MALLA REDDY VISHWAVIDYAPEETH
(Deemed to be University)
Hyderabad

School of Nursing Science and Technology

FELLOWSHIP IN
GERIATRIC CARE NURSING

Curriculum 2026

Programme particulars	
Level	Post-registration fellowship (nursing)
Duration	26 weeks (6 months) – 1,000 hours
Structure	Theory 100 h · Simulation laboratory 60 h · Clinical practice 840 h
Eligibility	Registered B.Sc. Nursing / M.Sc. Nursing in India, or equivalent
Award	Fellowship certificate of Malla Reddy Vishwavidyapeeth

Approved Curriculum by the Board of Studies, Academic Council and Executive Council

Stage	Body	Date of approval / resolution no.
1	Board of Studies – School of Nursing Sciences & Technology	
2	Academic Council	
3	Executive Council	

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1. Preamble and Need for the Programme

Malla Reddy School of Nursing Science and Technology recognises the need to prepare registered nurses to provide competent, compassionate and evidence-informed care to older persons in clinical and community settings. Nurses contribute to preventive, promotive, curative, rehabilitative, palliative and end-of-life care. Increasing complexity of ageing-related health needs and advances in healthcare require additional training in gerontological nursing.

The Fellowship in Geriatric Care Nursing is designed to strengthen nurses' knowledge and skills in comprehensive assessment, management of common physical and mental health conditions, age-friendly environments, counselling, elder-abuse prevention, rehabilitation, legal protections and support for older persons and their families. The programme combines theory, supervised clinical practice, simulation, case-based learning and a competency-verified logbook.

1.1 Need

- Older people may experience multiple chronic conditions, functional limitations, cognitive and psychological concerns, falls, incontinence and social vulnerabilities requiring coordinated care.
- Nurses need structured preparation and comprehensive geriatric assessment, person-centered care, rehabilitation, and palliative support
- Families, caregivers, healthcare teams and communities benefit from nursing education on healthy ageing, safety, dignity and available services

2. Vision, Mission and Programme Objectives

2.1 Vision

To prepare competent geriatric care nurses who promote healthy ageing, preserve dignity and function, and improve the quality of life of older people.

2.2 Mission

- Provide competency-based learning through theory, skills practice and supervised clinical/community postings.
- Promote safe, ethical, respectful and person-centered care for older adults and their families.
- Develop assessment, teaching, counselling, rehabilitation, teamwork and evidence-informed practice skills.

2.3 Programme objectives

After successful completion of the Fellowship in Geriatric Care Nursing, the fellow will be able to:

1. Provide quality nursing care to older people across preventive, promotive, curative, rehabilitative and palliative levels.
2. Manage and supervise care of older people in hospital, long-term care and community settings.
3. Conduct comprehensive geriatric assessment, including functional, cognitive, psychological, nutritional and mobility assessment.
4. Educate nurses, allied health professionals, caregivers, families and communities on gerontological nursing.
5. Identify risks and signs of elder abuse, support appropriate reporting and apply safeguarding principles.
6. Use research and evidence-informed approaches to improve geriatric nursing practice.

3. Programme at a Glance

Item	Details
Name of the programme	Fellowship in Geriatric Care Nursing
Offered by	School of Nursing Science and Technology, Malla Reddy Vishwavidyapeeth (Deemed to be University)
Duration	26 weeks (6 months), full time
Total hours	Total-1,000Hrs: Theory-100Hrs, Simulation laboratory-60Hrs, Clinical practice-840Hrs
Credits	33 (at 30 notional hours per credit; 1,000 h ÷ 30 = 33.3, rounded down)
Eligibility	Registered B.Sc. Nursing / M.Sc. Nursing in India, or equivalent
Mode	Contact classes, simulation, supervised clinical postings in a teaching hospital, logbook
Assessment	MCQ 25 + practical skills (three case scenarios) 60 + logbook 15 = 100 marks; minimum 50% in each component and 50% aggregate
Award	Fellowship certificate by Malla Reddy Vishwavidyapeeth (Deemed to be University)
Medium of instruction	English

4. Eligibility, Selection and Governance

4.1 Eligibility

- Registered B.Sc. Nursing or M.Sc. Nursing in India, or equivalent qualification.
- Current registration with a State Nursing Council (certificate to be produced at admission).
- Medical fitness certificate and immunization record (hepatitis B at minimum).

