FELLOWSHIP IN PALLIATIVE CARE NURSING

ABOUT THE COURSE:

Malla Reddy School of Nursing Science and Technology believes that registered nurses need to be trained in Palliative care Nursing in clinical and community settings in order to provide competent care to cancer patients and enhance their quality of life. Nurses play vital role in prevention, promotion, curative, rehabilitative and palliative care. Expanding roles of nurses and advances in technology necessitate additional training to prepare them for effective participation in providing such vital role. This Fellowship program is designed for nurses to enhance their knowledge and skills towards palliative nursing care.

OBJECTIVES:

The purpose of the course is to train nurses to:

- Provide quality care to patients with an actual or potential diagnosis of end stage illness.
- Manage & supervise patient care in clinical and community settings.
- Teach nurses, allied health professionals, patients, and communities in areas related to palliative care nursing.
- Conduct research in areas of palliative care nursing.

ELGIBILITY

• Registered BSc Nursing in India or equivalent.

DURATION

• 52 Weeks or One Academic Year

COURSE DESCRIPTION

The course is designed to prepare registered B.Sc (N) with specialized knowledge, skills, and attitude in providing advanced quality care to terminally ill patients, their families, and communities at primary, secondary, and tertiary levels of care.

EVALUATION

The examination will be conducted by school of nursing science and technology, Malla Reddy Vishwavidhyapeeth deemed to be university.

CRITERIA TO APPEAR THE EXAM

- 80% attendance in theory
- 100% attendance in practical

CRITERIA TO PASS

- In order to pass a candidate should obtain 50% in theory and 50% in practical separately
- A candidate should get 50% in internal assessment.

AWARD OF CERTIFICATE

Certificate will be awarded by Malla Reddy Vishwavidhyapeeth deemed to be university.

S.No	COURSE	SUBJECTS	THEORY	LAB	CLINICAL	TOTAL
	CODE					
1		Basic Nursing	60	20	120	200
		For Palliative				
		care Nursing				
		(No Exam)				
2		Palliative	80	20	300	400
		Care Nursing				
		- I				
3		Palliative	80	20	300	400
		Care Nursing				
		- II				

BASIC NURSING FOR PALLIATIVE CARE NURSING

Theory: 60 hours Lab: 20 hours

Practical: 120 hours

Unit	Hour	l corning	Content	Tooching	A sagaaman4
Unit	Hour S	Learning objectives	Content	Teaching Learning	Assessment Methods
	В	objectives		Activity	Wiethous
Unit I	10	- Understand psychological concepts relevant to patient care - Apply psychological principles to crisis situations and care giving - Use communicatio n and counseling techniques effectively	Psychology	- Interactive lecture - Case-based discussions - Group activities and role play	- Written tests - Role-play evaluation - Reflective journaling
Unit II	10	- Understand the sociological context of health and illness - Analyze community and family dynamics - Recognize cultural factors influencing care	Sociology Review Social organization & community resources Leadership roles in community Family and family releation ships Socio cultural influences	- Group discussions - Role-play of family/comm unity scenarios	- Short answer questions - Group presentation - Participatio n in discussions
Unit III	10	- Understand microbial causes of illness - Apply asepsis and safety principles	Microbiology ➤ Review • Immunity • Infection • Principles of asepsis, sterilization & disinfection • Diagnostic tests in	- Demonstratio n - Lab visits - Video tutorials - Group	- Practical test - MCQs - Waste segregation role-play assessment

Unit	10	- Perform diagnostic and waste handling procedures responsibly - Review structure and functions of major body systems - Understand physiological processes relevant to clinical practice - Safely administer opioids	microbiology & related nurses' responsibility • Standard safety measures &biomedical waste management Applied Anatomy & Physiology ➤ Review • Cell structure and physiology ✓ Normal cell ✓ Malignant cell • Neurological system • Respiratory system • Blood and lymphatics • Cardiovascular system • Gastro intestinal system • Endocrine system • Musculoskeletal system • Musculoskeletal system • Genitourinary system • Reproductive system • Sensory system • Sensory system Documentation and Instruction to be taken while taking opioids • Nurses role while administering opioids and observing the client for side-effects.	- Model demonstratio ns - Clinical discussions - Safety protocols walkthrough	- Written tests - Viva - Scenario- based assessment
Unit V	10	- Understand drug actions and reactions - Apply safe medication practices - Manage and monitor drug therapies including chemotherapy	Pharmacology	- Drug chart review - Demonstratio n of administratio n - Group discussions on drug toxicity	- Drug calculation test - OSCE - MCQ and case scenarios
Unit VI	10	- Develop effective communicatio	Communication skills and IPR • Process and methods	- Role-play - Video- based	- Communica tion OSCE

n skills	Establishing and maintaining	training	- Peer and
	 Establishing and maintaining 		
- Build strong	good IPR & communication	- Feedback	faculty
interpersonal	with family, staff and	sessions	evaluation
relationships in	colleagues	- Peer	- Reflective
healthcare	Multidisciplinary team and	counseling	writing
teams	role of nurse	practice	
- Provide	 Breaking bad news 		
guidance and	 Guidance and counseling 		
counseling to			
patients and			
families			

