (includes time for questions/discussion).

Seminar Participation (20%)

Student's Name: _____

Evaluator: Self / Peer / faculty

Presentation Title: _____

| | Characteristics Under Review | Circle the Most Appropriate | | | |
|-----|--|-----------------------------|---|---|---|
| | | 1 | 2 | 3 | 4 |
| 1 | Appropriate selection of issue/case/problem/concept and able to explain, explore and utilize key concepts with precision and supporting rationale | 1 | 2 | 3 | 4 |
| 2. | Substantive contributions to the topic under exploration by preparing with required resources. | 1 | 2 | 3 | 4 |
| 3. | Promotes deeper understanding of subject within seminar discussion by reflecting on the content and raising the concerns and asking relevant questions | 1 | 2 | 3 | 4 |
| 4. | Provides information that supports claim; considers alternative information that offers contradictory evidence | 1 | 2 | 3 | 4 |
| 5. | Examines own and alternate points of view for strengths and weaknesses in addressing the issue, problem or question during the discussions | 1 | 2 | 3 | 4 |
| 6. | Includes professional/ethical issues for advanced nursing practice in discussions of issue/problem/case/concern | 1 | 2 | 3 | 4 |
| 7. | Clarity and logical presentation of case study in a complete manner | 1 | 2 | 3 | 4 |
| 8. | Accuracy and adequacy in the discussions | 1 | 2 | 3 | 4 |
| 9. | Effectiveness in communication of the issues in the case study in terms of language and logical flow | 1 | 2 | 3 | 4 |
| 10. | Responds to the comments of others in accepting manner without becoming defensive, blaming others, or being negative | 1 | 2 | 3 | 4 |
| 11 | Addresses directly to group members, actively listen and respond with respect and gives other the opportunity to speak as much as self | 1 | 2 | 3 | 4 |
| 12 | Gives feedback to others that is: constructive (positive and developmental in nature) and in depth, meaningful, and honest | 1 | 2 | 3 | 4 |
| 13 | Is punctual and present for all tutorials and promote time management | 1 | 2 | 3 | 4 |

Comments:

1 = Unsatisfactory

2 = Fair

3 = Good

4 = Excellent

Signature _____

Ref: www.nursing.ualberta.ca

Proposal Presentation Rating Scale

Direction: Please use the following guidelines to evaluate the proposal presentation. Put a tick mark (✓) on the appropriate box.

Key: 4 = Very good 3 = Good 2 = Fair 1 = Need improvement

| Sr. # | Guidelines | 4 | 3 | 2 | 1 |
|---|---|---|---|---|---|
| Verbal skills and manner of presentation | | | | | |
| 1. | Projection of voice | | | | |
| 2. | Verbal pace (not too fast nor too slow) | | | | |
| 3. | Words pronounced clearly | | | | |
| 4. | Tonal variation (not monotone) | | | | |
| 5. | No distracting verbal habits (ahha repeated phrases e.g. "you know") | | | | |
| 6. | Appears to have practical for the presentation | | | | |
| 7. | Poise (control of presentation) | | | | |
| 8. | No distracting physical habits (clicking of pen, fixing hair) | | | | |
| Organization of Content | | | | | |
| 1. | Content was sequential: it has a distinct beginning, middle and end | | | | |
| 2. | Logical flow of information | | | | |
| Clarity of Information | | | | | |
| 1. | Content was fully explained | | | | |
| 2. | Jargon was limited so persons outside the field understand the content | | | | |
| Use of Presentation Aids | | | | | |
| 1. | Overhead/ slides/ power point were appropriately used in sequential fashion. | | | | |
| 2. | Visual aids supported the presentation did not distract from it | | | | |
| Audience Contact | | | | | |
| 1. | Maintained good eye contact with the entire audience- not, person, side of the room | | | | |
| 2. | Did not stare at papers | | | | |
| 3. | Did not stare at visual aids | | | | |
| Ability to hold audience attention | | | | | |
| 1. | Talked comfortably about the study | | | | |
| 2. | Made the presentation interesting | | | | |
| 3. | Did not read to the audience | | | | |
| Time management | | | | | |
| 1. | Planned well for allotted time | | | | |

| | | | | | |
|-----------------------------|--|--|--|--|--|
| 2. | Was not running or needed to leave thing out due to time run over | | | | |
| Knowledge of content | | | | | |
| 1. | Able to answer questions exactly | | | | |
| 2. | Abel to offer verifications adequately | | | | |
| 3. | Able to point out parts/ pages in the proposal to answer questions or clarify points | | | | |

Title : **Thesis**
Credits : **6 Credits**
Placement : **Year II, Semester IV**

Course Facilitators:

Description, expected outcome and scope:

Thesis is an integral part of all post graduate programs in sciences according to the higher education commission of Pakistan. Students are required to write a Thesis and submit the report for fulfillment of post graduate program requirement.

