MALLA REDDY VISHWAVIDYAPEETH
(Deemed to be University)
Hyderabad

School of Nursing Science and Technology

FELLOWSHIP IN
NON-COMMUNICABLE DISEASES (NCD) CARE

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 Nursing – 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 recognizes the growing demand for professionally trained nurses who can manage emergency and trauma care in hospital and community settings. Registered nurses are often the first point of contact in an emergency and play

a decisive role in early assessment, stabilization, life-saving interventions and continuity of care. Specialized training is therefore essential for safe, timely and evidence-based nursing practice.

The Fellowship in Non-Communicable Diseases Care Nursing is designed to strengthen the competencies of nurses in triage, advanced life support, trauma management, disaster preparedness and emergency nursing procedures. It enables nurses to identify life-threatening conditions, understand the etiology and pathophysiology of acute and traumatic illness, interpret diagnostic findings, and carry out appropriate nursing and collaborative interventions.

The fellowship also develops skills in patient monitoring, emergency pharmacology, use of advanced medical technology, infection control, ethical decision-making and communication in crisis. Through structured clinical exposure, simulation-based learning and case-based discussion, nurses are prepared to deliver comprehensive, patient-centred and outcome-oriented care in Non-Communicable Diseases settings. The programme aims to build professional confidence, clinical judgement and leadership, and so to contribute to better patient outcomes, lower morbidity and mortality, and stronger emergency health services.

1.1 Need

- Cardiovascular diseases, Cancers, Diabetes, Chronic kidney disease, Neurological disorders, Musculoskeletal disorders, Digestive diseases, Mental health conditions form a large share of attendances, and the first hour of nursing care strongly influences survival.
- Basic nursing programmes give limited exposure to emergency triage, advanced life support and trauma stabilization; a structured, assessed post-registration programme closes this gap.
- Hospitals and emergency medical services need nurses who can lead resuscitation teams, supervise junior staff and teach patients and families.

2. Vision, Mission and Programme Objectives

2.1 Vision

To prepare Non-Communicable Diseases care nurses who deliver safe, timely, evidence-based and compassionate care and who lead improvement of health services.

2.2 Mission

- Provide competency-based training with graded clinical responsibility, simulation and supervised practice.
- Promote ethical, patient-centred and safe practice in every emergency setting.
- Develop clinical judgement, teamwork and leadership for emergency and disaster situations.

2.3 Programme objectives

After successful completion of the Fellowship in Non-Communicable Diseases Care Nursing, the fellow will be able to:

1. Provide safe, timely and evidence-based nursing care to patients in emergency and trauma settings, ensuring quality outcomes and patient safety.
2. Assess, manage and supervise the nursing care of critically ill patients, including those needing advanced life support, trauma stabilization and continuous monitoring.
3. Educate and guide nurses, allied health professionals, patients and family members on emergency preparedness, chronic care procedures and post – rehabilitation needs.
4. Perform triage and mass-casualty response.
5. Operate and maintain acute and chronic care equipment safely and apply infection-prevention practices.
6. Maintain ethical, legal and professional standards, including accurate documentation and handover.

3. Programme at a Glance

Item	Details
Name of the programme	Fellowship in Non-Communicable Diseases 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-1,000 Hrs: Theory-100 Hrs, Simulation laboratory-60 Hrs, Clinical practice-840 Hrs
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 record, 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.

4.4 Guides

- Guide / co-guide: Professor, Associate Professor or Assistant Professor from SNST with a postgraduate qualification in nursing and experience in Non Communicable Disease care nursing.
- Clinical preceptors: nurses with at least two years of Non Communicable Disease care experience and a valid BLS/ACLS provider certificate.
- 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
PO1	Knowledge	Explains the etiology, risk factors, pathophysiology, clinical manifestations, diagnostic findings, prevention and management of major non-communicable diseases, including cardiovascular diseases, diabetes mellitus, cancer, chronic respiratory diseases and chronic kidney disease.
PO2	Assessment and screening	Performs comprehensive health assessments, identifies risk factors, conducts appropriate screening, monitors disease progression and recognizes early signs of complications associated with non-communicable diseases.
PO3	Clinical management and interventions	Provides evidence-based nursing care to patients with non-communicable diseases, administers prescribed treatments safely, monitors therapeutic responses and assists in the prevention and management of acute and chronic complications.

PO4	Health promotion and patient education	Educates patients, families and communities regarding healthy lifestyles, balanced nutrition, physical activity, tobacco cessation, harmful alcohol use prevention, medication adherence and self-management of non-communicable diseases.
PO5	Safety, ethics and quality of care	Applies infection prevention, medication safety, ethical principles, informed consent, confidentiality and patient safety practices while delivering care to individuals with non-communicable diseases.
PO6	Leadership, research and evidence-based practice	Coordinates multidisciplinary care, participates in NCD prevention and control programmes, applies evidence-based guidelines, maintains accurate documentation and contributes to quality improvement and research activities related to non-communicable diseases.