PALLIATIVE CARE NURSING – I

Theory: 80 hours Lab: 20 Hours Practical: 300 hours

Unit	Hours	Learning objectives	Content	Teaching Learning Activity	Assessment Methods
Unit- I	10	- Understand the scope and foundation of palliative care - Explore grief and bereavement processes - Recognize the importance of palliative care in non-cancer conditions	Introduction to Palliative Care:	- Lectures - Case scenarios - Reflective writing	- Written test - Short reflective essay - Group discussion
Unit- II	10	- Define pain and its physiological basis - Classify pain and recognize acute vs. chronic conditions	 Introduction to Pain Definition Pathophysiology Classification of pain-Nociceptive and neuropathic pain Assessment of pain Concept of acute and 	- Case study discussions - Video-based demonstrations - Pain assessment practice	- MCQs - Case-based questions - OSCE

		- Assess different types of pain	chronic pain		
Unit -III	10	- Apply WHO analgesic ladder - Understand Step 1 & 2 medications and their uses - Discuss nursing roles in non-opioid pain management	 Management of Pain WHO analgesic ladder Principles of WHO analgesic ladder The drugs on Step 1 ,2 except opioids (NSAIDs, Paracetamol and Adjuvants) The drugs used to treat neuropathic pain Nurses role in pain management 	- Drug demos - Flowcharts & ladders - Interactive lecture	- Drug chart evaluation - Short answer test - Role-play scenarios
Unit -IV	10	- Understand opioid use and risks - Manage side effects and documentation - Perform safe opioid administration	 Mangement of Pain-Opioids Opioids Management of opioid side effects &Toxic effects Morphine trial Documentation and Instruction to be taken while taking opioids Nurses role while administering opioids and observing the client for side-effects. 	- Simulation practice - Drug protocol discussion - Role play on patient monitoring	- OSCE - Checklist-based assessment - Written test
Unit -V	5	- Improve communication skills in care delivery - Identify barriers and enhance listening	Need of Medical and nursing communication Barriers to effective communication Steps to effective communication Differentiate between good and poor communication Develop listening skills	- Role play - Audio/visual examples - Group activities	- Observation checklist - Group feedback - Peer evaluation
Unit- VI	5	- Handle sensitive topics like bad news	Communication II Communicating Bad News	- Simulated conversations - Emotional	- Simulation- based OSCE - Reflection

		and emotional reactions - Communicate compassionately	Dealing with collusionDealing with emotion	response workshops - Guided discussions	writing - Communication skills rubric
Unit- VII	10	- Identify and manage pressure sores - Apply preventive care principles	Wound Management I (Pressure Sore) • The causes, risk factors and pathophysiology of pressure sores • The stages and its management • The principles of prevention of pressure sores	Clinical demonstrationVisual aidsGroup discussion	- Practical checklist - Case study analysis - MCQs
Unit- VIII	10	- Manage complex wounds like fungating ulcers - Address psychosocial issues	Wound Management II (Fungating Ulcer) The pathophysiology and assessment of fungating ulcer Management of pain, malodor, wound exudates and bleeding The psychosocial issues caused by a fungating wound Prevention and management of maggots	- Wound care demo - Psychosocial role-play - Peer teaching	- Wound care OSCE - Short answer test - Case reflection
Unit- IX	10	- Conduct psycho-social and spiritual assessments - Provide support through psycho-social interventions	Psycho-social Issues • The various psychosocial interventions in Palliative care. • The components of a psychosocial assessment • spiritual assessment	Counseling practiceGroup discussionSpiritual care role play	- Case report - Scenario- based evaluation - Viva

PALLIATIVE CARE NURSING – II

Theory: 80 hours Lab: 20 Hours Practical: 300 hours

Fracu	cal: 300	Hours			
Unit	Hours	Learning objectives	Content	Teaching Learning Activity	Assessment Methods
Unit- I	10	-Recognize symptoms and causes of delirium -Apply pharmacologica 1 and non-drug approaches in management	 Delirium The symptoms of delirium The causes of delirium The pharmacological and non-drug management of delirium 	-Case scenarios -Role-play - Discussion	-MCQs - Case study presentation - Viva voce
Unit- II	10	-Assess and manage nausea, vomiting, and constipation - Understand nursing responsibilities in GI symptom management	Gastro Intestinal symptoms- Nausea & Vomiting • The assessment and management of nausea and vomiting • The assessment and management of constipation • Spurious diarrhoea and high up enema • Nursing responsibility	-Clinical demonstrations - Chart reviews -Group discussions	-Practical assessment -Scenario- based MCQs - Written test
Unit -III	10	-Manage bowel obstruction using drug and non-drug methods -Deliver appropriate nursing care	Gastro Intestinal symptoms- Intestinal Obstuction • The pharmacological and non- pharmacological management of bowel obstruction • Nursing management	- Simulation of obstruction cases -Drug protocol discussion -Group activity	-OSCE - Case analysis - Short answer questions
Unit -IV	10	-Manage breathlessness and cough -Understand oxygen use and nursing roles in respiratory care	Respiratory Symptoms-Cough & Dyspnoea The management of breathlessness Role of oxygen in breathlessness The management of	-Respiratory simulation -Oxygen therapy demo -Case discussions	-Skills checklist - Written test -Peer evaluation