- Each student must decide upon and obtain approval from his/her committee about the topic of Thesis. This decision and approval must be completed and documented by the end of protocol/proposal development course.
- A Thesis will be formed preferably based on primary data collected through small scale research conducted by the student.
- Qualitative, quantitative or a combination of other acceptable research methods and techniques could be used to answer the research question.
- A Thesis could be based on analysis of secondary data, or critical assessment or evaluation of an existing national, provincial, institutional health/social sector program.
- A Thesis must include a section on matters related to advocacy or policy making for stakeholders at local, national or international level in the context of results and conclusion and recommendation of the study.
- Students must defend their Thesis in front of the Thesis evaluation committee and external examiner by a formal presentation followed by questions answers session.

Evaluation Criteria:

| CRITERIA | |
|---|--|
| INTERNAL EVALUATION 40% | EXTERNAL EXAMINATION 60% |
| FORMATIVE ASSESSMENT BY THE THESIS COMMITTEE: (10% FIELD/RESEARCH WORK + 30% THESIS) | FINAL PRESENTATION (DEFENSE) + QUESTIONS/ANSWERS SESSION: |
| TOTAL 100% | |

Passing Marks:60%

Note: Marks will be allocated on a standard evaluation forms (See annex A) for thesis and presentation evaluation.

Thesis committee, its composition and selection process:

A Thesis committee must have at least two members- the supervisor, and committee member, both preferably from any HEC recognized university in Pakistan. The selection of committee member(s) shall be made in consultation with supervisor. Each committee member must independently review and judge the suitability of the submitted Thesis for final presentation before the external examiner.

Eligibility criteria for Thesis committee members:

1. Thesis supervisor:

- Supervisor must have completed a post graduate degree in nursing, public health, or epidemiology.
- Must be an assistant professor or above with at least one year of post graduate teaching experience in nursing or public health.
- Must have demonstrated his/her capability through publications especially in at least two original articles in indexed journals; or has contributed book chapter in national or international standard books.
- Must have served as a Thesis committee member in national or international university.
- Part time/honorary faculty can be considered provided they fulfill the above mentioned criteria. Long distance Thesis supervisor is not acceptable.

2. Thesis committee member(S):

- a. A Thesis committee member must have completed a post graduate degree in nursing, public health, or epidemiology.
- b. Must have demonstrated his/her capability through publications especially being first author in at least two original articles published in indexed journals; or has contributed book chapters in national or international standard books.
- c. Part time/honorary faculty can be considered provided they fulfill the above mentioned criteria.

3. Thesis external examiner:

- a. The college will be responsible to find an eligible and qualified external Examiner for the Thesis defense.
- b. The external examiner may be from any institution other than SZABMU.
- c. The external examiner must have higher post graduate qualification with relevant experience in academia, and research in the context of nursing profession, public health or epidemiology.

Responsibilities of Thesis committee:

Committee will offer advice, propose changes, and monitor progress in Thesis development.

1. The committee will keep track of accomplishment of each step in the given timeline
2. Committee meetings must be scheduled in reference to stage of Thesis. One meetings at each stage accordingly for following purpose:
 - a. Finalization of design phase including all tools to be reviewed by all committee members.
 - b. After data collection a plan of analysis need to be chalked out in consultation with supervisor and committee members.
 - c. Review of results
 - d. Review of drafts by the supervisor and committee members. Comments should be provided for improvement
 - e. The supervisor can call any additional meetings if he/she feels it necessary.
3. Role of supervisor:
 - a. Offer continuous advice and ensure student's development
 - b. Provide constructive and positive feedback to student
 - c. All written drafts need to be reviewed initially before sending to the committee members
 - d. Ensures involvement of other committee members
 - e. Ensures that student is following; ethical and academic guidelines and have addressed all suggestions provided by committee.
 - f. Provides written feedback on progress and quality of work to the Principal and program coordinator.
4. Role of committee members:
 - a. Provide support to student and be available for consultation as decided by the Thesis committee or per requirement.
 - b. Keeps supervisor informed of all developments and consultation provided to student.
 - c. Reviews of drafts of Thesis on timely manner.

5. Responsibilities of student:
- Demonstrate initiatives in preparation and conduct of his/her Thesis/Research project related work.
 - Obtains and incorporates review and advice from committee members.
 - Responsible for logistic arrangements for meetings/scheduling/organizing and taking appointments from all the members of the committee.
 - Submit work and progress reports regularly to supervisor.
 - Meets all deadlines laid down by the committee and university.
 - Before submission of the final Thesis to the program coordinator, it is the student's responsibility to ensure that:
 - The Thesis/Research project has a title page
 - The committee members and supervisor has approved and signed the Thesis.
 - The Thesis work is in correct order.
 - It is student's responsibility to bind the Thesis and submit one bound copy to the college's library, one to the external examiner and one copy for each committee member.