6. Curriculum Framework

6.1 Distribution of hours

Unit	Title	Theory (h)	Simulation lab (h)
1	Introduction to Non-Communicable Diseases	10	10
2	Types of Non communicable diseases	20	12
3	Causes of non – communicable diseases	20	12
4	Management modalities of non-communicable diseases	25	12
5	Preventive measures of non-communicable diseases and Nursing management	25	14
	Total	**100**	**60**

Component	Hours	Share
Theory (5 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
Weeks	**Activity**
1–2	Orientation to the fellowship programme, BLS certification, introduction to non-communicable diseases (NCDs), epidemiology and risk factors, infection-prevention and control orientation, equipment familiarization, introduction to NCD screening and assessment, and commencement of clinical posting in medical wards or NCD clinics.
3–20	Clinical postings in relevant departments, including cardiology, diabetology, oncology, respiratory medicine, nephrology and NCD clinics, as applicable. Theory sessions covering the prevention, screening, diagnosis, treatment and nursing management of NCDs; practical training in patient assessment, vital-sign monitoring, blood glucose monitoring, medication administration, patient counselling, complication prevention and simulation-based learning.

21–26	Completion of remaining clinical postings, supervised patient-care activities, community-based NCD screening and health education, case presentations, nursing care plan preparation, logbook completion, clinical skill revision and practice of case scenarios related to NCD management.

6.3 Teaching–learning methods

- Interactive lectures, videos and case-based learning
- Simulation laboratory: manikins, defibrillator, ventilator, monitors, trauma and burn stations
- Bedside teaching, supervised procedures and graded responsibility in clinical postings
- Group discussion, role play, peer-led presentations, music therapy and relaxation demonstrations
- Emergency drills; scenario OSCE practice
- Logbook reflection and guide feedback

7. Detailed Syllabus: Non-Communicable Diseases Care Nursing

Total duration: 26 weeks

Theory: 100 hours

Simulation/Laboratory: 60 hours

Clinical practice: 840 hours

Unit I: Introduction to Non-Communicable Diseases Care

Theory: 10 hours · Simulation/Laboratory: 8 hours

Learning objectives

Understand the history, concepts, scope and principles of non-communicable diseases care.

- Explain the burden and public health importance of NCDs.
- Identify the organisation, equipment and resources required for NCD screening and management.
- Apply basic screening, assessment, documentation and referral principles.

Content

Introduction to non-communicable diseases

- Historical review and evolution of NCD care.
- Definition, concepts, characteristics and classification of NCDs.
- Global and national burden of NCDs.
- Impact of NCDs on individuals, families, communities and healthcare systems.
- Principles and scope of NCD care nursing.
- Role and responsibilities of the NCD care nurse.

Organisation of NCD services and clinical assessment

- Organisation of NCD clinics and chronic disease management services
- Equipment and supplies used in NCD screening and monitoring.
- Use and care of blood pressure apparatus, glucometer, weighing scale, pulse oximeter and peak flow meter.

- Assessment of vital signs, BMI, waist circumference and relevant clinical parameters.
- Patient records, flow sheets, electronic health records and follow-up registers.
- Documentation, referral and continuity of care.

Screening, prevention and public health programmes

- Primary, secondary and tertiary prevention of NCDs.
- Principles of population-based and opportunistic screening.
- Risk assessment and early identification of high-risk individuals.
- Overview of national NCD prevention and control programmes.
- Community participation and health promotion.

Acute complications and safety

- Recognition of warning signs requiring emergency referral, including suspected heart attack, stroke, severe hypoglycemia and acute respiratory distress
- Initial assessment, timely escalation and referral according to institutional protocols.
- Consent, confidentiality, ethical practice and accurate documentation.

Teaching–learning activities

Lectures, group discussions, videos, demonstrations of screening equipment, hands-on practice, clinical observation visits, screening demonstrations and case-based discussions.

Assessment methods

- Multiple-choice questions (MCQs).
- Quiz and short-answer questions.
- Screening skill demonstration.
- Visit report.
- Logbook evaluation and viva voce.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Explain the concepts, characteristics, burden and principles of NCD care.
CO2	Identify and use common screening and monitoring equipment under appropriate supervision.
CO3	Perform basic NCD risk assessment, screening documentation and referral according to established protocols.
CO4	Recognize warning signs of acute complications and initiate appropriate escalation of care.