4.2 Selection and commencement

The fellowship is established to uphold transparency, fairness and meritocracy in the selection process for the MRV Fellowship Programme. Selection is made by the Fellowship Committee on the basis of academic records, a short interview and document verification. A batch commences once the committee has approved the list of fellows and allotted a guide to each fellow.

4.3 Fellowship Committee

Sl. No.	Role / position	Description / designation
1	Chairperson	The Dean, SNST
2	Subject expert	Dean MRCON, Professor or Associate Professor of SNST
3	Guide / co-guide	Professor, Associate Professor or Assistant Professor from SNST
4	Convener	The Fellowship Coordinator of MRV
5	Ex officio members	The Registrar and the Controller of Examinations, MRV

Functions of the committee: approval of the curriculum and of any additional output or deliverable (written approval is needed beforehand); selection of fellows; allotment of guides; monitoring of attendance, logbooks and clinical postings; conduct of the final assessment; handling of grievances; recommendation of award of the certificate

4.4Guides

- Guide / co-guide: Professor, Associate Professor or Assistant Professor from SNST with postgraduate qualification in nursing and relevant geriatric, medical-surgical, community or rehabilitation experience.
- Clinical preceptors: experienced registered nurses or relevant clinical professionals assigned by the institution.
- Guide-to-fellow ratio not more than 1:1

5. Programme Outcomes

5.1 Programme outcomes (POs)

At the end of the fellowship, the fellow demonstrates the following programme outcomes.

PO	Domain	Programme outcome

PO	Domain	Programme outcome
PO1	Knowledge	Explain ageing-related changes and common physical, psychological, functional and social health concerns in older persons.
PO2	Assessment	Conduct comprehensive geriatric assessment, including ADL/IADL, cognition, mood, nutrition, falls and mobility.
PO3	Clinical care	Plan and provide safe nursing care for common geriatric conditions and monitor response to interventions.
PO4	Communication and education	Communicate respectfully with older persons and families and provide caregiver and community education.
PO5	Safety, ethics and safeguarding	Promote safety, dignity, confidentiality and legal rights; recognise and respond appropriately to suspected elder abuse.
PO6	Rehabilitation and evidence	Coordinate rehabilitation, palliative care and referral, and apply evidence-informed practice and research principles.

6. Curriculum Framework

6.1 Distribution of hours

Unit	Title	Theory (h)	Simulation lab (h)
1	Health services and programmes for older persons	10	6
2	Age-friendly environment	10	6
3	Management of common diseases of older persons	10	8
4	Psychiatric problems of older persons	10	8
5	Malignancies of ageing	15	8
6	Counselling the older person	10	6
7	Elder abuse and violence	15	8
8	Rehabilitation and occupational therapy	10	5
9	Provisions, legislation and regulations related to older adults	10	5
	Total	**100**	**60**

Component	Hours	Share
Theory (8 units)	100	10%
Simulation laboratory	60	6%
Clinical practice (postings)	840	84%
Total	**1,000**	**100%**

Average weekly load over 26 weeks: about 4 hours of theory, 2 hours of simulation and 32 hours of clinical practice (about 38 hours a week).

6.2 Schedule of the 26 weeks

Weeks	Activity
1–2	Orientation, introduction to geriatric nursing, comprehensive geriatric assessment and initial clinical/community orientation.
3–20	Theory units with supervised clinical postings, skills practice, case-based learning and logbook entries.
21–25	Completion of postings and competencies, case presentations, logbook completion and revision.
26	Final assessment and exit examination.

6.3 Teaching–learning methods

- Interactive lectures, demonstrations, videos and guided reading.
- Case-based learning, group discussion, role play and case presentations.
- Skills-laboratory practice for assessment tools, mobility and fall-risk assessment, safe care and caregiver education.