			cough • Role of nurse in management of respiratory symptoms		
Unit -V	10	-Deliver comprehensive ostomy care -Manage complications like skin reactions -Understand colostomy irrigation needs	 Ostomy Care Tracheostomy care Different types and management of Ostomy care Management of peristomal skin reactions Needs of colostomy irrigation Nurses responsibilities 	- Hands-on demonstration - Peer practice - Use of models	-Practical OSCE -Oral quiz -Checklist- based assessment
Unit- VI	10	-Understand hypodermoclysi s technique -Identify indications, contraindicatio ns, and nursing care	Subcutaneous Infusion/ Hypodermoclysis	 Demo using mannequins Protocol explanation Group practice 	- Practical test - Clinical skill observation -Worksheet completion
Unit- VII	10	-Understand and assess lymphoedema -Apply decongestive therapy principles	 Overview of lymphatic system Definition, causes, stages and assessment of lymphoedema Principles of decongestive therapy Lymphoedema Practical Session 	- Practical demo - Assessment training - Lymphoedema care workshop	-Skills checklist - Short answer test -Reflective feedback
Unit- VIII	10	- Apply ethical principles in EOLC -Communicate compassionatel y with patients and families -Understand	End of Life Care (EOLC) & Medical Ethics • Principles of autonomy, beneficence, non- maleficence and justice and apply them to palliative care • Communication with the	-Ethics debates -EOLC scenario discussion - Communicatio n role play	Ethical case analysis -OSCE -Group discussion

dying p and planning	care end of life Dying proce Withhold or	cess
	life care	

Research Activity:

An independent research is to be carried out by the student.

ESSENTIAL PALLIATIVE CARE NURSING SKILLS

I. Procedures Observed

- 1. End-of-Life Care Discussions (with patient and family)
- 2. Multidisciplinary Palliative Care Rounds
- 3. Symptom Management Protocols (pain, dyspnea, delirium, etc.)
- 4. Terminal Weaning from Mechanical Ventilation
- 5. Palliative Sedation
- 6. Advance Care Planning and Code Status Decisions
- 7. Hospice Admission Process
- 8. Family Conferences for Goals of Care
- 9. Organ and Tissue Donation Counseling

II. Procedures Assisted

- 1. Pain Assessment and Opioid Titration
- 2. Administration of Palliative Medications (e.g., morphine, antiemetics, anxiolytics)
- 3. Wound and Pressure Ulcer Management
- 4. Insertion and Care of Foley Catheters and Suprapubic Catheters
- 5. Oxygen Therapy for Dyspnea Relief
- 6. Emotional and Spiritual Support Sessions
- 7. NG Tube Insertion and Feeding Assistance
- 8. Syringe Driver / Infusion Pump Setup
- 9. Mouth and Skin Care for Terminal Patients
- 10. Comfort Measures During Withdrawal of Life-Sustaining Treatment
- 11. Psychosocial Counseling with Family
- 12. Education on Home-based Palliative Care

III. Procedures Performed

1. Patient Assessment & Monitoring

- Physical and Psychosocial Assessment
- Pain and Symptom Evaluation Using Validated Scales
- Monitoring for Non-verbal Signs of Distress in Non-communicative Patients
- Regular Vital Signs and Functional Status Monitoring
- Nutritional and Hydration Assessment

2. Comfort and Symptom Management

- Administration of Pain Medications (Oral, IV, Subcutaneous)
- Management of Nausea, Vomiting, Dyspnea, Secretions, and Delirium
- Application of Oxygen, Nebulization, and Humidification
- Bowel Management (constipation, diarrhea)
- Skin Integrity Care: Pressure Sore Prevention and Dressing Changes
- Oral and Eye Care for Comfort
- Positioning for Comfort and Pressure Relief

3. Communication and Counseling

- Establishing Therapeutic Relationships with Patients and Families
- Facilitating Discussions on Goals of Care
- Providing Emotional Support during Terminal Phases
- Assisting with Spiritual and Cultural Needs
- Educating Families on Dying Process and What to Expect
- Supporting Advance Directives and DNR Orders

4. End-of-Life Care

- Providing Bedside Care During Active Dying Phase
- Ensuring Dignity and Privacy in the Dying Process
- Managing Respiratory Distress and Agitation in the Final Hours
- Performing Last Offices (post-mortem care)
- Supporting Bereaved Families Immediately Post-Death
- Documenting Time of Death and Notifying Medical Team

5. Infection Control & Safety

- Strict Hand Hygiene and Use of PPE
- Safe Medication Administration

- Environmental Hygiene and Disinfection
- Use of Standard Precautions in All Patient Interactions

6. Team Coordination

- Collaborating with Interdisciplinary Teams (Social Workers, Chaplains, Physicians)
- Coordinating Referrals to Hospice and Community Services
- Participating in Case Reviews and Family Conferences
- Communicating Patient Needs in Shift Reports and Documentation

Signature of Resident/SNO