Unit II: Types and Clinical Assessment of Non-Communicable Diseases

Theory: 20 hours · Simulation/Laboratory: 12 hours

Learning objectives

- Describe the major types and clinical manifestations of NCDs.
- Explain the pathophysiology and complications of common NCDs.
- Perform focused health assessments relevant to different NCDs.
- Interpret common diagnostic findings and identify patients requiring further evaluation.

Content

1. Cardiovascular diseases

- Hypertension, coronary artery disease, myocardial infarction, heart failure and stroke.
- Basic pathophysiology and clinical manifestations.
- Cardiovascular risk assessment and blood pressure measurement.
- ECG monitoring, lipid profile and other relevant investigations.
- Recognition of warning signs of myocardial infarction and stroke
- Prevention of cardiovascular complications.

2. Diabetes mellitus

- Type 1 and type 2 diabetes mellitus.
- Pathophysiology, clinical manifestations and diagnostic criteria.
- Blood glucose monitoring and HbA1c assessment.
- Acute complications: hypoglycemia, diabetic ketoacidosis and hyperosmolar hyperglycaemic state.
- Chronic complications involving the eyes, kidneys, nerves, cardiovascular system and feet.
- Diabetic foot assessment and prevention of complications.

3. Cancer

- Common cancers and their risk factors.
- Warning signs, screening principles and early detection.
- Basic diagnostic procedures, including biopsy and imaging.
- Overview of surgery, chemotherapy, radiotherapy and other cancer treatments.
- Treatment-related complications and supportive nursing care.

4. Chronic respiratory diseases

- Chronic obstructive pulmonary disease (COPD) and asthma.
- Pathophysiology, symptoms and exacerbating factors.
- Respiratory assessment, pulse oximeter and peak expiratory flow monitoring.
- Pulmonary function testing and interpretation of relevant findings.
- Inhaler technique, oxygen safety and prevention of exacerbations.

5. Chronic kidney disease

- Causes, stages and clinical manifestations.
- Assessment of fluid balance, oedema, blood pressure and urine output.
- Interpretation of serum creatinine, estimated glomerular filtration rate and electrolytes.
- Overview of renal replacement therapy and prevention of complications.

6. Other important chronic conditions

- Obesity and overweight.
- Mental health conditions, including depression and anxiety, and their relationship with chronic illness.
- Neurological disorders, including Alzheimer's disease and Parkinson's disease.
- Musculoskeletal disorders, including osteoarthritis and osteoporosis.
- Chronic liver disease and other relevant chronic digestive disorders.

- Multimorbidity, functional limitations and the impact of chronic illness on quality of life.

Teaching–learning activities

Lectures, case presentations, clinical demonstrations, diagnostic report interpretation, assessment of patients in NCD clinics, disease-specific simulation scenarios and supervised practice with screening equipment.

Assessment methods

- MCQs and objective-type questions.
- Short-answer questions.
- Case presentation.
- OSCE stations for blood pressure measurement, blood glucose monitoring, diabetic foot assessment and respiratory assessment.
- Logbook evaluation and viva voce.

Course outcomes (CO)

CO	Course outcome: The fellow will be able to
CO1	Classify major NCDs and explain their pathophysiology, clinical manifestations and complications.
CO2	Conduct focused assessments for cardiovascular diseases, diabetes, cancer, chronic respiratory diseases and chronic kidney disease.
CO3	Identify relevant diagnostic investigations and interpret common findings within the nursing scope of practice.
CO4	Recognize disease-specific warning signs and complications and facilitate timely treatment and referral.

Unit III: Etiology, Risk Factors and Assessment of Non-Communicable Diseases

Theory: 20 hours · Simulation/Laboratory: 12 hours

Learning objectives

- Explain the etiology and risk factors associated with NCDs.
- Differentiate modifiable and non-modifiable risk factors.
- Assess individual and community risk for developing NCDs.
- Apply risk-reduction strategies and evidence-based health education.

Content

Etiology and contributing factors

- Multifactorial causes of NCDs.
- Genetic predisposition and family history.
- Biological and physiological factors, including age, blood pressure, blood glucose and lipid abnormalities.
- Environmental exposures, air pollution and occupational hazards.
- Social determinants of health, including income, education, occupation and access to healthcare.
- Interactions between genetic, behavioural and environmental factors.
- The contribution of selected infections to certain cancers and other chronic conditions.

Modifiable behavioural risk factors

- Tobacco use and exposure to second-hand smoke.
- Harmful use of alcohol.
- Unhealthy diet, excessive salt intake and high consumption of saturated fats and added sugars.
- Physical inactivity and sedentary behaviour.
- Inadequate sleep and unhealthy lifestyle patterns.
- Obesity and central adiposity.
- Medication non-adherence and inadequate follow-up.

Non-modifiable risk factors

- Increasing age.
- Family history and genetic predisposition.
- Sex-related and inherited biological factors.
- Previous disease history and individual susceptibility.