- Supervised bedside and community teaching, interprofessional learning and reflective logbook entries.

7. Detailed Syllabus: Geriatric Care Nursing

Theory 100 hours · Simulation laboratory 60 hours · Clinical practice 840 hours

For every unit, the syllabus gives the learning objectives, content, teaching–learning activities, assessment methods and course outcomes (CO).

Unit I: Health Services and Programmes for Older Persons

Theory 10 hours · Simulation laboratory 6 hours

Learning objectives

- Explain health services and programmes available for older persons.
- Identify the roles of geriatric clinics, home-based healthcare, rehabilitation, palliative care and other service settings.
- Describe the nurse's role in accessing services, coordinating referrals, and promoting continuity of care for older people.

Content

Health services for older people

- Concept, scope and principles of geriatric healthcare.
- Levels of healthcare and the continuum of care for older adults.
- Preventive, promotive, curative, rehabilitative and palliative services.

Health services and programmes

- Geriatric clinics and geriatric units in hospitals.
- Community-based services, home-based healthcare and outreach services.
- National programmes, welfare schemes and referral services relevant to older persons.

Role of geriatric nurse

- Health assessment, health education, and early identification of health needs.
- Coordination of care, referral follow-up, and continuity of care.
- Family involvement and collaboration with the multidisciplinary team.

Teaching–learning activities

Lecture, demonstration, and discussion

Assessment methods

Short notes and case-based assessment

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Describe health services for older persons.
CO2	Identify referral options and relevant service settings
CO3	Explain the role of nurses and continuity of care

Unit II: Age-Friendly Environment

Theory 10 hours · Simulation laboratory 6 hours

Learning objectives

- Define an age-friendly environment and explain its importance.
- Identify environmental barriers and safety hazards that may affect the mobility, accessibility and independence of older adults.
- Recommend practical measures to improve safety, accessibility, and age-friendly care in homes, healthcare facilities and community settings.

Content

Concept and features of an age-friendly environment

- Definition, importance and principles of age-friendly care.
- Age-friendly outdoor spaces, buildings, transport and community facilities.
- Accessibility, participation, social inclusion and support services.

Safety in home and healthcare settings

- Common environmental hazards and barriers to mobility.
- Lighting, flooring, handrails, ramps, toilets and assistive devices.
- Fall prevention, injury prevention, emergency access and safe movement.

Nursing responsibilities

- Environmental assessment of home, hospital and community settings.
- Recommendations to improve safety, accessibility and independence.
- Health education for older people, families and caregivers.

Teaching–learning activities

Problem-based learning, environmental assessment activity and discussion.

Assessment methods

Observation and case-based questions

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Assess environmental features affecting older adults.
CO2	Identify hazards and suggest practical safety and accessibility improvements.
CO3	Recommend age-friendly modifications that promote safety, accessibility and independence.

Unit III: Management of Common Diseases of Older Persons

Theory 10 hours · Simulation laboratory 8 hours

Learning objectives

- Describe the causes, signs, symptoms and complications of common diseases in older persons.
- Recognize warning signs and identify the assessment and monitoring needs of older adults with common geriatric conditions.
- Plan safe, individualized nursing care, health education, follow-up and referral for older persons with common diseases.

Content

Common chronic diseases

- Hypertension and cardiovascular conditions.
- Diabetes mellitus and related complications.
- Osteoarthritis, osteoporosis and other musculoskeletal problems.

Other common geriatric conditions

- Alzheimer’s disease and dementia; vision and hearing impairment.
- Urinary incontinence, constipation, sleep problems and sensory changes.
- Multiple morbidity, polypharmacy and age-related changes affecting care.

Nursing management

- Assessment, monitoring and recognition of warning signs.
- Medication safety, adherence, nutrition, activity and prevention of complications.
- Individualized care planning, patient and caregiver education, follow-up and referral.

Teaching–learning activities

Lectures, demonstrations, case discussion and skills practice.