Procedure for Thesis/Research project evaluation:

Thesis should be evaluated and graded by the Thesis evaluation committee or as advised by the board of graduate studies of the Shaheed Zulfiqar Ali Bhutto Medical University (SZABMU), Islamabad. In case of Thesis/Research project evaluation committee, the members should be Thesis/Research project supervisor, committee member/s and external examiner.

- Thesis report will be evaluated on a structured evaluation form (see the annex-A) sent to the Thesis evaluation committee along with the Thesis report. Thesis report evaluation will carry grading weightage of 40% of the total assigned for Thesis. This 40% will be further broken down into 10% for continuous assessment during field/research work and 30% for the submitted report. Supervisor must ensure that all Thesis evaluation committee members provide evaluation form to program coordinator at least one week prior to the final defense.
- Thesis presentation (defense): The Thesis/Research project evaluation committee will meet for a defense session, at a mutually convenient time for all members in last week of December. Each student will be allowed to make a 15 minutes presentation to the respective Thesis/Research project evaluation committee. The Thesis/Research project evaluation committee members will have 30 minutes to ask questions. Then, the student will be asked to leave the room and the committee will discuss various issues in relation to the Thesis under review for the next 15 minutes. Finally, each member of the Thesis/Research project evaluation committee will be asked to assess the Thesis presented using the structured evaluation form (see annex-B). Thesis/Research project presentation will carry grading weightage of 60% of the total assigned for Thesis/Research project.

An average composite score of 60% or higher by the Thesis/Research project evaluation committee is needed for a student to PASS. All comments, concerns, suggestions of the Thesis/Research project evaluation committee will be given to the Thesis/Research project supervisor in writing. The Thesis/Research project supervisor will communicate this feedback to the student so that the comments could be incorporated in the final copy of the Thesis/Research project.

The Thesis/Research project with cumulative score less than 60% will be considered FAIL. In this case the Thesis/Research project evaluation committee will be asked to recommend the necessary steps to be taken by the student to improve the Thesis/Research project and be prepared for defense in the next year.



College of Nursing

Holy Family Hospital (HFH), Rawalpindi
Rawalpindi Medical University

Synopsis is the brief summary, an outline of the research project intended to be conducted by the MS, MD, MDS and M. Phil or PhD scholars. It should consist on 6-8 pages having 1200-1500 words. The following structure should be followed:

Table of Contents

| | |
|--|--|
| Title Page : | |
| Abstract/ brief summary: | |
| Introduction: | |
| Research question: | |
| Objectives : | |
| Operational Definitions : | |
| Hypothesis : | |
| Methodology : | |
| Acknowledgements : | |
| References : | |
| Annexure : | |
| Formatting Requirements: | |

Title Page

- Title of the research project should be brief and should reflect the main concept and the study design. The title should be concise, specific and informative. As for example:
 - Effectiveness of short term intake of cinnamon in type 2 diabetes patients:
Randomized controlled trial
- The scholar's name, highest qualification and job title should be indicated.
- Supervisor's name, highest qualification and organization/ department affiliation should be mentioned

Abstract/ brief summary

Structured abstract of 250 words in length should be provided with:

- **Background** (Including primary objective)
- **Methods**
- **Discussion**
- **3-5 keywords:**
- **Include important relevant and significant 'keywords' to allow the identification of the key elements of the study.**
- The Key words according to MeSH terms should also be provided. Refer to the MeSH browser: <https://www.nlm.nih.gov/mesh/MBrowser.html>

Introduction: (500-600 words)

The importance of introduction is to give a brief overview about the subject matter on which research is being conducted and provide the appropriate scientific background. It should be built in such a way as to lead to the rationale (why the research is being conducted) of the research project. Following headings should be included

- **Brief overview:** Sub-heading under it may be provided to make the points clear.
- **Rationale (What research question are you trying to answer and why)**

Research question

The research question for the research project should include **PICO**:

- **Population** : relevant participants/ patients for the research project
- **Intervention or indicator:** the medicine/ surgery/ educational intervention should be clarified.
- **Comparison:** Is there a comparator or alternative approach/ strategy for the treatment?
- **Outcome:** What are the patient relevant consequences/ effect?
- The FINER (Feasible, Interesting, Novel, Ethical and Relevant) criteria should be utilized in the development of a good research question.

Example of research question:

- What is the effect of honey addition to cough syrup for the relief of cough in throat infections in children?
 - Population: children
 - Intervention: honey
 - Comparator (standard treatment): cough syrup
 - Outcome: relief of cough

Objectives

These should be SMART:

- S: specific
- M: measurable
- A: achievable

- R: relevant
- T: time bound

Example of objectives:

- To assess the effect of honey addition with cough syrup in relief of cough in children with throat infection after one week of its use.