Disease-specific risk assessment

- Cardiovascular risk assessment: hypertension, diabetes, dyslipidaemia, smoking and family history.
- Diabetes risk assessment: overweight, obesity, family history and relevant clinical history.
- Cancer risk assessment: age, tobacco exposure, family history, selected infections and environmental exposures.
- Respiratory risk assessment: smoking, occupational exposure and indoor or outdoor air pollution.
- Kidney disease risk assessment: diabetes, hypertension, previous kidney disease and nephrotoxic exposures.
- Identification of high-risk individuals and appropriate referral for further investigation.

Practical assessment and prevention

- Collection of personal, family, dietary and lifestyle histories.
- Measurement of BMI, waist circumference, blood pressure and blood glucose, as indicated.
- Use of appropriate validated risk-assessment tools.
- Motivational interviewing and behaviour-change counselling.
- Individualized risk-reduction plans and follow-up.
- Community awareness and preventive health education.

Teaching–learning activities

Lectures, group discussions, family-history assessment, risk-factor identification exercises, case studies, BMI and waist-circumference measurement, cardiovascular risk-assessment practice, role play and health education demonstrations.

Assessment methods

- MCQs and short-answer questions.
- Risk-assessment practical examination.

- Case-based discussion.
- Preparation of an individual NCD risk profile.
- Health education presentation.
- OSCE and logbook evaluation.

Course outcomes (CO)

CO	Course outcome: The fellow will be able to
CO1	Explain the etiology and modifiable and non-modifiable risk factors of major NCDs.
CO2	Collect relevant health histories and perform appropriate risk-factor assessments.
CO3	Identify high-risk individuals using appropriate assessment methods and recommend timely screening or referral.

Unit IV: Management Modalities of Non-Communicable Diseases

Theory: 25 hours · Simulation/Laboratory: 12 hours

Learning objectives

- Explain the principles of medical, nursing and multidisciplinary management of NCDs.
- Apply appropriate assessment and monitoring procedures during treatment.
- Provide safe, evidence-based nursing interventions for patients with NCDs.
- Recognize treatment-related complications and initiate appropriate escalation of care.

Content

1. General principles of NCD management

- Early diagnosis and evidence-based treatment.
- Individualized care planning and shared decision-making.
- Long-term disease control and prevention of complications.
- Multidisciplinary care and coordination among healthcare professionals.
- Medication reconciliation, administration, monitoring and adherence.
- Patient-centred communication and continuity of care.

2. Management of cardiovascular diseases

- Management principles for hypertension, coronary artery disease and heart failure.
- Monitoring blood pressure, heart rate, ECG and fluid balance as indicated.
- Medication groups, including antihypertensive, antiplatelets, lipid-lowering agents and prescribed heart failure therapies.
- Monitoring therapeutic responses and adverse drug effects.
- Recognition and escalation of suspected acute coronary syndrome, stroke and decompensate heart failure.
- Cardiac rehabilitation, lifestyle modification and secondary prevention.

3. Management of diabetes mellitus

- Blood glucose monitoring and glycemic control.
- Safe administration and monitoring of insulin and oral antidiabetic medications.
- Recognition and initial management of hypoglycemia according to protocol.

- Identification of diabetic ketoacidosis and hyperosmolar hyperglycaemic state.
- Foot care, skin assessment and prevention of diabetic ulcers.
- Prevention and monitoring of renal, neurological, ocular and cardiovascular complications.
- Nutrition, physical activity and diabetes self-management education.

4. Management of cancer

- Overview of cancer treatment modalities and treatment planning.
- Nursing care during chemotherapy, radiotherapy, surgery and other prescribed therapies.
- Monitoring for treatment-related adverse effects.
- Infection prevention, nutritional support, fatigue management and symptom control.
- Pain assessment, psychosocial support and palliative care principles.
- Safe handling of hazardous antineoplastic medicines by trained personnel according to institutional policy.

5. Management of chronic respiratory diseases

- Assessment of respiratory symptoms, respiratory rate and oxygen saturation.
- Administration and monitoring of prescribed inhaled medications.
- Correct inhaler and spacer techniques.
- Oxygen therapy and oxygen safety.
- Breathing exercises, pulmonary rehabilitation and energy conservation.
- Prevention, early recognition and escalation of acute exacerbations.

6. Management of chronic kidney disease

- Monitoring renal function, electrolytes, fluid balance and blood pressure.
- Dietary and fluid management according to the individual treatment plan.
- Medication safety and identification of potentially nephrotoxic drugs.
- Nursing care for patients receiving dialysis.
- Prevention and recognition of fluid overload, electrolyte abnormalities and other complications.
- Patient education regarding renal protection and follow-up.