Assessment methods

Short notes, case-based assessment and skills checklist.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Recognize common geriatric conditions and warning signs.
CO2	Plan nursing assessment, monitoring, education and referral.
CO3	Apply general principles of safe, individualized disease management.

Unit IV: Psychiatric Problems of Older Persons

Theory 10 hours · Simulation laboratory 8 hours

Learning objectives

- Describe common psychiatric problems affecting older persons.
- Differentiate common features of depression, dementia, delirium, anxiety, sleep disorders and other mental health concerns in older adults.
- Identify appropriate screening, supportive nursing interventions, safety measures and referral needs for older persons with mental health problems.

Content

Common mental health problems

- Depression, anxiety and sleep disorders
- Dementia and delirium: common features and differences
- Psychosis, paranoid disorders, substance misuse and other behavioral changes

Assessment and identification

- Mental status assessment and observation of behavior.
- Screening for depression, cognitive changes and risk of self-harm.
- Identification of acute confusion, safety risks and need for urgent referral.

Nursing care and support

- Therapeutic communication, reassurance and supportive care.
- Maintaining safety, orientation, sleep and a supportive environment.
- Family education, caregiver support, referral, and follow-up.

Teaching–learning activities

Lectures, demonstration, case discussion and role play.

Assessment methods

Short notes, case-based assessment and viva.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Recognize common mental health concerns and possible acute changes.
CO2	Identify appropriate screening and assessment needs.
CO3	Describe supportive nursing management and referral.

Unit V: Malignancies of Ageing

Theory 15 hours · Simulation laboratory 8 hours

Learning objectives

- Define malignancies and explain risk factors associated with cancer in older people.
- Identify common cancers in older adults and describe basic diagnostic treatment pathways.

- Planned nursing care focused on symptoms monitoring, treatment support, patient and family education, rehabilitation and palliative care

Content

Introduction to malignancies

- Definition and basic concepts of cancer.
- Age-related risk factors, warning signs, and importance of early detection.
- Common cancers in older adults: lung, colorectal, prostate, breast, bladder and skin cancers, leukemia and lymphoma.

Diagnosis and management

- Basic diagnostic investigations and staging concepts.
- Overview of surgery, chemotherapy, radiotherapy and other treatment approaches.
- Treatment-related effects, frailty, comorbidities and individualized care considerations.

Nursing and supported care

- Assessment and monitoring of pain, nutrition, fatigue and other symptoms.
- Infection prevention, medication support, and management of treatment effects.
- Psychosocial support, family education, rehabilitation, palliative and end-of-life care.

Teaching–learning activities

Lectures, demonstration, discussion, and case study.

Assessment methods

Short notes, case-based assessment and case presentation

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Describe common cancers affecting older persons
CO2	Explain diagnostic and management pathways at a nursing level
CO3	Provide supportive care symptom monitoring education and palliative support.

Unit VI: Counselling the Older Person

Theory 10 hours · Simulation laboratory 6 hours

Learning objectives

- Identify emotional, cognitive, social, physical and existential issues affecting older adults.
- Demonstrate empathetic respectful and Aids-sensitive communication while counselling older patients and their caregivers.
- Select appropriate basic counselling approaches and identify situations requiring specialist support or referral.

Content

Counselling needs of older people

- Emotional, cognitive, social, physical and existential concerns.
- Loss, bereavement, loneliness, role changes, dependency, and adjustment.
- Factors influencing communication and help-seeking among older adults.

Principles and approaches

- Respect, empathy, dignity, confidentiality and active listening.
- Individual counselling, family counselling and supportive counselling.
- Communication adaptations for hearing, vision or cognitive impairment

Nursing role in counselling

- Establishing rapport and identifying concerns and priorities.
- Supporting coping, self-care, decision-making and caregiver well-being.

- Recognizing limits of nursing role and arranging specialist referral when indicated.

Teaching–learning activities

Lectures, demonstration, discussion and role play.

Assessment methods

Short notes, role-play assessment and case-based questions.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Identify common counselling needs
CO2	Communicate empathetically and respectfully.
CO3	Describe appropriate counselling approaches and referral when needed.