Operational Definitions:

Is the definition of the exposure and outcome variables of interest in context to objective in a particular study and their means of measurement/determination.

Examples:

- Anemia
- Effectiveness
- PPH
- Wound healing

Hypothesis

A hypothesis is a specific statement of prediction. It describes in concrete (rather than theoretical) terms what you expect will happen in your research project.

Example of hypothesis:

- Honey and cough syrup have equal effectiveness in the relief of cough in children with throat infections after one week of its use.

Methodology: (250-300 words)

Include the following in the methodology section:

Study design: Be specific. Your study type should be interventional that is one group should be given intervention along with standard treatment and other or control group should be on standard or placebo treatment. The intervention can be any drug, procedure or method. The study design should be

- Randomized controlled Trial
- Non- Randomized Controlled Trial
- Cross sectional Comparative

Generally, in a Randomized Controlled Trial, study participants are randomly assigned to one of two groups: the experimental group receiving the intervention that is being tested and a comparison group (controls) which receives a conventional treatment or placebo.

Study setting: Where is the study being conducted?

Study duration: For how long the study is being conducted for?

Study population: Who are the study participants? Provide the inclusion and exclusion criteria.

Sample Size: How the sample size was calculated? WHO sample size software can be used for its calculation. Also indicate which formula for sample size calculation was used and values put in it to calculate the given sample size.

Sampling Technique: How the sampling was done? Whether the sample was randomly chosen or non-probability convenient sampling done?

- Randomization: In case of randomized controlled trial, how was randomization into groups done?
- Blinding: In case of randomized controlled trial, tell whether the patients were blinded to the intervention/ control.

Data collection Procedure: Highlight the following:

- Permission from hospital ethical committee and informed written consent from all participants.
- How the data will be collected?
- Will a validated data collection tool (questionnaire) be used?
- Is the questionnaire pre-tested? Who will collect the data?

- All Lab investigations to be done for research purposes
- Any screening procedures to be performed
- Description of the Case Report Form (CRF) and Proforma to be filled out
- How the variables in the study will be measured,
- What is the exposure variable? (Define in Operational definitions as well)
- What is the outcome variable, how will these be diagnosed or measure and their time of measurement (Define in Operational definitions as well)
- Describe if Placebo is to be given
- Address how to keep track of drop outs & lost to follow-up
- How to monitor compliance with study medication & placebo
- Standard care and treatment will be given to all in study irrespective of being in intervention or placebo arm

During data collections writing also discuss that

- Who will collect it?
- Who will ensure confidentiality of the participants?
- How will be data checked for completeness?
- What will be procedures for data entry?

Plan of analysis: (150-250)

Give an outline of the plan of analysis along with the statistical software in which it will be performed. Include the following:

- What will be measured and how? For example, mean and standard deviation will be calculated for continuous variables and proportions will be calculated for categorical variables.
- Give an outline of the statistical tests that will be conducted example student t test, chi-square test, odds ratio etc.

Ethical consideration: Address the issues of ethical consideration like:

- How will the confidentiality and privacy of participants will be ensured?
- Is the treatment being given in randomized controlled trial justifiable? What are its harm and benefits to the patient?
- Give an informed consent form in both English and Urdu Language that will be used to take written informed consent form the participants.
- All additional tests to be done for research purpose are ethical with no undue harm or risk for the subjects
- Will there be any cost to subject for any medication, test or investigation done while in study
 - Need to specify modified consent process for protected populations like pediatric, orphans and pregnant populations
- In pediatric populations children (subjects) give assent and parents/guardians give consent
- Informed consent should be a proper detailed, informative and explanatory informed consent process and not just signing of the informed consent form

Acknowledgements

State source of funding for research, if any and mention any conflict of interest.

Acknowledge any person who contributed to the study protocol development

References

References should follow Vancouver style. Follow the Vancouver style from the following document:

http://library.vcc.ca/downloads/VCC_VancouverStyleGuide.pdf

Annexure

Annexure should be placed after the references in the synopsis document. In the annexure of the synopsis, provide the following:

- Annexure A: proforma or the Data collection tool- the questionnaire
- Annexure B: Informed consent form in English and in Urdu designed to be signed by the study participant.

Formatting Requirements:

- The synopsis should be typed in double spacing on A-4 paper (8.25" x 11.70" = 21.0 cms x 29.70 cms) white bond paper with one inch (2.5 cms) margin on both sides.
- The font size should be 12", in Times New Roman or Arial
- The main headings should be bold and capital letters in 12" size
- The sub-heading should be bold and 12" size

Plagiarism Policy: University follows the standard plagiarism policy of Higher Education Commission (HEC) for Synopsis and Thesis. No synopsis will be proceeded, which will not fulfill the uniform requirement of similarity index of < 19% .