7. Management of other chronic conditions

- Weight management and obesity-related care.
- Supportive care for chronic liver disease.
- Nursing care for patients with neurological and musculoskeletal disorders.
- Recognition of depression, anxiety and psychosocial distress.
- Rehabilitation, functional assessment and prevention of disability.
- Coordination of care for patients with multiple chronic conditions.

8. Monitoring, treatment safety and acute complications

- Monitoring response to treatment and disease-control indicators.
- Medication errors, adverse drug reactions and reporting procedures.
- Recognition of clinical deterioration and emergency referral.
- Patient safety, documentation and clinical audit.

- Use of evidence-based clinical guidelines and institutional protocols.

Teaching–learning activities

Lectures, demonstrations, supervised medication administration, simulation of hypoglycemia management and acute cardiac or respiratory deterioration, ECG and diagnostic report interpretation, insulin administration practice, inhaler technique demonstrations, diabetic foot assessment, dialysis unit observation and case-based learning.

Assessment methods

- Written examination and MCQs.
- OSCE and skill-demonstration checklists.
- Clinical case presentation.
- Nursing care plan preparation.
- Medication safety assessment.
- Simulation-based competency assessment.
- Logbook evaluation and viva voce.

Course outcomes (CO)

CO	Course outcome: the fellow will be able to
CO1	Explain the medical, nursing and multidisciplinary management of major NCDs.
CO2	Provide safe, evidence-based nursing interventions and monitor treatment responses.
CO3	Recognize treatment-related adverse effects, disease complications and signs of clinical deterioration.
CO4	Develop individualized nursing care plans that promote disease control, prevent complications and improve quality of life.
CO5	Apply medication safety, documentation and referral protocols in the management of patients with NCDs.

Unit V: Prevention, Nursing Management and Continuity of Care in Non-Communicable Diseases

Theory: 25 hours · Simulation/Laboratory: 14 hours

Learning objectives

- Explain primary, secondary and tertiary prevention of NCDs
- Plan health promotion and disease-prevention activities for individuals and communities.
- Apply nursing principles in long-term management, rehabilitation and palliative care.
- Describe national NCD prevention and control programmes.
- Coordinate follow-up, referrals and continuity of care.

Content

1. Prevention of non-communicable diseases

- Primary prevention: healthy lifestyle promotion and reduction of risk factors.
- Secondary prevention: screening, early diagnosis and prompt treatment.
- Tertiary prevention: prevention of complications, disability limitation and rehabilitation.
- Population-based prevention strategies and community participation.
- Tobacco cessation and avoidance of harmful alcohol use.

- Healthy diet, physical activity, weight management and adequate sleep.
- Environmental health and reduction of relevant exposures.

2. National programmes and public health strategies

- Overview of India's National Programme for Prevention and Control of Non-Communicable Diseases (NP-NCD).
- NCD services at primary, secondary and tertiary healthcare levels.
- Community-based screening and referral pathways.
- Health promotion through primary healthcare and community outreach.
- Multisectoral action involving healthcare, education, local government and community organizations.
- Public awareness campaigns and health education activities.
- Surveillance, reporting and monitoring of NCD indicators.

3. Nursing management of NCDs

- Comprehensive nursing assessment and nursing diagnosis.
- Development and evaluation of individualized nursing care plans.
- Monitoring vital signs, disease-specific parameters and treatment adherence.
- Lifestyle counselling and patient education.
- Prevention of pressure injuries, falls, infection and immobility-related complications.
- Support for activities of daily living and functional independence.
- Family involvement and caregiver education.
- Psychological support and culturally appropriate communication.

4. Patient education and self-management

- Disease-specific education and shared decision-making.
- Medication adherence and recognition of adverse effects.
- Home monitoring of blood pressure, blood glucose and other relevant parameters.
- Nutrition counselling and physical activity planning.
- Foot care and preventive practices for diabetes.
- Recognition of warning signs and appropriate help-seeking.
- Self-management plans and patient-held health records

5. Rehabilitation and palliative care

- Cardiac and pulmonary rehabilitation.
- Functional assessment and rehabilitation for neurological and musculoskeletal disorders.
- Nutritional support and management of chronic symptoms.
- Pain and symptom management.
- Psychosocial, emotional and family support.
- Palliative and end-of-life care where appropriate.
- Promotion of dignity, comfort and quality of life.

6. Referral, follow-up and continuity of care

- Identification of patients requiring specialist referral.
- Referral coordination between community, primary, secondary and tertiary services.
- Discharge planning and structured handover.
- Follow-up schedules and tracking of missed appointments.
- Prevention of treatment interruption and loss to follow-up.
- Coordination with multidisciplinary teams.
- Documentation, patient registers and electronic health records.