Unit VII: Elder Abuse and Violence

Theory 15 hours · Simulation laboratory 8 hours

Learning objectives

- Explain the role of nurses and healthcare workers in identifying, reporting, preventing and managing elder abuse.
- Recognize possible signs, types, risk factors and consequences of abuse, neglect and exploitation of older adults.
- Describe safe assessment, confidential documentation, safeguarding, reporting and referral measures for suspected elder abuse.

Content

Concept, types and risk factors

- Definition and types of elder abuse: physical, psychological, sexual, financial and neglect.
- Risk factors, vulnerability, dependency and caregiver stress
- Signs, symptoms and possible physical, emotional and social consequences

Assessment and response

- Recognition of suspected abuse, neglect and exploitation.
- Sensitive interviewing, immediate safety assessment and confidential documentation
- Screening approaches, evidence preservation where appropriate and referral pathways.

Prevention and nursing responsibilities

- Safeguarding, advocacy and person-centered communication.
- Reporting and referral in accordance with applicable institutional policy and law.
- Education of older people, families, caregivers and the community; multidisciplinary collaboration.

Teaching–learning activities

Lecture, demonstration, discussion, case scenarios and role play.

Assessment methods

Short notes, case-based assessment and skills checklist.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Recognize possible indicators of abuse or neglect.
CO2	Describe safe assessment, documentation, safeguarding and referral processes.
CO3	Explain the role of nurses and healthcare workers in prevention and response.

Unit VIII: Rehabilitation and Occupational Therapy

Theory 10 hours · Simulation laboratory 5 hours

Learning objectives

- Define rehabilitation and explain its importance in geriatric care.

- Identify functional limitations and assess the rehabilitation needs of older people in relation to mobility and activities of daily living.
- Support safe activity, functional independence and participation in daily life, and collaborate with rehabilitation and occupational therapy services.

Content

Principles of rehabilitation

- Definition, goals and types of geriatric rehabilitation.
- Functional assessment and identification of rehabilitation needs.
- Activities of daily living (ADL), instrumental activities of daily living (IADL) and functional independence.

Rehabilitation interventions

- Mobility, balance, strength, endurance and range-of-motion activities.
- Fall prevention, safe transfers, positioning and use of assistive devices.
- Occupational therapy, adaptation of daily activities and environmental modification.

Nursing role and teamwork

- Encouraging safe activity, participation and self-care.
- Collaborating with physiotherapists, occupational therapists and other team members
- Patient and caregiver education, discharge planning and continuity of rehabilitation.

Teaching–learning activities

Lecture, demonstration and supervised skills practice.

Assessment methods

Short notes, observation and case-based assessment.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Explain the goals and types of rehabilitation.
CO2	Identify functional limitations and rehabilitation needs.
CO3	Support safe activity, independence and referral to appropriate services.

Unit IX: Provisions, Legislations and Regulations Related to Older Adults

Theory 10 hours · Simulation laboratory 5 hours

Learning objectives

- Explain the importance of legal provisions and regulations for protecting older adults in India.
- Identify key national policies, legislation and welfare programmes relevant to the rights, safety and wellbeing of older people.
- Describe the nurse’s responsibilities in protecting older adults’ rights, promoting access to benefits and referring legal or safeguarding concerns through appropriate channels.

Content

Rights and legal protection

- Constitutional provisions and principles relevant to older persons in India
- Key national legislation and policies concerning maintenance, welfare, protection and dignity of older adults
- Rights, autonomy, consent, confidentiality, and protection from discrimination.

Welfare provisions and services

- Government welfare schemes, pensions and social support provisions.
- Access to healthcare, community services and support systems.
- Institutional policies, referral resources and support for vulnerable older adults.

Nursing responsibilities

- Advocacy for dignity, autonomy, safety and informed decision-making.
- Documentation, confidentiality and referral for legal or safeguarding concerns.
- Ethical practice and collaboration with families, social services and relevant authorities.

Teaching–learning activities

Lecture, demonstration and discussion.

Assessment methods

Short notes and case-based assessment.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Identify key legal protections and welfare provisions relevant to older adults.
CO2	Explain how nurses can support dignity, rights, access to services and appropriate referral.
CO3	Describe the nurse's role in advocacy, ethical practice and referral for legal or safeguarding concerns.

8. Clinical Practice: Postings (840 hours)

Clinical area	Weeks	Hours
Geriatric medical ward	6	200
Geriatric clinic/ outpatient services	3	100
Community and home-based care	5	160
Rehabilitation/physiotherapy / occupational therapy	4	120
Long-term care / residential care setting	3	100
Mental health/memory clinic	2	60
Palliative care/oncology services	2	60
Multidisciplinary and elder-support services	1	40
Total	**26**	**840**

Postings run in the order that suits the roster. Postings are for the practical hours only; theory and simulation hours are in addition to those listed here within the 1,000-hour total. Each posting ends with a guide-verified competency sign-off in the logbook.

8.1 Expected learning in each posting

Posting	Focus
Geriatric outpatient department	Comprehensive geriatric assessment, health history, physical assessment, functional status, medication review, identification of age-related health problems
Geriatric medical ward	Nursing management of common geriatric conditions, chronic disease management, polypharmacy, nutrition, hydration, pressure injury prevention, infection control
Geriatric assessment and rehabilitation unit	Assessment of activities of daily living (ADL) and instrumental activities of daily living (IADL), mobility assessment, fall prevention, rehabilitation therapy
Psychiatric and memory care unit	Assessment of dementia, delirium, depression and other psychological problems, cognitive screening, communication strategies, and caregiver support.
Palliative care and end-of-life care unit	Pain and symptom management, comfort care, communication with patients and families, psychosocial and spiritual support, bereavement care
Community and home-based geriatric care	Home assessment, age-friendly environment, community-based elderly services, health education, prevention of elder abuse.
Multidisciplinary geriatric services	Comprehensive geriatric assessment, case conferences, management of incontinence, nutritional assessment, counselling for older persons

9. Essential Geriatric Care Skills and Logbook

The fellow keeps a logbook in which every procedure is recorded, signed by the preceptor and verified by the guide. The minimum numbers below apply to the 840 clinical hours; items marked "Sim" may be completed on a manikin or simulator when the clinical case is not available.

9.1 Procedures observed (O)

No.	Procedure	Minimum
1	Comprehensive Geriatric Assessment (CGA)	2
2	Cognitive assessment for dementia and delirium	2
3	Nutritional assessment and swallowing evaluation	2
4	Home safety assessment and age-friendly environment evaluation	2
5	Assessment of urinary and fecal incontinence	2

9.2 Procedures assisted (A)

No.	Procedure	Minimum	Simulation
1	Comprehensive Geriatric Assessment	5	
2	Cognitive screening for dementia and delirium	5	
3	Medication reconciliation and monitoring for adverse drug reactions	3	
4	Safe transfer, positioning and ambulation of older adults	5	Sim
5	Range-of-motion exercises and rehabilitation activities	10	Sim
6	Bladder and bowel assessment and continence care	5	
7	Nutritional screening and feeding assistance	5	
8	Assessment and reporting of suspected elder abuse or neglect	2	
9	Palliative care, pain assessment and comfort measures	2	

9.3 Procedures performed (P)

No.	Procedure	Minimum	Simulation
1	Comprehensive Geriatric Assessment under supervision	5	
2	Measurement of vital signs and pain assessment in older adults	10	
3	Fall prevention interventions and safe patient transfer	5	Sim
4	Personal hygiene, oral care and skin care for older adults	10	
5	Assistance with feeding, hydration and nutritional monitoring	10	
6	Bladder and bowel care, including incontinence management	5	
7	Range-of-motion exercises and assisted ambulation	5	Sim
8	Application of assistive devices and mobility aids	5	Sim
9	Wound dressing and pressure injury care under supervision	5	
11	Comfort care, pain management and end-of-life nursing care	5	
12	Documentation of geriatric assessment, nursing care and referral	10	

9.4 Logbook

- Entry for every procedure: date, patient identification number, procedure, level (O/A/P), setting (clinical/Sim), outcome, reflection, preceptor signature.
- Guide verification at the end of every posting; Fellowship Coordinator reviews at weeks 8, 16 and 24.
- Case log: at least 10 case studies or case presentations with nursing care plans, from the geriatric medical ward, rehabilitation, and psychiatric areas.
- The logbook is submitted to the guide one week before the final assessment.