7. Leadership, quality improvement and research

- Role of the nurse in NCD programme implementation and supervision.
- Teamwork and coordination with multidisciplinary healthcare professionals.
- Clinical audit and quality improvement in chronic disease services.
- Use of evidence-based guidelines and protocols.
- Collection and interpretation of NCD screening and follow-up data.
- Ethical principles, informed consent, confidentiality and data protection.
- Basic research methods, case studies and evidence-based practice.

Teaching–learning activities

Lectures, guided reading, health education demonstrations, community screening visits, patient counselling role plays, preparation of educational materials, family teaching, case presentations, rehabilitation demonstrations, discharge planning exercises and quality-improvement projects.

Assessment methods

- MCQs and short-answer questions.
- Written assignment and evaluation of health education materials.
- Community visit report.
- Health education demonstration.
- Case presentation and nursing care plan.
- OSCE on patient counselling and discharge education.
- Logbook evaluation, viva voce and project presentation.

Course outcomes (CO)

CO	Course outcome: The fellow will be able to
CO1	Explain and implement primary, secondary and tertiary prevention strategies for NCDs.
CO2	Participate in national NCD programmes, community screening and health promotion activities.
CO3	Provide comprehensive nursing care, patient education and self-management support to individuals and families.
CO4	Plan rehabilitation, referral, discharge and follow-up services to promote continuity of care.
CO5	Apply leadership, documentation, surveillance, quality improvement and evidence-based practice in NCD care

8. Clinical Practice: Postings (840 hours)

Clinical area	Weeks	Hours
NCD clinic and primary healthcare centre.	8	280
Cardiology and general medical wards.	4	140
Diabetes clinic and diabetic foot care services.	4	140
Oncology unit and cancer screening services.	3	100
Respiratory medicine unit.	2	60
Nephrology and dialysis unit.	3	80
Rehabilitation services.	2	40
Total	**26**	**840**

8.1 Expected learning in each posting

Posting	Expected learning / Focus
NCD clinic and primary healthcare centre	NCD screening and risk assessment, blood pressure and blood glucose measurement, BMI and waist circumference assessment, identification of high-risk individuals, health education, documentation, referral and follow-up under supervision.
Cardiology and general medical wards	Assessment and nursing management of hypertension, coronary artery disease, myocardial infarction and heart failure; ECG monitoring, cardiovascular risk assessment, medication administration, fluid balance monitoring, recognition of complications and cardiac rehabilitation.
Diabetes clinic and diabetic foot care services	Diabetes assessment, blood glucose monitoring, HbA1c interpretation, insulin administration, medication adherence, dietary counselling, diabetic foot assessment, wound care, hypoglycemia recognition and prevention of long-term complications.
Respiratory medicine unit	Assessment and nursing management of COPD and asthma, respiratory rate and oxygen saturation monitoring, inhaler and nebulizer techniques, oxygen therapy and safety, breathing exercises, pulmonary rehabilitation and prevention of acute exacerbations.
Oncology unit and cancer screening services	Cancer screening and early detection, patient assessment, preparation for diagnostic procedures, nursing care during chemotherapy and radiotherapy, monitoring treatment-related adverse effects, pain management, nutritional support, psychosocial counselling and palliative care.
Nephrology and dialysis unit	Assessment of chronic kidney disease, monitoring renal function and electrolytes, fluid balance, blood pressure monitoring, preparation for dialysis, observation of dialysis procedures, vascular access care, recognition of complications and patient education on renal protection.
Rehabilitation services	Cardiac and pulmonary rehabilitation, exercise and mobility assessment, functional independence, prevention of disability, energy conservation, nutritional support, psychological counselling, caregiver education and improvement of quality of life.

9. NON-COMMUNICABLE DISEASES 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	ECG interpretation and cardiac diagnostic assessment	5
2	Echocardiography	2
3	Exercise stress testing or other cardiac stress investigations	2
4	Coronary angiography and percutaneous coronary intervention (PCI)	2
5	CT scan and MRI for NCD-related conditions	2
6	Cancer diagnostic procedures, including biopsy and relevant imaging	3
7	Cancer screening procedures, such as mammography, cervical screening or other locally available services	3
8	Pulmonary function testing, including spirometry	3
9	Haemodialysis and related renal replacement therapy	3
10	Fundus examination or retinal screening for diabetes-related complications	3
11	Diabetic foot assessment and specialised wound-care procedures	3
12	Cardiac, cancer-related, renal or other relevant chronic disease surgeries	2
13	Cardiac and pulmonary rehabilitation sessions	3
14	Palliative care and symptom-management consultations	2