10. Scheme of Assessment

10.1 Final assessment and exit examination

The examination is conducted by the School of Nursing Science and Technology, Malla Reddy Vishwavidyapeeth. The final assessment by the assigned guides has three components.

Component	Details	Marks	Minimum (50%)

Component	Details	Marks	Minimum (50%)
I. Multiple choice questions	Written paper; 1 mark per question; blueprint in 10.3	25	12.5
II. Practical skills assessment	Three case scenarios with discussion; 20 marks each	60	30
III. Logbook maintenance	Completeness and regularity; accuracy of entries; guide verification	15	7.5
Total		**100**	**50**

10.2 Criteria to pass

- Minimum 50% in each of the three components and minimum 50% aggregate (50 of 100).
- In terms of the earlier wording: 50% in theory (MCQ) and 50% in practical separately, and 50% in internal assessment. The logbook, which records the continuous assessment by guides and preceptors, is the internal assessment component.
- Minimum 80% attendance in theory, simulation and clinical postings; missed postings must be completed before the final assessment.
- A fellow who fails a component repeats only that component at the next scheduled assessment within 6 months, once.
- Any additional output or deliverable (for example a case study, audit or teaching session) is decided with the guide and needs prior written approval of the Fellowship Committee.

10.3 MCQ blueprint (25 marks)

Unit	Title	Theory hours	MCQs
1	Health services and programmes for older persons	10	2
2	Age-friendly environment	10	2
3	Management of common diseases of older persons	10	3
4	Psychiatric problems of older persons	10	3
5	Malignancies of ageing	15	4
6	Counselling the older person	10	2
7	Elder abuse and violence	15	4
8	Rehabilitation and occupational therapy	10	2
9	Provisions, legislation and regulations related to older adults	10	3
	Total	**100**	**25**

10.4 Practical skills assessment (60 marks)

Each fellow is assessed on three case scenarios in a simulated or clinical setting, with discussion. The three cases together cover comprehensive geriatric assessment and management of common health problems in older adults, cognitive or psychological problems such as dementia, delirium or depression, and functional impairment, falls, rehabilitation, elder abuse, or palliative and end-of-life care. Each case carries 20 marks.

Criterion	Marks
Assessment and identification of priority needs	5
Prioritization and nursing care plan	4
Technical/ clinical skill and rationale	6
Safety, dignity, infection prevention and communication	3
Discussion: rationale, risks, referral and evidence- based care.	2
Total per case	**20**

10.5 Logbook assessment (15 marks)

Criterion	Marks
Completeness and regularity	5

Criterion	Marks
Accuracy of entries	5
Guide verification	5
Total	**15**

10.6 Formative assessment

Unit-wise MCQ tests, skill checklists, case presentations and viva (the assessment methods listed under each unit) are used as formative assessment and feedback during the fellowship; they do not carry marks in the final result. The guide records progress at the end of each posting.

10.7 Award of the certificate

The Fellowship in Geriatric Care Nursing certificate is awarded by Malla Reddy Vishwavidyapeeth (Deemed to be University) to a fellow who satisfies the criteria in 10.2, on the recommendation of the Fellowship Committee and under the signature of the Controller of Examinations and the Dean.

11. Infrastructure, Faculty and Quality Assurance

11.1 Clinical facilities

- Access to medical/geriatric wards, outpatient or geriatric clinics, community and home-care services, rehabilitation services and long-term care settings.
- Appropriate exposure to mental health, oncology / palliative care and multidisciplinary referral services.
- Adequate older-person caseload and supervision to support competency and logbook completion.

11.2 Simulation laboratory

- Assessment stations for ADL/IADL, cognition, mood, nutrition, fall risk and mobility.
- Equipment for safe transfer, mobility assistance, pressure injury prevention, basic monitoring and continence care
- Teaching resources for caregiver education, communication, safeguarding scenarios and palliative care.

11.3 Classroom and learning resources

- Smart classroom, library and digital resources.
- Learning management system for notes, videos and logbook forms

11.4 Quality assurance

- Fellow feedback on every unit and posting; guide feedback to the committee at mid-point and at the end
- Annual curriculum review by the Fellowship Committee, with updating to current guidelines
- Grievance redressal through the Fellowship Coordinator; escalation to the Dean
- Ethics: informed consent and confidentiality in all patient contact; supervised practice only within the scope of a registered nurse

12. Suggested References

- Core textbooks of gerontological/geriatric nursing available through the School library.
- Current medical-surgical nursing texts covering chronic disease management, dementia, delirium and older-adult care.
- Relevant Government of India policies, welfare programmes and legislation concerning older persons and persons with disabilities.

- Current institutional protocols for falls prevention, medication safety, elder safeguarding, infection prevention and end-of-life care. Marino's The ICU Book
- Advanced Trauma Life Support (ATLS) Student Course Manual – American College of Surgeons
- Advanced Cardiovascular Life Support Provider Manual and current resuscitation guidelines – American Heart Association
- Textbook of critical care nursing and obstetric nursing in current use at SNST
- WHO and Government of India guidelines on emergency care, infection prevention, burns and obstetric emergencies

Annexure A: Final Assessment Sheet – MRV Fellowship

A. Fellow details

Name of fellow	
Fellowship ID	
Institution / department	
Batch / year	

Component I: Multiple choice questions (25 marks)

Number of questions: _____ Marks obtained: _____ / 25 Result: ☐ Pass ☐ Fail (minimum 50% required)

Component II: Practical skills assessment (60 marks)

Case	Maximum marks	Marks obtained	Examiner signature
Case 1	20		
Case 2	20		
Case 3	20		
Total	**60**		

Result: ☐ Pass ☐ Fail (minimum 50% required)

Component III: Logbook maintenance (15 marks)

Criteria: completeness and regularity; accuracy of entries; guide verification. Marks obtained: _____ / 15 Result: ☐ Pass ☐ Fail (minimum 50% required)

Overall assessment summary

Component	Maximum marks	Marks obtained	Pass / fail
MCQs	25		
Practical skills	60		
Logbook	15		
Total	**100**		

Final result: ☐ Pass ☐ Fail (minimum 50% aggregate required)

Additional outputs (if approved by the Fellowship Committee):

_____

Certification

We certify that the above final assessment and exit examination have been conducted strictly in accordance with the approved MRV Fellowship guidelines.

Date: _____

1. Name of guide / examiner	
Signature	
2. Name of guide / examiner	
Signature	

Annexure B: Logbook Formats

B.1 Procedure log

Date	Patient ID	Procedure	Level (O/A/P)	Clinical / Sim	Outcome and reflection	Preceptor signature

B.2 Posting summary

Posting	Dates	Hours completed	Competencies signed off	Guide signature
Geriatric / medical ward				
Geriatric clinic / outpatient services				
Community and home-based care				
Rehabilitation / physiotherapy / occupational therapy				
Long-term care / residential care setting				
Mental health / memory clinic				
Palliative care / oncology services				

B.3 Case study / presentation log

No.	Date	Diagnosis / condition	Area	Guide remarks and signature

Annexure C: Certificate of Completion (format)

MALLA REDDY VISHWAVIDYAPEETH

(Deemed to be University)

This is to certify that

_____

Fellowship ID _____ has successfully completed the 26-week

FELLOWSHIP IN GERIATRIC CARE NURSING

at the School of Nursing Science and Technology, and has passed the final assessment and exit examination held in _____ with a total of _____ / 100 marks.

Date of issue: _____	Place: Hyderabad
Controller of Examinations	Dean, School of Nursing Science and Technology