9.2 Procedures assisted (A)

No.	Procedure	Min.	Sim
1	Cardiopulmonary resuscitation and basic life support for patients with acute cardiac complications	5	Sim
2	ECG recording and cardiac monitoring	10	—
3	Blood pressure measurement and cardiovascular risk assessment	15	—
4	Blood glucose monitoring and HbA1c-related patient assessment	10	—
5	Venous blood sampling and preparation of specimens for laboratory investigations	10	—
6	IV cannulation and prescribed intravenous therapy	5	—
7	Preparation and administration of prescribed insulin therapy	10	—
8	Administration of prescribed medications for chronic diseases	15	—
9	Diabetic foot assessment and wound dressing	5	—
10	Inhaler, spacer and nebulizer therapy	10	—
11	Oxygen therapy and pulse oximeter monitoring	5	—
12	Preparation and assistance during haemodialysis	3	—
13	Preparation and assistance during cancer treatment procedures, according to institutional policy	3	—
14	Patient preparation for diagnostic procedures, including endoscopy, biopsy and imaging	5	—
15	Nutritional assessment and development of diet plans in collaboration with the dietitian	5	—
16	Cardiac and pulmonary rehabilitation sessions	5	—
17	Patient counselling on medication adherence, lifestyle modification and disease self-management	10	—
18	Discharge planning, referral coordination and follow-up education	5	—

9.3 Procedures performed (P)

No.	Procedure	Min.	Sim
1	Comprehensive NCD patient assessment, including medical history, family history and risk factors	20	—

2	Measurement and documentation of blood pressure, pulse, respiratory rate, temperature and oxygen saturation	30	—
3	Measurement of height, weight, BMI and waist circumference	20	—
4	Capillary blood glucose monitoring using a glucometer	20	—
5	ECG recording under supervision	10	—
6	Cardiovascular risk-factor assessment and documentation	10	—
7	Diabetes assessment, including recognition of symptoms of hypoglycemia and hyperglycemia	10	—
8	Diabetic foot examination and risk classification under supervision	10	—
9	Insulin administration using the prescribed route and appropriate technique	10	—
10	Medication dose calculation and safe administration of prescribed oral and injectable medicines	20	—
11	Patient education on correct inhaler and spacer technique	10	—
12	Respiratory assessment, including respiratory rate, breath sounds and oxygen saturation	15	—
13	Oxygen administration and monitoring according to prescription and protocol	5	—
14	Assessment of fluid balance, oedema, urine output and relevant renal parameters	10	—
15	Preparation and monitoring of a patient receiving dialysis, within the permitted scope of practice	3	—
16	Wound assessment, diabetic foot care and dressing under supervision	10	—
17	Nutritional assessment and patient education on healthy dietary practices	10	—
18	Lifestyle counselling regarding physical activity, tobacco cessation, harmful alcohol use and weight management	15	—
19	Patient education on medication adherence and home monitoring of chronic conditions	15	—
20	NCD screening, recording of results and referral of high-risk individuals	20	—
21	Preparation of an individualized nursing care plan for a patient with an NCD	10	—
22	Discharge education and preparation of a follow-up care plan	10	—
23	Health education session for patients, families or community members on NCD prevention	5	—
24	Recognition and simulated initial management of hypoglycemia	3	Sim
25	Recognition and simulated response to acute cardiac deterioration	3	Sim
26	Recognition and simulated response to acute respiratory deterioration	3	Sim
27	Recognition of stroke warning signs and activation of the emergency referral pathway	3	Sim
28	Infection prevention, hand hygiene, appropriate PPE use and safe disposal of sharps	15	—
29	Collection, labeling and safe transport of specimens for diagnostic investigations	10	—
30	Documentation in NCD registers, clinical records and follow-up records	20	—

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 emergency, trauma, cardiac, burns and obstetric 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%)
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	Introduction to Non-Communicable Diseases	10	5
2	Types of Non communicable diseases	20	5
3	Causes of non – communicable diseases	20	5
4	Management modalities of non-communicable diseases	25	5
5	Preventive measures of non-communicable diseases and Nursing management	25	5
	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. Each case carries 20 marks.

Criterion	Marks
Rapid assessment (primary survey, vital signs, history)	5
Prioritization and nursing care plan	4
Technical skill in the intervention (airway, CPR, IV, monitoring, wound, drug and dose)	6
Safety, infection control and communication / handover	3
Discussion (rationale, complications, evidence)	2
Total per case	**20**

10.5 Logbook assessment (15 marks)

Criterion	Marks
Completeness and regularity	5
Accuracy of entries	5
Guide verification	5
Total	**15**

10.6 Formative assessment

Unit-wise MCQ tests, equipment and 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 Emergency and Trauma 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

- A teaching hospital with NCD clinics, primary healthcare services and adequate patient exposure for screening, diagnosis, treatment, nursing management and follow-up of non-communicable diseases.
- Clinical departments and facilities including cardiology, general medicine, diabetes clinic, oncology unit, respiratory medicine, nephrology, dialysis unit, rehabilitation services and palliative care services, with sufficient patient exposure to meet the clinical logbook requirements.
- Access to diagnostic services, including ECG, echocardiography, laboratory investigations, imaging, pulmonary function testing and cancer screening facilities.

- Affiliation or Memorandum of Understanding (MoU) with primary healthcare centres, community health centres, NCD clinics, cancer screening centres, dialysis centres and rehabilitation services for supervised clinical postings.
- Access to community outreach programmes for NCD screening, risk assessment, health education and follow-up.
- Facilities for patient counselling, nutritional assessment, lifestyle modification education and chronic disease self-management training.

11.2 Simulation laboratory

- Adult CPR and basic life support manikin with an automated external defibrillator (AED).
- Blood pressure apparatus, glucometer, weighing scales, stadiometers and measuring tapes for BMI and waist circumference assessment.
- ECG machine, cardiac monitoring equipment and basic cardiac rhythm interpretation resources.
- Insulin administration training equipment, injection practice models and medication calculation resources.
- Diabetic foot examination models and wound-care training materials.
- Oxygen delivery devices, pulse oximeter, inhaler and spacer demonstration kits, nebulizers and respiratory assessment equipment.
- Spirometry demonstration equipment and respiratory assessment trainers.
- IV cannulation and venous blood sampling practice arms.
- Dialysis demonstration equipment or simulation resources for understanding dialysis procedures and safety.
- Patient assessment manikins, clinical documentation forms and electronic health record training resources.
- Simulation scenarios for hypoglycemia, acute cardiac events, stroke warning signs and acute respiratory deterioration

11.3 Classroom and learning resources

- Smart classroom, library and digital resources, and online access to current resuscitation and trauma guidelines
- Learning management system for notes, videos and logbook forms

11.4 Quality assurance

- Collection of fellow feedback on each theory unit, simulation session and clinical posting.
- Feedback from clinical preceptors and programme guides at the midpoint and completion of the fellowship.
- Regular review of clinical logbooks, case presentations, OSCE performance and clinical competency assessments.
- Annual curriculum review by the Fellowship Committee to incorporate updated NCD guidelines, evidence-based practices and national programme requirements.

- Monitoring of clinical posting adequacy, patient exposure, faculty availability and achievement of programme outcomes.
- Periodic audits of screening, documentation, referral, patient education and follow-up activities.
- Grievance redressal through the Fellowship Coordinator, with escalation to the Dean or designated institutional authority.
- Ethical practice, informed consent, confidentiality, patient dignity and data protection during all clinical and community activities.
- Supervised clinical practice within the authorised scope of a registered nurse, institutional policies and applicable professional regulations.
- Continuous quality improvement based on learner feedback, clinical performance and programme evaluation.

12. Suggested References

- World Health Organization (WHO). Resources and guidelines on non-communicable diseases, prevention, screening, risk-factor reduction and integrated care.
- Government of India, Ministry of Health and Family Welfare. Guidelines and operational resources for the National Programme for Prevention and Control of Non-Communicable Diseases (NP-NCD).
- Brunner and Suddarth's Textbook of Medical-Surgical Nursing. Medical and nursing management of chronic diseases.
- Lewis's Medical-Surgical Nursing: Assessment and Management of Clinical Problems. Assessment, treatment and nursing care of patients with chronic conditions.
- Davidson's Principles and Practice of Medicine. Clinical assessment, diagnosis and management of major medical disorders.
- International Diabetes Federation (IDF). Clinical and educational resources on diabetes prevention, diagnosis and management.
- American Diabetes Association (ADA). Standards of Care in Diabetes, updated annually.
- European Society of Cardiology (ESC) and relevant national cardiovascular guidelines. Prevention and management of cardiovascular diseases.
- Global Initiative for Chronic Obstructive Lung Disease (GOLD). Global strategy for the diagnosis, management and prevention of COPD.
- Global Initiative for Asthma (GINA). Global strategy for asthma management and prevention.
- National Comprehensive Cancer Network (NCCN) guidelines and applicable national cancer screening and management guidelines.
- Kidney Disease: Improving Global Outcomes (KDIGO). Clinical practice guidelines for the evaluation and management of chronic kidney disease.
- Relevant nursing textbooks and clinical practice guidelines on rehabilitation, palliative care, patient education and community health nursing.

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
NCD clinic and primary healthcare centre.				
Cardiology and general medical wards.				
Diabetes clinic and diabetic foot care services.				
Oncology unit and cancer screening services.				
Respiratory medicine unit.				
Nephrology and dialysis unit.				
Rehabilitation 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 NON COMMUNICABLE DISEASE 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